

*EARLY CHILDHOOD EDUCATION  
FOR CHILDREN 0 – 3 YEARS OLD IN  
EUROPE*



Organisation Mondiale pour l'Éducation Préscolaire

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## Introduction

In the Spring of 2004 a letter was sent from Ingrid Pramling Samuelsson, Swedish OMEP, to OMEP National Committees in all European countries. The aim of this letter was to collect data regarding the youngest children's (Birth to three) situation within early childhood education. The two aspects of ECE that we wanted answers to were: 1) Facts and figures about policy and reality for children under the age of three and ECE; 2) A description of interesting research or development work carried out in each country within ECE for infants and toddlers. Up to now, January 2005, ten countries have sent in their answers. These countries are: Bulgaria, Czech republic, Denmark, Finland, France, Iceland, Norway, Sweden, Switzerland and The United Kingdom.

We would like to thank all countries which have provided information for this report. Some countries, however, have not answered the second question about research or development work. The reason for that may be either that there is nothing to report, or it may be too much work to find out.

From the texts, we have received in Europe, we can see that good quality early childhood education for children under three is not a priority phase. Very few countries have a system of parental leave on an acceptable financial level and for a more extended time of infancy. But the most interesting questions arising from the texts are the question about childhood, whether it is a private or a societal issue? What is the perspective of young children's capabilities or needs? Are young children's lives a question of care or education, and what does it mean to integrate both aspects in everyday life? Are young children's first years of life a question of play or learning, or what does it mean to integrate them both in practice?

In a given society or culture the way we think about young children's start in life is visible in the kind of provision we offer, but it is also apparent in the educational level of the staff working with the children under three. Do they have any specific training at all or are they all University educated teachers? Is it only the leaders responsible for a day-care who have a University degree or are the most qualified staff actually working with the children?

From the texts of the European countries it also became obvious that there is very little research of relevance for this age-group. In some countries people from the psychology departments of higher education are the ones who still carry out research about young children, although research on young children viewed from a perspective of early childhood education slowly begins to appear. We are, however, happy to present some examples of great relevance to the topic of infants and toddlers on this web platform. There is also a special issue of International Journal of Early Childhood (Vol 36, No 2) on this topic.

Ingrid Pramling Samuelsson

President of the Swedish OMEP committee

# EARLY CHILDHOOD EDUCATION FOR CHILDREN 0-3 YEARS OLD IN BULGARIA

## 1. Organization and statistical data

According to the latest statistical data of 2001 year, in Bulgaria the number of children under the age of 4 years has reached 321,191; among them, the number of children who are till one year of age is 66358. The boys are 165,076 and the girls are 156,115, of them, those who live in the cities are 224,739 and the rest live in the villages.

The maternity leave, guaranteed by the law, is for 135 days; 45 of them are before delivery. The sum of money, paid for each delivery is 200 levas which are given initially and then monthly, 18 levas are granted as a help for each child in the family, depending on family earnings.

Helping the families with children under the age of 3 years is organized into 630 child care crèches with a total of 21174 places and 21167 children, during the year 2001.

In urban areas 514 crèches are organized for 19035 children, and 116 crèches for 2139 children in the rural areas.

The crèches in Bulgaria are of two types: daily (for 19853 children) and weekly, with sleeping accommodation (for groups with 1321 places). All these are under the leadership of the Ministry of Public Health.

Every crèche has one teacher, who organizes, makes the plan and controls the educational activities, but the implementation is performed by special nurses. The director of the crèche is a matron, who is authorized to accept children from the early age of 6 months till 3 years old. Their admission is undertaken when they are able to walk. The educational performances are run according to a special programme of educational activities, specially designed for children under 3 years of age (approved by the Ministry of Science and Education and is seconded by the Ministry of Public Health in the year 1995).

The evaluation of a child's development is performed according to the Bulgarian method of B. Manova-Tomova for the children of 1-3 years old.

There are medico-social institutions (homes) for children, and they are also under the leadership of the Ministry of Public Health. Such homes have children – orphans, and those from families with many children. Some children are accepted for educational care only, but there are others who are adopted.

In Bulgaria there are 32 such homes with 4720 children. The director of every home is a physician by profession; nurses are the working staff, but the educational hours are performed by a teacher. Each child is assessed by a psychologist and, in addition, there are working Kino therapists.

Two sections are present in each home; one for healthy children and the other for children who are suffering from severe anomalies and malformations. At present, a reformation procedure is running and the accentuation is directed toward these activities, which are aimed at the social development of all children.

Since the second half of the twentieth century, in Bulgaria, scientific researches are working in the field of: Pedagogy and Psychology in early childhood, Organizational work for children in crèches and Homes for Medico-Social Care of children.

Preliminarily these researches are performed by specialists in the section “Psychological development and education of children till the age of 3 years; these are continued till the year 1992 in the National Institute of Pediatrics, and later in the Centre of Hygiene, Medical Ecology and Dietary.

## 2. Investigations and publications

### *The question which are studied are:*

Emotional development, Speech, Socialization, Thinking, Memory, Cognition of Space, Games, Skill craft among children till the age of 3 years. Also are questions studied on dealing with the social development of children, who are under the medico social care in certain “homes” established for such purposes. Different conditions are studied on the educational standards in different children’s institutions (crèches and “homes” for medico-social care – their” influence on child development.

### *The following scientific literature are published in Bulgaria:*

- Psychology and education for sick children (1966.)
- Difficult Children to Teach and Educate (1971)
- Psychological rehabilitation of disturbed behavior, during childhood (1976)
- The Nurse, an educator in the crèche (1981)
- Psychology and Pedagogy of Early Childhood (1987), (1991).
- Care for Small Child. (1981), (1984), (1993), (2000), (2003).
- A program for educational work with children till 3 years of age. (1996)
- Influence though interactivity- hand book for pedagogues in crèches. (1995).
- Psycho diagnosis in early childhood (1999). Care for Children at the Age of 0 – 3 Years in the Czech Republic.

# EARLY CHILDHOOD EDUCATION FOR CHILDREN 0-3 YEARS OLD IN THE CZECH REPUBLIC (CR)

## 1. Facts and figures about policy and reality for children under the age of three and ECE (early childhood education)

*What kind of state support is there for families with young children (parental leave etc.)?*

At present, the state social policy in the Czech Republic (CR), in relation to youngest children and their families, is at the beginning of discussions on how to link together, in the best way possible, the interests of the youngest children with the interests of the family, particularly the mother. It means a new assessment (reassessment) of the philosophical and political bases on which the social and family policy in the CR has been founded from the early 1990s.

Let us proceed, in a simplified form, from three main strategies of social policy in relation to family, namely the following ones:

1. *market-oriented strategy*: it puts the accent on the role of the market and earned incomes, and, on the contrary, minimizes the provisions for the family and its support, the family can manage by itself, the state only helps to find a solution to extreme cases; it is perceived as a means of individual's self-realisation and of a variety of family forms, all this by emphasizing the wide range of choices that the family have available,
2. *general support of family*: it lays emphasis on the strengthening of marriage and family's cohesiveness, upbringing of the child within the family, which is achieved particularly by means of child benefits and tax allowances connected with the upbringing of children and with the absence of the woman's economic activity, and by means of public institutions providing day care for older children – nursery schools, here the most significant differences occur in the inequalities of incomes between men and women (that, by the way, are considerable also in our country – they amount to one fifth of the man's income),
3. *support of double income*: it aims at the equalization of chances for men and women on the labour market, makes it possible also for the man to share the duties connected with the upbringing, but in particular it provides public care for and education of children – by means of public day care (and also residential) institutions for both

youngest and older children, a well-paid and comparatively long parental leave, in the course of which the man and the woman take turns.

We can say that the current policy in the CR is in principle a combination of the first two strategies. Especially from the beginning of the 90's one can notice a tendency towards the market-oriented type of family policy (at least in the argumentation leading to strengthening of everyone's responsibility for himself/herself, and in the system of family benefits).

Besides, however, elements of the traditional model of the general support of family also become evident: maternity grant increase, increase and, in particular, extension of the period of parental allowances payment from 3 to 4 years of age of the child (maternity or parental leave) the purpose of which is to make it possible for the woman (or the man, as the case may be) to leave the labour market for a comparatively long time<sup>1</sup>. In connection with this, also the number of crèches has been radically reduced. Nursery schools, after a slight decrease rather during the first half of the 90's, remained preserved in the main. At present, if their number is being reduced, then it is not caused by the parents' lack of interest nor by a reduced financial support provided by communities or by the State, but it is resulting from the current demographical development. Recently, however, there emerges a growing problem of poverty of children in young families, particularly the poverty of families with three and more children.

*Now then, what is the message that the present-day young families with children get?*

The family itself has to care for its children in the long term, namely to a growing extent by work on the labour market. The society will intervene in those cases where there will be a danger of poverty and privations, but it will help only to a limited extent. Woman can stay outside the labour market for a comparatively long time<sup>2</sup> if she has young children, and can devote herself to the care for the children, but under all circumstances it is better for her to dwell in wedlock. But one cannot count on a significant support in getting housing or in the compensation of the expenses connected with the upbringing of children.

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<sup>1</sup> According to the surveys of public opinion (ISSP), the Czech population prefers this traditional model, which is obviously also one of the reasons why there is not a higher demand for crèches. Besides, the Czechs also prefer the traditional division of roles in the family, the traditional division of duties and responsibilities in the family. They do see woman or her role first of all in giving birth to children (her life cannot be fulfilled without it).

<sup>2</sup> Exact data are the following: Parental leave of 28 weeks, paid at 69 % earnings + 4 year (until 4th birthday) parental leave at flat-rate.

### *What is the actual result of this approach?*

The participation of young women - mothers in the labour market has not decreased too much compared with the 80's. On the other hand, the women's fertility and the number of children born have dropped drastically. The consequences of the low birth rate, and of the ageing of population connected with it, have begun to show themselves. As it seems, only these are the impulses the Czech Government is ready to begin to deal with seriously.

### *How large percentage of children under the age of three is in ECE?*

Before the year 1989, approximately 20% of children were cared for in crèches. After the social changes, there was a radical abandonment of the idea of public care for the youngest children and, on the contrary, there was a tendency towards the traditional conception „it is best for the child to be at home with his/her own mother“ and so the crèches were closed down on a large scale. Together with the decreasing parents' interest in these institutions and together with the falling birth rate it has resulted in the present situation which is the following: At present there are 58 crèches<sup>3</sup> in the whole CR, which means that they are able to admit only a few per thousand children of the respective age. Just as an illustration: There are only three crèches in a city that has a population of 450 000 (Brno).

### *What kind of and what quality of ECE?*

The main argument of the opponents to the public care for young children is their pointing out to the low quality of crèches. Memories of the generation that was brought up in the „socialist“ crèches are really sad. This opinion still prevails among both the Czech public and the politicians, and unfortunately the structure of the current (public) crèches still rather corresponds to the old model.

### *The preschool teachers or providers, who are they?*

The nurses at the crèches are trained child nurses who finished a four-years secondary school of nursing. Within the scope of their studies they also study the subjects pedagogy and psychology.

## **2. A description of interesting research or development work carried out in the Czech Republic within ECE for infants and toddlers.**

In the preceding section we tried to record the relevant data about ECE in the CR and particularly their political background and interpretations. If there is a need for

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<sup>3</sup> According to the data provided by the Ministry of Health of the CR because this particular Ministry is in charge of the crèches (unlike the nursery schools that fall within the competence of the Ministry of Education, Youth and Sports).

something at the moment, then it is the empirical proofs of the benefits and risks<sup>4</sup> of the respective solutions for the child's development, acquired by research. Such research in an integral form is lacking. Which, of course, does not mean that partial research probes are not existing.

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<sup>4</sup> Health care for the young children still keeps at a high level in the CR.

# EARLY CHILDHOOD EDUCATION FOR CHILDREN 0-3 YEARS OLD IN DENMARK

## Information on Facts and Figures of Infants and Toddlers in Denmark

### *Definition:*

Nursery Centers (vuggestuer): i.e. creches, infant-toddler center for 0-2 years

Age-integrated institutions (0-5 års institutioner, børnehuse): i.e. a mixture of creche and kindergarten covering 0-5 years

Family day-care: Child-minding in private homes but public run and supervised

### *Parental Leave:*

Parents have a global right to maternity, paternity and parental leave.

For mothers the leave is 4 weeks before birth and at least 32 weeks after. Some mothers in special jobs can get 8 weeks before birth. Most mothers have full payment as part of the collective agreements and if not, they will get 340 Dkr a week from the society. Fathers have a right to 2 weeks leave also paid or reimbursed from the society.

The parents can divide a further paid leave period of 6 months after own decision until the child is 9 years old. Most parents do use the majority of this extra leave after the first 32 weeks period. So most children do not attend child care centers before the age of 9-12 months.

### *Grants for families with children:*

All families becomes automatically a grant of 1.760 Dkr a year for each child during the first 3 years. After that the grant is reduced 10% and again reduced further at 7 years and ceases, when the child is 18 years.

### *Regulation:*

Services for infants and toddlers are under the supervision of the social authorities and at the national level by the Ministry of Social Affairs. The services are part of the Act on Social Service.

Thus the services for infants and toddlers is seen as a social service and not as an educational service. The same applies to kindergartens.

*Numbers of Infants and Toddlers in Nursery Centers, Age-integrated 0-5 institutions and Family Day-care (2003):*

18.995 children at nursery centers

20.896 children at age-integrated 0-5 years institutions

70.970 children at family day-care

*Private Centers:*

Only very few exist at all and thus they are receiving very few infants and toddlers.

*Provision for 0-2 years (2003):*

79%

Though quite high there still exists a need for more services for this age group.

*Numbers of Nursery Centers (2003):*

539

*Child - Adult ratio (2003):*

3,4 children for each staff member

*Percentage of female and male trained staff in Nursery Centers (2003):*

98% females

2% males

*Average Fees for Nursery Centers and Family Day-care (2003):*

280 Dkr for nursery centers and 350 Dkr for family day-care

*Curriculum issues:*

The Danish Parliament passed March 2004 an act on Pedagogical Curriculum in Early Childhood Education (Nursery Centers, Age-integrated 0-5 years institutions, Kindergartens). From August 2004 these centers have to set up a Pedagogical Curriculum for every single institution including Family Day-care as well as private institutions.

## Information on Research on Infants and Toddlers in Denmark

In general almost no research is carried out in the field of infants and toddlers. Much more can be found in the kindergarten field.

Some investigations has been made of more quantitative nature as well as developmental work in the nursery centers.

The colleges for pedagogues is now organized as partners of the Centres for Higher Education, together with the colleges for teacher training. These Centres carry out research and developmental work and relate these activities to the training of the students as well as to the nursery centers, kindergartens and other institutions for children and young people.

Most of the work carried out in this field has been of descriptive sort or child care center based.

Recently a more global research project has been launched with several universities involved, focusing on a longitudinal study of children's childhood from birth onwards. Dion Sommer from Aarhus University is one of the researchers involved and the first results has been published. The study focusses on the rearing within the family, discussing among others issues the psycho-social inheritance and why some children seem to overcome problematic psycho-social conditions.<sup>5</sup>

Also the Danish National Institute of Social Research is involved in this project including 5.000 young children.<sup>6</sup>

The former Danish National Institute for Educational Research (now a part of the Danish University of Education) carried through a study on care in nursery centers and kindergartens at the beginning of the 1990'ies. The concept of care was discussed and the study showed that not all nursery centres managed to offer good, high quality care.<sup>7</sup>

Later (1999) another study on children's first attendance at nursery centers discussed the effect on children by being separated and the potential by attending nursery centers. Important for a positive care and development is how the pedagogue (teacher) receives the child, the awareness of the child's needs for emotional contact, for being active and being together with other children in the nursery center.<sup>8</sup>

## Some remarks on the need of research

There is a change in the attitude to children from being research objects to becoming individuals informers and co-researchers. The child's perspective, commitment and participation are key words in research and developmental work of to day.

Very interesting there is a growing awareness in research etc. of fathers attachment to their infants.

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<sup>5</sup> Dion Sommer: At blive en person, 2001. ISBN 87-412-2598-8

<sup>6</sup> www.sfi.dk

<sup>7</sup> S. Thyssen, A. Diderichsen, A. Jacobi: Omsorg for de 2-6 årige, DPI, 1991

<sup>8</sup> J.C. Jørgensen, S. Thyssen: Barnets første tid i vuggestuen, DPI, 1991. ISBN 87-7416-3574

There is a general need for a coordination and collecting of research in a common database. A study is carried out at the University of Copenhagen.

Too there is a need for research in the field of immigrant infants and toddlers.



# CHILDREN 0 – 3 IN FINLAND

## Organisation and facts

Children start school at the age of 7; therefore we usually look at the age group 0-6 as an entity. Also the system of service and support for small children and their families is administrated mostly by the social welfare and health care authorities.

The proportion of the population made up of children under school age has been in continuous decline in recent years. In 2002, children 0-6 years accounted for less than a tenth (7,75%) of the total population - and children 0-3 years 4,34 % of the total population. The birth rate is expected to decline still further.

## Parents have right and responsibility

Early childhood education means children's educational interaction in different settings with the aim of fostering the child's healthy growth, development and learning. The primary right and responsibility for nurturing and educating children lies with their parents – and public early childhood education services merely support the work carried out by parents at home. Parents select the early childhood education services they require for their children.

## Services

Society provides support to help parent take care of newborn babies and small children themselves at home. The system support includes maternity, paternity and parental leave and allowances and care leave. Families can receive home care allowance for taking care of their children at home until the youngest child in the family reaches the age of three.

Almost all families use the services provided by prenatal and child health clinics. In recent years, the clinics have focused particularly on parenthood and psychosocial development of children. Clinic staff is expected to discuss with parents about the early childhood education services available in the municipality and the opportunities these provide for fostering children's well-being in co-operation with their parents.

Under the law on children's day care at the end of the period of parental allowance parents are entitled to a place for the child in municipal day care centre or in supervised family day care until the child goes to school.

As an alternative to home care allowance and municipal day care, families have the option of arranging private day care for their children with the support of statutory private child care allowance. However, only 2 % of children (both in age up 0-3 and 0-6) use this private child care allowance.

## Early childhood education

Publicly provided and supervised early childhood education comprises an integrated package of care, nurture and education. It involves systematic, goal directed interaction in which free play is the key element. It is rooted in a holistic view of children's growth, development and learning based on a broad spectrum of multidisciplinary knowledge and research and expertise in the methods of early childhood education.

A national plan for early childhood education is accepted. This plan will steer content development for early childhood education throughout Finland and for all children under school age, also 0-3 year olds. This plan will increase quality equality between municipalities and between the various units providing early childhood education within individual municipalities.

The national plan for early childhood education defines the values, function and objectives of early childhood education, the concept of the child and learning to be applied in early childhood education, what constitutes a good educational and learning environment, the methods and operating modes of early childhood education, the importance of the different activities of early childhood education to the well-being of the child, and the provisions for monitoring and assessing activities.

The national plan for early childhood education serves as the basis for municipal plans and for plans at both unit level and the level of the individual child.

## Corner stones

The Finnish early childhood education is based on the United Nations Convention on the Rights of the Child, constitutional provisions on fundamental rights and other national legislation.

Fundamental to the success of early childhood education is dialogue and educational partnership between children, staff and parents.

## Staff

Day care staff for Finnish children comes from diverse educational backgrounds. However the occupational diversity has not been a disadvantage; instead, multidisciplinary character enables activities conforming to the educate –philosophy.

The know-how of each occupation is used in co-operation in order to achieve the educational objectives of day care.

Almost all Finnish staff has received training for their work that has prepared them for early childhood education and care. The training aims at internalisation of children's growth and development and the activities to support them.

### **Staff to children ratio**

In each day care centre at least every third person operating in care and education assignments must have professional qualifications conforming to the Degree on the Professional Qualifications of Social Welfare Personnel i.e. a post-secondary level qualification. Other people with care and education duties must have an upper secondary level qualification.

According to the Degree, there must be at least one trained member of staff to a maximum of seven children who have reached the age of three. For younger children there must be at least one person with vocational education to a maximum of four children.

Early childhood education and the Finnish service and support system for families with children in an attachment.

Forms of day care for children aged under 3 is in an attachment.

### **References:**

Government Resolution Concerning the National Policy Definition on Early Childhood Education and Care. Helsinki: Ministry of Social Affairs and Health, 2003.

Early Childhood Education and Care Policy in Finland. Helsinki: Ministry of Social Affairs and Health, 2001.

# ACCOMPAGNEMENT LÉGISLATIF ET SOCIAL DE LA MÈRE ET DU JEUNE ENFANT EN FRANCE

## Historique

La protection et l'accompagnement du jeune enfant n'est pas un concept nouveau.

Longtemps réservé au domaine privé, souvent attribué aux fondations religieuses, l'état français dès le XVIII<sup>e</sup> siècle va tenter de légiférer l'accompagnement du jeune enfant de la naissance à deux ans

En France, à cause de la très forte mortalité infantile, les études menées pour enrayer ce phénomène ont conduit à la promulgation de textes de lois ou décrets visant à protéger et accompagner les enfants jusqu'à l'âge de deux ans.

Déjà au 18<sup>e</sup> siècle, une abondante législation est rassemblée dans le Code des Nourrices publié, à Paris en 1781. Il est demandé aux nourrices :

- d'avoir un certificat du curé, alors représentant de l'état civil
- de recevoir le médecin de police pour une visite pour elles – mêmes et pour le nourrisson. Très vite ce Code des Nourrices fut délaissé.

En 1792 la Convention proposait l'idée d'une médecine pour les écoliers. Il faudra attendre plusieurs années pour entrevoir la réalisation de cette généreuse idée.

Le 23 décembre 1874 la loi Roussel établissait la surveillance de l'autorité publique de tout enfant de moins de deux ans, placé, en nourrice, en sevrage ou en garde hors du domicile de ses parents.

La Loi Roussel comporte une nouveauté importante par rapport aux textes précédents. Elle se préoccupe de la vie des enfants et des nourrices. Le ministère de l'Intérieur veille à l'exécution de la loi et nomme un comité supérieur de protection des enfants du premier âge. Dans chaque département le service de la protection des enfants du premier âge est créé. Il est dirigé par le Préfet assisté d'un comité départemental.

La France est, à cette époque, le seul pays en Europe où le métier de nourrice et la surveillance de tout enfant de moins de deux ans, sont placés sous l'autorité de l'état.

La surveillance est à la fois administrative et médicale

La surveillance administrative est effectuée par une commission nommée par le préfet

La surveillance médicale est assurée par les médecins au moins une fois par mois et consignée dans un carnet de visite.

En 1945, la médecine scolaire et la protection maternelle et infantile (PMI) s'organisaient, L'ordonnance de 1945 définissait leurs rôles et activités.

A partir de 1962 la PMI devient une structure départementale relevant de la Direction Départementale de l'Action Sanitaire et Sociale : DDASS

De 1945 à 1980 de nombreux textes de lois ont fait évoluer les missions des PMI.

A partir de 1983, la mise en place de la décentralisation rattache les PMI au Conseil Général

1989 : le service de la santé scolaire fait partie de l'Education nationale et devient : le service de promotion de la Santé en faveur des élèves.

La loi du 18 décembre 1989 rappelle la participation de l'état, des collectivités territoriales, des organismes de sécurité sociale à la protection et à la promotion de la santé maternelle et infantile.

Ces trois organismes, placés sous l'autorité du préfet, ont pour fonction de mettre en œuvre:

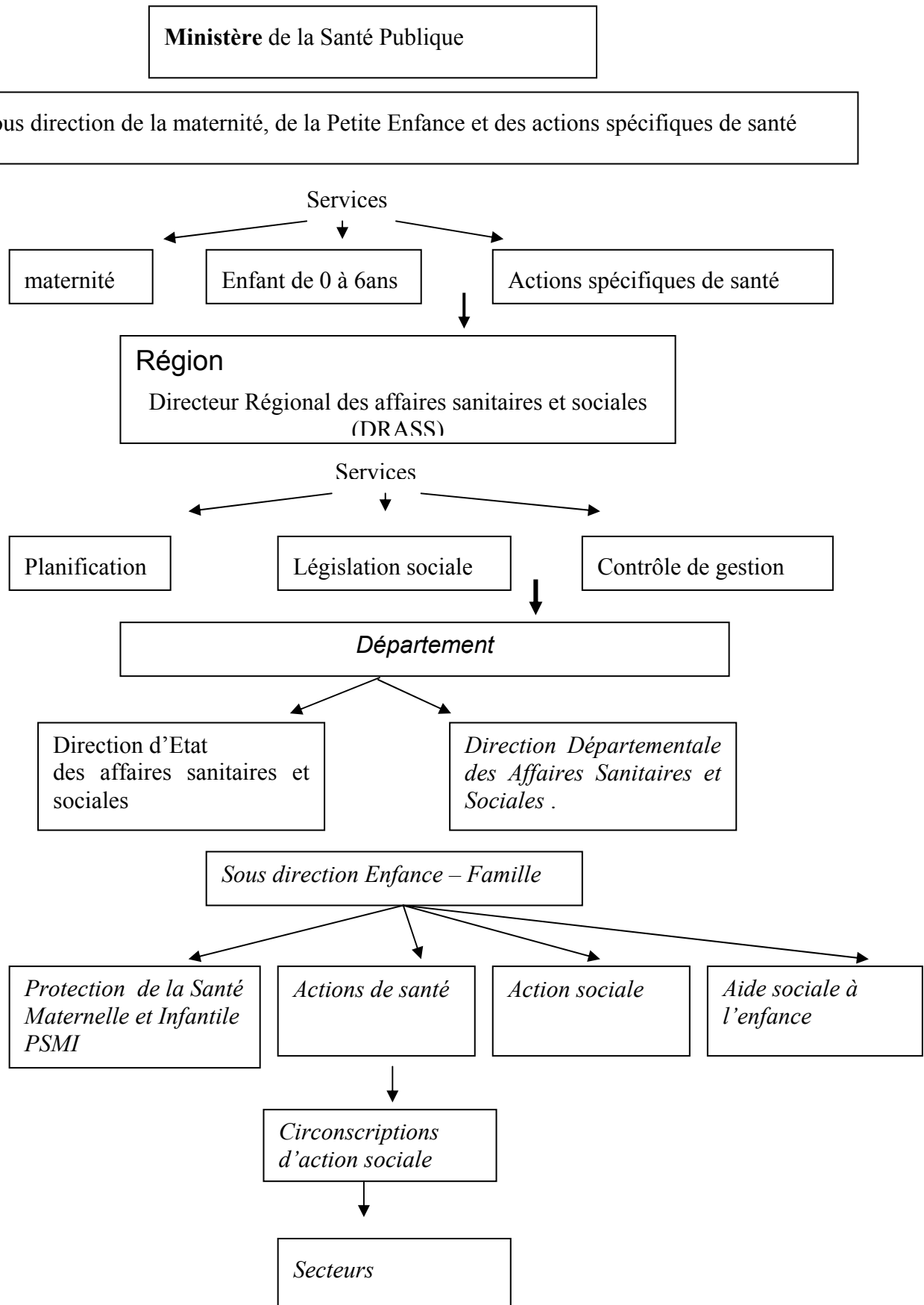
- des mesures de préventions médicales, psychologiques, sociales et d'éducation pour la santé en faveur des futurs parents et des enfants
- des actions de prévention et de dépistage des handicaps des enfants de moins de six ans
- des actions de conseils pour la prise en charge de ces handicaps
- des actions de prévention des mauvais traitements aux mineurs maltraités.

Ils doivent également assurer :

- la prise en charge des mineurs maltraités
- la surveillance et le contrôle des établissements d'accueil des enfants de moins de 6 ans
- les consultations de santé maternelle et infantile au centre de la PMI ou à domicile
- la formation et l'agrément des assistantes maternelles.

## Les STRUCTURES

Actuellement, ces différentes structures sont organisées comme suit :



Chacun de ces services ayant une dimension de Santé Publique, a cependant des missions spécifiques.

**La Protection Maternelle et Infantile (PMI) a quatre missions :**

*Une mission d'information pour :*

- la planification des naissances
- la maternité
- l'enfance
- Une mission d'aide et de préparation à la naissance
- Une mission de promotion du développement de l'enfant de 0 à 6 ans
- Une mission de suivi de l'accueil des jeunes enfants

**L'Aide Sociale à l'Enfance**

a davantage une mission dirigée vers l'enfance et la famille et se décline en quatre orientations :

- Apporter une aide aux familles en difficultés matérielles ou éducatives
- Assurer le placement des enfants de familles en difficultés temporaires ou « chroniques »
- Initier et suivre recherches et demandes d'adoption

*Les Actions de Santé visent essentiellement :*

- Les vaccinations
- La lutte contre les MST, la tuberculose
- La prévention des cancers

Ces différentes activités sont assurées par des médecins, ( titulaires d'un DES de pédiatrie, gynécologie, ou santé publique), des puéricultrices, des sages femmes, des infirmières, des assistantes sociales

Toutes ces mesures et structures sont susceptibles d'évolution mais marquent une volonté de l'état de tout mettre en œuvre pour une meilleure protection et promotion de la santé maternelle et infantile.

**Période de 0 à 9 mois**

*Protection de la mère et de l'enfant*

La déclaration de grossesse doit être effectuée avant la 14<sup>ème</sup> semaine de grossesse à la caisse d'allocations familiales et à la caisse d'assurance maladie.

La déclaration de grossesse ouvre des droits et induit des devoirs:

### ***Le suivi et les examens obligatoires :***

7 examens médicaux sont obligatoires : le premier examen doit être effectué avant la fin du 3e mois de grossesse les 6 autres examens doivent être pratiqués chaque mois, à partir du 4e mois de grossesse jusqu'à la date de l'accouchement.

8 séances de préparation à l'accouchement,

L'amniocentèse : réservée à certaines femmes présentant un risque particulier.

3 échographies : à la 12<sup>ème</sup> semaine, 22<sup>ème</sup> semaine et 32<sup>ème</sup> semaine

Après la naissance:

Un examen médical dans les 8 semaines qui suivent l'accouchement.

10 séances de rééducation périnéo-sphinctérienne après l'accouchement.

### ***Le droit au remboursement des soins :***

L'ensemble des soins dispensés pendant les 4 derniers mois de grossesse,

Les échographies sont remboursées à 70 % jusqu'à la fin du 5e mois de grossesse, puis à 100 % à partir du début du 6e mois de grossesse). En cas de grossesse pathologique ou de pathologie fœtale, d'autres échographies peuvent être prises en charge.

Les honoraires d'accouchement et les frais de séjour à l'hôpital ou en clinique conventionnée, dans la limite de 12 jours.

Les soins sont remboursés si :

la femme est personnellement assurée, ou la conjointe légitime d'un assuré, ou la concubine d'un assuré social. Toute personne qui vit maritalement ou qui est à la charge effective, totale et permanente d'un assuré depuis un an au moins peut prétendre également à ces mêmes remboursements. Par ailleurs, les soins seront remboursés de plein droit si l'assuré perçoit certaines allocations telles que l'allocation aux adultes handicapés, l'allocation de parent isolé...

### **La naissance**

La déclaration de naissance est obligatoire, c'est une disposition d'ordre public qu'il convient de respecter. Elle se fait en mairie ou au registre de l'état civil au CHU. Celle – ci doit s'effectuer dans les trois jours à partir du lendemain de la naissance, week-end et jours fériés non compris. L'officier d'état civil dresse un acte de naissance fixant la filiation de l'enfant et son nom.

L'enfant portera le nom du père si les parents sont mariés. Né hors mariage l'enfant est dit « naturel » et la filiation est légalement établie par reconnaissance volontaire des

parents. En cas de reconnaissance conjointe, il portera le nom du père. Si la reconnaissance n'est pas conjointe, il portera le nom du parent qui l'aura reconnu le premier. La loi du 4 mars 2002 prévoit que les parents pourront attribuer à leur enfant leur double nom à dater du 1<sup>er</sup> janvier 2005.

*Le congé de maternité est une durée de repos légal pour la mère et est fixé comme suit :*

Situation de famille au début de la période prénatale		Période prénatale en semaines	Période postnatale en semaines	Durée totale du congé en semaine
Grossesse simple	Le ménage n'a pas ou n'a pas eu 2 enfants	6	10	16
	Le ménage assume la charge de 2 enfants ou a déjà eu deux enfants nés viables	8	18	26
Grossesse gémellaire		12	22	34
Grossesse triplés ou plus		24	22	46

En cas d'accouchement prématuré, les jours de repos prénatal non pris sont reportés sur le repos postnatal. En cas d'accouchement tardif, le repos prénatal est supérieure à la durée légale, mais la durée du repos postnatal reste inchangée. Un repos supplémentaire de 14 jours peut être légalement accordé pour état pathologique lié à la grossesse.

Le congé de maternité postnatal est accordé au père lorsque la mère décède du fait de son accouchement.

En cas d'adoption, un congé est accordé à partir du jour d'arrivée du ou des enfants au foyer. Il peut être pris indifféremment par le père ou par la mère. La durée maximale est de 10 semaines, 22 semaines en cas d'adoptions multiples, 18 semaine si le ménage a la charge de 3 enfants.

## Le congé de paternité

Le Parlement français a adopté définitivement le projet de loi de financement de la Sécurité sociale pour 2002, présenté par la ministre de l'Emploi et de la Solidarité, Elisabeth Guigou. Une des mesures de ce projet de loi concerne l'application du congé de Paternité à compter du 1er janvier 2002.

Les modalités d'application du congé de paternité :

- Le congé est de 11 jours pour une naissance unique, et de 18 jours pour les naissances multiples.
- Il ne doit pas forcément être lié aux 3 jours de congés suivant la naissance déjà accordés.

- Ce congé n'est pas fractionnable
- Il faut prévenir son employeur un mois à l'avance.
- Il n'y a pas de modalité particulière à remplir, pour pouvoir bénéficier de ce congé.  
Durant la période de ce congé, la rémunération sera à 100% du salaire net dans un plafond d'indemnisation de 2200euros mensuel brut, en se basant sur les 3 derniers bulletins de salaire.  
( références 2003) Les salariés, les chômeurs, les travailleurs saisonniers peuvent bénéficier de ces indemnisations sous certaines conditions.

## Période de 0 à trois ans

### *Les aides aux familles*

Durant cette période la famille est accompagnée financièrement. Elle reçoit diverses aides appelées depuis janvier 2004 Prestation d'Accueil du Jeune Enfant (PAJE). La PAJE comprend : une prime à la naissance ( versée dès le 7<sup>ème</sup> mois de grossesse) ou à l'adoption, une allocation de base ( sous condition de ressources), un complément libre choix d'activité (attribué pour s'occuper d'un enfant de moins de trois ans ) un complément libre choix du mode de garde (pour l'emploi d'une assistante maternelle agréée ou d'une garde à domicile). Quel que soit le mode de garde choisie, la famille bénéficie d'une réduction d'impôt.

Une allocation d'éducation spéciale est attribuée pour aider à élever un enfant handicapé. Le montant de cette allocation varie selon le degré de handicap.

Une allocation API ( allocation de parent isolée)est attribuée aux mères élevant seule un ou plusieurs enfants sous réserves de certaines conditions.

Un complément familial est versé aux familles ayant à charge au moins trois enfants de trois ans et plus

### *Les lieux d'accueil*

Des établissements et services publics sont subventionnés par le département ( conseil général) et concourent à l'accueil des enfants de moins de trois ans.

- *Les crèches* sont des établissements permanents qui assurent de façon continue dans la journée la garde des enfants de moins de trois ans. Ces crèches sont de trois types : des crèches collectives à gestion municipale ou associative, des crèches parentales ( privées) organisées par une association de parents, ou des crèches familiales qui organisent l'accueil au domicile des assistantes maternelles

- *Les centres de loisirs et d'hébergement*, agréés par la Direction de la Jeunesse et des Sports après avis de la PMI, accueillent des enfants toute la journée hors jours scolaires

*Les assistantes maternelles* assurant l'accueil des moins de trois ans doivent obligatoirement avoir un agrément délivré par le président du Conseil Général après enquête de l'équipe médico- sociale. Cet agrément est accordé pour une durée de cinq ans renouvelable si les conditions d'accueil garantissent la santé, la sécurité et l'épanouissement des mineurs accueillis

La candidate assistante maternelle doit passer un examen médical, recevoir la visite d'une puéricultrice qui s'assure que la candidate présente les garanties nécessaires pour accueillir des mineurs dans des conditions propres à assurer leur développement physique, affectif et intellectuel. Elle doit également disposer d'un logement dont l'état, les dimensions et l'environnement permettent d'assurer le bien-être et la sécurité des mineurs. L'avis du maire peut être sollicité.

Le département finance la formation des assistantes maternelles

#### ***L'accueil à l'école maternelle.***

L'école maternelle n'est pas obligatoire. Elle est gratuite. Les enfants français et étrangers peuvent y être accueillis à 3 ans. Ils peuvent également être admis dans la limite des places disponibles s'ils ont atteint l'âge de deux ans au jour de la rentrée scolaire, à condition qu'ils soient physiquement et psychologiquement prêts à la fréquenter Exceptionnellement, les enfants qui atteignent l'âge de deux ans entre la rentrée et la fin de l'année civile peuvent dans les mêmes conditions être admis à l'école maternelle à partir de la date de leur anniversaire.

Ils y restent jusqu'à la rentrée scolaire de l'année civile au cours de laquelle ils atteignent l'âge de six ans. Les formalités d'inscriptions se font tout d'abord à la mairie, sur présentation des justificatifs suivants : le livret de famille, une carte d'identité ou une copie d'extrait d'acte de naissance, un justificatif de domicile, un document attestant que l'enfant a subi les vaccinations obligatoires pour son âge, ou d'un document attestant d'une contre-indication. Un certificat d'inscription est remis aux parents enfin, à l'école sur présentation des mêmes documents, l'inscription est alors effective.

Les enfants des écoles maternelles sont encadrés par des enseignants formés en deux ans dans les Instituts Universitaires de Formation des Maîtres( IUFM). Dans sa classe, l'enseignante est aidée par un agent territorial spécialisé des écoles maternelles (ATSEM) ayant satisfait à un examen professionnel et rémunérée par la collectivité locale. (commune)

### *La surveillance médicale*

Durant la période 0 /6 ans des examens médicaux sont obligatoires. Ils ont pour but la surveillance de la croissance, du développement physique, psychomoteur et affectif de l'enfant, ainsi que le dépistage précoce des anomalies ou déficiences et la pratique des vaccinations.

Les enfants subissent neuf examens au cours de la première année, dont un dans les huit jours qui suivent la naissance et un au cours du 9e ou du 10e mois ; trois du 13e au 25e mois, un au cours du 24e ou du 25e mois ; enfin deux examens par an durant les quatre années suivantes. Ces examens sont pratiqués par un médecin d'une consultation de la PMI ou par un médecin choisi par les parents (ou la personne qui a la garde) de l'enfant.

*La PMI assure aussi la surveillance médicale préventive* des enfants fréquentant l'école maternelle pour les enfants de trois ans et les enfants sont revus par le médecin scolaire avant l'entrée au cours préparatoire.

Pour les enfants fréquentant l'école maternelle et présentant des difficultés particulières, *le réseau d'aide spécialisé aux enfants en difficulté* ( RASED) peut intervenir sur demande de l'enseignant

Chaque fois que la PMI constate (lors des consultations ou des visites à domicile) que l'état de santé et le développement de l'enfant nécessitent des soins appropriés, elle engage la famille à faire appel au médecin de son choix. Lorsque la PMI constate que la santé de l'enfant est menacée par des mauvais traitements, elle avertit immédiatement le médecin responsable du service qui doit prendre des mesures d'urgence.

*Les vaccinations* constituent un des moyens essentiels de prévention des maladies infectieuses et virales. Certaines vaccinations sont obligatoires (BCG, vaccination antidiphthérique, antitétanique et antipoliomyélitique), d'autres sont simplement recommandées par le Comité Français d'Education pour la Santé. Elles sont gratuites dans les centres de PMI

Age		Diphtérie	tétanos	coqueluche	poliomyélite	Haemophilus influenzae	Hépatite B
dès la naissance	BCG						
2 mois		X	X	X	X	X dose 1	X dose 1
3mois		X	X	X	X	X dose 2	X dose 2
4mois		X	X	X	X	X dose 3	X dose 3
1an	Rougeole oreillons rubéole (1)						
16/18 mois rappel		X	X	X	X	X	X
4à 6 ans	Rougeole oreillons rubéole (2)						
6 ans	Rappel BCG	X	X		X		

Le carnet de santé de l'enfant est un livret délivré gratuitement à la naissance de l'enfant par la mairie ou par les services de l'établissement de soins où a été pratiqué l'accouchement. Il est établi au nom de l'enfant et remis aux parents ou à la personne titulaire de l'autorité parentale.

Le carnet de santé réunit tous les éléments médicaux survenus depuis la naissance et permet de repérer le suivi médical et le développement de la croissance de l'enfant. Il constitue un lien entre les différents médecins qui interviennent pour la surveillance médicale préventive et les soins. Leurs observations y sont inscrites ainsi que les traitements médicaux éventuellement suivis.

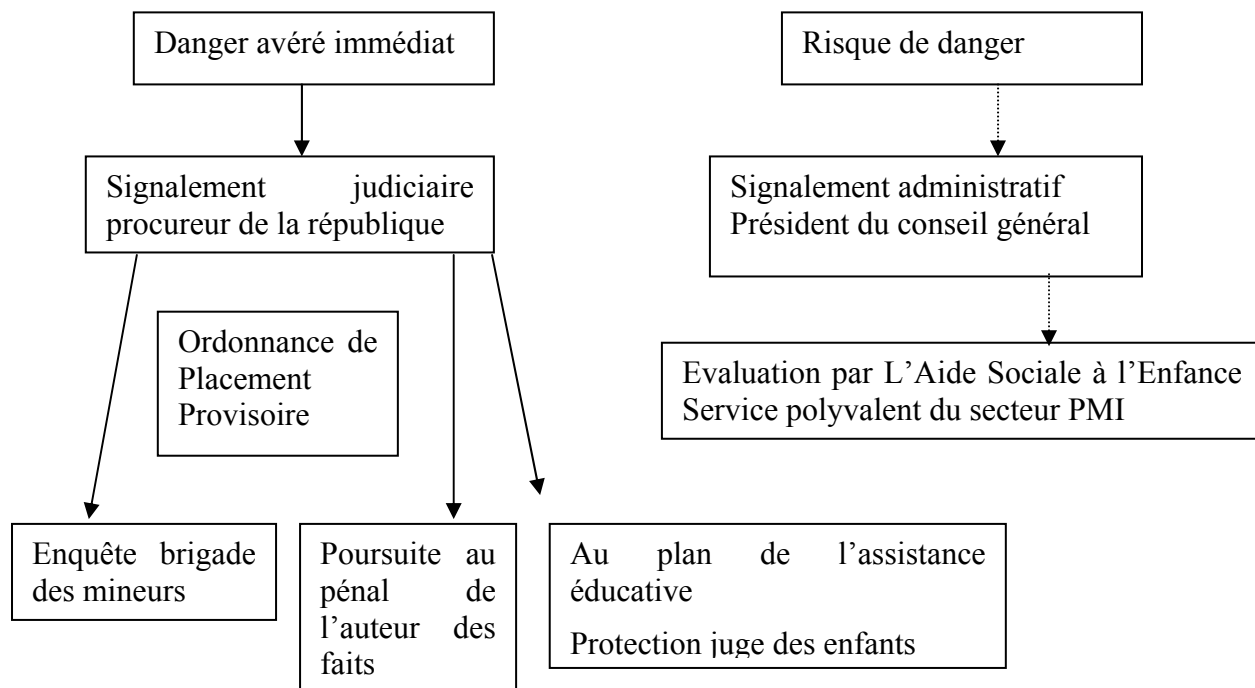
## Protection de l'enfant

### Prévention des mauvais traitements à l'enfant

L'enfant maltraité est celui qui est victime de violences physiques, cruauté mentale, négligences lourdes ayant des graves conséquences sur son développement physique et psychologique. On distingue trois grands types d'agressions :

- Les enfants victimes de comportements difficiles à mettre en évidence ( brutalités contrôlées, manifestation de rejet ou d'abandon affectif, exigences éducatives disproportionnées)
- Les enfants victimes de brutalités volontaires ou d'absence de soins entraînant des lésions physiques ou des troubles de l'état général.
- Les enfants victimes de violences sexuelles dans et hors du milieu familial

Les obligations légales de signaler les mauvais traitements à enfant s'imposent à tous et spécifiquement aux fonctionnaires. deux options de signalement sont alors possibles :



Dans tous les cas le centre de ressources départemental ( Inspecteur de l'éducation nationale, chefs d'établissements, psychologues scolaires, médecins et infirmières scolaires assistante sociale de secteur, centre médico-social) est un référent.

## Conclusion

En France, on peut dire qu'à l'heure actuelle, le mère et le jeune enfant sont l'objet d'une grande vigilance sanitaire et sociale avant et après la naissance. Les lois ne se contentent pas de cette protection sanitaire et sociale, mais cherchent à garantir aussi la liberté de la mère par exemple avec « l'accouchement sous X » qui permet à toute femme d'accoucher en milieu médical sans donner son identité lors de l'abandon de son enfant. Elles garantissent aussi les droits du père puisque celui-ci peut reconnaître son enfant avant même la naissance de ce dernier.

Le législateur veille à concilier les droits et devoirs de chacun des membres de la famille : enfant, mère, père.

Article proposé par l'OMEF France

## INFANTS AND TODDLERS IN ICELAND

State support: All parents have paid parental leave, they get 80% of their monthly salary.

Parental leave is total 9 months: mothers have 3 months, fathers have 3 months and they have 3 months which they can choose how to use.

They can also have unpaid parental leave for 13 weeks to take care of their child until it is 8 years old.

The state is also paying support with all children until 16 years old, but it is connected to the parents tax-report how much they get. Families with low income get more and single parents get also special support, but everything is connected to the tax-report.

In December 2003 there were 267 preschools in Iceland, 237 of them are officially operated and 20 are private operated.

All these preschools are run by law and regulations and under the supervision of the Educational ministry. Preschools are by law the first step in the educational-system in Iceland.

These preschools are of high standards and good quality generally and 35% of the staff are with 3 years of education as preschool teachers at university level.

In December 2003, 24% of all one year old children were enrolled in preschools and 89% of all two years old children. 93-95 % of children three to five years old are in preschools.

Each town council decides how much the parents are charged for the preschools. Single parents and students get special discount.

Only 24% of all one year old children are in preschools. It means that many infants and toddlers have to go to a daycare, from the end of the parental leave until they are enrolled to preschool.

This daycare is usually privately operated and is in a family household. 78% of daycare providers are working alone and 22% are working two together.

In December 2003, 461 individuals worked in private daycare in Iceland, 77% of them were located in Reykjavík the capital and surrounding.

These daycare providers took care of 2.350 children at the age of 0-5years old which is 10.3 % of all children at that age in Iceland. Of these 2.350 children were 19% at the age of 0-1 year old, 77% were 1-2 ½ years old and 4% were 2 ½ -5 years old.

There is no requirement of education for the providers, but they are expected to take a course, which is organized for them. They have to run the daycare by regulation and are under a supervision of local authorities.

The local community subsidize the cost of private daycare for parents.

In September 2004, the authorities of Reykjavík, the capital, have decided that five years old children get three hours a day free of charge. This was decided two weeks ago.

In Iceland we call the preschool a playschool, because young children learn through play.

To my knowledge there is no one working at a research or a development work for infants and toddlers in Iceland.

# POLICY AND REALITY FOR CHILDREN UNDER THE AGE OF THREE AND EARLY CHILDHOOD EDUCATION IN NORWAY

## Facts and organization

- -what kind of state support is there for families with young children (parental leave etc.)?
- -how large percentage of children under the age of three are in ECE?
- -what kind of and what quality of ECE?
- -the preschool teachers or providers, who are they?
- -anything else of importance?

In Norway we have a right to parental and adoption benefits at amounts that are intended to replace wages and salaries during leave of absence. The parental benefit period is either 52 weeks with 80 per cent pay or 42 weeks with 100 per cent pay. The equivalent adoption benefit period is 49 or 39 weeks. Parents must choose one of these alternatives before the child is born, or before taking over care of the adopted child.

We also have cash benefit scheme for families with small children. The right to the cash benefit applies from the month after the child's first birthday up to and including the month of the child's third birthday. Parents are not entitled to receive cash benefits while they are receiving full parental/adoption benefits. The cash benefit is payable for each child without means or needs testing and it is tax-free. Parents may receive the cash benefit on the condition that they have made no agreement for full time place in a day care centre which receives a state grant.

Employees who have the care of children under age of 12 are entitled to leave with pay to look after sick children. Each parent is entitled to leave with care pay for up to 10 days per year.

Child benefit is the most important social security benefit for families with children. Anyone living in Norway and supporting children under the age of 18 has right to child benefit.

As the parental leave is almost a year, there are very few babies in our "barnehager". We have a coverage of about 40 per cent for children under 3 years.

ECE in Norway, called "*barnehager*", are run either by the municipalities or by public institutions, firms or private organisations under the supervision of an educated pre-school teacher. The Ministry of Children and Family Affairs has laid down

regulations according to the Act, and has also laid down a framework plan (national curriculum) for the activities and the content of the *barnehager*. The Framework Plan is a regulation under the Act, which means that all approved *barnehager* are obliged to follow the plan. The Ministry also has initiated projects concerning Quality. The challenge in quality is to keep and develop the well established *barnehage* tradition, and to manage this, the staff must identify with all aspects of the quality in their local *barnehage* in close collaboration with the parents and authorities.

The *barnehage* Act say that *styrere* and *pedagogiske ledere* must be educated pre-school teachers. The *styrer* is the owners representative in regulation to the other staff. She is also responsible for guidance of all staff. The *styrer* is to be responsible for the *barnehagen*'s content. The *pedagogiske ledere* are responsible for guidance of their immediate associates, for the educational programmes in their groups of children and for the day-to-day collaboration with the children's parents. They organise their work among the staff in their group.

For assistants there are no special demands for education. They have many different backgrounds. If they want an education for their work, they can take an education in a field for child and youth workers, which aims at work in *barnehager*, and with children in school and organised after school activities. The Ministry of Children and Family Affairs is of the opinion that the child and youth workers are well educated to work in *barnehager*, and that they will contribute to an increase in the total competence among the staff.

## A description of interesting research or development work carried out in each country within ECE for infants and toddlers

Friendship among toddlers (PhD-study by Anne Greve, Oslo University College, Norway).

The main theme of her work-in-progress is the attempt to describe friendship-relations among two-year-old children, interacting with one another within the everyday context of Norwegian day care. She wants to gain the children's perspectives and use them to interpret the children's agency in their peer cultures. In order to grasp the meaning in the children's concrete lived world, the study is mainly based on phenomenology and the philosophy of Merleau-Ponty. The examples of friendship-relations emphasize mutual preference among the toddlers, the mutual positive effect of friendship relations, and conflicts among friends. Finally the caregiver's way of responding to the children's expressions of friendship-relations in a way that support this development will be discussed.

Another PhD-study by Camilla Eline Andersen, Oslo University College; Norway , will focus on ethnicity and multiculturalism, with a view of locating how marginal and dominant interests are constructed.

The projects aim is to document and to develop a further understanding of temporary praxis in day care centers regarding issues linked to complexity and diversity.

The project also seeks to open up for multiple perspectives and to reveal how disqualified and marginalized interests and experiences are in evident in contemporary early childhood education. Conclusions from the Masters thesis “The world in the preschool. Deconstructions in the light of postcolonial theory: an ethnographic investigation from one preschool day care center”, show that discourses in Norwegian preschools marginalize people culturally different from the majority. This then points to the need for practical and presumably theoretical changes. By using critical perspectives the project attempts to problematize and deconstruct today’s practices, so that more possibilities can be offered children, families and practitioners in the field of early childhood education and care.

Ellen Os’ three projects during the resent years, also has a focus on the children under three:

### *1. Caregivers’ support to peer-relations and play in kindergarten.*

According to research that has been going on from the sixties, children have the capacity to go into relationships from infancy. The research has focused the relationships between infants and caregivers. Recently peer-relations between children under three have become subject for research. The results indicate that small children are interested and show competence in peer-relations.

The basis for the presentation is a case study in a kindergarten with children from one to three years. The research question was; what do the caregivers do to facilitate and inspire the relationships and play between the children? Do they function as a support and a scaffold around the children's relations? The data suggest that the adults often focus on an individual child instead of children playing together. When they support ongoing play, they mostly regulate discussions about the right to a certain object.

### *2. The “Klangfugl” projects, “Klangfugl – Art for the very young, and “Klangfugl – Cultural experience with the very young”*

Since 1998 The Norwegian Council for Cultural Affairs` has run two projects where professional artists have got support to produce and present art for children under three; the one-year project “Klangfugl – Cultural experience with the very young” and the

three-year project “Klangfugl – Art for the very young”. Experience gained by these projects, has shown that these children take great pleasure in experiencing art. Furthermore, experience shows that they are able to relate to a wide spectrum of artistic expressions such as music, theatre, dance and visual art.

### *3. Glitterbird: Art for the very young*

The purpose of “Glitterbird - Art for the very young” is to produce and present art for children under three years of age. Traditionally small children are not included in contexts where art is presented. Concerning art experiences infants and toddlers seem to be culturally isolated, and due to this we have almost no experiences and knowledge about actual meetings between small children and art. An important part of the project is to collect and systematise experiences and knowledge. How do small children meet art? Should there be special qualities in art for the very young? How can artists communicate with this group of human beings that still is not using spoken language?

The way in which small children are viewed is changing. Young children today are seen as complete, active and inquisitive human beings with the ability to take pleasure in experiencing art. Such a view of childhood may be particularly strong in the Nordic area, as there has been a strong focus on the rights of children in these countries. With the knowledge of small children's ability to face artistic challenges, and referring to their right to experience quality art, a project like this can contribute to increased involvement on behalf of children. Simultaneously, the project will challenge and stimulate artists to work with art, primarily dramatic art and music, for this age group.

The project can be seen as a continuation of the Norwegian project “Klangfugl – Art for the very young” in which 16 projects were given financial support in order to create and convey art to children under three years of age. Through a project in Cupertino with other European countries one of our aims is to give children under three years of age in the participating countries the opportunity to see and to experience different genres of art, with particular emphasis on music, theatre, puppet theatre and dance; but also visual art, sculpture and crossover-expressions.

As host of the project, Norway is responsible for the material that will be published. The group of co-organisers will discuss and decide whether this might include contributions from all the participating countries.

## EDUCATION AND CARE – SWEDISH POLICY FOR CHILDREN UNDER THREE

This short text focuses on certain preconditions, state policy and common attitudes for the care and education of the youngest children in Sweden.

### Parental leave

Parental leave in Sweden lasts for 450 days. The days can be divided between the two parents, and they themselves decide how to distribute the days between each other. Except from the case of “the father’s months” (2), parents may transfer days between each other. During the first 360 days one of the parents gets a parental leave benefit equivalent to 80% of the wages of the parent in question. The rest of the days he/she gets a lower specified sum. The system is flexible and the parents can save their days until the child is eight years old. The benefit can be used for the whole or part of days. The “father’s months” was introduced to encourage fathers to share in the everyday care of the child, and the proportion of benefit days used by fathers have increased to 10% in 2002. The system also has additional guarantees for the parents. One parent is entitled to stay home when the child is ill (60 days/year) and to accompany the child in preschool or school during one day per year – a “contact day” (80% of parents wages/day). Statistics has shown that more fathers than mothers stay home with ill children. These benefits are in force until the child reaches the age of 12.

### Early childhood education and care

The Swedish childcare system has a dual function, on the one hand it has to support children’s development and learning and on the other hand making it possible for parents to combine parenthood with work or studies. Infants younger than one year are mainly taken care of at home supported, by the parental leave programme.

There are three forms of preschool activities (available for children 1-5 years old): *preschool*, *family day care* (child minders) and *open pre-school*. The use of family day care is decreasing, now serving 8,2% of all children aged 1-5 years (2002). The Curriculum for preschool does not apply to the child minders but is recommended. The Open preschool is available to children (1-5) who are not enrolled in other forms of public child care, accompanied by their parents. The number of Open preschools has been gradually reduced from 930 units in 1998 to 710 units in 2002.

However, the number of children attending preschool is steadily growing in Sweden (preschool is what other countries calls day-care and kindergarten). Out of all

children (1-5 years) 72,2% attended preschool in 2002. During the 90's a very rapid expansion of the childcare system combined with cutbacks in the municipalities' budgets have caused an increase of the child groups' size. This is an alarming and negative sign concerning the educational quality, especially when we look at the youngest children, since they are particularly dependent on a secure, trusting environment with stable relations. Teachers and child minders in preschool also witness on a new work situation with a lack of time and plenty of stress in the larger groups of children.

## The educational system

Early Childhood Education and Care (ECEC) is part of the entire educational system in Sweden, administrated by the Ministry of Education and Science. A legislation on childcare has been brought into the School Act and the National Agency for Education. The school act stipulates the municipalities to provide child care without unreasonable delay for children between 1-12 years, whose parents are working or studying, or if the child is in need of special support. ECEC is directed to all children (children with unemployed parents have a right to attend preschool 3 hours a day), should provide children with stimulating and developing activities and ensure good living conditions for the children. The relationship between parents and early childhood education should be of close-co-operation. Teachers are to work in teams. The dual focus is on education and care, stated in the 1998 National Curriculum for pre-school. The overarching goals of Swedish ECEC are the fostering of democracy, equality, solidarity and responsibility. Moreover, goals and guidelines are provided in areas such as: a) norms and values, b) development and learning, c) influence of the child, d) preschool and home, and e) co-operation between preschool and other institutions, for instance leisure time centre.

## Teachers

In the toddler groups the majority of the staff is nursery nurses (two years of upper secondary school), but there can also be one or two preschool teachers (university certificated degree) in a team. The qualification of the staff working with infants and toddlers is an important question to consider since the official attitude towards the youngest children seems to be that minimal education for the staff is enough. In my opinion this ought to be the other way around, the youngest children need the most well educated and skilled teachers since these children are in a very sensitive learning process. Unfortunately the new University based education, including all teachers in the educational system, seems to have reduced the number of teachers interested in working with the youngest children. This is a serious issue, especially affecting the youngest children.

## State support and responsibility

Income taxes, general state block grants and parental fees finance early childhood education. The state lays down goals and guidelines for the municipalities and sets the financial framework. The municipalities determine how they will fulfil the national goals and how they use the funds allocated. A maximum fee system was introduced in January 2002 (about 100 Euro for the first child, with a decreasing fee for each additional child), which was accepted in all municipalities in Sweden by the end of 2003. The total cost of preschool in Sweden increased somewhat last year, but this should be viewed against the background of hard reduces during the 90's.

## Summary

1. Early childhood education and care is a well-established and developed educational system including the youngest children in Sweden. This guaranties equality in availability, fees and quality in ECEC for the youngest children.
2. Early Childhood Education and Care is part of the entire educational system in Sweden, administrated by the Ministry of Education and Science. The dual focus is on education and care, stated in the 1998 National Curriculum for pre-school.
3. Infants younger than one year are mainly taken care of at home, supported by the parental leave programme, which ensures the parents 450 days/year, which they can share freely (except for two months, which must be used by the father).
4. Children with special needs are guaranteed ECEC and children with unemployed parents can attend preschool for three hours a day. This is a shift towards the child's need of education.
5. A maximum fee system is accepted in all municipalities in Sweden. This balances the costs for parents.
6. During the 90's a rapid expansion of the childcare system combined with cutbacks in the municipalities' budgets have caused an increase of the group size. This is threatening the quality of the educational system, especially for the youngest children, since these children are particularly dependent on a secure, trusting environment with stable relations.
7. Nursery nurses (two year of upper secondary school) have traditionally been in majority among the staff working with the youngest children. Unfortunately the effects of the new common education for all teachers, seem to reduce the students' interest in working with the youngest children. That low education is connected with the pedagogical activities for the youngest children is a serious fact. Thus the

attitudes and knowledge about the very young child's needs and potentials for learning has to be changed.

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## Research on Infants and Toddlers in Sweden

Research on toddlers within early childhood education in Sweden has traditionally been almost non-existing. Most research has taken part within psychology and has often concerned young children's need for early attachment and their (in)ability to cope with different emotional contacts, such as those with teachers and peers in preschool.

A brief search on Libris' Internet site for dissertation studies published between 1990 and 2003 (approximately 120 titles) resulted in only eleven titles with an explicit research focus on the youngest children. Eight of these titles concerned psychology (i.e. early separation, imitation, language development, nutrition or safety). Three titles represented education: they concerned toddlers' learning, their moral strategies and teachers' learning approaches towards toddlers from a gender perspective. It is important to remember that this overview is very approximate, but still it highlights the almost non-existent research interest in the youngest children in early childhood education. Moreover, the research has mainly focussed on toddlers' abilities from a psychological developmental perspective. Investigations on teachers' approaches have often been performed in such a way that makes the toddler a background figure, and the focus is mainly on the teachers' strategies in general.

Nevertheless, a shift in the research on the youngest children seems to be in progress. A few new investigations within education have emphasised learning processes among toddlers and have also taken the very young child's perspective on different phenomena as a point of departure from. Lindahl (1996) for instance, studied how ten toddlers aged between 13 and 20 months, experience and learn in a new preschool world. She observed what she called the children's direction of awareness. The child's action was supposed to be related to the child's way of perceiving or making sense of a content. Lindahl's findings indicate an awareness of changes in the toddlers learning' process. Moreover, the children were able to keep to their intentions, but they needed to have an idea of a situation or of something they want to master before they act intentionally and some learning may come about. Lindahl (2002, see also Palmerius, Pramling & Lindahl, 1991 in a similar project) also studied pre-school educators, ability to understand and work out from a toddler's perspective. An intervention program was carried out where special importance was given to how children's initiatives, ideas or intentions were followed up and responded to by the educators. The effects on the teachers' learning were evaluated through interviews. Lindahl (2002) claimed that an increased understanding of the infants' intensity of activity and richness of initiative stimulates the educators to create a learning environment, which offers children influence over everyday activities in preschool.

Another example of this new approach to toddlers learning is Johansson (1999), who studied morality from a very young child's perspective. Instead of investigating morality in terms of what the child is able or not to do, the aim was to understand toddlers' lived experiences of values and norms concerning ways of interacting with each other in everyday life in the context of preschool. The daily interaction of nineteen children, ten boys and nine girls, one to three years old, were video recorded during a period of seven months. The children's interactions were analysed with a focus on two main questions: What ethical values do the children experience and express through their interaction? What norms do the children express and value? The study showed that ethics was an important part of children's life-worlds in the context of preschool. The children defended and valued their own *rights* and cared for *others' well-being*. The children defended their rights to things and to share worlds with peers. The value of others' well-being was directed towards other children's situations, with a concern for their well-being. This included an ambition to comfort others and protect them from harmful situations. The children also gave power an ethical value. They used physical and psychological power to provoke others, to test other children's limits, and to overcome and defend rights. Conflicts of rights as well as acts that threaten one's own and others' well-being seem to form potentials for children's learning. In this process it

is imperative that the teacher make use of the child's own experiences in the learning process.

Johansson (2003) also studied the quality aspects of learning in Swedish pre-school amongst toddlers, that is, children younger than three years old. Johansson followed the pedagogical activities of 30 work teams at 20 Swedish pre-schools dispersed throughout the country. The aim was to provide a picture of the pedagogical work with younger children by studying pedagogues' attitudes, the content and organisation of the activities, as well as following children's experiences from everyday life. The results can be summarised as follows: *Pre-school content is constituted in the intersubjective learning encounters which pedagogues create*. This is the actual essence of the activity in early childhood education and, as such, a fundamental prerequisite of children's learning. In those work teams where the atmosphere and view of children are characterised by a common commitment, emotional proximity, candour and a fundamental respect for children, there often exists a view of learning where teachers to a large extent make a mental note of the child's competence, significant for its learning. Moreover, in the work teams where the atmosphere and the view of the child tend to be built on distance and the teacher's notion of being the only one who can determine what is best for the child, a view of learning emerges where the children have a more subordinate and passive role in learning. When the atmosphere can be described as controlling, a view of learning with behaviourist features can be discerned, where moulded learning strategies such as threat and/or commendation and reward often is expressed.

## Summary

1. When researching learning from a toddler's perspective, new dimensions may emerge. These dimensions highlight the very young child's experiences and intentions as important aspects for his or her learning.
2. In this process implicit and bodily experiences as well as intersubjectivities as closeness and a shared focus, seem to be important as potentials for learning.
3. Implications that follow are that teachers need to be skilled in understanding the child's perspective, consider the child's tacit and bodily utterances and experiences as well as to create and to take a departure in these in the learning encounters that are created in early childhood education.

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## FACTS AND FIGURES ABOUT POLICY AND REALITY FOR CHILDREN UNDER THE AGE OF THREE AND ECEC IN SWITZERLAND

### What kind of support is there for families with young children (parental leave ect.)?

Switzerland is organised in a federal way. All social and educational affairs are the responsibility of the cantons and sometimes even of communities. There are no federal laws concerning families and/or education.

#### *No maternity leave:*

Though written down in the constitution after World War II there is still no maternity leave. A law providing 14 weeks of paid maternity leave for working mothers has passed the two chambers of parliament last year, but a referendum was successfully organised against it, so that the law has to be brought before the people and a vote will be taken in September 04.

Where no maternity leave exists it is unnecessary to ask for rules and regulations about paternal leave etc.

Child benefits for working parents do exist, paid for children until the child is 18 or until 25, if the child is still studying. The child benefits vary from canton to canton (e.g. in Zürich Fr. 170.- max per month, Fr. 195.- when 16, = 110 – 125 Euro).

Some cantons do have special financial support for young mothers during the first 2 years of the child.

*But none of these benefits allows a family to live on it or to substitute the salary of the working mother, it's mainly a little extra to the family income.*

### How large a percentage of children under the age of three are in ECE?

*Strictly speaking: none* – ECE as early childhood education starts only at the age of three or four (variety by canton). Up to the age of three it's ECC early childhood care or as we say; „family complementary care“. This is considered to belong to social affairs.

Some background information:

- 70% of Swiss mothers with young children work, but mainly part-time.

- Politicians like to cling to the idea that having children is a private affair and of no concern of society.
- Under the pressure of equal rights for women and the reconciliation of family & work „family complementary care“ is now considered to be a normal claim of young families, but when it comes to share the costs families are mainly left alone. It depends of the political situation in a city or community whether these authorities invest money into CC-provisions and allow e.g. fees related to family income. In 2003 a federal programme started helping initiatives (public or benevolent) to set up care centres. The aim is mainly quantitative and to create more opportunities. It runs for 4 years and has 200 mio SFR in the pot.
- Since there is no federal law and not even in each canton there are no over all statistics. So we do not know how many children really do attend ECC. For the city of Zürich, where provisions have tripled in the past years we know that about a third of the children under 4 years go to ECC (when starting Kindergarten at the age of 4 they change to out of school-care centres “Horte”). The demand seems to be covered for children older then 18 months. Places for babies, however, are still very looked for.

*When it comes to ECE Kindergarten is attended more or less 100% by the children concerned. Kindergarten, though not compulsory, is treated as a part of the public educational system: provided by the communities, teachers paid as officers. Every child has the right to attend classes and it is free. But – programmes vary from canton to canton, there is no overall curriculum. Hours may be 9-11 a.m. and 2-4 p.m.(classic class hours) or now from 8-2 a.m. (no lunch possibilities), which means children who need to be taken care of have to go additionally to a care centre.*

## What kind of and what quality of ECE?

The preschool teachers or providers, who are they?

### *ECE*

Publicly run Kindergarten are of good quality, teachers are recently trained at university level as specialists for children 3 to 8 years (Kindergarten years and first school grades combined). There are imminent organisational changes afoot to combine Kindergarten and Primary school.

There are some private providers of Kindergarten. They offer mainly special pedagogical approaches like Rudolf Steiner, Montessori – and are often run as a full day programme, which suites parents who need additional „care hours“.

## **ECEC**

Since having children is a private affaire, taking care of children is also a private affaire. Though there are no statistics, one can say that if children are in day care, they are in their majority in care centres not with day families (the vast „grey zone“ of informal care situations is not to be considered). Providers are seldom public, traditionally they are benevolent (women’s organisations, churches, foundations, parent’s initiatives). Lately, educators have set up their own „business“, but even then, they are mainly non-profit organisations.

Early childhood educators follow in the German speaking part of Switzerland a vocational training of 3 years (secondary II level), heads of day care centres have followed an additional 2 years training as centre directors. In the French speaking part, educators follow tertiary studies. But looking at the ratio of trained to untrained personal, it is often found that a higher trained staff member is equalised by more untrained personnel and larger groups of children.

The role of the Schweizerische Krippenverband (Swiss Association of day care centres) is to set up standards of quality (number of children in a group, staff: children ratios, training required, space, set-up of a centre) which are widely followed and recommended by most of the cantons. This way a minimum standard is secured and the policy of the association is to raise standards step by step.

## **Anything else of importance?**

*The development of ECE as such, seems to be developing well.* The training is better, it will come closer to school and if you demand that education is something to be for all and free, this is achieved, though discussions on improvements never ends.

*ECC, however, is still fragile in development.* Regarded as „family complementary care“ it does not yet have the secured framework to really develop. Being seen too much under the aspect of reconsolidation of work & family and too little as an independent (social)pedagogical opportunity for all children it stays a very exclusive provision oscillating between the classical limited offer for the poor and a very expensive one for the better off.

This understanding and the lack of a real family policy burdens the ECC in Switzerland with two facts to deal with:

- many children under 18 months on the waiting lists;
- mainly part-time care, because parents can’t afford to pay more than the very necessary days.

## A description of interesting research or development work carried out in each country within ECE/C for infants and toddlers

*To make it short: there are none or nearly none.* Since pedagogical universities have only been created recently (Kindergarten- and schoolteacher seminars belonged to the tertiary but non-university level. The difference is not in the admittance of the students or the quality of studies, but the lack of research money). This will sooner or later lead to research in ECE and (hopefully) even ECEC. So at the moment research within ECE/C is still rather scarce and „accidental“.

Never the less: Marie Meierhofer Institut für das Kind, Zürich: Der Erwerb sozialer Kompetenz bei Kleinkindern mit ihren Eltern und mit Gleichaltrigen (Dr. phil. Heidi Simoni) Young children's acquisition of social competences through parents and peer group.

# NOTES ON REGISTRATION AND REGULATION OF DAYCARE AND EARLY EDUCATION IN UNITED KINGDOM

Provision for daycare is inspected annually by early years childcare inspectors employed by the Office for Standards in Education (OFSTED). This particular registration inspection does not apply to maintained schools, but is tailored to full daycare, sessional daycare, childminders, crèche provision, and out of school care. OFSTED has responsibility for the regulation, registration, investigation of any problems, and enforcement of the standards. Inspectors have the power to close unsatisfactory provision.

There are 14 national standards and two annexes which apply (1) to babies and children under two, and (2) to overnight care. The standards are a set of outcomes that providers should aim to achieve. They are as follows:

## *Standard 1 Suitable Person*

Adults providing day care, looking after children or having unsupervised access to them are suitable to do so.

## *Standard 2 Organisation*

The registered person meets the required adult:child ratios, ensures that training and qualifications requirements are met and organises space and resources to meet the children's needs effectively.

## *Standard 3 Care, Learning and Play*

The registered person meets children's individual needs and promotes their welfare. They plan and provide activities and play opportunities to develop children's emotional, physical, social and intellectual capabilities.

## *Standard 4 Physical Environment*

The premises are safe, secure, and safe for their purpose. They provide adequate space in an appropriate location, are welcoming to children and offer access to the necessary facilities for a range of activities which promote their development.

## *Standard 5 Equipment*

Furniture, equipment and toys are provided which are appropriate for their purpose and help to create an accessible and stimulating environment. They are of suitable design and condition, well maintained and conform to safety standards.

*Standard 6 Safety*

The registered person takes positive steps to promote safety within the setting and on outings and ensures proper precautions are taken to prevent accidents.

*Standard 7 Health*

The registered person promotes the good health of children and takes positive steps to prevent the spread of infection and appropriate measures when they are ill.

*Standard 8 Food and Drink*

Children are provided with regular drinks and food in adequate quantities for their needs. Food and drink is properly prepared, nutritious and complies with dietary and religious requirements

*Standard 9 Equal Opportunities*

The registered person and staff actively promote equality of opportunity and anti-discriminatory practice for all children.

*Standard 10 Special Needs*

(including special educational needs and disabilities)

The registered person is aware that some children may have special needs and is proactive in ensuring that appropriate action can be taken when such a child is identified or admitted to the provision. Steps are taken to promote the welfare and development of the child within the setting in partnership with the parents and other relevant parties.

*Standard 11 Behaviour*

Adults caring for children in the provision are able to manage a wide range of children's behaviour in a way which promotes their welfare and development.

*Standard 12 Working in Partnership with Parents and Carers*

The registered person and staff work in partnership with parents to meet the needs of the children, both individually and as a group. Information is shared.

*Standard 13 Child Protection*

The registered person complies with local child protection procedures approved by the Area Child Protection Committee and ensures that all adults working and looking after children in the provision are able to put the procedures into practice.

*Standard 14 Documentation*

Records, policies and procedures which are required for the efficient and safe management of the provision and to promote the welfare, care and learning of children, are maintained. Records about individual children are shared with the child's parent.

Each standard has a set of supporting criteria which give pointers about how it can be met. OFSTED (Office of standards in education) expects providers to demonstrate how they achieve each of the 14 standards, which will be reached in different ways depending on the particular circumstances.

Inspection of funded nursery education in the private, independent and voluntary sector, and in provision made by social services, is undertaken within a day by a childcare inspector accredited by OFSTED and endorsed as fit to evaluate the quality of the educational programme on offer. Maintained nursery schools, and nursery and reception classes in primary schools, are subject to a more demanding inspection undertaken by a team of inspectors over a period of several days. The frequency of both sorts of inspection is related to the judged effectiveness of provision, but happens at least every six years in the maintained sector, and more frequently for other nursery educational provision.

Further details can be found on [www.ofsted.org.uk](http://www.ofsted.org.uk).

## Under Threes in the UK

### *Birth to Three Matters*

In 2003, a Framework of effective practice was introduced by the Sure Start Unit to provide support, information, guidance and challenge for all those with responsibility for the care and education of babies and children from birth to three years.

The Principles which underpin the framework come from a number of sources including representative organisations, leading child care writers, experts and practitioners, and are:

- Parents and families are central to the well-being of the child
- Relationships with other people (both adults and children) are of crucial importance in a child's life
- A relationship with a key person at home and in the setting is essential to young children's well-being
- Babies and young children are social beings, they are competent learners from birth
- Learning is a shared process and children learn most effectively when, with the support of a knowledgeable and trusted adult, they are actively involved and interested.
- Caring adults count more than resources and equipment

- Schedules and routines must flow with the child's needs
- Children learn when they are given appropriate responsibility, allowed to make errors, decisions and choices, and respected as autonomous and competent learners.
- Children learn by doing rather than by being told
- Young children are vulnerable. They learn to be independent by having someone they can depend upon.

The Framework identifies four 'Aspects' which celebrate the skill and competence of babies and young children and highlights the inter-relationship between growth, learning, development and the environment in which they are cared for and educated.

The four Aspects are:

- A Strong Child
- A Skilful Child
- A Competent Learner
- A Healthy Child

"Birth to Three Matters" is presented in a Pack, which comprises sixteen Component cards, relating to the four Aspects of the Framework, a video, showing children and adults in a variety of contexts and a CD Rom, providing additional information, suggested reading, articles, book chapters, papers, a literature review, video footage, discussion and case studies, to support all those who work with young children. It has been distributed to childminders, nurseries, crèches and can be used by anyone who works or cares for children under three. Training is being offered in many areas of the country, and the pack has been welcomed by many practitioners and carers.

The Literature Review which supports "Birth to Three Matters" is written by Tricia David, Kathy Gouch and Sacha Powell of Canterbury Christ Church University College, and Lesley Abbott of Manchester Metropolitan University. It can be accessed on the Sure Start Website at:

[Surestart.gov.uk/ensuringquality/birthtothreematters/relateddocuments](http://Surestart.gov.uk/ensuringquality/birthtothreematters/relateddocuments)

### ***Sure Start and Children's Centres***

Since 1997 the Government's Comprehensive Spending Review (CSR) has enabled funds to be ear-marked for improving provision and outcomes for young children, aimed particularly at families with children under four, their families and communities. There has been a tremendous government drive through the "Early Years Partnership Initiatives" and the new "Sure Start Programmes" to overcome deprivation in the 20% most poverty-stricken areas, both urban and rural across the UK. The aim is to increase the availability of childcare for all children, and to support

parents as parents and in their aspirations towards employment. The principles of Sure Start are to work with parents and children, to serve the specific needs of families, to be flexible at the point of delivery, to start with the first antenatal visit with preparation for parenthood and to provide appropriate support. Services are to be customer and community driven and coordinated by professionals. The overall aim is to provide better outcomes for children.

The aim of Children's Centres is to 'join up' Sure Start provision. Children's Centres will bring together locally available services and integrate management and staffing structures but will not necessarily be developed on one site. All Children's Centres must offer access to the following core services:

- Early education integrated with child care
- Family support and outreach to parents
- Child and family health services

In addition, it will act as a service hub within the community for parents and providers of childcare services for children of all ages – offering a base for childminder networks and a link to other day care provision, out of school clubs and extended schools. Centres will also have links with local training and education providers, Jobcentres and Children's Information services

The government's aim is to halve child poverty in the UK by 2010, and the Prime Minister has recently pledged that every area of the country will have Children's Centre provision by this date.

## Research

Current research into child development in this phase is closely linked to the 'Sure Start Project'. Much attention is given to investigating ways of listening to and evaluating young children's responses. Co-operation among university researchers on a long-term investigation into the influence of early education has proved highly positive, and has raised the profile of the early years phase.

See details on these websites:

[www.earlychildhood.org.uk](http://www.earlychildhood.org.uk), [www.ncb.org.uk/features/eds/](http://www.ncb.org.uk/features/eds/), [www.literacytrust.org.uk](http://www.literacytrust.org.uk),  
[www.coram.org.uk](http://www.coram.org.uk), [www.neb.org.uk](http://www.neb.org.uk), [www.surestart.gov.uk](http://www.surestart.gov.uk)