Play and Learn for Inclusion - an Experience to Share

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Abstract. Inclusion and play were analyzed in the European project in which we take a part and we considered that it will be an interesting thing to share this experience with the others. Intending to create networks, establishing common concepts and implementing seminars was demanded careful planning to be worthwhile. All case studies included aspects of the individual child’s micro, micro and macro-experiences, such as interests, characteristics, family and local provision in an early years context. All three case studies had the same four questions for participants to respond to, aiming to provoke discussion and reflection on a range of issues related to play and inclusive practice. The participants were early years practitioners and specialists from kindergartens and schools, mostly women, from Sibiu city and also Sibiu County. Overall there were 92 participants in addition to six facilitators who were academic staff from ‘Lucian Blaga’ University of Sibiu. The link between school, family and community is currently a very weak one and has to be encouraged; a community presence in school is almost nonexistent. Measures for inclusion in education that have been taken so far are not sufficiently articulated, indicating that there is not yet a unitary vision and coherent approach for all levels of education and all types of learners. Outdoor play is also a challenge for most of the kindergartens, because they are not suitably equipped for promoting children’s outside play.

Keywords: inclusion, play, child care, interventions, context

INTRODUCTION

Notions of ‘inclusion’ and ‘play’ in early years childcare and education are contestable, uncertain and create challenges for those who work with children and their families. In addition, it is recognised that a well qualified children’s workforce promotes inclusive learning for children. However, variations exist in how inclusion and play are constructed by early years practitioners within and across European countries and beyond (Organisation for Economic Co-operation and Development, OECD 2006). Such variations arise from social, cultural, political and historical landscapes specific to each country, but each country faces common challenges in terms of sharing professional expertise and making space for debates about ‘inclusion’ and ‘play’. The aims of the PLEYIn project intended to create such spaces for communities of early years practitioners with the needs of all children and their families in mind.

MATERIALS AND METHODS

Four partners contributed to the formulation of the bid to the Leonardo da Vinci Lifelong Learning Programme for Partnership funding for a two year project from 2009-2011. The partners were the Lucian Blaga University of Sibiu, Romania, the County Inspectorate for Education, Sibiu, Romania (silent partner), the College of Humanities and Economics in Sieradz, Poland and Newman University College (NUC), Birmingham, UK. The PLEYIn
The project co-ordinator had also undertaken a ‘Preparatory Visit’ to Sibiu in October 2009 to explore project proposals. The final partner for the project, the College of Humanities and Economics in Sieradz, was located through Leonardo LLP partner search facilities. Email communication between partners established common interests and shared expertise in the field of early years care and education, play and inclusion.

The aims of the PLEYIn project were:

• to create networks of early years practitioners across partner countries sharing vocational experiences and education opportunities
• to identify and develop practice focused strategies that are play based and designed to include all children and families within the communities where practitioners work
• to establish common concepts of inclusive learning through play
• to share and develop skills and expertise through training seminars
• to promote the use of sustainable resources available in the communities where practitioners are located, whether in rural or urban areas
• to undertake research and dissemination activities nationally and internationally in order to share and evaluate the partnership project.

RESULTS AND DISCUSSION

The project team has been successful in achieving most of these aims, but they were ambitious. Creating networks, establishing common concepts and implementing seminars demanded careful planning to be worthwhile for participants. The project team had to be realistic in what it could achieve with the resources available. The planning of this research design began months before the delivery of the first seminar, and one of the tasks was to prepare the case studies. Romania and Poland teams employed real life case studies and the England team constructed a hypothetical one. All case studies included aspects of the individual child’s micro, micro and macro-experiences, such as interests, characteristics, family and local provision in an early years context. All three case studies had the same four questions for participants to respond to, aiming to provoke discussion and reflection on a range of issues related to play and inclusive practice (see Appendix 1-4). Seminar participants in all the three countries received the case studies, the questions and a policy background describing the local context for each country prior to the event in order to familiarize themselves with the materials.

In Romania, the participants were early years practitioners and specialists from kindergartens and schools, mostly women, from Sibiu city and also Sibiu County. Overall there were 92 participants in addition to six facilitators who were academic staff from ‘Lucian Blaga’ University of Sibiu. The groups were different for each of the two days of the seminar. Participants in the first seminar consisted of teachers and managers from Sibiu County kindergartens. Participants in the second seminar were specialists involved in inclusive practice such as psychologists, speech therapists and support teachers. A reminder about confidentiality was also provided by discussion group seminar facilitators at the beginning and end of each discussion group. Video footage was only made available to the research team. The research team members had the responsibility to ensure the safety and protection of the data files. All the reporting activities of the research ensure anonymity and confidentiality (actual names are not used, either of adults, children or families).

In Romania, the seminar delivery produced more than nine hours of audio-video data for analysis and also written data on flipchart sheets. The audio-video data was transcribed, resulting in a significant amount of written material. The transcribing process respected
categories such educators/specialists, countries and the case study questions. The categories provided independent variables for comparing the data. The main method used for analysing the data from the Romanian seminar was qualitative content analysis (Babbie 1992; Mayring 2000; Ritchie and Lewis 2003; Pope Ziebland and Mays 2000), a method for inductively exploring the data in order 'to generate categories and explanations on social phenomena’ (Pope et al., 2000). Key Points:

- Ten main codes emerged from the Romanian seminars: family, interventions, practitioners, child, inclusive education, education, community, resources, collaboration/network and play
- There were different rank orders for teachers and for specialists in each of these ten codes.
- Different discourses were used by participants when addressing different themes of the case studies.
- More theoretical and professional language was evident in the debate within the education and inclusive education themes than for other themes.
- There was no recognition of benefits brought about by collaborative work within formal local networks of practitioners and parents for facilitating inclusion
- Similarly, there were no references to communities of practice among practitioners working in the field of inclusion
- Play does not feature in discussion about inclusion.

CONCLUSIONS

An inclusive culture has to be developed in Romanian schools in order to be more responsive to diversity. The link between school, family and community is currently a very weak one and has to be encouraged; a community presence in school is almost nonexistent. Measures for inclusion in education that have been taken so far are not sufficiently articulated, indicating that there is not yet a unitary vision and coherent approach for all levels of education and all types of learners. There is not adequate focus on addressing the needs and reducing marginalization of some vulnerable categories of children such as street children, criminal offenders and children from isolated areas. Finally, it is worth returning to play at this point and its role in inclusive education practice in Romania. Official documents (curriculum, syllabus, etc) as well as teachers and parents recognised the value of play in early years practice, and that play is the main activity enabling children to learn and to develop. Nevertheless, the traditional model of play in kindergarten is a structured one: often children play at their table, drawing or colouring, or with table games. The assumption for kindergarten practitioners is that structured play is more valuable than unstructured play. The layout of the classroom does not allow children to explore all types of play. Outdoor play is also a challenge for most of the kindergartens, because they are not suitably equipped for promoting children’s outside play.

Appendix 1

A CHILD BORN IN AFGHANISTAN: HASSAN’S STORY

Hassan is four years old. He lives with his parents and younger sister aged eighteen months in one room in private rented accommodation in a suburb on the outskirts of Birmingham. There is a possibility that they may move to another area in the city in the near future. They arrived in England a year ago as asylum seekers from Babaji in Afghanistan. Both parents are well qualified, experienced teachers. The family was initially refused leave to
remain in the UK but with help from the Refugee Council, they are pursuing an appeal and hope to achieve refugee status. The family fled conflict in their home town where they experienced persecution and violence. Some of their family had already been killed and others had disappeared. The region had suffered bombing for a several months and most of the infrastructure had been destroyed. Hassan has been attending a local nursery school for four months within a well established Children’s Centre (CC). The setting has a parent partnership policy and values the relationship with all parents. There are no other children from an Afghan background. He speaks fluent Pushtu and his parents have communicated via a translator that he has very good use of his home language and is developing well. They have explained to early years practitioners in the nursery that he relates well to his sister. His parents use picture books and activities that they are able to borrow from the CC toy library. Both parents would like to become volunteers in the setting and are awaiting the outcome of a Criminal Records Bureau (CRB) check. Hassan enjoys creative activities but finds other parts of the routine and curriculum very challenging. He refuses to participate in group activities and prefers solitary play. He can be very disruptive and sometimes violent towards his peers. Staff are concerned that he may therefore have emerging behavioural difficulties and, in consultation with Hassan’s parents, staff are now initiating the process of the Early Years Action stage of the SEN Code of Practice in order to address his individual needs. Recently the family has experienced several racist comments from the local community and there is an active British National Party presence in the area.

Appendix 2

A CHILD BORN IN POLAND: DOMINIK’S STORY

Dominik is the youngest of four children in this family. Dominik’s sister is 8 years old. Her name is Agnieszka. She has special educational needs and attends a special school. Agnieszka has some mobility difficulties so her mother travels to school with her. They travel by public transport and have to take two buses to get there, and two buses back. When the weather conditions are bad, Agnieszka doesn’t go to school. Dominik’s other siblings are twins. They are 6 years old and they started to attend the nearest public school last September. Dominik stays at home because his parents are not able to pay for nursery education. Dominik’s parents each have secondary education qualifications. His father worked as a worker in a textile factory, which was closed down. Since then he hasn’t found permanent work. He takes up some physical casual jobs, which are illegal with no registration and without benefits. He has no rights to unemployment benefit. He also has had alcohol problems since he lost his job. Dominik’s mother worked as kitchen assistant in a nursery, which was privatized and she lost her job because of staff redundancies. Then she worked as a cleaner in a public hospital, where she was also made redundant. She has rights to unemployment benefit. Dominik’s mother attends meetings for unemployed women but this has not yet helped her to get a job. When she goes to school with Agnieszka, she takes Dominik with her or he stays at home with their neighbor, an elderly lady. The family income comes from the mother’s unemployment benefit, the benefit for a disabled child, some welfare benefits, and other profits from Dominik’s father’s casual work. Dominik’s siblings have lunch provided, as do all children who go to school. This is financed by the social welfare system. Dominik and his parents are provided with free meals from Caritas (a charity organization supporting poor people run by the church). Dominik is often ill. He is susceptible to infections of the upper respiratory tract. He is smaller and thinner than his peers. He has a speech defect and occlusive abnormality. However, he isn’t under the control of a specialist. Local children in
Dominik’s neighbourhood have access to a local day-care room after lessons (for 3-4 hours per day). This place is situated near the church and it is the best place for children to learn and play together. They do not have conditions to do this at home which is why they spend so much time there. What is more, they get some help to do the homework, and they also have a hot meal. This provision is free of charge, but the conditions and quality are not as good as they should be. The environmental day-care room takes care of children with a variety of educational, social and emotional needs. There is only one person to take care of those children each session. There are also students, who work as volunteers. Dominik’s mother struggles with staying at home and not working; in fact she is on the verge of depression. Her husband doesn’t help her run the house. Because of the difficulties they are facing, Dominik’s parents focus on current daily problems such as housing, heating and feeding and clothing their children. They live day by day and have difficulty planning for their and their children’s future. The family lives in an old industrial part of an average size city. The district is known as a very poor and quite dangerous part of the city. Children often play on the streets or among devastated buildings. This is a typical family for this part of the city.

Appendix 3

A CHILD BORN IN ROMANIA: MARIA’S STORY

Maria was born in Medias, Sibiu County, on March, 2003. Her mother, Claudia, had a normal pregnancy and delivery. There are not many things known about her family, because at present, Maria is raised by a foster mother named Marilena. She is now living in Sibiu, and has no relationship with her biological mother. Marilena, raises Maria by herself (she is not married), in a climate characterized by rigidity and a well defined system of rules. Marilena’s financial situation is satisfactory and she receives monthly a payment for caring after Maria. The psychologist that sees Maria considers that the level of her integration in the foster family is average. Maria was diagnosed in early childhood with epilepsy, hyperkinetic disorder, and mild mental retardation (the WISC-R test shows that her mental age is five). She has medical treatment for her epilepsy –as well as vitamins. Once a year, Maria goes at the Neuropsychiatry Department of Children’s Hospital for a psychological evaluation and other tests (EEG, blood tests). Every year she has been reassessed, a disability certificate has been issued. Maria goes to a regular kindergarten in Sibiu, in a school-preparatory class. Maria came to this kindergarten when she was two years and eight months old, and according to her foster mother, she was pretty much “a wild child”, but now is a quiet girl. Her group is formed of 24 children and most of them will go to school this September. Her two teachers try to differentiate work as much as possible with Maria, in order to adapt curriculum contents to her capacity. Maria often refuses to participate in tasks carried out with the whole group of children, therefore the teachers are compelled to find other activities to involve her. She has been seen drawing, whilst the other children were working in their notebooks, doing graphics or mathematical exercises. She shows restlessness during cognitive activities that require focused attention. In the past Maria has had difficulties to adjust to the social environment, but currently she has good social skills and she is integrated in her group. Her care takers consider that her development is good. She demonstrates acceptable, good behavior; she is communicative and friendly. Maria usually has a cheerful and optimistic attitude. She is more easily motivated by external stimuli, in particular by material rewards. She is very interested in free creative games and entertainment activities. She is very affectionate towards her teachers and other care persons in kindergarten. The psychological assessment states that Maria has difficulties in defining simple concepts (like “family”, “house”, etc.) and in
determining the concepts’ similarities and differences. She can make classification of objects based on simple criteria (shape, size or color), showing her low ability to make abstract operations. She also has an unsystematic, low-capacity and mechanical memory. She has difficulties in voluntarily maintaining and focusing attention for longer periods of time. Maria is right handed, oriented in the physical environment, but has difficulties in graphic orientation (on paper). Her time orientation is satisfactory. In September, Maria will enter the Special School for children with disabilities, as their care takers (the physician and psychologist) consider she cannot cope with the requirements of a regular school.

**Appendix 4**

**Questions for all case studies**

- What are your concerns about this child and his circumstances (risk factors)? Consider what might be contributing to your concerns for the child and their family in terms of inclusion / exclusion from access to support, education, well-being and so on.
- Can you identify some aspects of this case study that indicate areas for development (protective factors) to help improve inclusion and facilitate resilience?
- What are the responsibilities of Early Years/kindergarten practitioners in relation to supporting the needs of this child and family and why?
- Are there wider implications for practitioners in terms of further reading and research, pedagogical practice, liaising with other agencies, curriculum, routine, policies and resources?

**REFERENCES**