# Children's Well-Being

A selective review of the contribution of Workplace Wellness in ECEC

*George Brown Summer Institute - June 05, 2015*

Focus for Presentation

1.  To briefly synthesize key issues in children's well-being and how it is affected by relational and systemic factors

2.  To explore the relationship between well-being for ECEC practitioners and children's well-being

A selective review of the literature

# Operationalizing Well-Being

Physical and mental health - self-care, sense of self, self-regulation
(HDLH, 2013)

Language and access to culture
(Ball & Moselle, 2013)

Material well-being, health and safety, education, behaviours and risks, and housing/environment (UNICEF, 2013)

Well-being and well-becoming

## Well-Being Framework

Paradigms of children's well-being: children's rights, ecological, developmental, and self-assessed (Ben-Arieh, 2008; Lee, 2014)

Child outcomes (physical, cognitive, psychological, emotional, and social), and children's contexts (schools, neighbourhoods, peers, and relations) as a framework for well-being (Lee, 2014)

Extend the framework to include the well-being of the service delivery infrastructure (i.e. ECE's) as a core component of child outcomes

# The Global Context

✤ A UNICEF report (2013) comparing the well-being of children in developed countries ranked Canada 17th overall - in the bottom half of countries

✤ The highest rated dimensions were environment and housing (ranked 11), and the worst were health and safety (ranked 27th - only Latvia and Romania were lower)

✤ Lower investment rates in Canada, and high cost of entry - one of the most expensive globally - between 18% to 42% of average family net income (Cleveland, Forer, & Hyatt, 2008)

# The Local Context

Nearly one third of Toronto's children live in low-income families - one of the highest in Canada (CAST, 2014)

Children in lower SES homes are less ready to transition to school (City of Toronto), have less access to nutritious food, and opportunities for recreation (Mikkonen & Raphael, 2010), and may be more likely to experience incidents of violence and maltreatment (Eckenrode, Smith, McCarthy, & Dineen, 2014)

Massive wait lists for childcare subsidy and enrolment - most barriers for those would might benefit the most from ECEC (Janus & Duku, 2007)

# The Relational Dimension

The child as the nucleus of a relational, cultural and social system - each of which informs elements of his/her well-being

Children need healthy adults in order to thrive

| Phys. Health | • maternal health during prenatal<br>• postnatal sensitivity and nutrition |
|---|---|
| Mental Health | • maternal depression and lbw/ptb<br>• psychological well-being and attachment |
| Relationships | • experiences with domestic violence limit parenting ability |

# Children's Well-being

Vulnerability and potential throughout the course of development

Neurobiological and physiological sensitive periods inform the nature of the risk

A protracted period of development results in the need for focused, deliberate and nurturing care

Stability - early experiences inform later outcomes

## Early Childhood and Well-Being

PTB children are particularly vulnerable to negative effects stemming from suboptimal nutrition, especially males (Embleton, Shamir, Turck, & Philip, 2013; Lucas et al., 1998)

Access to nutrition is particularly important during the first 24 months of life - supplementation has less of an effect as children grow older (Walker et al., 2011)

Children who are securely attached to a parent/guardian are more resilient when challenged, develop better relationships with peers, demonstrate higher levels of empathy, are more confident in themselves (Malekpour, 2007)

<u>Self-Regulation</u>

Early self-regulation skills are some of the most robust predictors of indicators of well-being, include positive social relationships with peers (Rhoades, Greenberg, & Domitrovitch, 2009), and academic achievement  (Duncan et al., 2007; Romano, Babchishin, Pagani, & Kohen, 2010)

Self-regulation can be targeted through effective early pedagogy (Blair & Raver, 2014; Diamond & Lee, 2011)

Supports both short and long-term well-being (Moffitt et al., 2010)

## Play and Well-Being

Prosocial peer play as a protective factor for academic difficulties in low SES children (Bulotsy-Shearer et al., 2012)

Although play produces positive feelings that counteract stress (Wang & Aamodt, 2012), physiological/psychological needs may hinder play (Burghardt, 2012)

It has been observed that play is more prevalent when children experience stability in their environment (MacMillan, Ohan, Cherian, & Mutch, 2015)

Children with experiences of maltreatment have been observed to engage in less play, and more likely to engage in play that is immature (Alessandri, 1991)

## Culture and Identity

Children have better outcomes when they are able to access their culture

Newcomer children can feel the tension between multi-layers of culture - that in their host country and that in their country of origin (Fazel, Reed, Panter-Brick, & Stein, 2011) - aligning with both can be protective against the stress of acculturation

Culture and language as core aspects of well-being for Indigenous children - Aboriginal Head Start and positive outcomes for children and parents (Nguyen, 2011)

# A Healthy Workforce

ECEC practitioners are uniquely positioned to support children's wellbeing through day-to-day interactions, assessment, screening, and referral - evidence of long-term benefits, especially for males (Campbell et al., 2014; Reynolds et al., 2011)

Quality matters - effective practice requires employees who are healthy

Evidence of high turnover rate in the sector, attributed to low-compensation and workplace conditions (Porter, 2012), feelings of happiness, lower education levels, poor supervisory relationship, displeasure with work environment, and low motivation (Wells, 2014)

## Workplace Stress

Some evidence that ECE's experience high levels of stress (Doherty, Friendly, & Beach, 2003)

Stress can impair the health of the employee - sleep disturbance, physical and psychological exhaustion, and health problems (Faulkner, Gerstenblatt, Lee, Vallejo, & Travis, 2014)

It can also negative affect day to day practice (Li Grinning et al., 2010; Whitaker, Dearth-Wesley, & Gooze, 2015)

A moderate amount of stress can facilitate practice, but high and low levels can have negative consequences (Friedman-Krauss, Raver, Morris, & Jones, 2014)

Personal Stressors:
- children
- relationship
- community
- conflict management approach

Workplace Stress

Organizational Stressors:
- full-time status
- perceptions of respect
- perceptions of control
- job security
- consistency of exhaustion
- job satisfaction

Wagner et al., 2012

Time Pressures:
- documentation
- competing demands/tasks
- load on the employee role

Children's Needs:
- managing behaviour
- providing adequate level of attention
- dealing with sick children

Non-Teaching Tasks
- purchasing supplies
- report writing
- pd/education upgrade
- health and safety

Align Practice with Philosophy
- meeting program expectations
- interruptions to programming
- pressure to target all dimensions
of development

Kelly & Berthelesen, 1995

Personal Needs:
- home-based stressors
- hectic personal routines
- physical and psychological exhaustion

Parent Issues:
- misunderstanding of employee role
- lack of understanding about program
- finding time to communicate with parent

Interpersonal Relationships:
- managing post-secondary students
- sharing workloads with other staff

Perceptions About ECEC:
- lack of integration with other institutions
- lower perceived status than other employees

Kelly & Berthelesen, 1995

## Children's Behaviours and Stress

Children's externalizing behaviours predict stress levels and classroom climate (Friedman-Krauss et al., 2014)

Low social skills and disrespectfulness associated with elevated stress (Hastings & Bham, 2003)

Misalignment between expectations and behaviour (Split, Kooman, & Thijs, 2011)

Organizational expectations for behaviour (Pattinson, Staton, Smith, Sinclair, & Thorpe, 2011)

## ECEC and Status

Lack of status between fields, and lack of status within the field, and lack of status from the public (Faulkner et al., 2014; Kelly & Berthelesen, 1995; Wagner et al., 2012)

Low-wages as a marker of value and status - a significant factor for employee turnover and retention (Hossain, Noll, & Barboza, 2012; Porter, 2012)

Median Canadian ECE income in 2005 was $20,155 (Child Care Human Resources Council, 2009) - in 2014 average annual income was $25,800 (Service Canada, 2015)

Associated with levels of motivation (First Call BC Child and Youth Advisory Committee, 2007)

Workplace Wellness Programs

Investing in workplace wellness has a high return on investment (Baicker, Cutler, & Song, 2010)

Health assessment surveys help target the nature of the wellness program (Baicker et al., 2010)

Six pillars of employee wellness programs (Berry, Mirabito, & Baun, 2010):
- multilevel leadership (i.e. wellness champions)
- alignment (i.e. a cultural shift towards wellness)
- scope, relevance, and quality (i.e. holistic understanding of well-being)
- accessibility (i.e. facilitating wellness activities)
- partnerships (i.e. with external resources/services)
- communication (i.e. providing information about wellness)

## Exploring Self-Efficacy

One personal construct that interacts with stress is self-efficacy (Skaalvik & Skaalvik, 2010; Tschannen-Moran & Hoy, 2007) - low self-efficacy contributes to greater feelings of stress, and higher efficacy provides a buffer (Schwarzer & Halllum, 2008)

Self-efficacy relates to feelings of achievement, competence, and control over practice (Hakanen, Bakker, & Schaufeli, 2006) - is a factor for delivering programming and implementing new practices and interventions (Heo, Cheatham, Hemmeter, & Noh, 2014)

Efficacy associated with educator motivation (Coladarci, 1992) and burnout (Schwarzer & Hallum, 2008)

Self-Efficacy in the Workplace

For newer staff, having a strong network and supportive work context associated with greater levels of self-efficacy (Tschannen-Moran & Hoy, 2007)

Self-efficacy and the availability of resources (Skaalvik & Skaalvik, 2010)

Collective efficacy (the belief that the team is able to be successful in its goals) associated with individual efficacy beliefs (Goddard & Goddard, 2001) - sets norms for practice (Skaalvik & Skaalvik, 2010)

Barriers to self-efficacy include how much autonomy is provided, how much time is available for tasks, and the quality of the relationship between employee and parent (Skaalvik & Skaalvik, 2010)

## Professional Development

Professional Development for practice and as a strategy to prevent burnout - access to PD as an indicator of quality (Cleveland, Forer, & Hyatt, 2008)

Can help to build skills to facilitate practice, or directly target health and wellness of employee (Arnett, 1989; Bloom & Shearer, 1992; Hamre, et al., 2012)

The role of coaching and with PD - Chicago School Readiness Program

Barriers to benefitting from professional development include perceptions about usefulness, compensation, and time (First Call BC Child and Youth Advisory Committee, 2007)

# Question

How is well-being promoted in your workplace?

Thank you