

A UNIQUE CHILD SERIES

Health and Wellbeing

Growing and developing ■ Physical wellbeing ■ Emotional wellbeing

by Anne O'Connor

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SECTION 1: GROWING AND DEVELOPING

Prime areas of the EYFS

Statutory Requirements

1.7 Practitioners must consider the individual needs, interests, and stage of development of each child in their care, and must use this information to plan a challenging and enjoyable experience for each child in all of the areas of learning and development. Practitioners working with the youngest children are expected to focus strongly on the three prime areas, which are the basis for successful learning in the other four (specific) areas.

The PRIME AREAS of early learning as outlined in the EYFS (2012) are:

- physical development
- communication and language development
- personal social and emotional development

An important feature of the prime areas is that they are 'time sensitive'. This means that if they are 'not securely in place between 3-5 years of age, they will be more difficult to acquire and their absence may hold the child back in other areas of learning'. (Moylett and Stewart 2012).

Bruce, Meggitt and Grenier (2010) describe how important it is that children should be 'helped appropriately, at their optimal or best times of development, in a stimulating environment, by people who are sensitive and observant of what an individual child can manage (regardless of norms and average ages for doing things)'.

Sharing concerns with parents

Statutory Requirements

1.7 (continued) But throughout the early years, if a child's progress in any prime area gives cause for concern, practitioners must discuss this with the child's parents and/or carers and agree how to support the child. Practitioners must consider whether a child may have a special educational need or disability which requires specialist support. They should link with, and help families to access, relevant services from other agencies as appropriate.

Good communication with parents helps to make sure that the best use is made of these optimal times and that the individual child's unique progress is understood

and appreciated. Any concerns can then be comfortably shared between parent and practitioner and careful monitoring will ensure that concerns continue to be addressed. Ideally, a good relationship between a child's key people and the parent(s) means that there will already be an atmosphere of trust and familiarity, so that sensitive issues can be explored informally and in a relaxed way, when they meet regularly.

Sometimes, however, you may have to raise concerns with a parent you do not know very well, particularly in the early days of a key person relationship. (See more about the key person approach in Section 3.)

Ask yourself first, how **you** would want to be treated in the same situation. Be aware of the courtesy and consideration you would hope for and be sensitive to the parent's situation. They may already be feeling anxious and insecure and a challenge about their child's development may make them react defensively or even aggressively. Encouraging them to talk about their child, sharing positive strengths and achievements, opens the way for a more comfortable conversation.

- If English is not their first language then find an interpreter wherever possible, but make sure that they are aware of the need to engage the parent



in tactful, diplomatic and above all, confidential conversation about their child.

- Remind the parent(s) that you value their perspective and want to work with them in helping their child make good progress and development.
- If the parent continues to find it hard to accept your concerns, you may want to direct them to a local parent support /parent partnership agency while you work with the SENCo to address the child's needs.
- Remember that a child's health and wellbeing is inextricably linked with that of their parents' and a stressed, angry or anxious parent is not in the best position to help their child.
- However, you also have a responsibility to use your professional judgement in the best interests of the child and a parent may not always agree with you.

If you are concerned about a child's development and progress, always gather observations and additional evidence as well as seeking advice from managers, childminder support officers, SENCo and other professionals within local children service teams, the health service or where relevant, voluntary organisations and agencies.

Measuring and assessing growth and development

There are now formal ways of sharing progress with parents/ carers at different stages in the EYFS. Currently, the Progress Check at Two focuses on the Prime areas and the EYFS Profile is completed at the end of the Early Years Foundation Stage before a child transfers to Y1.

The Progress Check at Two

Statutory Requirements

2.3 When a child is aged between two and three, practitioners must review their progress, and provide parents and/or carers with a short written summary of their child's development in the prime areas.

There is no prescribed format for the written summary of the Progress Check at Two. The National Children's Bureau has produced guidance which includes examples of formats and case studies. The key principles describe how the check:

- should be completed by a practitioner who knows the child well and works directly with them in



the setting. This should normally be the child's key person;

- arises from the ongoing observational assessments carried out as part of everyday practice in the setting;
- is based on skills, knowledge, understanding and behaviour that the child demonstrates consistently and independently;
- takes account of the views and contributions of parents;
- takes into account the views of other practitioners and, where relevant, other professionals working with the child;
- enables children to contribute actively to the process.

From *A Know How Guide: The EYFS Progress Check at Age Two* (March 2012).

These are important principles to ensure that the check and the methods by which it is completed do not have a negative impact on the wellbeing of children and their families.

In particular, they promote the concept of 'listening to children' and valuing their contributions to the process.

SECTION 2: PHYSICAL WELLBEING

months of life. The best way for this to happen is through lots of spontaneous, natural physical activity, usually when being held or lying on backs or tummies. Unlike most baby animals, baby humans can't get up and stand on their feet and walk around straight away. Ideally, we spend our first twelve months (or so) being held and cuddled, rocked and dandled as well as lying on our tummies and backs with our legs and arms free to kick and wave. Then we learn to roll over and start to creep and crawl before we pull ourselves up and start to toddle about and begin to walk. Walking is seen as a very important milestone in a baby's life, but in truth, it is the activity that happens before walking that is hugely important in our physical development, and is particularly significant in the inhibition of those primitive reflexes.

Creeping and crawling

The interaction with the ground or other flat surfaces, when they are playing on their backs or tummies allows many of the opportunities babies and children need to inhibit their primary reflexes.

For most babies, after they have managed to roll over, there is a period of time when they begin to pull themselves along the floor, first with their bellies low down and then up on their hands and knees (or feet). This process is more than just an 'in between' stage before walking begins. It is a vital part of early physical growth and has an important part to play in many aspects of a child's development, including neurological, visual, co-ordination and spatial development. In the 'Well-Balanced Child' (2005) Sally Goddard Blythe also suggests that the early physical development of infants matches our understanding of evolutionary development. As well as providing a blue print for the development of locomotion, the theory also emphasises the importance of each one of these early stages as more than just a stepping stone on the way to the ultimate goal of walking.

First, the child is in a fish-like state in the womb, then a 'reptilian' stage when they begin creeping on their tummies and raising their heads, followed by the 'mammalian' stage of crawling around on hands and knees/feet. Once they begin pulling themselves up to stand and cruise round the furniture, or walk holding someone's hands, they are at the 'primate' stage where their arms and hands are still fundamental to their mobility, before finally they reach the 'human' bipedal stage where they can move speedily in a variety of ways leaving their hands free to do other things at the same time.

Tummy time

Time spent on the tummy is really beneficial to babies and young children. Just a few carefully supervised minutes on a lap, a blanket on the floor or even outdoors on the grass

in good weather, is the first step to an important physical development 'workout' that has many long term benefits.

Time on the tummy:

- helps lengthen the spine and develop the neck muscles
- expands the chest cavity, allowing for deeper breathing
- allows weight bearing through the hands which develops a full palm stretch – important for finger dexterity, strength of grip and fine motor skills
- encourages close range eye focusing
- decreases primitive reflexes that tie head movement to whole body movement
- helps body alignment by freeing the head to move separately from the body
- begins to develop movement across the mid-line of the body, which create the cross-lateral connections thought to be important for higher level thinking and memory skills.

Racing to walk

Typically, children begin to walk anytime between 9 and 15 months. There have always been children who are early walkers, and it is human nature to encourage and applaud the moment a child begins to walk. It is seen as a major milestone in a child's life, is often recorded and is a question regularly asked in infant health checks. We know that delayed walking might be an indicator of problems with development, though not always. But we also have evidence now to suggest that some children who walk early and miss out on crawling may have later difficulties with some aspects of co-ordination (such as understanding left and right); visual difficulties (copying from a board); and other neurological issues that can interfere with cognitive development. This is not to suggest that children should be prevented from walking early or made to crawl when they are reluctant but as Sally Goddard Blythe (2005) reminds us, 'The important point is to allow your baby to experience as wide a range of movements as possible; to enjoy and value each stage of development as it occurs'.

Why might children miss out on some of these neurophysiological stages?

There are a variety of reasons why children might spend less time on their backs or tummies, or crawling around on the floor in the way they have done in the past.



1. A change in the way we move babies around

Think about how much time a baby or small child is likely to spend in a baby seat of one form or another – in a car/ at home or strapped into a buggy. There are good safety reasons for these obviously, and for car seats in particular, but today's lifestyle often means that children spend a lot of time in them, even staying in the car seat when they are transferred indoors. Buggies are undeniably more convenient, but they don't provide the opportunities to lie down in the way that old-style prams did. It is unrealistic to think that we should turn back time, but we must be aware of the implications of progress in 'transporting' children around. We need to consider how we can make up for the amount of time children spend sitting curled in a 'c' shape rather than being carried in loving arms or lying on their backs, kicking and wriggling on the floor or in a pram.

2. A reluctance to put babies on their tummies

As a result of new awareness of the potential causes of Sudden Infant Death Syndrome (SIDS) parents are advised not to let their babies sleep on their tummies. This seems to have led to generalised public anxiety about putting babies on their fronts at other times when they are awake. This has meant that babies and young children are missing out on valuable time spent (supervised) on their tummies, strengthening their neck and arm muscles, opening their

chest space and developing both long and close vision as they look first at the floor and then out in front of them.

Some babies and children don't like being put on their tummies so parents are reluctant to try. It is important to be sensitive to what the individual child can handle, but there are safe and gentle ways to make the sensation more fun and enjoyable, gradually building up their tolerance.

3. Adult attitudes to risk

In these health and safety conscious times, some children have become more restricted in their play experiences tending to spend more time indoors watching TV and playing screen based games. They have fewer opportunities for rough and tumble games and for playing outdoors, stretching, climbing, rolling and sliding etc.

Why does it matter?

Statutory Requirements

The moving and handling aspect of the ELG for Physical development requires that: children show good control and co-ordination in large and small movements. They move confidently in a range of ways, safely negotiating space. They handle equipment and tools effectively, including pencils for writing. (EYFS Framework 2012).

A study of reception age children in Sutton Coldfield in 2012 was the first to measure foundation stage children's neuromotor skills against their performance at school. Its findings were that children who struggle to sit still or hold a pencil, may not have fully completed steps in their neurophysiological development as babies (www.open-doors-therapy.co.uk).

It seems there 'are children who are 5 year olds on the outside, but three year olds in terms of their motor skills'. (Goddard Blythe, 2011). This has a major impact, not only on the health and wellbeing of the individual child, but also to generations of children whose potential is being compromised by cultural and lifestyle changes. What makes it worse is that these children are prematurely deemed to be 'failing' and 'unready' for school when, more often than not, they have been denied the physical experiences necessary to develop the required motor skills. This has a knock on effect on their self esteem, their confidence and ultimately their sense of wellbeing. Research by early years movement specialists, Jabadao, over a ten year period is beginning to show the positive impact of movement activity on children's emotional wellbeing.