Research Bites

Children's SOCIETY
Caring for the Future

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Do Close Relationships with Caregivers Help Build Children's Resilience to Adversity?

A feature by Research Officer Toh Sze Min

Experiencing adversities early in life is often linked to poorer mental health and social emotional skills later on. But we also know that some children bounce back more easily from these difficulties than others.

In our study involving children from low-income families, we found that **nearly half of them** had experienced **4 or more Adverse Childhood Experiences (ACEs)**. It is important to understand what helps to build their resilience.

Past research has identified close caregiver-child relationships as one of the most important factors for promoting children's social emotional development. We thus sought to find out whether **improving caregiver-child relationships** would mitigate the negative impact of ACEs on children's social emotional skills.

Do Close Relationships with Caregivers Help Build Children's Resilience to Adversity?

Who took part?

From 2017 to 2019, Singapore Children's Society surveyed a total of 280 caregiver-child pairs and analysed responses from 270 caregiver-child pairs. Caregivers included biological parents, step-parents, grandparents, and aunts. Most caregivers were biological mothers. Children were between 10 and 15 years old.
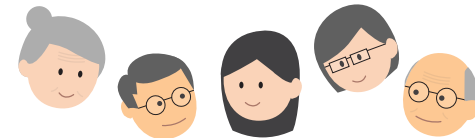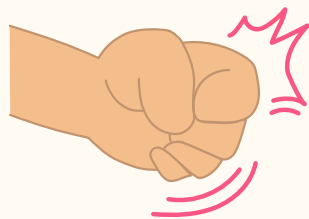
What questions were asked?

Adverse Childhood Experiences (ACEs)

Children were asked if they had been through any of the 18 different types[a] of ACEs.
At least 1 in 5 children experienced one or more of the following types of ACEs:

Domestic Violence   Physical Abuse   Bullying   Parental Separation
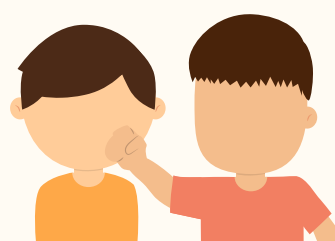
Emotional Abuse   Witnessing Community Violence   Family Member in Prison

Caregiver-child Closeness

Caregivers and children were asked the following respectively:
- How close do you feel to the child?
- How close do you feel to the caregiver?

They answered based on the following scale[b]:

1 — Not very close   2 — A bit close   3 — Quite close   4 — Extremely close

Social Emotional Skills

Additionally, children rated their social emotional skills[c] on areas such as:
- Self-awareness (e.g. "I understand my moods and feelings")
- Responsible decision-making (e.g. "When making decisions, I take into account the consequences of my actions")

[a] ACEs were assessed using a modified version of the Center for Youth Wellness Adverse Childhood Experiences Questionnaire
[b] Adapted from the National Longitudinal Survey of Youth 1979 by the U.S. Bureau of Labor Statistics
[c] Social Emotional Competence Questionnaire (Zhou & Ee, 2012)

What did we find?

More Adverse Childhood Experiences → Poorer Child Social Emotional Skills

Child-rated Lower Caregiver-child Closeness
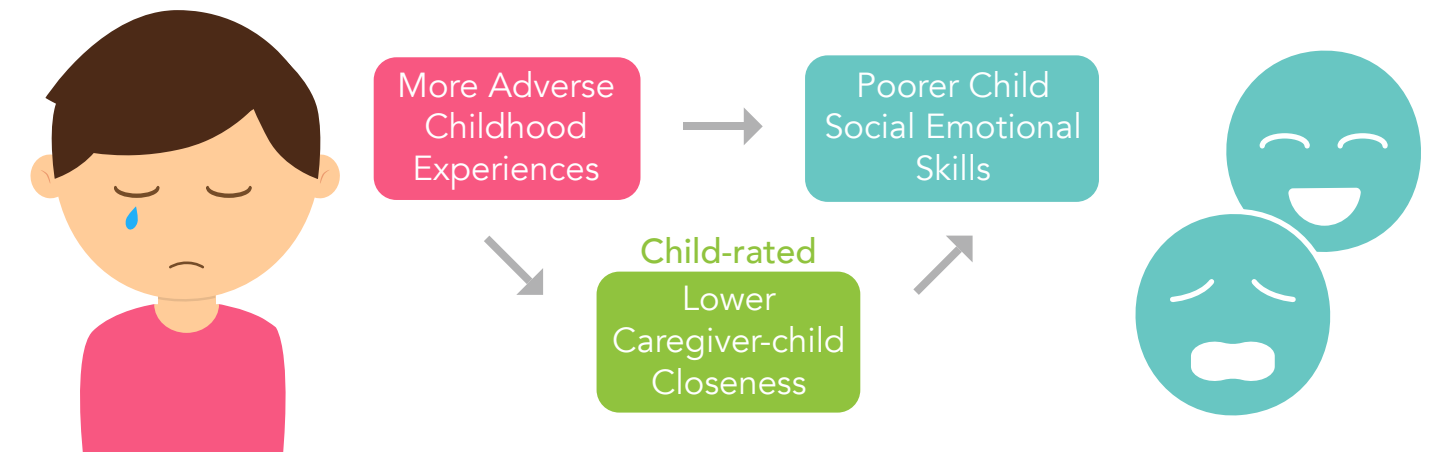
- Consistent with previous research, we found that children who experienced more ACEs had poorer social emotional skills. One reason could be that children's experience of ACES could affect how they view their relationship with their caregiver. Children who experienced more ACEs tend to see their relationship with their caregiver as being less close. In turn, these children also had poorer social emotional skills.

- However, caregivers' perception of their relationship with their child was not linked to the number of ACEs experienced by the child. This perception also makes no difference to the child's social emotional skills.

What do these findings mean?

- Children's perception of the relationship with their caregivers matters more than their caregivers' perception.

- Close relationships with caregivers play a role in building resilience. If there is an improvement in the child's perception of their closeness with the caregiver, the negative impact of ACEs on the child's social emotional skills can be mitigated.

Practitioners can consider the child's viewpoint of the caregiver-child relationship by:

- Asking the child about his or her feelings of closeness toward the caregiver
- Reassuring the child that there are no right or wrong answers and that their views are confidential

Caregivers can strengthen the bond between their child and themselves by:

- Participating in activities or playing together with the child
- Acknowledging and empathising with the child in both happy and difficult situations
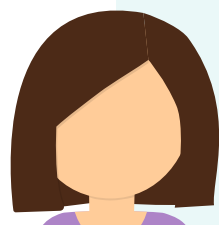
How do Parents Decide on their Child's Caregiving Arrangements?

A feature by Head of Research, Charlene Fu, and former Senior Research Officer, Chan Qing Rong
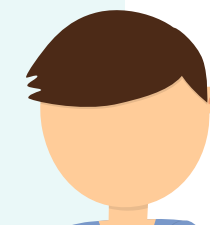
Who took part?

From 2007 to 2014, we conducted a study with KK Women's and Children's Hospital to better understand changes in caregiving arrangements over children's early years, and how these changes affect child outcomes. Other findings from this study were previously featured in Research Bites Issues 1, 2, and 7, as well as the study newsletter (http://tinyurl.com/infant-newsletter).

We visited mothers when their child was 4 months, 18 months, and 3 years old. We asked mothers:
1. Who were their child's primary caregivers?
2. What were the reasons behind their caregiving decisions?

Our Findings

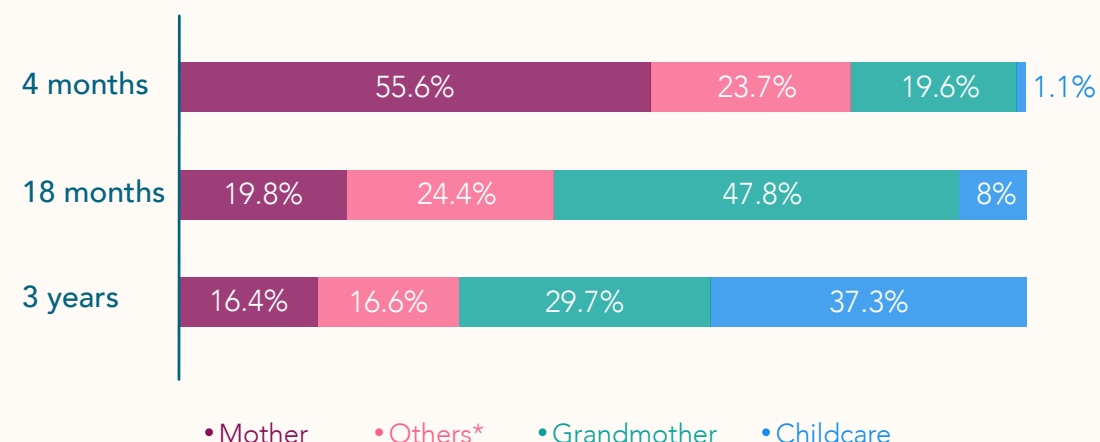### From ages 0-3, changes in child caregiving arrangements vary widely

- Less than 40% of our participants had the same caregiver
- The majority of children in the study experienced 2 to 3 changes in their main caregiver

Family support differs across caregivers

- Some mothers who were the sole caregivers felt tired and frustrated especially when their child was being difficult
- These mothers had relatively less support from their other family members, as no one else was available
- On the other hand, other main caregivers (e.g. grandparents) often had the support of other family members.

Children's primary caregivers changed over time

The figure below presents the percentage of children within the sample who had the following primary caregivers:

	Mother	Others*	Grandmother	Childcare
4 months	55.6%	23.7%	19.6%	1.1%
18 months	19.8%	24.4%	47.8%	8%
3 years	16.4%	16.6%	29.7%	37.3%

• Mother   • Others*   • Grandmother   • Childcare

*Others include fathers, grandfathers, domestic helpers, nannies, other relatives, or a combination of 2 or more caregivers

REASONS FOR CHOOSING...

Self (Mother)

Some mothers wanted the role, and believed they were the most appropriate caregiver. They enjoyed being involved in the child's formative years.
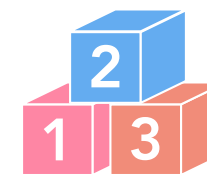
Other mothers remained as the main caregiver because no one else was available, or they were not otherwise employed.

Grandmother

The most cited reason was because grandmothers were trustworthy, and can provide proper supervision for the child.

Additionally, grandmothers were viewed as convenient and available caregivers.

Childcare

Mothers chose to place their children in childcare as they grew older. They viewed childcare centres as providing more learning opportunities for their children than home-based care.

Mothers thought that their child could learn academic knowledge and socialisation skills in childcare. In other words, mothers saw childcare centres as a way to give their child a head start in life.

Implications

1. Parents balance practical constraints and their child's evolving needs in choosing their caregiving arrangements.

2. We should recognise that not all caregivers receive the same amount of family support.

3. Practitioners can consider supporting the main caregivers of young children, particularly those who do not receive enough family support.

Walking to School to Save Money:
Insights from SPMF Data

A feature by guest contributors, Social Workers Fang Xinwei and Nisa Nurdini Binte Johar, and Head of Research, Charlene Fu
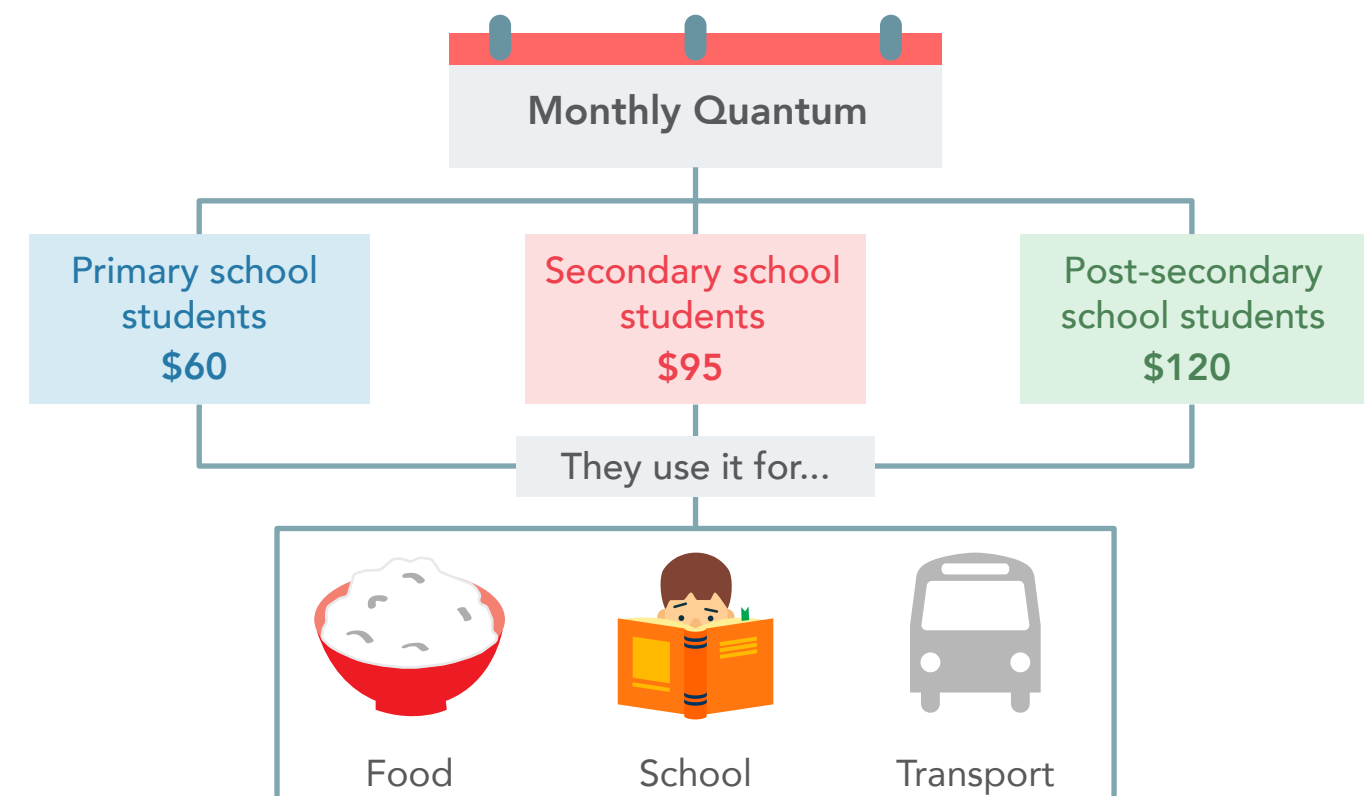
Transport Card
Student

From time to time, social workers from our Yishun Family Service @ Children's Society have encountered clients who have insufficient money to pay for their children's transport to school.

We decided to look into this issue with clients receiving the Straits Times School Pocket Money Fund (SPMF) to understand their struggles.

SPMF provides financial assistance to help families with school-going children with food, transport, and school-related expenses. The money is disbursed on a monthly basis, and the family decides on its usage.

From 2016 to 2019, we received **448 applications from 247 families** for the SPMF. These families' per capita income is less than **$625 a month.**

Monthly Quantum

Primary school students $60	Secondary school students $95	Post-secondary school students $120

They use it for...

Food   School   Transport

On average, these families have:

$1,388.33 (Income) − $1,673 (Expenses) = -$367.27 (Shortfall every month)

These families face a shortfall every month, and transport cost could be an area that they choose to cut back on when there is not enough money. For instance, families may choose for their children to walk to school instead of taking public transport.

How far is school from these families' homes?

We mapped the distance from the children's homes to their schools. The following chart shows the amount of time needed for a child to walk to school (based on Google Maps estimates).

	Primary School Students	Secondary School Students	Post-secondary School Students
Less than 20 mins	84%	47%	2%
More than 20 mins	16%	53%	98%

7

What does this tell us?

Primary school students

Most children study in Yishun. Their parents walk, cycle, or use personal mobility devices to take their children to school.

Secondary school students

Most secondary schools are located outside of Yishun; hence most youths spend more time to travel to school.

Post-secondary school students

Within Yishun, there are very limited options for tertiary institutions (only 1 junior college). Therefore, youths must travel even further from home to attend classes.

Families with older children are impacted the most. Youths in secondary and post-secondary schools have a greater distance to travel from home to their schools, and will have to rely on public transport as walking is no longer feasible. In addition, they are also likely to travel more to join friends in social activities or for their part-time jobs.

What's next?

- With the increase in public transport fares from 28 December 2019, and the ban on personal mobility devices on roads and footpaths from 25 November 2019, low-income families may face further financial strain in transport costs for their school-going children.
- We're currently exploring how the needs of children and youth on financial assistance can be better met. Stay tuned!

Research Committee

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We would like to dedicate this issue to the memory of Dr John Michael Elliott, who passed away on 13 December 2019.

Dr Elliott was a fervent supporter of Singapore Children's Society for the last 35 years, and he served as the Chairman of our Research Committee from 1998-2018. His tireless efforts and dedication have guided local research on the well-being of children in Singapore, particularly in building our understanding of perceptions towards child abuse and neglect. Research Bites was mooted and conceived during Dr Elliott's term as Chairman, and it was designed to share research findings in a compact and visually appealing manner to reach a wider audience.

Much of what the research team has been able to achieve today is due to Dr Elliott's generous contribution, both in time and ideas.

We would like to hear from you!

We are conducting a short survey to improve on future issues of Research Bites. This survey will take approximately 10 minutes to complete. You can participate by scanning the QR code.

Your response is important to us. Five lucky participants will stand a chance to win a $20 CapitaLand voucher each!

Please send your feedback and requests to: **researchbites@childrensociety.org.sg.**