

Maternal and non-maternal care in infancy and later child cognitive, language and motor development in Chile: Does type of care matter?

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EARLY CHILDHOOD RESEARCH QUARTERLY

Volume: 51

Pages: 204-214

DOI: 10.1016/j.ecresq.2019.10.010

Published: 2020

Document Type: Article

[View Journal Impact](#)

Abstract

Growing numbers of children across the world start non-maternal care in the first year of life. However, few studies have described how different infant care experiences may relate to later child cognitive, language and motor functioning, and most analyses have focused on samples from historically industrialized regions. Cognitive, language and motor subscores (TEPSI) and receptive vocabulary scores (TVIP) obtained through direct testing of 24-to-48-month-old children (n = 7564) from the Chilean Longitudinal Survey of Early Childhood were compared based on retrospective reports of care received as infants. Children who, as infants, had received one of four types of non-maternal care - center-based, grandparent, other relative, and non-relative care - were compared to those who had exclusively experienced maternal care (71.8%). Series of regressions with propensity score models (PSM) were performed. Compared to maternal care, children in center-based care and grandparent care had higher total TEPSI scores (d = .19, p < 0.05) (d = .19, p < 0.01) and TEPSI language subscores (d = .20, p < 0.05) (d = .20, p < 0.01), while those in grandparent care also had higher TEPSI motor subscores (d = .08, p < 0.05). In contrast, children in nonrelative care had lower TVIP receptive vocabulary scores (d = -.38, p < 0.01). These findings contribute to the debate on national policies supporting specific types of non-maternal care and their impact on child development. (C) 2019 Elsevier Inc. All rights reserved.

Keywords

Author Keywords: [Non-maternal care](#); [Early childhood](#); [Infancy](#); [Child development](#); [Chile](#)

KeyWords

Plus: [QUALITY](#); [ASSOCIATIONS](#); [EDUCATION](#); [IMPACTS](#); [CENTERS](#); [PROGRAM](#); [POLICY](#); [SKILLS](#); [LIFE](#)

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Funding

Funding Agency Show details	Grant Number
Becas Chile	
Comision Nacional de Investigacion Cientifica y Tecnologica (CONICYT)	PIA CIE160007

[View funding text](#)

Publisher

ELSEVIER SCIENCE INC, STE 800, 230 PARK AVE, NEW YORK, NY 10169 USA

Journal Information

- **Impact Factor:** [Journal Citation Reports](#)

Categories / Classification

Research Areas: Education & Educational Research; Psychology

Web of Science Categories: Education & Educational Research; Psychology, Developmental

Document Information

Language: English

Accession Number: WOS:000527922800018

ISSN: 0885-2006

eISSN: 1873-7706