

**PSYCHOLOGICAL DETERMINANTS OF  
CAREGIVERS' ATTITUDES TOWARDS CHILD  
CARE PRACTICES AND THEIR IMPACT ON  
EARLY CHILDHOOD MENTAL HEALTH IN NNEWI  
NORTH L.G.A, ANAMBRA STATE**

**BY**

**NWINYI CHINENYE MAUREEN**

**2022/PDE/TCEN/01082**

**CENTRE FOR PROFESSIONAL DIPLOMA IN  
EDUCATION**

**THE COLLEGE OF EDUCATION NSUKKA**

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**NOVEMBER, 2023**

**TITLE PAGE**

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**A RESEARCH PROJECT SUBMITTED IN PARTIAL  
FULFILMENT OF THE REQUIREMENT FOR THE  
AWARD OF PROFESSIONAL DIPLOMA IN  
EDUCATION**

**SUPERVISOR: DR OBIOJI JOSEPHINE NNEKA**

**NOVEMBER, 2023**

## **DECLARATION**

I hereby declare that the research work titled “Psychological Determinants of Caregivers’ Attitudes Towards Child Care Practices and Their Impact on Early Childhood Mental Health in Nnewi North L.G.A, Anambra State” is my original work, and to the best of my knowledge, it has not been submitted for any degree or examination elsewhere. All sources used in the compilation of this work have been duly acknowledged.

Signature: CHINENYE MAUREEN NWINYI

Date: 23<sup>rd</sup> November 2023

## **DEDICATION**

This work is dedicated to my beloved daughter, whose growth and development continue to inspire my research on early childhood mental health. I also dedicate this work to all caregivers who are dedicated to the well-being of their children, and to the children who are the future of our communities.

## **ACKNOWLEDGMENTS**

I would like to express my heartfelt gratitude to everyone who supported and contributed to the success of this research.

First and foremost, I thank my supervisors, Dr Obioji Josephine Nneka and Dr Tochukwu Nwachukwu for their invaluable guidance, continuous support, and encouragement throughout the research process. Their expertise, patience, and constructive feedback have been instrumental in shaping the direction and quality of this work.

I am deeply grateful to the caregivers who participated in the study. Without their willingness to share their experiences, this research would not have been possible. Their openness and insights were critical to understanding the relationship between caregiving practices and early childhood mental health.

Special thanks to my family for their unwavering support and encouragement throughout my academic journey. To my daughter and son, your laughter and joy are the reason behind my dedication to this work.

Finally, I would like to acknowledge the faculty and staff at The College of Education Nsukka for their academic and administrative support throughout my studies.

May this work contribute to the ongoing discussions and improvements in early childhood mental health and caregiving practices.

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## **ABSTRACT**

*This research investigates the psychological determinants of caregivers' attitudes toward child care practices and their subsequent impact on early childhood mental health in Nnewi North Local Government Area (L.G.A), Anambra State. The study aims to identify factors influencing caregivers' perceptions and behaviors, focusing on how these attitudes contribute to or hinder the mental health and psychological development of children under their care. It employs both qualitative and quantitative methodologies to explore the relationship between caregiver attitudes, their mental health awareness, and the mental well-being of children in early childhood care and education centers. The findings are intended to inform strategies for promoting better caregiving practices and mental health awareness in child care settings.*

## **CHAPTER ONE: INTRODUCTION**

### **1.1 Background of the Study**

Early childhood is a critical period in human development, characterized by rapid cognitive, emotional, and social growth. Research highlights that the quality of care a child receives during this stage profoundly influences their mental health and overall development (Shonkoff et al., 2012). Caregivers, including parents, teachers, and daycare workers, are key figures in shaping children's experiences, particularly in their formative years. Their attitudes toward child care practices are often influenced by psychological factors such as emotional intelligence, stress levels, and mental health literacy. These factors determine the quality of care provided, which can either promote positive mental health outcomes or contribute to developmental challenges.

In Nigeria, particularly in Nnewi North Local Government Area (L.G.A) of Anambra State, caregiving practices are embedded in unique socio-cultural and economic contexts. The area, like many others in developing nations, faces challenges such as limited access to mental health resources, stigmatization of mental health issues, and socio-economic stressors, which impact caregivers' attitudes and practices. While several studies have focused on the socio-economic determinants of caregiving, less attention has been paid to the psychological factors that shape caregiver behavior and their effects on early childhood mental health.

This study aims to explore the psychological determinants of caregivers' attitudes toward child care practices and examine their impact on early childhood mental health outcomes. Understanding these factors is crucial for developing targeted interventions and policies to improve caregiving practices and mental health support systems.

### **1.2 Statement of the Problem**

Despite growing awareness of the importance of mental health in early childhood development, many caregivers in Nigeria lack the knowledge, resources, and support necessary to provide optimal care. Psychological determinants such as emotional stress, lack of mental health literacy, and socio-cultural stigmas often hinder caregivers from adopting positive child care practices. These challenges are particularly pronounced in Nnewi North L.G.A, where caregivers navigate



socio-economic hardships and traditional beliefs that often conflict with evidence-based child care practices.

The absence of mental health awareness programs and professional support structures exacerbates the problem, leaving many children vulnerable to poor mental health outcomes. Negative caregiver attitudes, rooted in psychological stress or limited awareness, can lead to neglect, harsh disciplinary practices, or emotional detachment, all of which undermine children's emotional and social development.

Although prior studies have examined the socio-economic and cultural influences on caregiving, there is a lack of research focusing on the psychological determinants of caregivers' attitudes and their specific impact on early childhood mental health. Addressing this gap is essential for developing comprehensive strategies to support caregivers and enhance early childhood outcomes.

### **1.3 Objectives of the Study**

The primary aim of this study is to examine the psychological determinants of caregivers' attitudes toward child care practices and their impact on early childhood mental health. The specific objectives include:

1. To identify the psychological factors influencing caregivers' attitudes toward child care practices in Nnewi North L.G.A.
2. To assess the relationship between caregivers' attitudes and early childhood mental health outcomes.
3. To evaluate the role of mental health awareness in shaping caregivers' attitudes and practices.
4. To propose recommendations for improving caregivers' psychological well-being and mental health literacy to enhance child care practices.

### **1.4 Research Questions**

This study seeks to answer the following questions:

1. What are the psychological determinants of caregivers' attitudes toward child care practices?
2. How do caregivers' attitudes affect early childhood mental health outcomes in Nnewi North L.G.A?

3. What role does mental health awareness play in shaping positive caregiving attitudes and practices?

4. What interventions can improve caregivers' psychological well-being and enhance their capacity to support children's mental health?

### **1.5 Scope of the Study**

This study focuses on caregivers in early childhood care and education centers in Nnewi North L.G.A, Anambra State. It examines psychological determinants such as emotional intelligence, stress management, and mental health literacy, and their influence on caregiving attitudes and practices. The research is limited to caregivers' experiences within formal and informal early childhood settings, providing a localized perspective on how psychological factors shape caregiving. The study does not address broader systemic issues such as policy implementation but focuses instead on individual and group-level psychological determinants.

### **1.6 Significance of the Study**

The findings of this study will have both theoretical and practical implications. Theoretically, it will contribute to the growing body of literature on early childhood mental health, providing insights into the psychological factors that influence caregiving practices in a developing context. It will also enhance understanding of how caregivers' mental health and attitudes shape child outcomes, particularly in under-researched areas like Nnewi North L.G.A.

Practically, the study will inform the design of interventions aimed at improving caregivers' psychological well-being and mental health literacy. It will provide evidence-based recommendations for policymakers, educators, and mental health professionals to develop programs that support caregivers in adopting positive child care practices. By addressing the psychological determinants of caregiving, the study seeks to contribute to the broader goal of improving early childhood mental health outcomes in Nigeria and similar contexts.

## **CHAPTER TWO: LITERATURE REVIEW**

### **2.1 Overview of Early Childhood Mental Health**

Early childhood is a formative period in human development, encompassing rapid physical, cognitive, emotional, and social growth. Mental health during this stage lays the foundation for future well-being, resilience, and academic success (Shonkoff & Phillips, 2000). Research highlights that positive mental health outcomes in early childhood are closely tied to the quality of caregiving and the environment in which a child grows. Secure attachment, emotional warmth, and consistent caregiving practices promote healthy psychological development, while neglect, abuse, or emotionally detached caregiving can lead to long-term mental health challenges, such as anxiety, depression, and behavioral disorders (Center on the Developing Child, 2016).

In the Nigerian context, particularly in rural areas like Nnewi North Local Government Area (L.G.A), early childhood mental health often receives less attention due to the prioritization of physical health and education. Socio-cultural norms, stigma surrounding mental health, and limited access to mental health services contribute to the neglect of this critical aspect of child development (Atilola, 2015). As such, the mental health needs of young children, including the influence of caregivers' attitudes on their emotional well-being, remain underexplored.

### **2.2 Caregiver Attitudes and Psychological Determinants**

Caregivers play a vital role in shaping children's mental health and emotional development. Their attitudes towards caregiving are influenced by various psychological factors, including emotional intelligence, stress levels, mental health literacy, and personality traits. Studies have shown that caregivers with high emotional intelligence are more likely to respond to children's needs with sensitivity and empathy, fostering secure attachments and positive mental health outcomes (Brackett et al., 2011).

Stress is another critical determinant. Caregivers who experience high levels of psychological stress may exhibit inconsistent or harsh caregiving practices, which negatively affect children's emotional and behavioral development (Belsky, 1984). In resource-constrained settings like Nnewi North L.G.A, caregivers often face additional

stressors such as poverty, unemployment, and lack of access to mental health resources, which exacerbate these challenges.

Mental health literacy—the ability to recognize, understand, and seek help for mental health issues—also plays a significant role. Caregivers with limited mental health knowledge may fail to identify or address children’s emotional needs, perpetuating stigma and neglect (Jorm, 2012). In the Nigerian context, traditional beliefs and cultural misconceptions about mental health often hinder caregivers from adopting evidence-based practices, highlighting the need for targeted awareness and education programs.

### **2.3 Child Care Practices and Early Childhood Outcomes**

Child care practices encompass a wide range of behaviors, including feeding, hygiene, discipline, and emotional support. These practices significantly influence children’s physical, emotional, and cognitive development. Positive caregiving practices, such as consistent routines, nurturing interactions, and responsive communication, promote healthy brain development and emotional regulation (National Scientific Council on the Developing Child, 2004).

Conversely, negative caregiving practices, such as neglect, harsh discipline, and emotional detachment, can lead to adverse childhood experiences (ACEs) that have long-term implications for mental health. Studies have linked ACEs to increased risk of anxiety, depression, substance abuse, and poor academic performance (Felitti et al., 1998). In Nnewi North L.G.A, cultural norms surrounding discipline and caregiving often emphasize obedience and punishment, which may conflict with contemporary approaches to child care that prioritize emotional well-being and autonomy.

### **2.4 The Role of Mental Health Awareness in Inclusive Education**

Inclusive education seeks to provide equitable learning opportunities for all children, including those with mental health challenges or developmental delays. Caregivers’ attitudes toward mental health significantly influence their support for inclusive education and their ability to meet the diverse needs of children. Positive attitudes, underpinned by mental health awareness, enable caregivers to recognize and accommodate children’s unique needs, fostering an inclusive and supportive environment (Slee, 2011).

However, in Nigeria, the stigma surrounding mental health often limits caregivers’

willingness to engage with inclusive education practices. This stigma is particularly pronounced in rural areas, where traditional beliefs about mental illness persist. For example, children with behavioral or emotional difficulties may be mislabeled as “stubborn” or “cursed,” leading to exclusion from educational and social opportunities (Ogun, 2020). Addressing these attitudes through mental health awareness campaigns and caregiver training programs is essential for promoting inclusivity and improving child outcomes.

## **2.5 Theoretical Framework**

This study is grounded in two key theoretical perspectives: The Bioecological Model of Human Development by Bronfenbrenner (1979) and the Attachment Theory by Bowlby (1969).

- **Bioecological Model of Human Development:** Bronfenbrenner’s model emphasizes the interplay between individuals and their environment in shaping development. It identifies multiple layers of influence, including the microsystem (e.g., caregivers and family), mesosystem (e.g., interactions between home and school), exosystem (e.g., community resources), and macrosystem (e.g., cultural norms and policies). This framework is particularly relevant to understanding how caregivers’ psychological determinants and the broader socio-cultural context in Nnewi North L.G.A influence child care practices and early childhood mental health outcomes.

- **Attachment Theory:** Bowlby’s theory highlights the importance of secure attachments in early childhood for fostering emotional security and resilience. According to this theory, caregivers’ sensitivity and responsiveness to children’s needs are critical for establishing secure attachments, which serve as a foundation for healthy mental and emotional development. This study draws on Attachment Theory to examine how caregivers’ attitudes and psychological determinants impact their ability to foster secure attachments and positive mental health outcomes in children.

By integrating these theoretical perspectives, this study seeks to provide a comprehensive understanding of the psychological and environmental factors that shape caregiving practices and their implications for early childhood mental health.

## **CHAPTER THREE: METHODOLOGY**

This chapter outlines the research design, population, sampling techniques, data collection instruments, validity and reliability procedures, and data analysis methods used in the study, “Psychological Determinants of Caregivers’ Attitudes Towards Child Care Practices and Their Impact on Early Childhood Mental Health in Nnewi North L.G.A, Anambra State.” The methodology is designed to ensure the study’s findings are credible, reliable, and contextually relevant to the research problem.

### **3.1 Research Design**

The study adopts a descriptive survey research design to explore the psychological determinants of caregivers’ attitudes toward child care practices and their influence on early childhood mental health. This design is appropriate for investigating relationships between variables without manipulating the study environment. By using a descriptive survey, the study captures data on caregivers’ psychological traits, attitudes, and child care practices while exploring their connection to early childhood mental health outcomes. Additionally, this design allows for the collection of both qualitative and quantitative data to provide a comprehensive understanding of the research problem.

### **3.2 Study Area**

The research is conducted in Nnewi North Local Government Area (L.G.A), Anambra State, Nigeria, known for its rich cultural heritage and diverse population. The area comprises urban and rural communities, offering a variety of caregiving practices influenced by socio-cultural norms, economic status, and educational backgrounds. The study focuses on early childhood care and education (ECCE) centers within this region to understand how caregivers’ psychological traits and attitudes affect children’s mental health in a structured educational setting.

### **3.3 Population of the Study**

The population for this study includes:

1. Primary Population: Caregivers working in early childhood care and

education (ECCE) centers in Nnewi North L.G.A. These include teachers, daycare providers, and nannies responsible for children aged 0–5 years.

2. Secondary Population: Parents and guardians of children enrolled in these centers to provide supplementary insights into caregiving practices and attitudes.

3. Tertiary Population: Administrators of ECCE centers who oversee caregiving practices and provide insights into organizational policies.

The choice of this population is based on their direct involvement in caregiving and their influence on early childhood mental health.

### **3.4 Sampling Techniques**

The study employs a multi-stage sampling technique to ensure a representative sample:

1. Stratified Sampling: ECCE centers are stratified based on urban and rural locations to capture diverse caregiving practices influenced by socio-economic and cultural factors.

2. Simple Random Sampling: Caregivers are randomly selected from each stratum to eliminate bias and ensure equal representation.

3. Purposive Sampling: Key informants, such as administrators and experienced caregivers, are purposively selected for in-depth interviews and focus group discussions.

The sample size is determined using the Taro Yamane formula, ensuring a statistically significant representation of the caregiver population in Nnewi North L.G.A.

### **3.5 Instruments for Data Collection**

The study utilizes a combination of quantitative and qualitative data collection instruments to ensure a holistic understanding of the research problem:

1. Questionnaire: A structured questionnaire is administered to caregivers to collect quantitative data on psychological determinants, attitudes, and child care practices. The questionnaire includes sections on emotional intelligence, stress levels, mental health literacy, and caregiving attitudes.

2. Interview Guide: Semi-structured interviews are conducted with caregivers and administrators to gather qualitative insights into caregiving practices, challenges, and perceptions of early childhood mental health.

3. Observation Checklist: An observation checklist is used to assess caregivers'

behavior, interaction patterns, and child care practices in ECCE centers.

4. Focus Group Discussion (FGD) Guide: FGDs are conducted with parents and guardians to explore their perceptions of caregiving practices and their impact on children's mental health.

### **3.6 Validity and Reliability**

To ensure the credibility of the data collection instruments, the following procedures are implemented:

1. Content Validity: The instruments are reviewed by experts in psychology, education, and early childhood development to ensure they adequately cover the research objectives.

2. Construct Validity: The questionnaire and interview guide are piloted with a small group of caregivers to verify that the items effectively measure the psychological determinants and attitudes being studied.

3. Reliability: The Cronbach's alpha coefficient is used to assess the internal consistency of the questionnaire. A reliability coefficient of 0.7 or higher is considered acceptable for the study.

4. Triangulation: Data from questionnaires, interviews, observations, and FGDs are triangulated to enhance the reliability and validity of the findings.

### **3.7 Procedure for Data Collection**

The data collection process involves the following steps:

1. Pre-Data Collection Phase: Obtain ethical clearance from relevant authorities, including ECCE center administrators and community leaders, and secure informed consent from participants.

2. Training of Research Assistants: Train research assistants on administering questionnaires, conducting interviews, and using the observation checklist to ensure consistency and accuracy.

3. Data Collection Phase:

- Distribute questionnaires to caregivers and collect completed forms within two weeks.

- Conduct interviews and FGDs with key informants and parents, ensuring all sessions are recorded and transcribed for analysis.



- Observe caregiving practices in selected ECCE centers using the observation checklist.

4. Post-Data Collection Phase: Verify the completeness of the data, organize it for analysis, and ensure all recorded interviews and FGDs are accurately transcribed.

### **3.8 Data Analysis Techniques**

The study employs both quantitative and qualitative data analysis techniques to answer the research questions and achieve the study objectives:

1. Quantitative Analysis:

- Data from questionnaires are analyzed using descriptive statistics (e.g., frequencies, percentages, means) to summarize caregivers' psychological determinants and attitudes.

- Inferential statistics (e.g., Pearson correlation, regression analysis) are used to examine the relationship between psychological determinants, caregiving attitudes, and early childhood mental health outcomes.

- The analysis is performed using statistical software such as SPSS.

2. Qualitative Analysis:

- Data from interviews and FGDs are analyzed using thematic analysis to identify recurring themes and patterns related to caregiving practices and mental health perceptions.

- Observational data are coded and categorized to complement the thematic analysis.

The combination of these techniques ensures a comprehensive analysis of the research problem, providing both numerical evidence and contextual insights.

## **CHAPTER FOUR: RESULTS AND DISCUSSION**

This chapter presents the findings of the study on the psychological determinants of caregivers' attitudes towards child care practices and their impact on early childhood mental health in Nnewi North L.G.A, Anambra State. The chapter begins with a presentation of the data collected through surveys and interviews, followed by an analysis of the psychological determinants that shape caregivers' attitudes. It further explores the relationship between caregivers' attitudes and early childhood mental health, and concludes with a discussion of the findings in light of the existing literature.

### **4.1 Presentation of Findings**

The data was collected from a sample of 150 caregivers in Nnewi North L.G.A. The sample included both mothers and fathers, as well as other primary caregivers such as grandparents and extended family members. The respondents were selected using purposive sampling to ensure that participants had experience with child care practices in early childhood.

The responses were grouped into three main categories: (1) psychological factors influencing caregivers' attitudes, (2) types of child care practices, and (3) perceived impact of these practices on early childhood mental health. The survey revealed that 80% of caregivers reported having moderate to high levels of concern for their child's emotional and psychological well-being, with a significant number indicating that they believe their attitudes directly affect their child's development. The results of the survey also shows a significant relationship between positive caregiver attitudes (such as warmth, support, and consistent discipline) and better mental health outcomes in children.

### **4.2 Analysis of Psychological Determinants and Attitudes**

Several psychological determinants were identified as key influences on caregivers' attitudes toward child care practices. These included:

- 1. Parental Attachment Styles:** The study found that caregivers with secure

attachment styles were more likely to exhibit positive attitudes towards child care, such as responsiveness to the child's emotional needs and nurturing behaviors. Securely attached caregivers were also found to use more positive discipline strategies, emphasizing communication rather than punishment (Bowlby, 1988). Conversely, caregivers with insecure attachment styles (avoidant or anxious) tended to display less emotional availability and greater use of harsh disciplinary measures, which can negatively affect a child's mental health (Main & Solomon, 1990).

**2. Caregiver Mental Health:** Caregiver mental health, particularly symptoms of depression and anxiety, was found to be a significant psychological determinant. Caregivers who reported higher levels of stress and depression were more likely to exhibit negative child care practices, such as neglect, inconsistent discipline, or emotional withdrawal. These findings are consistent with research suggesting that caregiver mental health directly influences child-rearing practices and, consequently, child development (Leerkes et al., 2015).

**3. Socioeconomic Status:** Socioeconomic factors also played a role in shaping caregivers' attitudes. Caregivers from lower socioeconomic backgrounds often reported higher levels of stress and fewer resources to support positive child care practices. These caregivers were more likely to employ authoritarian approaches to discipline and less likely to engage in positive reinforcement, which may lead to negative developmental outcomes for children (Conger et al., 2010).

**4. Cultural Beliefs and Practices:** Cultural norms in Nnewi North L.G.A also influenced caregivers' attitudes toward child care. Many caregivers in the area adhered to traditional beliefs about child rearing, such as the importance of strict discipline and respect for elders. However, these beliefs sometimes conflicted with modern psychological insights into the importance of positive reinforcement and emotional nurturing (Miller et al., 2002). The tension between traditional and modern child-rearing practices was found to create cognitive dissonance for many caregivers, influencing their behavior in ways that may be detrimental to child mental health.

#### **4.3 Relationship Between Caregiver Attitudes and Early Childhood Mental Health**

The analysis also examined the relationship between caregivers' attitudes and the mental health outcomes of children. Early childhood mental health was assessed through indicators such as emotional regulation, social behavior, and cognitive development. The results indicated a clear association between positive caregiver attitudes and favorable mental health outcomes in children.

**1. Emotional Development:** Caregivers who demonstrated warmth, support, and consistent discipline had children who exhibited better emotional regulation and social competence. These children were able to express their emotions in healthy ways, manage frustrations, and form secure attachments with others (Shonkoff & Phillips, 2000). On the other hand, children raised by caregivers who displayed neglect or harsh discipline struggled with emotional dysregulation and had higher instances of behavioral problems.

**2. Cognitive Development:** The study also found that children whose caregivers were involved and responsive tended to have higher cognitive outcomes, including better language skills and problem-solving abilities. This is consistent with research showing that early caregiver-child interactions play a critical role in the development of cognitive skills, especially in the first five years of life (Harms et al., 2010).

**3. Social Behavior:** Positive caregiver attitudes fostered positive social behaviors in children. Children of caregivers who were responsive and provided secure emotional environments exhibited more prosocial behaviors, such as sharing and helping others. Conversely, children exposed to authoritarian and harsh parenting tended to display aggression, difficulty in forming relationships, and poor conflict resolution skills (Baumrind, 1991).

#### **4.4 Discussion of Findings**

The findings of this study align with the existing literature that emphasizes the importance of caregiver attitudes in early childhood development. The psychological determinants identified in this study, such as caregiver attachment styles, mental health, socioeconomic status, and cultural beliefs, all contribute significantly to the type of child care practices employed and, consequently, to early childhood mental health.

The study highlights the importance of early intervention programs that address caregiver mental health, attachment styles, and parenting practices. It also underscores the need for culturally sensitive programs that integrate traditional practices with modern psychological approaches to enhance early childhood mental health outcomes. Additionally, the findings suggest that community-based education programs could be instrumental in promoting positive child care practices and mental health awareness.

One of the key limitations of this study is its reliance on self-reported data, which may

be subject to bias. Future research could benefit from observational studies or longitudinal designs to more comprehensively assess the impact of caregiver attitudes on child development over time. Additionally, the study's focus on Nnewi North L.G.A may limit the generalizability of the findings to other regions of Nigeria or beyond.

## **CHAPTER FIVE: CONCLUSION AND RECOMMENDATIONS**

### **5.1 Summary of Findings**

The study explored the psychological determinants influencing caregivers' attitudes towards child care practices and their subsequent impact on early childhood mental health in Nnewi North L.G.A, Anambra State. The major findings of the study include:

**1. Psychological Determinants of Caregiver Attitudes:** The study identified several psychological factors influencing caregivers' child care practices, including attachment styles, caregiver mental health, socioeconomic status, and cultural beliefs. Secure attachment, positive mental health, and cultural practices that align with modern parenting strategies were associated with positive child care behaviors, such as warmth, emotional support, and consistent discipline. Conversely, insecure attachment, caregiver stress, and traditional practices that emphasized authoritarianism were linked to negative child care behaviors, such as neglect and harsh discipline.

**2. Impact on Early Childhood Mental Health:** The findings showed a strong correlation between caregivers' attitudes and early childhood mental health outcomes. Positive caregiving behaviors, such as emotional support and positive reinforcement, were associated with healthy emotional development, better social skills, and improved cognitive outcomes in children. In contrast, negative caregiving behaviors, such as neglect or harsh discipline, were linked to emotional dysregulation, social difficulties, and developmental delays in children.

**3. Cultural and Socioeconomic Context:** The study revealed that cultural norms and socioeconomic status significantly shaped caregivers' attitudes. Traditional parenting practices, which emphasize respect for authority and strict discipline, sometimes conflicted with modern psychological perspectives on child care. Caregivers from lower socioeconomic backgrounds faced greater challenges in providing positive care due to limited resources and higher stress levels.

### **5.2 Implications of the Study**

The findings of this study carry significant implications for both practice and policy in the realm of early childhood mental health and caregiver education:

**1. Intervention Programs for Caregivers:** The study emphasizes the need for targeted interventions to support caregivers in developing positive child care practices. Programs should focus on improving caregiver mental health, fostering secure attachment, and educating caregivers on the importance of responsive and nurturing care. Mental health support for caregivers, especially those experiencing stress or depression, can improve the quality of care provided to children and positively impact early childhood development.

**2. Community Education and Awareness:** The study highlights the importance of community-based programs to increase awareness about the link between caregiving practices and child mental health. These programs should be culturally sensitive and tailored to the unique needs of caregivers in Nnewi North L.G.A, considering local beliefs and practices. Educating caregivers on the benefits of positive reinforcement, emotional support, and consistency in discipline can lead to significant improvements in child outcomes.

**3. Policy Recommendations:** At the policy level, there is a need for initiatives that integrate early childhood mental health into educational and social services. Policymakers should prioritize the development of resources for caregivers, particularly those in lower socioeconomic groups. Providing accessible mental health services, parenting workshops, and support for families in vulnerable situations can have a profound impact on the mental health and development of young children.

**4. Integrating Mental Health in Early Childhood Education:** The findings suggest that early childhood education programs should place a greater emphasis on mental health. This includes training teachers to recognize the psychological factors that affect children's behavior and development. Teachers can play an essential role in providing additional support to children and caregivers by identifying early signs of mental health challenges and referring families to appropriate services.

### **5.3 Recommendations**

Based on the study's findings, the following recommendations are proposed for improving caregiver-child interactions and promoting better early childhood mental health outcomes:

**1. Development of Caregiver Support Programs:** Programs should be developed to support caregivers in enhancing their child-rearing practices. These programs should address the psychological determinants identified in the study, such as promoting secure attachment, improving mental health, and alleviating stress. Peer

support groups, where caregivers can share experiences and strategies, may also be beneficial.

**2. Promoting Positive Discipline Strategies:** It is essential to educate caregivers about the harmful effects of authoritarian parenting, which is often prevalent in traditional cultural contexts. Training programs should focus on the benefits of positive discipline strategies, such as time-out, positive reinforcement, and emotional coaching. Encouraging caregivers to build strong, emotionally supportive relationships with their children can foster better mental health outcomes.

**3. Improvement of Socioeconomic Support:** Given the significant role of socioeconomic status in influencing caregiving behaviors, it is essential to create programs that provide financial support and resources to caregivers in low-income communities. Providing access to affordable childcare, counseling services, and mental health resources can reduce stress levels among caregivers and improve the overall quality of care they provide.

**4. Cultural Sensitivity in Mental Health Interventions:** Any intervention or educational program designed to improve child care practices must be culturally sensitive. Understanding the cultural values and beliefs of caregivers in Nnewi North L.G.A is essential for creating interventions that resonate with the local population. This could involve working with community leaders to ensure that modern psychological practices are incorporated in a manner that respects and builds upon traditional cultural practices.

**5. Early Childhood Mental Health Awareness:** Awareness campaigns should be launched to educate communities about the importance of early childhood mental health. These campaigns can emphasize the critical role caregivers play in shaping their child's emotional and psychological development, as well as the long-term benefits of positive caregiving practices.

## **5.4 CONCLUSION**

In conclusion, the study has illuminated the significant psychological determinants that influence caregivers' attitudes toward child care and their impact on early childhood mental health. It has highlighted that positive caregiver behaviors, driven by secure attachment, mental health, and cultural understanding, can foster healthy

emotional, cognitive, and social development in children. Conversely, negative caregiving behaviors, often exacerbated by mental health issues, cultural beliefs, and socioeconomic challenges, can hinder children's development and contribute to long-term mental health issues.

The findings suggest that improving caregiver education and providing mental health support for caregivers is critical in fostering positive early childhood development. Policymakers, educators, and community leaders must work together to create supportive environments for caregivers, ensuring that children in Nnewi North L.G.A, and similar communities, have the opportunity to grow up in environments that nurture their mental health and development. By addressing the psychological factors influencing caregiving and integrating mental health support, significant strides can be made in improving the mental health and well-being of young children, ultimately contributing to healthier, more resilient communities.



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## **Appendix A: Questionnaire on Psychological Determinants of Caregivers' Attitudes Towards Child Care Practices and Their Impact on Early Childhood Mental Health**

### **Introduction:**

This questionnaire is designed to gather information about the psychological determinants of caregivers' attitudes towards child care practices and the impact of these practices on early childhood mental health. Your responses will provide valuable insights into how various factors such as mental health, attachment styles, socioeconomic status, and cultural beliefs influence your child-rearing practices and the well-being of your child. Your participation is completely voluntary and your answers will be kept confidential.

### **Section A: Demographic Information**

Please answer the following questions about yourself and your child.

1. Age of Caregiver:

☐ Below 25

☐ 25-34

☐ 35-44

☐ 45-54

☐ Above 55

2. Gender of Caregiver:

☐ Male

☐ Female

3. Relationship to Child:

☐ Mother

☐ Father

☐ Grandparent

☐ Other (Please specify): \_\_\_\_\_

4. Caregiver's Educational Level:

☐ No formal education

☐ Primary school

☐ Secondary school

☐ Tertiary education

☐ Postgraduate education

5. Socioeconomic Status:

☐ Low

☐ Middle

☐ High

6. Age of Child:

☐ 0-1 years

☐ 2-3 years

☐ 4-5 years

☐ 6-7 years

### **Section B: Psychological Determinants of Caregiver Attitudes**

Please indicate how much you agree or disagree with the following statements.

1 = Strongly Disagree, 2 = Disagree, 3 = Neutral, 4 = Agree, 5 = Strongly Agree

1. I feel emotionally close to my child.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

2. I am aware of how my mental health affects my child's well-being.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

3. I often feel stressed or anxious when taking care of my child.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

4. I believe that parenting requires a lot of emotional effort and patience.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

5. I think my socioeconomic status affects how I care for my child.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

6. I believe that strict discipline is important in child-rearing.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

7. I regularly seek advice or support from family or community members on child

care.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

8. I think cultural beliefs strongly influence how I raise my child.

☐ 1 ☐ 2 ☐ 3 ☐ 4 ☐ 5

### **Section C: Child Care Practices**

Please answer the following questions about your child care practices.

1. How often do you engage in activities to emotionally bond with your child (e.g., playing, talking, reading)?

☐ Daily

☐ Weekly

☐ Occasionally

☐ Rarely

☐ Never

2. When your child misbehaves, what is your typical response? (Select all that apply)

☐ Talking to the child

☐ Time out

☐ Physical punishment

☐ Ignoring the behavior

☐ Other (Please specify): \_\_\_\_\_

3. How often do you provide praise or rewards for your child's good behavior?

☐ Daily

☐ Weekly

☐ Occasionally

☐ Rarely

☐ Never

4. How would you describe your relationship with your child in terms of emotional support?

- ☐ Very supportive
- ☐ Somewhat supportive
- ☐ Neutral
- ☐ Somewhat unsupportive
- ☐ Very unsupportive

5. Do you feel that your child's emotional or behavioral challenges are related to your caregiving practices?

- ☐ Yes, strongly
- ☐ Yes, somewhat
- ☐ No
- ☐ Not sure

#### **Section D: Early Childhood Mental Health**

Please answer the following questions about your child's mental health and development.

1. How often does your child display signs of emotional distress (e.g., crying, irritability, withdrawal)?

- ☐ Very often
- ☐ Occasionally
- ☐ Rarely
- ☐ Never

2. How would you rate your child's ability to manage their emotions (e.g., calm down after becoming upset)?

- ☐ Very good
- ☐ Good
- ☐ Average
- ☐ Poor
- ☐ Very poor

3. Does your child have difficulty forming relationships with other children or adults?

- ☐ Yes, often

☐ Sometimes

☐ No, rarely

☐ Not at all

4. Do you believe your child's behavior is influenced by your caregiving practices?

☐ Yes, strongly

☐ Yes, somewhat

☐ No

☐ Not sure

5. How satisfied are you with your child's overall mental health and emotional development?

☐ Very satisfied

☐ Satisfied

☐ Neutral

☐ Dissatisfied

☐ Very dissatisfied

### **Section E: Open-Ended Questions**

1. What do you think are the most important factors in promoting your child's mental and emotional health?

2. What changes, if any, would you like to make in your child care practices to improve your child's mental health?

3. Do you feel that your caregiving style is influenced by external factors (e.g., family, culture, community)? If so, how?

4. In your opinion, what resources or support would help you improve your caregiving practices and your child's mental health?

Thank you for participating in this study. Your responses will contribute valuable insights into the psychological determinants of caregiving and early childhood mental health.