## Early care in germany

**Education** 



Early Care in Germany Early Care in Germany Child care refers to taking care of and supervising a child or children. Child care ispracticed in children from newborn to the age of 13 (Hank, 2001). It is, however, a broad topic that covers a wide range of context, social activities, as well as cultural intervention. This paper will discuss child care in Germany.

Parents still remain the most influential adults in the lives of their children even to those in child care centers. Longitudinal researches have shown that household characteristics such as material sensitivity, income as well as quality of home environment have a greater effect on child development than any aspect of early non-material care experiences. Child care is the context in which early development in children unfolds (Wertfein, Kofler, & Stoll, 2009). Earlier studies of child care in Germany did not differentiate between variations in the quality of child care, but it instead focused on whether child care was harmful (Adler, 1996). Since the 90's, child care value has been a well-documented and steady predictor of children's well-being as well as development. Higher quality child care is linked to advanced cognitive, pre-academic and language outcomes (Baliga, 2008). High quality childhood centers, as well as their variations, affect children's

social and academic development. Children from low earning families who additionally experience poor parental love can benefit from high-quality child care. Quality in infant-toddler centers comprises of structural criteria, orientation quality, contextual quality as well as process quality. Structural criteria refers to the resources as well as organizational dimensions of a child care setting. Process quality, on the other hand, refers to what takes place inside the institution. Many researches testing theoretical models on the link between variables that control process quality have identified various

aspects of structural quality plus the quality of working conditions as vital contributors to process quality. There is evidence that almost 25 to 50% of the variance of process quality can be explained through structural and orientation quality. Findings of positive correlations between process quality and perceived job stress hold up the theory that contextual and structural qualities make a difference to quality process in child care. Particularly small group size and low child adults ratios are linked to responsive care giving behavior (Bussemaker, 2008).

Researchers have explored the influence of structural quality on the process quality in early childhood centers for children from birth up to three years. The researchers' findings affirmed the predictive power of structural features such as competence factors and time for preparation and planning of academic processes. The researchers focused on five component factors: surveillance and documentation of child development, the centre programme, cooperation with other services, the professional capability of the director and the possibilities for continuing professional development. These factors were the key aspects for the reported high quality of education in infant-toddler centers (Peus, 2009).

In conclusion, the researchers found out that an open-group setting influences the quality of education, particularly emotional competence and the stimulation of self-awareness. These results are similar to those of Wustenberg and Riemann regarding the positive effects of an open-group setting in centers for children.

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