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**Interested contributors should obtain a copy of the guidelines for authors** from Early Childhood Australia’s website: [www.earlychildhoodaustralia.org.au](http://www.earlychildhoodaustralia.org.au) or contact

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This unthemed edition of the journal presents articles that reflect the need for carers and educators of young children to be imbued with professional skills and an innovative mindset. This allows them to be effective practitioners that are self reflective, interventionist and inclusive in their teaching and learning practices.

As stated in the previous issue of AJEC, a transcript of a recent speech will now be included as a regular feature of the journal. Included in this edition is the speech presented by Louise Porter at Early Childhood Australia’s Biennial Conference held in Hobart, July 2003. Porter provides readers with an interesting, thoughtful dissertation on the sociology of childhood and the importance of valuing children. Underpinning all early childhood practice is the view that practitioners hold of children, which permeates decisions of programming and responses to emotional and behavioural needs.

Next, Kilgallon and Maloney pose the question: What do early childhood teachers know about teaching children with disabilities? The authors highlight the importance of the dual responsibility of integrating children with disabilities into mainstream education as well as inducting them into the education system. The concept of ‘inclusion’ requires early childhood teachers to take stock of their existing knowledge base and to be proactive in seeking relevant information and advice.

Much has been written in the research literature about parent engagement and the positive influence the ‘parent voice’ has in terms of the quality of the care and education of children. Elliott reports on her work using focus groups to identify what is important to parents and their suggestions about how such sharing could be achieved.

Teachers are expressing concern about the ‘social readiness’ of many children and their abilities to negotiate the ever increasing complexities of the modern kindergarten classroom particularly those children from ‘at risk’ backgrounds. Buford and Stegelin examine the social demands of the kindergarten classroom and the teaching of social skills that incorporate developmentally appropriate practices with explicit teaching using an integrated approach.

The article by Ortlipp is insightful as the author explores the issue of ‘silence’ and the different ways of understanding ‘silence’; in particular creating spaces for critical dialogue to occur.

Readers are challenged by Sims’ article, which enquires: Are we asking the right questions about child care? The author provides a comprehensive view of what the research literature is telling us about the impact of child care on the outcomes for children.

There is increasing evidence that young children are not sufficiently active on a regular basis. The companion articles by Martin and Hands, using a case study approach, examine a teaching resource designed to support teachers in implementing a fundamental movement skill program.

Bear, Lovejoy and Daniel provide a literature review and dialogue about parents combining work and parenting which often becomes a vexed issue causing considerable stress, anxiety and guilt for families when their children are sick and in need of care. Readers will relate to the challenge of balancing work and family needs!

Fleer’s review of Worms, shadows and whirlpools: Science in the early childhood classroom suggests that this is a welcomed resource for teachers working with young children.

Enjoy reading the articles in this edition of the journal and if you have any comments or suggestions please contact the publications section at Early Childhood Australia.

Narelle Hargreaves
AJEC Committee
Talking about valuing children to a delegation of early childhood professionals seems like a clear case of preaching to the converted. Yet two things caused me to select this topic.

First, when I was teaching at university, my students were teachers – many of them early childhood teachers – in graduate programs. At the outset of a lecture on behaviour management, I would ask the group if it would be alright for a caregiver to smack someone who was deliberately spitting food at her during feeding. Admittedly, over the years fewer and fewer said that they would condone smacking – but some always did. Then I clarified that I had not been thinking of a three-year-old spitting the food, but an 83-year-old who had Alzheimer’s disease. The answer then would unanimously change: it was now not alright for the carer to smack the elderly person. When I asked what was the difference, on one occasion one of the group said it was because the elder had been a person (but, presumably no longer was!). In other words, a child was not yet a person.

The second reason for speaking on this topic is that during my research into behaviour management practices in child care centres (or long day care) I observed that, whereas caregivers typically had a developmental view of children when it came to their learning, many had a moralistic view of children when it came to their behaviour. One saw developmental errors as natural; the second saw behavioural errors as punishable.

During my research, it became clear that at the heart of adults’ approaches to disruptive behaviour was their view of children. So I will begin by describing a range of views of childhood. In doing so, I will draw on the sociology of childhood but need in advance to flag that I am not a sociologist and so this will not be an exhaustive critique.

Views of childhood

1. Rousseau’s innocent child

The first view of childhood is of Rousseau’s innocent child. According to Rousseau, a child starts out life close to nature and will achieve virtue if uncorrupted by adult influences and if permitted free and playful self-expression. The modern translation of this concept could perhaps be Elkind’s (1988) concept of the ‘hurried child’.

This view sounds positive and I must say, in these days of frenzied, structured extracurricular activities for even the youngest of children, I am attracted to many of its tenets. But it has the negative effect of seeing children as passive victims. Perhaps the way to deal with the hurried child is not through the concept of corrupted innocence, but through a humanist view of childhood.

2. The sour view of children

The second view of childhood is what U.S. writer Alfie Kohn (1996) has called a ‘sour view’ of children. This upholds that children are born as ‘sinners’ (for want of a better word). The philosopher, Thomas Hobbes, once described life as ‘nasty, brutish and short’. The same description is often applied to children (It seems that those who believe this of children were never children themselves).

This view sees children as delinquents-in-waiting (as the source of social disorder). It distrusts the influence of the peer group, which it sees as opposite to parental agendas. The research on children’s friendships counters this clearly: over many years social researchers have found that young people choose antisocial peers only when they have a poor relationship with their parents. When their relationship with their parents is close, they choose friends of whom their parents would approve.
This sour view leads to attempts to keep young people in school (which it regards as their rightful place) longer as a cure for social disorder (to keep them off the streets), when the cause of the disorder is chronic poverty, not children.

By the way, the rate of mild intellectual disability is eight times higher in the U.S. than in Sweden (Sameroff, 1990). Whereas profound intellectual disability has an organic cause, mild disability is caused by social deprivation. In Sweden, high taxes allow families with young children to receive adequate housing, food and an education – with direct effects on the children’s development.

But back to the ‘sour view of childhood’. Other effects of this view are that it leads to notions that children need socialising and discipline (equating this with punishment) as if they are so inherently naughty that we have to beat this tendency out of them. On Michael Parkinson’s television program recently, one of his guests asserted that, if it is okay to hit children on the grounds that this is the only way to make them understand, then that means we can also hit tourists, because they don’t seem to be able to follow directions either.

This view underpins a system of behaviour modification, in which we feel that we must reward children for behaviour of which we approve, as if they will not think to act thoughtfully again; and that we must ‘come down hard on them’ when they act unkindly, because otherwise they will keep acting that way. Today I will be offering alternatives to these practices.

3. The blank slate
This third view sees children as bereft of useful knowledge, compared with adults. Children are ‘blank slates’, empty and in need of adult information and skills. The corollary of this view is that adults are responsible and fully competent – that is, stable, complete, ‘grown up’.

In other words, adults are human beings, while children are only human becomings.
Lee (2001, p. 5) states this view thus:

The human being is, or should be, capable of independent thought and action, an independence that merits respect. The human becoming, on the other hand, is changeable and incomplete and lacks the self-possession and self-control that would allow it the independence of thought and action that merits respect.

Growing up is therefore a process of turning something (a child) into its opposite (an adult).

This blank slate view turns children into a resource, but one that is in need of shaping, training and controlling: in other words, in need of an education. The task of adults is to fill children with the information and skills that we deem will be useful to them (and to society). This view leads to the notion of adults as gardeners: intervening at each stage of growth, taking deliberate control over the types of plants (children) that flourish, training and feeding them to ‘maximise their potential’. The focus is not on their present but on their future.

Aside from behaviour management, one of my other interests is gifted education. Nowhere is this focus on the future so strong as with the parents and educators of gifted learners. Yet the aim of education is not for children to reach their potential, and gifted children are no more obliged than average learners to do so. Besides, how can anyone tell what their potential is, or if they have reached it? Moreover, I would hope that we are striving until the day we die rather than having at some point in life ‘reached our potential’ after which, one has to assume, the going thereafter would be all downhill.

If we think of the aim of education as being the reaching of potential, then parents will be pressured into creating the very hurried children about whom David Elkind (and others) are concerned. One parent whom I met recently was told when she decreased her child’s ballet lessons from three per week to one per week that she was failing to help her child reach her potential. The child was three years old!

I recognise that in these economic rationalist times, politicians can be won over only by pointing out that it is five times cheaper to spend money on children early in their lives than to have to rehabilitate them as adults. Nevertheless as educators, we need to keep in mind that the future is not the point. Children are people now and have needs now, irrespective of what they develop into later in life.

Now of course, over time, the blank slate view has changed from seeing children as passive recipients of adult knowledge and skills, to being more active in their own learning. From the perspective of children as passive learners, the teacher’s task was to ensure orderly (passive) behaviour as a necessary condition for learning.
to occur. Under the more modern, active, perspective, the teacher’s role is to enable children to learn for themselves. But at the heart of both is the notion that children are only becoming adult – or, as asserted by the sociologist Nick Lee (2001) – becoming human.

### 4. The ecological or humanist view

The last view that I shall discuss is the ecological or humanist view. From the standpoint of this perspective, Lee (2001: xiv) asks, ‘Why is it that children and adults have ever been thought of as fundamentally different types of persons?’.

Like the active blank slate perspective, the ecological view sees children as vibrant human beings, who are rich and inventive and who actively construct their own identities and understandings of the world.

But, more than that, children are worthy in their own right, not simply for who they will become. It does not regard chronological age as an adequate criterion for distributing dignity and respect.

This humanist perspective also recognises that:
- adults are dependent – at least interdependent – too. (If they need more than the usual level of support, this is explained by their circumstances, rather than their age);
- adult life and adult roles are not as certain as the notion of ‘being grown up’ implies;
- adults continue to develop throughout life so, hopefully, while still alive are never ‘complete’.

Therefore, this view rejects the dichotomies of adult-child/becoming-being. It rejects the distinction between adults and children, one that allows for only two ways of being human and asserts one as standard and the other as deviant (Lee, 2001).

### Practical implications of views of childhood

The second edition of Young children’s behaviour (Porter, 2003) has just been released here and in the U.S at the last minute, the U.S publishers insisted that we remove all mention of the word discipline as they understood the term to mean corporal punishment (smacking). As it happens, the word refers to both a process of disciplining - which in some circles could incorporate physical abuse - and the outcome. It should go without saying that when I use the word to refer to the process of disciplining, I exclude all forms of physical punishment and, indeed, advocate the use of no rewards or punishment at all. There is more in today’s workshop on the alternatives.

Now to the philosophical differences between the behaviourist and humanist approaches, the first of which is the relative status accorded to adults and children.

#### 1. Adult-child status

If children are seen only to be becoming human and adults as already human, there is a clear justification for telling rather than listening. As a result of the view of children as blank slates – as only becoming human – their point of view, opinions and desires have often been ignored because their age has been taken as a sign that they are not worth listening to. This means, for example, that when a child is refusing to comply with an adult’s directive, this signals the need for discipline, rather than a need to listen to what may be a justifiable objection on the child’s part.

The blank slate view of childhood leads to adults acting as bosses, rather than leaders. Adults gain their authority from having the power to make children uncomfortable, rather than from their expertise. This leads to stand-offs when children protest one of our decisions. We cannot change our minds (which in some circumstances would be the fair and wise thing to do) as that would mean that the child has ‘won’ and we have ‘lost’, by which we mean that we will have lost power. But children respect expertise rather than power, and so the expert or leader would be prepared to listen to the children’s objections and, where reasonable, change his or her mind.

I say ‘where reasonable’ because ‘spoiling’ (that old-fashioned term) occurs when we give children something that is unreasonable just to ‘keep them happy’. But when we listen to and accommodate
children’s reasonable objections, not only will this end the disruption, it will demonstrate how one listens to another. Children will learn how to have empathy for others, because they have experienced others being empathic towards them. They experience what it feels like.

2. Goals of discipline

A sour view of children leads to assumptions that the goal of discipline is to teach children to be obedient and to comply. When they do not, we often use labels such as ‘non compliance’ which suggest that children should do as adults tell them. There is a newly emerging diagnosis which could eclipse ADHD, called ODD (oppositional defiance disorder) whose fundamental assumption is that children should not oppose adult authority.

However, training children to be obedient endangers them because they might not resist abuse – and here I’m thinking mainly of sexual abuse – when they have been taught to do what adults say (Briggs & McVeity, 2000). In the study by Frieda Briggs and Michael McVeity, the researchers interviewed perpetrators of child sexual abuse who were imprisoned for their offences. These researchers asked the perpetrators how they had managed to get away with the abuse; all answered that it had been made possible because children had been trained to do what adults told them.

Second, teaching compliance is dangerous for surrounding children as those who have been trained to follow others might collude with school yard bullying when directed to do so by a powerful peer. One-half of school yard bullying could in fact be termed ‘mobbing’ because it entails a ringleader suggesting to some followers to pick on a child to whom they have taken a dislike. If the followers had the pluck to resist, the ringleader would not have the courage to act alone – and the rate of bullying in schools would halve.

Finally, whole societies would be safer if people did not follow the commands of a sociopathic leader who told them to harm members of a surrounding community on the grounds of racial or religious differences.

Instead of teaching compliance, then, teaching consideration of others comprises (Porter, 2003):

- developing in children a sense of right and wrong so that, even without supervision, they act considerately – not because they might be punished for doing otherwise, but because it is the right thing to do;
- teaching children to manage their emotions so that their outbursts do not disturb those around them but, more importantly, so that they themselves learn to cope with setbacks in life;
- teaching children to cooperate so that all can have their needs met;
- giving children a sense of potency - that is, a sense that they can make a difference to themselves and their world and can act on their values.

3. Causes of behavioural disruptions

Behaviourism believes that external events determine behaviour. This is based on a ‘blank slate’ view of childhood, in which what goes on inside children is not relevant (largely because it is not measurable).

But even if taking an aspirin cures your headache, this does not mean that the headache was caused by a lack of aspirin; similarly, if changing consequences alters a behaviour, this does not mean that it was external rewards and punishments that were triggering the behaviour in the first place.

An alternative view of triggers for disruptions is that external events only ever give individuals information about what might happen to us if we engage in a particular behaviour, but we decide for ourselves whether we will abide by or defy a system of rewards and punishments (Glasser, 1998). This decision is based on whether a behaviour we are contemplating is likely to meet our needs – particularly for self-esteem, belonging, autonomy (the freedom to be self-determining), and fun. In short, this view is that all individuals are controlled internally, not externally.

In that case, imposing penalties (‘consequences’) is virtually irrelevant as these are seldom powerful enough to over-ride our internal drives.

There are many examples of individuals making decisions for themselves:

- adults will sometimes give up a high-paying job for one that has the potential to offer more job satisfaction, even though it pays less well;
- many adults do voluntary work within the community, in the full knowledge that there
will be no outside reward (salary) for doing so;

- some children will risk punishment because ‘it is worth it’ to enjoy the prohibited activity.

Rather than seeing disruptions as being triggered by external events, I believe they occur for a range of primary (internal) and secondary (external) reasons. The primary or internal triggers include the following (Porter, 2003).

- **Natural exuberance** can lead to thoughtless behaviour. Even though they might have no malicious intent, children do not always have the skills to realise in advance that their actions could negatively affect someone else (Gartrell, 1987, 1998).

- Children will **explore** their social environment in the same way that they explore their physical world so, rather than asking whether you will insist that they follow a directive, they ‘test’ this by repeating a behaviour and seeing if you respond.

- Children often are too young or developmentally immature to have yet learned how to act thoughtfully. Or, they might have learned to be aggressive, say, to win disputes, as that is how they have seen the adults in their lives function. They lack the information and skills for acting more maturely.

- Children sometimes **lose control** of themselves because they are temporarily overwhelmed emotionally with the result that, although they know how they should be acting, they do not have enough command of themselves to act thoughtfully.

Nevertheless, in my research into the behaviour of children in child (day) care centres, I found that these primary triggers were involved in only one-quarter of the disruptions (Porter, 1999). The remaining three-quarters were what Rogers (1998) has termed secondary behaviours. These are children’s reactions to the methods used by adults to control children’s behaviour – that is, the use of rewards and punishments (Gordon, 1974; Porter, 1999). These secondary reactions would entail running away when adults were trying to explain why a behaviour was dangerous, hitting out at adults, throwing tantrums…and so on. My research concluded that these reactions – labelled by Gordon as the three Rs of resistance, rebellion and retaliation – were both more numerous and more serious than the primary disruptions.

These secondary behaviours, by the way, fully explain to my mind the children who are diagnosed with ODD. The more out of control these children’s behaviour becomes, the more external control is attempted over them…and the more resistant they become…and the more controls are imposed. And so on. A vicious cycle is in place and, rather than blaming the dance that is going on, we blame the dancers. But, even more insidiously, we blame the child. The problem is not the dancers; it is the dance. It is the cycle of interaction, of reaction and response that is occurring between them. That is where the intervention is needed, not with medication for a child.

Back to the finding that rewards and punishments often provoke the very behaviours that adults are trying to correct. Not only my own research but many previous studies have shown that when mothers, for instance, exercise restrictive control over their children, the children become defiant, uncooperative, withdrawn, anxious, unhappy, hostile when frustrated, and unwilling to persist at tasks (Baumrind, 1967, 1971; Crockenberg & Litman, 1990).

So, rather than controlling children through the administration of rewards or punishments, many writers (Gartrell, 1998; Gordon, 1991; Porter, 2003 to name but a few) believe that adults must **teach** children, rather than punish them for not knowing how to act considerately. Gartrell calls this a **guidance approach** to discipline. Research has shown that this discipline style tends to produce children who are more cooperative, self-controlled, self-confident, independent and social.

### 4. Assumptions about behavioural disruptions

A third implication of adults’ views of childhood is one that I have already signalled: namely, two differing sets of assumptions about developmental errors versus behavioural errors.
So, if a toddler who is learning to walk were to lose balance and fall over, we would not say; ‘Now, that is the wrong way to walk. Do you see me falling over every five steps?’. You need to go over there and sit on the chair and think about how you can walk better. I don’t want to see you falling over again, and I don’t want to have to speak to you about this again’. Yet that is the type of language many of us use when a child has acted thoughtlessly. Our view of children as learners (often an ecological or at least an active blank slate view) contradicts our ‘sour’ view of them as actors. This results in disciplinary practices that contradict our educational goals. We know that speaking to children in this accusatory way would not embolden them to learn difficult developmental skills such as walking or literacy skills, but we delude ourselves that it will teach them to behave considerately.

**Measures of effectiveness**

Now, some of you might be wondering what on earth I am talking about, as, after all, behaviourism with its use of rewards for good behaviour and punishment for ‘bad’ behaviour has been shown over a century to be effective. This is true – to an extent. We need to examine what we mean by effective. Cattle prods would be effective but we do not use them. Why not? The answer is obvious: they are unethical. So, this tells us that practices must be both effective and ethical.

Effectiveness is necessary to protect miscreants themselves from being shunned by others as a result of their thoughtless behaviour, and to protect surrounding children and adults from the effects of that behaviour. At the same time, the early childhood code of ethics (AECA, 1991; NAEYC, 1989) upholds that children must not be disrespected, intimidated, or emotionally damaged in the process of correcting their behaviour. These dual requirements suggest that corrective measures must ensure that:

- the child returns to considerate behaviour: the disruption ceases;
- similar disruptions are less likely to recur in the future;
- the miscreant learns something positive through the process of correction – such as how to solve problems;
- there are no unintended side-effects that could disadvantage the miscreant – such as increased fear of adults, feelings of intimidation, or being defined by peers as ‘naughty’ and so being rejected by them;
- there are no spillover effects for onlookers – such as intimidation about how they would be treated if they too made a mistake;
- there are no spillover effects for adults – such as a loss of their humanity or violation of their own principles;
- there are no detrimental effects on the adult-child relationship as a result of how a misdemeanour is handled. Aside from its emotional benefits, our relationship with children is the only currency we have for influencing their actions: if as a result of how we discipline them, they no longer care for our good opinion, we subsequently have no way to persuade them to act thoughtfully.

Although rewards and punishments have been shown to have an immediate effect on behaviour, studies typically do not investigate whether there were side-effects on either targeted or surrounding children. Moreover, there are some code words buried in the results sections of these studies. That is to say, the studies typically report that, although changing the reward and punishment regimes resulted in improved behaviour, the improvements did not generalise. This means that the improvements did not transfer to other settings and they did not last once the researcher completed the study. This is a fairly paltry result, especially given that the studies typically involve intensive and often one-on-one training. As most practitioners do not have such luxuries and as the
program needs to be more effective than simply teaching obedience only while there is an adult present to force compliance, the effectiveness of behaviourism needs to be questioned.

Disadvantages of rewards and punishments

When adults administer consequences, we typically are the ones who determine which behaviours we desire and which rewards or punishments we will deliver. This means that we are in control. Given that the need to be self-determining is fundamental to all human beings, external control will often excite secondary behavioural problems, such as resistance, rebellion and retaliation (Gordon, 1970).

Rewards might seem benign and so it can seem strange to pair their effects with those of punishment, yet individuals can feel relatively punished if they judge that they ‘deserve’ some recognition but do not receive it. This shows that rewards and punishments are two sides of the same coin (Kohn, 1999). Both are attempts to manipulate the behaviour of others. So both run the risk of detrimental effects.

Limited effectiveness

• Children have to be saturated with rewards in order for these to have any effect on their behaviour. Such a regime is seldom possible in group settings.
• Under a system of rewards and punishments, some children do learn to comply but, in so doing, become submissive. As a result, in terms of their learning, they might avoid taking intellectual risks and being creative in case adults might disapprove of the outcome.
• Consequences focus children’s minds on what they will earn by their behaviour, rather than on the effects of their actions on others.
• When children are accustomed to adults judging their actions, they do not learn to monitor their own behaviour: they notice neither their accomplishments nor their thoughtless acts.
• Under a regime of externally-applied consequences, children do not need to learn self-discipline as discipline is already being enforced from outside.
• Consequences work mainly for those who are cooperative anyway and so do not need manipulation; for the remainder, they seldom alter their disruptiveness and instead these children escalate their resistance to outside attempts to control them.

Effects on recipients

• Rewards and punishments can discourage children as they realise that they cannot achieve inflated expectations.
• Punishment can provoke undesirable behaviours such as resistance, rebellion, and retaliation that in turn attract more punishment.
• Punishment can intimidate onlookers even though they themselves are never punished.
• Punishment can cause onlookers to define a punished child as ‘naughty’ and, as a result, exclude him or her from their friendship group.
• The imposition of external controls can teach children to exercise control over peers (and adults) through verbal and physical aggression and bullying, imitating what they themselves have been subjected to.
• Children can become competitive with each other as they try to earn for themselves the limited rewards that are on offer.

Effects on adults and society

• Reward systems such as star charts and other forms of behaviour modification create a good deal of work for adults over extended periods of time.
• Punishment can become addictive and can escalate into abuse.
• Punishment can teach children to ignore adults who threaten but do not deliver consequences.
• Violence damages relationships.

My own research (Porter, 1999) concluded that there are means to teach children considerate behaviour that are equally (if not more) effective than the use of rewards and punishments – with none of these risks.

The empowering thing about the alternatives is that adults already know the actual strategies. To pre-empt today’s workshop, the alternatives involve the usual communication skills of listening, being assertive, and problem solving that make up everyday life. They involve making it easier for children to meet our expectations – say, by keeping the duration of
group time to within three minutes times the children's age in years – and, at the same time, making the children more willing to meet our expectations because they care about us and would feel badly about disappointing us. The alternatives involve giving children extra support to meet expectations when they are burdened by more than the usual difficulties; they involve teaching children about the effects of their actions on others. (See Porter, 2003.)

All of us, whatever our job title, know about teaching children. We are uniquely skilled at it. We therefore do not need to learn new skills but, by acknowledging that children are people too, can respond to disruptions not from a moralistic or accusatory stance but from an educational stance. We are teachers: we can do it.

When we think about what we want for our children, our own and other people’s, it is obvious that we want them to grow up to be our peers.

If we could keep that fact in the forefront of our attitudes towards children, we might avoid many of the fruitless battles and instead serve as guides, welcomers, and protectors as children make their valiant efforts to grow up and join us.


Dr Louise Porter is a child psychologist specialising in early childhood. She worked in three early childhood agencies in Adelaide and subsequently lectured at university for 13 years in special and gifted education with a focus on young children. She conducts a private practice consulting with parents and practitioners about children's developmental and emotional or social challenges. Her publications include Young children's behaviour: Practical approaches for caregivers and teachers 2nd ed (2003, McClennan and Petty); Children are people too: A parent’s guide to young children’s behaviour 3rd ed (2001, Small Poppies SA) and many more.

References


Early childhood teachers’ knowledge of teaching children with disabilities

Pam Kilgallon
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In recent years an educational practice has been to increasingly promote the inclusion of students with disabilities into mainstream schools. This trend relies on early childhood teachers utilising their knowledge and skills to successfully induct children with disabilities into the education system. This paper describes early childhood teachers’ knowledge of children with disabilities, focusing on their sources of knowledge and experiences in teaching children with disabilities in mainstream settings. Utilising qualitative methodology the study disclosed common factors teachers considered crucial to effective inclusion, including sources and forms of knowledge, teachers’ attitudes and expectations, types of support and changes in teaching practices. In addition, the process of inclusion caused early childhood teachers to question their self-efficacy and the adequacy of their practical teaching knowledge.

Introduction

In the past decade in Australia, a widespread trend has developed to include children with disabilities into general education classrooms. Increasingly, inclusion of children with disabilities occurs in the first years of education. As a consequence of this practice, early childhood teachers find themselves with the dual responsibility of integrating children with disabilities into mainstream education, while inducting them into the education system. An additional dilemma for early childhood teachers is that most generalist teacher-training courses (as opposed to special education training) provide limited exposure to children with disabilities. This causes variances in teachers’ understanding and application of inclusion practices, which impacts on teachers’ abilities to successfully include children with disabilities into mainstream classes.

Although research has indicated that students with disabilities may make greater educational gains in generalist education settings than special education facilities, it is acknowledged that critical factors are necessary for successful inclusion to take place (Scruggs & Mastropieri, 1996; Werts, Wolery, Snyder & Caldwell, 1996; Schumm & Vaughn, 1998; Odom, 2000; Van Kraayenoord, Elkins, Palmer, Rickards & Colbert, 2000).

Scruggs and Mastropieri (1996) report that while the majority of teachers agree with the concept of mainstreaming or inclusion, their willingness to practice inclusion declines with the intensity of inclusion and the severity of the child’s disability. The authors found that generalist-trained teachers perceived that for successful inclusion to take place changes were needed in classroom environments, preparation time and allocation of material resources and support personnel.

Schumm and Vaughn (1998, p3) report that generalist-trained teachers are ‘starved for practical, viable instructional practices’. They noted teachers had little time for co-planning and collaboration with special educators and received few resources from their school district to make adaptations to their teaching practices. While early childhood teachers were generally positive about including children with disabilities in their classrooms, Odom (2000) found preschool teachers were concerned about their lack of knowledge of children with disabilities. Research (Forlin, 1995; Buell, Hallam, Gamel McCormick & Scheer, 1999; Sims, 1999; Ashman & Elkins, 1994) supports the claim that teachers are concerned about their personal competence in dealing with inclusive practices and need to be supported to meet the needs of children with disabilities.
Methodology and analysis
This study used qualitative methodology to investigate the thoughts and lived experiences of teaching children with disabilities in general education settings. An open-ended questionnaire asked participants to recount their understanding of terminology, their training and sources of information, successful and unsuccessful experiences, their attitudes, and information they found essential for including a child with disabilities into their class. Further qualitative data was then sought through face-to-face interviews.

Data from the surveys were compared and analysed for common key words or themes and tabled. Comments that reflected teachers' knowledge were also recorded to elaborate on commonalities or discrepancies between survey responses. After validation by those interviewed, written transcripts of the interviews were also highlighted for commonalities.

Participants
Twenty-two early childhood teachers (teachers in school settings working with children aged 3 to 7 years), from 12 metropolitan schools anonymously completed the questionnaire. Of these, five teachers were subsequently interviewed, each from different schools and teaching different year levels. During a series of three interviews these teachers elaborated on their survey responses and recounted their experiences in teaching students with disabilities.

The study sought to answer the following questions. What do early childhood teachers know about children with disabilities? What do early childhood teachers know about teaching children with disabilities?

Findings and discussion
The study indicated that most of the participants' knowledge was derived on a 'need to know' basis, as a result of having to teach children with disabilities in their classrooms. Prior to this they considered information about disabilities and the teaching of children with disabilities to be irrelevant to their daily teaching practices. Teachers in this study generally perceived the practice of inclusion to be yet another educational change thrust upon them, adding to their existing heavy workload and were not inclined to pursue information unless they saw it had immediate relevance to their teaching.

Sources of knowledge
Part of teachers' knowledge is to know what sources of information are available and how to access them. Participants in this study indicated they only accessed a limited range of sources, relying on support agencies for information about specific disabilities and colleagues and parents for practical advice. Other sources, such as their teacher training, written reference materials and the Internet, were grossly under-utilised, which leads to questions about their immediacy and accessibility to the teaching profession.

Over half of the study's participants received valid information from special support agencies, such as the Cerebral Palsy Association, particularly in regards to the causes and nature of specific disabilities. Teachers in the study indicated this background information was useful only when it could be applied to their particular situation, and if it was received early in the inclusive process. As one interviewee stated you need a starting point, otherwise you were floundering around to work out the best way to go.

One third of the participants regarded their colleagues' advice as practical and easy to access. They considered other teachers to be their professional peers, having undergone similar experiences and to have empathy with their current situation. Teachers perceived they could share information with their peers and 'bounce ideas off each other', supporting the notion that the process of inclusion instigates and relies on acts of collaboration (Buell, et al., 1996; Snyder, 1999).

While parents are considered a critical part of successful inclusion (Cook, Tessier & Klein, 1996), only a third of the participants in this study indicated that they actively sought information from them. Parents were valued for informal information such as the child's immediate needs and daily routines, rather than official knowledge, such as the child's medical diagnosis and pedagogical content knowledge.

When surveyed, none of the study's participants felt their pre-service training contributed to their knowledge of children with disabilities, or the teaching of such children. Likewise, appropriate professional development was limited and often of little relevance to day-to-day teaching. Only five of the participants had received any special education training and they felt it was inadequate. This finding was also reflected
in a nationwide study by Van Kraayenoord, Elkins, Palmer, Rickards & Colbert, (2000), where it was found that teacher training courses generally lacked uniform and compulsory units on educating students with disabilities in mainstream education.

Other sources of information were only accessed by a few of the study’s participants. Local Area Coordinators (LACs), appointed by the Disability Services Commission, were consulted by only two of the study’s participants. As it is an LAC’s role to coordinate the services for a child with disabilities, it appears that teachers are either unaware of their existence or critically under-utilise this valuable source of information. Lack of consideration was also given to written sources of knowledge such as reference materials and accessing the Internet. One interview participant stated reading was time-consuming and I just haven't the time, implying that immediate accessibility influences what sources of knowledge are utilised by teachers.

Forms of knowledge
Early childhood teachers in this study indicated there were two forms of knowledge they sought: knowledge about the specific disability and knowledge about the child’s capabilities and learning potential. Knowledge of a child’s disability contributed to teachers’ developing an initial awareness of what is involved with having a child with disabilities in their classroom and the level of assistance they would need to provide to the child. This knowledge did not indicate how teachers could cater for the child’s specific needs: what planning would be involved and what changes should be made to their teaching practices.

It was only through knowing the child and the child’s potential that teachers found they were able to plan and develop strategies to meet the child’s needs. This enabled teachers to move away from focusing on the disability to emphasising abilities, a more positive approach to inclusion, and more in keeping with Nodding’s (1992) notion of fostering a caring environment. Participants in the study indicated that in ‘knowing the child’ they were able to develop realistic expectations and appreciate that small gains were really big gains. However, teachers in the study did not indicate that this knowledge enabled them to take full responsibility for the child in the classroom, as most referred to the education assistant as assuming this role.

Attitudes, values and expectations
Early childhood teachers strongly indicated that their experiences of inclusion influenced their attitudes and perceived abilities in regards to the inclusion process. Whilst nearly all were generally positive towards including a child with disabilities into their classroom, most set conditions for inclusion to take place. Considerations included adequate support and knowledge, the severity of the child’s disability, the teacher’s workload and stress factors and the provision of appropriate training, findings shared by Forlin (1995), Scruggs and Mastropieri (1996) and Odom (2000).

Teachers indicated that knowing the child well, their disability and capabilities, led to them developing realistic expectations. Non-academic achievements, such as social skills, developing self-esteem and tolerance, and being accepted and safe, were considered indicative of successful experiences, rather than the development of academic and behavioural skills.

In recounting unsuccessful experiences some participants stated that a lack of knowledge led to frustration. As in other studies (Forlin, 1995; Sims, 1999; Buell, et al., 1999) teachers found their self-efficacy, a combination of knowledge and personal belief in ability to implement this knowledge, impacted on their ability to successfully include the child with disabilities into their classroom. It may have been that teachers got to know the child and accessed appropriate resources but still did not feel they had adequate knowledge or the skills to successfully include the child with disabilities.

Support and collaboration
All participants in this study stressed that support was crucial to successful inclusion. Teachers found that they not only had to know about the various forms of support, but had to become more proactive in accessing and utilising these sources. The realisation that their own personal knowledge was inadequate led teachers to seeking advice and support. They found the process of inclusion required them to collaborate with others, to share information and to develop a team approach.

Support was sought from support-agencies, parents, teaching colleagues, the school administration, and, in particular, education assistants. Participants found lack of support from the school administration and limited
access to education assistants contributed to stressful inclusive experiences. Teachers indicated that they relied heavily on education assistants to provide one-on-one support and to assume many of the teaching roles related to the child. Similar findings have been reported in other studies (Buell, et al., 1999; Van Kraayenoord et al., 2000), implying that some teachers may lack self-efficacy or self-empowerment in inclusive situations. Support and collaboration then become critical to making inclusion of a child with disabilities successful.

Changes to teaching practices
Although planning is an integral part of the teaching process, teachers in this study only referred to planning in general terms, such as the need to plan ahead, to modify work expectations, and to minimise failure. Little indication was given as to how acquired or specific knowledge was used in their planning. Knowledge relating to the child’s routine and behavioural characteristics, and what had worked for other generalist teachers was considered relevant, rather than specialised teaching strategies. Out of the 22 participants only two used specific terms such as preparing and implementing Individualised Education Programs (IEPs).

Interviewed teachers found it was through working with students with disabilities and an ad hoc process of ‘trial and error’ that they made changes to their teaching practices, not from deliberate pre-planned approaches. They indicated that changes in work expectations, time management and scheduling only arose through knowing the child. This implies that these early childhood teachers found it difficult to adjust teaching practices or teachers lacked the specific knowledge of planning and appropriate strategies necessary in catering for a student with disabilities.

Conclusion
The placing of a child with disabilities into a mainstream classroom is not merely a case of teachers ‘getting on with their job.’ As with any educational change the process of inclusion requires early childhood teachers to take stock of their existing knowledge base. Inclusion forces teachers to proactively seek information and advice and make changes to their teaching practices so that they can successfully include a child with disabilities into their classroom.

Clearly teacher-training institutions and professional development providers have a shared responsibility to ensure new and ongoing teachers are equipped with the necessary knowledge and skills to implement the practice of inclusion. Knowledge of planning tools, such as IEPs, and specialised teaching strategies should be commonplace amongst all teachers.

When early childhood teachers were able to get to know the child and know about the disabilities, they were able to develop realistic expectations, plan and make changes to their teaching practices for successful inclusion to take place. This kind of knowledge should be a priority and valued by teachers practising inclusion. More specifically, using parents as a source of knowledge and support would also benefit teachers in this process. Ideally opportunities should exist where teachers can observe and interact with the child prior to teaching so they can develop a working knowledge of the child and focus on the child’s abilities, rather than disabilities.

It is also clear that teachers, as well as the child with disabilities, need support. Opportunities should exist where teachers can collaborate and share information and teaching experiences, as well as access a range of sources for information. The role of LACs and case coordinators seems to be undervalued and efforts need to be made so that teachers are aware of the wealth of information and support that is available.

The understanding that emerged from this study is that the early childhood teachers did have an evolving knowledge of children with disabilities and the teaching of such children. However, factors such as lack of resources, support and opportunities for collaboration, inadequate training and time constraints impacted on teachers’ self-efficacy as well as their positive attitudes and ability to successfully include children with disabilities into their mainstream classrooms. When these factors impinge on teachers’ beliefs that inclusion is a viable educational practice they could influence the successful inclusion of students with disabilities into the education system.
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Sharing care and education: Parents’ perspectives

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In Early Childhood services the goal of parent-teacher interactions is to involve parents in the development of a shared caring, rearing and educational experience for children. Yet little investigation has been undertaken to seek out parents’ own ideas and suggestions about how they can and might wish to share the care and education of their young children. This paper reports an investigation that used focus groups to identify parents’ perspectives detailing what is important to them and their suggestions about how such sharing could be achieved. Four themes were developed from focus group data. These related to methods staff used to report information to parents, omissions of pertinent information, limitations of communication methods used and parent’s contributions. Based on these parents’ perspectives, teachers’ sharing is ‘inside out’ and inwardly focused. Parents suggested teachers rethink their approach to ‘parent engagement’ so parents can positively influence the quality of care and education their children receive.

Introduction
The literature is definite about the need for links between families and the services that provide care and education for underschool aged children. Parent engagement in early childhood care and education services is seen to be an important component of and contributor to service quality (Bryce & Johnson, 1995; Creaser, 1994; Powell, 1998; Zigler and Styfco, 1993). Such engagement is necessary under the Australian Quality Improvement and Accreditation System (QIAS) requirements (National Child care Accreditation Council (NCAC), 2001). Yet, there is no clear definition of what actually constitutes parent engagement.

In many instances engagement is identified by staff as parent attendance at staff initiated meetings. Such meetings include information nights, social events encompassing cultural celebrations and/or family focus functions and parent:teacher interviews related to children’s growth and development. Other opportunities afforded parents enable them to become members of committees addressing various aspects of service operation as in policy development, accreditation, and fundraising. In community based services parents are often required to accept legislative and financial responsibilities for service operations (Elliott & Wiley, 2000; Fish, 1998). Yet such forms of parent engagement can be limited as they can be restricted to service management and operational decision making. Staff appear to determine how and when opportunities relevant to children’s care and education are made available to parents and specify how parents can contribute to programs.

Whilst parent and staff collaboration is said to improve the planning and design of programs for children and is an important determining factor of quality service provision, many opportunities are perceived as one way processes (Cromwell, 2000; Powell, 1998; Zigler & Styfco, 1993). The goal of parent-teacher interactions is to engage parents in a two-way collaborative process that promotes the development of shared caring, rearing and educational experiences for their children (Klass, 1999; McGurk, 1997). Yet, as Klass (1999) points out, it takes time for parents and staff to develop trusting and open relationships which promote common and shared values relevant to each child’s welfare.

The investigation reported in this article, defines ‘parent engagement’ as all opportunities available to parents to contribute their voices in various ways to the services providing care and education for their under school ages children. Parent engagement in services is often restricted to staff organised functions
and there is little opportunity for parents to evaluate the existing programs and produce insights for developing or contributing to the program in ways that may influence individual service goals and philosophy (Elliott, 1996). Yet, individual families and early childhood service staff each possess valuable information about the young children attending services and it is important that this information is shared to ensure the best interests of all children can be served through joint decision making (Karrby & Giota, 1996; McKim, 1993; Powell, 1998). When services fail to engage families in the development of the service philosophy, program objectives and service goals, families cannot effectively review and evaluate the service being provided. As a result changes that may need to be instituted may not occur and unsuitable service goals or program objectives designed for children may continue to be implemented rather than being changed or improved.

The research discussed here was one aspect drawn from a larger investigation which included indepth interviews, dissemination of questionnaires and focus group discussions with parents of underschool aged children attending long day care services. The investigation was designed to explore families’ perceptions of ‘quality early childhood care and education’. What is reported here is from the focus group discussions which were related to how parents perceive their engagement with the services used. As well their perceptions of the opportunities provided by services for them, as partners, to contribute to the quality of these services are reported. Through the focus groups parents’ opinions and ideas about processes which could and would enable them to have a greater voice in the care and education provided to their young underschool aged children were identified.

Method
Focus groups are used increasingly by researchers to discover community preferences and to investigate why people feel and think they way they do (Krueger, 1994). They provide a non-threatening environment where discussions are promoted, thus providing opportunity for participants to share their ideas and perceptions. This method of data collection enables group members to influence each other by responding to others’ ideas and comments in the discussion (Krueger, 1994). Eighteen randomly selected accredited early childhood services in a major regional area of a capital city on the east coast of Australia were approached to disseminate letters of invitation to families using their services. The letters invited parents to participate in a ‘one-off’ focus group discussion.

In the interest of neutrality, all focus groups took place in community halls and an assistant supported the facilitator. Participant comments and ideas were recorded on large sheets of paper and both the facilitator and assistant took notes during discussions. Each participant was given pen and paper to record ideas or thoughts during discussions. To conclude sessions, participants reviewed the large paper notes to ensure comments had been accurately recorded. This review also enabled opportunity for additional participant comments. As well, parents’ own notes recording ideas or thoughts were collected. After each session both the facilitator and assistant wrote independent journal entries. Parents responses were coded by focus group number (F1) and their given name initial (M). Where two or more parents in the same focus group shared the same name initial these were then identified by number (M2). Comments were compiled and organised into identifiable patterns.

Participants
Thirty-six parents representing 13 early childhood services located in socioeconomic and culturally diverse areas accepted the invitation and five separate focus groups were organised. Whilst this sample did include a language and culturally diverse population it was limited in that most participants had English as their first language and they were representative only of the western area of Sydney. Further investigation should cater for non English speaking parents. As well all focus groups were conducted during the evenings as most parents were employed yet child care was not available. This may have made participation problematic for many parents.

Numbers attending each group varied from five to eleven with two to four different services represented at each focus group. Parameters were set for participants in the focus groups. It was emphasised that the discussion was not an evaluation of staff or services so parents were asked not to name the service their child/ren attended. Parents were asked to introduce
themselves by first name only and explain their link to other group participants by identifying the number of children they had attending a service. Although there were mainly women present there was at least one man at each of the focus groups. Focus sessions were two and a half to three hours in duration.

Results
Careful and systematic analysis of data collected identified trends and patterns of parents’ perceptions of what they identified as their engagement and the contributions they could make to the programs developed and provided to their children. In addition parents identified approaches they thought should be implemented to facilitate the ‘sharing’ of education and care of their children.

According to these parents, dissemination of service information was through verbal interaction and written documents. On enrolment, parents were given service information and shown the policies of the centre (some were provided with copies). Many services publish a handbook which gives other general information about the service operation including payment of fees, when children cannot attend the service (health issues) and penalties parents may incur (late fees or paid absences). Other written information was conveyed through notices located on walls, personalised notes and newsletters which are published and distributed to parents.

Opportunity for parent engagement was available through committee membership, attendance at meetings, family functions, informal discussions with staff and written feedback via daily diaries or communication books. As well, parents could have input by responding to staff-initiated questionnaires and by placing their own ideas in suggestion boxes. All these ideas for parent engagement are in the literature (Rockwell, Andre & Hawley, 1995).

Discussions at the focus groups afforded the researcher insight to how parents perceived these opportunities for their involvement with staff and their contributions to children’s care and education.

Parents attending the groups were positive about their children’s daily experiences and forthcoming about opportunities for them to participate in the services. Yet the discussions took a different turn when parents were asked how they would choose to contribute to the educational program and how they evaluated the care and education provided.

Three distinct themes emerged from these discussions:

- Services inform parents rather than communicating with them.
- Services do not share the type of information parents are interested in.
- There is a perceived lack of interconnectedness between children’s experiences in services and their homes.

First theme - staff reporting information to parents
Many parents said the orientation sessions and information evenings organised for them tended to focus on explanations of the running of the centre. These evening meetings address the management and daily operation of these services: the ‘rules’ parents must observe, the roles and responsibilities of staff and the organisation of rooms. Parent criticism about such evenings was that they were boring and simply reiterated information available in handbooks and information packs. As one parent said:

*Information evenings and orientation sessions should answer parents’ questions not simply tell us (parents) what they (service staff) want us to know* (F1:S).

Parents were very specific about what information should be shared and who should share what with whom. What parents wanted were information evenings that would help them understand their children. As another parent said:

*As parents we learn about child development day by day as our children are growing and developing we don’t know it with our first child* (F2:V).

This understanding related directly to the body of knowledge staff were seen to hold about child development and early education. Parents in each focus group shared ideas and finally agreed that child development was staff knowing how children grow and change in their physical, social and intellectual abilities. Early education was how children learn and what staff do to encourage this learning.

All parents agreed that the development of their own understanding of children’s growth and development was a gradual process. They reported that this experience was painful and difficult. They noted how
staff at the centres their children attended were more informed than they were. As new parents they wanted reassurance and guidance from those who were more informed. They believed staff could provide this, but did not do so.

As one participant said:

*The staff at these centres must be knowledgeable and/or qualified to do their jobs or they wouldn't be employed in their positions would they? It's up to them to share the knowledge they have about children with us the parents so we can gain other insights into our children* (F2: M2).

The same statement was made, albeit using different terms, in every focus group and was agreed to by all parents.

**Second theme-omission of information**

Comments from parents focused on their desire to share in their children's daily experiences:

*We would like to know which books the staff are reading to the children this week, today. What songs are the favourite ones this week. Tell us so we can share our child's day* (F1:R).

Two-way communication between staff and parents was raised repeatedly as an issue of distress and/or annoyance because these parents saw it as a lost opportunity to vicariously experience their children's day. Overwhelmingly, parents said they wanted an explanation and a long-term picture of what their children would gain from the early childhood service:

*They should have information evenings where the staff explain children's development and learning and they should explain what they are going to teach your children over the next term or the whole year so you can follow on at home* (F1:L).

*You know what we want? A framework of the curriculum... telling us what each room will be working towards each term or whatever time frame services use. And an explanation of how the staff are going to work towards this* (F1:G).

One parent commented:

*It's only now that my daughter is 4 that I can see how her playing has been important to her learning. At the time no-one explained to me why different activities were provided* (F2:E).

The lost opportunity to find out about children's learning was a repeated theme throughout focus group discussions.

Understanding the comprehensive nature of early childhood care and education was also part of the discussions, with one parent commenting:

*I want to know all about my daughter's progress on an individual level. I want to know whether it is only care or care and education they provide for her* (F3:F).

As well, parents wanted more than information about the intent of the programs; they wanted to understand how the learning was organised. A common statement was:

*I see the program but how do I know my child did all or any of those things today?* (F1:M1).

Another parent said:

*You know you get a painting and try to talk to your child... gee this is a beautiful painting did you do this today? And she says 'No'... when you look it was painted 2 weeks ago... my kid can't remember yesterday so how can she remember 2 weeks ago... it's been up on the wall on display... but so have lots of others - so I didn't see it and she is used to her work being displayed so its no big deal for her* (F1:S).

Another issue related to parents' inability to formulate questions about what they needed to know. For example, one parent said:

*Look I don't know if I'm expecting too much to ask them to explain the education they're providing to my child to me but I really am interested to know but I don't know how to ask and they don't offer me the information* (F3:K).

Parents wanted staff to explain why particular activities were provided and how the planned activities linked to their children's growth and development. They said they needed to know the sequence for introducing information to children. They were seeking answers to questions about children's play in order to understand how and when early learning and literacy began.

Newsletters and educational programs displayed for parent information were also commonly criticised. They lacked real information and were seen as too general to help parents understand the educational significance of opportunities provided to children.
One parent commenting on the content of newsletters said:

The kindy farm visited and the children enjoyed the animals... what good is that? I need to know children got to bottle-feed a piglet and pat a calf or touch a chicken. These are experiences I can talk to my child about even after the event... but I need detail.

It wouldn't take much to write a bit more and explain why the kindy farm was brought into the service and it would be very informative for us (F1:G).

The latter part of this comment is perhaps the basis of parents' frustration. The written information provided to parents, they say, fails to provide important detailed information about children's experiences and the educational rationale behind them.

Parents said they were regularly told about the daily events of the service their children attended, but not provided with information that enabled them to appreciate what was happening. They considered ways of overcoming the limitations they perceived, with one parent suggesting:

They (the staff) could report back to parents, you know not necessarily individually, but say in the newsletter, saying this is what we intended to teach and this is what we did teach (F1:D).

An area of vexation for parents was the written weekly program. Animated discussions took place in all focus groups, with the following comment a distillation of the discourse:

I look at the program but you know, I don't get the end result. It's like the book is open but you can't turn the page. You know it's written there but what went before, what happened to these activities, did my child participate? How did he go? What was the point of the activity? It's all very secretive there is a code on the program C3 but I don't know what that means... is it my child? What is it there for? Who knows what it means? (F4:R).

It appears that staff in services used by these parents provide written information about the programs provided for children. Yet failure to provide explanations or follow-up information meant parents were unable to interpret what the staff were trying to share with them.

In all focus groups, parents reported that they had been given many opportunities to provide feedback and suggestions to staff through questionnaires seeking their views. All services had suggestion boxes through which parents could and did submit ideas, queries or complaints. Yet these opportunities became a source of disgruntlement. One parent reflected:

Yes you fill in the questionnaires they send out but I have no idea what the outcome was to any of them. Over the years I reckon I've filled in quite a few. I wonder if anyone reads them? (3:A).

Parents were also critical of staff responses to their attempts to contribute ideas or suggestions:

Yeah, it appears everyone has suggestions boxes. But what I want to know is does anybody ever read the? You put suggestions in the box and it's like a 'black hole' nothing ever comes out. Why couldn't the suggestions be discussed at monthly meetings and reported back? You know like 'the most often asked question this month'. Just to know someone is reading our suggestions would be a help even if they (staff) couldn't do it or if my suggestion was off the wall, just explain it to me... I'll listen, it's my child I'm thinking of" (F1:G).

It appears that parents take time to complete questionnaires and submit ideas through the appropriate channels but are not receiving any response from staff or service management.

Four of the 36 parents felt that their attempts to contribute to the programs in which their children participated were in vain. Their suggestions were either not considered or acted on or thought to be serendipitous inclusions:

I am forever telling them what my child is interested in, in the hope that they include it in the daily activities. Sometimes I see things that I have mentioned like he is really interested in blocks this week and there might be blocks out the next day but I never really know if they listened to me or it was already part of the program (F4:R).

Third theme – parent-perceived lack of interconnectedness between centre and home

Parents explained that the quality of care their children received when attending services was evident to them because they had their own criteria by which to assess it. Yet they did not know about children's development or about the early educational opportunities being implemented. Parents wanted this knowledge and believed it could be provided if staff took the time.
The sharing of this information was seen by parents as a way of them helping their children make connections between the centre and the home. As one parent said:

A lot of kids live at day care. My daughter is there more often than she is at home. She comes home and has dinner then goes to bed. I need to know what she is learning, in her other home, at day care where she is awake and learning (F4:N).

All 36 parents made very pointed comments directly related to a connectedness they were seeking between services and families’ homes. These are exemplified by the following quote:

We want to be a part of our children’s education… we want to know what happens at kindy so we can follow up at home – that’s how we can contribute to their learning and maintain the links between kindy and home, by following on what they learn there (F2:M2).

Parents saw connectedness between service and home parents as being related not only to what children were learning about the world and the skills they were developing but to all areas of children’s development. The lack of inter-connectedness was a critical point of discussion for parents.

The literature is strong on the necessity for links to be forged between the child’s two environments, home and the service (Karrby & Giota, 1996; McGurk, 1997; McKim, 1993; Powell, 1998). Such links are often interpreted as staff needing to understand the child’s background which includes the family values and child’s health history. However, parents in this investigation looked at links between the service and home from a different perspective. They saw them as being an important part of the consistency of children’s experiences. As one parent pointed out:

They asked me about my child’s toileting routine as the service wanted to begin toilet training. I said you tell me what you do. You have 40 little people here every day, let’s be realistic, you haven’t got 40 separate routines. Tell me what you do and I’ll do it at home too. Then it can be consistent (F2:M2).

This link from one environment (the centre) and the other (home) was also related to children’s growth, development and learning. As one parent made the following comment, others nodded in agreement:

Why can’t they tell us what the children are learning about and where the staff are getting information from. If it is the web most parents can follow up information if staff give us guidance and direction. You know if they are learning about planets then at least I could find out the names of them and talk with my child about them (F1:S)

Parents in this investigation wanted access to the type of information staff used to develop children’s learning experiences so that they could also contribute in meaningful ways to their children’s early education. Parents saw the current communications from staff to themselves as information reports rather than an exchange of information leading to knowledge being shared between two parties. This idea was articulated by a parent who said:

When you think about it, the information should run in a circle not parallel (F4:R)

Another parent said: Make it a loop (F4: J).

Initially all discussion in the focus groups was positive, highlighting the opportunities available to parents to give and receive information relevant to the services used. However, when they became more comfortable and discussions progressed, parents opened up and moved from making statements to asking questions of each other as the commonality of their situation dawned. Yes, information was available and yes, parents could contribute, but they wanted different information, and some had on occasion asked specific questions and were not satisfied with the responses. One parent said:

I don’t feel that the staff really listen to you or answer your questions. I saw a computer time table pasted on the window showing when each child was to have time in the computer centre, my child’s name was on the list for that day so I asked her if she had been playing on the computer. She said ‘no’. So I asked the staff member how the roster worked and what were the children working on when having computer time, because I wanted to understand what they were teaching and the children were learning. The staff member talked but didn’t actually answer the question. I gave up and the next day the roster was not on the wall. It had been taken down (F2:E).

Another parent noted:

The communication (from staff) is more direct when related to health rather than full life issues like what my child is learning and his interests (F4:N).
As discussions continued, other areas of staff responses to parents emerged. As one parent said:

*It's like services are child centred but not family friendly. When you enrol your child you're invited to spend time at the centre, you know you can sit on the lounge and watch as your child goes off to play. It's terrific you see how they mix in and become part of the group but then once our child starts at the centre it's drop them off and go…… it's like there is no place for you as a parent to be a part of their day* (F1:S).

These views were consistent across most groups to greater and lesser degrees. Although not all parents felt they were expected to leave quickly, all parents said they did not overstay at any time, because of family commitments, work pressures, or simply because they felt they were *in the way* (F1:M). Being part of their children’s day was very important to all parents yet there were limited ways in which they could access the detail of children’s experiences. Watching children’s social interactions and being able to observe the routines of centres was an important part of the initiation of these parents into the world of early childhood service provision. However, it was not an everyday accepted practice for parents to stay and participate in their child’s day.

**Discussion**

Three main points have emerged from this investigation. Parents believe they are unable to understand or contribute to their young children’s education because of limitations in communications. However, they believe they have resolutions to their concerns.

Studies have shown that children achieve better, have a more positive self-image and higher self-esteem, and fewer discipline problems when families are visible and contributing to programs (Galinsky, 1988; Greenberg, 1989; Karrby & Giota, 1995; McKim, 1993; Powell, 1998). Many services use handbooks, newsletters, daily information charts and central bulletin boards to communicate with families. These documents should be available in languages parents can read, and consideration should be given to the verbal reporting of information for parents unable to effectively use print. The communication methods currently used by services in this study had limitations which parents have identified as being ‘one-way’. The documentation provided information to them but did not enable them to respond.

Service providers need to actively reconsider how they encourage families to engage in and contribute to services. The parents in this investigation believed they were locked out of meaningful engagement because, while they were asked for their views, they were unable to access or influence their children’s daily world at a service level.

Parents’ comments drawn from focus group discussions raise two key issues that have potential to impact on the delivery of children’s services. First, the information gained provided insights into how parents perceive the limitations of the opportunities available for them to collaborate with staff in the care and education of their children. Second, it shows how parents believe they could engage with staff to improve communications.

Parents perceive communication as the key to them being able to actively engage with their children’s early education. Parents’ voices have given the direction. Information evenings should be used to answer their questions as well as to impart information about service management. Newsletters can be used to explain the program goals and the broad detail of experiences developed and implemented for children. Responses to questionnaires and parent suggestions can also be reported to all parents through newsletters.

**Conclusion**

The information generated from this investigation has identified how parents need their voices to be heard by staff. They also want staff to share with them their knowledge about children’s growth and development as well as the teaching and learning opportunities provided. It is now up to the early childhood profession to further encourage all parents’ voices and actively listen to them. We need to answer their questions and hear their suggested solutions so that we can share insights. The parent voices heard in this study suggest that some services do not listen to parents and have limited understanding of how engagement can lead to partnerships. Engagement is mutually beneficial when education and care opportunities are relevant to the individual family’s cultural values and ideals. Parents’ perspectives have always been important but in some services the responses to their input have been
tokenistic, thereby suggesting there is a gap between the rhetoric of the literature, government policies and the requirements of State legislation, and service practices as experienced by parents.

From the data in this paper it is evident that there is a need for further research as well as changes to practice. A reconceptualisation of the ways early childhood staff and parents share children’s care and education is called for. The importance of communication which serves not just to meet QIAS and regulatory requirements but promotes interactions and meaningful engagement must be the prime consideration. Early childhood service staff, together with parents and early childhood academics need to rethink the ways parents’ perspectives are taken into account as we all share the care and education of our children.

Acknowledgments
I wish to acknowledge the helpful comments I received from the two reviewers of this paper.

References
An integrated approach to teaching social skills to preschoolers at risk

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Dolores Stegelin
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Early childhood educators and early childhood special educators are charged with preparing all children for kindergarten and other inclusive settings. Some young children from at risk backgrounds have particular difficulty in developing the social skills necessary for these environments. Early childhood professionals in child care, Head Start, and other preschool settings have the opportunity and the responsibility to prepare at risk preschool children for the social demands of the kindergarten classroom. This article describes a method of teaching social skills that incorporates developmentally appropriate practice with more systematic, teacher-directed instruction.

Introduction

The transition from preschool settings to kindergarten classrooms is often a socially demanding experience for young children (Heaviside & Farris, 1993; Zill, 1999). That shift is often more difficult for preschool children from at risk backgrounds. The term ‘at risk’ is used widely and describes young children who are disadvantaged by social problems and/or specific conditions. Young children who are at risk usually reflect a combination of environmental, biological, and established conditions. Environmental factors may include low-socioeconomic status, unstable home environments, exposure to violence, limited access to cognitive and language modelling, or organically-based developmental delays (Zervigon-Hakes, 1995). Early identification of young children who are at risk for learning is important because these children are at greater risk for later school dropout and academic failure. Therefore, the need to bolster their abilities to copre in the kindergarten classroom is significant. If the young, at risk preschooler can successfully negotiate the social demands of kindergarten, then she/he is more likely to make the transition into the primary grades and gain a sense of confidence in the academic setting.

While this article is primarily concerned with those children deemed at risk by social factors, the information provided is also relevant to children who are placed at risk by specific developmental delays and disabling conditions. In the broadest sense, at risk can describe young children with environmental deficits such as poverty and family instability, children from minority and ethnically diverse families, and children with developmental delays and disabilities. While we are concerned about developmental readiness across all areas—cognitive, language, emotional, and social—many kindergarten teachers have voiced special concerns over the social ‘readiness’ of children from at-risk backgrounds; negotiating social situations in complex classroom settings is a necessary skill for the confident, successful student.

Behaviour descriptors of preschoolers at risk

Preschoolers who are at risk demonstrate fairly common patterns of social behaviours. Specifically, teachers report that many at risk preschool children have difficulty in the following areas: (1) following directions, (2) lack of experience within a structured setting, (3) difficulty working independently, (4) difficulty working in a group, and (5) generalised immaturity (Rimm-Kaufman, Pianta & Cox, 2000). For example, one teacher described her experience with kindergarten children who were at risk. She had intended to start the day with circle time and reading a story. However, two of the children lacked the social skills to sit quietly and keep their hands to themselves. She later discovered that these children had been
reared in welfare hotels with no tables and chairs, toys, or books (Quindlen, 1991). Children with limited prior learning experiences are already at risk for school failure, primarily because of lack of social knowledge and competence.

As a result of these problematic behaviours, many of these children will not develop necessary social skills or experience academic success. Therefore, they become at risk of developing serious emotional or behavioural disorders (Patterson, Reid & Dishion, 1992). In order to alleviate the poor outcomes caused by the lack of critical social skills at the preschool level, many of these children will require early intervention or special education services when they enter the public school system. Prevention research focusing on preschoolers and kindergarteners provides a framework for addressing behavioural issues of young children who are at risk of developing an emotional or behavioural disorder. This research indicates that teaching young children the social skills they need to develop positive relationships with teachers and peers serves as a buffer against the development of future problems (Sprague, Walker, Golly, White, Myers, & Shannon, 2001). Because of US Federal Legislation that now mandates the inclusion of preschool at risk children in typical learning environments (child care, Head Start and state-funded four-year-old programs), early childhood educators and early childhood special educators are working together to address the need for social skills development. However, some disagree on how best to assist children in developing socially-appropriate behaviour or may be at a loss to know how to intervene (Webster-Stratton, 1993). This disagreement may be based on both philosophical and professional training differences.

**Bridging developmentally appropriate practice and early intervention**

The field of early childhood education is guided largely by the tenets of developmentally appropriate practice (DAP). While DAP continues to be revised and adapted within contemporary early childhood settings, it emphasises three major facets: (1) child-initiated play and interactions, (2) age-appropriate instructional strategies and environments, and (3) culturally-appropriate and environmentally-based curricula (Bredekamp & Copple, 1997). Inclusion policy in preschool settings has resulted in the ‘marrying’ of DAP and early intervention instructional approaches. In fact, the components of DAP can be integrated readily into early childhood special education programs where functional curricula, age-appropriate placement, and individualised instruction are the order of the day (Bricker, Pretti-Frontczak & McComas, 1998). A discrepancy still exists, however, between the opinions of some early childhood educators and early childhood special educators regarding child- versus teacher-initiated interactions. DAP emphasises child-initiated interactions and the avoidance of teacher directed interventions to teach appropriate social behaviour, while early childhood special education utilises more direct and systematic approaches. Some early childhood educators argue that many children who display age-inappropriate or maladaptive social behaviours will ‘pick up more positive behaviours’ from their more experienced peers or they will ‘grow out of it’ if they are immersed in positive social climates with minimal adult guidance. Early childhood special educators, on the other hand, contend that immersion must be augmented with more direct approaches.

A point of mutual understanding for all early childhood educators lies in the area of cognitive development. The National Association for the Education of Young Children’s (NAEYC) position statement on developmentally-appropriate practices states ‘direct instruction may…be effective when attuned to the cognitive capacities and knowledge of the child at that point in development’ (NAEYC, 1996). The position statement on DAP leaves open the use of appropriate cognitive strategies that are suited to the child in three ways: (1) individually appropriate; (2) age-appropriate; and (3) culturally-appropriate. This position allows for a bridge between attending to the developmental needs of all children (age appropriate) while also recognising that at-risk children who have disabilities may benefit from more direct approaches (individually appropriate).

What seems to be evolving in inclusive preschool settings is the marriage of DAP’s mandate for appropriate cognitive interventions that are age and individually appropriate and the more teacher-directed strategies of early childhood special educators that
utilise verbal prompts, modelling, and behavioural reinforcers. For some children with more moderate social skills development needs, these are appropriate strategies that could or could not be used, depending on the situation and the teacher’s assessment. But for other children with more serious social skills needs, more systematic and direct teaching strategies should be employed. Walker, Colvin and Ramsey (1995) assert that if maladaptive behaviour problems and social skills deficits are not alleviated by the third grade, then they may become a chronic disorder that can be treated but not cured. In other words, there is a critical window of time for effective early intervention in social skills development; therefore direct intervention is warranted for children who display significant social skills problems early on.

**Specific social skills to be addressed**

The instructional implications for social skill remediation for at-risk young children are many. Children who have serious difficulties following directions and who do not respond to even the moderate structure that is imposed in preschool programs will have a tremendous social adaptation and learning curve when they reach kindergarten and first grade (Rimm-Kaufman, Pianta & Cox, 2000). As a result, these children will run a greater risk of being referred for specialised services and experiencing more negative social experiences in the first years of schooling, which can contribute to later school dropout and/or academic failure. These concerns should serve as a rationale for scaffolding and the development of curricula and activities to enhance the social skills of preschoolers who are at risk. The following chart lists possible areas of difficulty and accompanying skills to address.

**Chart 1 Typical social development difficulties of at risk preschool children**

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<tr>
<th>IDENTIFIED DIFFICULTY</th>
<th>CORRESPONDING SKILL(S)</th>
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<tbody>
<tr>
<td>Difficulty following directions</td>
<td>• Following one-step directions and then</td>
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<td></td>
<td>• Following two-step directions</td>
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<tr>
<td>Lack of experience in a structured setting</td>
<td>• Following directions</td>
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<tr>
<td></td>
<td>• Attending to routines</td>
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<td></td>
<td>• Self-monitoring of behaviours</td>
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<tr>
<td>Difficulty working independently</td>
<td>• Following directions</td>
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<tr>
<td></td>
<td>• Self-monitoring of behaviours</td>
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<tr>
<td>Difficulty working in a group</td>
<td>• Taking turns</td>
</tr>
<tr>
<td></td>
<td>• Sharing</td>
</tr>
<tr>
<td></td>
<td>• Following directions</td>
</tr>
<tr>
<td>Generalised immaturity</td>
<td>• Self-monitoring of behaviour</td>
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<td></td>
<td>• Following directions</td>
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<td>• Following a routine</td>
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<td></td>
<td>• Sharing</td>
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<td></td>
<td>• Taking turns</td>
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Task analysis strategies

Children who are at-risk learners need more explicit and clearly-stated expectations in the classroom. Therefore, early childhood teachers can ensure that they address necessary social skills by listing, explaining, and demonstrating the expectations and routines of the class. They also need to analyse the individual child dynamics within the classroom. By doing this, teachers are developing a social skills task analysis for each child in their classroom. As a result, a behaviour chain is defined. A behaviour chain is a series of behaviours that may be taught separately or together (Zirpoli & Melloy, 2001). This behaviour chain is critical in that explicit instruction of the essential elements of the skill ensures the likelihood that the child will more exactly understand the teacher’s expectations. The actual teaching of the behaviour chain is achieved through shaping, which is reinforcing successive approximations of the desired behaviours (Zerpoli & Melloy, 2001).

This task analysis serves as a ‘social blueprint’ for the social expectations of the learning environment in general and for individual children specifically. It is also beneficial to compare this ‘blueprint’ with the social expectations of kindergarten and first grade teachers to identify similarities and differences; this matching process may facilitate the transition for children as they move from preschool to kindergarten to first grade. It is more than likely that an overlap between the expectations of both environments will exist. Proficiency in social skills at an earlier stage will serve as pre-skills for more sophisticated social skills expected for later grades (Walker, Colvin & Ramsey, 1995). The following vignette is an example of how one teacher developed a ‘social blueprint’ for her class. (Susan Hoffman’s profile was developed for the vignettes in order to illustrate key points, and is based on the authors’ direct experiences with specific teachers).

Before school started, Susan identified five major social skills expectations that she had for the group.
(1) what the children need to do upon arrival to class (beginning routines), (2) the expectations for social behaviour in large groups, (3) the expectations for social behaviour in small groups, (4) expectations for independent and child-initiated activities, and (5) expectations for transition between classroom activities and routines. The use of shaping and behavioural chains facilitates the teacher’s implementation of these important routines.

Based on these expectations, Susan identified the social demands inherent within each situation. She listed the five expectations and then turned these social demands into specific social skills lessons. In order to establish routines and expectations for the children, she taught each of the lessons directly and systematically during the beginning weeks of school. By the time the holidays arrived, the entire class was performing many tasks independently and taking turns with minimal prompting (Stegelin, 2003).

An integrated approach to teaching social skills

Any attempt to teach social skills to young children should address the needs of the individual child. This is a fundamental concept to professional proponents of both DAP and early childhood special education. The reason for this is that children come to school or other educational programs with varying strengths and needs. So, ideally, their education should be individually based. However, the very nature of social skills instruction requires that the skills be taught along with other children and that they be practised within natural environments and within contexts they would naturally occur. While proponents of a DAP approach may support teaching social skills using contextualised or incidental situations, these methods must be augmented by goal-directed and more systematic approaches in order to meet the needs of young children who are at risk of developing serious behaviour problems (Bullis, Walker & Sprague, 2001). The skilled early childhood teacher, therefore, must be able to identify individual child social skills needs and then implement instructional practices that integrate individual child needs as well as large and small group child needs.
Negotiating the DAP dilemma

The need for a more direct and systematic means of instruction may present preschool teachers who wish to follow DAP with a dilemma. These teachers may ask, How do I teach children with social skills deficits effectively and remain true to DAP? The answer lies in a complete conceptualisation of social skills instruction. The research regarding social skills interventions is mixed. Some literature cites that direct teaching of specific skills and preskills is the best means of ensuring that children actually learn the skill (Kamps, Tankersly & Ellis, 2000), while other literature emphasises problems with generalisation of skills when extraneous environmental variables are not addressed (Scott & Nelson, 1998). Incorporating strategies that utilise direct teaching coupled with a heavy emphasis on generalisation is perhaps the best method for approaching social skills instruction for preschoolers who are at risk.

Teaching social skills in natural environments

Social skills are used in practical, everyday situations and routines. Therefore, care must be taken when developing strategies for teaching social skills in more isolated contexts. The difficulty young children have in generalising social skills from a direct teaching context to the context in which the skill naturally occurs lies in the failure to teach beyond the acquisition level of learning. To be effective, social skills instruction must practise skills in isolated ‘practice’ settings that can then be easily translated into real-life situations and contexts.

Rivera and Smith (1997) state that instruction is most effective when all levels of learning are addressed. Ensuring that a skill is deeply embedded within an individual's repertoire takes specific instructional strategies that provide for not only the acquisition of skills but also performance of those skills at the fluency, proficiency, maintenance and generalisation levels (Rivera & Smith, 1997). Instruction of social skills in all the levels of learning offers children who are struggling the chance to acquire the skill and use it in a meaningful way.

Flooding the learning environment with natural opportunities

An effective strategy for embedding social skills in the classroom setting is known as flooding. Flooding the environment with numerous yet natural opportunities to practise social skills helps the at risk child to become fluent and proficient in performing the skill. Coaching skills within the context in which they naturally occur and reinforcing the attempts at performing the skill offer the child the opportunity to maintain the skill and generalise it to other permutations of the social environment. Frequency of social skill practice is an important notion. Making sure that children have the opportunity to practise the skill (1) throughout the day and (2) often during the course of the week provides them with a means of maintaining previously learned skills. The following vignette illustrates how one teacher incorporated various stages of learning a social skills intervention for turn-taking.

Figure 2. Applying the stages of learning to a lesson on ‘turn taking’

At the beginning of the school year, many of the children in Susan Hoffman's class had difficulties taking turns that went beyond the realm of their tender years. For example, two boys would become extremely aggressive when other children would play with certain toys they preferred. Susan knew she had to address this issue but wanted to ensure that the boys used the new skill within the various situations throughout the day that involved turn taking. In other words, she wanted them to able to generalise the skill of turn taking. In order to get more bang for her buck, she allocated class time to the direct teaching of turn taking. She devoted 10 minutes during circle time every morning to identifying when turns should be taken and the steps involved in taking turns. She also set up daily situations that involved turn-taking at a higher than normal rate. Some examples of these classroom situations she set up included (1) placing one set of crayons on a table for three children, and (2) encouraging the children to play cooperative games such as ‘Red Rover’ at recess. These situations allowed the children to become proficient at turn-taking. In order to ensure that turn-taking was maintained and generalised, Susan set up a peer- and class-wide reinforcement system. The children were given a set of...
five stickers every morning. They were told that by the end of the day they should have given away all of their stickers to their classmates, but they could only give them away to someone they saw taking turns. This encouraged the children to not only take turns themselves but to also watch for and then reinforce their peers for also taking turns. At the end of the day, Susan put a smiley face in the fishbowl for every child who had given and received stickers. At the end of the week, if there were at least 35 smileys in the bowl, the children got to plan a special event, such as a popcorn party, watching a favourite video in class, sharing a book, or a special event suggested by the children themselves.

Susan's plan worked well and she faded out the turn taking instruction and replaced it with other social skills, but she always provided some child-appropriate reinforcement for the children's successful social skill use (Stegelin, 2003).

Conclusion

Providing social skills instruction for preschool children who are at risk is necessary for their academic success and social adaptation in kindergarten and elementary school. Debating the means to ensure that they have the necessary skills is not necessary. Proponents of DAP, as well as early childhood special educators, can agree that an integrated approach to teaching social skills offers children who are at risk the best opportunity to become the most productive students they can possibly be. In order to accomplish this integrated approach, early childhood teachers must systematically assess individual children in the preschool setting, analyse the social demands of their environments, and then provide systematic and more direct instruction in necessary social skills. To be effective, opportunities for practising the skills must be embedded throughout the day, and developmentally appropriate rewards for correct performance of skills is necessary to ensure that the children can use them on an ongoing basis and generalise them to various contexts. By staying true to DAP as well as systematic instruction, early childhood teachers can ensure that children who are at risk of developing serious social skills problems have an opportunity to be socially and academically successful and to avoid negative outcomes.

References


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Assessment of the early childhood practicum: What can we learn from tertiary supervisors’ silences?

Michelle Ortlipp
Charles Sturt University

This article presents results from a study that focuses on tertiary supervisors’ perspectives on practicum assessment. The discussion of results in this paper is restricted to one of the key themes evident in the data - silence. The different ways of understanding silence according to the literature provides the theoretical framework for an exploration of tertiary supervisors’ moments of silence during the assessment process. Examples from focus groups, individual interviews and journals are used to illustrate how two different forms of silence expressed themselves in the data. The poststructuralist concepts of discourse, subjectivity and power are used to explore what the silences might mean and what we can learn from them.

Introduction and background to the study

This paper discusses results from a study that explores how tertiary supervisors from TAFE and university early childhood courses understand and practise practicum assessment. The methodology for the study has been reported on elsewhere (Ortlipp, 2002). In overview, data were generated through four focus group interviews, each with four to five tertiary supervisors and individual interviews with 10 of these tertiary supervisors. Supplementary data were obtained from reflective journals, questionnaires and assessment documents from the supervisors’ institutions. Data were examined for themes guided by a poststructuralist conceptual framework. This paper focuses on one of the key themes identified - silence in the triadic assessment process. The tertiary supervisors’ silences are explored using a theoretical framework drawn from the literature on the different ways of understanding silence, and poststructuralist theory, specifically the concepts of discourse, subjectivity and power.

The issue of silence

I first became interested in the notion of silence in practicum assessment when I reviewed the literature on the early childhood practicum. Researchers in this area claimed that there was a lack of open critique or critical feedback in the early childhood field in general and in the process of triadic assessment specifically (MacNaughton, 1991; Veale & Rikard, 1998). MacNaughton (1991) questioned the idea that the triadic approach enabled all participants to have an equal say in assessment because of the distribution of power that serves to constrain student input. Tertiary supervisors also reported a reluctance to disturb the relationships in the triad through critical discussion (Veale & Rikard, 1998). These concerns were reflected in the current study. For example, during a focus group interview, Olivia, who had 12 years experience as a TAFE and university tertiary supervisor and practicum coordinator, said:

The other thing that bothers me about the idea of the triadic assessment is that it's based on the principles that there will be consensus and I don't think in any group there is ever consensus. I think what happens is that there are some things you can say in a group and some things you can't and the dynamics of people coming together means that sometimes you can speak and sometimes you sit silently because it's strategic to remain silent at that particular point.

It was these initial issues around silence that prompted me to explore this further in individual interviews. I asked the participants if they had ever felt they could not say what they wanted to say...
during the assessment process. Every tertiary supervisor had a story about feeling silenced or choosing to be silent. However, the theme of silence in the assessment process extended beyond that specific question. Silence was a persistent and consistent theme running throughout the interview and journal data. This paper explores those silences, what they might mean and what we can learn from them in relation to improving practicum assessment.

Ways of understanding silence

Silence is written about, explored and explained in many ways, from within a range of different discipline areas - psychology, sociology, anthropology, linguistics, poststructuralism, education and feminism. Within this literature, silence is seen in multiple ways. It is understood as an effect of oppression, as repressive, as a sign of resistance, as actual, as powerful, as strategic, as an effect of power relations and as safe (Davies et al., 1997; Ellsworth, 1992; Foucault, 1984; Gold, 1994; Silin, 1999). Silence can mean many things, and cannot be seen in binary opposition to speaking, with speaking being the privileged term. In the words of Jonathon Silin:

*Silence can signal resistance as well as oppression, voice can create new moments for social control as well as for personal efficacy. And words are notorious for concealing and transforming as well as revealing the truth of our lives* (Silin, 1999, p.44).

It is not possible within the scope of this article to discuss all of the ways that silence can be understood. I have chosen two ways of understanding silence from the literature and illustrated how these were expressed in the data with representative examples. This forms the basis for an exploration of what the silences might mean and what we might learn from them.

Silence as strategic

Foucault (1984) understood silence as ‘an integral part of the strategies that underlie and permeate discourses’ (p.310). In poststructuralist theory discourses determine who can speak, when, with what authority, to whom and how (Davies, 1997). Silence should be considered with and in relation to what is said, for in determining who can speak discourse also determines who cannot speak (Foucault, 1984). According to Foucault:

*There is no binary division to be made between what one says and what one does not say; we must determine the different ways of not saying such things, how those who can and those who cannot speak of them are distributed, which type of discourse is authorized, or which form of discretion is required in either case* (p. 310).

The strategic element of silence was also identified by Bronwyn Davies and her students (Davies et al., 1997) who, in exploring their silence as women, talked about strategic silences in which their words were unspoken and silences were used to protect self and others. Silence was at times chosen knowingly and strategically, because to speak at the time the words were thought would not carry as much impact as to speak at a later time. These women spoke about choice, discretion and careful reading of situations when exploring, explaining and coming to understand their silences. Silence was something that they ‘used and can use powerfully’ (p.5). Not speaking co-existed alongside speaking out.

Discretion and careful reading of the situation are obvious in Glenys’s explanation for why she often chose not to speak up about students’ minor breaches of requirements:

*I’m sort of there to represent the university and make sure the requirements are met and so then, I suppose it comes down to the judgement on my part about whether you know, if a few things aren’t there, am I going to sort of upset the apple-cart and what does it involve if I do…and it’s a bit of a public relations thing I think, you know, whether the people out in the field will think ‘Oh God, here comes the academic who doesn’t know the real world and all the rest of it, and we think she’s fine and what’s she worrying about with the written work?’*

Glenys’s silence is about her reading of the situation – the public relations element of practicum assessment and her discretion in not speaking. Her strategic silence protected her from being seen as ‘the academic who doesn’t know the real world’ and it protected her from what might happen if she ‘upset the apple-cart’.

The notion of silence as strategic can be glimpsed in the following example:

*Joan: …I couldn’t say that it’s [the student’s lower than expected level of achievement] a lack of support, or the environment, or the lack of this or whatever at the centre, because you can’t criticise the centre, I mean, though in that*
situation I couldn't say what I wanted to say, but I said it afterwards to the student that you did very well in that situation, given that environment…

Michelle: What makes it so difficult?

Joan: Well, because we are guests in that centre. That centre is providing a free service for us and we value that, and it would be very discourteous for us to make any comment at all…they're providing the environment…and yes, we can say we don't want our students there again, but it's becoming more and more difficult to find placements for the students…

Foucault (1984) talked about tact and discretion in what is said to whom and in what circumstances. There is discretion required here because Joan is a guest – guests don’t criticise their hosts. Davies et al. (1997) also talked about discretion, where silence is chosen knowingly and strategically to protect the self and others. Joan knowingly chose not to speak during the triadic discussion but to speak later, when she had the student alone. Joan used silence to protect herself from being seen as discourteous, and to protect future student placements.

Drawing on Foucault’s (1984) view of silence as a strategy connected with discourses, Joan’s silence could be understood as a strategy that allows her to position herself within the discourses of practicum assessment as a guest. Official practicum documents, which are a part of this discourse, refer to supervision and assessment by tertiary supervisors within the context of a ‘visit’ (School Experience and Professional Practice, 2001). Joan’s subjectivity as a visiting tertiary supervisor (a ‘guest’) is constituted through the discourse of practicum assessment as a result of her act of silence. As she takes up the subject position of ‘guest’ and begins to act and speak from within it she exercises a form of discretion that leads to silence because she knows that to say anything at all ‘would be very discourteous’. Joan knows it is difficult to find placements for students and this produces relations of power that impact on what can be said in the context of practicum assessment. As a guest, Joan is positioned as powerless because the host centre can exercise the power of not inviting the tertiary supervisor and her students back for placements.

Silence as actual

A study by Gold (1994) utilised the poststructuralist concepts of discourse and power, and feminist theory about giving voice to explore the silences of minority groups during courses in school management. She identified a form of silence that she called ‘actual silence’. Nothing is said because the would-be speaker is not able to enter the dominant discourse. Gold proposed that silence in this form arose from insecurity, an apparent lack of knowledge, or the need for more time to think before responding. This is in keeping with Foucault’s (1984) view of silence as connected with discourse. When tertiary supervisors cannot take up a position within a particular discourse from which they can speak with some authority then silence is the likely effect.

Tertiary supervisors intimated that they did not have the knowledge that would enable them to speak about a student’s competence. They had not ‘seen’ the student do what the field supervisor or the student claimed and therefore they had nothing to say. When the silence is actual, whose knowledge or way of knowing is privileged and acts as the truth upon which a judgement is made? Can the tertiary supervisor enter the discourse of assessment of early childhood practice when all she has ‘seen’ is the written work, when she is, as Glenys said, ‘the academic who doesn’t know the real world’? The following examples from the data illustrate actual silences that are the effect of not being able to enter particular discourses of early childhood practicum assessment.

Carol and Olivia silenced their views on student competence from within a discourse of practicum assessment that uses the observation of the student’s practice over a certain period of time as the truth upon which a judgement of competence can be made. Carol disagreed with the field supervisor’s assessment of the student’s level of achievement but was silenced because:

I didn’t have anything to contradict, but I couldn’t validate anything that they said because it was all stuff I wasn’t there to see.

Olivia had similar reasons for silencing her assessment of a student’s achievement:

I’ve taken a risk at times in agreeing that a student pass
when I really felt like maybe she wasn’t. And then I also think, well, I have only seen her for two hours. What would I know?

Glenys’s silence is consistent with what Gold (1994) called ‘actual silence’. It involves insecurity, an apparent lack of knowledge, and the need for more time to think of a response:

I would’ve liked to have pointed some things out to the students, but I didn’t want to offend the teacher because it would’ve involved some sort of criticism of the way things were happening in the room, and so I didn’t feel able to . . . it’s . . . my perception of what my role is, which may be wrong . . . or maybe my lack of experience in this system . . . What I would like to have done in that situation is that I could have quickly thought of a tactful, positive way of expressing my views, which would not have offended the field supervisor.

These examples suggest that the tertiary supervisors were positioned (and positioned themselves) within particular discourses of practicum assessment as subjects who did not have the authority to speak about certain issues, and thus they remained silent. Other discourses circulating in and around practicum assessment (discourses of triadic assessment and teaching and learning) provide positions that tertiary supervisors might speak from. Olivia and Carol chose not to access the discourse of triadic assessment and take up the position of equal partner in assessment from which they could have spoken about the student’s level of achievement. Glenys did not access discourses of teaching and learning within which she could have spoken from the position of teacher and used the practicum experience as a source of learning for the student.

What might the silences mean?

Elizabeth Ellsworth (1992) used feminist poststructuralist concepts to explore speaking and silence in educational settings. She claimed that what is said, to whom and in what context ‘is the result of conscious and unconscious assessments of the power relations and the safety of the situation’ (p.105), thus silence can be safer. A safe space to speak, according to Ellsworth, requires a high level of trust and personal commitment to those who are a part of the group, which is gained partly through social interactions outside of the formal gathering of the group, away from the classroom.

What might this mean for the process of assessment in the early childhood practicum? Is it safe for everyone to speak? Is there a good level of trust between the participants? Is there a relationship that exists outside of the practicum? A number of the tertiary supervisors in the study felt that they did a better assessment if they knew the students as a result of teaching them, because, as Glenys said, you’ve established some sort of a personal relationship. Others commented that they were able to speak more openly if they had developed ‘a rapport’ with centre staff. However developing relationships with students and staff may be difficult for tertiary supervisors to achieve given that: in many institutions sessional staff members complete much of the practicum supervision and assessment; in a number of TAFE institutions students are visited by a different supervisor each time because it is considered more objective; sessional university supervisors in this study claimed that they rarely return to the same centre.

These approaches deny the human element of early childhood practicum assessment, and work against the development of a level of trust and commitment that can create safe spaces in which to speak critically during the supervision and assessment process.

Silence, subjectivity and the ‘nice ladies’ of early childhood

The tertiary supervisors in this study avoided discussion and feedback during triadic assessment that may have been interpreted as criticism of centre practice. Their silences indicate that the problems associated with critical discussion in the early childhood practicum (MacNaughton, 1991; Veale & Rikard, 1997) are unresolved. Stonehouse (1994) attributed this lack of a critical approach in early childhood to the ‘culture of niceness’ that exists in what is predominately a feminine profession. Sixteen of the participants in this study were white women, and there was one white man. All supervisors who took part in individual interviews were women. As early childhood professionals, tertiary supervisors and educated white women they had access to the discourses of early childhood professionalism, practicum assessment and middle-class Anglo politeness. Some of the subject positions made available through these discourses are ‘nice lady’, ‘visitor’ and ‘courteous guest’. When tertiary supervisors take up these positions and act
and speak from within them, the effect is silence on issues that would offend the practicum centre staff.

There may be alternative subject positions available within these and/or other discourses that tertiary supervisors can access and that may enable critical dialogue. Some positions, however, are more readily accessible or more desirable than others. Some discourses, because of their institutional location and wider social circulation, have more social and institutional power, suggesting that subject positions within such discourse may be more desirable, more justifiable, more accessible and accessed more consistently. Socially, historically and institutionally the subject positions available to (and produced by) early childhood tertiary supervisors who are educated white women constrain rather than enable a critical approach to early childhood practicum assessment.

In conclusion: What can we learn from tertiary supervisors’ silences?

Achieving an equal sharing of voices is problematic if what can be said, when, how and to whom is a result of the discourses in circulation and the relations of power operating within these. The triadic assessment approach is based on the notion that there can be an equal sharing of voices and that consensus can be reached as a result of this process. The tertiary supervisors’ silences demonstrate that consensus in many cases is an illusion because it is gained through someone’s silence. Olivia, in her final journal entry, made a statement that raises serious concerns about the triadic approach to supervision and assessment of the early childhood practicum. She wrote:

My greatest concerns go back to the way my own involvement continued a status quo that I see as dangerous and limiting for how early childhood teaching is understood and practiced. My silent voice sits alongside the different strategic silences I am sure each student felt, and each teacher felt.

What we can learn from the silences of the tertiary supervisors in this study is that we must pay more attention to the human element of practicum assessment, to creating safe spaces for critical dialogue to occur. For example, tertiary supervisors could be assigned to specific centres, thus getting to know centre staff over time. Alternatively, tertiary supervisors could be assigned a group of students and supervise them over the duration of the course, thus developing a relationship with the students.

We also need a greater understanding of what goes on at the level of the subjectivity of those who participate in practicum assessment. How does the way that tertiary supervisors understand themselves as professionals and people impact on what they can say, how and to whom in the assessment process? Do we want practicum supervision and assessment to involve open and critical dialogue and the presentation of diverse views on early childhood practice? If tertiary supervisors exercise discretion and are strategic in how, when and to whom they speak, we cannot continue to view the current approach as the most useful way to assess the early childhood practicum.

References


Are we asking the right question when we ask ‘Is child care bad for children?’

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Originally evolving out of a welfare model of services (Brennan, 1994; Sims & Hutchins, 1996), child care has traditionally been the underdog of early childhood programs. Child care workers remain on lower wages than early childhood teachers (Press & Hayes, 2001). Training requirements to work in child care are less, and the industry is characterised by high caregiver stress levels, high staff turnover and poor working conditions (Commonwealth Child Care Advisory Council, 2001; Press & Hayes, 2001; Sims, 2003, in press). It is no wonder child care is perceived as a ‘necessary evil’ for those parents whose needs require them to be in the workforce.

The Western world is strongly influenced by an ‘Ideology of Motherhood’ (Hutchins & Sims, 1999) which implies that the ultimate achievement of womanhood is to parent children. In this context, women who ‘pass on’ their child caring role to others are judged as poor examples of womanhood. The child care industry, therefore, is seen as having a ‘…financial interest in separating infants and young children from their mothers…’ (Cook, 2002). Alternatives to child care, such as extended parental leave, are debated without challenging the fundamental assumption that children are better off in their homes, being cared for by a parent. Formal child care is often perceived as the opposite, and less desirable end of the child care continuum, with parental care at the most desirable, end. Proving child care is bad for children is often assumed to prove the converse: that parental care is the best for children. The question thus becomes imbued with all the power and emotion surrounding the whole issue of parenthood/motherhood.

Current research on outcomes for children

What does the research tell us about the impact of child care on children’s outcomes? Available research reports both positive and negative impacts and it is crucial to have a balanced analysis of all the evidence. In recent years, the NICHD Study of Early Child Care in America demonstrated that children who averaged 30 or more hours of child care per week during their first four years of life had more problem behaviours at 4.5 years of age (Brooks-Gunn, Han & Waldfogel, 2002; Vandell, 2001). These behaviours were reported to have larger effects than those for the impact of parenting on behaviour (NICHD Early Child Care Research Network, 2002c) and included increases in externalising problems, conflicts with adults, assertiveness, disobedience and aggression (NICHD Early Child Care Research Network, 2002b). Longer hours of maternal employment are linked to more child problem behaviours (Greenberger & O’Neil, 1992) and reduced cognitive outcomes (Han, Waldfogel & Brooks-Gunn, 2001), although type of care was not considered in these studies.

Taking a different angle to investigate the impact of child care on children, some researchers have focused on determining stress levels (measured by cortisol). Cortisol levels are normally high at the beginning of the day and decrease (White, Gunnar, Larson, Donzella & Barr, 2000). Although small increases in cortisol levels may be advantageous in enhancing cognitive and behavioural functioning (Davis, Donzella, Krueger & Gunnar, 1999), larger increases indicate an extreme stress reaction. Chronic high levels of stress are linked to less positive child outcomes (National Crime Prevention, 1999; Sims, 2002; Young, 1996) including aggression, juvenile offending, school drop-out, teenage pregnancy, substance abuse and suicide ideation. Children in child care are found to be more highly stressed,
particularly younger and less socially mature children (Dettling, Gunnar, & Donzella, 1999). Boys in particular, demonstrated higher levels of internalising behaviours associated with higher rises in cortisol levels. High cortisol levels are thought to indicate children's lack of coping, so that children who respond to stressful events with an elevation in cortisol levels, are those children without adequate coping skills (Davis et al., 1999).

Attending child care is commonly considered to place the establishment of secure attachments between mother and child at-risk (Belsky, 1988; Belsky & Rovine, 1988). Centre-based care is reported as likely to increase the risk of insecure attachments between mother and infant, more so than for other forms of alternative care (including relative care or family day care) (Sagi, Koren-Karie, Gini, Ziv & Joels, 2002). Longer hours spent in child care are associated with ambivalent attachment (Scher & Maysless, 2000), and with poorer teacher ratings of children's school achievement, work habits and attitudes to achievement (Goldberg, Greenberger & Nagel, 1996).

The NICHD study, however, suggests that security of attachment is more likely to be influenced by the quality of child care (NICHD Early Child Care Research Network, 1997; Peisner-Feinberg et al., 2000). Quality of service delivery is also found to impact significantly on a range of other child outcomes (Melhuish, 2001). Higher-quality child care is related to improved pre-academic and language skills, irrespective of the time spent in care (NICHD Early Child Care Research Network, 2002c; Vandell, 2001). Quality is also associated with improved social competence (NICHD Early Child Care Research Network, 2002a). The Cost, Quality and Outcomes study also showed advantages in cognitive (maths and language) and social (interactions with peers, problem behaviours) skills in those children who attended high quality child care centres; advantages which lasted through the transition into school (Peisner-Feinberg et al., 2000). Generally, children who experienced centres with better classroom practices demonstrated improved cognitive outcomes, while those who had closer relationships with their caregivers demonstrated improved social skills and were better behaved. In family day care, high quality is linked with improvements in cooperation, cognition and language skills (Clarke-Stewart, Vandell, Burchinal, O'Brien & McCartney, 2002).

Young children who receive sensitive, warm and responsive caregiver attention at the beginning of the day at child care are more likely to have lower cortisol levels than do children who received sensitive, but essentially non-interactive, care (Gunnar, 1992). Secure attachments are found to have a significant impact on children's stress levels. Gunnar and White (2001) suggest that a history of secure attachment between parent and child decreases the magnitude of children's future reactions to stress so that familiar stressful events, such as short-term separation from a parent, do not cause a large stress response.

While there has been little Australian research, information available to date suggests that the Australian scene is significantly different from the American context. First, a high proportion of American child care is recognised to be of a low quality (Ramey & Ramey, 2000), whereas Australian child care, governed by state legislation and federal accreditation, is assumed to be of a higher quality. Second, in Australia, children are more likely to be securely attached when they had used formal care in the first year of life (Harrison & Ungerer, 1997, 2000). These studies indicated that children are more effective in their social interactions with peers at preschool age, and are rated by their teachers as performing better at school at age six, having spent time in child care in their first year of life. However, children with unstable care arrangements are more likely to have some behavioural adjustment problems at school age (although not earlier) and children who had attended longer hours of child care in their first 2.5 years are at risk for lower academic adjustment.

While there is clear agreement as to the dimensions of quality in early childhood environments (Commonwealth Child Care Advisory Council, 2001; Love, Schochet & Meckstroth, 2000), there is little evidence in the research literature to link specific dimensions to child outcomes. There is a discontinuity between traditional measures of quality and those linked to developmental outcomes (Melhuish, 2001). We need to focus more research on specific components of quality early childhood environments in order to
understand how each impacts on child outcomes (Fleer, 2002; Melhuish, 2001).

The impact of child care on children depends to a great extent on other aspects of children's lives. Children whose mothers had lower levels of education are more likely to be affected by poor-quality child care (Peisner-Feinberg et al., 2000). Conversely, these at-risk groups of children are also more responsive to the advantages offered by high-quality child care. In Latin America, attendance at child care decreased children's vulnerability to factors operating through low parental education levels (Wilim, 2000). Waldfogel and her team found that early experience of non-parental care (in the first nine months of life) had a negative impact on cognitive development in white children but not in black children. In addition, behaviour problems were more likely to be observed in white children only, but these did not last beyond age four (Brooks-Gunn et al., 2002; Han et al., 2001). Gender differences are observed in studies relating to maternal employment, implying a link to non-parental child care. Girls' grades in one study were improved as their mothers spent more time at work, whereas sons' grades, work habits and ego control were poorer (Goldberg et al., 1996). Children living with poorly educated, more stressed mothers (Scher & Mayseless, 2000) or mothers with depression (Clark, Hyde, Essex & Klein, 1997) are more likely to establish less secure attachments to their mothers, making them more vulnerable to the quality effects of child care.

There is a significant literature on the positive impact on early intervention programs on children's outcomes, particularly when the intervention consists of a combination of child-focused (usually centre-based care) and parental-focused (often home visiting) elements (Sims, 2002). Quality early intervention programs show long-lasting influences on children's school (secondary and tertiary) performance, participation in juvenile and adult offending, employment and income generating opportunities and life chances (such as home and care ownership, age of childbirth) (Fight Crime: Invest in Kids, 2001; Greenwood, Model, Rydell & Chiesa, 1998; Schweinhart, Barnes & Weikart, 1993; Sims, 2002). It is tempting to claim these benefits as the potential benefits of child care, given that the combined child and parental focus is identified as important in high quality child care (Sanson & Wise, 2000). Indeed, the movement to incorporate elements of parent support into regular child care centre services has been recognised and piloted in Australia (Sims & McSporran, in review). However, the reality of child care suggests these benefits are something the profession can, and ought to, aim for, rather than something currently being achieved.

Where does this leave us?

It is clear that the quality of the environments young children live in is crucial for their developmental outcomes (Shonkoff & Phillips, 2000). If we are truly interested in creating a society in which all young children have opportunities to reach their potential, then we have an obligation to examine quality in all of the environments young children participate in (Fleer, 2002). In Australia, these commonly consist of the home (the primary early childhood rearing environment), informal child care, formal child care, and early education programs. Participation rates for the varying environments show that approximately 18 per cent of children attended Long Day Care Centres in 1999 (Press & Hayes, 2001). In contrast, participation in the non-compulsory year of school immediately prior to compulsory school entry (variously called preschool or pre-primary amongst other names) ranges between 80–96 per cent.

Our levels of support vary for these different environments. Services reaching into the homes of young children are only just beginning and tend to be focused on families who are identified as ‘at-risk’, rather than being available for all families (Davis, Martin, Kosky & O’Hanlon, 1999; Sims, 2002). It is clear that the public/private divide, and the ‘Ideology of Motherhood’, still have a strong influence on our willingness to reach into all homes and provide support to the parents of all children. Funding for child care services is currently under review (the Broadband Review). However, the level of financial support is unlikely to be increased – rather, the focus is on how to spend the existing funds more efficiently. Costs to parents, even with government funded Child Care Subsidy, can be considerable, and there is concern that families on low income are unable to afford the gap fee (the difference between the subsidy they can claim and the fees charged). These factors all have a major impact on the ability of child care services to attract and retain well-
qualified staff, to provide high quality working environments for staff, and to provide high-quality programs for parents and children. In contrast, early childhood education funding operates at the State rather than Federal level. Preschool programs, because of government funding, are offered free or at minimal cost to families (Press & Hayes, 2001).

If we truly valued young children, and believed that it was important to ensure all children had a right to equal opportunities to reach their potential, we would make changes in our approach to services for them and their families. Services need to be holistic: young children live in families; families live in communities. The ability of parents to provide a high-quality child rearing environment depends on the physical and mental resources available to them. Parents living in communities with no safe play spaces, without easy access to libraries or playgroups, where it is not safe to walk the streets, and where unemployment places a significant financial strain on many residents, are unlikely to have the physical and mental resources to create an optimal child rearing environment. Services need to target not just the behaviour of parents themselves, but the communities in which parents live. Communities need to become family-friendly. Employment opportunities need to provide families with adequate economic resources. Appropriate leisure and play opportunities need to exist in communities to ensure that the needs of both children and their parents are met. Communities need to provide opportunities for parents to meet others, to develop friendships and to become part of informal social and emotional support networks. Services and supports used by families need to be accessible; transport options need to be available to ensure families can get to, and participate, in services and activities (Sims, 2002).

This ecological approach to service delivery requires cooperative partnerships to operate between traditionally different levels of government and non-governmental agencies. Responsibilities for early childhood education, for example, are state-based whereas Children’s Services are federally managed. Services for young children operate out of a range of portfolios including Education, Health, and Social Services (Gittins, 2003), and range of community-based organisations, some small and local, others statewide or national are also involved in service delivery. All these groups need to be intimately involved in cooperative partnerships to deliver holistic services to children and families.

Our question: ‘Is child care bad for children?’ needs to be re-focused if we want to ensure that all young children receive an optimal start in life (Sanson & Wise, 2000). Young children participate in a range of different environments. We need to focus on ensuring that every one of those environments offers children the best possible opportunities for maximising their growth and development. We need to ensure that children experience high-quality environments in their homes, in their local communities, in their child care (both formal and informal) and in educational settings. We need to start focusing our energy and attention on understanding what is quality in each of these settings. Are the variables making up a high-quality child care environment the same variables that constitute a high-quality school setting? Do the factors contributing to high-quality in child care translate into high-quality parenting? Or high-quality grandparent care? Are there fundamental, universal factors of high-quality that apply irrespective of differing parental and community values and beliefs, or is quality culturally dependent?

We need to ask how we support adults in all the different settings (parents, relatives, or paid or unpaid caregivers) so they are able to offer the highest-quality environments. We need to start organising our funding, administration, and policy in ways that encourage the development of such services. Without such support, services cannot effectively develop collaborative partnerships. Without these holistic services, children will continue to be treated in a piecemeal fashion, with some receiving quality in some settings, but few, if any, receiving quality services in all aspects of their daily lives. For our children’s future, we need to work together now to ensure that all environments children participate in are quality environments. We should be asking ourselves: ‘What do we need to do to ensure that all children experience high quality in every aspect of every environment in which they participate?’ Once we start focusing our energies on the right question, we will begin to make progress towards improving outcomes for all children.
References


Fundamental movement skills: Teachers’ perspectives

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The place of explicit movement skill development programs in early childhood settings is contentious. However, given the growing understanding that movement competence is important for maintaining an active and healthy lifestyle (Hands, Parker & Larkin, 2001), well planned and effective programs specifically designed for young children are important.

In this paper, the influence of a new teaching resource designed to support teachers in implementing a fundamental movement skill program is presented using a case study approach. The case studies were constructed with teachers working in a range of early childhood settings. The impact of the program on teachers’ level of confidence, knowledge of fundamental movement skills, and personal physical activity level is presented. The information was gathered using a structured self-reflection process including a journal, group meetings, individual face-to-face interviews and a final written evaluation. The findings indicate an increase in teacher confidence and knowledge but no impact on personal physical activity level.

Introduction

Fundamental movement skills are basic movement patterns that form the basis of many more complex skills used in games, sports and other recreational activities. They include running, throwing, skipping and balancing. Children who are proficient in these skills are more likely to have higher self-esteem and self-confidence (Henderson, May & Umney, 1989), and therefore be more willing to seek activity opportunities rather than avoid them. Strategies to maximise movement proficiency, therefore, form an important part of early childhood teaching and learning programs. A number of teacher resources are now available to assist teachers in their planning.

In 2000 and 2001, the Fundamental Movement Skill Teacher Resource (Education Department of WA, 1997) was rewritten to bring it into line with the Curriculum Framework for Western Australian Schools (Curriculum Council, 1998). The earlier resource had been favourably received, with many teachers reporting that the materials had helped them to understand how particular movement skills were performed and given them information on one teaching strategy to implement. The package, however, did not support teachers in providing a range of experiences, integrated into the learning program. Nor did it help teachers in gathering information about skills that was comprehensive, fair, valid, explicit and educative. The emergence of portfolio reporting had also led to the exclusion of physical activity in these reports or, conversely, the inclusion of ‘work sheets’ that reflected children’s written skills more than their physical skills. The new package aimed to address many of the early concerns by providing teachers with a selection of strategies to plan, deliver and evaluate quality teaching and learning programs to maximise children’s learning of fundamental movement skills (FMS).

Practising teachers supported the rewriting of the package at all stages of the process. A reference group oversaw the production of the materials, a teacher reference group read and provided feedback on each draft of the materials, and a case study group implemented the materials and reflected on their experiences with them.
The writers of the package, as well as the reference group and teacher reference group, wanted to evaluate the implementation of the package as it was developed. There were three main focuses: documenting the use of the package in order to refine the content and presentation of the information, researching the impact of a fundamental movement skill learning program on children's skill and activity levels, and researching the impact of the FMS teacher resource on teacher's practice.

This paper presents the latter research component, examining the teacher's perspective on the implementation of the FMS Teacher Resource (Education Department of WA, 2001).

**Method**

Seven teachers from different school sectors, settings and year groups were involved in the redevelopment of the FMS Resource. Two teachers, one a generalist classroom teacher and the other a physical education specialist, worked together for one of the case stories. The characteristics of the six different settings are shown in Table 1 (see page 44).

The case study method chosen involved a structured self-reflection process. After a half-day orientation to the FMS Teacher Resource, teachers completed an initial feedback form and were given a reflective journal. The journal asked them to record their plans for the implementation of the resource, and provided a lesson plan format including a large space for reflection. Two face-to-face interviews were conducted with each teacher approximately three and six weeks into their implementation period. Teachers presented a short report of their experience with the resource during a second half-day workshop and completed a final evaluation.

From the journal, interviews and final report, case stories were constructed. Each story was written by the FMS Teacher Resource project writer and reviewed by each teacher three times – after each interview and on completion of the final story. At each point, changes were made to the stories to more accurately reflect their experience. These stories describe key components of the teacher's implementation of the resource and were included in the final resource as examples for other teachers. The initial self-reflections, journals and case stories were analysed to identify emerging themes. These were loosely grouped into two areas: teacher knowledge and confidence.

Six weeks after the trial, teachers were asked to reflect on the impact of the FMS Teacher Resource on their confidence in teaching FMS and their knowledge of fundamental movement skills. This paper reports the teachers’ journeys.

**Results**

In order to compare the experiences of the teachers, two sets of matrices were developed (Tables 2 and 3, on pages 45 and 46). The first described each case and included the initial understandings and expectations of the teachers, their journal entries, their learning as reflected in the co-constructed case stories and their final reflections. The second focused on the emerging themes.

**Case Study Summaries**

Each teacher reflected on their experiences and learning and reported the significant impacts on their practice, thinking and confidence that they identified. Not all teachers provided extensive written notes. For some, the interview process supported their reflections and enabled them to limit their writing. These ‘verbal’ teachers also gave limited information in their final reflections.

**Emerging Themes**

Learning seemed to fall into the focuses the authors had chosen for the resource itself. This is not surprising since the materials were developed and reviewed within the following structure:

- identifying children's interests, strengths and needs;
- choosing a focus skill;
- assessing children's skill levels;
- planning and implementing learning experiences;
- gathering information about developing skill levels, and
- sharing information about learning.

The interwoven nature of the learning and teaching process, however, often meant that a comment made in connection to one aspect also reflected learning in others. In particular, comments made about ‘confidence’ often referred to many parts of the process, and of the teachers’ own journey of learning about and teaching of FMS.
Final Reflection
Participants were asked to rate their knowledge, and their confidence prior to and after completion of the trial period. These ratings are shown in Figures 1 and 2. With the exception of one highly-skilled and knowledgeable teacher, all other participants reported increased knowledge and confidence.

Discussion
From the beginning, the plan was to develop a resource that could ‘stand on its own’. Consequently, extensive information about FMS, observation strategies, information-gathering techniques, appropriate learning experiences, assessment methods and ways to share information were developed in the form of texts, examples, pro formas and the case stories. The aim was to provide a number of ways for teachers to access the resource, catering for teachers’ different learning styles and intelligences. The teachers were encouraged to take from the Resource those parts they felt were useful and to use it in a way that best met their particular requirements.

The self-reflective method chosen to document and evaluate the development of the resource was designed to support teacher’s reflections, encourage deeper thinking and inform the writers on their progress. Three of the teachers kept a detailed journal, supporting their observations of the children’s skill development with anecdotal records, observation records and photographs, and discussing these with colleagues and the project writers. Two other teachers used the journal to a limited extent, but used discussion with their colleagues and with the project writers to articulate their emerging understandings. The two remaining teachers wrote little in their journals but were happy to discuss their experiences with the writers. The combination of information gathering techniques, designed to deepen and enrich the data gathered proved to be useful in ensuring some information was gathered from each of the participating teachers as it catered for their differences in learning styles and intelligences.

Analysis of the information gathered, in Figures 1 and 2 (on pages 44 and 45), shows that the teachers increased their knowledge about, and ways to teach, FMS. There is some evidence, albeit less directly linked to each level of the teaching and learning cycle, that teachers’ confidence increased (Figure 2). There are other factors, however, that are not clearly evidenced by the anecdotal and tabular data.

Suggestions made by the writers for additional ways to develop skills were included in the case stories as they developed. Some of the challenges faced by teachers enabled the writers to develop additional materials for the final resource. Some of the solutions found by the teachers were similarly added to the resource. The resource, as well as the case stories, were thus co-constructed with the case study participants and the writers.

As the project continued and information and reflections were undertaken, it became clear that some teachers had not read much of the materials. One teacher referred to it as ‘the guff’. There was an expectation that the teachers would use the information in the resource to gain knowledge about FMS and the teaching of FMS. Some teachers did not choose to read the ‘guff’, preferring instead to intuit the prerequisite knowledge and to use the ‘tools’ and pro formas without the theoretical background. The role of the writers in providing professional development became important in the process of implementing the resource. Implicit in the documentation of the case stories is the relationship that developed between the writers and the case study participants.

Three examples of the challenges of these implicit assumptions are described here. A skill was chosen that was already achievable by every child in the group, but, because the teacher felt confident to teach it, the writers were faced with a difficult decision. Did they intervene and guide the teacher to a more difficult skill for the children but a more challenging skill to teach and, perhaps, result in the teacher leaving the project altogether? Did the writers leave this story out? Did they change the story and report it differently?

A second challenge came through a teacher providing limited and uninspiring learning experiences for the children that did not extend their skills or challenge them, and resulted in off-task behaviour. The teacher’s immediate solution was to further limit the learning experiences, centering the lessons on whole-group, teacher-directed activities.
A third challenge occurred when observing a teacher implementing experiences in a way that was confusing and overwhelming for the children. The need for the teacher to keep her own energy level up meant that the children were being rushed from one activity to another.

In all of these cases, to report them ‘as they really were’ required documenting, and potentially modelling, poor teaching practice. The writers’ decision was to encourage the teachers within their comfort zones, suggest experiences that would build on the children’s interests and competencies, but extend the repertoire of teaching experiences of the teacher as well as the learning opportunities for the children. In each case, the teachers responded positively to our suggestions and were able to add to them. In effect, we modelled a teaching and learning process we hoped the teachers would enact with their children.

Each of the cases posed a question about the relative importance of knowledge and confidence. The teachers reported that the resource gave them the confidence to teach FMS, but (it seemed to the writers) that their knowledge about FMS remained low. Having the information accessible increased the teachers’ confidence in teaching the skills but, without professional development, their knowledge of FMS and teaching FMS was limited. In the long term, poor experiences can result in reduced participation from the children, more off-task behaviour, and more difficult lessons for the teacher. Would the teacher then turn to the resource for additional information to guide their teaching? Or would they drop the resource altogether? While the writers’ intervention prevented it, the experience of the uptake of a resource suggests that the latter was more likely. In other words, teachers having confidence in their ability to teach FMS might initially trial new experiences. Without the knowledge to support that confidence the learning experiences would not be appropriate, the children’s off-task behaviour would increase, and the teacher’s confidence in their ability to teach FMS would be undermined.

Another teacher reported that her focus on the skill criteria resulted in her ‘screaming skill criteria across the playground’, for example ‘lift your knees up!’. Her philosophy of the importance of play was, for a time, overwhelmed by her new knowledge of the skills she was teaching. Her knowledge and confidence increased for a time. As the children were not incorporating the skills into their play, she realised that teaching the criteria was not enough. Her confidence reduced. Through discussions with colleagues and with the writers, she was able to integrate her new knowledge of FMS with her philosophy of learning.

The teachers indicated an increased level of participation by the children in the learning experiences provided (Hands and Martin, in this issue). In order to maximise the children’s learning, support individual development of skill criteria, and gather information about individual levels of achievement, teachers potentially had to be ‘in more places at once’. The framework for physical activity sessions involved a high level of small-group and individualised instruction. There was generally less whole-class demonstration which involved a teacher demonstrating a skill once to the whole group. Teachers reported demonstrating the skills repeatedly to individuals and small groups.

**Conclusion**

**Teachers’ knowledge of fundamental movement skills**

It is clear that the FMS Teacher Resource supported teachers’ understanding of FMS, the importance of FMS, and different ways of developing a teaching and learning program to incorporate FMS. Part of this knowledge, for some of the teachers, came not from the resource itself but from the professional development provided by the project writers. Written materials alone are insufficient to support all learners.

**Teachers’ levels of confidence**

The FMS Teacher Resource provided the information and security that teachers felt they needed to teach FMS. There is no doubt that their perceived levels of confidence increased. This confidence came, in part, from the teachers’ increased knowledge of FMS. However, for many of the teachers this knowledge came, not from the Resource itself, but from the interchange and relationship with the project writers. Without the professional development support it is possible that the long-term experience may have actually undermined the teachers’ confidence in teaching FMS. As children were more off-task from
experiences that were inappropriate, unchallenging or boring, teachers may have abandoned the FMS program altogether. Extrapolating from this experience, it is clear that there is an important role for professional development in the introduction of the FMS Teacher Resource and the implementation of FMS in the classroom.

References


Table 1  **Context for case study participants**

<table>
<thead>
<tr>
<th>SCHOOL TYPE</th>
<th>Setting</th>
<th>Government</th>
<th>Catholic</th>
<th>Independent</th>
</tr>
</thead>
<tbody>
<tr>
<td>Classroom</td>
<td>Pre-primary</td>
<td></td>
<td></td>
<td>Year One</td>
</tr>
<tr>
<td>Physical education specialist</td>
<td></td>
<td></td>
<td></td>
<td>Year Two</td>
</tr>
<tr>
<td>Children with additional needs</td>
<td>Education Support Centre</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Aboriginal children</td>
<td>Year 3 and 4</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Figure 1  **Changes in teacher knowledge about FMS after implementing the Resource.**
### Figure 2 Changes in teacher confidence about teaching FMS after implementing the Resource.

<table>
<thead>
<tr>
<th>Beth</th>
<th>Sally</th>
<th>Fiona and Jo</th>
<th>Janet</th>
<th>Paul</th>
<th>Gordon</th>
</tr>
</thead>
<tbody>
<tr>
<td>Initial reflection</td>
<td>Children need to focus on body management.</td>
<td>I believe in the value of learning through play.</td>
<td>Experienced classroom teacher. Inexperienced physical activity specialist.</td>
<td>Experienced, dedicated professional.</td>
<td>Previously used a play stations model.</td>
</tr>
<tr>
<td>Journal</td>
<td>Need to individualise assessment methods and develop ways of assessing attitudes</td>
<td>Explored a range of learning experiences. Problem solving helped children think about their skills.</td>
<td>Focused on specific components of the skills. Peer teaching worked well. Different experiences for different levels reflects the reality of classrooms.</td>
<td>Focusing on a few skills gave us an opportunity to really teach and develop skills in detail.</td>
<td>Used the skill criteria as teaching points.</td>
</tr>
<tr>
<td>Case story</td>
<td>I focused on 'How do they do the skill?' Collaboration with the classroom teacher is valuable.</td>
<td>It is important that children use the skill in a meaningful context and learn it for meaningful purposes. It's easy to teach the skills when you know about them.</td>
<td>There are many ways to integrate the FMS into the daily teaching and learning program. FMS can be child-centred.</td>
<td>Resource provided new ideas for learning experiences.</td>
<td>Reducing instruction time enabled increased time for children's activity. Modified the experiences by changing the size of the ball, distance to the target. I have the confidence to say 'Yes, I can teach these children.'</td>
</tr>
<tr>
<td>Final reflection</td>
<td>Three things I found critical to implementation were Daily activity Being experimental Involving the children in the implementation.</td>
<td>I have a better understanding of the techniques/desired movements of particular skills and how to best develop them.</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
### Table 3 Identification of case story themes

<table>
<thead>
<tr>
<th>Knowledge</th>
<th>Confidence</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Linking to children's previous experience</strong></td>
<td>It is important that children use a skill in a meaningful context and learn it for meaningful purposes.</td>
</tr>
<tr>
<td><strong>Outcomes-based education</strong></td>
<td>The Resource provided the proper terminology to put into my program and to describe the movements.</td>
</tr>
<tr>
<td></td>
<td>I made links to the Curriculum Framework.</td>
</tr>
<tr>
<td><strong>Skill descriptions</strong></td>
<td>I have focused on ‘Can they do the skill?’ rather than ‘How do they do the skill?’</td>
</tr>
<tr>
<td></td>
<td>It’s easy to teach the skills when you know about them.</td>
</tr>
<tr>
<td></td>
<td>It was helpful to tell the children exactly what they were doing well.</td>
</tr>
<tr>
<td></td>
<td>Focused on ‘How can I learn to do it better?’</td>
</tr>
<tr>
<td></td>
<td>The Resource made us slow down and focus on individual children and learning points.</td>
</tr>
<tr>
<td></td>
<td>Observation Records provided information about the skill criteria and improved observations, enabled me to pinpoint any difficulties and give immediate feedback.</td>
</tr>
<tr>
<td></td>
<td>Useful to know the criteria for a skill, common errors and teaching strategies.</td>
</tr>
<tr>
<td></td>
<td>Used skill criteria with children in all years of schooling.</td>
</tr>
<tr>
<td><strong>Using the Observation Records</strong></td>
<td>We found ways of gathering information using the Observation Records that made sense to us.</td>
</tr>
<tr>
<td></td>
<td>I was surprised at how little I knew about the children’s movement skills.</td>
</tr>
<tr>
<td></td>
<td>Using the Observation Records while looking at a video of the children’s activity helped me to identify the wide range of skills in the group.</td>
</tr>
<tr>
<td><strong>Importance of participation</strong></td>
<td>I need to focus on having the children actively participate so they can practise a skill.</td>
</tr>
<tr>
<td></td>
<td>Ten in a group meant there was too much waiting around.</td>
</tr>
<tr>
<td></td>
<td>Reducing instruction time enabled increased time for children's activity.</td>
</tr>
<tr>
<td></td>
<td>Many of the kids need more challenges.</td>
</tr>
<tr>
<td><strong>Varied experiences</strong></td>
<td>There are many ways to integrate the FMS into the daily teaching and learning program.</td>
</tr>
<tr>
<td></td>
<td>FMS can be child-centred.</td>
</tr>
<tr>
<td></td>
<td>Problem-solving helped children think about their skills.</td>
</tr>
<tr>
<td></td>
<td>Peer teaching worked well.</td>
</tr>
<tr>
<td></td>
<td>The Resource has made me refocus the way that I teach FMS. It has made me slow down and focus more on individual students and learning points.</td>
</tr>
<tr>
<td></td>
<td>Using the package improved my teaching strategies and knowledge.</td>
</tr>
<tr>
<td><strong>Assessment</strong></td>
<td>I made links to the Curriculum Framework, particularly in concepts for a healthy lifestyle, skills for physical activity and self-management skills.</td>
</tr>
<tr>
<td></td>
<td>Developed other ways of gathering information about children's skills.</td>
</tr>
<tr>
<td></td>
<td>Needed to individualise assessment methods as well as learning experiences.</td>
</tr>
<tr>
<td></td>
<td>Need to develop ways of assessing attitudes as well as skills since attitudes impact on skill performance to a great extent.</td>
</tr>
<tr>
<td><strong>Reporting strategies</strong></td>
<td>Supplemented the reporting format to families with information from the Resource.</td>
</tr>
<tr>
<td><strong>Need for collaboration with other teachers</strong></td>
<td>Collaboration with the classroom teacher is valuable.</td>
</tr>
<tr>
<td><strong>Observation Criteria</strong></td>
<td>The FMS Teacher Resource gives me the confidence to design a program to improve the children's skills.</td>
</tr>
</tbody>
</table>
Introduction

Physical activity is a well-documented and recognised component of a healthy lifestyle and childhood experiences with physical activity have an important impact on lifelong behaviour. Unfortunately, mounting evidence shows children as young as five years are not sufficiently active on a regular basis to develop and maintain health (Armstrong, McManus, Welsman & Kirby, 1996; Poest, Williams, Witt, & Atwood, 1989; Sallis, Patterson, McKenzie & Nader, 1988). Sallis and colleagues, for example, observed 33 preschool children at play for 30 minutes and found that only 11 per cent of that time was spent in vigorous activity. Information about Australian children's physical activity levels is limited, particularly for children under six years. The available evidence is not encouraging. The participation rate of children in organised sport and physical activity ranges from 32 per cent for five-year-olds to 69 per cent for those aged 11 years (ABS, 2000).

Physical activity guidelines recently released (Corbin & Pangrazi, 1998; NASPE, 2002) recommend that all children from birth upwards engage in developmentally-appropriate physical activity. Children in preschool should accumulate at least 60 minutes of structured and between 60 and 180 minutes of unstructured physical activity every day. They should not be sedentary for more than one hour at a time (except when sleeping) and should develop competence in fundamental movement skills (NASPE, 2002). Opinions vary on how this activity should be achieved, however, most agree it should be fun.

Two components to these guidelines are of interest to this paper, the importance of motor skill development and the need for structured activities in early childhood. Children cite low skill level as a major barrier to participation in sport (Booth, Macaskill, McLellan, Phongsavan, Okely, Patterson, Wright, Bauman & Baur, 1997; Ulrich, 1987) and children with low movement competence usually exhibit low physical activity levels (Bouffard, Watkinson, Thompson, Dunn & Romanow, 1996; Butcher & Eaton, 1989). Bouffard and colleagues (1996) noted that children with low motor competence tended to be vigorously active less often, played less on large playground equipment...
and spent less time interacting socially with their peers. Li and Dunham (1993) found that children with high motor competence engaged in moderately vigorous activity 22.3 per cent of lesson time, compared to children with moderate (20.3%) or low competence (17.9%). Some Western Australian research with primary school children showed those with few out of school physical activities had poorer skill competence and endurance fitness (Parker, Larkin, Anderson, Clarke & Smith, 2000). On the other hand, children who are confident about their movement ability actively seek out movement experiences in an assured manner and develop positive expectations about their future participation in games and sports (Kalverboer, 1990). Harter (1978) formalised this in her interactive model of Effectance Motivation. This linked a child's previous attempts at task mastery to their motivation to participate in other activities within that context or domain. Consequently, children who experience difficulty acquiring the level of motor skill expected of them develop poor perceptions of their athletic competence and physical appearance (Causgrove-Dunn & Watkinson, 1994; Rose, Larkin & Berger, 1997). This results in a lack of motivation to participate in challenging activities and a low physical activity level (Rose, Larkin, & Berger, 1998). Consequently, promoting and fostering participation in, and enjoyment of, physical activity, developing movement confidence and skill will enhance participation in physical activity when older.

Teacher-centred interventions or structured activities designed to increase levels of physical activity in five-year-old children are rarely reported, yet we know from many fields that early intervention programs have greater effectiveness than those introduced at a later stage. Children of this age are at the optimal time to develop competent movement skills because their motivation to practise is high, and playfulness, problem-solving and exploration are dominant modes of learning (Branta, Haubenstricker & Seefeldt, 1984; Haubenstricker & Seefeldt, 1986). Movement skills that have not been mastered at an early age may remain unlearned because of the development of bad habits, self-consciousness, or fear of injury (Gallahue, 1996). It follows, therefore, that an intervention to increase physical activity in young children should focus on increasing movement competence, and provide numerous opportunities to practise motor skills in an enjoyable and stimulating environment.

In addition, differences in play patterns can be observed and, where appropriate, alternative choices presented. In general, boys are more active and girls more passive in their play patterns. Stereotypical play choices are reduced when teachers monitor play choices and ensure a range of activities are selected by both girls and boys. Girls choose a greater range of activities when teachers are present, particularly in areas typically dominated by boys (Cullen, 1993).

However, outdoor play time has long been regarded by early childhood teachers as an opportunity for children to freely engage in a range of activities, many of them sedentary. Opportunities for 'guided and self-directed play' are the key objectives (Monighan-Nouror, Scales & Hoorn, 1987). Questions are now being raised about the effectiveness of free play to promote vigorous activity and fitness (Poest, Williams, Witt & Atwood, 1990). Children are not choosing to be sufficiently active during free play sessions to develop FMS or confidence in their ability (Cullen, 1993). More recently, early childhood teachers are including more directed activities into the outdoor time, such as perceptual-motor programs or obstacle courses. However, a greater focus on motor skill development is now recommended.

The purpose of this paper is to present the impact of a teaching program designed to increase motor competency through movement skill teaching on the children's physical activity levels, movement skill and enjoyment of movement.

**Method**

**Participants**

During the development of the Fundamental Movement Skill Teacher Resource (Department of Education, 2001), seven teachers in five different settings were invited to trial draft versions. These teachers were based in a range of early childhood settings: preprimary, primary, special education, government and non-government. They were invited to attend a half-day information session to review the draft document and plan how best to implement it.
Fundamental Movement Skill Teaching and Learning Program

The resource provides a range of different strategies for learning, teaching and assessing fundamental movement skills (FMS) and aims to provide multiple entry points for teachers when planning programs. Over an eight-week time span, the teachers implemented a teaching program that focused on a fundamental movement skill or skills that most suited their context. The experiences of the teachers (Martin & Hands, this issue) and children were monitored by the authors over that time.

The learning and teaching strategies used by the teachers included:

• **Total integration.** Several teachers were able to totally integrate their FMS program into the whole school day. In a preprimary, the children practised their FMS while moving from the mat to the tables and when moving outside to play. During music sessions they practised their FMS and also practised their songs during FMS time. The children wrote stories and painted pictures about their activity sessions. In a primary setting the children practised the arm movement of running when moving back to their working space or playing ‘Follow the Leader’ while moving to other lesson areas. For English some children wrote a list of what a fast runner needs to remember or talked about their strategies for performing a skill. They drew themselves jumping and did paintings and clay models of a proficient thrower. Some children made up a song about their FMS and a dance about their learning in science. The opportunities were endless!

• **Self-observations.** Children were encouraged to look at their running styles by observing their own reflections when practising in front of a large window. Another teacher asked the children to reflect on their learning in oral discussions with the whole group, in paired discussions and in writing.

• **Peer teaching.** Peer teachers focused on their partners’ running style while observing from the front, the side and behind, and then gave feedback.

• **Group discussion.** It was important that the children appreciated why they needed to practise FMS. One teacher noted that many children do not see active adults in their home lives and therefore do not see a reason for practising ways of running fast or throwing a long way. The teachers talked with the children about their focus FMS and asked why people needed to jump, run, or throw well. The children observed that ‘jumping gives you big strong legs’ and ‘a good thrower can throw hard and accurate’.

• **Guided discovery.** A teacher experimented with guided discovery techniques such as running with stiff arms and legs, with flying arms and with folded arms and asking ‘Does this help you fun fast?’

• **Imagery.** When preparing to run, the teacher ‘greased’ each child’s elbows to make sure that they stayed bent. To warm up the arms the children pretended to swim using different techniques.

• **Movement stories.** One teacher adapted the story format used for telling stories in language to tell the story of throwing.

At the beginning we get into a ready position facing the side with our other arm pointing to the target and holding the ball. In the middle we step forward with the opposite foot and bring the ball down and up. At the end we bend our elbow, throw the ball, bring our throwing foot forward and follow through with our shoulders and arms. The short story goes ‘Ready position, step with opposite foot, arms down and up, bend and throw’.

• **Music.** Music is a wonderful way to stimulate learning. The teachers found songs such as ‘The Ants Go Marching One By One’ helped children practise the high knee lift important for running, and ‘Johnny Works With One Hammer’ facilitated the arm movement. A music and movement session moving to Chopin’s ‘Polonaise’ inside prior to the outside activity session gave the children a sense of running quickly, as the music has a very fast beat.

• **Visual Cues.** These can remind the children of the correct movement patterns. For example, children can stand on funny feet cards when throwing, helping them to stand in the correct position. One teacher used emu, kangaroo and dog feet.

**Results**

The teachers gathered information about the children’s learning through a variety of methods such as observational records, photographs and work samples. The depth of information provided varied from case to case, as did the degree to which
the program was implemented (Martin & Hands, this issue). Those teachers who totally integrated the program into the school day reported significantly more improvement in cognitive, psychomotor and affective outcomes for the children. In addition, teacher comments were recorded during their interviews and some are reported in Table 1 (on page 52).

Before and after the trial each teacher was asked to complete a self-reflection sheet. One question asked them to select three children in their class that they considered had different FMS levels of achievement and to rate them before and after across a range of attributes. Every teacher reported noticeable differences in the children’s skill levels, self-confidence and class participation and in most cases a flow over effect into the children’s general level of physical activity in the free play time. Specific comments related to increased enjoyment and involvement in the school athletic carnival, use of a wider repertoire of playground games, improved social interactions, particularly in the playground, and a greater enjoyment of movement in general.

In one preprimary the children answered some simple questions about their attitude towards physical activity and their perceived motor competence. With the support of the teacher, the children selected a happy, neutral, or sad face to indicate their response to simple questions such as When it is time for outdoor play, I am… and When we run, I am… Most children (94%) were positive towards outdoor play-time and playing games, felt they were good at throwing, catching, running and jumping, and felt happy about running. Interestingly, few of the children enjoyed feeling hot and sweaty or the sensation of their heart beating fast.

**Discussion**

The results reported here strongly suggest that the teachers implemented a balanced program that included both prescribed activities and ample time for free play. This balance is important to encourage both appropriate skill development and the children's initiative and spontaneity.

In all settings, the children’s performances of the targeted FMS skills improved. Each teacher felt that the improvement would not have happened without their specific and explicit teaching of the key elements important for the proficient performance of each skill. Simply practising the skill without concern for the proficient form or correct technique does not enhance skill learning (Ashy, Lee, & Landin, 1988). In some cases it may lead to the development and practice of inefficient movement patterns, as young children generally do not distinguish between ‘good at’ and ‘enjoying’ (Cullen, 1993). Scaffolding children’s learning through teacher help and guidance requires an interactive style of teaching, with teachers supporting children’s skill development at the point of need, rather than teaching the same point to the whole group.

Other factors that contribute to children's learning should not be overlooked when interpreting these results. These include the enthusiasm and commitment of the teacher, the variety of teaching strategies included in the school day, the involvement of the children in the planning process, the design and attractiveness of the outdoor play area, and the time spent outdoors. For example, Sallis and colleagues (Sallis, Prochaska & Taylor, 2000) report a 0.74 correlation between the time spent outdoors and young children's physical activity levels. Differences in many of these factors were evident to the researchers when moving between settings.

**Conclusion**

By providing sufficient developmentally-appropriate experiences to learn and practise movement skills, teachers can optimise children's ability to participate in games, sports and other activities when older. Shephard and Godin (1986) found that children who had positive and enjoyable experiences when young were more likely to continue exercise into adulthood. It is important, therefore, that children enjoy their first formal movement experiences. These findings have implications for pre- and in-service education of early childhood and primary teachers.
Teachers need to develop skills in movement observation (Gallahue, 1996) as well as a repertoire of appropriate movement-based learning experiences.

As this paper is based on anecdotal teacher reports, further empirical research is required to clarify the extent to which such movement programs impact on children's skill and physical activity levels.

References


After a few lessons, some of the children could perform one or more new skill criteria. It really made a difference when the class teacher worked on the skills too.

The children's skills improved dramatically in just a few weeks.

After specific teaching the children showed improvements in running technique and speed.

I was particularly aware of the improvement in the skill levels of the fourteen children I had identified as ‘at-risk’.

I noticed a marked improvement in the skills during the games compared to when I first introduced the skills.

I noticed a great improvement in the children's jumping.

### Table 1  Teacher comments for each case story

<table>
<thead>
<tr>
<th>Case Story</th>
<th>Improvement of FMS levels</th>
<th>Physical activity level</th>
<th>Attitude towards PA</th>
</tr>
</thead>
<tbody>
<tr>
<td>Beth</td>
<td>After a few lessons, some of the children could perform one or more new skill criteria. It really made a difference when the class teacher worked on the skills too.</td>
<td>The children needed a time to choose their own level of participation in the playground.</td>
<td>Most were more confident and motivated to do the skill.</td>
</tr>
<tr>
<td>Sally</td>
<td>The children's skills improved dramatically in just a few weeks.</td>
<td>The children spent much more time running and playing chasing games.</td>
<td>My children did really well on sports day. Every time we ran a race they said ‘Let's run again!’</td>
</tr>
<tr>
<td>Fiona and Jo</td>
<td>After specific teaching the children showed improvements in running technique and speed.</td>
<td>As the children's skills improved they became more physically active.</td>
<td>The children became more confident in their movements. Most had renewed focus and determination. The children were most positive about the introduction of the daily activity program.</td>
</tr>
<tr>
<td>Janet</td>
<td>I was particularly aware of the improvement in the skill levels of the fourteen children I had identified as ‘at-risk’.</td>
<td>The independent learning environment helped their skill development because they were able to become more active and interactive with their peers.</td>
<td>The extra time on skill activities increased the children’ enthusiasm and the attitude of the whole class improved tremendously. Another of the more reluctant children came to tell me ‘I have not been well. I made myself come to school because I just love sport!’</td>
</tr>
<tr>
<td>Paul</td>
<td>I noticed a marked improvement in the skills during the games compared to when I first introduced the skills</td>
<td></td>
<td>All of the children improved in their self-confidence, understanding of the game and social interaction.</td>
</tr>
<tr>
<td>Gordon</td>
<td>I noticed a great improvement in the children's jumping.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Introduction

Previous research in Australia and overseas confirms that the care of sick children is a major cause of working parent stress. Licensed providers are governed by state regulations regarding operating procedures and health precautions. Children with acute illnesses usually cannot be sent to child care centres and must be picked up quickly by parents if they develop symptoms while at the centre. Further, employers of parents may be less than sympathetic to absences of employees obliged to take sick children home.

Young children need constant care and close supervision. They may get sick at short notice, disrupting previous institutional child care arrangements, which means a parent must stay home to take care of them. In single-parent homes, or homes in which both parents work, parenting responsibilities may often conflict with employed work responsibilities. Considering the large number of working parents, this is a widespread problem.

Literature review

An early Australian survey (Ochiltree & Greenblat, 1991) revealed that the majority of employed mothers wanted changes in the workplace or their working conditions that would make it easier to care for sick children. Ochiltree and Greenblat (1991) expressed an interest in either some special form of leave or the right to officially take their own sick leave. They also wanted more understanding of their situation from the employer.

The Ochiltree and Greenblat (1991) study was drawn from a total pool of 728 mothers interviewed. Five-hundred-and-ninety-one mothers had been in the paid workforce at some time between the birth of a child and the time that child started school. The 591 mothers were asked several questions about how they had usually cared for their children when they had been sick during working hours. Almost 57 per cent of mothers usually took time off to care for their children if they were sick during their usual working hours. In only seven per cent of cases did the father take time off to care for a sick child. Relatives,
mostly grandmothers, cared for sick children in 17 per cent of cases, and about 15 per cent of children, mostly in informal care, remained in their normal child care arrangements. The decision about who should care for the child often depended on the perceived severity of the illness, whether other carers were available, and sometimes on the amount of personal leave due to the parents. While fathers played some part in the care of sick children, mothers took major responsibility, deciding how ill the child was and making appropriate arrangements.

In 1992, van Eyk (1992) conducted a phone-in to find out from working parents how they coped when their children were sick. The phone-in had 445 (mainly female) callers. Almost all the callers (98.7 %) reported that they had taken leave in the past year to care for a sick child. About three-quarters (72.3 %) had taken one week or less, 15.1% had taken two weeks leave and 12.6 per cent had taken more than two weeks time off. The phone-in revealed that mothers were predominately responsible for the care of children when they were sick and that this unequal burden of care could limit the career choices and opportunities for women.

The most common method of taking time off work to care for a sick child was for workers to use their own sick leave; 43.5 per cent of callers said they had done this. However, when they had used sick leave, over half (53.8 %) the callers said they had not told their employers that they were using it to care for a sick child. Instead, they said that they needed the sick leave because they were unwell.

VandenHeuvel's (1993) results corroborate those of van Eyk (1992). Telephone interviews were conducted with 2 642 employees in Australia. Of the respondents, 1500 had dependent children; many reported they needed to take time off to care for their sick children. When parents were asked if they had needed to send a sick child to school or a child care centre in the previous 12 months, one in seven (15 %) said they had. Mothers (18 %) were more likely to do this than were fathers (7 %), and workers who were single parents (24 %) were more likely to do so than those who were part of a two-income family (14 %). The age of the child also made a difference, with parents of preschoolers (18 %) being more likely than parents of school-aged children (14 %) to send a sick child to child care or school.

The data reveals that 46 per cent of parents reported they had taken days or part-days off work to care for sick children in the 12 months prior to the interview. Consistent with earlier Australian Institute of Family Studies research (Ochiltree & Greenblat, 1991) women were considerably more likely than men to have taken time off work to care for an ill child: over half of mothers (52 %) and just over a third of fathers (36 %) had been absent from work in the previous 12 months to care for a sick child. In a survey called the Australian Living Standards Study, based on 4,567 parents in Melbourne, Sydney and Adelaide, Wolcott and Glezer (1995) reported that in the majority of cases the mother cared for sick children regardless of whether the child was in formal care or informal care. They found fathers usually cared for their sick children in formal care in 11 per cent of the cases and seven per cent of the cases in informal care. Grandparents cared for 12 per cent of sick children in formal care and 16 per cent of those in informal care. When primary-school-aged children were sick, parents, especially mothers, were also the main caretakers. Where both parents worked full-time, 55 per cent of mothers compared with 17 per cent of fathers looked after a sick child. Grandparents cared for sick primary-school children in 13 per cent of cases where both parents worked full-time.

Pocock (2001) conducted a series of focus groups and interviews with 150 women and six men on work and family issues. Care for sick children arose from the comments; it caused mothers tremendous guilt and stress of being both a parent and a paid worker. Pocock noted a great number of women were making use of their own sick leave to care for their unwell children. Furthermore, she confirmed that relatives especially grandparents, are called upon to care for children who are sick.

These extensive Australian surveys have demonstrated a consistent problem with the withdrawal of sick children from paid child care. The purpose of the present study was to determine if the situation has been changed since the popularising of the family-friendly workplace from the early 1990s.
Methodology
This paper is based on a self-completed questionnaire made available at selected child care centres in Sydney. The questionnaire invited additional comments at the end. The sample consisted of 489 largely upper-middle class, working parents with young children. Child care centres in the Sydney metropolitan area facilitated the research by making the survey available to parents picking up their children. Fliers publicising the study were provided to a wide variety of child care centres including: 1) long day care centres (both community-based and private); 2) neighbourhood children's centres, 3) family day care, 4) preschool – full day (9 a.m. -3 p.m.) (both community-based and private), and 5) occasional care centres. Fifteen hundred questionnaires were made available and 32.6 per cent of those sent out to the centres were returned to the reply-paid university address. This paper reports specifically on the responses to questions on who cares for sick children, what sort of leave was taken to care for them, and the general comments at the end of questionnaire that referred to sick children.

A self-report questionnaire was the chosen method for this study as being more acceptable to busy working parents. Hochschild (1989) in a major American study found that dual-career couples who were experiencing a lot of strain from their work-family lives were the very people who could not take the time to be interviewed. In a more recent Australian study Pocock et al. (2001) found similar problems setting up interviews with workers partners—‘their partners are often also very busy with a large domestic and family load’ (p.12). The present study therefore eschewed interviews but provided the opportunity for extended comments.

Findings and discussion
Who cared for sick children
Respondents in the present study were asked to indicate which parent takes time off when their child is sick. Table 1 indicates that in 64 per cent of cases, the mother cared for the sick child and in seven per cent of cases, the father. A major change from previous studies was the high proportion of cases where both parents shared the sick care (28%). A possible explanation for this continued gender imbalance is that whichever parent has the less important job, or the more flexible job, or the more sympathetic boss or supervisor, will stay home (Kahn and Kamerman, 1987). Fathers are more likely than mothers to be working full-time and earn higher wages, while mothers are more likely to be working on a part-time or casual basis (ABS 2000).

Table 1 Which parent cared for sick children (N=489)

<table>
<thead>
<tr>
<th></th>
<th>Mother</th>
<th>Father</th>
<th>Both</th>
<th>Relative</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>63.7%</td>
<td>6.8%</td>
<td>28.0%</td>
<td>1.5%</td>
</tr>
</tbody>
</table>

The phrasing of the question may have tended to emphasise the role of parents as carers, as other surveys tend to report greater participation by relatives.

The qualitative comments suggest that this closed-choice question may have underestimated the role of relatives, possibly because respondents treated the categories as exclusive. In 1999, the ABS Child Care Survey found grandparents were the main providers of informal care, caring for 21 per cent of children and providing more than half of all informal care. Other Australian studies (Wearing & Wearing, 1996, Pocock; 2001, Goodfellow, 2003) also support the importance of relatives, especially grandmothers. These studies suggest how important grandparents are to working mothers, as they take care of sick children while parents are working and when family emergencies arise.

For many mothers, grandparents make the critical difference in a crisis. Typical comments are below:

*I think it is important to whether families where both parents work, have support from extended family e.g. grandparents, aunts or friends. This has been the most important factor for me when I decided to go back to work part-time. I could not do it without their help.*

(Mother with two dependent children);

*If my daughter is sick, we ask Grandma to look after her first, then my husband and his pay is not affected. – Where I can lose up to $250 a day, not being at work. If our daughter was hospitalised then of course the situation would change.*

(Mother with one dependent child)
How workers arranged to take time off for sick children

The types of arrangements used by parents to care for sick children were grouped into five categories: recreation leave, sick leave, unpaid leave, loss of pay/leave, and other. This is shown in Table 2. In this question parents were asked to report all of their arrangements; thus some parents reported using more than one arrangement, resulting in a total in excess of 100 per cent.

Table 2 Arranging time off for sick children
(N= 489)

<table>
<thead>
<tr>
<th>Recreational leave</th>
<th>Sick leave</th>
<th>Unpaid leave</th>
<th>Without pay</th>
<th>Other</th>
</tr>
</thead>
<tbody>
<tr>
<td>8.0%</td>
<td>49.9%</td>
<td>25.5%</td>
<td>17.4%</td>
<td>4.4%</td>
</tr>
</tbody>
</table>

The table indicates sick leave as the most common way that parents coped with care of sick children. These figures are similar to the 1995 Australian Workplace Industrial Relations Survey, in which 43 per cent of employees reported using their own sick leave to take time off work to look after a sick family member (Morehead et al., 1997). The Australian Work and Family Unit recently reported an average of six disrupted days for when child care arrangements break down. These included 3.6 days for sick children, 1.7 days for vacation care and 0.9 for all other failures in child care arrangements (DEWRSB, 2002). This can cause some concern that employees may use all their own sick leave to care for dependents and have no time for their own illnesses.

The comments made by parents reveal the considerable problem that caring for sick children creates. Employees perceived supervisors and organisational attitudes to be unsupportive towards taking leave. Respondents commented:

- Work is not helpful when young babies are sick. I have to take time off using annual leave and my boss is constantly asking when I will be back. Very stressful!!!! (Mother with two dependent children);
- Being in children's services industry, one would presume employers would be more family orientated. However this is not the case. In fact often demands are made to put aside family responsibilities both directly (e.g. not enough leaves to look after sick child or cover such holiday period)? and indirectly (made to participate in extra-curricula activities often outside working hours). High time someone took the initiative to challenge the stereotype in women's rights. (Mother with one dependent child);
- I love my job, but constantly feel torn and feel I am not doing the best job with my children. My workplace is a large hospital and although they say they are family friendly in my position as a manager, my senior manager and fellow managers often make snide comments in regard to taking leave if my children are sick. I think a lot of organisations pay lip service to being family friendly but when it comes to the crunch, they are not. (Mother with two dependent children).

These findings are supported by American research by Hochschild (1997), who revealed that, despite the introduction of family-friendly provisions such as parental leave and flexible hours, many employees were reluctant to take up these arrangements. At an official level, it is hoped family-friendly provisions might support flexible working conditions to suit family needs, and would remove or ameliorate the disadvantages and discrimination that affect certain groups of workers as a result of their caring responsibilities. However, at an unofficial level those who deviate from the traditional patterns are generally defined as less committed, less professional and less worthy of promotion than those who follow conventional work patterns. The qualitative comments by working parents in the present study reveal high levels of dissatisfaction with the present situation regarding the care of sick children. In fact, our research reveals little improvement since the previous major Australian studies.

The difficulties of securing satisfactory care for sick children and responsible balance between work and family were apparent in many replies. Australia has a considerable problem with a falling birth rate. McDonald (2001) has argued that low birth rates are associated with lack of family-friendly work practices. The stress experienced over the failure of institutional child care to provide care for sick children may be a major reason to discourage working parents from having more children.

Conclusion

The present study, like earlier Australian surveys, found inadequate paid child care for sick children. Inadequate and unreliable paid child care which
fails at the first flush or sniffle caused resentment in the workplace and made working mothers in particular feel stressed and guilty. Both working mothers and fathers took time off to care for sick children. However, the mothers were the ones who felt that disruption to their work made others think they were not committed to their careers.

The predictable crises of childhood sickness led to a withdrawal of service provision rather than the development of additional forms of service or integration of services. McDonald (2001) has indicated that gaps in child care lead not to mothers staying home but to decisions to limit family size. If government wants working parents to have more than one child, then it needs to remove this important source of parental stress and guilt by providing a safe, efficient means of sick child care. If firms want to minimise disruption to work, then they too have a role in facilitating services to ensure that workers are not distracted by frequent minor illnesses of their children. As many childhood illnesses are trivial, short-term and self-limiting, commercial solutions to this problem that do not disrupt the parent’s working day could be provided through their child care centre. These could include an isolation room in the child care centre or a roster of designated carers to deliver mildly sick children to relatives, neighbours, or other back-up carers. Further work needs to be done to develop an appropriate and affordable range of services. Child care providers, parents and the children themselves (Farrell, Tayler & Tennent, 2002) need to be consulted about possible service innovations.

References
McDonald, P. (2001). Work-family policies are the right approach to the prevention of very low fertility. People and Place, 9(3), 17–27.

Worms, shadows, and whirlpools is not a book of recipes for ‘doing science’. Rather, this book is about a journey into children’s thinking and teachers’ scaffolding of scientific phenomena. The authors have captured the sense of wonder that children exhibit as they interact with their environment, as well as the powerful learning that is possible when teachers frame their interactions deliberately to create deep-thinking contexts. We have found too often that science learning has been dealt with superficially with many opportunities lost, or science teaching has been about only the teacher’s agenda through the presentation of discrete lessons focused on facts. In this book, the authors have documented a series of science learning experiences from the children’s and teachers’ perspective, as they co-construct learning (see Jordan, 1999).

Although the authors do not cite a plethora of science education research, it is evident that they have drawn upon the constructivist literature in finding out what children know about the topic and what questions they have about the topic. They have then, together with teachers, investigated the answers to these questions. This approach to teaching science is grounded in 20 years of research. The contribution these authors make is the way they have framed this interactive approach to teaching science for very young children. There are many examples of children’s work, photos of children writing and drawing, and displays of projects created by the children. Deep thinking about scientific phenomena is evident throughout the whole book. The book concentrates upon the learning of three to eight year old children within the pedagogy and structure of early childhood education. A separate section at the end of the book examines the role of play in science learning.

The authors have deliberately organised their book around several science journeys in order to examine some important pedagogical ideas: worms, trees, water and whirlpools, blocks, shadows– hence the title! The first part of the book examines the issue of why teach science to young children. This is followed by a more extensive treatment of the content of science education. The authors have provided rich examples of science learning for the areas of life sciences, the physical sciences and Earth and space. The final section in the book discusses some of the frequently asked questions about science education in early childhood, such as ‘What is the role of play in science education?’ or ‘How much science does the teacher need to know?’ This is a very clever approach to dealing with the many pedagogical issues and challenges identified in the research literature surrounding teaching science in early childhood education.

Whilst the authors’ have used a constructivist perspective in presenting rich science experiences, they have not made mention of the growing number of critiques of this theory which are now prevalent within most science education research journals. This is evident in the authors’ lack of foregrounding the cultural construction of science. The approach taken does privilege children from Western communities. Similarly, we know from the cross-cultural research literature a lot more about the range of interactional patterns, and particularly how in some communities ‘asking questions’ is not an appropriate way of framing learning. The broader sociocultural literature has provided us with better understandings for developing different pedagogical approaches and for creating different meanings about scientific phenomena. Whilst cross-cultural research framed from a sociocultural perspective still has a long way to go in the area of science education, the authors’ oversight in mentioning this development is rather disappointing. However, despite this shortcoming, the book will be a welcomed resource for teachers working with children in the three to eight year band.

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