

The Conceptions of Shelter Educators on Development and Their Care Practices in Bathing Situations

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Abstract

Researchers have demonstrated the necessity to study sheltering institutions for children, emphasizing the educators' conception and its continuous interactions with the child. This study investigated the educators' conceptions of development and their care practices in a sheltering institution for children. At first, 100 educators answered the Knowledge of Child Development Inventory (KIDI). Secondly, 10 of such educators were observed on their care routine during the bath. The data analyses show that personal and professional experience with children, more than level of education, may explain a better performance of the educators when their knowledge about infantile development was measured and in the quality of their care practices. It was verified that the level of knowledge on development is a relevant variable to the quality of the interactions and care offered along with hygiene and health, as well as the experience to deal with aggregated children in their private and professional affairs. In these conditions, the children were more stimulated, guided, and taught by the educators, which is essential for the promotion of child health.

Keywords: conceptions on development, shelter educators, care practices, bath situation

Studies investigating the process of the human development and its contextual element have been prominent in the scientific scenario. In this sense, the concept of developmental niche proposed by Harkness and Super (1992; 1994), attempts to capture the continued and mutual interaction between the physical and social environments, the caretakers' psychology and their habitual and ritualized practices as subsystems from which people develop, whether in the family or institutional environment. Literature shows that the study of the developmental niche components has inspired different researchers (Magalhães, Costa & Cavalcante, 2011; Ribas, Seidl de Moura & Bornstein, 2007; Ruela & Seidl de Moura, 2007; Silva, Vieira, Seidl de Moura & Ribas, 2005), especially the caretaker's psychology subsystem in the family context. Even though the role attributable to primary caretakers is important (Huang, Caughy, Genevro & Miller, 2005; Raghavan, Harkness & Super, 2010), it is seen, to a greater extent nowadays, that there are other sources of influence in the developmental pathway besides the family, as the care and education have been increasingly shared among different institutions (Cavalcante, Magalhães & Pontes, 2009; Magalhães et al., 2011; Moré & Sperancetta, 2010).

In urban societies, especially occidental ones, children have spent part of their time in children institutions, either in fulltime or part time day care centers and schools (Bahia, Magalhães & Pontes, 2011; Millei & Gallagher, 2011), or in shelters searching for protection due to their risky and social vulnerability condition (Cavalcante et al., 2009; Cintra & Souza, 2010).

Among institutions dedicated to attending children in the early childhood, educational ones have received greater attention from development scholars (Bahia et al., 2011; Millei & Gallagher, 2011). On the other hand, sheltering institutions for children, on the last decade, started to engage a special place in researches that investigate the influence these long-stay collective care environments have on the infant development (Cavalcante et al., 2009; Rosa, Santos, Melo & Souza, 2010). Only recently it is noted the increased interest in the role played by caretakers in sheltering institution, in reference to their conceptions and knowledge about childhood (D'Aroz & Stoltz, 2010; Vashchenko, Easterbrooks & Miller, 2010) in addition to their care practices (Costa, Corrêa, Garotti, Magalhães & Cavalcante, 2010, Moré & Sperancetta, 2010).

Important scholars of the development give emphasis to the fact that care practices provide the basis to compose daily routines when dealing with children (Harkness & Super, 1994; Huang et al., 2005; Raghavan et al., 2010). Towards this direction, studying care routines has been considered an interesting research theme about childhood nowadays, besides providing subsidies to know the functioning and dynamics involved in the process, as well as to identify how the interaction between the caretaker and the child happens in these moments.

Studies on attention to childhood (Millei & Gallagher, 2011; Nogueira & Costa, 2005; Silva, Pendu, Pontes & Dubois, 2002) have been dedicated to investigate the caretakers' routine in several moments, for example, the bath moment. In particular, the bath situation and the body hygiene has been receiving a special glance from the medic area and from scholars on child development, however, focusing on pathologies and/or the importance of training and the correct use of the toilet. The thoughts brought by these authors still draw little attention for the fact that the bath situation must be seen as a social and cultural space, for that reason, it must be settled as a quality environment for the child development in the early years. In fact, only now the bath time gradually starts to be seen as an important routine moment destined to daily care along with the child's hygiene and health (Miller & Gallagher, 2011), for promoting direct shares, relaxation and intimacy through an intense interaction dynamic.

In a study conducted by Silva et al. (2002), middle class mothers, older, with high level of education, who had a support system for handling their sons, demonstrated increased sensitivity to the child's behavior in the bath situation. Nogueira and Costa (2005) investigated the working routine of a social mother in a temporary foster home. This study showed that the bath moment involved individualized care, however, marked by a short period of time and few affective exchanges, in other words, a daily routine apparently restricted to concerns about the hygiene, with few interaction and dialogues between the social mother and the child, besides a slightly personalized care.

The studies above approach a common situation for the care routine of children in family and institution environments. In them, the hygiene practice, chiefly the bath, was presented as part of the care routine which has especial importance for the healthy development of the subject, being driven by conceptions about childhood and personal characteristics of the caretaker. Practices that promote health are important aspects discussed in the Technical Orientation of Sheltering Services (Brazil, 2009), such as factors that have influence on the life cycle of children and adolescents who live in shelters. Amongst the main issues discussed in this document it is argued that deprivation of health and hygiene care may represent new threats to the child's security and development coming from an environment usually poor of social affective and cognitive stimulation.

In the current study, based on the observation of care routines in the bath moment, it was investigated the connection between conceptions about development and care practices among educators in a shelter for children, as well as the interactions established in this specific context.

Method

Participants

Were interviewed 100 educators from a sheltering institution which corresponded to 95.23% of the employees responsible for the daily care of children from zero to six years old. From this total 10 educators were selected to be part of the observational sessions of their care practices in bathing situation, the main choice criterion was their performance in Knowledge of Infant Development Inventory (KIDI).

Institution Contextualization

The sheltering space is a governmental institution which attends children in a social vulnerability situation, aging from zero to six years old, situated in the city of Belem, state of Pará, Brazil. The organization had 102 educators, from the total 87 worked rotations in 12/48h shift; 3 management and supervision coordinators, and 12 servants which worked 6 hours a day, 6 educators worked the morning shift, the others in the afternoon. The institution has a capability of attending a maximum of 50 children; nonetheless, it frequently welcomes 70 children a month, who are distributed in dormitories (D) according to their age (showed in months): D1 (0 to 5), D2 (6 to 12), D3 (13 to 24), D4 (25 to 36), D5 (37 to 48), D6 (49 to 60), and D7 (61 to 72).

Instruments and Materials

It was used the Knowledge of Infant Development Inventory, formulated by MacPhee (1981), translated and adapted in Brazil by Ribas, Seidl de Moura, Gomes and Soares (2000). This instruments assets the caretakers' knowledge related to the developmental pathway performance, more probable periods for the acquisition of motor, perceptual and cognitive abilities; factors related to principles of development; parental practices; feeding, hygiene and safety care. The inventory was adapted to be used with educators adjusting the content of the questions to the institutions' characteristics, reality and working conditions of the professionals responsible for the care routine.

The inventory is composed by 75 questions grouped in four categories: Care Practice (14 items), Norms and Acquisition (32 items), Development Principles (17 items), and Health and Security (12 items). 48 of those questions have 3 possible answers (agreed, disagreed, or I'm not sure), and 20 others require the participant to choose among 4 possibilities (agreed, younger, older, or I'm not sure). Lastly, in 7 questions it is required to choose one among five answers. In addition to the questions related to the educators conceptions already mentioned, the inventory contains questions about the interviewed socio-demographic information.

It was used a standard register sheet for the transcription of observational data captured with a camcorder, focusing on the register of working routine and the educator's care practices.

Procedure

A judicial authorization was granted by the Ethics Committee through the document nº 018/2008 (Ethic Committee of Research with Human Beings from the Health Science Institute at Para State University - CEP-ICS/UFPA), in addition to a consent from the person responsible for the institution. The researchers attended three times a week the different environments of the institution as a habituation period.

After making contact with the participants, the main aims of the study were clarified, the Informed Consent was signed and KIDI was applied. The observation period began by selecting 10 educators separated in two groups (G1 and G2) according to their performance in KIDI. G1 was composed by educators who reached the highest scores of correct answers, in G2 the educators had the highest mistake percentage.

The observation period of each focal subject was a total of 12 hours, with a minimum of 1 hour each day. At the end of the data collection were performed 120 observation sessions of educators and their daily practices, 60 hours each group. The sessions represented intervals obeying to shifts and schedules of different working days.

Data Analyses

Data referring to the educators' characterization and the knowledge inventory were organized in a databank from Statistical Package for the Social Sciences (SPSS). The data analysis involved descriptive statistics, by frequency and inferential, through Pearson's correlation test. Analysis correlating the degree of association between KIDI score and its category with variables as age, number of children, years of service, and educators' level of education were carried out.

The transcription of the videos was performed in a standard registration sheet, highlighting aspects of the environment in which the session took place, besides the general characteristics of the educator and the children who were interacting with the focal participants. Observational data were selected in which the educator was involved in the bath situation. From those, some episodes that demonstrated care practices and routine activities were extracted.

This content was analyzed through categories adapted from Piccinini, Frizzo and Marin (2007), such as: 1) instructs about the bath nature and function: refers to the conduction given by the educator on how the child must bathe, what part of the body it must wash and how to get dressed; 2) stimulates, encourages, and challenges to bathe: the educator incites and reinforces the child participation on the bath, as taking the clothes out, picking up its belongings, and possibility to choose its own clothes; 3) teaches concepts and highlights the bath phases: the educator instructs about concepts, as numeric order, body parts, object names, and description of the bath phases.

Two researchers took part in the development of the categories system, analyzing the material independently. The divergences were discussed and solved by consensus, with an agreement level higher than 80%.

Though the analysis of the practices content and its organization in categories, some extracts were identified in the transcription of the observational data that differentiate its occurrence in each group (G1 and G2). Lastly, some possible relations between the knowledge assessed by KIDI and care practices found in each group according to adopted categories were discussed.

The participants were identified by code and by the letters corresponding to the group they were part: “G1” and “G2”. The children received fake names in order to maintain their anonymity.

Results and Discussion

To what concerns the educators’ profile almost the total (99%) is composed by women aging from 21 to 56 years, 63% of whom had children. About their level of education 51% had finished high school and 49% was finishing or had finished graduation. From the total of educators working in the institution 71% had been working for more than 2 years. This set of data indicates a group of professionals composed by young women with personal and professional experiences with children, both as mothers and educators.

The educators’ performance in KIDI is shown in Table 1.

Table 1: Percentage of Right, Wrong Answers, and Uncertainty among Educators in Relation to KIDI’s Categories (N=100)

Categories	Right	Wrong	Uncertainty
Care Practice	80	16	4
Health and Security	64	23	13
Norms and Acquisition	60	26	14
Development Principles	68	22	10
General	66	23	11

In the set of questions from KIDI and in all categories the educators achieved a score level of at least 60 percent. Some studies show that the more it is known about child development the better the care conditions and the development promoting practices (Harkness & Super, 1992, 1994; Ribas et al., 2007). These results show that it might have a positive correlation between the satisfactory level of knowledge on the issue demonstrated by the educators and on how they take care of the children on a daily basis.

It was noticed, yet, that the categories Care Practice and Developmental Principles had the highest percentage of correct answers. The other ones (Health and Security, and Norms and Acquisition) had the highest percentage of wrong answers. Such data are different from Silva’s et al. (2005) findings, in which the category Health and Security had the highest percentage of correct answers; however, the lowest score was showed in the principles of development category. That is because the category Care Practice reaches aspects of the daily care of the child, which theoretically makes this knowledge harder for primipara mothers. In this research, it was verified that cumulate experiences acquired by these educators in other professional experiences and the fact that they are parents, may contribute to explain such differences.

In possession of the data referring to the educator’s performance, the results in reference to their socio-demographic profile is presented in Table 2.

Table 2: Correlation between Age, Number of Children, and Service Time of Educators and the Number of Right Answers in KIDI (N=100)

Nº of Correct Answers	Age (years)	Number of children	Service time (months)	Education
Care Practice	0.02	-0.04	0.23*	-0.08
Health and Security	0.15	0.19	0.06	-0.12
Norms and Acquisition	0.01	0.21*	0.21*	-0.05
Development Principles	-0.12	-0.01	-0.01	0.09
General	-0.03	0.15	0.19	-0.05

*p < 0.05

By analyzing the set of questions from KIDI, it was noticed that the selected variables were not related to the level of knowledge of the educators about child development. However, when each category was analyzed it was verified a significant statistical correlation between the scores referring to the Norms and Acquisition with variables as number of children ($r=0.21$), and service time ($r=0.21$), the Care Practice category was positively correlated to service time ($r=0.23$).

The age variable showed no positive correlation to any category analyzed, which corroborates the findings from Ribas et al. (2007), and Silva et al. (2005). About the variable level of education the data are different from those found by Huang et al. (2005), Ribas et al. (2007), and Silva et al. (2005). These results suggest that the fact that the educator has finished college doesn't necessarily give him an advantage on the discussed issue. In this sense, the resources acquired to create conditions favorable for the children's health may be related to other factors besides level of education. It was also observed that personal characteristics such as the parenthood experience and time of service were demonstrated to have more influence when compared to the other ones. This suggests that the daily living with the children is an important condition for a satisfactory level of knowledge on the development subject, especially concerning Care Practices and Norms and Acquisitions.

From the theoretical point of view here presumed, the educators' knowledge about child development is essential for better identifying their care practices adopted and vice-versa (Harkness & Super, 1992, 1994). To that end, two groups composed by 10 participants were observed in care practices: G1 composed by the 5 educators with the highest correct percentage in the KIDI inventory, and G2 with the other 5 who had the highest percentage of mistakes.

The G1educators answered correctly from 57 to 62 questions, were between 27 and 40 years old; three had finished high school, one had finished college and the other one hasn't. All of them had children and worked for more than 24 months in the institution. G2 educators made between 23 and 27 mistakes in the questions, aged between 37 and 56 years, three had finished college and two the high school. Three of them had children and had been working for more than 24 months in the institution.

From the total of 120 hours of footage material from the observation sessions, 72.95 hours contained data of routine care activities (bathing, feeding, sleeping and playing), 11 hours were dedicated to care practices and bathing. The observational data show that bath practices happen, in general, in two moments, morning and afternoon, with an average duration of 16 minutes, including body cleaning and change of clothes.

Concerning the quality of the interactions observed, some extracts of these care practices in bath situations and particularities of both groups are presented in the continuance. The extracts were grouped in bigger categories, adapted from Piccinini et al. (2007). The first category refers to the bath nature and function.

EPISODE 1: the children arrive from the bath in the dormitory. The educator asks them to stay at one corner of the room while she gets the moisturizer. Lays a small portion in each child' hand. Paula asks: "Aunt, what about me? Aunt, and me, aunt?". The educator says: "spread it in your leg. On the hair no!". The educator looks at João and says: "On the hair no. It is not on the hair. Like this, look!". João asks for more. The educator says: "No. It's enough!". The educator spreads moisturizer on her hands and then on her arm, saying: "like this, look! Like this, here on the leg. Everywhere on the belly, on the back". (Educator 1, G1, D5)

EPISODE 2: In the bathroom the educator gives Francisco a bath. In the same place Claudio (D5) is taking a shower under another professional's supervision. The educator says to Francisco: "wet it, pass the hand on the head, like this". While speaking the educator makes circular movement with the hand and continues: "pass the hand on your little head. Go ahead, wet the hair. Already?"

Let's! Let me put it on your hand, and then you spread it on your hair. Do like this, let me put it, do like this". While talking the educator shows her hand in a shell shape and continues: "like this, look". She goes to Claudio who is in the shower and says: "Like this, just like Claudio. Do like this, Claudio" and shows the hand in shell shape. She looks at Francisco and says: "look, can you see"? Can you see, now it's your turn" (Educator 3, G1, D4)

EPISODE 3: The educator is in the dormitory with Pedro who had just arrived from school. She takes his shirt off and says: "come on Pedro, you can't even take your shirt off" and throw it on the ground with the others. She looks at Pedro and says: "Take your socks off. Are you going to take a shower with your socks on?!". She takes Pedro's brush, a towel, and leaves the room saying "Let's go Pedro". She stops in front of the dormitory door. Pedro says he can't take the socks off. She says: "I can't believe you don't know how to take the sock off Pedro?! What a story". The educator enters the dormitory, crouches and takes the sock out of one foot saying: "you just need to do like this, look!" and take the other sock. She continues: "You don't know how to do this? Lazy is what you are" (Educator 9, G2, D7).

EPISODE 4: In the bathroom the educator gives Bia and Maria a bath. She shampoos Bia's hair. The educator gets closer to Maria and the girl gets under the shower. The educator shampoos her hair. Approaches Bia and says: "Come here Bia so I don't get wet". She holds Bia's arm, crouches and soaps her. Raises, goes to Maria, holds her arm and take her from under the shower, crouches in front of the girl and says: "there is pen ink all over your hand, did you see how it is? It's all ugly" and soaps her (Educator 8, G2, D6).

In episode 2 the educator first leads the activity and then guides the child to accomplish it by itself through the given instructions. The educator uses her own behavior, as well as other children's, as an action model, as it is noticed on the described episodes, especially to teach how to proceed in aggregate environment, such data found in studies of Huang et al. (2005), and Ruela and Seidl de Moura (2007) in family environments. In some bath and clothes change moments the educator uses herself as a model/sample for the children to see how to perform the task. This strategy is most frequently seen when it is necessary to manage several children at the same time, for this procedure tends to help decreasing time spent with the activity. If the educator has to orient each child individually, it may demand a longer time, which could make her lose control of the situation and the children to dissipate.

It was observed that educators from G1 are, at all times, promoting teachings through its behavior in several situations, the same way they use other children as reference to transmit knowledge and acquire important abilities for its development. For Rosa et al. (2010), and D'Aroz and Stoltz (2010) these sharing moments with adults and children during the institution routine have a positive contribution for the children's psychosocial development. In episode 2 the educator guides the child through verbal (commands), and non verbal behavior (gestures), when the learning is by imitation.

Episode 3 shows the attitude adopted by the educator facing a skill the children reports not to have at that time. In such practices the educator emphasizes the lack of the child skill for accomplishing the task and then guides it in this direction. On episode 4 the educator gives the child a bath, doing it for her, not with her.

The first characteristic to call our attention from educators from G2 is precisely the level of orientation during the care and bath practices, for in this group, little is observed concerning orientation to the children on how to take a shower, what part of the body must be washed, how to shampoo, rub the scalp, among other things, corroborating the findings from Nogueira and Costa (2005). This data may be related to the fact that, among the educators, the bathing practice, doing it for the child, was shown to be frequent, even though the sessions were performed majorly with children older than 5 years old. In this case, the children already had skills to accomplish the task by themselves or without an adult supervision.

The second category refers to stimulate, encourage and challenge to take a shower. Here are some extracts representing it.

EPISODE 5: In the bathroom the educator takes the towel and says: "Where's Tati?". Tati answers: "She's here". The educator rolls the towel around the girl and says: "Look, you put on your sandals, very good". They leave the bathroom and walk towards the dormitory. In the dormitory the educator holds Camila's hand, sits on one of the beds, dries the girls' head while saying: "Only Tati remembered to bring the sandals to the dormitory, right Tati?". The child says: "Right!". The educator says: "Only Tati remembered to bring the sandals from the bathroom, she's already becoming a young girl, right Tati? (Educator 5, G1, D4)

EPISODE 6: The educator and Cassio are in the dormitory picking out the clothes, they just came from the shower. She takes a pair of shorts and asks: "Do you want these ones? These shorts are going to be falling off of you, I guess". Cassio says: "It's a woman's". The educator says: "It's not a woman's, it's a man's!" She takes a shirt, shows it to the boy saying: "Look, do you like it? Do you?" He shakes his head in a negative reply. She says: "Oh, so give it to me!". Cassio says: "Give me, aunt". The educator replies: "Do you want it?". Cassio answers: "I want it". She, then, dresses him the shirt (Educator 2, G1, D6).

EPISODE 7: In the dormitory the educator arrange the children who had just come from the bath. The educator walks towards Igor who had taken clothes from the bed while saying: "Let me see it, let me choose it, I choose it, first dry out well your hair". The educator gets a couple of clothes and says: "This one Igor. Igor is skinny". Igor smiles. She says: "Yes!" The educator points to the clothes on the bed and say to Maria: "This one is yours" (Educator 8, G2, D6).

EPISODE 8: In the dormitory the educator helps some children to get dressed. They just came from the bath. The educator looks at Daniel and asks: "Can you dress yourself?" Daniel says no. The educator says: "No? But you have to learn already", she puts his underwear on him and asks: "how old are you?" and continues to dress his underwear on him. She takes the pair of shorts and says: "come on kitty, how old are you, 2? 3? And puts the shorts on him (Educator 9, G2, D5).

Extracts 5 and 6 demonstrate practices concerning children stimulation to accomplish some tasks and for that they use reinforcement of the desirable behavior, the incentive to pick out the clothes and the children's taste formation. Some strategies that use reinforcement of children behavior were identified to be of great importance for the children development by Moré and Sperancetta (2010), for it indicates to the child what is adequate and what it must keep doing. On episode 5 the educator motivated the child to accomplish the task and reinforced positively at the moment it was appropriately accomplished. This data was brought out by social educators, in D'Aroz and Stoltz (2010) study, as an important one for the care of children and adolescents in sheltering institutions.

Another issue of discussion is associated to personal choices opportunities. In the institution researched, as in other shelters for children, the care routines are marked by sharing clothes, materials and toys, where the social use overcomes the personal. This kind of environment usually offers few opportunities for the child to make choices and decisions that attend their personal interest. Nonetheless, despite the tendency to establish strict rules and routines for it is an aggregate environment Episode 6 illustrates the possibility of a flexible attitude from educators and that choosing their own clothes stimulate the children. Comparatively, educators from G1 adopted more flexible practices when it is considered the subject of respecting the children's decision, as for example in the episode where they decided what they would wear. This aspect corroborates the findings from Magalhães et al. (2011), in which highlights that strategies focused on listening and on children's preference may be found in institutional environments as strategies to obtain the child adherence to the activity or as a way to amend conflict in the interactions with its peers.

Extract 7 and 8 show two basic aspects found in the educators' practice that include clothes picking and the incentive to dress by itself. In what concerns clothes picking it is perceived that it is a task of educators from G1, as few or no opportunity is given to the children by the educators from G2, in the sense of leading them to choose the clothes or their preference. On the subject, Cintra and Souza (2010) considered the use of practices by the educators that depreciate the individual's singularity may be harmful for the education, thus for the children development.

Another marked aspect is the incentive for the child being able to dress by itself. On episode 8 the educator scan the child's ability in the dressing task, however, the used strategies are about investigating the abilities, without, nonetheless, presenting actions that aim at teaching the child to accomplish the task with a higher independence level.

In what concerns to the stimulation category it is noted that G1 presented more frequently practices towards the children's education. Nevertheless, in G2 the stimulations were presented in episodes that involved children with less than one year. In this group the educator's role is presented as hierarchically superior, and, for that matter, their choices should prevail. On the other hand, in G1 it was verified the existence of an open dialog between the educator and the child, for having taken into consideration the child's perceptions and preferences.

The last category highlighted in the bath situations is to teach concepts and emphasize important steps of the bath. The following extracts illustrate representative episodes from this category.

EPISODE 9: In the bathroom the educator gives Tati and Bruno a bath. The educator passes some soap on the girl's hand and say: "rub your hand". Tati backs off. The educator says "Wait there Tati". The girl smiles. The educator says: "wash the underarm, the underarm. Where's the underarm? Rub the neck. Where's the neck?" Tati shows the neck and says: "it's here" and smiles. Bruno shows the neck and says: "it's here". The educator says: "that's right" and continues to pass soap on them (Educator 3, G1, D4).

EPISODE 10: In the bathroom the educator gives Carlos a bath. She turns on the shower and counts: "one, two, three, four, now". Carlos says: "No". The educator and Carlos count together: "one, two, three, four, now". Carlos gets under the shower. The educator asks: "you only learned until four?". She grabs the brush, passes soap, and passes on the kid's body while continues to say: "you only learned until four? It's missing the five. After the four comes the?". Carlos says: "Five". The educator says: "Very good". She continues to rub the boy's body with the sponge. Carlos says: "after comes the six". The educator asks: "and after the six?" Carlos answers: "Nine". The educator says "the seven, it's the seven" (Educator 4, G1, D7)

EPISODE 11: In the bathroom the educator gives Duda and Nina a bath. The educator spreads soap on Duda's body and armpit. Duda says: "Underarm". The educator says: "It is armpit. Learn the name", and continues to spread the soap. They finish the bath and go to the dormitory. The educator turns to Duda, who is putting on the pants and helps her getting dressed, putting the belt on the pants. Nina says: "I left my sandals *in* outside". The educator says: "It's not *in* outside, it's outside" (Educator 9, G2, D7).

EPISODE 12: In the bathroom the educator gives Cassio a bath. She puts shampoo on his hand and says: "spread it on your head". Cassio spreads the shampoo on the head and chest. The educator says: "no, not on the body, on the body we use soap". He spreads the shampoo on his head. The educator says: "wet the head". Cassio wets his head. The educator says: "on the leg, wash your bottoms, the pee-pee" (Educator 7, G2, D6).

The extracts 9 and 10 demonstrate that dialogs during the bath are constant and almost always related to what the child is living at that moment, besides, the educators use elements from the situation itself to promote children's learning. On its turn, extracts 11 and 12 show interactions during the bath marked by teachings. The moment is full of learning possibilities and by the knowledge diffusion in which the educators base themselves to disseminate ideas and concepts, using, for that reason, common experiences of the children in the care routine. In this direction, the bath context is set as an adequate environment for social exchanges between caretaker and child, besides gathering a set of practices based on conceptions about childhood, health and hygiene, as emphasized by Millei and Gallagher (2011).

By the end of the study it was verified that there are strong differences between both groups of educators observed in this institution in what concerns with how to deal with children in bath situation. Moreover, the extract referring to the teaching category indicate that the quality of interactions in the bath situation and/or clothes changing was not demonstrated to be an aspect to differentiate the groups, considering that in both there were identified practices aimed at teaching concepts, body parts' names and number counting. Therefore, in both groups, it was noticed that the bath moment is consistently used to stimulate and to teach several skills to the child.

In the remaining categories the educators from G1 adopted practices more directed to orienting and stimulating some specific skills through positive reinforcement and by giving the opportunity for the children to practice making personal choices. It was verified, yet, that when G2 educators were responsible for children younger than 2 years old, the quality of the interactions was poor when considering orientation, stimulation and teachings on how to accomplish a given task, which corroborates the data from Nogueira and Costa (2005). On the first two years of life the child doesn't have enough abilities to perform this task independently or with just the guidance of an adult, it needs a caretaker to preserve this care (Cavalcante et al., 2009; Magalhães et al., 2011). For that reason it is understood that the bath must not be seen only as a moment for cleaning the body, but as a moment for constant interactions between the educator and the child. This activity usually provides moments of closeness and body contact (Bahia et al., 2011; Costa et al., 2010; Nogueira & Costa, 2005; Silva et al., 2002), experiences which, given the environment settings considered by the research may be rare (Cavalcante et al., 2009; Costa et al., 2010), in addition to very important for the child development (Millei & Gallagher, 2011).

Final Considerations

The data presented in this study showed that having practice in taking care of children whether in parenthood or in similar professional activities works as a variable that positively influences the level of knowledge about child development. In these terms, the gained experience in dealing with children in this age may have represented, for the researched educators, the opportunity to gain and assimilate specific ideas and knowledge on the subject. What means, hence, a larger possibility for them to improve the quality of their practices involved in the care and development of the children, in agreement to what Costa et al. (2010), and Moré and Sperancetta (2010) stated.

Clear differences were verified concerning the quality of social interactions observed on both groups of participants. The educators that demonstrated to have higher level of knowledge on the child development tended to adopt care practices that value the child as an active member, a developing individual who needs to listen and be listened, whose voice must be respected for being capable of expressing opinions and making decisions. In this context, it is considered that the specific knowledge, the practical experience of taking care of children and the presence of strategies directed towards orientation, children stimulation, it may suggest the possibility for potential benefits for the development in regards to a greater preoccupation with the quality of interactions that give shape to the care practices of the institution.

Therefore, the challenge to study development taking as reference the caretaker' role (D'Aroz & Stoltz, 2010; Huang et al., 2005; Raghavan et al., 2010; Vashchenko et al., 2010) and its routine practices (Moré & Sperancetta, 2010; Silva et al., 2002) is unequivocally important for researches, such this one, that conceives the sheltering institution for children at social risk as a developmental niche. This type of study provides subsidies to understand the dynamic involved in ordinary routine situations as the bath, considering it to be a privilege moment of interaction (Millei & Gallagher, 2011; Silva et al., 2002) and affective sharing, besides teachings, orientations and stimulation, which are important elements in adopting practices that promote development, providing a quality environment for the children.

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