

Research Note

## Who Sleeps at Playcentre? Examining the Role of Early Childhood Regulations

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### Abstract

*In 2006 the Wellington Playcentre Association collected data from its member centres about the sleep requirements of enrolled children in order to respond to the Ministry of Education's draft criteria for the revision of the 1998 early childhood regulations. Early childhood regulations have the potential to provide agreed minimum conditions across early childhood services. However if any regulation is formulated without an information base on the needs and experiences of children in different early childhood services regulations may overburden services or have unintended negative consequences. This paper outlines the research undertaken and uses the findings to initiate a discussion about the roles of government and centre communities.*

**Key Words:** Regulations; standards; sleep; quality

### Background

Continual lobbying by the early childhood community in the 1980s led to dramatic changes in the sector and a significant increase in government interest and financial investment (May 2001). Significant events included:

- The transfer of responsibility for childcare services from the Department of Social Welfare to the Department of Education in 1986, joining kindergartens and playcentres as 'education' services.
- The shift to a three year integrated diploma for early childhood teaching in both childcare and kindergarten services, further emphasising the educational purpose of all services, and,
- The introduction in 1990 of new early childhood regulations which applied to childcare, kindergarten and playcentre services and replaced the previous separate regulations of each service type (Ministry of Education, 1991).

In 2004, the Ministry of Education undertook a review of the early childhood regulations as part of the implementation of the Government's 10-year strategic plan for early childhood. The purpose of the regulation review was to "further improve the quality of ECE" and "signal a change to the system of regulations, to make it more integrated" (Ministry of Education, 2004, p. 5). The new regulations were to be broad in scope with published 'criteria' providing greater detail for each service type.

In respect to sleep space, the 1998 regulations had stipulated that there be "adequate space and facilities, to the satisfaction of the Secretary" (Education (Early Childhood Centres)

Regulations 1998, p. 14). The proposed criteria, released in 2006, were more specific about what constitutes adequate space and facilities. The criteria specified that full-day centres must have a room available, separate to any activity space, containing one cot, bed or mattress for every two children under age two. Sessional centres must have a designated space available at any time children under two years are attending. This space must be such that fluctuations in noise, light and heating can be minimised, and contain one cot, bed or mattress for every four children aged under two (Ministry of Education, 2006).

The proposed criteria for sleeping children in sessional centres appear to be based on the requirements for full-day services. Further, no distinction is made for differences in the hours that different sessional services may operate or whether children's parents are present. Playcentres are treated the same as other sessional services. Playcentres operate 2½ hour sessions and all children aged less than 2½ years must attend with their parent or other usual caregiver (such as a grandparent or nanny). Playcentre philosophy includes a belief that an infant/toddler who has his/her parent present is best able to engage in learning. The parent is able to closely monitor and provide for their child's needs for stimulation, comfort, food and rest, in a way that cannot be matched by an employee. In contrast other sessional services operate sessions up to four hours in duration, parents are not expected to be present, and one staff member can have as many as five under-twos to care for.

It is government policy that all early childhood centres should provide sleep space for children, but the extent to which this is necessary in a playcentre environment where parents are present and sessions are only 2½ hours long remains an open question. To investigate this question the Wellington Playcentre Association undertook a survey of its playcentres. The survey and its findings are explained below.

## **Method**

In considering the likely impact of the draft criteria, the Wellington Playcentre Association sought to answer the question: What are the sleep needs of children attending Playcentre sessions? The instrument used was a self-reporting survey of sleep patterns in the 21 centres of the Association. Centres were asked to record the time, place and duration of all sleep events over a nine week period during term three, 2006. Detailed instructions and forms to collect the data were circulated to centre representatives, and a face to face meeting held before the beginning of term. Follow-up phone calls were made at the start of the collection period and after one month to encourage up-take, answer questions about the survey, and encourage ongoing participation.

Seventeen out of the 21 playcentres returned sleep survey forms (81% return rate). The centres completed the survey for an average of 8.5 weeks (range 6–10). The number of sessions per week offered by the 17 centres ranged from two to eight. In total 747 sessions were run by the centres during the weeks that they recorded sleep events for the study.

## **Results**

At the time of the survey 263 children under two years were enrolled at the 17 participating centres. This was made up of 81 children aged 0-12 months, and 182 children aged 12-24 months. These 263 children attended a total of 314 sessions per week (220 children attended Playcentre once per week, 35 attended Playcentre twice per week and eight attended Playcentre three times per week): an average of 1.19 sessions per child per week. Thus, there was a total of 2669 sessions for under two-year-old children during the period of the survey. The total number of sleep events over all 17 centres for the period was 361. This was made

up of 332 occasions where a 0-12 month old slept, 28 occasions where a 12-24 month old slept, and one occasion where a child older than two years slept.

The total number of sessions which were attended by infants aged 0-12 months during the period of the survey was 819. These infants experienced 332 sleep events. Therefore, during the sleep survey, 40% of infants attending playcentre had a sleep. In centres where cots were available, parents often chose not to use them. For example, parents allowed their infants to continue sleeping in their pram after arriving at the centre, infants also slept in front-packs or in their parent's arms. A comment returned by a supervisor involved with recording the sleep data gives insight into a reason for the low use of provided cots: "the babies sleeping in their mothers' arms on the session were not only benefiting the baby's development, they were also moments to treasure."

The total number of sessions attended by toddlers aged 12-24 months during the period was 1850. These children experienced 28 sleep events. Therefore, 1.5% of children aged between 12 and 24 months slept at a playcentre during the period. These children made up 70% of the total of under two-year-olds. In total 13.5% of children under-two years slept at some point during their playcentre session.

TABLE 1. Sleep Events as a Percentage of Attendance

Age Group	No. Children	No. Sessions	Sleep Events	Percentage
0-12 months	81	819	332	40.0%
12-24 months	182	1850	28	1.5%
Total	263	2669	360	13.5%

## Discussion

It is government policy that all early childhood centres should provide sleep space for children, but the findings of this survey indicate that for Wellington playcentres at least the proposed requirements for sleep are unnecessary. The nature of the playcentre environment and the needs and experiences of children do not appear to be reflected in the sleep requirement. In a playcentre environment parents of infants and toddlers are present and sessions are only 2½ hours long.

The results of the Wellington Playcentre Association survey were presented to the Ministry of Education as part of a submission on the Draft Criteria. The Ministry has since reduced the number of cots required in sessional centres to one cot for every five under-two-year-olds (instead of one cot for every four). This highlights a weakness of a regulatory approach to quality that is based on inadequate information to begin with about the needs and experiences of children in different services. The making of good regulations should not be reliant on submissions and lobbying by early childhood service providers after their formulation. It also highlights that the current system of regulation for early childhood services continues to have little flexibility and fails to address the fact that in Wellington playcentres at least, 12-24 month old toddlers rarely sleep during session. A cot for every four or five under-two-years olds will incur purchase costs and take up needed play space for children with seemingly no benefits for children.

Since the mid 1990s, reviewers of early childhood research have pointed to the need to recognise the subjective nature of the concept of quality (Elfer & Wedge, 1996; Farquhar, 1993, 1999). Different communities and families place value on different factors or have specific circumstances or needs for their children. Viewing quality as the achievement of standards is a very limited approach focused on the quality of provision rather than quality for children and families (Farquhar, 1999). The survey finding that under-twos attended an average of one session a week suggests that parents used playcentre to complement the education provided at home. It seems that parents wanted their young child to be involved in the session and mostly timed their attendance for when their child was or would be awake.

If the centres surveyed provided sleep space to the level expected it is doubtful given the data that children would experience any improvement in quality. Providing separate sleep space to the level expected by the draft criteria would be likely to negatively impact on the amount of space available for children's play and interactions with each other and with their parents. In this example of sleep space, a blanket approach across all service types to regulation can not serve children well.

An alternative approach would be for regulations to specify outcomes which would be expected. An example relevant to sleeping children could be: the centre provides for restful sleep for those children who require it. Regulations could also specify criteria which would automatically be deemed to meet the outcomes. This is a 'safe harbour' approach to regulations (Commerce Commission, 2004). If a centre believes it could achieve the outcome from the regulations in a different way, it would discuss this with education officials and implement a plan which was more suited to its children and families. This involves what Dahlberg and Moss (2005) call an ethic of care, where communities take responsibility for decisions which will best care for their needs and those of their children, rather than relying exclusively on codes or laws. This approach assumes the practice of communal decision making within the centre, and education authorities who are genuinely open to dialogue.

## **Conclusion**

Government regulations in the early childhood sector can play an important role in setting minimum standards. But regulation is not an adequate way of achieving quality for families and children since criteria for regulations seem determined (in this case sleeping requirements in Wellington playcentres) on an inadequate information base about local communities, the values of families and needs of enrolled children. One way that flexibility for differences and needs could be reflected within regulations would be to adopt a 'safe harbour' approach. This provides agreed conditions which will meet regulated outcomes and also allows centre communities to discuss and agree on alternative ways to provide for the outcomes for their children. The role of education authorities should be to listen to and question centre communities, forming an ongoing dialogue in a climate of trust. Thus, unintended outcomes of strictly applied sleep regulations, such as a reduction of play space for children in playcentres or parents being made to feel that they should put their sleeping infant in the supplied cot instead of holding him/her, could be avoided.

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