

Can Child Care Impact Risk for Depression?

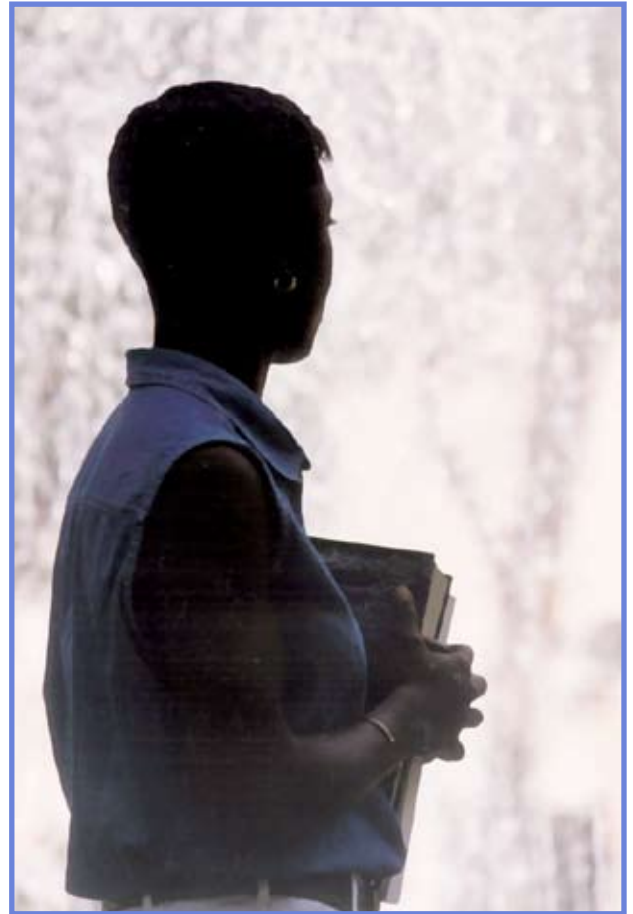
Researchers continue to follow more than 100 participants of the original Carolina Abecedarian Project, a landmark child care study originally conducted at FPG between 1972 and 1977.

Almost 10 percent of American adults suffer from a depressive disorder each year; and another 11 percent experience symptoms of depression that significantly impair life functioning, according to the National Institute of Mental Health. These figures are even higher for those living in poverty. A 2004 survey published by the Centers for Disease Control reported that “poor persons were four times as likely as non-poor persons to report serious psychological distress.”

Children are not immune. Children living in poverty often have less than ideal home environments and are at an increased risk for depression in adulthood. Because we know from existing research that experiences in child care can have long-term affects for children socially, FPG researchers wondered if such experiences could temper the mental health impact of lower quality home environments.

FPG’s Abecedarian Project

Fortunately, these researchers had access to a wealth of data from FPG’s groundbreaking work—The Abecedarian Project, the most intensive early childhood program offered for children from poor families. It provided full-day, year-round, center-based educational child care from infancy through age five. Between 1972 and 1977, the program enrolled 111 infants at high risk for poor cognitive and academic outcomes due to environmental circumstances such as poverty. Of these, 57 were randomly assigned to receive early educational intervention and 54 in a control group.



CONTINUED



Children in both groups had periodic developmental assessments in early childhood and the primary grades. Follow-up studies were conducted in early and late adolescence and young adulthood. Of those original 111 children, 104 participated in an age-21 follow-up study, which included mental health screening. The longitudinal data collected during this study provided a basis for examining the antecedents of depressive symptoms in young adulthood.

Assessments

At age 21, all participants completed the *Brief Symptom Inventory* (BSI), a well-established mental health survey in which participants answer 53 questions. Patients grade the severity of each symptom from 0 (not present) to 4 (extremely severe).

Home visits were conducted when children were 6, 18, 30, 42 and 54 months of age. Trained observers evaluated parent and child interactions, available toys and educational materials, parental support of the child's learning, stability of family routines, and the variety and breadth of stimulation available to the child.

Findings

Young adults (21 years of age) who had received full-time early educational child care from infancy to age five reported fewer symptoms of depression than similar young adults who had not. While none of the study participants reported being under treatment for depression, 26 percent of those in the intervention group and 37 percent of those in the control



The Abecedarian Intervention

The Abecedarian curriculum involved educational “games” that emphasized development skills in cognition and language. For example, infant games were age appropriate adult-child interactions that included talking to the child, showing pictures or toys, and offering infants a chance to react to their environment. Activities were individualized for each child. As children aged, the “games” became more conceptual and skill-based, but the program always emphasized individual development. Children also received their healthcare on site from staff pediatricians.

group met the screening criteria for depression.

There were no significant differences in the home environments of children in the early childhood treatment and control groups: a range of environments was found in both groups. The young adult study showed that the educational child care program appeared to buffer or protect children from the adverse effects of a poor quality home environment insofar as later endorsement of depressive symptoms was concerned. Negative effects of lower quality home environments on depressive symptoms were almost entirely offset by preschool treatment.

Conclusions

Children in the child care program had stable and predictable early childhood experiences. They attended the center for five years, five days a week, year round. There was little staff turnover. Those who did not attend the program experienced a variety of child care settings during their infant and preschool years.

These findings demonstrate that good early childhood experiences can make a difference in the mental health of individuals born into poverty and underscore the importance of investing in high quality early childhood experiences for poor children. ■

To Learn More

McLaughlin, A., Campbell, F. A., Pungello, E. P., & Skinner, M. (2007). Early educational child care reduces depressive symptoms in young adults reared in low-income families. *Child Development*, 78(3), 746–756.

