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## Children's Use of Retreats in Family Child Care Homes

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The use of retreat spaces by 65 children in 9 family child care homes was assessed in this study. Family child care providers used daily diaries to collect information about children's retreat frequency and associated behavior. The findings revealed that nearly half of the children used informal, readily available retreats during the research period. Playing with toys was the most frequent and stable retreat activity across age groups. Yet the number of passive and engaged behaviors varied based on child characteristics such as age, gender, and child's mood for the day. Retreat use can be viewed as a potentially adaptive environmental strategy that children apply as their needs change in a given day and from one developmental period to the next. Thus, it is recommended that child care professionals provide access to retreats and support children's varied use of retreat space.

Practitioners and researchers in early education and child care, along with design professionals, call for access to private areas or retreats in settings designed for children. For example, some architects have suggested that wherever children play, small "caves" from "leftover spaces" such as stairwells should be available for children who will seek out special spaces for friends and themselves to play (Alexander, Ishikawa, & Silverstein, 1977). Landscape designers creating outdoor play areas for children have advocated that children in middle childhood need places where they can create and control private "dens" for themselves and peers (Kylin, 2003). The suggestion of providing a variety of social spaces that should include private areas for children to be alone or in small groups has also been made (R. C. Moore, Goltsman, & Iacofano, 1992). These ideals were demonstrated when a traditional school yard was transformed into an enriched environmental play yard (R.

C. Moore & Wong, 1997). R. C. Moore and Wong described how a variety of materials were used to create multiple “nooks and crannies” throughout the yard to provide children with a sense of ownership of the space. With respect to child care settings for young children, it has also been suggested that the sometimes institutional nature of child care centers can be made more home-like if children have access to their own “territories” where the demands to share their “feelings and materials” can be temporarily lifted (Olds, 2001, p. 20). It has been argued that “healthy environments help balance the amount of social interaction we have relative to what we desire” (Trancik & Evans, 1995, p. 313). Children themselves have also identified solitary retreats as special parts of their environment (Hart, 1979). In this article, the nature of retreats in childhood settings will be further examined. Based on past research, the current exploratory study will focus on children’s use of retreats in family child care homes.

The provision of supervised private areas is considered to be a characteristic of high-quality centers (G. T. Moore, Lane, Hill, Cohen, & McGinty, 1979; National Association for the Education of Young Children, 1998) and high-quality family child care homes (National Association for Family Child Care, 2003). Assessment tools for centers and family child care homes include ratings of “space for privacy” and “spaces to be alone” (Harms & Clifford, 1989, p. 15) and consider private areas to be valuable (Harms, Clifford & Cryer, 1998). The availability of a retreat space can support children’s needs when their activity level or desire for group engagement diverges from others’. These private spaces or retreat areas are intended as self-initiated “temporary buffers from noise and activity” (Weinberger, 2000a, p. 78) and are well regarded in books geared toward family child care providers establishing and improving their family child care homes (Gonzalez-Mena, 1991; Osborn, 1994).

The demand and use of retreats in family child care homes may not be the same as that in centers or schools. Family child care homes are smaller than child care centers and typically care for fewer than 10 children, whereas centers typically care for at least 25 and sometimes even as many as 200 children. Young children who attend family child care homes are typically cared for closer to their own home and in a setting that looks more like their own home as compared with child care centers. Children of different ages are typically grouped together in family child care but not in center-based care. Family child care providers typically have less professional training as compared with providers in centers. The familiar, small, and intimate aspects of family child care may reduce the need for children to retreat. Alternatively, because the family child care setting is used and designed for a wide age range of children in care and the providers’ families as well, it may be a challenge for children to find a way to retreat when they desire.

A distinctive aspect of family child care homes is their similarity to home settings. Some insights about the potential value of retreats in family child care have come, in part, from research that has examined children’s home environments.

Wachs and Gruen (1982) suggested the presence of a retreat or stimulus shelter could dampen the adverse effects of residential crowding for young children. Yet children may use retreats differently because of their location or structure (i.e., outside a rural nursery school, inside an urban home, or at a large-scale child care center). For example, outdoor nature-laden retreats facilitate dramatic play (Kirkby, 1989). Indoors, in a higher density preschool setting (i.e., 50 square feet per child), young children spent more time in an enclosed retreat structure (as compared with a relatively open structure) and engage in both solitary and interactive play; in a lower density preschool (i.e., 107–218.5 square feet per child), the preference for the enclosed structure was limited to interactive play (Lowry, 1993).

With respect to the study of retreats in family child care, infants and toddlers in Israeli family child care homes who had access to stimulus shelters or retreats used the spaces alone and had reduced motor and social skills (Rosenthal, 1994). Retreat use in these small family child care homes, with no more than 5 young children (3–36 months) was not found to be beneficial. Rosenthal suggested that retreats interfered with maintaining close proximity between children and caregiver and, thus, the facilitation of active play. However, under different conditions, such as overcrowding, retreats may play a constructive developmental role (Rosenthal, 1994). In another study focusing on infants in family child care, providers were asked how they arranged their homes to satisfy a variety of developmental needs for infants and toddlers (Weinberger, 1998). Home modifications were almost exclusively safety oriented, with limited variation for different developmental needs. In particular, there were limited arrangements made by the providers to have retreat spaces for these young children. The most frequent modification for a retreat was to rely on containing equipment, such as a baby swing. Preliminarily, it appears there is not a uniform acceptance of the value of retreats in family child care, in particular for very young children. For older children in family child care homes, even less is known.

To better understand retreat use for the range of children who are cared for in family child care homes, this study was conducted. Four research questions were formulated. First, where are the retreats used? More specifically, would children rely on informal retreat spaces that served other primary purposes? This was expected, given the evidence that family child care providers limit how much they modify their homes to provide for developmental needs, such as the need for exploration. Second, how often are retreats used? Although retreat use was expected to occur regularly, perhaps on a daily basis, it was expected to be a relatively low-frequency behavior, given the children's easy access to a well-known caregiver in a small setting. Third, which children were the most likely to retreat? It was anticipated that preschoolers (in particular 3- and 4-year-olds) would be the most frequent retreat users, with mobile infants and toddlers being more closely supervised and less free to retreat and school-age children experiencing the setting as more relaxing than school and needing to retreat less. It was also expected that

boys, who have been shown to be more sensitive to noise and positively responsive to stimulus shelters in the home setting, would utilize retreats at a higher rate than girls (Wachs & Gruen, 1982). In addition, the relationship between temperament and retreat use is explored. Temperament can be seen to either buffer a child from a stressful environment or be associated with behavioral problems (Rothbart & Bates, 1998). Thus, children who have temperament qualities that can help them in a stressful context (e.g., children who are easy going) may use retreats less often than children who have more challenging temperament qualities (e.g., children who are easy to upset). For example, Wachs and Gruen (1982, p. 193) reported that temperamentally "difficult infants appear to be significantly more sensitive to the negative aspects of the physical environment ..." than temperamentally easy infants. Given the limited research on other characteristics that may distinguish children who choose to retreat from those who do not, a general examination of other factors is explored here. These characteristics are child care history, family structure, and family demographics. Fourth, how are retreats used? It was expected that retreat behavior would be diverse. On some occasions retreats are to be used alone, sometimes children will be actively engaged in play, and at other times they will be more passive and inactive in their retreat use, given the flexible and informal nature of retreats and the mixed social grouping in family child care. In addition, contextual factors that may affect the use of a retreat are explored. These include time of day, child's health and mood for the day, and family characteristics.

## METHOD

### Family Child Care Regulatory Climate

Children were observed in family child care homes in southeastern Massachusetts. At the time of data collection, the maximum number of children at a given time in licensed family child care was 6 unless there was a provider's assistant. Moreover, if there was only one provider, the maximum number of children under 2 years of age was 3, if at least one of these children was 15 months of age and could walk independently.

### Participants and Family Child Care Homes

Sixty-five children (36 females and 29 males) participated in this study. Their ages ranged from 2 months to 11 years of age at the time of the first research visit; their average age was 3.48 years old. (There were 8 children under 1 year, 23 children between 1 and 2, 20 children between 3 and 4, and 14 children between 5 and 11 years of age.) Of the children in the study, 65% were in care for either 4 or 5 days per week, spending an average of 7.26 hr per day in care. In all, 55% of the children

were in care with one or more of their siblings. Based on provided data, the sample was predominately White, and 84% of the children were in families headed by two parents. Based on provided data, 49% of mothers and 42% of fathers had received at least a bachelor's degree.

The children were cared for by 9 licensed family child care providers, 6 of whom cared for 8 of their own children included in this study. Caring for one's own children is a typical arrangement, and these children were included in the study. In two homes, providers each had a family member as an assistant. Three of the family child care homes were located in a small city, with the remaining six homes in surrounding towns. The family child care homes were in the houses of the providers and varied in size and number of rooms dedicated exclusively to children's play areas. Three of the homes had one dedicated play area, two of the homes had two dedicated play areas, and the remaining four homes had three or more dedicated play areas. Four of these homes had a play area that was used exclusively by the family child care business and not by the provider's family. Some homes had large dedicated play rooms that appeared to be similar to those in child care centers, with separate parts of the room containing different play materials. Other homes had small play rooms without room divisions based on play materials.

## Procedure

The providers were recruited through family child care support networks and mailings with letters of invitation to participate. If interested, they returned a self-addressed, stamped envelope. These providers were then sent three survey forms (described later). Some of these providers were then contacted to participate in the remainder of this study. Their selection for invitation was based on the number of children in care (i.e., at least 2 children outside of the provider's family currently in care), if the provider noted space for children to sometimes be away from others, and, finally, if there was provider interest.

Each of the 9 providers was visited twice in their family child care homes; one visit was scheduled in the morning, and another was scheduled in the afternoon. Each visit lasted approximately 2 hr. During the first visit the researcher familiarized herself with the family child care home and was introduced to the attending children. The researcher began making observations to complete the Family Day Care Rating Scale (FDCRS; discussed later). In addition, the researcher trained the provider on how to collect and record the diary data. The provider was trained to fill out a daily record form every day and a retreat use form whenever a child used a retreat. Consistent with recommendations to make the diary portable and accessible, the diary forms and guidelines were left in a binder with the provider (Bolger, Davis, & Rafaeli, 2003). The researcher called the provider within a few days after the first visit to review the procedure, clarify provider questions, and schedule the

second visit. This was also consistent with recommendations to retain participants using diaries by being available in an informal manner (Bolger et al., 2003).

During the second visit, the researcher completed the FDCRS, which required additional observation and a provider interview. Photographs of noted retreats were also taken. Feedback based on pilot research with other family child care providers indicated that the providers would be willing to participate only if the data collection period was relatively brief (i.e., approximately 2 weeks in length). In addition, retreat behavior was not noted every day. Therefore, the providers in this study were asked to discontinue data collection once 5 days worth of retreat use data was collected. The number of days it took to collect 5 days worth of retreat episodes varied by provider; it took between 5 days and 16 days. Data were collected in the months from June to December.

## Measures

### *FDCRS*

The FDCRS is used to specifically assess the quality of family child care homes (Harms & Clifford, 1989). The measurement domains include (a) space and furnishings, (b) basic care, (c) language and reasoning, (d) learning activities, (e) social development, (f) adult needs, and (g) supplemental: provisions for exceptional children. There are 32 items across the 6 primary areas. Each item is scored on a scale from 1 to 7 ranging from 1 (*inadequate care*), 3 (*minimally adequate care*), 5 (*good care*), and 7 (*excellent care*). Program observation and a provider interview are necessary to complete this assessment tool.

### *Survey Forms*

*Child history by parent.* Information about the child's age, gender, race, ethnicity, birth order, health or developmental concerns, family structure, and parental education were included on this form.

*Provider history.* Questions were about how each family child care provider became a provider, their length of child care service, professional background, and their ongoing training activities.

*Child history by provider.* This form provided information about the gender, current age, and age at the start of care for each child. Information about each child's relation to the provider and other children was included. The number of daily hours and days in care each week were also included. The providers were asked to rate temperamental qualities based on their observations of the children in the context of group care. Measures of temperament are typically associated with specific developmental periods, such as infant, toddler, or preschool (McHale,

Frosch, & Mangelsdorf, 1998). For this study, the measures were used to assess children across a wide age distribution. Therefore, the ratings were designed to be simple to use as each provider would complete information on multiple children at various developmental levels. The items were adapted from 5 of the 15 dimensions of temperament found in the Children's Behavior Questionnaire (Rothbart, Ahadi, Hershey, & Fisher, 2001). In addition, difficulty at separation was added because it has been linked to temperament measures (Rothbart & Bates, 1998) and it may indicate one's difficulty adjusting to the child care environment. Finally, aggression was added because it can also be a manifestation of one's adjustment difficulties and has been associated with the classroom environment (Werthamer-Larsson, Kellam, & Wheeler, 1991). Taken together, each child was rated on seven items regarding temperament. The items were: shy, aggressive, easy going, easy to upset, active, persists at activities, and difficulty at separation. The items were rated as usually, sometimes, or rarely demonstrated. This simple rating system was used to ease the provider's participation load.

### *Diaries by Provider*

Diaries can be used to capture low-frequency events as well as spontaneous behaviors in naturalistic settings (Laurenceau & Bolger, 2005). The providers were trained to collect retreat use and other relevant information on a daily basis throughout the study period. In pilot research, the providers reported that because they had long days of child care responsibilities with additional paperwork, they needed a data collection system that was simple and could be used quickly. The goal in this study was consistent with Bolger et al.'s (2003) observation that diaries can be designed to be short and completed within several min. Some providers in this study informally noted that they felt that, as experienced caregivers, they were confidently able to identify cases of retreat use. The validation of their expertise may, in a small way, have compensated for the burden of participation (Weinberger, 2000b).

*Daily record.* This form was used to record children's attendance. The daily record was used in conjunction with the retreat diary to provide some context regarding children's retreat use. Each child's health status (i.e., fine, cold symptoms, or other) and mood (i.e., fine, fussy, tired, or high energy) were noted.

*Retreat use.* The researcher discussed examples of retreat use with each provider. A retreat was uniformly described to the providers in the following way: "It is a place where a child chooses to go to in order to pull away from the activity of the group. It does not refer to 'time-out' or naptime, and it must be self-initiated." The providers were asked to report all retreat behaviors, including those that took place outdoors. Each provider's view of a retreat can be unique and can ulti-



mately account for differences in their recording of retreats. Efforts to improve reporting consistency included training providers and providing directions in person, in a written format, and on the telephone. Underreporting of retreat episodes was a concern, as providers were often caring for and observing children in multiple locations. Thus, the subsequent data may reflect a conservative estimate of how frequently retreats were used.

The providers were instructed to use the retreat form each time a child initiated the use of a retreat. The first child to use a given retreat was tracked. The location, time, and activities prior to entry and following departure were noted. Possible activities that the child could engage in alone or with other children were listed for the provider to check off. Sample activities included watches others, cuddles with comfort objects, and cries or pouts.

## RESULTS

In this study, children's use of retreats in family child care can be described according to retreat location, retreat rate, retreat users, and retreat activities.

### Where Are Retreats Used?

It was expected that children would select informal retreat spaces that serve other functions. Almost all of the retreats were reported to take place indoors (94.7%), and the largest percentage of retreats took place in a designated play room (48.7%), with many other retreats occurring in the living room or den (20%). Other retreat locations included the kitchen (9%), a child's bedroom (9%), a hallway (7%), and the dining room (1%). There was a diverse assortment of specific retreat locations ( $n = 55$ ) noted within these areas, including on resting mats, behind furniture, at a table, in a play house, on a pillow, and at a window. The most often cited retreat spot was on soft seating (such as a couch or easy chair,  $n = 12$ ; 22% of the noted locations). In summary, it appears that children found ordinary spaces around them to retreat to. These retreat spaces were typically located out in the open and used in a variety of other ways.

### How Often Are Retreats Used?

It was expected that retreat use would be a relatively low-frequency behavior. Based on data from the nine family child care providers, there was at least one retreat use recorded for 88% of the days of data collection ( $M = 9.5$  days), with a total of 76 retreat episodes recorded. As previously discussed, this may reflect an underreporting of retreat episodes due to provider surveillance constraints.

The rate of retreats did not differ based on the season of data collection; however, it did vary based on the time of day. Retreats were used throughout the day; the majority of the retreats (57%) took place in the earliest third of the day (8:00 a.m.–11:15 a.m.), as compared to midday retreats (17% between 11:15 a.m.–2:30 p.m.) and late-day retreats (25% after 2:30 p.m.).

The retreat rate differed in each family child care home. Some providers reported many retreat episodes, whereas others reported the minimum number requested (range = 5–21,  $M = 8.44$ ). Nevertheless, there were no noted relationships between retreat rate and measures based on the FDCRS. The cumulative FDCRS score (range = 4.06–6.03;  $M = 5.07$ , indicating good care on average) and all six measurement domain scores, including the spaces and furnishings domain scores (range = 4.29–6,  $M = 5.05$ ), were not found to be correlated with retreat rates (based on the Spearman rank correlation coefficient). The two specific items most closely related to retreats (“spaces to be alone” for infants and “spaces to be alone” for children 2 years old and older) were also not correlated with retreat rate (range = 3–6,  $M = 5$ ). In addition, the provider’s age and educational level were also unrelated to the retreat rate noted in the homes. Only one provider measure was associated with retreat use. The number of years of experience as a provider (range = 3–9 years,  $M = 5.17$ ) was positively correlated with the number of retreat episodes reported (Spearman’s  $\rho = .668, p < .05$ ). In summary, retreat use appeared intermittently and was not uniformly exhibited throughout the day or from one family child care home to the next.

### Which Children Were the Most Likely to Retreat?

It was expected that preschoolers would use retreats more often than both younger children and school-age children. Boys were expected to use retreats at a higher rate than girls. The role of temperament and other characteristics that might distinguish retreating and nonretreating children were explored.

I found that 46% of children in care ( $n = 30$ ) were reported to use a retreat one or more times (range = 1–10,  $M = 2.53$ ) during the period of observation. Children who did and did not retreat during the study period were similar across many factors, as indicated in Table 1. At first glance, age did not seem to distinguish retreaters from nonretreaters. Children who retreated ( $M = 42.33$  months) were not significantly older than those who did not retreat ( $M = 41.20$  months,  $t$  test  $p > .05$ ), in spite of the absence of any retreaters in the under 1-year-old category. However, under closer examination, age did matter. As seen in Table 1, the most frequent retreat users were not 3- and 4-year-olds but 2-year-olds (i.e., 79% of 2-year-olds retreated;  $\chi^2(1, N = 65) = 7.5, p < .01$ ). As expected, all preschoolers, excluding infants, retreated at a higher rate than school-age children (60% and 29%, respectively).

Surprisingly, girls and boys were retreaters at similar rates (44% and 48%, respectively), with girls initiating 58% of the retreat episodes. For most of the tem-

TABLE 1  
Comparisons Between Retreating and Nonretreating Children

	<i>Retreating (%)</i>	<i>Nonretreating (%)</i>	<i>Reported N</i>
All children	30 (46)	35 (54)	65
Age distribution			
Younger than 1	0 (0)	8 (100)	8
1	4 (44)	5 (56)	9
2	11 (79)	3 (21)	14
3	4 (44)	5 (56)	9
4	7 (64)	4 (36)	11
5	2 (33)	4 (67)	6
6	1 (20)	4 (80)	5
7–11	1 (33)	2 (67)	3
Age grouping			
Preschool (1–4)	26 (60)	17 (40)	43
School age (5–11)	4 (29)	10 (71) (4.31, $\chi^2$ )*	14
Gender <sup>a</sup>			
Male	14	15	29
Female	16	20	36
Temperamental rating			
Shy <sup>a</sup>			
Usually/sometimes	10	15	25
Rarely	18	14	32
Easy going <sup>a</sup>			
Rarely/sometimes	5	7	12
Usually	24	22	46
Easy to upset <sup>a</sup>			
Rarely	11	13	24
Usually/sometimes	18	16	34
Active <sup>b</sup>			
Rarely/sometimes	3	7	10
Usually	26	22	48
Persists <sup>a</sup>			
Rarely/sometimes	13	10	23
Usually	15	16	31
Aggressive			
Rarely	8 (29)	19 (70)	27
Usually/sometimes	21 (67)	10 (32) (8.38, $\chi^2$ )**	31
Difficulty at separation <sup>b</sup>			
Usually/sometimes	4	6	10
Rarely	20	22	42
Family position			
First born	17 (65)	9 (35)	26
Later born	9 (36)	16 (64) (4.4, $\chi^2$ )*	25
Racial identification <sup>b</sup>			
Black, Asian, Multiracial	2	3	5
White	23	22	45

(continued)

TABLE 1 (Continued)

	<i>Retreating (%)</i>	<i>Nonretreating (%)</i>	<i>Reported N</i>
Ethnic identification <sup>b</sup>			
Non-American or non-European descent	3	4	7
American or European descent	8	10	18
Mother's education <sup>a</sup>			
At least a bachelor's	13	10	23
Not a bachelor's	11	13	24
Father's education <sup>a</sup>			
At least a bachelor's	11	7	18
Not a bachelor's	10	15	25
Parents' marital status <sup>b</sup>			
Married	21	21	42
Other	4	4	8
Number of days per week in care <sup>c</sup>	4	3.5	64

<sup>a</sup>Nonsignificant *p* values based on chi-square. <sup>b</sup>Nonsignificant *p* values based on Fischer exact. <sup>c</sup>Nonsignificant *p* values based on *t* tests.

\**p* < .05. \*\**p* < .01.

peramental ratings, children were rated similarly whether they retreated or not. The one exception was the aggression rating. Children rated by providers as sometimes or usually aggressive were more likely to use retreats than children rated to be rarely aggressive (68% and 29%, respectively;  $\chi^2(1, N = 58) = 8.38, p < .01$ ). Another difference between children who did and did not use retreats was that firstborns were significantly more likely than later born children to use retreats (65% and 36%, respectively;  $\chi^2(1, N = 51) = 4.4, p < .05$ ). Yet, the number of siblings or the absence of siblings did not reveal any significant relationship to retreat use. Most of the demographic, family structure, and child care history characteristics did not distinguish the retreaters from the nonretreaters. In summary, a prototypical retreat user may be described as a young, firstborn child who has been reported to be sometimes or usually aggressive.

### How Are Retreats Used?

It was expected that children would use the retreats in a variety of ways (i.e., sometimes engaging in play and other times being relatively inactive). It was also expected that children would not be exclusively solitary in their retreat use. In this section on how children use retreats, contextual factors that may contribute to variations in retreat behavior are addressed.

Children's retreat behavior was indeed diverse and typically more than one activity was noted during a retreat episode. Because 57% of the retreats took place in the earliest third of the day, it is not surprising that the highest rate of activities to

be recorded also occurred during this time period. The exceptions to this pattern were watching others (40% cited late in the day) and cuddling comfort objects (45% cited late in the day).

As seen in Figure 1, the most frequently cited behaviors were playing with toys (43% of retreats), watching others (34% of retreats), and crying or pouting (28% of retreats). In many cases, a particular activity was reported infrequently. To make reasonable comparisons, activities were combined into global categories of behavior. These new categories were *engaged behavior* and *passive behavior*. Engaged behavior was noted if a child participated in any of the following activities during a retreat: playing with toys, playing with others, reading or playing with books, or talking with others. Passive behavior was noted if a child participated in any of the following activities during a retreat: watching others, crying or pouting, cuddling comfort objects, or looking at objects or pets.

The great majority of retreat episodes were solitary; children initiated the solitary use of a retreat 89% of the time. In the cases where the retreat duration was noted, the solitary retreat episodes were shorter in duration ( $n = 54$ ,  $M = 16.23$  min) as compared with retreats when other children initially or later joined the retreat ( $n = 16$ ,  $M = 29.95$  min,  $t = 3.02$ ,  $p = .007$ ). Children's activities in solitary retreats were not always the same as those in nonsolitary retreats. As seen in Figure 2, children were significantly more likely to be involved in passive behaviors during solitary retreats as compared with nonsolitary retreats ( $\chi^2(1, N = 74) = 6.97$ ,  $p < .01$ ). In solitary retreats, two of the activities characterizing engaged behavior (i.e., playing with others and talking with others) were not relevant for solitary situations and were therefore omitted in this particular comparison. Both playing with toys and reading or playing with books was similar for both types of retreats.

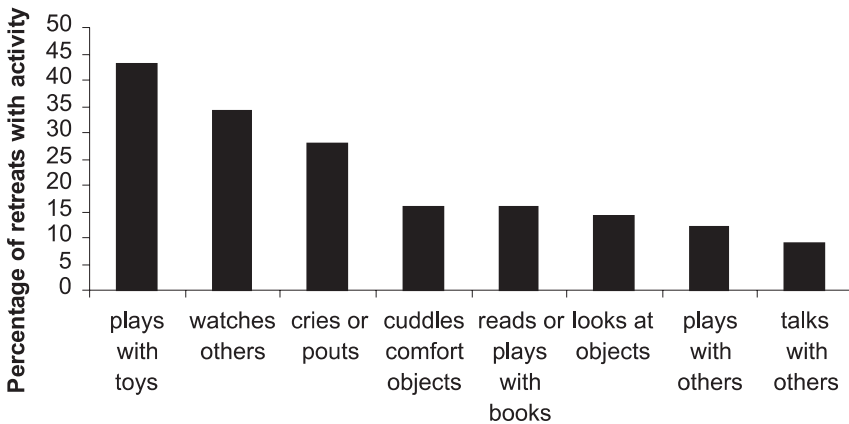


FIGURE 1 Retreat activities.

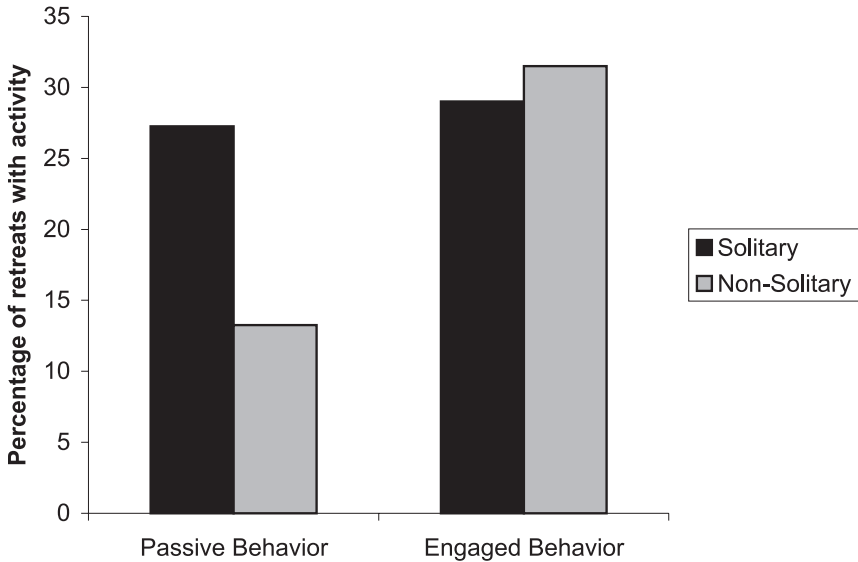


FIGURE 2 Retreat activity by solitary status.

There was a higher rate of fully solitary retreat use (where other children never joined in) for children who were rated to be fussy, tired, or otherwise in a negative mood (83%) during the observation day as compared with children who were in a fine mood (65%). Children who were in a negative mood were more likely to participate in passive behaviors as compared with children in a fine mood ( $\chi^2(1, N = 70) = 7.93, p < .01$ ) as seen in Figure 3. Although the rate of playing *with toys* was similar for children in a fine mood as compared with children who were in a negative mood, the broader category of engaged behavior differed for children based on their moods. In other words, children in a fine mood were more likely to be involved in engaged behaviors as compared with children in a negative mood for the day ( $\chi^2(1, N = 64) = 5.85, p < .05$ ).

With respect to children's age, it can be noted that, as expected, children 5 years old or older were infrequent retreat users. When these older children used retreats, they did play with toys and read, but they were never noted to be involved in any of the four passive behaviors. The younger children better fit the aforementioned pattern of playing with toys, watching others, and crying or pouting during a retreat episode. The two younger groups did not significantly differ in their rate of the global measures of passive and engaged behavior. However, the 1- and 2-year-olds did cuddle comfort objects at a high rate (i.e., 26% of retreat episodes as compared with only 9% for 3- and 4-year-olds;  $\chi^2(1, N = 66) = 3.24, p = .072$ ).

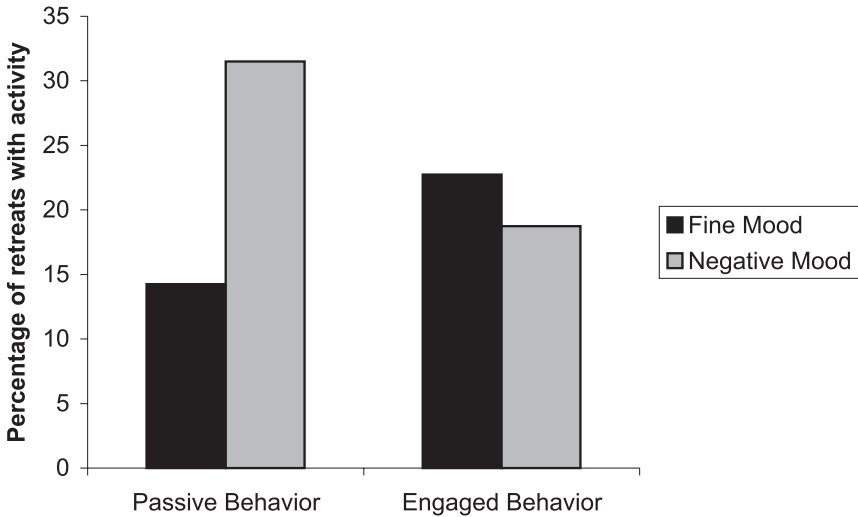


FIGURE 3 Retreat activity by mood for the day.

With respect to gender, boys and girls not only retreated at similar rates, but they participated in several of the activities at similar rates, including *playing with toys*. This similarity between boys and girls was found with engaged behavior. However, as shown in Figure 4, boys were more likely to be involved in passive behaviors as compared with girls ( $\chi^2(1, N = 70) = 7.17, p < .01$ ). In particular, boys were more likely to watch others during a retreat as compared with girls ( $\chi^2(1, N = 26) = 3.94, p < .05$ ).

As previously mentioned, children who were reported to be sometimes or usually aggressive were more likely to use retreats as compared with children who were reported to be rarely aggressive. These usually or sometimes aggressive children did not significantly differ in retreat behavior from the rarely aggressive children. For example, playing with toys was frequently noted for each group. The rarely aggressive children were only marginally more involved in engaged behaviors as compared with the other children ( $\chi^2(1, N = 50) = 3.7, p = .055$ ).

As previously noted, firstborns were more likely to use retreats as compared with later born children. As seen in Figure 5, firstborn children were more likely to be involved in engaged behaviors during their retreats as compared with later born children ( $\chi^2(1, N = 55) = 6.15, p < .05$ ). The later born children were not involved in significantly more passive behavior as compared with firstborn children. The single exception was that the later born children were more likely to be crying as compared with firstborns ( $\chi^2(1, N = 69) = 3.90, p < .05$ ).

In summary, children who used retreats were most likely to use them alone, and they were most likely to be playing with toys, watching others, or crying and pout-

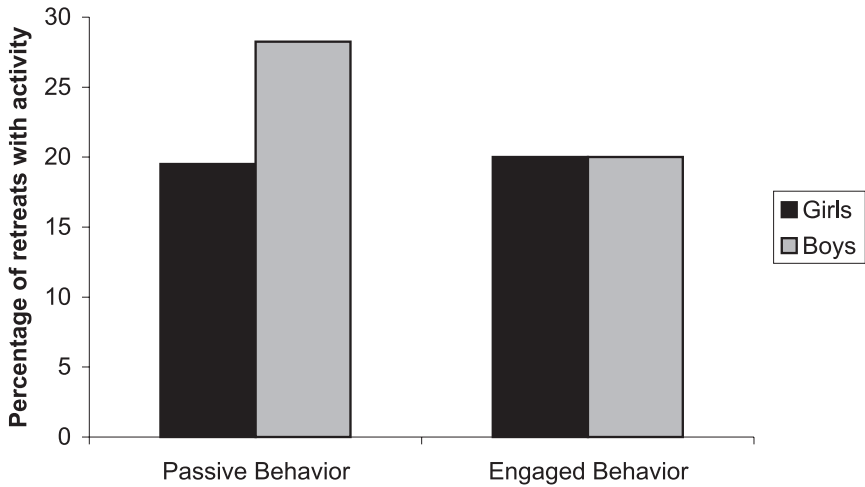


FIGURE 4 Retreat activity by gender.

ing. Playing with toys was the most frequent activity and appeared to be quite stable, without much variation based on child characteristics. However, the global measure of engaged behavior varied across retreats in that firstborn children and children rated to be in a fine mood for the day and, marginally, those previously rated as rarely aggressive tended to be more involved in engaged behavior as compared with their counterparts. The global measure of passive behavior also varied

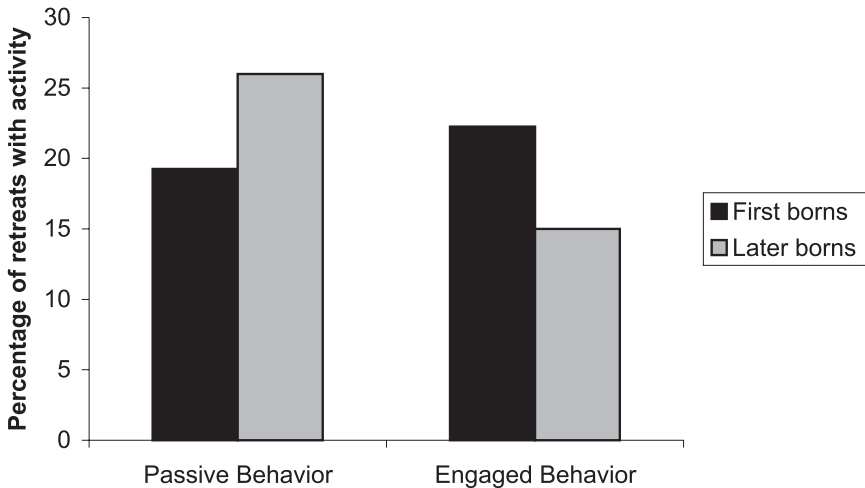


FIGURE 5 Retreat activity by birth order.



across retreats. Boys or children using a retreat alone or children who were rated to be in a negative mood for the day tended to be more involved in passive behavior as compared with their counterparts.

## DISCUSSION

The results of this study can be used to better understand children's use of retreat spaces in family child care homes. With respect to the location of retreats, the findings indicated that retreats were indoor spaces not specially created by the providers or the children; nor were spaces used exclusively as retreats. In the context of family child care, children relied on the flexible, multipurpose furnishings that characterize its home-like setting. The children in care were young and did not have very much access to outdoor retreats; it is therefore not surprising that their retreats differed from the creative, outdoor retreats that children have reported about so fondly (e.g., Hart, 1979; Kylin, 2003). The sporadic use of retreats is consistent with the nonspecific nature of these retreat spaces and the self-initiated basis of retreat use. According to provider reports, just under half of the children sought a retreat opportunity at least once during the study period. Even though the data collection was designed to be simple, it is possible that the reported number of retreats was a conservative estimate, with other retreat episodes being overlooked or unrecorded in the busy family child care environment. Notably, only two retreat episodes were directly observed during the approximately 36 hr of the researcher's visits.

The children who used retreats did not stand out from the other children as being particularly unique. Yet, there were some differences between those children that did retreat and those that did not. Children under 1 clearly did not use retreats, yet other very young children did use them. School-age children in this context were the least frequent retreat users. These children attended the family child care home for fewer daily hours on average than younger children (i.e.,  $M = 5.77$  hr vs.  $M = 7.68$  hr, respectively). Also, their experience in the family child care setting may have been more relaxing than their school setting and perhaps made retreat use less about stress reduction and control over one's environment than it might have been for younger children. School-age children used retreats exclusively to engage in play or to read and never used retreats for passive behavior such as watching others. The youngest retreat users actively played in the retreats as well, but they were reported to cry or pout and cuddle comfort objects reasonably often. The youngest retreating children displayed the greatest diversity of retreat activities. A prototypical feature of family child care homes is that they are made up of mixed age groupings. The findings here suggest that retreats in family child care homes can have different uses at different developmental periods. For example, a 2-year-old at the end of the day may retreat into a distant corner to quietly cuddle

with a comfort object, and a first grader may use the same corner at a different time to have a chance to play with the "big kids'" toys without disruption.

With respect to gender, it was expected that boys would retreat at a higher rate than girls. However, they did not. The activities within the retreats differed to some extent by gender. Boys were more likely to watch others from a retreat and were involved in generally more passive behavior as compared with girls. With respect to temperament, only aggressiveness was related to retreat participation, with children rated as sometimes or usually aggressive using retreats more frequently. Perhaps the providers kept a closer eye on these children and were therefore more likely to see them use a retreat. This is consistent with the finding that there was similar retreat behavior noted for the aggressive and less aggressive children. Notably, anecdotal comments from some of the providers were that shy children would retreat at higher rates; this expectation was not supported by the data.

Children using retreats were most frequently and consistently involved in play as compared with any other activity. Other retreat behaviors were less uniformly present and appeared to be influenced by a number of characteristics. Firstborn children and children noted to be in a fine mood for the day displayed more engaged behaviors as they used retreats as compared with their counterparts. As previously mentioned, school-age children exclusively displayed engaged behaviors as they used retreats. However, children noted to be in a negative mood for the day and boys (rather than girls) were more likely to be involved in passive behaviors when they used retreats. In addition, children using a retreat alone were more likely to be involved in passive activities than children retreating together.

A large majority of the retreats were fully solitary. Yet, it is unclear from previous research if teachers, family child care providers, or parents themselves desired space and time for children to choose to sometimes be alone. Parents sometimes have concerns about children's privacy-seeking needs. In a study describing parents' perceptions of preschool children's privacy needs at home, McKinney (1998) found that parents saw spatial privacy-seeking desires in a negative light. Parents characterized their children's choices as responses to strong angry feelings or their children's plan to conceal something. Readdick (1993) claimed that whereas adults may value having their own opportunities for "solitary pursuits," (p. 60) adults don't value these opportunities for children. Direct observations of preschool teachers support this. In a study done in a preschool setting, teachers intervened more with children involved in nonsocial as compared with parallel or social play (Coplan & Prakash, 2003).

The concern for children who sometimes choose solitude in a group setting may come from the knowledge that, as children leave early childhood and enter middle childhood, peer rejection can produce unwanted solitude. However, solitude does not always indicate social exclusion, particularly before kindergarten (Gazelle & Ladd, 2003). For example, solitary-passive play during early childhood typically involves object-oriented play that is focused and reflects task persistence (Rubin &

Coplan, 1998). In a study addressing thinking skills in preschool children involved in various forms of solitary play, Lloyd and Howe (2003) found that only reticent solitary play (or onlooker and unoccupied play) had a strong inverse association with convergent and divergent thinking. In other cases, solitary play appears to co-exist well with these thinking skills. As Lloyd and Howe suggested, solitary play in and of itself doesn't indicate an immature form of play; it must be considered with respect to other attributes, such as the play materials and play goals. As found in the current study, play was a frequent retreat activity. Perhaps a solitary retreat space can reduce children's cognitive load from external forces, allowing them better options for focused play. Future research should assess the various forms of solitary and nonsolitary play within retreat spaces.

Adult concerns about solitude may limit children's retreat options in family child care. To Readdick (1993), adult limits on children's solitude are evident in child care and school environments. She quipped, "In many instances the only provision for solitary pursuits are the bathroom stall and the time out chair" (p. 60). Readdick argued that in addition to providing and creating private spaces for children, teachers need to facilitate solitary options for children by talking with them directly about it. Other suggestions have been made about the provision of appropriate materials for solitary play and teacher sensitivity about children's individual play preferences (Lloyd & Howe, 2003). In other words, teachers may be more selective when intervening with children playing alone, focusing on children who anxiously avoid others or who are consistently unoccupied or passive. If adults can value children's occasional need to pull away from the demands of the group, then those children who desire solitude may receive it whereas those children who may rely too much on retreats to avoid others may have teacher-moderated retreat access with other forms of support in its place.

It may be useful for researchers and providers alike to more closely examine individual children's patterns of retreat experiences. To do this, the many possible forms of play as well as other activities that were not specifically measured in this study need to be assessed in future research. In addition, a potentially meaningful fluctuating variable that was not tested here was a child's experience of stress. Perhaps physiological stress inside and outside of a retreat could be measured in future research. Children with elevated stress hormones may enter and use retreat spaces at different rates and in different ways than children without elevated stress hormones. Recent research on infant and toddler cortisol concentrations has shown that very young children in center-based care specifically have rising levels of this hormone as the day in care continues (Watamura, Donzella, Alwin, & Gunnar, 2003.) Watamura and colleagues have suggested that "the toddler period may be the peak period for rising stress-sensitive hormone levels for children in full-day, center-based care" (p. 1015). With respect to the current study, retreats that took place late in the day, although less frequent, were more passive in nature as compared with retreat activities earlier in the day. Perhaps retreat passivity later

in the day is a reflection of some children's stress response to having a full day in group care. Children's negative moods were associated with more passive behavior in retreats. Also, consistent with Watamura et al.'s assertion about toddlers, 2-year-olds in this study were the most frequent retreat users, and the 1- and 2-year-olds were the ones who most commonly displayed cuddling with comfort objects during retreat episodes. It may be that some children use a retreat more often or more passively if they are experiencing stress. Future research would be needed to test a link in family child care between retreat use and biological markers of stress. Moreover, a more comprehensive assessment of temperament should be used to better determine important relations between individual differences among children, their experience of stress, and their retreat behavior.

In practice, young children in family child care homes have modest retreat options. Providers need to supervise children and restrict their movement to some extent. Another consideration is that family child care homes serve the needs of not only the children in care but the providers' families as well. Therefore, providers may be constrained in how they arrange their homes. However, as reported elsewhere, family child care providers can overcome such obstacles and provide welcoming opportunities for children to retreat (Weinberger, 2000a). Paying attention to the location and materials of potential retreat spaces can be constructive. For example, a location such as a dining room window seat may be close enough for supervision, yet not a place overflowing with activity. Providers can use physical cues to inform children about a retreat. For example, seeing gauze curtains hanging in a closet without doors, children would expect a space that offers some privacy. The location and materials may differ based on the group of children in a given family child care home. As suggested by this study, having soft seating with nearby comfort objects such as stuffed animals makes sense if there are very young children in care, whereas family child care homes that include school-age children may want to provide prized play materials in a reserved retreat space just for them. Although this study suggests that children are flexible and use nearby and readily available retreat locations, providers may find that there would be greater use if there were more retreat options for children. In this study, children's use of retreats reflected variety that was likely to be a reflection of their needs. Retreat use can be viewed as a potentially adaptive "environmental strategy" (Korpela, Kyttä, & Hartig, 2002, p. 387) that children apply as their needs change throughout the day as well as from one developmental period to the next.

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