Supporting children's social and emotional well-being in the Early Years: an exploration of practitioners' perceptions

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Abstract

Children's social and emotional well-being can be supported through their experiences of early years education to promote positive life-long outcomes. This study explored the views of 10 early years practitioners in relation to supporting children's social and emotional well-being. Data was gathered using semi-structured interviews and analysed using thematic analysis. Themes were explored in relation to practitioners' understanding of 'social and emotional well-being' as well as their views on training opportunities in this area. The findings identified how early years practitioners conceptualise social and emotional well-being and highlighted the complexities and intricacies of the parent-practitioner relationship in the early years. The emotional well-being of staff was also pertinent to early years practitioners' views. It is proposed that future research and practice focuses on opportunities for reflective discussions for early years staff and on the development of relationships.

Key words

Early years, social-emotional wellbeing, mental health, behaviour, staff, practitioners.

Introduction

National context

The importance of children's social-emotional wellbeing and mental health is increasingly recognised in the UK in education and in national policy (Department of Health & Social Care & Department for Education [DoHSC & DfE], 2017). The National Health Service (NHS) reports that 5.5% of 2-4 year old children experience a mental health disorder (NHS, 2018). This rises to one in eight children and young people aged between 5-19, with emotional disorders reported as most prevalent (NHS, 2018).

A wealth of research has highlighted the negative long-term impact of mental health difficulties in childhood and adolescence, including poor academic achievement, higher rates of school exclusion, difficulties with future employment, and a higher likelihood of engagement with criminal activity (DfE, 2016). Despite this, children and young people can face long waits to receive support for their mental health needs and support is not always of high quality when it is delivered (DoHSC & DfE, 2017).

The benefits of early intervention for promoting mental health are widely reported and have informed a number of key policies underpinning the early education of children. The independent report 'Early Intervention: The Next Steps' (Allen, 2011) made several key recommendations to government in relation to early intervention, drawing on a wealth of evidence in this area related to early brain development and attachment. A significant recommendation emerged from this review, that early intervention in the Early Years (EY) should be placed at the heart of education and for the government to invest more funding in higher quality provision for younger children.

The UK has witnessed a dramatic shift in the EY landscape in relation to the quality of childcare and the responsibilities of EY practitioners. Following a revision of the Early Years Foundation Stage curriculum (EYFS) in 2012, children's Personal, Social and Emotional Development (PSED) was made one of the three prime areas, alongside Physical Development, and Communication and Language Development (DfE, 2014; Tickell, 2011). This placed a

greater responsibility on EY practitioners to promote the social and emotional development of children aged 0-5.

More recently, national statistics have revealed a rise in the proportion of families accessing childcare in the EY in the UK, with 88% of 3 and 4 year olds now receiving formal childcare (DfE, 2018). Pre-school children in childcare receive on average 18 hours of childcare a week (DfE, 2018). In a review of UK and international EY research, it was found that adult-child interaction (affection & responsiveness) was an important characteristic which influenced whether EY education had an impact upon enhancing child development and outcomes, particularly for children from disadvantaged backgrounds (Melhuish, 2004). These findings reflect the important position of adults working in the EY as role models for young children and in creating an environment which promotes children's emotional wellbeing. The current study investigates the views and experiences of adults working with this age group on emotional wellbeing.

Terminology

Within the educational sector, particularly the EY, there is a tendency for the term 'social and emotional well-being' to be used, rather than 'mental health'. This is potentially due to the perceived stigma associated with mental illness (Frederickson, Dunsmuir & Baxter, 2009; Weare & Gray, 2003). Weare & Gray (2003) advocate the use of the term 'social and emotional well-being' proposing that it is positive, non-medicalised, and relevant to all children, not just those who present with difficulties. In addition, this term adopts a systemic approach to the development of well-being. Therefore the term social and emotional wellbeing is used in the current study rather than mental health.

Existing research

A small body of research has investigated the views of staff working with children in the EY on children's social-emotional wellbeing in the UK, consisting of only three peer reviewed journal articles. Some research has had a particular focus on attachment, considering the bonds between staff and children. Page & Elfer (2015) interviewed EY practitioners about their understanding of the theory of attachment. The study found that staff adopted a largely intuitive approach to forming attachments and highlighted the logistical and emotional complexity of their work with children. Elfer & Page (2015) enquired as to how EY practitioners viewed their work with babies using psychoanalytically informed interviews that had a particular focus on attachment. The study found that practitioners expressed anxiety and uncertainty around achieving a balance between facilitating a close emotional attachment for the babies, which they instinctively felt babies needed, whilst also being sensitive to the proprietorial feelings of parents and maintaining 'professional' relationships (Elfer & Page, 2015).

Another study sought the views of EY practitioners, the majority of whom were teachers, on PSED (Aubrey & Ward, 2013). The research focused on behaviour shown by children. The study identified that EY practitioners were most concerned about low level disruptive behaviours, such as not listening, while the most frequent unwanted behaviours related to children's social skills, such as difficulty turn taking. Violent and aggressive behaviours were also discussed by participants. It was found that practitioners employ a range of individualised strategies to manage behaviour which are usually effective.

This study aimed to build on the existing research by investigating the views of EY practitioners on all aspects of children's social-emotional wellbeing, rather than focusing on

particular areas such as attachment or behaviour. The study seeks the views of practitioners working in EY settings who do not have teacher status.

Rationale for current study

The current study aimed to seek the views of EY practitioners in supporting children's social and emotional well-being within EY settings. The purpose of undertaking this research was to improve understanding of how EY practitioners view their role in supporting children's well-being and to reflect on future implications for professionals in relation to working with EY practitioners. The study aimed to address the following research questions:

(1) What do EY practitioners understand by the term 'social and emotional well-being?'

(2) What are EY practitioners' views on supporting children's social and emotional well-being and/or behaviour?

(3) What training have EY practitioners received to help them in supporting children's social and emotional well-being? What further support or training would they like in the future?

Materials and methods

Design

In line with a critical realist epistemology, an exploratory qualitative research design was deemed appropriate for the current study since it seeks to explore, describe, and interpret the subjective experience of participants (Willig, 2008).

Context

The research took place in children's centres offering day-care within a diverse inner London Local Authority (LA). This LA was chosen to ensure a certain level of homogeneity was achieved with children's centres across the borough sharing similarities in terms of their socio-demographic profile and central advisory team. Furthermore, the researcher sought to assist in developing an understanding of the views of EY practitioners at a local level, rather than attempting to make generalisations.

Participants

All 12 children's centres were approached regarding participating in the study and a total of 10 EY practitioners from 3 centres chose to take part. All participants were women.

Data gathering method: Semi Structured interviews

Individual semi-structured interviews allowed exploration of practitioners' understanding and perceptions of supporting children's social and emotional well-being. A pilot interview was carried out to inform the interview schedule. The final interview schedule included questions, prompts and vignettes that aimed to explore the research questions.

Ethical considerations

Ethical approval was sought both from the university associated with this research and the LA in which it was carried out. Informed consent was gathered verbally and in written form from all the participants prior to them taking part in the research.

Data analysis

Inductive thematic analysis was employed to analyse the data as it enabled exploration of individuals' experiences in a critical realist perspective. The steps outlined by Braun and Clarke (2006) were followed: familiarisation with the data, generation of initial codes, searching for themes, reviewing themes, defining and naming themes and finally the write up. Trustworthiness of the research was monitored in terms of credibility, dependability and transferability (Lincoln and Guba, 1985).

Results

A thematic map was created to present the findings from the research. Four core themes were identified, and these are now discussed alongside associated themes and subthemes.
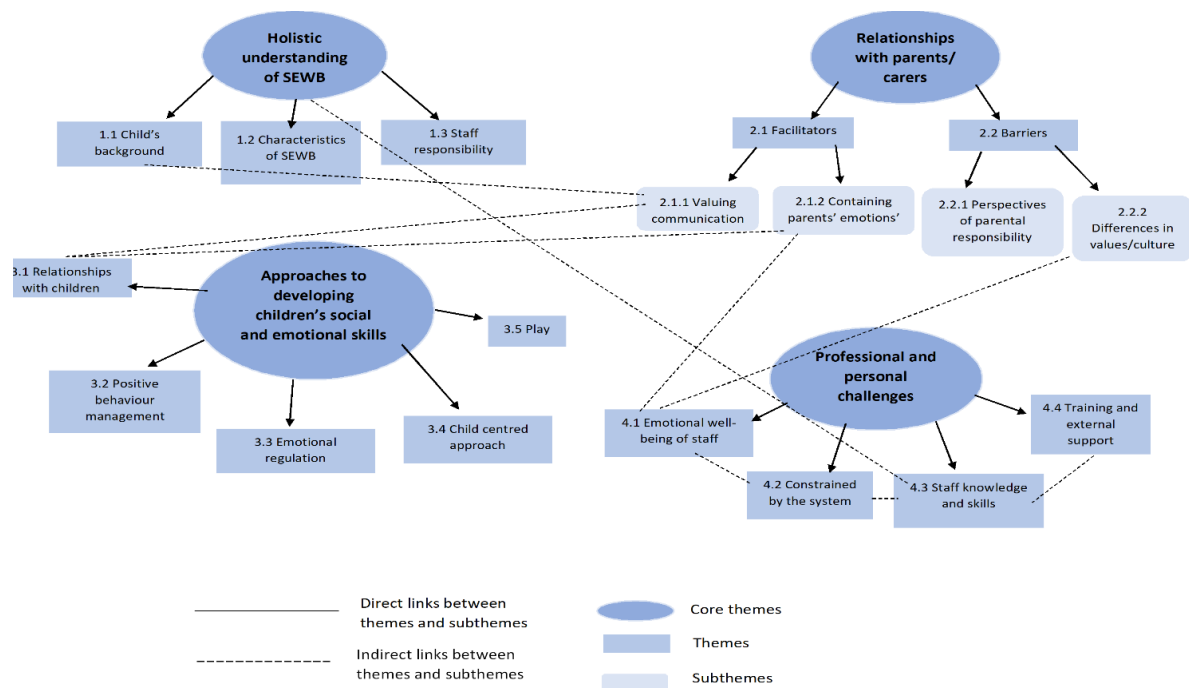
Figure 1: Thematic map.

Core theme 1: Holistic understanding of Social and Emotional Well-being (SEWB)

The data informing this core theme revolved around several themes which predominantly linked to practitioners' understanding of social and emotional well-being.

1.1 Child's background

This theme mainly related to home and environmental circumstances, whether the child had an additional learning need or health issue, or whether they spoke English as an additional language (EAL). The following extract serves to highlight these points:

> *But I think with the social and emotional well-being of a child, it's so important to know that holistic background of a child. And just the ins and outs of everything going out because there is so much that impacts a child's life. (Participant 6)*

Practitioners identified the value of parents being attuned to their child's social and emotional needs:

> *I can see how confident those children are, I can see how secure and how resilient they are, I can see how those children just in terms of their behaviour…..there's a huge difference to those parents who…where the parents don't make time for their children. (Manager 2)*

1.2 Characteristics of social and emotional well-being

Overall, practitioners conceptualised 'social and emotional well-being' as experiencing a sense of safety, security, happiness, and healthiness:

> *..I think it's really more about self-esteem and having a secure base from which they can then forge those really positive and healthy relationships.. (Manager 2)*

In general, practitioners referred to the existence or absence of certain behaviours or emotions when describing social and emotional well-being:

> *Umm I just think it is obviously the.. the way in which a child is displaying behaviour. And you know whether they are withdrawn or happy, that indicates quite a lot to say about how a child is feeling. (Participant 6)*

However, for some practitioners, there seemed to be some uncertainty around the term social and emotional well-being and its overall presentation. Several practitioners also held the view that social and emotional well-being was connected to all aspects of the child's learning and development, with many prioritising this aspect of their development over other areas: '*It's connected to everything, how they interact with any activity, or don't interact, it's all to do with those emotions and how they're feeling'. (Participant 5).*

1.3 Staff responsibility

Several practitioners saw themselves as second carers or role models, teaching children key social and emotional skills as well as having a role in safeguarding children. One practitioner highlighted the significant length of time which children spent in their care which seemed to influence their sense of responsibility: '*…so when you come here, I sort of think yeah I need to support the children, although they are not my children, they are under my care'. (Participant 1)*

Core theme 2: Relationships with parents/carers

This core theme relates to a significant portion of the data which touches upon relationships with parents and carers as being a prominent part of practitioners' every day work in supporting children's social and emotional well-being.

2.1 Facilitators

Practitioners identified several factors which supported and facilitated their relationships with parents and carers and highlighted the positive impact these relationships had on outcomes for children.

2.1.1 Valuing communication

Several practitioners felt working with parents had a positive impact on children's learning and overall development and sought to involve parents and carers as much as possible in their child's experience at the nursery. The following extract from a centre manager captures the essence of this theme:

> *So it's working together, And it's really, when we put a plan in place, and the parents are involved, we find things move on quicker. Yeah, and the child gets supported… (Manager 1)*

Although several practitioners reported experiencing difficulties communicating with parents and carers, they seemed to value their input and sought to maintain consistency in their communication: '*I think professionally you need to keep trying, you should keep talking, keep acknowledging the [parents], have regular meetings, you know..' (Participant 4).*

2.1.2 Containing parents' emotions

Practitioners reported that parents and carers were often highly anxious during periods of transition for their child. This theme captures practitioners' perceptions of their role as a 'container', supporting parents to manage or contain emotions potentially evoked by the separation from their child. This act of containment appeared to create a supportive atmosphere for parents from the perspective of practitioners:

> *So we like to work with the parents to make them feel secure, and, you know, if they have any anxiety or anything they can share it with us and we can support that in that aspect. (Participant 2)*

2.2 Barriers

2.2.1 Perspectives on parental responsibility

There seemed to be an expectation from some practitioners that parents and carers held the answers in relation to their child. Several practitioners also perceived a lack of parenting skills and attributed failure on the behalf of parents and carers for a lack of children's social and emotional skills and poor behaviour. Therefore, on occasion, parental ability was viewed as a barrier to supporting children's social and emotional well-being: '*And that's why I think most children they misbehave so much because the parent is not teaching them what is acceptable behaviour and what is not acceptable'. (Participant 7).*

In addition, several participants noted that parents did not always appear engaged or pro-active in supporting their child's overall development: '*Because we do have sometimes parents who are just not interested. So they're just, so it's harder…' (Participant 5).*

2.2.2 Differences in values/culture

Practitioners reported that parents and carers often minimised or downplayed concerns, that were raised about their child: '*…parents might turn around and say ohh his brother didn't talk until he was five.. and when he goes to school, they'll pick up the learning..' (Participant 6).*

Practitioners also expressed difficulty shifting parental perceptions about certain issues, such as child discipline which was often rooted in cultural differences. One practitioner described an experience of working with a mother who was unhappy about her children interacting with another child based on their cultural background. It seemed that practitioners often sought to balance the social and emotional needs of the child with the wishes of parents leading to feelings of frustration and anxiety.

Core theme 3: Approaches to developing children's social and emotional skills

3.1 Relationships with children

Forming relationships with children was viewed to be pivotal in supporting their social and emotional well-being and helping them to develop confidence and a sense of security. In addition to implementing the key worker framework, several practitioners made reference to providing physical comfort to the child, giving them attention and coming down to their level in order to build attachments. Practitioners also discussed the importance of familiarity and consistency in the development of children's social and emotional skills:

> *... so we have a constant routine, the same routine. When they're getting ready, or they've just finished they're having a snack, we'd sit them down and briefly explain what is going to be happening in the session. (Participant 8).*

3.2 Positive behaviour management

Practitioners reported using a number of positive behaviour management techniques with young children. These included: distraction, allowing the child time and space to calm down, reinforcement of positive behaviours, teaching clear rules and consequences, and maintaining consistency in their approach. The following quote captures the techniques used:

> *We would really focus on when the child is doing something positive or behaving in a, um, in a positive way towards another child because otherwise things can get a bit, people can get a bit focused on what a child is, the bad behaviour.. (Participant 5)*

3.3 Emotional regulation

Participants acknowledged the importance of children being able to label and express their emotions to successfully self-regulate. The most common techniques used by practitioners included acknowledging children's feelings, modelling emotional language, encouraging reflection, and teaching self-regulation strategies. A centre manager referred to a space in the children's centre known as the 'feelings area' that children were encouraged to access:

> *...they've got like a, a space in the room where the child, if they're misbehaving.....there's lots of things like a stress ball, um there's like pictures, you know, where the child can actually say...I'm feeling very angry, and there will be somebody there to talk to them about why they did what they did, and so on and so forth. (Manager 2) .*

3.4 Child centred approach

Many practitioners reported using children's interests and adapting the play environment to support their emotional well-being. A few practitioners also considered the child's cultural background:

> *We brought in some Turkish music, err, things that will make him feel comfortable, pictures of family, so.. Eventually, he settled. (Participant 2)*

Several practitioners made reference to treating all children differently and some consideration was given to the child's age and stage of development when implementing certain strategies for behaviour. Several practitioners stressed the importance of child-led play activities, with the adult taking a step back to encourage independence:

> *I've found that providing them with free-play child led initiated activities that it really boosts their self-esteem, their confidence umm and their social emotional development. (Participant 8)*

3.5 Play

Several practitioners mentioned developing skills such as turn-taking and sharing, and encouraging engagement in collaborative play, as well as the importance of giving children the opportunity to resolve peer conflicts:

> *We do encourage children like to be nice to their friends, you know at that age they bite, they pull, all kinds of things.. we encourage them social skills, taking turns, sharing… (Participant 1)*

Core theme 4: Professional and personal challenges

4.1 Emotional well-being of staff

A large portion of the data identified the physical and emotional demands experienced by practitioners in their daily work with children. Practitioners demonstrated compassion towards the children they worked with, however this often translated into feelings of worry and concern. Furthermore, staff appeared to supress their emotions to maintain a sense of professionalism and to uphold the boundaries of their role. In some cases, this suppression of emotions seemed to elicit feelings of hopelessness and frustration for practitioners:

But, some people have different views and I have to respect that, so even though you hear the child crying and it's breaking your heart you can't say anything so you look and then you walk away, and you know deep inside that something need to be done, and you.. so it's something that I'm seeing lately and I don't like it but...(Participant 2)

The quote above illustrates an underlying tension between different professionals in relation to supporting children's social and emotional well-being and highlights a difference in individual practitioner values. A large proportion of participants reported that working with parents often generated feelings of anxiety and one practitioner highlighted the difficulty in maintaining professional boundaries with parents.

Staff also made reference to feelings of exhaustion as a result of their work with children, particularly during times of transition and when supporting behaviour. One manager discussed the impact of transition on staff's well-being:

So, it definitely can have an impact on staff. And I see the impact rise with umm staff within transition times. Because within transition times, children bring a lot of emotionally umm behaviours through due to attachment theory, being left by their parents, and there is a lot of crying going on.. and I do find that our staff's stress levels do rise (Manager 1)

The emotional and physical impact of the job was also reported to extend beyond the nursery environment. Several practitioners reported that they worried about children's well-being when they left work, whilst others shared the impact their work in EY had on their personal life. In general, staff explained that they would often turn to one another for emotional support or would remove themselves from a situation if they felt overwhelmed, however one participant did not feel supported in this way.

4.2 Constrained by the system

Practitioners discussed external factors including funding cuts to education and a pressure to meet targets as barriers to meeting the social and emotional needs of children:

> *Umm, because we're a children's centre that are for the vulnerable children, but then there's all these targets hit, so that's the side of it that umm can be frustrating, and I think it impacts, like again, it filters through. (Participant 6)*

Similarly, practitioners expressed challenges around the time spent completing paperwork which took them away from directly supporting children. Practitioners also discussed the repercussions of cuts to EY funding. This included a reduction in external agency support and limited training opportunities for staff:

> *I know that we've trumped down on training over the last 2-3 years……before you used to have consultants come in and do it, we'd go off to a centre and do it. That's not always available now. (Manager 1)*

4.3 Staff knowledge and skills

In general, participants reported feeling confident in supporting children's social and emotional well-being:

> *Yeah, er, I'm confident about that because I've had years of experience of managing it (Participant 1)*

However, this perceived confidence was not always backed up by a knowledge of child development, and a large portion of the data reflected practitioners' lack of understanding in this area:

I could probably talk about, you know, child development for a long time, but I won't... but at the same time, I do see it as an area that is slightly misunderstood by some practitioners and not supported appropriately. (Manager 1)

Practices in relation to supporting children's social and emotional well-being were often underpinned and guided by practitioners' own personal experiences and values. In general, practitioners held different views on child development and behaviour, often linked to their own experiences including being a parent: '*Coz some of our nursery nurses are parents so there's, you often hear "well I do this at home and this is okay for my child"'. (Participant 5).*

A majority of practitioners highlighted inconsistencies in behaviour management techniques, often influenced by differences in values, but also a fixed mind-set adopted by many staff. This had implications for staff morale, as well as the development of children's social and emotional skills. Practitioners also reported difficulties interpreting children's behaviour and several seemed uncertain about the term social and emotional well-being and its overall presentation. As such, a lack of knowledge of behaviour and child development seemed to result in practitioners misjudging certain situations, including magnifying concerns, or missing important signs.

4.4 Training and external support

Practitioners identified several training sessions that they had received which contributed to their understanding of supporting children's social and emotional well-being. This typically included mandatory training on safeguarding and child first aid, as well as INSETs on topics such as supporting children's behaviour. Practitioners valued support from external professionals such as Speech and Language Therapy and Educational Psychology and

mentioned the benefits of their involvement. For example, one member of staff explained that external support provided her with a sense of reassurance around her practice in supporting children's overall well-being and development.

In general, staff reported a lack of training in the area of children's social emotional well-being and supporting behaviour. One practitioner highlighted a discrepancy in the training provided for staff in supporting children's speech and language skills, compared to their social and emotional development:

> *I feel like in early years especially in children's centres, now that I've been in a children's centre, you get so much support for speech and language, like loads of support, but you don't get no support for like dealing with their social, like supporting their social and emotional development. (Participant 4)*

Staff reported a need for more training in supporting children's well-being, including more input on child development, attachment and managing challenging behaviour. Interestingly, a large proportion of participants expressed a desire for training on working with parents, specifically around how to communicate sensitive information and how to support parents emotionally.

Practitioners hoped for an increase in external expertise, including support from Educational Psychology services. Several practitioners discussed the idea of an Educational Psychologist being 'attached to the centre' with the view that they would be available for staff training and drop-in sessions. There appeared to be a common theme around 'accessibility' of professionals and staff wanting a familiar and consistent person that they could turn to in order to seek advice.

Discussion

This study has provided insight into a relatively understudied area exploring the views of EY practitioners in relation to supporting children's social and emotional well-being. The section will briefly summarise the finding linked to each research question and compare these to the existing literature.

Research Question 1: What do EY practitioners understand by the term 'social and emotional well-being?'

This research suggests that that EY practitioners conceptualise social and emotional well-being in terms of the existence or absence of certain behaviours or emotions displayed by the child. However, the study revealed some uncertainty for EY practitioners around the term social and emotional well-being and its overall presentation. Within the current sample, there were a diverse range of definitions and terms used reflecting a range of different perspectives.

Practitioners described children with high levels of social and emotional well-being as experiencing a sense of safety, security, happiness, and healthiness, as well as being able to regulate their emotions, build healthy relationships and display appropriate social behaviours. Furthermore, practitioners reflected on well-being as being the foundations which underpin children's learning and development.

In general, practitioners perceived their role as teaching valuable social and emotional skills, as well as safeguarding children. Their views mostly reflected a social model of well-being, in which well-being was understood as being developed through interacting personal, social, economic, and environmental factors, rather than purely within-child factors (Bronfenbrenner, 1979). Practitioners also reported difficulties interpreting children's behaviour, including a lack of knowledge of different behavioural presentations and underlying causes.

Weare and Gray (2003) note that a wide range of terms are being conveyed for social and emotional well-being in policy and legislation, which may have implications for the way in which this term is understood and acted upon. To the researchers' knowledge, the conceptualisation of social and emotional well-being from the perspective of EY practitioners has not previously been captured.

Research Question 2: What are EY practitioners' views on supporting children's social and emotional well-being and/or behaviour?

Approaches to supporting SEWB

The research suggests that EY practitioners are implementing several effective approaches to supporting the development of children's social and emotional skills. Practitioners viewed relationships with children as pivotal in supporting their social and emotional well-being. Research suggests that positive child-adult relationships allow the child to feel a sense of safety and security, which facilitates their exploration of the world and supports learning from their environment (Zeanah, Berlin & Boris, 2011). Furthermore, according to attachment theory, the relationships formed in the early years of a child's life form the basis of the child's 'internal working model' for future relationships (Bowlby, 1969). This gives EY practitioners an important responsibility in developing and sustaining key relationships with the children and parents with whom they work.

Practitioners discussed the use of techniques to develop children's emotional regulation skills as well as implementing positive behaviour management. This suggests that behavioural techniques used in early child care have evolved in line with current educational policy which emphasises the role of educational settings in promoting resilience in children and equipping

them with inner resources and problem-solving skills (DfE, 2016). In addition, practitioners highlighted the importance of a child-centred approach, focusing on the child's interests, adapting the child's environment and following their lead. There also seemed to be a common understanding of the importance of supporting children's social interactions and building peer relationships through play-based activities.

The practices implemented in supporting children's social and emotional well-being seemed to be underpinned and guided by EY practitioners' own personal experiences and values, rather than a theoretical knowledge or understanding. Staff reported feeling confident in supporting children's social and emotional well-being, although this perceived confidence was not backed up by a 'theoretical knowledge' of child development, nor a clear understanding of the underlying reasons for children's behaviour. Staff adopting an 'intuitive' approach to supporting children's well-being has been highlighted in previous research carried out in primary school contexts (Rothi, Leavey, & Best, 2008; Wood; 2016). This study expands upon these findings to reveal similar practices in EY contexts. As such, this is likely to have implications for identification, management, and intervention for children in the EY who may present with social and emotional difficulties.

Relationships with parents/carers

Although the study did not initially set out to explore practitioners' relationships with parents and carers, findings have highlighted the significance and complexities of relationships with parents and carers in the EY. In general, it was felt that consistent and open communication with parents and carers could help inform the strategies and techniques used by practitioners within EY settings and ensure positive social and emotional outcomes for children. Active communication, such as sharing information about family values, traditions, and beliefs, as

well as children's interests, is likely to promote a sense of belonging and safety for parents and their children within the EY setting community (Maslow, 1943). Research suggests that an individual's sense of belonging is positively linked to their well-being and mental health (Cemalcilar, 2010). This study offers a novel insight into EY practitioners' relationships with parents and carers and their views on communication and promoting engagement. Similar findings have been reflected in studies exploring the views of teacher populations (Connelly et al., 2008; Danby & Hamilton, 2016).

Although communication between parents and carers was highly valued, there was a tendency for practitioners to place responsibility on parents for the development of children's social and emotional well-being and/or behaviour. Interestingly, there seemed to be an expectation from some practitioners that parents held all the answers in relation to their child. As such, there was a sense of frustration when parents were unable to shed light on possible reasons for their child's difficulties. These findings suggest a possible assumption on behalf of EY practitioners about their rights and roles in their relationship with parents (Brooker et al., 2010).

Some practitioners also attributed a lack of parenting skills for their child's difficult behaviour and felt that children were not always taught how to behave appropriately by parents. Supporting these findings, previous research has indicated a culture of blame created by educational practitioners towards parents for a lack of their children's social and emotional skills and inappropriate behaviour (Broomhead, 2013; Wood, 2017).

Containing parents' emotions

Practitioners in the sample often took on the role of 'container' providing regular emotional

support for parents who experienced high levels of separation anxiety (Cassidy & Shaver, 1999). The theory of 'container-contained' was first introduced by Bion (1962) when studying early experiences between infants and their carers. He proposed that the infant projects unmanageable feelings onto the primary carer, who in turn reflects this back and responds in a way that communicates an understanding. The infant then feels reassured by their care giver's response allowing their feelings to become more tolerable. The process of containment not only occurs between infants and carers but between adults too (Elfer, 2007).

However, practitioners felt they were not always able to contain parents' emotions and would avoid engaging in emotional and difficult interactions. For some parents, the act of containment also seemed to create an emotional attachment, which manifested as an overreliance on practitioners. This led several practitioners to discuss the importance of maintaining an emotional distance from parents to support their own well-being. The projection of parental emotions onto others (including practitioners and children), can be understood through exploration of the principles of transference in psychodynamic theory. According to Freud (1940), transference occurs when individuals displace unresolved conflicts, dependencies, and aggressions onto other people for reasons that are not always clear. In this context, parental emotions, potentially triggered by separation from a child, are unconsciously displaced onto practitioners.

Freud (1940) argued that identification of the transference relationship can be an important step in understanding the true meaning behind a person's behaviour. It is recognised that EY practitioners are not qualified to a level in which they are able to explicitly work through transference with a parent. However, being aware of potential sources of a parent's displaced emotion (e.g. divorce, loss of a relative) could allow for increased understanding and empathy within this relationship. This could be made possible by creating a welcoming environment, which fosters and enhances the development of trusting and open relationships

with parents.

Emotional well-being of staff

Another distinctive finding that emerged was the impact of supporting children's social and emotional well-being and building relationships with parents and carers, on EY practitioners' own well-being. It seemed that practitioners would often experience emotional labour as part of their daily work with children and parents, eliciting feelings of frustration and exhaustion.

A source of anxiety and discomfort for many practitioners was their work with parents. Many parents were seen to have a fixed mind-set about certain issues, such as child discipline, causing friction between parents and practitioners. In addition, practitioners found it difficult to deliver sensitive information to parents about their child's development and behaviour and to question them about their practices at home. As identified in the current study, conflict between practitioners and parents seemed to be heavily influenced by individual social and cultural backgrounds, as well as perceptions about identity, values, role, and status (Brooker et al., 2010).

The conflict between parents and practitioners may be understood in the context of a 'caring triangle' which involves a triangulation of the relationship between the child, parent, and practitioner (Hohmann, 2007). Hohmann (2007) suggests that conflict arises between practitioners and parents when there are differences in opinion surrounding their control over the childcare provided and when both parties feel they have equal authority to make decisions. As such, Brooker et al. (2010) argues that that a lack of recognition and care for each individual within the 'caring triangle' is likely to impact upon the well-being of adults and children involved.

Previous research has linked higher levels of emotional labour to emotional exhaustion and poor work satisfaction in teachers (Kinman, Wray & Strange, 2011). The well-being of educational professionals has also been found to influence the level of emotional support offered for children and the development of children's emotion knowledge and appropriate emotional behaviours (Cassidy et al., 2017; Gottman, Katz and Hooven, 1997). Similarly, teachers of pupils with emotional difficulties have reported wanting opportunities for reflection through objective, solution-focused focused support (Rae, Cowell & Field, 2017). Within the context of EY settings, Elfer (2012) proposes that practitioners who are involved in interactions which enhance social-emotional learning should be given the opportunity to talk through the emotional demands of their work in a supportive capacity.

Research Question 3: What training have EY practitioners received to help them in supporting children's social and emotional well-being? What further support, or training would they like in the future?

Practices related to supporting children's social and emotional well-being were generally informed by training on safeguarding, play, behaviour, and the Solihull Parenting approach. In addition, practitioners had received support from external professionals including Speech and Language Therapists and Educational Psychologists where their involvement was statutory. However, several practitioners perceived current training in EY to be rigid, repetitive and shallow. Overall, there seemed to be a general lack of training specific to the area of children's social and emotional well-being.

Practitioners reported a need for more input on child development, attachment, and understanding and managing challenging behaviour. A particularly prominent finding was the desire for training on working with parents. This centred around how to feedback sensitive

information (i.e. developmental concerns about their child) and delicately explore factors related to their home life, as well as how to support parents emotionally.

A lack of training in relation to supporting children's social and emotional well-being has been highlighted in previous research (Conelly et al., 2008; Rothi et al., 2008; Spratt, Shucksmith, Philip & Watson, 2006). In addition, the current research has been undertaken within a context of austerity in LAs which is likely to have had implications for the delivery of training in schools and EY settings (Hastings, Bailey, Bramley, Gannon & Watkins, 2015).

Weare and Gray (2003) argue that teachers should receive formal training on supporting children's social and emotional well-being and identifying appropriate interventions to target these areas. More recently, the government Green Paper 'Transforming Children and Young People's Mental Health' has proposed additional training of whole school approaches to promoting better mental health (DoHSC & DfE, 2017). It is hoped this will allow school staff to feel better equipped in their understanding of mental health and prevent high numbers of referrals to mental health services. Findings from this study suggest that additional training on promoting mental health and well-being is likely to be valuable if extended to practitioners working in EY settings.

Implications for EY settings

A number of practical suggestions result from these findings:

- Further developing EY staff's understanding of child development, attachment, behaviour and communicating with parents through training opportunities.
- EY settings could develop a working definition/shared understanding of 'social and emotional well-being.' Based on the conceptualisation of social and emotional well-

being in this research, this could encompass terms such as 'self-esteem', 'security', 'happiness', 'healthiness', 'relationships', 'interactions', 'emotions' and 'behaviour'.

- Regularly reviewing current behaviour management polices with staff in EY settings.

- Expanding upon current systems which support the development of relationships with parents and carers. For example, increasing the frequency of meetings with the child's key worker, reviewing settling in/transition procedures, a private room to speak with parents and carers, suggestion boxes for parents and carers or welcoming parents on trips or celebration events run by the centre.

- The emphasis on relationships with parents and carers should be embedded within the culture and vision of EY settings e.g. parental needs analysis and/or ongoing monitoring and evaluation of practices related to work with parents and carers.

- Embracing culturally competent practices and interventions e.g. translating materials into a family's native language, training on cultural sensitivity and awareness to further support their work with parents and carers.

- Opportunities for staff to reflect on issues through regular supervision groups, facilitated by external agencies such as Educational Psychologists.

Strengths, limitations and further research

Strengths of the study include a sound methodological design; the choice of semi-structured interviews and thematic analysis were well suited to the critical realist position of the research and were appropriate for obtaining practitioners' views. In addition, the researcher followed a clear, replicable model when undertaking the analysis (Braun & Clarke, 2006). Potential limitations include recruitment; only managers of children's centres which had a clear implementation of practices related to supporting social and emotional well-being volunteered

to be included in the study. Participants within the study were all female which could have implications for how social and emotional well-being is constructed (Root & Denham, 2010).

Further research might focus on a number of areas. Firstly, the current study could be extended by interviewing a larger number of stakeholders such as practitioners working at non-maintained nurseries, playgroups and child-minders. Secondly, as relationships with parents and carers was a prominent theme, a study could be conducted exploring the views of parents in relation to supporting children's social and emotional well-being, their partnerships with EY settings and their views on how future relationships can be promoted. Thirdly, an evaluative piece of research may be useful to assess the impact and effectiveness of an intervention aimed at promoting the parent/practitioner relationships.

Conclusion

Linking in with the national and political mental health agenda, this research offers an important contribution in presenting the views of 10 EY practitioners in relation to supporting children's social and emotional well-being.

The study revealed that staff conceptualisation of social and emotional well-being for children under 5 is informed by a range of individual perspectives relating to a child's level of happiness, healthiness, stability, security, relationships, and emotional regulation. In general, practices in supporting children's SEWB were found to be underpinned by staff's personal experiences and values rather than a theoretical knowledge. This seemed to have implications for identification, management, and intervention for children in the EY who presented with social and emotional difficulties.

Findings also highlighted the significance and complexities of relationships with parents and carers in the EY within the context of supporting children's social and emotional

well-being. The negative impact on practitioners' own well-being is also documented throughout the current study and highlights the need for opportunities for EY practitioners to discuss the emotional demands of their work in a supportive and reflective capacity.

Overall this exploratory piece of research suggests that approaches aimed at supporting children's well-being in the context of EY settings should focus on facilitating parent-practitioner relationships and supporting the emotional well-being of practitioners working with young children in EY settings.

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