



The Importance of Caregiver Sensitivity for Children's Development

KEY POINTS:

- A sensitive caregiver recognises their child's bid for attention and responds in a manner that meets their child's needs.
- Children of sensitive caregivers are more likely to show positive outcomes in several areas of development (e.g., develop secure and organised attachment styles with caregivers, social-emotional development, brain development and language development).
- Sensitive caregiving behaviours are influenced by several factors, such as the caregiver's characteristics (e.g., mental well-being) and contextual factors (e.g., social support for caregivers).
- Caregiver sensitivity can be enhanced through interventions such as short, focused programmes that include opportunities for caregivers to learn about sensitive caregiving behaviours.
- Additional research focused on non-maternal caregivers (e.g., fathers, grandparents and domestic helpers) is needed within the Singaporean context to understand and enhance sensitive caregiving practices.



What is Caregiver Sensitivity?

Caregiver sensitivity reflects the extent to which caregivers understand, react and respond to children's behavioural cues, particularly when the child is distressed.^{1, 2} In this Evidence Insight, a caregiver refers to an adult who provides care for a specific infant or young child, and to whom the child has an emotional connection. A sensitive caregiver tends to recognise their child's bids for attention. These can be a cry from their baby, or a glance or question from their toddler or child. A sensitive caregiver also responds in a manner that meets their child's needs (e.g., a caregiver gives milk to a baby who is crying because they are hungry).³ A sensitive caregiver tends to respond appropriately to their child throughout the day, including while they are in the presence of other competing demands (e.g., from other children, household responsibilities, work).⁴

Why Does Caregiver Sensitivity Matter?

Children of sensitive caregivers are more likely to show positive outcomes in several areas of development.

Secure Parent-Child Attachment: Preschool-age children whose caregivers engaged in more sensitive caregiving behaviours were more likely to

develop secure and organised attachment styles.⁵ Attachment refers to the emotional bond that forms between the caregiver and child. The child's attachment with their caregiver influences their perceptions of their selves and the environment around them.^{5, 6} When children experience sensitive responses from their mothers during the first year, they grow to be more confident that their mothers will respond to their physical and emotional needs.⁶ Children who perceive their caregivers as being supportive and caring are also more likely to develop a secure self and explore their environment more confidently.⁶ During times of distress, children who have experienced sensitive caregiving are more likely to seek out these caregivers for support and assistance as they feel protected and loved.

Positive Social-Emotional Development: Research in Singapore has highlighted the long-term positive effects of being exposed to sensitive caregiving behaviours during earlier periods of development (e.g., in utero, just after childbirth, infancy). When children were repeatedly exposed to a potentially fear-inducing situation, those who experienced greater maternal sensitivity at six months were able to regulate their responses better than those who received lower levels of sensitive care.⁷ Preschool children whose parents who were more sensitive were less likely to show internalising problems (e.g., sadness, worry and anxiety) or externalising problems (e.g., hyperactivity and aggression).⁶ Growing up in an environment of parental warmth and sensitive responses, children develop strong self-identity, self-control, social skills and positive regard for others, leading to stronger relationships with others as they feel protected and loved.^{1, 8, 9}

Enhanced Brain Development: Brain development occurs rapidly during the first two years of life and continues throughout early childhood. Research in Singapore has shown that maternal sensitivity affects the development of areas of the child's brain and/or circuits related to memory (e.g., hippocampus), emotion (e.g., amygdala) and executive function (e.g., prefrontal cortex).¹⁰⁻¹²

¹ Caregivers, for the purposes of this Evidence Insight, do not include childcare providers or educators in formal settings, even if they interact with the infant or child on a regular basis. It also does not include adults who provide occasional child-minding services. The majority of research in this area has looked at mothers and their children – maternal sensitivity or responsiveness. Where possible in this Evidence Insight, we refer to 'caregivers' more broadly as any adult providing care for a child. If a specific research study or paper only focused on mothers, the terms 'maternal sensitivity' or 'maternal responsiveness' are used in this Evidence Insight.

Singaporean research has also found that sensitive caregiving brings about longer-term positive cognitive outcomes in children related to memory and executive function.^{13,14}

Improved Language Development: Researchers have found that Singaporean children between 4 and 6 years of age whose mothers were more sensitive were less likely to show language difficulties.¹ When mothers are emotionally present while interacting with their child, this provides them with more opportunity to engage in both verbal and non-verbal communication, which facilitates their child's language development.

What Affects Caregiver Sensitivity?

It is important to understand the factors that promote or hinder a caregivers' ability to engage in sensitive caregiving behaviours. It should be noted that most of the research in this area has focused on mothers and their biological children.

Caregiver Characteristics: Caregivers' mental well-being and behaviours impact the ways in which they respond to their child's needs and cues. *Depression* is one area of caregivers' mental well-being that has been frequently explored. Mothers with more severe depressive symptoms were less likely to engage in sensitive behaviours.⁴ This included being less responsive to their child's cues, making less eye contact with their child, and interpreting their child's cues less accurately.



Multiple demands on attention may also have an impact on caregiver sensitivity. Many people show lower levels of sensitivity when trying to multi-task.¹⁵ Likewise, though not studied with regards to sensitivity per se, it is suggested that the competing demands on attention elicited by smart phones may also impact sensitivity and supportive care.^{16,17}



Social Support: *Social support* reflects the amount of help that caregivers receive from other individuals (e.g., family members, friends) when caring for their child. An in-depth review found that mothers who received greater social support during pregnancy were more likely to bond with their child after birth.¹⁸ This assistance may have helped to buffer some of the stressful and challenging experiences that mothers naturally face during this critical period of early development. When caregivers have more time and energy to be fully present when interacting with their child, they are more likely to respond to their child in an appropriate and sensitive manner, fostering the caregiver-child relationship.

How Can We Enhance Caregiver Sensitivity?

Caregiver sensitivity can be supported by providing caregivers with the necessary guidance or feedback on the ways in which they interact with their child(ren). This can be done through brief interventions focusing on enhancing parent-child interaction or through more intensive guidance for parents with higher risk profiles.¹⁹ A meta-analysis of the research evidence found that effective

interventions had a targeted focus (i.e., focused only on maternal sensitivity), used video feedback and started after the infant was six months old.²⁰

Additionally, to keep caregivers engaged, research by Sokolovic and colleagues²¹ suggested that it is important to allow caregivers to receive feedback and practise the desired behaviours. It is also useful to include skills that caregivers can practise at home between sessions. These sessions may be more effective when caregivers are given the opportunity to reflect on what they have learned, practise these behaviours in their own situations and improve on them.

Research has also suggested that more resource-intensive methods (e.g., regular home visits for a year) may not be necessary to improve sensitive caregiving behaviours among caregivers of young children in the general population. Short, focused programmes that include opportunities for caregivers to learn about sensitive caregiving behaviours can be equally effective.

However, it is critical that any intervention should be contextualised to the target population, with particular attention to the specific needs, culture and environment in which the intervention is implemented. For example, a programme to enhance caregiver sensitivity in fathers would need to be contextualised to their particular needs, be delivered in an environment and through an approach that was acceptable to this group and take into consideration their understanding and beliefs about caregiving.

Implications for Policy and Practice

Sensitive caregiving behaviours positively influence children's short- and long-term developmental outcomes in several domains. There is a need for government policies to recognise the importance of caregiver sensitivity for holistic child development. This includes introducing policies that are likely to support sensitive caregiving behaviours. For example, providing additional support to caregivers during maternity and paternity leave to reduce caregiver stress, fostering a more family-friendly work environment (e.g., child-friendly hours, flexible work arrangements, work-life balance), and facilitating social support for new parents. Current maternity

and paternity leave policies in Singapore could also include more flexibility for families' childcare arrangements by allowing parents to take their leave beyond 12 months after the birth of their child. This will support parents providing stable, responsive caregiving to young children in their most critical years.

The Singapore government has recently made a positive change in the duration of paternity leave by extending it from two weeks to four weeks for working fathers of Singaporean children born after 1 January 2024. Research in Singapore²² has suggested that this change enables fathers to be more involved with childcare activities and household chores. Longer paternity leave also strengthens the relationship between both parents, reduces the frequency of family conflict incidents, and can ultimately improve the child's socio-emotional outcomes during early childhood.²²

In addition, the interventions as described in the previous section can be disseminated to the population as public health approaches through health-promotion messages, or through organisations which promote healthy parenting practices within communities. Practitioners can also be trained and equipped with providing these interventions at various touchpoints (e.g., postnatal appointments at the hospital, or by the general practitioner or paediatrician at various well-child visits). However, while interventions developed predominantly in North America or Western Europe have been effective for increasing caregiver sensitivity among families belonging to

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minority groups (e.g., Hispanic, Asian-American families), it is important to ensure that any intervention is tailored to the Singaporean context to account for differences in culture and belief systems.²³

While the key principles of sensitive caregiving are similar at different developmental periods (e.g., providing appropriate and timely responses, considering the child's perspectives), the specific behaviours that reflect sensitive caregiving may be different as the child grows from infancy to school age and beyond. Early childhood agencies and practitioners should be mindful of these differences and introduce specific recommendations that support sensitive caregiving behaviours at different stages of development. These recommendations can be disseminated among different childcare workers who interact with families. For example, information to enhance sensitive caregiving behaviours during pregnancy and/or infancy could be introduced during antenatal parenting classes that currently focus on the physical care of infants and the well-being of mothers during and post-pregnancy. Information can be disseminated during follow-up health check-ups with the general practitioner or paediatrician. As children begin attending infant or childcare programmes, these recommendations can be communicated to caregivers by infant or childcare providers. To enhance caregiver sensitivity in the general population, policymakers can also consider sharing these recommendations on parenting resource portals that are accessible for families.

Another population-wide approach could focus on unpacking local beliefs or practices related to sensitive caregiving. Topics may include suggestions for how caregivers should respond when interacting with their infant or child (e.g., whether parents of young infants should pick up, hold, or soothe infants when they cry) or guidelines for sensitive caregiver-child interactions during bonding activities with the child. These parenting

tips can be shared on parenting resource portals or disseminated through parenting media sites.

Our understanding about sensitive caregiving behaviours in the Singaporean context, particularly approaches used by different (non-maternal) caregivers, is still limited and warrants further study. Even though mothers are considered the primary caregiver for most children in Singapore²⁴, children are likely to spend their day with multiple caregivers. The primary caregiver may also vary over the first six years of a child's life and through changing family situations. For example, in families where both parents are employed outside the home, preschool children may spend the majority of their time with grandparents or domestic helpers. More research is required into sensitive caregiving as provided by, for example, fathers, grandparents and domestic helpers in the Singaporean context. Findings may provide greater insight on the potential differences in sensitive caregiving behaviours by different caregivers. Through this, policy makers and practitioners may be better informed to adapt guidelines or practices to the respective caregiver. This will ensure that the suggestions implemented are appropriate for the caregiver-child interaction and are most effective for enhancing sensitive caregiving behaviours.

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RECOMMENDATIONS:

- Raise awareness among caregivers in Singapore about the characteristics of sensitive caregiving and the importance of being sensitive when caring for children in the early years. This can be done more explicitly through media campaigns and public education programmes.
- Caregiver's sensitivity should be screened at various touchpoints (e.g., antenatal classes, postnatal appointments at the hospital, by the general practitioner at regular well-child visits). Guidance and further support that target different areas of development (e.g., socioemotional outcomes, quality of parent-child relationships) may also be provided to caregivers during these appointments.
- Because sensitive caregiving in early childhood has both short and long-term impacts on children's development, programmes and policies should be designed to provide more specific support to caregivers at different times over the young child's life. These programmes should also be implemented in places that are easily accessible to caregivers (e.g., community spaces, hospitals, social service agencies).
- Sensitive caregiving is necessary for fostering positive child outcomes regardless of a family's socioeconomic status, background, or other circumstances. It is important to offer programmes that promote sensitive caregiving not just to families deemed to be at-risk, but also for the general population.
- Given that caregiving in Singapore is provided by a range of people (e.g., mothers, fathers, grandparents, domestic helpers), the target groups of such programmes should include all caregivers and not just mothers. As much as possible, interventions or programmes should be tailored for the Singaporean setting, particularly those developed and tested in different contexts.

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About CHILD

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