



Caregiver Play It's not just child's play: The importance of caregivers' play with children

KEY POINTS:

- Play between a caregiver and child ('play interactions') in the early years lays the foundation for healthy child growth and development.
- Early play interactions affect the development of the child's brain, social skills, language skills, emotional development, and more.
- Research in Singapore is limited, but shows that caregiver's sensitivity and positive emotions during early play interactions are beneficial for child development.
- Good-quality play can involve using moments during everyday interactions and everyday objects, or can even be imaginary.
- Mobile device use by caregivers during play can negatively affect the quality of play with children and reduces the caregiver's ability to pick up on the child's signals and respond appropriately.

Why is caregiver-child play important?

Play between a caregiver and child in the early years creates opportunities to establish a trusting relationship and lays the foundation for healthy child growth and development.^{1,2} Through play, caregivers can help their children to learn and make sense of the world around them with fun, positive and meaningful engagement.^{2,3}

These early interactions affect the development of the child's brain, social skills, language, emotional development, and more. Good-quality play with caregivers is linked with fewer externalising (e.g., aggression, defiance) and internalising problem behaviours (e.g., being withdrawn, anxiety) in children.⁴ Play with caregivers is also related to children being more able to manage their emotions⁵ and having better social skills,⁵ communication skills (understanding and speaking),⁶ and more capacity for empathy when they are adolescents.⁷

Research in Singapore has shown that young children of mothers who showed more positive emotions during play interactions were more likely to recover quickly from stressful situations.⁸ Furthermore, babies of mothers who were more sensitive in early play interactions showed faster development of brain structures that are used in learning and managing emotions.^{9,10}

How does children's play develop in the early years?

Play becomes more complex and its purpose changes throughout childhood and even into

adulthood. In the first year of life, babies play by exploring their body movements and learning how their movements can affect the world around them (e.g., banging a toy to draw their caregiver's attention).⁶ By about eight months, babies start to use joint attention in their play.⁶ Joint attention happens when a child looks at or interacts with an object together with someone else. This helps babies learn about sharing experiences with others and their influence on other's behaviours.⁶

In the second year of life, children start to engage in pretend play (e.g., make-believe) and symbolic play (e.g., using objects to represent other items).⁶ At this stage, children start to learn the difference between reality and imagination, exercising their creativity.⁶ Play that is more physical in nature (e.g., tickling, chasing, rough-and-tumble play) emerges in the preschool years when caregivers challenge children to exert their strength through play.¹¹

Other forms of play include constructive play (e.g., building with blocks, puzzles), social games (e.g., peek-a-boo, hide-and-seek), and instructive play (e.g., naming or requesting the name of objects, colours through play).¹² Physical play (e.g., tickling, lifting and moving the child) is also typical of parents across cultures. A systematic review looked at studies that compared father-child play and mother-child play and found that fathers tend to engage in more physical play and mothers engage in other forms of play (e.g., pretend play, object play).^{5, 11}

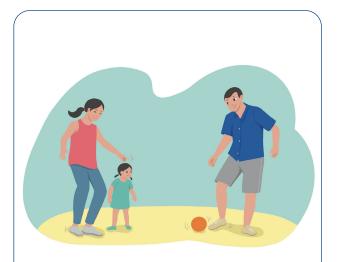


What does good-quality play involve?

EVIDENCE INSIGHT | MAY 2023



1) Being responsive and sensitive: An important aspect of good-quality play is caregivers' sensitivity toward children's play through 'serve-and-return' interactions.^{7, 13} Children 'serve' caregivers through cues or signals (e.g., a baby's smile or cooing, a child's offer of a toy) and caregivers can 'return the serve' by noticing children's signals during play and responding appropriately and in a timely manner.^{1, 4, 7, 14} Caregivers who understand children's intentions know when to step in or hang back.¹⁴ Research has found that caregivers who showed more initiative and were more responsive during play were less likely to report externalising problem behaviours in their children (e.g., aggression, defiance).⁴



2) Being available and playful: Caregivers can show interest and communicate their enjoyment of the interaction to children through facial and verbal expressions (e.g., smiling, praising, asking questions).^{2,14} Caregivers who are warm and express positive emotions can also help children manage their emotions.^{4,8}

3) Engaging in social games and pretend play: Children can learn and practise social skills through sharing and turn-taking activities in social games (e.g., peek-a-boo) and pretend play (e.g., roleplay shopping at the supermarket).^{2, 14} These types of play provides opportunities for caregivers to model appropriate social behaviours for children and encourage children's creativity.



child Centre for HOLISTIC INITIATIVES FOR LEARNING & DEVELOPMENT

4) Making play meaningful to the child: Caregivers should ensure that play interactions are meaningful to children's interests and appropriate for their developmental age.² Play can provide children with fun and meaningful ways to learn and practise knowledge and skills for use in real-life situations (e.g., social skills such as taking turns, academic concepts such as the alphabet and numbers).



Good-quality play can take many different forms throughout the day and does not necessarily have to involve a lot of time or expensive toys. Caregivers can use moments during everyday interactions to play with children (e.g., when taking the baby out of the bath, on the way home from preschool). Apart from the available toys within the home, caregivers can use household items and public spaces for these playful moments. Play can simply be interactive (e.g., peek-aboo), exploratory (e.g., empty and re-fill a bowl of uncooked rice) or imaginary (e.g., enacting a concert). It is important to note that good-quality play does not have to be perfect all the time. The key to good-quality play is the caregiver's ability to repair their connection with the child after it has been disrupted (e.g., by a phone call, by a disagreement).18

How does mobile device use affect caregiverchild play?

Caregivers are increasingly using mobile devices while caring for and playing with children. A recent study in North America found that the majority of parents (68%) with children under the age of 18 years said that they were sometimes or often distracted by their mobile phones while spending time with their children.¹⁹



5) Respecting the child as an individual: Caregivers should recognise and respect the child as an individual, with their own thoughts and feelings during play interactions.⁴ Where possible, caregivers should try to follow the child's lead in play to ensure they do not take over the play interaction with their own interests and expectations. Negative comments and criticisms during play interactions can also be harmful.^{15–17} Research has found that caregivers who were harsh, controlling and intrusive during play tended to report more problem behaviours in their children.⁴



Studies found that mobile device use during caregiver-child play increased stress in infants, reduced joint attention between caregiver and infant, and reduced the amount of language used by caregivers.

Although mobile devices can provide new ways of engaging children in play,²⁰ they have also been shown to affect the quality of the caregiver's play with children. Mobile devices can distract caregivers during play, reducing their ability to recognise children's signals and respond appropriately and in a timely manner.²¹ Notification

EVIDENCE INSIGHT

interruptions on mobile devices can also disrupt the caregiver's play by causing them to exclude the child from interactions. As a result, caregivers are less able to respond appropriately to their child's cues. Evidence from three international studies found that mobile device use during caregiver-child play increased stress in infants,²² reduced joint attention between caregiver and infant,²³ and reduced the amount of language used by caregivers.²⁴

Implications for policy and practice

Recognising the vital role of the caregiver's play with children in child development is important for ensuring children achieve their full potential in life. Playing with children enhances their language Our understanding of play in the Singapore context is still limited. Much of the research on caregiver-child play has been conducted overseas and focused mainly on mother-child interactions, with growing emphasis on fatherchild play.

Play in the Singapore context

In Singapore, caregivers can also include grandparents and foreign domestic helpers. Research is needed to explore the ways in which caregivers engage in play with their children, barriers faced by caregivers in tapping into resources (e.g., materials, outdoor play areas) and how play might differ for non-parent caregivers (e.g., grandparents, domestic helpers).

Playing with children enhances their language skills, skills to manage their emotions and behaviours, and provides them with opportunities to practise social skills.

skills, skills to manage their emotions and behaviours, and provides them with opportunities to practise social skills. Good-quality play involves caregivers being responsive and sensitive, being available and playful, engaging in social games, making play meaningful to children, and respecting the child as an individual.

Play is a means to build a healthy relationship in early life between a caregiver and child, and should be an important consideration in child and family health settings (i.e., when clinicians notice that the quality of play is affected by specific child or caregiver risk factors).²⁵ However, recent cultural shifts worldwide have limited the opportunities for caregiver-child play.

Caregivers are often less engaged due to digital distractions and increased workloads. There is also an increased focus on academic achievement and after-school enrichment programmes, as well as fewer safe spaces to play, including limited outdoor spaces.²⁵ These factors may reduce the time and opportunity for play between caregivers and children, further emphasising the need for good-quality play.

A detailed understanding of these areas would help policymakers and service providers make decisions on whether local initiatives are required to provide caregivers with opportunities to play with children (e.g., public events, public spaces) and whether strategies are needed to improve the quality of caregiver-child play through scalable, population-based approaches to educate and nurture positive parenting skills in caregivers (e.g., community playgroups for caregivers and children).

In Singapore, there have also been numerous initiatives from parenting groups, the Centre schools, etc., that have for Fathering, promoted bonding events to encourage and facilitate parent-child play. What is also needed in Singapore is more and better public communication about what good-quality play looks like, the importance of child-led and non-intrusive play, and its impact on children's healthy development. Parents do participate in programmes aimed at improving parent-child interactions (e.g., gym-tot, music classes) as they understand these to be beneficial, but access is still restricted to higher income families.

RECOMMENDATIONS:

- To better understand the state of caregiver-child play in Singapore, more funding is needed for research into the cultural interpretation of caregiver-child play, the barriers and facilitators to caregiver-child play, and the unique characteristics of play in the local context (including play between a child and a non-parent caregiver). Understanding local nuances will facilitate the creation or enhancement of public health policies that can promote opportunities for good-quality play between caregivers and children.
- Areas for increased policy and programmatic support (e.g., community playgroups, increased parental leave) can also be identified to foster good-quality play.
- Improve public communication about good-quality play (what it looks like, why it is important).
- Improve access to universal programmes and services that aim to improve caregiver-child play.
- Guidance to caregivers should reflect that good-quality play does not have to involve a lot of time or a lot of toys. Caregivers can seize moments throughout the day to play with children.
- Increase caregiver awareness that being distracted by mobile devices can limit the quality of their interactions when playing with children.

REFERENCES

 National Scientific Council on the Developing Child. (2004). Young Children Develop in an Environment of Relationships: Working Paper No. 1.
LEGO Foundation. (2019). What We Mean by: Playful Parenting in the Early Years.

3. Bierman, K. L., Welsh, J. A., Heinrichs, B. S., Nix, R. L., & Mathis, E. T. (2015). *Helping Head Start parents promote their children's kindergarten adjustment: The Research-Based Developmentally Informed Parent Program.* Child Development, 86(6), 1877-1891.

4. Schneider, M., Falkenberg, I., & Berger, P. (2022). *Parent-child play and the emergence of externalizing and internalizing behavior problems in childhood: A systematic review.* Frontiers in Psychology, 13.

5. Amodia-Bidakowska, A., Laverty, C., & Ramchandani, P. G. (2020). *Father-child play: A systematic review of its frequency, characteristics and potential impact on children's development.* Developmental Review, 57.

6. Rayment, J. (2013). *Parents and children playing together: A research overview on the benefits of play for the development of children under two.* Perspective (Journal of the National Childbirth Trust), 20, 13-20.

7. Leclère, C., Viaux, S., Avril, M., Achard, C., Chetouani, M., Missonnier, S., & Cohen, D. (2014). *Why synchrony matters during mother-child* *interactions: A systematic review.* PLoS One, 9(12), e113571.

8. Delgadillo, D., Boparai, S., Pressman, S. D., Goldstein, A., Bureau, J., Schmiedel, S., Backer, M., Broekman, B., Tan, K. H., Chong, Y. S., Chen, H., Zalta, A. K., Meaney, M. J., Rifkin-Graboi, A., Tsotsi, S., & Borelli, J. L. (2021). *Maternal expressions of positive emotion for children predicts children's respiratory sinus arrhythmia surrounding stress.* Developmental Psychobiology, 63(5), 1225-1240.

9. Lee, A., Poh, J. S., Wen, D. J., Tan, H. M., Chong, Y. S., Tan, K. H., Gluckman, P. D., Fortier, M. V., Rifkin-Graboi, A., & Qiu, A. (2019). *Maternal care in infancy and the course of limbic development*. Developmental Cognitive Neuroscience, 40, 100714.

10. Tsotsi, S., Borelli, J. L., Abdulla, N. B., Tan, H. M., Sim, L. W., Sanmugam, S., Tan, K. H., Chong, Y. S., Qiu, A., Chen, H., & Rifkin-Graboi, A. (2020). *Maternal sensitivity during infancy and the regulation of startle in preschoolers.* Attachment and Human Development, 22(2), 207-224.

11. Stgeorge, J., & Freeman, E. (2017). *Measurement of father-child rough-and-tumble play and its relations to child behavior.* Infant Mental Health Journal, 38(6), 709-725.

12. Bickham, D. S., Kavanaugh, J. R., Alden, S., & Rich, M. (2015). The State of Play: How Play Affects Developmental Outcomes. Center on Media and Child Health.

13. Shonkoff, J. P. (2017). *Breakthrough impacts: What science tells us about supporting early childhood development.* YC Young Children, 72(2), 8-16.

14. Hughes, F. P. (2010). Children, Play and Development. Sage Publications.

15. Kohlhoff. J., & Cibralic, S. (2021). The impact of attachment-based parenting interventions on externalizing behaviors in toddlers and preschoolers: *A systematic narrative review.* Child and Youth Care Forum, 51, 1005-1029.

16. Bagner, D. M., Coxe, S., Hungerford, G. M., Garcia, D., Barroso, N. E., Hernandez, J., & Rosa-Olivares, J. (2016). *Behavioral parent training in infancy: A window of opportunity for high-risk families*. Journal of Abnormal Child Psychology, 44(5), 901-912.

17. Kochanska, G., Kim, S., Boldt, L. J., & Nordling, J. K. (2013). *Promoting toddlers' positive socialemotional outcomes in low-income families: A playbased experimental study.* Journal of Clinical Child and Adolescent Psychology, 42(5), 700-712.

18. Kemp, C. J., Lunkenheimer, E., Albrecht, E. C., & Chen, D. (2016). *Can we fix this? Parent-child repair processes and preschoolers' regulatory skills.* Family Relations, 65(4), 576-590.

19. Auxier, B., Anderson, M., Perrin, A., & Turner, E. (2020). *Parenting Children in the Age of Screens.* Pew Research Center.

20. Ewin, C. A., Reupert, A. E., McLean, L. A., & Ewin,

C. J. (2021). The impact of joint media engagement on parent-child interactions: A systematic review. Human Behavior and Emerging Technologies, 3(2), 230-254.

21. McDaniel, B. T. (2020). Technoference: Parent Mobile Device Use and Implications for Children and Parent-Child Relationships. Zero to Three, 41(2), 30-36.

22. Rozenblatt-Perkal, Y., Davidovitch, M., & Gueron-Sela, N. (2022). *Infants' physiological and behavioral reactivity to maternal mobile phone use* – *An experimental study.* Computers in Human Behavior, 127.

23. Krapf-Bar, D., Davidovitch, M., Rozenblatt-Perkal, Y., & Gueron-Sela, N. (2022). *Maternal mobile phone use during mother-child interactions interferes with the process of establishing joint attention.* Developmental Psychology, 58(9), 1639-1651.

24. Ewin, C. A., Reupert, A., McLean, L. A., & Ewin, C. J. (2021). *Mobile devices compared to non-digital toy play: The impact of activity type on the quality and quantity of parent language.* Computers in Human Behavior, 118, 106669.

25. Yogman, M., Garner, A., Hutchinson, J., Hirsh-Pasek, K., & Michnick Golinkoff, R. (2018). *The power of play: A pediatric role in enhancing development in young children.* Pediatrics, 142(3), 1-17.

Contributors:

Adj Assoc Prof Chong Shang Chee, Prof Chong Yap Seng, Dr Anna Fogel, Prof Sir Peter Gluckman, Ms Esther Goh, Dr Gayatri Kembhavi-Tam, Dr Evelyn Law, Prof Lee Yung Seng, Dr Natalie Low, Dr Keri McCrickerd, Assoc Prof Robyn Mildon, Prof Adrian Sandler, Dr Cheryl Seah, and Dr Evelyn Tan.

Acknowledgements:

Thank you to Professor Yaoying Xu (Department of Counseling & Special Education, Virginia Commonwealth University), Professor Jessica Borelli (Department of Psychological Science, University of California), Dr Jennifer St George (College of Health, Medicine and Wellbeing, University of Newcastle) and Dr Felicia Low (Koi Tū, The University of Auckland) for their invaluable input.



About CHILD

The Centre for Holistic Initiatives for Learning and Development or CHILD was established under the umbrella of the NUS Yong Loo Lin School of Medicine (NUS Medicine) with the Lien Foundation. In collaboration with other partners such as the Centre for Evidence and Implementation (CEI) and A*STAR's Singapore Institute for Clinical Sciences (SICS), CHILD brings together experts in the field of translational research, child development, and implementation science to help give children the best start to life.