

THE MEETING OF TWO SYSTEMS: A SYSTEMIC APPROACH TO SEPARATION ANXIETY IN LITTLE CHILDREN ENTERING THE NURSERY DEPARTMENT OF THE KINDERGARTEN (PART 2)

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KLJUČNE BESEDE: otroško varstvo, separacijska anksioznost, sistemski pristop

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ABSTRACT

With the progressive democratisation of the society the interrelations between the family system and the kindergarten system became more transparent and information can easily cross the boundaries between the two systems so that there are more opportunities for questioning each other about the meeting of the child's needs.

Caretakers in public kindergartens are willing to do their best to fulfil children's developmental needs but they often do not have enough knowledge.

I designed the programme for sensitizing caretakers in nursery care to children's developmental needs. In the school year 1994/95 I ran the programme in one of the kindergartens in Ljubljana. On the basis of the better understanding of the proces of the personality development and child's developmental needs after the programme was finished, the kindergarten initiated some changes to the procedure of introducing children to the nursery care. In the article I represent the results of the introducing procedure as they are reflected through the interviews with the parents and staff.

POVZETEK

Z napredujočo demokratizacijo družbe postajajo tudi odnosi med družino in vrtcem čedalje bolj pregledni in informacije laže prehajajo preko meja enega in drugega sistema, s tem pa se večajo možnosti za dialog med njima o kvaliteti zadovoljevanja otrokovih potreb.

Varuhinje in vzgojiteljice v jasličnih oddelkih so pripravljene narediti najboljše, kar zmorejo, da bi zadovoljile razvojne potrebe otrok, vendar imajo za to pogosto premalo znanja.

Oblikovala sem program za senzibilizacijo vzgojiteljic v jasličnih oddelkih za boljšo uglasenost na razvojne potrebe otrok. V šolskem letu 1994/95 sem program izpeljala v enem izmed ljubljanskih vrtcev. Po zaključenem programu za vzgojiteljice in varuhinje so na osnovi boljšega razumevanja procesa razvoja osebnosti in otrokovih razvojnih potreb v vrtec uvedli spremembe v postopku uvajanja otrok v jaslične oddelke. V članku predstavljam rezultate postopka uvajanja, kot odsevajo skozi intervjuje s starši in zaposlenimi.

PUBLIC CHILD-CARE PROVISION IN SLOVENIA

Due to the long tradition we have comparatively accessible public system of child care and preschool education. In the public kindergartens there is still enough place for all children in need of care and education for the subsidized price which depends on parents' salaries. Parents can choose between part time and full time programmes.

According to the statistical data from the year 1995 54,4% of all children in preschool age were enrolled in public kindergartens. 28% of all children up to two years of age and 49% of all children at the age of three were enrolled in nursery departments of the kindergartens. In Europe only Denmark and France have greater share of the youngest children in public day-care arrangements (Bela knjiga, 1995).

With the progressive democratization of the society the interrelations between the two systems - the family system on one hand and the kindergarten system on the other - have changed, too. It seems that more information can cross the boundaries and there are more opportunities for questioning each other about the meeting of the child's needs. So maybe now it is the appropriate time to introduce some further changes.

Rather than asking whether early day-care is generally positive or negative for children, we should ask instead what conditions does it have to fulfill to be beneficial to children's development and to entirely family life.

THE PROGRAMME FOR SENSITIZING CARETAKERS IN NURSERY CARE TO CHILDREN'S DEVELOPMENTAL AND EMOTIONAL NEEDS

In the "White book" of care and education in Slovenia which is the main document regulating public child care there is a statement:

"Parents have the right to introduce their child to the kindergarten gradually. It means that they may stay with their child in his/her group in the kindergarten for a while." (Bela knjiga, 1995).

The way how to realize the proposed right is left to inventiveness of parents and nurses. From the evidence I had from my professional collaborating with kindergartens it seems that it was used in a very restricted amount. Parents

were usually invited to spend some time with their toddler in the group but at the same time they were reassured that everything would be fine for their child if they left, too. They were often informed by the staff that every child was crying a bit at the beginning and that crying stopped sooner if parents went out earlier. Parents who wanted to take the advantage of joining their child for more than a couple of days were often labelled as overprotecting to the child, and demanding or overintrusive to the kindergarten.

Invited by the chief of one of the kindergartens in Ljubljana who wanted to prepare the ground for more sensitive environment for the youngest children in the nursery care I ran the group of eight governesses, nurses and their assistants (all the staff of the department at that time) working in the nursery department of the kindergarten in 1994 and 1995.

All the participants agreed about the aims of our meetings: How to make connections between theory and its application in everyday practice.

The group met on wednesdays every third week for 90 minutes. We made an agreement about videotaping our sessions. There were ten meetings designed as workshops which always began with my introduction of the chosen topic, going on with the dialogue and illustrations from their rich experience from everyday practice and concluded with role play focusing on the topic and the interrelations between the two systems.

The theoretical background to the whole project was provided from object relation theory and attachment theory (the work of Margaret Mahler, Heinz Hartmann, John Bowlby, and Donald Winnicott) and systemic approach; particularly the Circular questioning with its opportunity for reflexivity, neutrality, and positive connotation, the Unique outcomes from Michael White and the Structural approach with its understanding of family life cycle, hierarchy, communication and boundaries. (Burnham, 1992; White, 1988) At the beginning of our project the members of the group informed me that they were sure their chief invited me because she was new and she could not bear the fact that the little children were crying a lot in the nursery care. They also told me that they did not like the children's crying either, but there was nothing to do (for they had tried everything yet) and through the years of working they became used to that. In a joke they proposed it would have been better for me to help their chief to accustom herself to such inevitable circumstances, as soon as possible.

I hypothesized that the "no change" position was strong and the symmetrical struggle might have been going on between the chief of the kindergarten and the staff of the nursery department. There was a danger that I would have got the position of the chief and the old pattern could proceed with its life in our project, too. The issue of power and control seemed to be embedded in the story of inevitable children's crying. Instead of searching for underlaid meaning of children's crying they turned the issue to the question of power: who is strong enough to bear it.

My belief was that a systemic approach to the task I had been given should allow me and the staff of the nursery care department to view the possible dialogue between the family system and the kindergarten system more flexibly and to challenge the old story often accepted from the both sides and serving to apportioning blame from one side to another and back. As a consequence a greater flexibility should enter the relationship between all included parties in nursery care.

The programme did not focus just on individual children, but on the social network which a child was part of. The aim of the programme was to give the caregivers a new understanding of the adult/infant relationship and the family/kindergarten relationship.

The programme also focused on the positive resources of caregivers, children and their families. The aim was to strengthen the caregivers' self-confidence and motivation by pointing out positive aspects and qualities in the way they cared for and interacted with the children.

At the beginning of our project they rejected to play their own roles and I had to accept role-playing of nurse or governess while they enjoyed very much playing the roles of demanding and overintrusive mothers.

My understanding of their position and their understanding of the position of the parents have grown step by step and slight differences began to occur. That was an entry for a new story through the connection with the old one. The balance between "no change" position and the orientation towards the change which no more seemed so dangerous oscillated.

Some months after the programme had finished we met again to evaluate it. They explained to me that their experiences with the project helped them to accept the next project prepared by their chief - the introducing of new children in nursery care gradually and with the presence of their parents.

They told me that they learned from our role-playing that there was no need for an "expert" to know all the answers in advance, but one may be curious and ask. One of the nurses reminded me of one of our dialogues when she role-played a demanding mother. In a role of the nurse I said from the "one down position":

"Oh, now I see, your son was upset because I tried to do that with him in a very different way than he was used to. Please, tell me exactly how do you do that with him." (I persisted in very detailed description and thanked her for trying her best instead of defending myself as nurses often did.)

They informed me that the communication skills we practiced appeared to be helpful and that they used the enactment technique when parents are with their children in the playing room, as well.

Several authors (WHO, 1993) pointed out that programmes aimed to sensitize caregivers to basic principles of care and communication had a stronger impact on the whole caregiving system and all children in it than the programmes that were organized around appropriate activities and toys and around various developmental stages.

THE PROCEDURE OF GRADUALLY INTRODUCING CHILDREN TO THE NURSERY CARE - AN ATTEMPT TO EVALUATE

In september 1995 in the beginning of a new school year for all children who entered the nursery department the chief of the kindergarten arranged with their parents that one of the parents should have to stay with his/her child for at least first fortnight or three weeks in the kindergarten.

The aim of the procedure was to widen the secure base for the children from their parents to the new caregivers and thus lessen the feelings of insecurity and danger in the new environment as much as possible.

There was an assumption that not only a new and at the beginning strange caregiver but also the new and strange environment could alleviate the child's anxiety.

No matter how experienced the new caregivers are they cannot understand completely the subtleties of a new child's gestures, language, needs and anxieties in the beginning. It can be a great burden for the child to be fitted

into the nursery-care routine in matters of eating, sleeping and toileting. More or less the child is offered strange foods to eat, strange implements with which to eat and very different organization of the mealtime than he/she was used to at home. The same is true for the sleeping and toileting arrangements.

Opening the door of the playing room for the parents serves to the idea of making connections between the family system and the kindergarten system. The mother or father who accompanies her/his child can help to mediate the environment, to keep it within the child's limits of tolerance. With the help of parents nurses can try to achieve an adjustment to children instead of vice versa. So children can at the beginning use their usual methods of communication and demand and are answered in ways which approximated the responses they are accustomed to.

My main hypothesis was that gradually introducing of children in the nursery care in the presence of one of their parents can make connections between the family system and the nursery-care system in a way that enables the children to accept the nursery care as a kind of their secure base, similar to that at home. If that happens it will be shown through the easier adjustment and lessening at their age developmentally obvious separation anxiety to a tolerable measure (for the child!).

I was interested in experiences of both - the parents and the nursery department staff - whether the old story of children's crying was changed and in what direction.

METHOD

Subjects

a) Kindergarten staff

The kindergarten where the study took place has the nursery department with three groups of children ranged in age from 11 months to three years. In each group there are twelve to fifteen children with two members of staff - a governess or a child nurse and her assistant.

All six members of the staff were the participants of the sensitizing program described in previous chapter and they all accepted the invitation to cooperate in the study.

There are two nurses working in the nursery care of the kindergarten for more than 25 years and one governess working in the kindergarten for 15 years but only for the last five years in the nursery department.

All their three assistants have secondary education but not from the area of child - care and education (one with commercial education, one administrator and one with completed grammar school). They have been working as child-care assistants from three (one of them) to ten years (two of them).

b) Children and their parents

The sample for this little study included seven children that were enrolled in nursery department of the kindergarten in the period from January 1996 to April 1996 and were at that time younger than two years of age (they ranged in age from 11 to 21 months at the time of entering the kindergarten and 13 to 23 months at the time of data collecting). There were eight such children in the nursery care (four boys and four girls) but the parents of one girl did not answer my invitation.

All families were Slovene, middle class, with both parents. One girl was the third child in her family, two girls and one boy were the second of two children in their families and two boys were the only children in their families.

Among all seven children three experienced longer separations before they entered the kindergarten. The mother of one girl was hospitalized for a fortnight a month before the girl entered the nursery care. One girl was hospitalized for a week just before the beginning of the nursery care. For the oldest boy in my sample the beginning of the nursery care was delayed for two months because he had to undergo an abdominal surgery.

The interview was done with the parent who accompanied the child in the kindergarten during the introducing period. For six children it was the mother and for one girl it was her father.

Procedures

I prepared two kinds of semistructured interviews - one of them for the governesses, nurses and their assistants in nursery department and the other for parents of children which have entered the nursery care in the period from the beginning of January 1996 to the end of April 1996.

All interviews were done by myself in the last week of May and in the first two weeks of June 1996. The interviews lasted for an average about thirty to forty minutes and all of them were audiotaped with the permission of participants.

To test the hypothesis the interviews were structured:

- to find out if the procedure of gradually introducing children in nursery care came into staff's perception as being a change at all. (a/2)
- to reveal parental beliefs about the advantages of the public child-care in comparison with other possibilities and to learn about the factors which enter the parents' decision in determining their child-care arrangements. (b/2)
- to check the beliefs about the appropriate age of children for entering the kindergarten (are these beliefs and to what extent informed by developmental psychology findings about separation anxiety?) (a/3,4 and b/3,4)
- to get insight into concerns and expectations before entering the kindergarten (experiences and beliefs about how it might be) (a/5, b/5)
- to learn about helping strategies used by the parents and nurses in an introductory phase (a/6,7; b/6,7)
- to reveal both sides' experiences of advantages and disadvantages of the introduction procedure and their reflexiveness to each other's experiences (a/8, b/8)
- to reflect on the signs of child's well-being important for parents and kindergarten staff (a/9, b/9)
- to discover beliefs and conceptions about good child-care practice (a/10)

- to check whether the gender issue of mothers being responsible for child-care arrangements is still prevailing (b/10)
 - to find out to what extent the parents' and caretakers' stories of successful adjustment of each child to the nursery care are coherent.
- a) Interview for governesses, nurses, and their assistants in the nursery department of the kindergarten:
01. You know I am interested in life in nursery care. Please introduce yourself and tell me all you think could be important about your experience in nursery care before I ask my further questions (education, training, working experiences)
 02. Could you mention the changes you remember have happened in the period you have been working in the kindergarten? Which of the listed changes comes to your mind as the greatest or the most influential one?
 03. In accordance with your experience, what would be the most appropriate age for the child to enter the kindergarten? Why?
 04. What do you suppose the parents think to be the most appropriate age? Why?
 05. What are you most concerned about in the beginning of September when the new school year starts again?
 06. According to your experience what could help the child best to adapt to kindergarten successfully?
 07. What do you need to know about the children and their families to be able to help them best in the beginning?
 08. What are the advantages and disadvantages of the gradual introduction of a child into the kindergarten in the presence of his/her mother or father?
 - in relation to the child
 - in relation to the parents
 - in relation to the kindergarten staff
 09. How would you know that the particular child is happy in the kindergarten?

- What would be the most important signs of that for you?
- What signs do you think would be important for parents?

10. I suppose you have your own idea of what a good kindergarten should be like. What would be of the greatest importance for you to realize your idea? The conditions as they are now - how close are they to your idea (in %)?

11. After all interviews with them and with parents were done, the governesses, nurses, and their assistants were asked to mark from 0 to 10 each child included in my study according to the quality of the adaptation in the kindergarten.

b) Interview for parents who accompanied their children in introductory phase:

01. I am interested in how you and your child were able to deal with entering the kindergarten. Would you be so kind to tell me anything about your child that is important for you that I know about him/her before I ask further questions. (information about the child and his/her family and eventually history of previous separations)

02. What were your arguments for and against enrolling your child in the kindergarten? How did you choose the kindergarten among different possibilities?

03. What is your opinion what the most appropriate age for the child to enter the kindergarten is? Why?

04. What do you suppose the governesses think to be the most appropriate age? Why?

05. As you know your child how did you expect would he/she react to this new experience? What have you been most concerned about before your child entered the kindergarten?

06. For how long did your child need your presence in the kindergarten?

07. What did help you to reduce your presence in the kindergarten step by step?

08. What are the advantages and disadvantages of the gradually introducing children to nursery in a presence of one of the parents?

- in relation to the child
- in relation to you
- in relation to the kindergarten staff

09. How would you know that your child is happy in the kindergarten? What would be the most important signs of that for you?

10. Who else in your family cooperated? What did your spouse think about the procedure of gradually introducing children to nursery? What were the differences in opinions about the procedure?

11. After you finished with the introducing procedure how do you feel about your child's adaptation in the kindergarten? Please rate this on a scale from 0 to 10!

RESULTS

The sample was too small and represented only itself therefore any kind of statistical analysis was impossible.

The first question of the interview was designed to join and provide some basic information: for parents about the child and his/her family and eventually previous history of separations, and for the kindergarten staff about their education, training, and experience in child-care (a/1 and b/1).

Answers to the questions from the second to the tenth are grouped according to similarities and differences and represented in a following Table No 1.

Answers to the question No 11 are represented separately in the Table No 2.

TABLE No 1

Question No	KINDERGARTEN STAFF
02	With the prolonged maternity leave children come older to the kindergarten; groups smaller; everyday routine less rigid; Gradually introducing is the main change (all 6)
03	9 to 10 months: Child does not feel the fear of strangers yet. (1); 11 to 12 months: According to maternity leave (2); 18 months: independent walking, can understand a bit that parents will return. (1); 2 to 3 years: Child is more independent; understands better; can communicate needs; shows interest for peers. (2)
04	11 to 12 months: fits the parents best because of the end of the maternity leave. (2); 2 to 3 years: Older child is more resistant to illness; is more independent; can understand better. (4)
05	How many new children will come at the same time.(5); How will the parents cooperate with the nurse.(1)
06	Gradual introduction with child's own rhythm; child's habits considered; good cooperation with parents and warm welcome.
07	All about child's habits in feeding, toileting and sleeping; any special needs; possession of transitional object; how to comfort the child in distress.
08	<p>Advantages - child: shock with separation prevented; Gradually forms safe trusting relationship with the nurse; Becomes familiar and relaxed in new environment (all 6)</p> <p>Disadvantages - child: absolutely none (3);None, if only does not get an impression that mother will be always there(2);Only when mother goes out but another child still has his mother in the group (1);</p> <p>Advantages - parents: become familiar to the life and routine in kindergarten; establish trustful relationships with new carers and better communication (6)</p> <p>Disadvantages - parents: for some troubles to ensure enough time (6); some cannot decide without nurse's help when to leave (1)</p>

	Advantages - kindergarten staff: can get a lot of important information about the child's habits (6); Can make good contact with parents, trusting relationship and better communication for future, too (6); Disadvantages - kindergarten staff: Discomfort at the beginning being under control (6); Only if more than 2 new children with mothers at same time (1); if mother overintrusive (1)
09	Signs for nurses: does not refuse feeding; greets adults spontaneously; physical contact with caretaker; curious, active, exploring; shows interest for peers' activities. Signs for parents: predominant mood is happy; willing to go to the nursery; greets his nurse gently; does not cry at separation.
10	smaller groups with the same staff; greater financial support for better comfort for the children (all 6); Closeness to the ideal: 50% (2); 60% (1); 70% (2); 80% (1);

TABLE No 1

Question No	PARENTS
02	High investment in the professional care which is also transparent in comparison with private care where one does not know what is going on as the child is too little to tell (4); unavailability of grandparents (2); good experience with the older child (5); child enjoys being with peers (4)
03	12 to 18 months: according to maternity leave; younger child is more likely to accept the everyday routine; (2) 2 to 3 years: child can better understand and is able to tell about the experiences; can tolerate the absence of parents easier; (5)
04	18 to 24 months: best that the child is walking yet and can use at least few words; (2) 2 to 3 years: The child is more independent in walking, eating and toileting, less fatiguing to nurses; (5)
05	No problems expected (4); problems with separation anxiety, feeding, and sleeping expected (3); Concerned about possible infectious diseases (4);
06	one week (2); two weeks (2), three weeks (3);

07	Monitoring child's behaviour - when interested in playing and making contact with nurses and peers (5); nurse's suggestion according to her monitoring of the situation (2);
08	<p>Advantages - child: Shock with separation prevented; feeling safe; gradually becomes familiar to nurses and environment (7);</p> <p>Disadvantages - child: absolutely none (5); None, if only does not get an impression that mother will be always there (2);</p> <p>Advantages - parents: Being better acquainted with life in kindergarten and with nurses the confidence is greater (7); Making trustful relationship with staff and good communication, also for future (7); opportunity to share information about child's needs and habits with child's new carer (2);</p> <p>Disadvantages - parents: None, if known in advance that a lot of time has to be reserved (7); Sometimes it is still hard to make a decision when to leave (2);</p> <p>Advantages - kindergarten staff: Gradually become closer to the child; Can learn from parents how to comfort the child, get all necessary information about the child to deal with him easier (6); None special advantages (1); Better communication is useful for both parts (6);</p> <p>Disadvantages - kindergarten staff: possibly felt less relaxed being under parent's control but did not become apparent (6); None (1)</p>
09	In the morning going to the kindergarten with pleasure (5); Gets to nurse's laps spontaneously at the arrival and does not cry when parents leaving (7); Being in a good mood at the end of the day-care (2);
10	Everything about child-care is the mother's job, father thought the procedure being a waste of time (2); Both parents planned about child-care and were engaged in introduction in turns (1); Both parents planned and made decisions, but mother reserved time for the introduction procedure (3); Both parents made decisions, father introduced (1);

All members of the staff labelled the procedure of gradually introducing children to be the change in process. They mentioned that all kindergartens had it in their programmes but only few of them realized it.

Through the answers in the interview the procedure of gradual introduction might be understood as a change in the process in comparison with the age and number of children which represented the change in structure (Burchinal, et al., 1996). It seems to be such a great change that members of the staff when talking about their ideal kindergarten do not mention any other change to be necessary in the process apart from the changes in the structure which have to be realized by the state.

As public child-care has long tradition it seems that parents place greater confidence in it than in other child-care possibilities. The more the process of child-care is transparent for the parents the less uncertain they are.

From the judgements about the appropriate age for entering the kindergarten two kinds of beliefs could be traced:

First: The younger child is more likely to accept the everyday child-care routine with less problems and protest.

Second: The child closer to three years of age is more independent and has greater possibility to communicate his/her needs and so tolerates the separation easier.

None of those beliefs seems to be informed by the theory of separation anxiety although the second one supports it.

As the signs of a child's well-being parents and members of the kindergarten staff mainly counted the behaviours that the researches on resiliency in children found out to be the features of the resilient children (Benard, 1992; Howes, Matheson, Hamilton, 1994).

TABLE No 2

Gender (m/f)	Age (months)	Siblings	Previous separations	Quality of adjustment parent nurse/assist.	
f	13	second/2	none	10	9/8
f	14	third/3	yes	9	9/9
m	14	second/2	none	10	9/9
m	17	none	none	9	7/9
f	19	second/2	yes	10	10/10
m	20	second/2	none	10	10/10
m	23	none	yes	8	8/9

The Table No2 might be understood as the summary and the evaluation of the procedure for gradually introducing children to the kindergarten.

I offered the rating scale from 0 to 10 to prepare a wide range for differentiation of parents' and staff's level of satisfaction in their perceptions of children's adjustment and well-being in the kindergarten. The results of ratings surprised me with the optimistic feature they showed.

The participants did not know about each others ratings, but they appeared to be very coherent. Maybe it was a sign that their creations of reality gained through the communication in a co-creative dialogue came close together.

In such a small sample it is inadvisable to make any generalizations but it appears to me that two possible patterns are indicated:

First: The ratings of the adjustment of the children younger than 18 months of age tended to be lower than from the older children, with the exception of the oldest boy - but he was the one with the hardest experience of previous separation.

Second: Previous experience of separation because of hospitalization of the child (but not of the mother, which was the case of the nineteen months old girl) may be connected with some problems in adjustment (although the differences are minimal).

Both patterns support the object relation theory and its teaching of the separation anxiety to some extent. It seems that separation anxiety is greater

in younger children but according to the marks it remains inside the measures of "tolerable frustration".

DISCUSSION

When I began with the sensitizing programme it seemed to me that there was only one description and understanding of the problem embedded in the story of "inevitable children's crying" which was shared by kindergarten staff and parents.

The perpetual story was supported by behaviours of both sides. Since the nurses were so sure that nothing could be done they did not search very much for possible other meanings and reasons for child's distress and the opportunities for different reactions were missed. On the other hand parents felt that they could not help. The only two possible resolutions were either to wait that the child would have become accustomed to the kindergarten or to look for another child-care arrangement. The more the parents felt helpless the more the child felt insecure.

Not only in children but also in parents and in kindergarten staff the anxiety which was generated by sharing child-care existed as it became apparent through the interviews.

Assuming that the causality in a system is circular, an attempt to lessen the staff's or the parents' anxiety may serve to change the situation for the child.

I suppose one of the by-products of the sensitizing programme was lessening of the anxiety in the staff. Similar, one of the by-products of the procedure for gradually introducing children to the kindergarten was lessening the anxiety in parents as it could be seen through the answers in the interview when they reflected on advantages.

Through opening the door of the playing room for the parents to enter for a while - the opportunity for the creation of a space for dialogical communication was prepared. It appears to me that similar as Anderson and Goolishian said for the therapy context (Anderson and Goolishian, 1988), the problem-organizing system was engaged in the process of developing new meanings and understandings - exploring the unsaid and at the same time the enactments were going on to test the evolving hypotheses.

In all three observed groups in nursery care the old story seemed to disappear. In occasions of distress that occurred (by little accidents, situations of pain and fatigue) there was some crying but also the attachment behaviour towards nurses or their assistants. The real need was unlikely to go unanswered.

Sensitive observer could not overlook that step by step an affectional relationship grew up between the children and their new caregivers. Not only the children became attached to their nurse and her assistant - the relationship was mutual. When good relationships were established between parents and nurses, governesses, and their assistants, the danger of children's loyalty conflicts disappeared.

CONCLUSION

I do not have any pretensions to name this little piece of work a research. It is just a tiny vignette that helped me to look at the process which goes on when a new problem-determined system or communicating network consisting of family system and kindergarten system arises from the need of child-care.

The ideas that have developed from my project have to be tested in a larger and more relevant sample. As far as they are evolved now I think them to be useful to help parents and kindergarten staff to create more coherent stories about child-care.

The introduction procedure proved to enhance the quality of the communication between parents and kindergarten staff. As it came out through the interviews the expectation of both parts was that it could have long-lasting effects. Through being the witness of developing trustful relationships between the parents and the new caretakers it seems that the child widens his/her secure base from the family to the new caretakers and the environment of the kindergarten.

I suppose that programmes directed towards sensitizing caregivers and improvement of the communication are much more feasible on a large scale than programmes using professionals in direct clinical work with children.

According to my experience the systemic consultation offered to parents and both future child's caregivers together before the introducing procedure starts

can widen the parents' understanding of the process that is to begin on one hand and on the other hand lessen the staff's tension before the first meeting in the playing room. As in the kindergartens they have already begun the process of new employment of psychologists the mentioned consultation work should become one of their future tasks. So the systems theory and the systemic approach to problem determined systems could pass the boundaries of clinicians' offices.

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