A Helping Hand?
Outside support to enhance physical wellbeing for children in early childhood education

Kirsten Petrie & Jeanette Clarkin-Phillips
Children and Wellbeing

• ECE underpinned by emphasis on play and physical activity (Isenberg and Quisenberry, 2002), with play given status of children’s work (Paley, 2004)

• Developmental, self governance, explorative approaches that are incompatible with physical ‘education’ found in teacher-led or adult-organised activities (Herskind, 2010).

• “In play a child is always above his average age, above his daily behaviour, in play it is as though he were a head taller than himself” (Lev Vygotsky, 1967, p. 16)
Under 5’s at risk?

- Under 5s perceived to be at risk and vulnerable to future ill ‘health’
- It is believed that targeting Under 5s in Early Childhood Education (ECE) centres would be beneficial to reduce obesity rates (Copeland et al, 2011)
- A growing number of fitness and health programmes are being developed for Under 5s in order to ‘Get Them While They’re Young’ and begin civilizing children’s bodies (Shilling, 2004).
- Children Under 5 are positioned as the family health educator.
Questions

1. What is the full extent of physical activity programmes on offer in ECE, and how do these align (or not) with government policies?

2. What does this mean for how early childhood educators may understand and practice ‘health’ education?

3. What impact may ‘structured’ physical activity offerings in centres have on children under the age of 5.
Methodology

- Questionnaire completed by 65 early childhood centres
- Discourse analysis of government policies
- Search for and analysis of external providers within ECE
- Examination of each resource in relation to Te Whāriki
A Dizzying Landscape

Te Whāriki

Food & Nutrition Guidelines

Weight: A Parents Guide

Health Strategy 2016-xxxx

Childhood Obesity Plan

Active Movement
Policy Incoherence

“to grow up as competent and confident learners and communicators, healthy in mind, body, and spirit, secure in their sense of belonging and in the knowledge that they make a valued contribution to society” (MoE, 1996, p.4)

- New Zealand policy documents focus on physical ‘health’ (MoH, 2016) and “self-help and self-care” (MoE, 2007, p.14). In contrast Te Whāriki focuses on confidence, self-worth, empowerment and enjoyment (MoE, 1996)
- A lack of alignment between Te Whāriki and ‘health’ policy documents can create confusion within the ECE setting
External Providers - who?

- ECE is being both privatised and commodified as a result of the confusion generated by the lack of alignment between policy documents and *Te Whāriki.*

- Government ‘sponsered’ organisations in ece. For example: *Get, Set Go; moveMprove; Under 5 Energise*

- Corporate, for profit national/regional initiatives. *MovingSmart, Gyminis, Jiggle Jam, Jumping Beans, Kelly Sports, Sports4tots*

- Local and other initiatives. *Growing sway; Papatuanuku Explorers*
External Providers - influences

- Current and future health
- Pressures on families - limiting opportunities for children
- Open-ended curriculum enables justification of a very broad, loose interpretation. For example: Well-being, Goal 1 is a catch-all for ‘linking’ to whatever providers have to sell.
Broad Implications

• Narrowing of curriculum (intent and focus)... Wellbeing and Exploration strands are replaced by objectives related with narrow policy framed learning outcomes, such as children’s ability to perform specific fundamental or sports skills, or to be able to participate in moderate to vigorous activity for a sustained period of time.

• The nature of the programmes on offer reflect adult-initiated and technicist/policy-driven approaches to play as opposed to child-initiated models.

• *Review of Physical Activity Guidance and Resources for Under Fives* (Ministry of Health, 2015) raises concerns about the subsequent impact on programming and assessment of both children’s learning and a centre’s performance. The review makes age-based recommendations about optimal physical activity, sleep, and sedentary behaviour, which have the potential to reframe curriculum priorities and create a discourse of surveillance and monitoring of individual children.
The implications

• Burrows and Wright (2004) argue that parents have had to “reinvent themselves as ‘experts’ involved in the surveillance, judgment, correction and regulation of children”, we suggest that EC educators have equally been charged with similar responsibilities as children spend more time in ECE. The findings indicate that EC educators feel a responsibility for enhancing pre-schoolers physical health in line with public health discourses.
Children’s Understandings

• There is potential for narrow ideologies of ‘health’ and physical activity to put children’s emotional and social wellbeing at risk.

• Learning learning:
  • what sorts of bodies are valued in society (Cosgriff et al., 2013; Rich, 2010),
  • that fitness equals non-fatness (Powell and Fitzpatrick, 2015),
  • To surveille their bodies and as such we see an increases in reported instances of eating disorders (Pinhas et al., 2013).
  • What counts as phsycial actiivy ... And who is included?

• External providers ….limited opportunities for pre-schoolers to develop holistic understandings of wellbeing.
Acting Professionally

- Need for heightened awareness of the potential pitfalls of positioning Under 5s as responsible for their own and their families wellbeing.

- Ensure all ECE educators (and beginning teachers) made aware of the potential harm to children’s social and emotional wellbeing of physical health ‘initiatives’.

- Alignment in policy documents to ensure a focus on holistic notions of health and wellbeing.
Acting Professionally

• Have professional discussions about how to provide children with opportunities for physical activity that demonstrate the learning outcomes of Exploration, Goal 4 (1996), Goal 3 (2017)

• Seek out professional development opportunities that are ece focused and align with the philosophical underpinnings of Te Whāriki.

• Provide a wide range of resources for children to experience a variety of physical activity opportunities.


