

# *The Roving Caregiver Program*

## *A family-based early intervention programme for enhancing early childhood development and parenting*

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It is well established that in different cultural communities around the world, young children who live under difficult economic and social circumstances are particularly vulnerable to cognitive and social delays prior to entry into formal schooling (see McLoyd, Aikens and Burton 2006). Developmental delays that appear in the early childhood years seem to persist into adolescence, where the negative outcomes are even more pronounced. For example, children from poor households in the USA show a greater likelihood to drop out of school, become pregnant, and engage in crime compared with those from more privileged economic backgrounds (see Duncan and Brooks-Gunn 1999; McLoyd, Aikens and Burton 2006). In the English-speaking Caribbean, high rates of developmental delay and youth violence have been recorded in poor Jamaican children (Crawford-Brown 1997, 1999; Samms-Vaughan 2006), and severe physical punishment has been determined as a predominant method of addressing childhood transgressions in Jamaican (Samms-Vaughan, Williams and Brown 2005), Barbadian (Payne 1989), Dominican (Barrow 2003) and Kittitian families (Rohner, Kean and Cournoyer 1991). The psychological and educational costs to children of harsher forms of discipline that are void of explanations (e.g., power assertive discipline techniques, physical punishment) are spelled out in detail in authoritative reviews (e.g., Gershoff 2002) and recent research articles (Lynch et al. 2006; McLoyd et al. 2007).

The goal of this article is to provide a synopsis of the Roving Caregiver Program (RCP), a home-based intervention programme designed specifically for young Caribbean children who are at risk for academic and social delays that may be attributed

to poverty and inadequate parenting. Three issues are at the core of our discussion: (1) the manner in which the RCP contributes to strengthening the care environment of young impoverished children at risk for developmental delays; (2) key aspects of the RCP model that may be credited with successful outcomes in children, families and the community; and (3) the main challenges confronting the RCP model as it is being implemented more broadly across different Caribbean nations. Before addressing these issues, however, it is necessary to discuss the conceptual and theoretical underpinnings of the RCP model. Much of what is included in this piece is based on reports submitted to the Bernard van Leer Foundation and to the Caribbean Child Support Initiative based in Barbados.

### **Theoretical/conceptual background**

The RCP approach to early intervention is firmly grounded in contemporary child development and family theories and conceptual frameworks that have emerged within multiple disciplines that emphasise the total ecology or developmental niche of the child, and stress accommodations between the developing child/parent caregiver and the immediate surroundings and beyond (Ogbu 1981; Super and Harkness 1997; Whiting and Whiting 1975). Thus, the model takes into consideration social relationships outside of the family that affect childhood and family development, and incorporates the notion that neighbourhoods and communities can mobilise social capital to improve on childrearing tendencies that adversely affect social and cognitive outcomes prior to entry into formal schooling (see Jarrett and the Alexander Consulting Group 1995). Accordingly, recognising the adaptive-resilient nature of families, the RCP focuses on strengthening the early care environment of children and families

who live under challenging social and economic circumstances. Resilience refers to the ability of adults to function effectively as parents in the face of adverse economic and social difficulties within the near environment (see Rutter 1990), drawing on community resources such as multiple caregivers and religious institutions for support in executing parenting roles and responsibilities, and displaying good home environment management skills (e.g., family cohesion, good child monitoring skills).

Within the RCP, the early care environment is broadly conceived of in terms of its structural configurations (e.g., different marital and mating systems and familial structural arrangements) and childrearing processes, and the interdependent, reciprocal relationships between families and communities. It considers key experiences within families that can be modified through interventions that have implications for changing entrenched parenting practices and beliefs or ethno-theories about childrearing and education (e.g., harsh physical discipline, inadequate cognitive stimulation) at the community and societal level (e.g., alloparenting, monitoring children, close personal relationships). This approach to early intervention not only meshes well with the cultural-ecological models mentioned earlier, but also captures principles stipulated in the 'Convention on the Rights of the Child' (see General Comment No. 7, Implementing Child Rights in Early Childhood, 2006).

By targeting for intervention the early care environment within the family, the RCP recognises three fundamental concepts: that providing economically disadvantaged families with services during the earliest years in a child's life has a greater likelihood of arresting chronic risk later on; that parents and other caregivers within the home environment are children's first teachers and therefore are critical in encouraging the acquisition of and the nurturing of cognitive and social skills during one of the most sensitive periods in the human life span; and that a home-based model of intervention embraces the perspective that the home environment provides a 'haven of security' to very young economically disadvantaged children whose families may not otherwise seek intervention services. Indeed, research data support the early use

of intervention services for children as a beacon of hope for ameliorating multiple risks in their daily lives (Kammerman and Kahn 2004), and point to the benefits to families of strengthening the parent-child bond and interaction patterns during the early childhood years (Kagitcibasi 1999).

### **The RCP model and its strengths**

Building on a rich history of home visiting programmes (see Sweet and Applebaum 2004 for a recent meta-analysis), the RCP has its origins in an intervention project developed for young economically disadvantaged mothers in Jamaica. Basically, the RCP trains paraprofessionals ('Rovers') to work with caregivers and young children in and around the home environment. During weekly visits lasting between 30 and 60 minutes, Rovers use specified materials and follow a routine set of stimulation (interaction) exercises geared at promoting strong parent-child attachment bonds, good parenting skills and cognitive and social development in children (see Roving Caregiver Program 2003). Additionally, there is a component that addresses parental beliefs and practices regarding childrearing. The RCP has refined some aspects of its approach to home intervention prior to implementation in other Caribbean nations (e.g., Dominica, St Kitts, St Lucia).

Data from implementation in Jamaica suggest that the RCP had a strong impact in preventing further decline in cognitive functioning in young children prior to entry into school compared with children who were not enrolled in the programme. Currently, there is a more systematic long-term study being conducted in St Lucia to further delineate the effects of the RCP on children and parents.

Noteworthy strengths of the RCP are:

- It is grounded in culturally relevant theoretical principles and research on early childhood development and early intervention. That is, the RCP is driven by principles embedded in cultural, developmental and intervention models of human development.
- Family intervention is community based and takes into consideration the diverse familial structures and diverse individuals who may raise children in different communities.
- During home visits, the emphasis is on children's



According to the Roving Care Program, parents and other caregivers within the home environment are the children's first teachers and therefore are critical in nurturing a child's cognitive and social skills

- psycho-motor and perceptual skills (e.g., grasping a ring, encouraging head movements and gentle rolling, reaching for and grasping objects, scribbling, rolling and throwing a ball) and cognitive and early literacy skills (e.g., face to face encounters, assembling puzzles, looking at books, playing hand and counting games and working with puppets).
- It focuses on improving parent-child interactions and strengthening parent-child bonds (e.g., chatting with the baby, singing to/with, turn-taking conversations, imitating sounds, using more complex language and gestures as children age, naming objects and people, labeling body parts, looking and listening, using puppets, asking questions). It has a strong parent-education component that zeros in on parent management techniques, health and childhood safety issues, and growth-promoting childrearing practices.
- The stimulation exercises are both culturally and developmentally appropriate, incorporating both 'home-made' and manufactured materials.
- It has a well-developed set of manuals, videotapes and other materials for working with parents and children, and also for training and monitoring Rovers. Specific units for home visits and developmental activities are provided.
- It uses paraprofessionals selected from the local communities. They possess epistemological or local knowledge about the communities and consequently are better able to relate to families and community members and leaders.
- It draws on the social and intellectual capital of the community by utilising the church and other organisations to provide childrearing, religious and healthcare information and guidance to families.

**Challenges in the delivery of the RCP**

Not unlike other intervention programmes, sustainability of positive gains made as a result of intervention efforts is a primary challenge facing the implementation of the RCP in Caribbean countries. In several communities across the Caribbean, there is a gap in the provision of quality

early childhood education for children prior to entry into primary schools.

Perhaps equally challenging, and tied to sustainability, is the need to further focus on good parenting skills. Arguably, the most economical and efficient path to improving childhood outcomes rests with caregivers. In this regard, the RCP presents models of parenting that emphasise warmth and affection, use of limit setting, explanations and other non-punitive methods of child guidance.

Finally, in assuring parental input in interaction exercises, the RCP is introducing a 'plan-do-review' sequence that has been integral to neo-constructivist approaches to educating young children (e.g., High Scope; Weikart and Schweinhart, in press). This would have an empowering effect on parents and may have greater carry-over currency in encouraging parental activities with children when the Rover is not present.

### Conclusion

In the main, the RCP shows tremendous promise in attenuating developmental delays in young Caribbean children who live in challenging social and economic circumstances. The RCP continues to modify elements of the interaction exercises between Rovers and children, Rovers and parents, and parents and children with the hope of maximising optimal childhood outcomes in the face of adversity.

### Note

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