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Caregiver-Child Experiences, Education, and Perceptions of Children's Play

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Abstract

From early on in their lives, children use play as a way to explore their environment and as a catalyst to begin the process of learning. Children play in a variety of forms-dramatic play, playing with blocks, rough and tumble play, playing with dolls, etc.-that play is involved in nearly every aspect of their lives. It is important to study children's play, as well as the perceptions of play by important adults in their lives, because it is so deeply entrenched in their development. A survey was created to understand the perceptions of teachers on young children's play, as well as based on gender. Surveys were distributed to 9 teachers in a child-care facility in a large city in the southern U.S. The results of the study reflect that length of time as a caregiver, as well as highest level of education completed, had no impact on the caregiver's views of children's play based on gender, and did not play a significant role in how egalitarian their views are within the sample collected. Further research that includes larger sample sizes and more diverse caregiving centers is warranted.

Introduction

Early Childhood Theories of Play

For decades, developmental theorists have studied children's interactions in play, or children's pursuit and engagement in recreational activities. Theorists like Erikson, Piaget, and Vygotsky have concluded that play is an active and necessary component of children's learning. From early on in their lives, children use play to explore their environment and as a catalyst to begin the process of learning. Children play in a variety of forms (dramatic play, playing with blocks, rough and tumble play, playing with dolls, etc.) that it is enmeshed in nearly every aspect of their lives. It is important to study children's play, as well as the perceptions of play by important adults in their lives, because it is so deeply entrenched in their development.

Erikson viewed children's play as a vital component of the ego, the theorized reality principle embedded in an individual's personality. He believed that play was a method for children to connect themselves with members of a society in a prosocial manner (1950). Erikson also proposed that the types of play that children participate in progresses through a series of stages. The very first stage of play in young children is termed "autocosmic play," which focuses on the child's own body. By the time children are two years old, their play evolves from "autocosmic play" into the "microsphere," the area of play in which other children are involved (Erikson, 1950, p. 221). Erikson held unstructured play in young children in such high esteem because he believed that children are learning and obtaining a sense of self alongside everything they are experiencing at every moment in their lives, so it was vital for children to freely explore their environment and experiment with different methods of self-expression.

Erikson similarly theorized a life-long process where individuals experience different crises relating to their development and life experiences at that time. In his stage theory of

development, individuals can either resolve their internal crisis and move on to the next stage or they can leave their crisis unresolved and consequently will remain uncertain in such stage. This study is examining the caregivers of children from birth to five-years-old, so it is critical to discuss the three stages Erikson associated with the infant, toddler, and preschool years: basic trust versus mistrust, autonomy versus shame and doubt, and initiative versus guilt.

The first of these internal crises that individuals must overcome begins in their infancy, wherein they must determine whether the world in which they live in is safe or dangerous. This journey is reliant upon the care that the child receives, as parents and other caregivers provide a source of constancy and reliability for young children. If children are adequately cared for by significant adults at this stage, then they will become trusting of the world and can successfully move onto the subsequent crisis of autonomy vs. shame and doubt.

From the ages of eighteen months to three years, toddlers begin to assert their independence in seemingly benign situations such as choosing what they want to play with or what center they want to spend their free time in. When parents and caregivers allow children to control these activities, they become confident in themselves as decision-making individuals and are free to proceed to the next stage. The final stage Erikson theorized preschoolers had to conquer, initiative vs. guilt, is an active time in children's lives where they begin to assert themselves more frequently as well as developing interpersonal skills. While play is vital in all of these developmental stages, it is especially essential in this third stage since children are given the opportunity to practice and adapt their relational skills through these interactions with other children.

While Erikson focused particularly on basic interactions in early childhood development, Vygotsky considered language and verbal interactions as critical in young children's

development. Vygotsky believed that, before children can even speak, they are making connections in their mind between what is being said and what message the speaker intended to convey (Newman & Holzman, 1993). Vygotsky and other developmental theorists postulate that young children have the innate ability to understand what is being said to them by the adults in their lives and link what is being said to their brains to make those connections later in life. Because children understand what is being said to them from such an early age, it is even more important to be mindful of what is being said to and around young children, especially with comments pertaining to gender.

The Importance of Early Childhood Educators

Relationships individuals build with others are the central influence of their lives. Additionally, meaningful relationships are paramount to a young child's developmental progress (Edwards & Raikes, 2002). The ways that young children learn are highly dependent upon interpersonal relationships and the mutuality within those relationships (Tayler, 2015). The interactions that infants have with the adults in their lives form their expectations of interactions in the future. If infants have meaningful connections to these adults, then they will expect their environment to subsequently be warm and receptive (Edwards & Raikes, 2002).

One of the key elements to fostering relationships and learning in early childhood is play. Play deeply intersects with their attachments with the people around them as well as what they're learning about the world and their environment. Additionally, children's play experiences are enveloped in "Learning to Be," one of the four key pillars of early childhood education (Tayler, 2015, p. 160). Early attachment patterns of young children play a significant role both in children's development and who they become as individuals later in life (Tayler, 2015). Research in childhood education and policies in early childhood education programs show that, presently,

early childhood educators are considered to be paramount in the educational and behavioral outcomes of young children (Tayler, 2015). Caregivers are essential in helping young children develop self-efficacy, or an individual's ability to succeed at a task, by responding to children's cues. If children are around responsive caregivers, they are more likely to develop the connection between their actions and the caregiver's response. Subsequently, young children are able to learn that they are active agents in their environment (Mesman, Minter, & Angged, 2015). Internationally, the most effective approach to the care of young children focuses on the importance of close, meaningful relationships with warm and responsive adults (Edwards & Raikes, 2002).

Gender Theories in Relation to Child Development

As young children learn about cultural perceptions of gender, they also adapt to make retain those perceptions. As the young child learns about sex-typing of specific attributes and behaviors, he or she begins to build a diverse system of gender-attributed characteristics. The young child uses this system as they learn to assess and integrate this new information into their developing minds (Lipsitz-Bem, 1983). Within the field of psychology, one measure to ascertain societal behaviors and characteristics to masculinity and femininity and the acquisition of these gender-ascribed characteristics within an individual is termed "sex typing" (Lipsitz-Bem, 1983). Gender schema theory addresses sex typing by stating that it mostly stems from gender-schematic processing. Per this theory, gender-schematic processing stems from the willingness of young children to receive and convert cultural definitions of masculinity and femininity into their mind and, subsequently, into their way of life (Lipsitz-Bem, 1983). Gender schema theory suggests that the internalized process of sex-typing also derives from an individual's comprehensive willingness to obtain and "process" information based on gender-attributed

characteristics that make up the “gender schema” (Lipsitz-Bem, 1983, p. 604). According to gender schema theory, young children habitually pick up on the cultural perceptions of femininity and masculinity within their society. However, it is important to distinguish between the internalized nature of the gender schema and the social and cultural context of the categorization. The conversion of gender, or any particular social category, into the core of the cognitive processes of gender representation relies on the social and cultural settings of the individual rather than the essential nature of the category itself (Lipsitz-Bem, 1983).

Individuals express and establish their gender through social interactions (West & Zimmerman, 1987). Thus, gender can be considered a performance art. An individual’s performance of femininity or masculinity reflects the cultural ideas of what it means to be a man or a woman with other individuals that are familiar with these cultural concepts (West & Zimmerman, 1987). While the act of “doing” gender is a performance, it does not always require individuals to perform the assumed attributes of femininity or masculinity. Instead, this act is to run the risk that their behavior will be attributed as a factor to their gender, rather than as a factor to their identity (West & Zimmerman, 1987, p. 136). Within society, the act of “doing” gender involves making differences between men and women, both young and grown, that are not natural or inherent (West & Zimmerman, 1987, p. 137). Young children initially cling to rigid gender identities due to their internal goal of being viewed by the adults in their lives as socially adept (West & Zimmerman, 1987). Adult perceptions and expectations of gender characteristics impacts young children by providing them with the validation of what the adults expect from the children based on their gender. Subsequently, this confirmation leads to the young child developing a pattern of behavior following the rules of sex-typing labels that individuals ascribe to masculinity or femininity (Martin, 1995).

Gender studies scholars have reached a consensus that young children obtain gender constancy by the age of five (West & Zimmerman, 1987). Children begin to develop differences in gender based on interactions as early as three years old. By the time they are seven, children supposedly have a concrete understanding of their gender and what is expected of them (Leaper, 1991).

Review of Literature

In 1995, Martin conducted two separate studies to determine the prevalence of stereotypes of young boys and stereotypes of young girls among adults. This study used two separate, reliable self-reported surveys to explore these stereotypes. This study corroborated with past research that asserted that adults, including parents and teachers, have differing perceptions about what they consider typical characteristics and behaviors of young boys from young girls. However, this study stood out in that the researchers noticed characteristics that they considered to be “neutral” (not ascribed to either gender) were still stereotyped as attributions of young boys or young girls. This finding suggested that the stereotypes of young children based on gender is more elaborate and widespread than the stereotypes of men and women.

The discrimination between genders by adults begins to emerge in infancy. In 2011, developmental researchers examined brain responses from infants after specific speech sounds in an attempt to determine if infants differed in speech processing based on their diet and their gender (Pivik, Andres, & Badger). This research indicated that as early as six months of age, female infants have better developed speech discrimination methods than male infants. This can suggest that beginning in infancy, young girls are quicker and more likely to understand what is being said than young boys. However, the research was unable to determine whether the result of

infant girls having a higher level of speech processing was a result from their sex or from their environment.

Developmental researchers have continued to study specific disparities of adult care of young children based on gender. One study was conducted in which the researchers observed classrooms in four different infant care centers to examine caregivers reading picture books to the children in their classrooms (Honig & Shin, 2001). This study was conducted because adults sharing picture books with very young children possesses an assortment of benefits, including an increase in pre-reading skills, attention span, word comprehension, and enjoyment associated with reading books. Based on the observations made, Honig and Shin concluded that teachers read significantly longer and more frequently to young girls than to young boys. However, due to the convenient sampling used in this study as well as the limited sample size, it is difficult to ascertain generalizability from it.

In addition to how often young children are read to, developmental researchers have also studied expressive vocabulary in young children, or vocabulary used by individuals to convey their identities and personalities. Westerlund and Lagerberg (2008) studied expressive vocabulary in eighteen-month-old children to determine what factors contributed to the development of such vocabulary, including gender. By distributing self-reported questionnaires to mothers of young children, the researchers found significant differences between expressive vocabulary as well as other language associations based on gender. Young girls, particularly young girls who are read to often, possess a significantly higher vocabulary used to express themselves than young boys. Moreover, girls have a greater interest and participation in reading than boys. Westerlund and Lagerberg concluded that girls' language development was typically ahead of boys as well as associated with frequent reading.

Research has furthermore studied the effect of gender on interpersonal interactions with peers. Leaper (1991) observed different dyads of children, ages five to eleven, interacting with each other to determine if there were any differences in communication based on the gender of the members of the dyads. Leaper found that societal gender roles are prevalent even in young children's interactions with each other. For boys, their exchanges involve active associations, such as determining power and control. For girls, their exchanges with one another are typically classified with passive interactions, including teamwork and saving face. The results also found that boys are more likely than girls to be focused on dominance and distancing. By middle school, boys are more likely than girls to participate in dominating interactions and speaking with a purposeful tone. It should be noted, however, that Leaper observed most of the differences relating to gender occurred when the children were in middle school, thus it is uncertain if these dyads naturally occur in children of all ages.

Thorne and Lauria (1986) also studied gender-related differences in children by conducting observations in several elementary schools in three separate states. The research found that, when children are given the freedom to choose and create their own activities, they are more likely to participate in gender segregated activities. They also found that, beginning in elementary school, young boys develop themes through which they bond with other boys, including sports, "dirty words", and testing the prescribed rules. A final key pattern that Thorne and Luaria observed was that heteronormativity, the social prescription of heterosexual interests as the norm, has a profound effect on children. In addition to subverting homosexual tendencies and promoting homophobic views amongst boys, heteronormativity further separates young boys and girls through teasing, chasing, and flirting.

Finally, research has been conducted to implicate the long-term effects of gender nonconformity in children. Roberts et al. conducted an eleven-year longitudinal study to investigate the links between gender nonconformity with depression and bullying (2013). The results found that children exhibiting gender nonconforming behavior before age eleven were linked to an increased risk of depressive symptoms in adolescence and early adulthood, especially with subjects who identified as heterosexual. Additionally, the results found that gender nonconforming children were more likely to be the victims of bullying by adults outside of the family than gender conforming children, suggesting that social support is critical for these children.

In this study it is vital to note the importance of caregivers in the lives of young children since primary caregivers are the sample of this research. One of the critical indicators of the promotion of healthy relationships between caregivers and children is the addition of continuity of care, wherein the same caregivers are assigned to a small number of children for up to three years. Ruprecht, Elicker, and Choi observed over fifty classrooms that provided continuity of care and noncontinuity of care as well as providing caregivers with surveys to determine the importance of such practice (2016). The research found that child care facilities that implement continuity of care practices allow for the young child and the caregiver to spend more time with each other, thus allowing the child to develop a secure attachment and allowing the caregiver to learn more about the child, including his or her personality, temperament, and needs. Additionally, the study found that caregivers working in facilities that enact continuity of care rate the toddlers in their classrooms as having fewer behavioral problems.

Hypotheses

In order to study the relationship between caregivers and their perception of children's play based on their gender, independent surveys were created and distributed to individual caregivers. Based on the review of literature, two hypotheses were constructed to be measured by the independent survey.

The first hypothesis that was postulated was that the longer that a caregiver has been working with children, the more egalitarian their views will be on children's play. As caregivers spend more time in the profession of early childhood education, they gain more experience with the varying play patterns of young children. Consequently, as caregivers spend more time observing the unique play of individual children, they should recognize that certain patterns of play are not reserved for one gender or the other.

The second hypothesis postulated was that caregivers with Master's degrees or obtaining their Master's degrees have more egalitarian views on young children's play than caregivers with Bachelor's degrees. All of the participants that were working on or obtained their Master's degrees studied in fields that were related to early childhood education. Therefore, it can be hypothesized that early childhood educators would have more egalitarian views on children's play based on the child's gender if they received more formal education.

Methods

Sample

The sample consisted of nine lead teachers in the infant, toddler, and preschool classrooms at an accredited childcare facility in a large city in the southern US. All of the respondents completed a four-year Bachelor's program at minimum, with three of the respondents either completing or working on completing their Master's degree. The mean age range of the participants was 29 to 30 years-old (median = 20+ to 29 years-old), while the mean

length of time the participants have been caregivers was 5 to 10 years (median = 5+ to 10 years). The majority of participants were teachers in classrooms with toddlers ranging from twelve months to thirty-six months. The composition of the children in the classroom include a mean of seven boys (median = 7) and a mean of six girls (median = 6) in each room.

Data Collection

The data of this study was collected through the completion of independent, mixed methods survey created by the researcher. The survey consisted of three quantitative sections: the first section had questions pertaining to the demographics of the participants and the children in their classrooms; the second section had questions pertaining to the caregiver's observations of the gender of children that participate in certain activities; and the third section had questions that asked the caregivers about their personal opinions regarding gender non-conformity in children's play.

The quantitative items in the second section of the survey asked for the caregivers to reflect on the past week before completing the survey. Specifically, they were asked to think about the gender makeup of children in their classrooms participating in various activities. The items were sorted into activities associated with young girls, activities associated with young boys, and activities with gender-neutral associations. For example, items concerning rough and tumble play were associated with boys because there is an observable pattern beginning in early childhood that boys tend to participate in more risky behaviors than girls (Benenson, 2005). While rough and tumble play is developmentally appropriate for young children no matter their gender, researchers have found that the participants of the physically dominating play style are often young boys.

Additionally, items pertaining to activities associated with girls included items regarding the gender make-up of children that listen to the directions and requests of caregivers.

Researchers have found that young girls are more likely to "...maintain closer proximity to teachers, comply more with adult-generated rules...and exhibit more concern about their school performance" (Benenson, 2005, 6), so the traditional education setting is more advantageous to young girls than to young boys. Other items that asked about activities associated with girls included reading to large groups and participation in the library area because young girls are more likely to show interest in reading books and are more likely to have books read to them than young boys (Westerlung & Lagerberg, 2008).

The third section of the survey addressed the caregivers' personal opinions of children participating in activities that are non-conforming to the children's gender. Western-American culture has produced associations of what is and is not expected of people, especially children, based on their gender. One such example of cultural perceptions of gender is that, for the most part, there is a societal norm that does not allow young boys to play with dolls (Lipsitz-Bem, 1983). Subsequently, an example of one of the items on the third section asked the caregivers about their opinion of young boys playing with dolls.

The survey also had a qualitative set following the quantitative set. The two questions on the qualitative set asked the caregivers if they noticed any differences between the children in their classroom based on gender and if they personally believed they treated any of the children differently based on gender. While this section encouraged the respondents to answer both questions with one to two sentences, each of the answers concerning differences between children based on gender were consistent enough to be coded into "physical differences", "critical thinking/play differences", "differences in morality", or "no differences."

Results

The current study analyzed if there is a relationship between the caregivers' education and their opinions of play based on gender as well as if there is a relationship between the length of time as a caregiver and the caregivers' opinions of play based on gender. The mean of perceptions of gender makeup in activities and the mean of opinions of gender non-conformity were calculated for each of the respondents. There were not enough participants to conduct a MANOVA, so two Pearson's correlations (see Table 1 and 2) were conducted to analyze the relationships referenced above.

Based on the results of the study, length of time as a caregiver had a negative, but non-significant, relationship with the perception of the gender of children in activities that are typically associated with girls ($r = -.11, p = .78$), a positive, but non-significant, relationship with the perception of the gender of children in activities that are typically associated with boys ($r = .22, p = .57$), and a very small negative and non-significant relationship with the perception of the gender of children in activities with neutral gender associations ($r = -.01, p = .97$). Additionally, the length of time as a caregiver had a negative, but non-significant, relationship with perceived differences of the children in their classrooms based on gender ($r = -.11, p = .78$).

Additionally, it appears that the highest level of education completed by the caregiver had a small positive, but non-significant, relationship with the perception of the gender of children in activities that are typically associated with girls ($r = .06, p = .88$), a positive and non-significant relationship with the gender of children in activities that are typically associated with boys ($r = .28, p = .47$), and a negative, but non-significant, relationship with the perception of the gender of children in activities with neutral gender associations ($r = -.18, p = .64$). Furthermore, the highest

level of education completed by a caregiver had a negative, but non-significant, relationship with perceived differences of the children in their classrooms based on gender ($r = -.26, p = .51$).

The items concerning gender non-conformity asked the caregivers about their views about boys playing with dolls and boys dressing up in dresses. Every caregiver answered that young boys should be encouraged to play with dolls and/or wear dresses if they already show an interest in participating in those activities, regardless of their time spent as a caregiver or their highest level of education.

Discussion

The current study determined that there were no statistically significant relationships between a caregiver's highest level of education and perceptions of children's play based on gender. It was also determined that there was not a statistically significant relationship between a caregiver's length of time working with children and perceptions of children's play based on gender. The assumption from the results of the study reflect that length of time as a caregiver, as well as highest level of education completed, have no impact on the caregiver's views of children's play based on gender, and do not play a significant role in how egalitarian their views are within the sample collected.

It should be noted that there were a number of limitations with this research. First, the limited setting where the data were retrieved as well as the convenience of sampling attributed to the small sample size that participated in this research. The relatively small sample size limited the possibility of analyzing the statistics that only Pearson's correlations could have been produced. Because of the small sample size and the limited possibilities of statistical analysis, the sample that participated in this study is not entirely representative of the population for this study (infant, toddler, and preschool caregivers in the United States) and should be approached with

caution; further research that includes larger sample sizes and more diverse caregiving centers are warranted.

Another limitation of the study was the survey used to measure the variables. While the items asking about the independent variables of length of time as a caregiver and highest level of education completed were clear and concise, it is possible that the items generated to measure gender stereotypes and the presence or absence of egalitarian views did not accurately measure those dependent variables. The survey should have been administered in a trial run or items should have been used from premade surveys with high levels of validity and reliability.

While the limitations of the study are prevalent, it is still important to focus on the finding of how caregivers perceive the gender of children that participate in particular activities as well as the differences that they associate with their children based on their gender. There may still be an association between the independent variables and the dependent variable. As both length as a caregiver and level of education increase, caregivers' views of children's play become more egalitarian and less stringent on gender stereotypes.

It is important to notice the associations with gender in early childhood caregivers. According to Thorne and Lauria, "the social supports for gender segregation...are lifelong" (1986, p. 188). If children receive consistent messages early on in life that participating in activities that do not coordinate with their assigned gender should be discouraged, then these children will continue to strictly follow societal gender norms at the possible expense of their physical and mental health. However, if young children receive consistent messages that participating in activities typically associated with the opposite gender should be encouraged, then these children can spend the rest of their lives living confidently in their identity.

Moreover, all children, regardless of ethnicity, "...family background, language group, or developmental status" deserve to have the support of significant adults in developing a well-rounded life (Tayler, 2015, p. 169). A caregiver's responsibility to provide support and responsiveness to young children includes the disassociation of sex-typing characteristics from the children in their care. In providing the equal level of care and responsiveness for all of the children in their care, primary caregivers can be assured that each one of them can successfully develop interpersonal skills, move through different stages of development, and gain confidence in themselves as individuals. This assurance can be lifelong, as confident and capable children often grow to become confident and capable adults.

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Table 1. Correlations among Teachers' Education Level and Gendered Play

		Correlations				
		mean of play associated with girls	mean of play associated with boys	mean of play with neutral association	gender differences (qualitative set)	education level
mean of play associated with girls	Pearson Correlation	1	.343	.436	-.217	.057
	Sig. (2-tailed)		.366	.240	.575	.883
	N	9	9	9	9	9
mean of play associated with boys	Pearson Correlation	.343	1	.473	-.763*	.277
	Sig. (2-tailed)	.366		.198	.017	.470
	N	9	9	9	9	9
mean of play with neutral association	Pearson Correlation	.436	.473	1	-.747*	-.180
	Sig. (2-tailed)	.240	.198		.021	.644
	N	9	9	9	9	9
gender differences (qualitative set)	Pearson Correlation	-.217	-.763*	-.747*	1	-.256
	Sig. (2-tailed)	.575	.017	.021		.506
	N	9	9	9	9	9
education level	Pearson Correlation	.057	.277	-.180	-.256	1
	Sig. (2-tailed)	.883	.470	.644	.506	
	N	9	9	9	9	9

Table 2. Correlations among Teachers' Length of Time as a Caregiver and Gendered Play

		Correlations				
		length of time as caregiver	mean of play associated with girls	mean of play associated with boys	mean of play with neutral association	gender differences (qualitative set)
length of time as caregiver	Pearson Correlation	1	-.112	.219	-.014	-.111
	Sig. (2-tailed)		.775	.571	.971	.776
	N	9	9	9	9	9
mean of play associated with girls	Pearson Correlation	-.112	1	.343	.436	-.217
	Sig. (2-tailed)	.775		.366	.240	.575
	N	9	9	9	9	9
mean of play associated with boys	Pearson Correlation	.219	.343	1	.473	-.763*
	Sig. (2-tailed)	.571	.366		.198	.017
	N	9	9	9	9	9
mean of play with neutral association	Pearson Correlation	-.014	.436	.473	1	-.747*
	Sig. (2-tailed)	.971	.240	.198		.021
	N	9	9	9	9	9
gender differences (qualitative set)	Pearson Correlation	-.111	-.217	-.763*	-.747*	1
	Sig. (2-tailed)	.776	.575	.017	.021	
	N	9	9	9	9	9

Appendix A

Survey of Caregiver Observations About Play

Thank you for considering to help me for my undergraduate Honor's thesis for Human Development and Family Sciences at the University of Arkansas. This survey is designed to study caregiver perceptions about play. The survey should take about 15 minutes to complete. Your identity will remain anonymous and the answers you provide will be confidential to the extent allowed by law and by University policy. We know that your day-to-day lives as caregivers are very busy, so my Honors' mentor and I really appreciate your willingness to participate! So if you have any questions or concerns, please e-mail me at blairb@uark.edu, my mentor at mcranda@uark.edu, or the Institutional Review Board at irb@uark.edu. Participants are entitled to the benefits of receiving the results of this study as well as a link to the scholarly article if published.

Filling out and returning this questionnaire implies consent. Participation poses minimal risk to you, and your participation is voluntary. Refusing to participate will involve no penalty or loss of benefits to which you are entitled. This research has received IRB Project Number _____. Completed questionnaires should be placed in the manila envelope provided, the envelope sealed, and then taken to the office where the researcher will pick them up. Please complete this survey by Friday, April 14. Note that there are no marks identifying specific classrooms. Thus, your answers are completely anonymous.

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Please check the appropriate line or answer the question to help us know a little about your role.

1 What is your highest level of education?

High school

Some college

Bachelor's degree

Master's degree

2 What is your caregiver role?

Lead or Assistant Teacher

Aide

Volunteer

3 If you attended college, what was your area of study?

Child Development

Sociology

Education Other

Psychology

4 If you attended graduate school, what was your area of study?

5 What is your age?

18 to 20

20+ to 29

29+ to 30

30+ to 40

40+ to 49

49+ to 50+

6 How long have you been a caregiver?

1 to 5 years

5+ to 10 years

10+ to 15 years

15+ to 20 years

20+ to 25 years

25+ to 30 years

30+ years

The following questions will ask you about the demographics of the children in your classroom. We would like to remind you that your answers are completely anonymous and the identity of the children in your classroom will not be revealed. Please respond to the best of your ability.

1 What is the primary age group of the children in your classroom?

Infants (3 months-12 months)

Toddlers (12 months-36 months)

Preschoolers (36 months +)

- Mixture of infants and toddlers
 - Mixture of toddlers and preschoolers
 - Mixture of infants, toddlers, and preschoolers
- 2 How many boys are in your classroom?
- 3 How many girls are in your classroom?

The following questions will ask about your experiences with the children in your classroom and the types of play in which they participate. Think back for the past week in the classroom when answering these questions.

- 1 Which group have you seen playing with the baby dolls the most often?
- Girls
 - Boys
 - Equal number of girls and boys
 - None, we don't have baby dolls in my classroom
- 2 Which group have you seen playing with the blocks the most often?
- Girls
 - Boys
 - Equal number of girls and boys
 - None, we don't have blocks in my classroom
- 3 When reading to small groups of children, how would you classify the gender of the majority of the children in most cases?
- Girls
 - Boys
 - Equal number of girls and boys
 - None, I don't read to the children outside of whole group activities
- 4 Which group have you seen spending time in the library area the most often?
- Girls
 - Boys
 - Equal number of girls and boys

None, we don't have a library area

5 Which group have you seen spending time engaging in dramatic play (or pretend play) the most often?

Girls

Boys

Equal number of girls and boys

None, I have not seen the children participate in dramatic play

6 Which group have you seen spending time in the art center the most often?

Girls

Boys

Equal number of girls and boys

None, we do not have an arts center in my classroom

7 Which group have you seen spending time in the music center the most often?

Girls

Boys

Equal number of girls and boys

None, we do not have a music center in my classroom

8 When playing games and participating in activities, which group have you observed to be the most receptive of the rules that have been established?

Girls

Boys

Equal number of girls and boys

None, we do not play rule-based games and activities

9 Which group have you seen participating in "rough and tumble" play on the playground (wrestling, jumping, climbing, kicking balls, chasing) the most often?

Girls

Boys

Equal number of girls and boys

None, I have not seen the children participate in rough and tumble play

10 Which group have you seen spending the most time playing with balls?

Girls

- Boys
- Equal number of girls and boys
- None, there are no balls that the children play with.

The following section will ask you about your personal opinions regarding the play styles and interactions of children in general. Please answer the following to the best of your abilities.

- 1 Some caregivers believe that young boys are prone to more intense physical play. Some caregivers believe that girls or all children can have this tendency towards intense physical play. Which of the following is true of your experience?
- Boys are more likely than girls to participate in rough and tumble play.
 - Girls are more likely than boys to participate in rough and tumble play.
 - Both boys and girls have the same likelihood of participating in rough and tumble play.
 - In general, children do not have a tendency towards rough and tumble play.
 - Other (please describe): _____
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- 2 Some caregivers believe that young girls participate more in more passive activities, like playing pretend, than do boys. Some caregivers believe that young girls participate less often in passive activities. Based on your experience, which of the following statements would you agree with the most?
- Girls are more likely than boys to participate in passive play.
 - Boys are more likely than girls to participate in passive play.
 - Both boys and girls have the same likelihood of participating in passive activities.
 - Other (please describe): _____
-

- 3 Some caregivers have different reactions to rough and tumble play depending on the gender of the children involved. Based on your experiences, which of the following statements would describe your feeling about this type of play?
- I have less of a problem with boys in rough and tumble play than I do girls.
 - I have less of a problem with girls in rough and tumble play than I do boys.
 - I have no issue with any children participating in rough and tumble play.
 - Other (please describe): _____

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- 4 Some caregivers believe that when young children participate in rough and tumble play, they are just being kids. Some caregivers believe that when children participate in rough and tumble play, they should be heavily monitored. Based on your experience, which of the following statements would you agree with the most?

I have no issue with children participating rough and tumble play as it is in their nature.

I immediately break up children when they are participating in rough and tumble play.

I monitor children when they participate in rough and tumble play and break it up if I think the play becomes too dangerous.

- 5 Some caregivers are uncomfortable when young boys play with dolls. Some caregivers have no issues when boys play with dolls. Which of the following statements would you agree with the most?

Boys should be discouraged from playing with dolls.

Boys should be encouraged to play with dolls.

Boys should be allowed to play with dolls if they show an interest in them.

Other (please describe): _____

- 6 Some caregivers are uncomfortable when young boys dress up in clothes associated with girls, such as dresses, fairy wings, and pink accessories. Some caregivers feel comfortable when young boys dress up in clothes associated with young girls. Which of the following statements would you agree with most?

Young boys should be discouraged from dressing up in feminine clothes and accessories.

Young boys should be encouraged to dress up in feminine clothes and accessories.

Young boys should be allowed to dress up in feminine clothes and accessories if they show an interest in them.

Other (please describe): _____

This final set of questions asks about your experiences as a caregiver in your current classroom. The final two questions are open-ended-so you can write one to two sentences about your experience.

- 1 Do you personally see differences between the boys and girls in your classroom? If so, what are these differences?

Thank you again for agreeing to complete this questionnaire. We would like to remind you that your identity is anonymous and your answers will be kept confidential to the extent by law and by University policy. Please remember to place your answers in the manila envelope provided, sealed, and returned to the front office for the researcher to pick up the result.