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# ZIMBABWE JOURNAL OF

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# STRATEGIES USED BY CHITUNGWIZA DAY CARE CENTRE CAREGIVERS TO DEAL WITH SEPARATION ANXIETY IN PRESCHOOL CHILDREN

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### **ABSTRACT**

This study was conducted to investigate strategies used by Chitungwiza day care centre caregivers to deal with separation anxiety in preschool children. It was important to have an insight into the strategies used because failure to reduce the distress in children with separation anxiety has a negative impact on the development of the whole child. nine preschool caregivers selected from 21 preschools through stratified random sampling participated in the study. Strata of responsible authorities comprised proprietors, cooperatives, churches and one government sponsored institution. Similarly, preschool caregivers were randomly selected from strata of caregivers for 3-4 year olds, 4-5 year olds and 5-6 year olds. Data were collected mainly by means of a questionnaire and analysed using frequencies and percentages to show responses to the questions. Focus group discussions were also conducted to check and validate the responses in the individual questionnaires. Results revealed that most Chitungwiza day care centre caregivers use more limited strategies to deal with separation anxiety in children. It also emerged that the type of training in the caregivers' professional background was positively related to the selection of varied methods to deal with separation anxiety. The more sustained the training received, the more varied the strategies used in handling separation were. The obvious recommendation from these findings was the need to improve the professional background of ECD caregivers through training in these strategies. Caregivers trained in non standardised programmes should be provided with more exposure to various strategies which help children cope with separation on a regular basis through workshops, literature and other activities. Such platforms can allow caregivers to share their experiences and ideas on how best they can effectively help children cope with separation. Inclusion of preparatory and gradual introduction to day care strategies in school policies have also been recommended for the findings.

# **Background and context**

This study sought to establish strategies used by Chitungwiza day care centre caregivers to deal with separation anxiety in preschool children. This study is essentially a follow-up of some key findings which emerged in a previous study carried out as a Bed project by Dozva, (1999) on the problem of how caregivers deal with separation anxiety in preschool children, given their professional backgrounds, high staff-child ratios and other constraints which characterise most day care centres. In that project, Dozva simply compiled data but did not analyse them to her satisfaction. In this study, there is more analysis of data gathered then as a follow up to comments made by some reviewers of the project, that inadequate analysis had been done. This study is, thus, necessary in order to render full meaning to the original study.

## Literature Review

Separation anxiety is an important developmental construct which refers to the strong emotional reactions of children in the process of being separated from an attachment figure, who is usually the mother or a trusted caregiver (Dozva, 1999). Separation anxiety is a stage of development in which children become anxious, nervous, or scared upon separation from a parent and is normal in preschool and day care centres <a href="http://daycare.suite101com/article.cFM/factorsthatcontributetoseparation\_anxiety">http://daycare.suite101com/article.cFM/factorsthatcontributetoseparation\_anxiety</a>). Jervis (1984) has correctly observed that children with separation anxiety express distress. They feel disappointed, uncomfortable, sad and rejected. Consequently, they may lack interest in interacting with others and taking part in activities going on around them. As a result, other areas of development such as physical, social and cognitive are affected. Failure to reduce the distress in children, therefore, has a negative impact on the development of the whole child.

Separation anxiety is an indication of attachment and, hence, it is understood in the context of the relationship that a child has developed with the primary caregiver, particularly the mother or any other caregiver, over a period of time. Attachment develops through the consistency and sensitivity of the caregiver's attention to the child's basic needs. Because of the reliance, on the caregiver, when the caregiver leaves the child may exhibit behaviours which reflect separation anxiety. Separation between caregiver and infant may last for different durations; for example, short periods such as 2 hours or more, when weaning the infant or during hospitalisation of either one of them.

Kaplan (1986) says that separation anxiety begins at about 8 or 9 months and peaks as the infant's cognisance increases at 12 to 16 months. It may continue throughout the second year, but is not as intense, if it is experienced in the third year. However, Sutton-Smith (1973) brings another dimension to separation anxiety. He argues that the onset of separation anxiety varies among cultures, but generally, the closer the mother-infant bond is, the sooner separation anxiety will appear.

Ainsworth (1967) found that Ugandan mothers have constant physical contact with their infants. For instance, they sit them on their laps, they breastfeed them until they are two years old and carry them in close fitting slings wherever they go. These babies are completely unaccustomed to being parted from their mothers and therefore exhibit separation anxiety as early as six months of age. The Ugandan perspective appears to be similar to the Zimbabwe's situation because Zimbabwean infants also have overall, greater periods of physical contact with their mothers. This trend is more prevalent in infants of non-working mothers, in both rural and urban areas, who tend to also breast feed for relatively long periods (18-24 months on average) since most cannot afford supplementary feeding (Nyandiya-Bundy, 2000). Traditionally, these Zimbabwean nursing mothers also carry their infants in close fitting slings wherever they go and while they carry out household chores. The infants are rarely separated from their mothers and hence, they tend to show their separation anxiety much earlier. On the other hand, Ainsworth (1967) found that in Western cultures, infants have little contact with their mothers except when they are being cared for. At times infants lie in their cribs or sit in infants' seats physically separated from their mothers. The average American child shows anxiety at separation from mother at about 10-12 months of age (Ainsworth, 1967). The lateness of the anxiety onset in American infants compared to Ugandan infants seemed to be related to the relatively diminished physical contact between American mothers and their infants (Ainsworth, 1967). Beaver, Brewster, Jones, Neaum and Tallack (1994) and Beaty (1994) however, argue that regardless of age or culture, all children experience separation anxiety and stress when they start attending day care.

Child development theorists have developed different perspectives on the problem of attachment and separation anxiety. Bowlby (1959) formulated attachment theories which explain the dimensions of separation anxiety behaviours of children. Bowlby (1959) observed three stages of separation anxiety, namely protest, despair and detachment. Protest is the initial reaction to separation in which the infant exhibits anxiety through behaviours such as crying, clinging to caregiver and many others. Despair is the second

stage in prolonged separation in which the infant becomes apathetic thus, they show lack of interest or concern for others. Detachment is the last stage in prolonged separation in which the child becomes isolated from others. The child avoids or rejects others including the returning parents. Zimbabwean infants with separation anxiety seem to follow the same trend. They protest to separation by either crying, screaming, calling the caregiver or refusing substitute care by either biting, kicking or hitting the substitute caregiver. Sometime after the protest, some children may be observed sucking their thumbs quietly and showing lack of interest in activities going on around them. Detachment may be shown by scolding, hitting or avoiding the caregiver on returning.

# Strategies used to deal with separation anxiety in preschool children

While parents have to bear the brunt of this anxiety in all the ways that it manifests itself, the preschool caregiver must also figure out coping mechanisms in order to alleviate these anxieties (<a href="http://www.helium.com/items/1576509-strategies-preschool-teachers-use-for-separation-anxiety-in-children--toddlers---infants">https://www.helium.com/items/1576509-strategies-preschool-teachers-use-for-separation-anxiety-in-children---toddlers---infants</a>), as it is in everyone's interest to handle separation in the best way possible (Lieberman, 1993). Various strategies can be useful in helping children cope with separation, particularly in day care centres. These include preparatory strategies where parents and teachers can work together to help the child cope with separation as he/she starts attending day care, strategies used by institutions to gradually introduce children into day care and strategies used by teachers in classrooms until children adjust to day care experience.

Preparatory strategies are essential to help children cope with separation (Feeney, Christensen & Moravcik, 1991). Preparatory strategies may include, home visits by the teacher, class visits by the parent and the child before the child's first day at day care. Home visits by the teacher and class visits by the parent give the child an opportunity to experience their teacher from the security of their home environments. Children will be more comfortable on their own turf, and when they encounter the teacher in school she will not be a total stranger. Beaty, (1994) also says that if the parent and the child have met the teacher before, the initial separation becomes easier. Class visits by parents and children orient the child to the new setting, the teacher and materials (Feeney et al, 1991).

Gradual introduction to day care may also help children cope with separation. Staggering enrolment, shortening the first day, attending with the parent on

the first day or several days after and the use of transitional objects may help to introduce the child gradually to day care (Beaty, 1994). Rather than having all the children begin day care on the same day at the same time, caregivers may consider starting half the children on the first day and half the children on the next day. Or they may have half the children in the morning and half the children in the afternoon. Staggering enrolment allows staff members more time to attend to individual children's needs. In addition, the first day may not be so overwhelming to the child if only half the class is present at a time. The first day may also be shortened by one or two hours if possible to cater for those with separation anxiety because children who have no experience with the preschool day may have absorbed all they can in an hour. A discussion on <a href="http://www.associatedcontent.com/article/79844/dealing\_with\_separation\_anxiety\_in.html">http://www.associatedcontent.com/article/79844/dealing\_with\_separation\_anxiety\_in.html</a> reiterates that "you might want to cut the first days short, sending the kids home after a few hours..."

On the first day again, or several days after, a child with separation anxiety may be allowed to attend with a parent. Feeney et al (1991) and Beaty (1994) concur that this strategy helps the child to feel at home in the new environment when he has someone he is familiar with from home. Beaty (1994) goes further to say that attending with the parent helps the shy child to use the parent as a secure base, thus, a trusted caregiver the child totally relies on for security while exploring the unfamiliar environment. Research has shown that attending with a parent is an effective way of reducing separation anxiety (Gottshall, 1989). For example, a Japanese boy who had separation anxiety was made to attend with his mother. His mother stayed quietly in the classroom and the boy would frequently run over to touch her and then return to continue his exploration of the room. As time went by, instead of making physical contacts with the mother the boy would make visual contacts. Eventually, the mother began to leave for gradually longer periods of time until the boy managed the morning well without her. This, therefore, highlights the usefulness of this strategy that some children may need as they adjust to the new setting. However, this strategy may not be convenient to most working parents who may also wish to help their children cope with separation issues more effectively.

Greeting children by their names, developing attachment with children, role playing, songs, games, reading and telling stories are strategies teachers may also use to help children with separation anxiety gradually adjust to day care experience. Overall, there are several strategies which may be useful in helping children cope with separation anxiety in day care centres.

The question therefore is," What strategies do Chitungwiza day care centre caregivers use to deal with separation anxiety in preschool children?"

Since independence a large number of play centres, crèches and playgroups have been established in Zimbabwe. Initially, the centres were established under the aegis of the old Ministry of Women's Affairs and Community Development to provide custodial services for children while mothers engaged in community projects (Dozva, 1999). Hence, day care caregivers came from the community without regard to levels of educational or professional training. When the National Early Childhood Education Policy was adopted in the 1990's, responsibility for the custodial centres was transferred to the Ministry of Education Sport and Culture. This transfer led to the policy and practice from informal basic child custodial services to professional early childhood development based on international standards and practices. However, despite this shift, demands of day care requirements and quality of formal early childhood development services has remained a problem (Dyanda, Mudukuti, Makoni and Kuyayama, 2007). The majority of staff found in most Zimbabwean day care centres are still at the paraprofessional or non-standard level. The personnel providing both custodial and formal early development services have less than adequate knowledge and skills in Early Childhood Development (ECD) issues and practices. Against this background, it was, therefore, essential to find out how Chitungwiza day care centre caregivers are handling this important developmental construct in day care centres bearing in mind their professional qualification, high staff-child ratios and other constraints which characterise most day care centres.

This paper, therefore, focused attention on the following research questions:

- 1. What strategies do Chitungwiza day care centre caregivers use to deal with separation anxiety in preschool children?
- 2. What is the relationship between categories of caregivers and strategies they use?
- 3. Is there a hierarchy of preferences for certain strategies more than others and in what context?

# Methodology

# Design

The survey research design was used in this study. The design allowed the researcher to sample different opinions on strategies used to reduce separation anxiety in children from different categories of preschool caregivers.

#### Location

The study was carried out in the St Mary's, Zengeza and Seke areas of Chitungwiza town from which the target population was drawn. Chitungwiza town is located about twenty kilometers south of Harare and has a general population of about 340 724 people (Central Statistical Office, 2009).

# **Population**

The population in this study was made up of 100 preschool caregivers in Chitungwiza. This population was deemed appropriate because it is the personnel that work with preschool children. Dealing with issues like separation anxiety is part of their day to day responsibilities. A representative sample for the study was then selected from this target population.

# Sample

The sample selected in this study was made up of 39 preschool caregivers from 7 selected preschools out of 21 in the target population. The sample was selected regardless of age, gender, academic and professional qualification and teaching experience. However, after collecting data it was noted that the sample was made up of female teachers only, whose ages ranged from 21 to over 50 years. Thirty-seven out of thirty-nine teachers (95%) received training either through seminars and workshops, college training or under the Ministry of Education Sport and Culture training programmes.

# Sampling

The sample schools were randomly selected from a range of responsible authorities, ranging from proprietor to government sponsored institution. Similarly, preschool teachers were randomly selected from the strata of teachers for 3-4 year olds, 4-5 year olds and 5-6 year olds. Stratified sampling was used to ensure the representation of preschools and caregivers whose characteristics were similar to the population and random sampling ensured that every caregiver and preschool in the strata had an equal chance of participating in the study.

# Instruments

A questionnaire was used to elicit data on strategies used by preschool caregivers to deal with separation anxiety in preschool children. The questionnaire was made up of 3 sections. Sections A and B dealt with the biographical data of the school and preschool caregivers respectively. Section C sought information to answer the research questions,

What strategies do Chitungwiza day care centre caregivers use to deal with separation anxiety in preschool children?

What is the relationship between categories of caregivers and strategies they use?

Is there a hierarchy of preferences for certain strategies than others and in what context?

Two pilot studies were conducted in two different preschools which were not in the sample to test reliability and validity of the questionnaire. The final questionnaire was followed up by random focus group discussions with caregivers. The purpose of the focus group discussions was to get further explanation from caregivers on issues raised in the questionnaire. Focus group discussions were also conducted to check and validate the responses in the individual questionnaires and to triangulate the data.

#### **Procedure**

Two pilot studies were conducted in two different preschools which were not in the sample. Thirty-nine questionnaires were personally distributed to the respective schools by the researcher. Distributing questionnaires personally, gave the researcher the opportunity to explain the purpose of the study and the availability of preschool caregivers at one school economised time and expenses. It also provided a high proportion of usable responses. The researcher personally collected questionnaires to ensure increased return rate of responses. This also gave the researcher the opportunity to check whether all questions had been answered and to conduct focus group discussions at the centre.

# Data analysis

Both quantitative and qualitative methods of analysis were employed. Figure 1 below shows percentages of responses from the 39 preschool caregivers and the hierarchy of preferences for the various strategies. Figure 2 similarly shows percentages of responses to strategies on the basis of caregiver category.

# Results

# Research question 1

What strategies do day care centre caregivers use to deal with separation anxiety in preschool children?

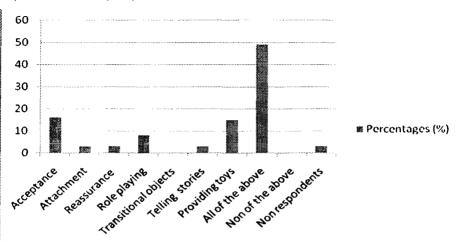


Figure 1: Strategies used by day care centre caregivers to deal with separation anxiety in pre-school children.

Figure 1 shows that, the majority of caregivers (49%) reported that all strategies are helpful. However, 16% of them indicated that showing acceptance to children with separation anxiety is also a helpful strategy while 15% reported on providing toys to children. Role playing was indicated by 8%, while techniques such as developing attachment, reassuring them and telling and reading stories to children were each indicated by 3%. None responded to the strategy of using transitional objects.

These results are consistent with what also emerged from the focus group discussions. In the record of discussion most caregivers indicated that they give toys, food etc. to children showing separation anxiety behaviours. Some of the interesting responses in the focus group discussions were captivated in the following selected vignettes:

Respondent A: Children like to play with toys, so when they cry for their mothers when they are left we give them toys to play with and they stop crying.

Respondent B: Vana ivava tinovaratidza rudo rwakanyanya kuti vasafunge vanamai vavo. Tinovasekerera, kufamba takavabata maoko, nekugara tichishanda pedyo navo kuti vazive kuti tinovafarira (We show much love and acceptance to these children to reduce their anxiety by smiling at them, holding them by the arm, working near them as they play and talking with them from time to time so that they feel that they are accepted).

Overall, the results indicate that showing acceptance and providing favourite toys are the most common strategies used to deal with separation anxiety in preschool children, and this implies that Chitungwiza day care centre caregivers use limited strategies in dealing with separation anxiety in children.

# Research question 2

What is the relationship between categories of caregivers and strategies they use?

Figure 2: Responses to strategies used to deal with separation anxiety in preschool children by different categories of caregivers

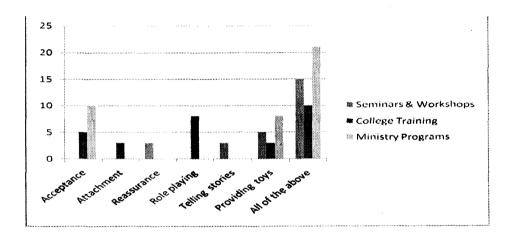


Figure 2 shows an analysis of strategies used by caregivers with different professional backgrounds. It was necessary to do this further analysis because the type of training these caregivers received may have an influence on how they respond to the needs of the children. Generally, caregivers' professional backgrounds in Zimbabwe include training through seminars and workshops, college training and through government programmes. From the field data, 21% of caregivers who trained under the Ministry of Education Sport and Culture programmes indicated that all six strategies were helpful while college trained caregivers (15%) indicated the same response and those trained through seminars and workshops were indicated by 10%. However, these caregivers also responded to specific individual strategies which help children cope with separation.

College trained caregivers indicated that they use the following four strategies, namely, role play (8%) showing acceptance (5%), developing attachment (3%), and providing toys (3%). This may be due to the fact that these caregivers follow a sustained course of study, hence, they have more exposure to child development issues and techniques during training than those who have attended occasional seminars and workshops. After their

training they come up with a repertoire of approaches which they try once they are practicing caregivers. They are also adaptable because of the nature of their training and are willing to change and experiment.

Caregivers with a seminar and workshop training background indicated that they use three strategies which are, providing favourite toys (5%) reassuring children (3%), and telling and reading stories (3%). This may be due to the fact that these caregivers attend regular enrichment courses on developmental issues like separation anxiety. Such exposure keeps them abreast of current child developmental issues such as separation anxiety. There is also sharing of latest ideas/trends on child development issues.

Caregivers trained through the Ministry of Education Sport and Culture programmes indicated that they use only two strategies, which are, showing acceptance (10%) and providing toys (8%). This could be due to the fact that these programmes may not be consistent and run only when the government has resources. Again, their course outlines are unknown and may not be followed religiously. Resource persons may not be readily available and they may settle for second best where they may not be knowledgeable. Alternatively, these caregivers may be too conservative, preferring to use those strategies they have confidence in. In short, they fear change and innovation.

Overall, findings indicate that there is a relationship between training background of caregivers and strategies they select to deal with separation anxiety in children. College trained caregivers and those trained through seminars and workshops use several strategies while caregivers trained through the Ministry of Education Sport and Culture programmes use more limited strategies. Therefore, one can conclude that given this data, the type of training in the caregivers' background is positively related to the selection of varied methods to deal with separation anxiety. The more sustained the training received, the more varied the strategies in handling separation were.

# Research question 3

Is there a hierarchy of preferences for certain strategies more than others and in what context?

Figure 1 also shows the hierarchy of preferences for certain strategies more than others. An analysis of these preferences was necessary for establishing

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gaps between commonly used and rarely used strategies. Establishment of gaps would help in drawing some recommendations for the study.

Overall, there was a fairly elevated response (16%) on the strategy of showing acceptance. Showing acceptance may be done by greeting children by their names, non-verbally by smiling to the child, and by working near the child from time to time during play. Showing acceptance helps children feel that they are part of the group (Click and Click, 1990). An elevated response to this strategy may indicate that it is the most used strategy which could be due to the fact that caregivers use this strategy often in helping children adjust to day care settings. These caregivers may be a bit traditional and are reverting to the traditional role of motherhood in which children are more likely to be silenced by using traditional techniques such as carrying the child on the back. However, this strategy is practically effective in day care centres which have relatively low staff-child ratios.

There was also a fairly elevated response (15%) on the strategy of providing toys. This could be due to the fact that these children come from poor communities which cannot afford to buy toys for their children. Due to the desire for playing with toys, children may find it comforting when they are given toys to play with and quickly cope with separation. Again, as earlier mentioned, these caregivers may be a bit traditional and are reverting to the traditional role of motherhood in which children are more likely to be silenced by using traditional techniques such as giving food, toys etc. Alternatively, as earlier alluded to, they may also be too conservative, preferring to use only those strategies they have confidence in.

A slightly elevated response (8%) was noted on the strategy of role play which is another useful strategy of reducing separation anxiety (Feeney et al, 1991). Freud in Feeney et al, (1991) identifies role play as a primary way children express and work through their fears, anxieties and desires. Children with separation anxiety have the fear of being left or abandoned. Through acting the role of the one who leaves, for instance the mother, the anxiety stricken child finds a way of reducing and gaining mastery over these fears and anxieties. Jervis (1984) suggests that imaginary telephones alleviate anxieties by enabling children to talk out their feelings. The slightly elevated response to this strategy may indicate that it is regularly used. Perhaps this could be due to the fact that caregivers have found it to be effective in reducing separation anxiety in children.

There was low response (3%) to the strategy of developing attachment. Strategies of developing attachment are of paramount importance (Feeney

et al, 1991), to help children adapt to the new day care environment. Day care centre caregivers can work to develop stronger and more positive attachment bonds with children by being sensitive and responsive to their needs (Sroufe, 1977). Meeting children's needs in day care centres may include providing individual attention during play, meal and naptime and even providing greater physical comfort through holding and carrying the child. Low response to this strategy may indicate that the strategy is rarely used, if at all ever used. Maybe this strategy was found not to be practically effective due to the high staff-child ratios that characterise most Zimbabwean day care centres. Alternatively, some parents may discourage their children from being so close to their day care centre caregivers especially those of the opposite sex due to the fear of possible sexual and physical abuse. Again, with the HIV/AIDS pandemic prevalent in most communities, some parents may also discourage their children from being in close contact with their day care centre caregivers due to the fear of their children contracting the disease.

Low response (3%) was also noted on the strategy of both parents and caregivers reassuring anxious children. Kaplan, (1986) and Hilderbrand (1994) concur that parents may prepare the child merely by explaining honestly what is going to happen and assuring the child that he/she will come back at the end of the day. Teachers, on the other hand, may also assure children left at day care centres by saying for instance, "Your mother will be coming after outdoor play." Low response to this strategy may indicate that, the strategy is rarely used. This could be due to the fact that this strategy may not be directly applicable to the sub-cultures these children come from. For instance, in the Manyika and other subcultures in Zimbabwe children are talked to rather than talked with, which is opposite of Western culture. Children from these sub-cultures are generally expected to listen, to answer questions and follow instructions from the earliest age (Gelfand, 1986).

The strategy of telling and reading stories had a low response as well (3%). Children usually enjoy hearing stories about other children who have the same feelings as they do. Beaver et al (1994) and Beaty (1994) concur that reading books and/or watching age relevant videos of children with separation anxiety helps to reduce separation anxiety in children. Low response from the caregivers may also indicate that the strategy is rarely used. Maybe caregivers do not have suitable literature for young children in their day care centres due to the economic lack of capacity in the centres. Low educational skills of day care centre caregivers and poor cultural knowledge of traditional fairy stories due to urbanisation could be possible reasons for this low response.

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There was no response (0%) to the strategy of using transitional objects. Transitional objects refer to items such as teddy bears, parents' photos and comfort blankets that children may bring from home to day care centres. They are transitional in the sense that they become the focus of children's affection and attention while they are in transition from being dependent to becoming independent (Lefrancois, 1993). They are useful in reducing children's anxieties in strange situations by providing contact, comfort and joy of a physical and psychological nature (Winnincot, in Lefrancois, 1993). These comfort objects extend the security of the home to the unfamiliar day care setting (Gottschall, 1989). Weisbery (1975) found that transitional objects are quite effective separation anxiety reducers because children who brought transitional objects to day care were found to play and explore more than those who did not. They also found that in the day care centres children who were attached to transitional objects showed less anxiety than those attached exclusively to their mothers.

No response to this strategy may indicate that this strategy is not used. Maybe culture does not allow such practices. Caregivers may be reluctant to allow children to bring their personal belongings which they use at home due to some possible harmful traditional child rearing practices which are used by some parents such as the tying of herbs and charms around the child's neck or waist which is believed to provide magical powers to protect the child from illnesses and bad spirits (Gelfand, 1979). It is believed traditionally that when two or more children's clothing or blankets come into contact, the child with weaker charms may be harmed by the stronger ones. Hence, caregivers try as much as possible to avoid this from happening.

Overall, the results indicate that there is a hierarchy of preferences for certain strategies more than others. Showing acceptance, providing toys and role play are the most preferred strategies while developing attachment, reassuring children and telling and reading stories are the least strategies used.

# Implications and recommendations

Overall, findings indicate that caregivers commonly use very few of the known strategies which are, showing acceptance, providing toys and role play. This, therefore, implies that Chitungwiza caregivers use limited strategies to deal with separation anxiety in children. It also emerged that the type of training in the caregivers' professional background is positively related to the selection of varied methods used to deal with separation anxiety. The more sustained the training received, the more varied were the strategies in handling separation.

The obvious recommendation from these findings is the need to improve the professional background of ECD caregivers through training in these strategies. Caregivers trained in non standardized programmes should be provided with more exposure to various strategies which help children cope with separation on a regular basis through workshops, literature and other activities. Such platforms can allow caregivers to share their experiences and ideas on how best they can effectively help children cope with separation.

Findings also imply that caregivers are not considering individual differences because the three commonly used strategies may not be applicable to all children who show separation anxiety. Therefore, caregivers should also consider individual differences when dealing with different children with separation anxiety to ensure that where one strategy seems to be ineffective to an individual, other strategies could be tried.

There is also need for day care institutions to include, in their school policies, preparatory and gradual introduction strategies for children starting to attend day care. These strategies may include home visits by teachers and class visits by parents and children, reassuring children, staggering enrolment, shortening the first day, attending with the parent on the first day and use of transitional objects.

# Conclusion

This study sought to establish strategies used by Chitungwiza day care centre caregivers to deal with separation anxiety in preschool children. Separation anxiety seems to be a universal phenomenon. However, its onset varies from culture to culture depending on the child rearing practices used.

Findings indicate that most Chitungwiza day care centre caregivers especially those trained in non standardized programmes use limited strategies to deal with separation anxiety in children. They may not be aware of the range of other strategies which can be used to help children cope with separation due to the nature of training they received. There is, therefore, need to improve the professional background of ECD caregivers through training in these strategies. Caregivers trained in non standardized programmes should be provided with more exposure to various strategies which help children cope with separation on a regular basis through workshops, literature and other activities. Inclusion of preparatory and gradual introduction to day care strategies in school policies have also been recommended for the findings.

However, these findings are only confined to a sample used in this study, which has an urban environment bias and this places limitations on their applicability to the whole of Zimbabwe. Different findings would perhaps be produced with the sampling of a wider cross-section of day care settings. Again, the observation method for data collection could not be used due to poor timing of the research. Future research on this subject ought to include observation of children in day care centres at the beginning of the year when children are entering these centres for the first time.

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