Child care in cultural context

Issues for new research

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## Contents

About the authors vi
Abstract vii

**Introduction**

1

**Influence of culture on childrearing processes**

3

**Use and expectations of child care among different cultural groups**

4
  - Demographic trends
  - Cultural beliefs about childrearing

5

**Congruence between home and child care settings**

7
  - Socio-political context
  - Cross cultural practices
  - Similarities in parent–carer characteristics
  - Communication between parent and carers

8

**Influence of congruity on child development outcomes**

10
  - Home, child care and their interrelationship as predictors of child development

10

**AIFS Child Care in Cultural Context study**

12
  - Target groups for the research
  - Specific aims of the research
  - Sampling details
  - Data collection

14

**Approaches to measurement**

16
  - Child care quality
  - Nature of care and satisfaction with care
  - Child outcomes
  - Parents’ views about important child care characteristics
  - Parents’ and carers’ views about the role of child care
  - Childrearing beliefs, values and practices
  - Mediating and moderating variables

17

**Looking forward**

18

References 18
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Abstract

An important question for child care researchers today is how characteristics of the home and the child care setting together affect children’s development. Opinion is mixed on how similarities and differences between adult carers in their beliefs, values and practices for rearing children impact on child development. While the empirical evidence is scarce, there is strong theoretical support for the idea that continuity in children’s experiences across home and child care settings promote optimal development, and that major differences pose developmental challenges, especially for children in very early childhood. However, what little research is available suggests children from families with lower educational and economic resources can benefit from differences between environments if the care setting is more advantageous than that provided by the family.

The effect of home-child care continuities and discontinuities has special significance in Australian society where the extent of cultural diversity suggests real potential for contrasting approaches to the care and socialisation of children. Although there is growing recognition of the importance of adopting a multicultural perspective in child care programs, it is currently unclear how efforts to support parents’ child rearing efforts influence child development outcomes, or what shifts in child care services are required to promote such practices.

This paper describes a new Institute study that aims to help fill a gap in the research literature concerning the influence of home-child care discontinuities on children. The study has been designed to advance our understanding of how home-child care congruity factors relate to child care quality, the child care variables that promote congruence across care settings, and the extent to which congruity on child related variables influence the arrangements parents make for their children’s care.

This paper details the theoretical and empirical literature on home-child care congruity and outlines the approach taken in the current research to unravel the importance of maintaining parental practices for childrearing in child care.
Child care in cultural context

Introduction

There has recently been a resurgence of debate about “the child care question”, with assertions in the media that non-parental care of young children is detrimental to their development (“Home truths absent in child care debate”, *The Australian*, 24 March 2000; “Mother of all battles”, *The Age*, 29 April 2000). Despite these provocative assertions, the overriding conclusion of the huge volume of research on child care is that, given high quality care, the experience of child care is not harmful, and is sometimes beneficial, to children (Clarke-Stewart, Gruber and Fitzgerald 1994; Caughty, DiPietro and Strobino 1994; Scarr and Eisenberg 1993; Andersson 1992).

Research on the simple question, “Is child care good or bad?” is no longer useful. In order to ensure that all children receive good quality care, the research questions that now need to be asked revolve around what comprises good quality care, with particular reference to the specific contexts and requirements of the children involved.

One aspect of child care quality which is emerging as centrally important is the dynamics between the home and care settings, in particular the influence of continuity of experiences across home and child care environments on child development outcomes (Rosenthal 2000; Ochiltree and Edgar 1995; Powell 1989; Peters and Kontos 1987). Drawing on ecological systems theory (Bronfenbrenner 1979), Powell (1989) suggests the term “continuity” covers two dimensions; first, the *substance* of activities and exchanges within a setting, or the extent to which settings in a mesosystem are deemed to be “compatible”, “congruous” or “attuned” (van Ijzendoorn, Tavecchio, Stams, Verhoeven and Reiling 1998) on child-related variables (such as goals, beliefs, practices); and second, *structural* aspects of the child care-home relationship, which refers to “linkages” between the child care service and the family that encourage congruity, such as inter-setting communications and inter-setting knowledge (Rosenthal 2000; Kontos 1989: 24).

Powell’s (1989) terminology will be adopted in this paper. “Congruity” refers to the degree of compatibility between role demands, goals and the nature of adult–child interactions across settings. The term “linkages” will be used when referring to structural aspects of the relationship between the child care service and the family that encourage congruity. The term “continuity” will be used when referring to both.

The issue of home-child care dynamics embraces two perspectives on quality: a developmental perspective, which refers to program factors that promote positive child development; and a parental perspective, which relates to the need for child care that supports parents’ efforts and aspirations. Without knowledge about home-child care dynamics, it is not possible to be sure that child care is adequately meeting children’s needs, and supporting parents’ childrearing efforts, or whether it simply reflects the childrearing ideology of the dominant culture (Goodnow 1989).
There is strong theoretical support for the idea that similarities in the practices and values manifested in home and in child care contexts enhance the developmental potential of each setting (Bronfenbrenner 1979), and some empirical evidence that major differences between systems negatively influence behavioural, social and cognitive outcomes (Harrison and Ungerer 1997; Laosa 1982; Harkness and Super 1992).

Further, it is suggested that structural aspects of continuity (for example, linkages across settings, such as parent–carer communication) contribute to congruence of experiences and expectations across settings and contribute to a child’s ease of transition to new childrearing settings (Feagans and Manlove 1994; Peters and Kontos 1987; Powell 1989).

In contrast, differences between the home environment and a child care environment of higher quality have been found to compensate for home deficits among children who are economically and socially disadvantaged in terms of children’s cognitive development, socialisation and school success (Barnett 1995; Barnett 1992; Farquar 1990). In middle-class environments, this is thought not to apply, because the home environment is adequate for the child’s needs. This lack of “compensatory” effects for middle-class children has been viewed by some (Long and Garduque 1987, for example) as evidence that child care is potentially harmful to these children.

Few studies have attempted to describe the nature and degree of discontinuity between children’s experiences at home and at child care, and there are very few data to support assertions related to the perceived benefits of either continuity or discontinuity. In particular, the effects of congruence between the systems of values, beliefs and behaviours to which children are exposed are under-researched. Further, the existing data on children’s experiences with home-child care discontinuities are too few and inconclusive to offer specific guidance to policy makers, child care providers or parents.

The Australian Institute of Family Studies Child Care in Cultural Context project aims to contribute to understanding about the nature of continuities and discontinuities experienced by children in child care, and to identify the factors that contribute to positive and negative impacts on the child and family of such continuities and discontinuities. It should help to determine what constitute optimal levels and types of continuity between home and child care environments, and provide a basis for recommendations for home-child care relations.

In the Australian context, an obvious and highly relevant way to examine the impacts of home and child care discontinuities is through investigating the experiences of child care of families from different cultural backgrounds. The extent of cultural diversity in contemporary Australian society is vast; according to the Australian Bureau of Statistics (ABS 2000a), and the Multicultural Affairs Unit (1997), in 1996, 41.1 per cent of all Australians were either born overseas or had at least one parent born overseas. While acknowledging the considerable diversity within cultures, it is recognised that culture influences a wide range of values, attitudes, beliefs, and practices regarding children and childrearing. Examination of home-child care relationships among cultural groups differing on these parameters thus gives us a powerful way of investigating quality-of-care issues in relation to continuities and discontinuities.

The principles underpinning Australia’s process for quality improvement in long day care centres, which is directly linked to Government financial support to centres (NCAC 1993), emphasise a multicultural perspective – that is, respecting cultural differences and resolving cultural conflicts related to child care practices through open dialogue, negotiation and transformative education. As discussed later in the paper, federal policies also support children and families from
culturally diverse backgrounds, and the development of programs that support a multicultural perspective, by providing financial assistance for ethnic
children's service workers and support units (for example, the Free Kindergarten
Association Multicultural Resource Centre).

However, it is almost inevitable that provision of child care in Australia is largely
defined and shaped by the dominant Anglo-Australian discourse and norms that
define child care as a profession. Thus, children from non-Anglo cultural
backgrounds who receive non-parental child care may find themselves moving
between home and care settings that are organised by different cultural
traditions. Some non-Anglo parents may choose to use care arrangements where
they can ensure cultural similarity (for example, family day care by a carer of the
same cultural background), or to side-step mainstream child care services and
select alternative informal care arrangements that are more in tune with their
values and attitudes. However, there is little information available on whether
this occurs, nor on how it impacts on children's development.

The new Institute study which is described here will examine the impact of
home-child care dynamics by investigating the child care experiences of
children from three cultural backgrounds. In doing so, it will determine the
extent to which the design of early childhood services is sensitive to the needs of
a multicultural society. The use and expectations of child care among families
from the Horn of Africa (including Somalia, Eritrea, and Ethiopia), and
Vietnamese-Australian and Anglo-Australian cultural groups will be assessed.

Data on the childrearing beliefs, values and behaviours of parents in these three
groups, and of the carers, will be examined in order to describe the transitions
children are required to make between settings. The extent to which linkages
between home and child care are formed through communication and
negotiation about differences will also be investigated, and the impact of
differing levels of congruence and linkage on child developmental outcomes
will be examined.

The study will include some care settings which are relatively mono-cultural
(whether predominantly African-, Vietnamese- or Anglo-Australian) and some
which are more diverse, making it possible to compare approaches to cultural
issues.

Overall, the study should improve our understanding of cultural determinants
of child care experiences and indicate whether prescriptions for quality care
need to give greater attention to continuity between home and day care settings.

Influence of culture on childrearing processes

It is becoming accepted that child development is culturally constructed.
Cultural values and attitudes regulate the childrearing values, developmental
expectations and emotional orientations of caretakers, and their childrearing
scripts for achieving valued developmental outcomes, as well as the physical and
social settings of everyday life (Rosenthal 1999).

Parents’ beliefs and practices about children and their development are defined
by what is considered adaptive in their cultural setting. For example, the early-
childhood developmental goals valued by parents and educators in many
Western societies reflect an underlying “individualistic” cultural script. They are
usually related to the acquisition by an individual of competence and
independence, and they often value competition. In comparison, non-
industrialised societies and “traditional” cultural groups are often characterised
by more “collectivist” or “inter-dependent” cultural scripts. They value
collective goals more highly, such as learning to live in harmony with one
another, competent participation in social events, obedience to authority, and a cooperative and altruistic orientation (Rosenthal 2000; Triandis, Bontempo, Villareal, Asai and Lucca 1988).

Such differences in goals and expectations mediate the daily experiences of children, their interactions with the persons, objects and symbols in their immediate environment (Rosenthal 2000: 7). Cultural values and traditions are mediated by more proximal processes of childrearing, such as specific childrearing practices (Hwang, Lamb and Sigel 1996), which “drive” their development.

Research studies have provided several examples of cultural variation in childrearing behaviour, which indicate potential sources of incongruence in childrearing practices between home and child care settings. For example, the extent to which parents take into account the wishes and feelings of the child and encourage expression of feelings differs according to the extent to which the culture values individuality or ability to function as a group member (Kagan 1984; Lee 1959). Parental discipline styles (for example, use of reasoning, showing disapproval, redirecting behaviours, using time out or physical punishment) vary according to whether or not a culture believes external controls lead to self-discipline (Gonzalez-Mena 1997; Julian, McKenry and McKelvey 1994).

There is also considerable variation in the ways that adults organise children’s learning, ranging from deliberately arranging learning opportunities to relying on child-managed imitation and modelling (Sigel and Kim 1996; Gonzalez-Mena 1997). Further, there is a great deal of variation in basic caregiving practices across cultures, including ways of managing eating and sleeping patterns and toilet training. Interacting with these culturally-based differences are differences in developmental level, temperament and gender. It should also be noted that there is considerable variation among families within a culture, and that any generalisations about caregiving practices within a particular culture need to be made with care.

When families from a minority culture are raising their children within the context of a dominant culture (as is the case for migrants), variations in cultural scripts have been found, according to the extent to which parents want to assimilate with the dominant culture. For example, studies have shown changes in the goals of immigrant parents compared with those of the grandparents in their birthplace (Rosenthal and Roer-Stier in press). Attitudes to acculturation have been found to vary from assimilation (adopting the dominant culture’s norms), through integration (maintaining both “old” and “new” cultural norms), to separation (maintaining the norms of the culture of origin while rejecting the dominant culture’s norms and avoiding interaction with it). Marginalisation (rejecting both the culture of origin and the dominant culture’s norms) can also occur (Berry 1984). Thus, an important mediating variable in the relationship between culture and childrearing, and more specifically child care experiences, is likely to be the acculturation attitudes and goals of the family or cultural group involved.

**Use and expectations of child care among different cultural groups**

Just as there is significant variation in childrearing behaviour across cultures, the form and design of child care services also varies according to socio-cultural perspectives on non-parental care (Lamb, Sternberg, Hwang and Broberg 1992). Societies differ in the extent to which the responsibility for the caring for young children is expected to be shared between the community and parents, and in the prevailing attitudes regarding the role and adequacy of non-parental care in
meeting children’s developmental needs. As Bronfenbrenner (1992: 290) notes, “the course of child care policy and practice is shaped to a substantial degree by the broader context in time and place.” In a multicultural society such as Australia, culturally-based differences in attitudes toward the care of children in their early years and toward forms of community support for parenting are potential sources of differences in expectations about, and utilisation of, child care.

Cultural variation in beliefs about how responsibility for children’s development should be shared between the nuclear family and publicly-funded agencies is reflected in differences in the extent to which child care is seen as a public responsibility or a private, family concern. The level of availability of publicly-funded high quality child care services and related family support policies are important indicators of how societies see the balance of responsibility between parents and the community at large.

Among capitalist countries, the United States and the United Kingdom represent one extreme, holding that decisions about child care should be left to individual families, with limitations in the level of government intervention in terms of quality, regulation and supply. At the other extreme stand the democratic-socialist countries of Scandinavia and the formerly Soviet countries of Eastern Europe, where it is believed that child care issues are the responsibility of society as a whole (Rosenthal 2000; Lamb and Sternberg 1992).

In Australia, the Commonwealth Government plays a significant role in facilitating the provision of affordable and accessible child care by maintaining and enhancing provision of high quality child care through a national child care quality improvement process and by helping low and middle income families with the cost of child care through Child Care Assistance and the Child Care Rebate, as well as funded child care places. However, child care is mainly delivered through private operators and is market-driven. Hence the Australian position is intermediate between the two extremes.

Culturally-based beliefs about the respective roles of parents and of the community in childrearing can affect the goals and the design of child care, and the extent to which it is regarded as a social welfare program, a family support service, or an early educational program. Some societies set clear goals for child care. In Britain, for example, policy-makers’ main goals for child care focus on “school readiness” and children’s cognitive skills, whereas in Japan a major goal is to develop a sense of group identity and conformity to the group’s goals (Lamb and Sternberg 1992). In Chinese child care, the primary goals are the development of citizenship, discipline and perseverance (Tobin, Wu and Davidson 1989).

Demographic trends

Child care is a growing institution in Australia and is increasingly used for children from ethnic minority groups. The 1999 government census of child care showed that 15 per cent of children in community-based long day care, 12 per cent of children in private long day care, and 8 per cent of children in family day care schemes, were from non-Anglo, culturally diverse backgrounds (Department of Family and Community Services 1999). The data suggest that, in relation to their proportions in the general population, the number of children from non-Anglo backgrounds using child care is higher than that for Anglo-Australians.¹

¹ It should be noted, however, that there has been concern for some time that children from non-English-speaking backgrounds were under-represented in Childcare Program funded services (Australian Institute of health and Welfare 2000).
On balance, current Australian government policies encourage migrants to retain their cultural identities, unlike the earlier policies of assimilation where migrants were expected to shed their own language and heritage and adopt Australian ways (Ochiltree 1992: 294). This multicultural policy means that our agencies and institutions must seek to meet the specific child care needs of children from diverse cultural backgrounds, including indigenous people.

**Cultural beliefs about childrearing**

The differences in cultural systems of beliefs, values and behaviours already discussed open up the possibility that parents from different cultural groups will have different goals for their children, will interpret quality of care in terms of how well child care meets these goals, and thus will prefer child care arrangements that are likely to have the desired effects on their child’s development (Rosenthal 2000; Sigel 1992; Moss and Pence 1994). As Farquhar (1990: 80) notes: “What might be quality for one cultural group, or in one country, may not necessarily be so for other cultures or in other countries.”

Attitudes towards child care are likely to vary according to parents’ beliefs about what experiences are most important to children, their views about who should be responsible for raising young children, and their attitudes towards work and family roles. For example, some parents, particularly those with children under the age of three, view child care as an economic necessity; given the opportunity, they would prefer to look after their children themselves.

Parents who view child care as a necessity rather than a preferred choice may be more likely than other parents to use child care that is as similar to parental care as possible (for example, home-based care, with a small number of children, that adopts the same language, food and activities as the home). They may also try to limit the amount of time their child spends in child care, and to exert control over caregiving practices employed during this time (Larner and Phillips 1994).

Conversely, parents who regard child care as an important educational or social opportunity for the child, and see it as providing developmental experiences that can complement or even compensate for experiences provided in the home, may be more likely to value institutionalised child care with planned programs, such as centre-based care.

In addition to differences in attitudes toward the function of child care, families and cultures differ in their attitudes toward women’s participation in the workforce, and the roles of mothers, fathers and extended family (Lamb et al. 1992; McGillycuddy-De Lisi and Subramanian 1994). Values relating to parenting roles could influence child care decisions. For example, parents with traditional views concerning maternal employment, but who nevertheless perceive this to be an economic necessity, may be likely to use home-based arrangements in preference to centres. In contrast, parents in cultures which approve of mothers of young children working outside the home may be likely to use centre-based care.

Overseas studies support the expectation that cultural ideology influences choices among various child care options, and that families of differing ethnic backgrounds occupy differing child care niches (Blair, Legazpi and Sampson, 1995; Fuller, Holloway and Liang 1996; Gravett, Rogers and Thompson 1987). Of course, these differences may be the product of not only differing cultural preferences, but also the lower cost of care by relatives (Uttal 1999).

Australian data collected through the recent national child care survey conducted by the Australian Bureau of Statistics support the notion that parents choosing planned programs focus on perceived social or educational benefits for the child: approximately 20 per cent more parents using long day care centres...
cited benefits to the child as the reason for choosing the type of care used compared with parents who used family day care. Further, approximately 12 per cent more parents with children using family day care cited work requirements as the main reason for choosing the type of care used (ABS 2000b). Many Anglo-Australian parents of middle and high socio-economic status continue to express a strong preference for care by relatives during the early years of life (Glezer and Wolcott 1997; Harrison and Ungerer 2000). This preference appears to be due to the belief that child care may disrupt the development of secure mother-child attachment relationships, despite evidence to the contrary (Rosenthal 2000; NICHD 1997; Clark-Stewart 1989; Ochiltree and Edgar 1995; Harrison and Ungerer 2000).

As noted above, it would be misleading to imply that cultural factors are the only influences on parents’ choice of child care for their children. The distribution of federal subsidies, family income levels, children’s characteristics (Powell and Widdows 1987; Booth and Kelly 1998), knowledge of child care settings (Fulmer 1997), work arrangements (Hertz 1997), satisfaction with care providers, parental education and availability of non-parental caregiving support (Fuller et al. 1996) have all been found to be influential in these choices.

**Congruence between home and child care settings**

It is perhaps inevitable that parents and carers will often have divergent perspectives on care, with parents being concerned primarily with their own child’s needs, and carers taking a broader perspective (Katz 1980). The balance of existing research indicates that there are often differences between parents and carers about child care issues (Long and Garduque 1987; Kontos 1984, 1987; Innes and Innes 1984). The differences appear to be greatest for children whose parents are from ethnic minority and low-income populations (Laosa 1982). Disagreements between carers and parents over practices regarding instruction, physical discipline, encouragement of play that breaks gender stereotypes, and messy play are well documented. For example, Gonzalez-Mena (1993) has explored the potential for cultural conflict between parents and carers over such issues as changing nappies, feeding, comforting, toilet training and educating babies. There are also many factors relating to child care policy and practice that appear to be associated with the level of congruence existing across home and child care settings. These are discussed below.

**Socio-political context**

Despite awareness of and respect for cultural diversity, child care policies and practices in Australia are likely to be influenced predominantly by the Anglo-Australian culture. Carers’ beliefs, expectations and practices regarding child development, the standards and regulations for child care providers, and the basic goals of child care services are all inevitably influenced by the dominant cultural context (Rosenthal 2000).

The key objective of the Commonwealth's child care program is to “encourage economic and social participation through the provision of child care choices for families and children, at work, at home, and in the general community” (Department of Family and Community Services 1999). However, it is noted in the Interim Report of the Child Care Task Force (EPAC 1996) that the goals of parents, employers and providers outside the context of specific government programs have not been clearly articulated in the past, and are likely to reflect
substantial differences in emphasis and philosophy. A more common objective for the provision of child care, as stated in the 1999 Report of Government Services (SCRCSSP 1999:878), is “to provide support for parents in caring for their children by ensuring that the care and education needs of children are met in a safe and nurturing environment”.

The importance placed in centre-based care on the enhancement of children’s personal, social and motor development is reflected in the principles and standards set out in the National Childcare Accreditation Council’s mandatory standards for accreditation (NCAC 1993). The goals for the development of children are expected to be generally agreed upon by the centre and parents, but are also required to take into account “knowledge of early childhood development, the different theories of how children learn and also of the social and cultural values of the community” (NCAC 1993:39).

Although the principles underlying the Quality Improvement and Accreditation System aim to encourage a multicultural perspective as a determining factor for good quality care, the strongest influence in “the community” is likely to be the dominant Anglo-Australian one. Thus, cultural scripts emphasising independence and individualism (Rogoff and Chavajay 1995) are likely to influence the goals set for children in child care in Australia. To return to an earlier example, non-Western cultures do not place as much value on individual achievement as do Western cultures. Rather, collective goals and outcomes are prioritised, and thus indicators of good quality in these cultural settings focus on competencies such as participation in social discussion and cooperative activities (Rosenthal 1999).

**Cross cultural practices**

Despite the fact that the Australian child care system is based predominantly on Western values and practices, the issue of culturally sensitive care has not been ignored. A significant component of assessments of quality in Australia is the extent to which care is sensitively adjusted so as to be appropriate to each child’s developmental and individual needs. Indeed, the Commonwealth Child Care Advisory Council’s (CCCAC) review of the Quality Improvement and Accreditation system for long day care centres emphasises the need for centre staff to modify their approach to suit each child’s culture and to seek relevant information from parents to guide interactions with children and thus lessen parent–carer differences in childrearing (CCCAC 1999). Recognition of culturally-specific childrearing techniques, attitudes, routines, play, organisation of learning, valued developmental goals, and perceptions of developmentally appropriate behaviour are also emphasised. The likelihood of finding congruence between home and institutionalised child care settings will thus be mediated by the extent to which these quality assurance standards are adopted in practice.

Children from culturally diverse backgrounds are supported in using Commonwealth-funded child care services through Supplementary Services (SUPS) workers (or Children’s Services Resource and Development Officers (CSRDO’s) as they are known in Victoria). The role of SUPS workers is to support and train child care staff in the provision of suitable care and programs for children with specific needs, which includes children from diverse cultural and linguistic backgrounds. There are also some ethnospecific child care services available, such as Multifunctional Aboriginal children’s services (MACS), which aim to meet the specific social and developmental needs of Aboriginal and Torres Strait Islander children.

It should be noted that cross-cultural practice, as it is promoted here, also aims to sensitisre children to similarities and differences between cultures so as to
encourage relations among children from diverse ethnic groups. It is hoped that this, in turn, will reduce ethnically based prejudices, support tolerance of and comfort with diversity, and promote positive identity formation for all children. Concomitantly, the National Child Care Accreditation Council’s principles and standards of care include exposure of children to a range of experiences associated with particular cultures as a further aspect of cultural appropriateness. However, this aspect of child care experience is less directly relevant to the current study.

**Similarities in parent–carer characteristics**

Incongruence between home and care settings in childrearing goals and practices is also likely to be exacerbated in circumstances where few child care staff from non–English–speaking cultural backgrounds are located in services attended by children from these backgrounds. It may also be the case that it is easier to find, or develop, congruence in some types of child care settings than others. For example, parents’ attitudes may be more likely to be similar to those of family day care providers than those of centre based staff, because family day care is home–based and families choose a particular carer. There are currently no data available relevant to this hypothesis (Kontos 1994), which will be addressed in the proposed study.³

**Communication between parent and carers**

It has also been posited that congruity between multiple social contexts for child development may be linked to the level of communication that takes place across settings and the amount of information and/or experience that exists in one setting about the other (van Ijzendoorn et al. 1998). In the context of home and child care relations, communication between carers and parents who are involved in the care of a specific child, and the quality of the parent–carer relationship more broadly are considered salient factors. Although there are few data to support this, previous studies have shown more communication between parents and carers has been associated with better quality of care (Endsley, Minish and Zhou 1993; Ghazvini and Readdick 1994).⁴

Historically, family day care providers have been considered to have better relationships and stronger interpersonal ties with parents than have providers in centres. For example, Hughes (1985), who was interested in the informal help–giving of day care providers, compared the extent and nature of parent–carer interactions between family day care and centre based care. Carers in family day care reported spending significantly more time with parents than carers in centres. It may well be that the informal nature and the small scale of the care may be conducive to more extensive communication between parents and carers.

However, there is evidence that parent–carer relations are also less than optimal in family day care. For example, Nelson (1989) observed that ideological differences between mothers and carers regarding the role of women in the workforce and the importance of motherhood retarded mutual understanding. Further, Moss (1987) found disagreements between family day care providers and parents on childrearing practices. Studies conducted outside Australia

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³ An exception here would be ethno-specific child care centres, which operate in some areas.

⁴ It should be noted, however, that van Ijzendoorn and his colleagues (1998) showed congruence does not necessarily emerge with better communication between parents and carers.
suggest that, although parents’ and carers’ intentions to communicate appear to be good, these intentions are often not acted upon (Leavitt 1987), and communication may be a problem approximately one-third of the time (Bryant, Harris and Newton 1980).

**Influence of congruity on child development outcomes**

As noted at the outset, recent child care research suggests that “simple global generalisations about the effects of out-of-home care on development cannot be justified, because family and day care factors jointly influence children’s development” (Melhuish 1993). Researchers have come to recognise the diversity and complexity of child care arrangements and their effects on children. The heterogeneous nature of family circumstances and the diversity of child care arrangements mean that child care is unlikely to have clear, unambiguous main effects, either positive or negative. As Lamb and Sternberg (1992:14) note: “Researchers must focus on the nature of the care, the quality of the care, and the way factors together affect children with different characteristics from different backgrounds and with different educational and individual needs.”

**Home, child care and their interrelationship as predictors of child development**

A considerable amount of research has been undertaken on the influence of home and child care on children’s development. One approach to research has been to examine possible *additive* effects of home and child care, comparing the relative contribution of the two environments to valued developmental outcomes. Findings from this body of research suggest child and family factors make the greatest contribution to the total variance in predicting child outcomes, although child care predictors consistently explain a significantly small amount of variance (NICHD 1998a; 1998b; Ochiltree and Edgar 1995).

Other research on the relationship between home and child care has focussed on how familial and non-familial child care settings *interact* with one another. Interactive effects suggest that child care environments have variable influences on children depending on family background or characteristics of the home. The search for interactions between family and child care variables as predictors of children’s development has generally adopted one of two paradigms.

The first paradigm has focused on the possible interactive effects of child care quality and family socio-economic status on the attainment of specific developmental outcomes. As Rosenthal (2000:501) notes: “It has been guided partly by a compensatory model, with the expectation that good quality child care will promote social, emotional, language and cognitive development in children from lower socio-economic backgrounds or single families lacking social support, and will not harm the development of middle-class children from intact families.” Findings from this research generally suggest that child care may positively influence children’s development if the child care environment is of higher quality than that provided by the family. For example, studies based on the National Longitudinal Survey of Youth support the hypothesis that child care is positively influential on cognitive development, but only for low-income or at-risk children (Coughy, DiPietro and Strobino 1994).

The second paradigm under which home-care interaction effects have been examined concerns the extent to which the care provided in child care is consistent with the child’s other experiences. Spending time in a child care service as well as in a family home presents differences in environments and
expectations for all children. This experience of two environments has been termed “dual socialisation” and is the subject of a growing literature. The question asked in this body of research is whether differences between adult carers in their beliefs, values and practices for raising children pose difficulties for children, and represent developmental challenges.

An assumption based on ecological systems theory (Bronfenbrenner 1979) is that the child’s transitions back and forth between these two socialising worlds will be more successful, and the developmental potential of each setting will be enhanced, when there is “continuity” or common role demands and supportive linkages between the two settings (Kontos 1994; Bronfenbrenner 1979; Lightfoot 1978). For example, if a family wants child care to encourage individuality, but child care sees its role as socialising children into acceptable group behaviour, problems may arise (Ochiltree 1995; Scarr 1991). As we have argued, such differences are particularly likely for children who experience substantial cultural differences between settings. It has been further argued that congruity and predictability of the characteristics of care across settings are basic requirements for children’s emotional security (Harrison and Ungerer 1997).

There do appear to be situations of mismatch between home and child care that are clearly problematic for children. If parents and carers are unaware of, or do not understand, the differences between them in their developmental goals for children, in their understanding of how children develop, and in their childrearing and educational practices, the wellbeing of children may be at risk. In such cases children have to negotiate implicit conflicting messages, a difficult task at this young age. In these situations, some children may become confused about how they are supposed to act, which can lead to unhappiness and potentially to other detrimental developmental outcomes (van Ijzendoorn 1998). Gonzalez-Mena (1997: 10) calls the child care environment in such instances “culturally assaultative”.

Some studies have provided evidence that discontinuities between family and early childhood settings may be linked with poor academic performance (Laosa 1982; Harkness and Super 1992), feelings of disorientation and insecurity (Howes 1991; Shimona and Ferguson 1992), and poor social skills (Harrison and Ungerer 1997). For example, the negative effect of discontinuity was found in a recent study conducted by van Ijzendoorn and his colleagues from the Centre for Child and Family Studies in the Netherlands (van Ijzendoorn et al. 1998). Data collected from a survey of 568 children using four different types of child care showed that differences in authoritarian control and support were associated with a lower degree of child wellbeing. The researchers concluded that “it seems in the child’s best interests if parents and non-parental carers are attuned with each other’s childrearing styles.”

Concern about discontinuity is a central rationale for strategies aimed at strengthening relations between families and early childhood programs. The Commonwealth Child Care Advisory Council’s review of the Quality Improvement and Accreditation System, for example, emphasises the need for partnerships with families is based on the idea that “children develop security and trust when there is continuity in the care they receive between home and in the centre” (CCCAC 1999:22).

In this context, the potentially moderating effects of linkages or connections between home and child care are an important focus for theory and research. For example, Lippitt (1968) proposed that the developmental potential of multiple socialisation agencies depend on the amount of communication and coordination that takes place between agents and agencies. Bronfenbrenner’s (1979) theoretical framework also posits that supportive linkages between settings, two-way communication between socialisation agents, and the
frequency with which members of one setting are present in the other setting would enhance the developmental potential of each setting. Several other commentators have also suggested that communication between adults across home and day care settings can serve to support the child’s development in both settings (Feagans and Manlove 1994; Powell and Kontos 1994; Powell 1989). However, the research data to support these theoretical propositions are sparse, and the efficacy of most practices aimed at improving linkages between home and child care are unknown.

Alongside the common assumption of the benefits of continuity, it was noted above that the opposite argument has also been put. When the family environment is stressed or poorly resourced, it has been argued that “appropriate” levels and types of discontinuities between home and child care settings can enhance a child’s cognitive competence and adaptive skills (Bronfenbrenner 1979; Lightfoot 1978). Long and Garduque (1987) suggest that when parents and carers agree on important values, discontinuity in role expectations and interactions may be beneficial. Such discontinuity may help children to learn and develop skills to adjust to the demands of the wider social world (van Ijzendoorn et al. 1998). Of course, specifying what comprises an “appropriate” level or type of discontinuity may not be straightforward.

It has also been suggested that children have no difficulty in adapting to differences between home and child care when their experiences within each of these environments are consistent and predictable, and when differences are not wrought with conflict. Although very few data exist to confirm this, Rosenthal (2000) notes that some of her earlier research suggested that “children move between the two environments like some bilingual children do when they use different languages in different social contexts”, often to the point of using the child care setting to complement aspects of their home experiences (Rosenthal 1994). Gonzalez-Mena (1997:10) similarly asserts that children can compartmentalise their differential treatment and become bicultural. They recognise they are being treated in a certain way by a person in one setting and in a different way by another person in an alternative setting. Further, Nelson and Garduque (1987) reported that inconsistency between children’s home and day care experiences was brought about by children’s awareness of differences between settings. Children were contributing to their own experience in day care by behaving and responding to adults in different ways. However, as noted, there are currently few empirical data on children’s actual developmental outcomes to support or refute these assertions.

Overall, the little empirical evidence that is available mostly supports the theoretical assumption that contradictory environments, created by the pursuit of different goals or adoption of different childrearing practices, carry detrimental effects (Serpell 1993), while congruence between home and child care settings is beneficial to children’s development (Powell 1989; Kontos and Wells 1986).

**AIFS Child Care in Cultural Context study**

Attention has been called to the importance of studying cultural variations and their influence on the lives of children in child care (Moss and Pence 1994). However, there is a dearth of research into the effects of child care among culturally diverse Australian families. More specifically, little is known about differences in development according to whether the child care environment is consonant or dissonant with the cultural orientation of the home. Further, although child care programs may attempt to ensure “multicultural sensitivity”, there is little information available on how successfully they achieve this nor on what aspects of such “sensitivity” impact on the child’s adaptation to child care.
The issues presented thus far raise a number of important questions for research, such as: To what extent are there congruence and linkages between home and child care across different cultural groups in Australia? Do parents try to ensure arrangements for their children are in tune with their childrearing ideology and if so, how? Does lack of continuity (including both structural and process measures) between home and child care affect children’s adjustment?

These issues will be taken up in the Child Care in Cultural Context study which forms part of the Australian Institute of Family Studies’ Children and Parenting research program. The study involves children and parents from three different groups: those with Anglo-Australian, Vietnamese and African backgrounds. Children in a range of child care settings are being recruited.

The study should help us understand whether children do better in child care that is culturally similar to their own background, and how children cope when there are substantial differences between settings. The research should also clarify how cultural differences are communicated and negotiated, and the impact of these processes on children’s adjustment. To inform this aspect of the research, assessments of quality of care will be expanded from usual protocols, and will include detailed assessments of the extent to which congruence is promoted through communication and other linkages, how cultural conflicts are negotiated, and the degree of cultural sensitivity reflected in the care regime.

Children’s developmental outcomes will be examined in the context of the contributions of both home and non-parental care environments, and the match or mismatch between them. Findings should indicate what specific child care arrangements are able to sensitively respond to individual differences of children, and should provide a basis for advice about optimal ways for carers to interact with families and children from different cultural backgrounds to their own. Findings may also provide some guidance to parents about the types of child care that are most likely to meet the particular needs of their children.

One aspect of congruence relates to views about the expected role and functions of child care in children’s care and upbringing. Parents and child care providers will be asked for their views around this issue, ranging from broad questions such as whether society should share responsibility for children’s upbringing with families, and the role of women, to more specific beliefs about the role of child care in contributing to specific aspects of children’s development. This will establish whether there are cultural variations in expectations about the role of child care, whether parental expectations for children’s care and development are matched by those of child care workers, and whether the perceived role of child care differs according to the type of care involved – for example, child care centre (private versus community-based), family day care, and informal care.

Parental perceptions of what comprises good quality child care, and their ratings of the quality of their child’s current care arrangement, will also be examined to test whether the Anglo-Australian concepts of “quality care” match those of other cultures. The study will also explore parents’ level of satisfaction with the care being used. Answers to these questions may have implications for the development of programmatic structures, standards and criteria for good quality that are consistent with developmental goals valued by different cultural groups.

Objective assessments will also be made of child care arrangements in terms of the attributes that have been associated in the largely Western literature with positive child outcomes. Measures of quality will be broadened to include two aspects of continuity highlighted in the literature; congruence in childrearing goals, experiences and interactions across the two settings; and linkages and supportive structures such as open communication and respect for similarities and differences in childrearing practices. This will allow investigation of the
extent to which different types of care arrangements meet criteria for good quality, and show whether families from different cultural backgrounds use child care of similar quality. These data will also reveal the extent to which parents’ conceptions of quality match expert assessments of quality child care, and whether quality as assessed in these terms has equal impact upon children from different cultural groups.

Adopting a more sociological perspective, the study also seeks to understand the child, family and cultural determinants of child care experience in order to discern whether children from different social and cultural backgrounds experience child care in different ways – for example, in terms of age when first using child care, hours, and manner of introducing the child to care.

Finally, the research aims to counter the over-emphasis in existing research on children using centre-based care, by including children using a range of care situations, including family day care and informal care provided by relatives, neighbours and nannies.5

**Target groups for the research**

By comparing Anglo-Australian families with those from Vietnamese and Horn of Africa cultures, we will be able to investigate the influence of a range of important variables on different areas of children’s functioning. Horn of Africa and Vietnamese groups have been targeted for involvement in the research because their cultures are very different from each other as well as from Anglo-Australian culture, and they are thus likely to differ in terms of parenting beliefs, goals and practices and acculturation goals. Further, all three cultural groups have high rates of female employment, and thus rely upon provision of child care. As observation will be used as a means of data collection, which is described further on in the paper, subject recruitment will be limited to the Melbourne Metropolitan area.

Of the three African groups, Eritrean and Ethiopian people were the first group to migrate to Melbourne in large numbers, followed by Somalian people. However, people from all three of these Horn of Africa countries have tended to settle in specific inner and middle-northern suburbs of Melbourne, such as Maribyrnong, Moonee Valley and Moreland. Although Somalian, Eritrean and Ethiopian groups are quite distinct culturally, our consultations suggest they are relatively similar in their attitudes to childrearing. In regard to acculturation goals, there appears to be a desire among these African groups to preserve traditional values and customs, and relatively limited integration into mainstream Australian society. These preferences are probably partly due to the recent refugee experience of many of these migrants, and their recency of arrival in Australia (mostly during in 1990s). Arabic is the primary language of origin of these groups, and Muslim is the predominant religion.

By contrast, most Vietnamese families have had a longer history in Australia, with large numbers migrating to Australia in the early 1970s. Vietnamese families tend to reside in Melbourne’s northern suburbs, as well as Richmond (inner east), Brimbank (outer north-west), and greater Dandenong (outer south-east) areas. Despite a strong desire to maintain Vietnamese cultural values, Vietnamese

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5 Findings from the Australian Institute of Family Studies *Early Child Care Study* (Ochiltree and Edgar 1995) suggest that in Australia informal care is used more often than formal care, and therefore needs to receive greater recognition in the research literature. The recently published data from the NICHD study also suggest that to better understand the effects of early child care, researchers need to examine the wide range of care situations available to children (for example, NICHD 1998a).
families appear ready to adopt certain aspects of Australian culture and to be comfortable interacting with mainstream Australian society. For example, data collected as part of the Australian Institute of Family Studies Parenting-21 project showed Vietnamese-Australian parents generally felt comfortable adapting their childrearing practices to reflect those of the mainstream Australian culture (Kolar and Soriano 2000). In particular, mainstream services and activities are accepted if they are perceived to offer opportunities to attain success in education or employment. Christianity and Buddhism are the dominant religions, and Vietnamese and Chinese are the most common traditional languages.

**Specific aims of the research**

Within each of the three cultural groups, the study aims to:

- describe the familial and child factors that determine when families begin using child care, how much care they use and what kinds of care arrangements they use;\(^6\)
- assess parents’ and carers’ beliefs, values and practices regarding childrearing, and describe the level of congruence between them;
- assess the impact of the congruence between social aspects of home and child care on child outcomes;
- assess the impact of linkages between home and child care (for example, communication, negotiation) on child outcomes;
- describe parental and carer perceptions of the role of child care for different aspects of childrearing;
- describe parental perceptions of what comprises good quality child care and how parents rate the quality of their child’s current care;
- compare parental and objective assessments of good quality child care across the various types of care;
- compare child outcomes in care settings characterised by different ratings (objective and parental) of child care quality;
- determine parents’ level of satisfaction with the care being used.

Further, the three cultural groups will be compared on each of the measures assessed in order to describe cultural variations.

**Sampling details**

Approximately 300 children (100 from each cultural group) who are aged between 0–3 years and attending centre based long day care (community-based or private), family day care, or using informal care on a routine basis will be recruited for the study.\(^7\) Children aged three and under have been targeted because very early childhood care is the fastest growing area of the child care market and parental concerns about matching of home and child care on basic caregiving practices tend to be strongest for very young children. Further, van Ijzendoorn et al. (1998: 779) maintain that “continuity between microsystems is especially important for the wellbeing of young children because these children still lack the meta-cognitive abilities to put discontinuities into perspective.”

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\(^6\) Subject to limitations imposed by the method of subject enrolment, it is expected this aim will be expanded to ascertain the relative proportion of families using informal care arrangements, such as relatives and friends across the three cultural groups.

\(^7\) For the purposes of this study, routine use of child care is defined as 15 hours or more in child care per week on a regular basis.
A number of child care centres and family day care schemes will be involved. For the groups with African and Vietnamese backgrounds, parents using non-parental care for their children will be identified and recruited by respected facilitators from the cultural group, following processes of informed consent. Once parents and children have been recruited, their carers (whether informal carers, child care centres, or family day care providers) will be requested to take part in the research. For Anglo-Australian parents, it is anticipated that child care centres, family day care schemes and other service agencies would be directly involved in recruiting parents into the study.

Data collection

Data for the research will be collected via parent and carer questionnaire, and through observation. Data to be collected comprise: (a) assessments of the quality of the care settings, through observation and questionnaire; (b) assessment of each child's developmental status through parent and carer report and observation; (c) assessments of parents' and carers' beliefs, values and practices regarding childrearing, through questionnaire; (d) parents' expectations of child care, level of satisfaction with their child's care arrangement and perceptions of child care quality, by questionnaire; and (e) details of children's' care histories, family background characteristics and other potential moderating variables, such as family functioning and parents' attitudes to acculturation, through questionnaire.

Considering the likely variability in parents' literacy skills, parents will be invited to complete the questionnaires (translated into their first language when appropriate) by themselves or by interview (delivered in the appropriate language). Established measures are being used where possible, and new instruments developed where necessary. To guide questionnaire construction on cultural issues, review of the literature on the cultural groups involved, consultation with local groups, and data from the Institute's Parenting 21 project have been used.

Approaches to measurement

The main categories of variables included in the parent and carer questionnaires, and accompanying measures, are outlined below.

Child care quality

Both structural and process aspects of quality will be measured. The Family Day Care Rating Scale (Harms and Clifford 1989) will be used to measure quality in Family Day Care and informal arrangements. This scale is a 32-item adaptation of the Early Childhood Environment Rating Scale (Harms and Clifford 1980) organised under six areas: space and furnishings for care and learning, basic care, language and reasoning, learning activities, social development, and adult needs.

The Infant/Toddler Environment Rating Scale (Harms, Cryer and Clifford 1990) will be used to measure child care quality in centres. The ITERS is another adaptation of the Early Childhood Environment Rating Scale (Harms and Clifford 1980) developed especially for infant/toddler group care. The 35 items of this scale are organised under seven categories: furnishings and display for children, personal care routines, listening and talking, learning activities, social development, and adult needs.

These dimensions of quality will be supplemented by assessments of inter-setting knowledge and communication as well as negotiation of childrearing strategies and the degree of cultural sensitivity reflected in the care regime.
Structural aspects of quality will also be assessed via carer questionnaires including staff ratios, staff qualifications and years of caregiving experience.

**Nature of care and satisfaction with care**

Parents will provide information concerning children’s child care history (for example, the age of first entry into child care and the number of changes of child care arrangements) and details of children’s current child care arrangements (for example, number of hours per week of non-parental care, and types of child care) as well as their level of satisfaction with their child's current care arrangement.

**Child outcomes**

Both parents and carers will provide ratings of child outcomes in domains including language, cognitive, emotional, behavioural, health and social behaviour. Items taken from the Adapted Rand Health Survey (Eisen et al. 1980) will be used to assess health status. The Social Skills Rating System for Preschoolers (Gresham and Elliott 1990) will be used as a basis for measuring social functioning. The Behaviour Checklist (Richman and Graham 1982) and the Behar Pre-School Behaviour Questionnaire (Behar and Stringfield 1974) will be used to measure children’s behavioural functioning. The Bayley Scales of Infant Development (Bayley 1993), which evaluate a child’s developmental status in the first 2.5 years of life, will be used as a basis for the development of questionnaire items to measure children's cognitive, language and motor coordination and skills. In addition to questionnaire measures, social responsiveness, social behaviour problems, motor skills, language skills and general affect will be assessed through observation.

**Parents’ views about important child care characteristics**

Parents’ ratings of the importance of various child care characteristics will be measured using Likert-type scales. These characteristics include aspects of the care environment such as the general physical environment, the nature and amount of carer–child and child–child interaction, program structure, personal care routines, health practices and staff ratios. Additional characteristics specifically relevant to cross-cultural practice will also be included, such as exchange of information between parents and staff, awareness of and respect for similarities and differences in childrearing practices and flexibility within the child care program to suit each child’s culture. Parents will also be asked whether they believe their child’s current child care arrangement possesses the characteristics they regard as important.

**Parents’ and carers’ views about the role of child care**

Parents and carers will be asked for opinions about the extent to which society should share responsibility for children’s upbringing. Their expectations about the role played by child care in different aspects of childrearing will also be measured, using Likert-type scales. Aspects of childrearing to be covered include: providing guidance and discipline, promoting self-esteem and independence, advancing intellectual competence, advancing motor skills, promoting identity formation, teaching culture, monitoring health and development, advancing language skills, socialising children into acceptable group behaviour, and advancing social skills.

**Childrearing beliefs, values and practices**

Parents and carers will provide information regarding their childrearing beliefs and practices by questionnaire. Measures focus on socialisation goals (such as independence versus conformity, and expression of feeling versus emotion control), beliefs concerning the effectiveness of different techniques for
managing children’s behaviour, and methods of childrearing. Childrearing practices to be assessed include management of daily care routines such as sleeping, feeding and toileting, as well as use of inductive reasoning, expression of warmth and use of punitive discipline.

Mediating and moderating variables

A number of other constructs are theoretically related to the child outcomes of interest here, playing direct, mediating or moderating roles. These will also be measured and included in the analysis. Family characteristics believed to impact directly on child care dynamics and quality include family income, family structure, and parents’ occupational and educational level. Attitudes to assimilation, which are related to parents’ childrearing beliefs, values and practices, will be assessed via items adapted from the Berry’s Acculturation Scale (Berry 1984). Child characteristics such as age and gender and temperament, measured by the Short Temperament Scales for Infants, Toddlers and Children (Prior, Sanson and Oberklaid 1989), will also be included as direct influences on child outcomes.

Looking forward

This paper has reviewed some of the issues surrounding non-familial child care from a cultural perspective. It suggests that the ability to tailor the structure of daily activities, basic care routines and interactions to the cultural context of a particular child may have important consequences for that child’s experience of child care, and may help determine whether that care has a positive or negative influence on the child.

The issues presented in the paper draw attention to current policies and practices that support congruence in children’s experiences across home and child care. As findings from the Institute’s study begin to emerge, we should be able to assess how well current efforts serve the interests of children and their families.

Readers are invited to express their views or offer advice about issues connected with the Child Care in Cultural Context project by contacting Sarah Wise or Ann Sanson at the Australian Institute of Family Studies. The email addresses are sarahw@aifs.org.au and anns@aifs.org.au.

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