
The Personal is Professional: professionalism and the birth to threes practitioner

JULIA MANNING-MORTON

London Metropolitan University, United Kingdom

ABSTRACT This article puts forward the idea that in order to sufficiently meet the needs of very young children and thereby develop quality provision, early years practitioners must develop a professional approach that combines personal awareness with theoretical knowledge. It argues that the development of such abilities is enabled in process-oriented training over an extended period of time and describes the 'Key Times' Project (London Metropolitan University with the London Borough of Camden, 2000-2005) as illustration of a process that impacted positively on practitioners' professional self-worth through valuing self-awareness in relation to the physical and emotional dimensions of practice.

Introduction

In the 1970s feminism redefined the concept of the political as not only being about the public sphere but about the day-to-day experiences of women in their homes, workplaces and relationships, encapsulated in the phrase 'the personal is political'. This article contends that 'professionalism' in the early years must also be understood in terms of the day-to-day detail of practitioners' relationships with children, parents and colleagues; relationships that demand high levels of physical, emotional and personal knowledge and skill. Therefore, being a truly effective early years professional requires a reflexive interpretation of those relationships not only through the lens of our theoretical knowledge but also through the mirror of our subjective personal histories and our present, feeling, embodied selves.

This idea was the starting point for the Key Times Project (London Borough of Camden and London Metropolitan University Partnership 2000-2005), which started as an action research project (Cohen & Manion, 1994) to explore how practitioners working with children from birth to three might best be supported in improving their practice, particularly in developing close, responsive and respectful relationships with children.

The initial idea for the research arose from observations the author had made in the local authority's children's centres that indicated that although the centres shared a baseline of good practice (as set out in centre policies and procedures), practice in relation to meeting children's emotional needs contrasted sharply between practitioners. These observations echoed earlier observations by Goldschmied & Jackson (1994) and Elfer (1996) and research by Hopkins (1988) and Bain & Barnett (1980). These authors highlighted the organisational and individual practices that, as psychological defences against the emotional demands of the job, often prevent practitioners from meeting the needs of very young children. Each of these writers brought to bear a psychoanalytic perspective on interpreting and understanding these scenarios and the influence of their writings meant that exploring the professional, personal, social and cultural relevance of attachment theory (Bowlby 1969, 1973) to project members' lives and practice became central to the group sessions. But the premise of the project was that it was not sufficient to expand theoretical knowledge of this and other areas of children's development without practitioners having the opportunity to reflect on the links between their own experiences, feelings, values and beliefs and those of the children they worked with. By approaching the project in this way it was

more likely to implement change that arose from their emotional understanding about good practice rather than from externally imposed procedures.

As well as considering the perspective of individual motivations or conflicts in practitioners' responses to children's emotional needs, the social context in which the author's observations were made was also an influential factor in shaping the focus of the project and in highlighting contrasting views of professionalism. The centres in the project had been some of the first in England to amalgamate day nurseries and nursery schools into integrated children's centres, combining staff with different qualifications on different pay and conditions of service. In general, those with qualified teacher status had better pay and conditions and were working with children from three to five years. In addition, the late 1990s saw the introduction of the Desirable Learning Outcomes for five year olds (SCAA, 1996) and in 2000, the English Qualifications and Curriculum Authority published *The Curriculum Guidance for Foundation Stage* (QCA, 2000) for three-to-six year olds. Both these national publications had funding for training attached and the teachers in the children's centres became designated leaders on curriculum development.

This led to an emphasis at the time on the education and learning of children over three but at that time concerns were raised by the authority's inspection team that implementation of the curriculum guidance was promoting an instrumental view of an 'education' professional as someone whose proper focus was on developing children's cognitive skills, leading to formal, instructive approaches to children's play and learning. As one practitioner said on joining the Key Times group, 'I want to redress the balance of focus on the over threes' (Manning-Morton, 2000, p. 3). This skewed emphasis was exacerbated during the 1990s by rightful concerns about the sexual abuse of children, which sometimes led to ill-advised 'no touch' policies and to viewing disembodied practice as professional (Tobin, 1997; Pound, 2005), and consequently to a neglect of the physical and emotional well-being of the children. Such approaches seemed to be impacting most strongly on children from birth to three, not only because their particular needs were not addressed in a 'top-down' curriculum but also because of lack of training and support. This was further compounded by worse pay and fewer holidays, which meant practitioners felt neglected, undervalued and unsupported in comparison to their colleagues working with older children. In her report on private day nurseries in 1994, Helen Penn noted that 'The quality of care for children aged two and under is directly linked to pay and conditions of work of staff, and to staff support and training' (Penn, 1995). In such circumstances it is difficult to develop a sense of professional self-worth, which in turn may impact adversely on practitioners' commitment to provide well for children. Therefore the Key Times Project was based on the view that the well-being of children is linked to the well-being of the adults caring for them.

In light of this context, the project aimed to create opportunities for practitioners not only to share good practice, experiences and difficulties in a supportive environment (in anticipation that this would increase their sense of professional worth) but also to recognise and understand the decision-making structures that may impact on their individual power to transform practice. Perhaps in taking risks by reflecting on their own practice and challenging their own ideas, confidence could be developed for them to challenge their colleagues' practice and service policies where appropriate. This approach was informed by feminist approaches to teaching and learning whereby 'the authority of the feminist teacher ... finds expression in the goal of making students themselves theorists of their own lives by interrogating and analysing their own experience' (Weiler, 1991, in Edwards, Hanson & Raggatt, 1996, p. 28).

Meeting the project's aims of increasing professional self-worth through extending practitioners' self-awareness, intra- and interpersonal skills as well as their theoretical knowledge of children's development was partly addressed by adopting an action research approach in which practitioners also undertook small-scale pieces of action research to inform the project (Elliott, 1991). Andragogical approaches (Knowles, 1970) to adult learning were also used. In this approach adult learners are identified as having the following characteristics:

1. they have developed a self-concept as self-directed human beings, who manage their own lives;
2. they have growing reservoirs of experience, which are a resource for learning;
3. moving through phases in adult life requires changes in role, which engenders a readiness to learn; and

4. adults have a particular 'problem centred' orientation to learning arising from a perspective of immediacy of application of learning to real life situations (Knowles, 1970).

This perspective required developing a process-oriented focus that was underpinned by the following principles:

- that people have a potential to grow and develop throughout their lives;
- that we are all learners and teachers of different things, at different times, in different places;
- that personal experience is a source of knowledge;
- that learning is a combined process of feeling, thinking and doing; and
- that knowledge is power but self-knowledge is empowering (Manning-Morton, 2000).

By working to these principles the project aimed to model respect for and value all areas of children's development and learning, which in turn valued a professional identity that respected all aspects of practice and areas of knowledge and experience.

The Key Times Project began as an action research project undertaken for my MA in Early Childhood Education with Care. The aim of the project was to explore an alternative route to improving the quality of provision for birth to three year-olds in group day care. My interest coincided with the aims of the local education authority (LEA) at the time, which was to gain 'Early Excellence' status for all of its nursery centres. The project therefore had ongoing, senior-level support from the beginning and, as the project developed, financial support to produce a quality framework document and video (Manning-Morton & Thorp, 2006 forthcoming), as well as to provide staffing cover in order to release practitioners from their workplace. These interests also coincided with the thirst for recognition and the urge to provide well for children of the practitioners working with birth to three year-olds in the borough. A manager/senior practitioner and a birth to three practitioner from each of the seven LEA settings were invited to the initial seven sessions that laid the foundations of the project through developing effective relationships with young children. When funding became available to release staff and to produce the framework document, the group then expanded to include practitioners from the independent provider sector.

Subsequent to the launch of the framework, I continued to give intermittent support to a now autonomous 'birth to three practitioner support group' and also developed a Higher Education Certificate in working with birth to three year-olds for the London Borough of Camden, to be delivered to a core group of practitioners from the project and beyond, and to train them as trainers in order to disseminate the framework. These practitioners are now responsible for delivering the LEA's training strategy in relation to birth to three year-olds.

A review of the project in 2004 included observation visits to participating centres and group interviews with practitioners who had been part of the project or who were involved in implementing the framework. Responses to the review indicated a heightened awareness and valuing of this work within the centres and across the education department of the authority (Manning-Morton, 2005). Individual responses showed a high level of awareness of the effect of building close relationships upon both children and practitioners. Furthermore, there was evidence of increased professional self-confidence with respect to articulating their practice philosophy. This heightened professional self-worth manifested itself most clearly amongst the members of the Key Times Training Group, who have put the training strategy on hold until they have negotiated financial recognition and practical support for the additional role they are assuming in their workplaces.

Developing a Holistic Professional Identity from a Dualist History

Developing a professional identity that respects all aspects of practice and areas of knowledge is an ongoing and contested debate within the early years community. The current situation has arisen from the historical context of early years provision that has traditionally been divided between 'care and 'education' and provision for children aged over or under three years. This context has allowed a concept of professionalism to emerge that values some practitioners' areas of expertise more than others'. This discourse has its roots in a concept of professionalism which values knowledge over skills (Saks, 1983), so knowledge about children's learning is seen as superior to the ability to help a child with their toileting (for example). A notion of professionalism that divides

knowledge and skills in this way has its roots in a Cartesian mind/body dualist philosophy that privileges the thinking mind, which offers freedom and control through rationality and knowledge, over the physical constraints of the body and the unpredictability of emotion (Damasio, 1994). In society, the rational is equated with masculinity and the public spheres of science and knowledge while the physical and emotional are seen as essentially feminine and are located in the private, domestic sphere (Okin, 1984).

In this Cartesian world-view, caring for children from birth to three – a job that entails daily immersion in the physical frailty of bodily processes and in the intensity of unpredictable and fluctuating emotions – has been seen as an extension of women's 'natural' domestic sphere. It may not be surprising then, that in order to gain professional recognition, a female dominated workforce might prioritise adopting rational/'educative' practices and seek to distance themselves from physical and emotional care.

However, this is problematic in the early years context, not because knowledge and education should not be valued but because it devalues 'the art of care giving' (Lally et al, 1997), which is integral to early years practice. It does not acknowledge the important skills required of the nappy changing teacher or the knowledge of the reflexive carer. Both are essential to working with young children and should be manual work but *skilled* manual work that draws on a broad theoretical knowledge, a deep understanding of individual children and a high level of self-awareness.

The Physical as Professional

Young children's bodies are at the centre of their experience and are a key means for learning. From the beginning of life children are using sensory and kinaesthetic experiences to learn about themselves, other people and the world around them. In addition, because of their physical dependency, babies and young children spend a lot of their time being physically handled by people who are bigger and stronger than they are. In a traditional day care model, high levels of attention were given to children's health and physical care but often in ways that treated children as extensions of the domestic system (Bain & Barnett, 1980; Marshall, 1982; Belsky, 1988) and denied their individual needs and therefore their emotional well-being. However, children do not thrive if they do not also receive loving attention, so perfunctory attention to children's physical needs alone is not sufficient. The somatosensory system of the brain, which integrates tactile and kinaesthetic stimulation, is active at birth. It develops through touch and is important not only for tactile sensitivity, motor skills and understanding of the physical world but also for good health and emotional well-being (Eliot, 1999). In their earliest years physical holding helps babies to establish the self-other boundary at the level of the skin and it seems that the orbital prefrontal region of the brain is especially expanded in the right hemisphere of the brain at this time, an area which is dominant for understanding non-verbal affective signals such as facial expressions, gestures and speech rhythms and for pleasant and painful physical touch (Schore, 2003). In this way we can see how the manner in which babies and young children are held and touched is internalised and becomes part of their sense of self. It is sensitive, responsive interactions between the adult and child that support children developing a positive self-concept (Gerhardt, 2004). Such positive physical experiences also help young children to regulate their physiology as they release chemicals that have a beneficial effect on their immune systems (Eliot, 1999; Schore, 2001). So experiencing physical interactions such as being held, cuddled and rocked and the excitement of physical games that young children can begin, stop or reject is an essential part of them developing good physical and mental health.

These aspects of development are a primary consideration for the concept of professionalism put forward here and are the reason for arguing that performing the role of a professional in early childhood education and care is necessarily manual work. Clearly, understanding the theoretical basis for the importance of children's physical experiences and development is helpful for practitioners to value physical care as a key aspect of professional practice. However, the extent to which children retain a sense of pride and pleasure in their physical (and therefore personal) self also depends on the practitioner's accepting responses to children's natural curiosity about themselves, what their body can do and what it produces. In a historical and cultural context that

devalues the body and often views its natural operations as taboo, developing an accepting and constructive response to children's physical explorations necessitates practitioners examining their personal experiences and cultural values in order to fully incorporate into their professional identity the ability to talk about, think about and handle (physically and emotionally) children's physicality.

From a Weberian and Marxist perspective when the state licenses a profession to carry out a crucial social function, that profession needs also to become expert on the darker side of social situations. So, for the privilege of intervening and being expert in our bodies, doctors must engage with disease and death, lawyers with crime, for example (Dingwall & Lewis, 1983). In this view then, for the privilege of being seen as experts in children's learning and development, early years practitioners need to also engage with the darker side of children's learning and developing, with their distress, their defiance, their dependency and their inherent mess and chaos. This is a major professional challenge for early years practitioners, as engaging closely with young children touches deeply held personal values and often deeply buried personal experiences, issues that are not able to be adequately addressed through standard, content-focused training.

With this in mind the Key Times group often engaged in experiential exercises that extended practitioners' awareness of children's physical vulnerability. Practitioners in the group, often with the playfulness displayed by many early years practitioners, allowed themselves to feel the exhilaration and frustration of limited but rapidly emerging physical mobility and skills. Through role-play (of being fed or physically handled by another practitioner) they experienced the desolation and anger of not having a physical need met and the comfort and joy of having a sensitive response. These exercises were crucial in identifying (in detail) the physical components of attuned interactions that support children's sense of well-being. In addition, practitioners reflected on which aspects of these experiences had positive or negative resonance with their own childhood experiences and how their own family cultural values influenced how they thought things 'should' or 'shouldn't' be done and where these concurred or conflicted with the theoretical views we discussed. Mindful of the principled link between the well-being of the adult and the well-being of the child, the group process also aimed to model an approach to adult learning that was translatable into good childcare practice by paying attention to the group's sense of well-being through explicitly acknowledging and attending to practitioners' tiredness, hunger or physical discomfort during sessions as well as making the learning environment as pleasant and comfortable as possible.

In this way the group developed a process that linked thinking, feeling and doing through which practitioners could make connections between their experiences and children's experiences. Making links among observations of children, theoretical concepts and personal experience seemed to help keep the child's voice in mind. Without this, practitioners would slip into using professional jargon that seemed to act as a buffer between their thinking and their feeling. Using practitioners' reflections on their own childhoods as a starting point from which to make tentative interpretations of children's experience allowed the group to keep the child's voice in mind and therefore to focus on the detail of practice and use tangible examples. From observations the group was more able to identify the small things that sometimes can make a big difference. Undertaking such a process of personal reflection, of course necessitates that practitioners recognised which parts of their own experience were either romanticising or demonising their view of children in the present.

From the outcomes of this project it seems that through these processes – expanding theoretical knowledge, deepening personal awareness, and recognizing the continuum of development throughout the life cycle – it becomes more possible to turn back the trend towards teaching which seeks to deny the physicality of young children and to place apparently rational thought, control and risk avoidance at the centre of pedagogy' (Pound, 2005).

In the review of the Key Times Project in 2004 practitioners reported a major change in relation to undertaking physical care of children. Most participating centres identified that 'Key Persons' now undertake the majority of personal care tasks with their key children and practitioners also noted that they now understand these tasks to be very important aspects of their professional role: 'I have a more detailed understanding of the key worker's role and physical care' is typical of many responses made in the review' and an understanding of the importance of the detail of practice is reflected in comments such as 'I use more eye contact'.

Relationships as Professional

As indicated in the discussion of babies' and toddlers' physical dependence above, it is clear how physical needs are closely intertwined with emotional needs. In meeting or having those needs met, the seeds of the relationship (formed between practitioner and infant) are planted and may grow. Through these interactive experiences children build a mental model of the world in which the self and significant others and their interrelationships are represented. Babies and toddlers use this mental model to recreate and predict relationships with others; John Bowlby (1969) called this an 'Internal Working Model' (pp.110-115). He also described how the adult maintains the equilibrium of the relationship with a child (through being caring, sensitive, available and responsive) – behaviour that enables the child to develop an attachment relationship with the adult. In attachment theory, secure attachment relationships are important for the success of future relationships and for children's mental health. It is also thought that children who have secure attachment relationships are more able to be independent, to relate to their peers and engage in more complex and creative play. Such children are more resilient to adversity and have higher self-esteem (Schaffer & Emerson, 1964; Mental Health Foundation, 1999; Kraemer, 1999; Cairns, 2002).

Although having differing perspectives and approaches, it seems that psychoanalytic theory, neuroscience and developmental psychology all emphasise the centrality of positive relationships between significant adults and young children in their earliest years in supporting healthy emotional cognitive and physical development. Allen Schore (1999, 2001) has made extensive links between neuroscience and psychoanalytical theory, identifying that the early formation of internal working models of attachment relationships are processed and stored in the right hemisphere of the brain, which is dominant in pre-verbal human infants and indeed for the first three years of life (Schore, 1999). He also describes how it is in the synchrony of face-to-face interactions that the responsive caregiver not only minimises the infant's negative feelings but also maximises their positive affective states through generating excitement, pleasure and joy. These synchronised interactions both deepen bonds and expand the baby's curiosity and interest in the world (Schore, 2001).

Daniel Stern (1990) also emphasises the importance of the adult's capacities for attunement to the child's cues in order to support the baby's self-regulation, and Trevarthan & Aitken's (2001) concept of intersubjectivity identifies emotions as having a positive role in the cognitive and social growth of children through attuned interactions which are also physically rhythmic.

Through these theoretical lenses the links between physical and emotional development are clear and it can also be seen that the emotional learning that takes place in early relationships is also hugely influential on children's cognitive development. The fundamental importance of this aspect of children's development underlines the project's view that it is the quality of relationships between practitioners and children that is the cornerstone of good practice. But although receiving largely positive responses from adults helps babies and young children to develop a positive sense of self, they also need high levels of continuity, consistency and constancy in their experiences and relationships in order for that sense of self to be integrated and sustained. The Key Times project group defined consistency as children being able to predict what will happen when their nappy is changed because it is done mainly by the same person. Constancy means being able to rely on the same group of people being around most of the time, and continuity of experience for birth to three year-olds depends on practitioners and parents/carers sharing the care of the children effectively (Manning-Morton & Thorp, 2001, 2003). The most effective way of providing such support to children in group settings is through developing a key worker system whereby each practitioner is allocated a small group of children and takes primary responsibility for them in the setting (Bain & Barnet, 1980; Elfer et al, 2003).

For this reason, the primary focus of the initial phase of the Key Times project group was a process that extended practitioners' awareness of the importance of children developing secure attachment relationships with them, with all the pleasure and pain that feeling close to another person entails. This led the group to differentiate between the idea of a key worker system (wherein a small group of children is allocated to a practitioner but the focus is the administrative aspects such as record keeping) and the concept of key person relationships (in which the focus is how the interactions between the practitioner and child build a close relationship) (Elfer et al, 2003). The group also examined the detail of how such relationships would operate in effective

practice, such as during mealtimes or nappy changing or when new families joined the group (Manning-Morton & Thorp, 2001, 2003).

In their study 'Design of a Day Care System', Bain & Barnett (1980) found that any changes in practice must be accompanied by a change in attitudes arising from an emotional conviction that the change is a better way to care for children. Without this, changes are not sustained or are implemented in form only, omitting the ideas originally behind the practice. This is frequently the case with key working, which is often implemented as an administrative system rather than focusing on building relationships because the level of emotional demand inherent in responsive relationships with children leads to a defensive position whereby practitioners express discomfort with the practice of key working (Hopkins, 1988; Goldschmied & Jackson, 1994). This is often expressed through the view that getting too close to children is not 'professional'.

Babies and young children experience and express their emotions intensely and immediately; building close relationships with them means being able to provide effective emotional holding by developing a high level of empathic response. But as Judy Shuttleworth (1989) points out, sustaining the impact of a child's state of mind can be inherently disturbing and emotionally draining and practitioners may then use psychological defences to protect themselves from the discomfort that a child's distress, anxiety or anger may provoke in them. Such defence mechanisms operate in everyone (including managers against the distress of their staff) but Bain & Barnett (1980) identified in their research that the early personal experiences of some practitioners (such as unresolved issues of early separation or lack of love and attention) influenced their choice of career as a possible means to fulfil previously unmet needs. Most early years practitioners, along with others in the 'helping' professions, have an image of themselves as giving, caring people with 'ambition to love and be of service to humanity' but who may therefore be looking to the children to 'fit the contours of our ambitions' (Selleck & Griffin, 1996, p. 168). So when the child runs in with a hug or the parent is grateful, there is satisfaction. The problem with this idyllic picture is that it is not real; children also reject practitioners, and parents criticise. If, as Bain & Barnett (1980) suggest, the motivation to work with children arises from unresolved childhood experiences, practitioners may then feel angry and resentful as their own needs are not being met. This can lead practitioners to blame children, parents, managers or co-workers in complicated processes of transference and projection and, in extreme circumstances, perhaps lead to the kind of abusive behaviours in settings we have seen so disturbingly portrayed on our television screens (BBC, 1994).

In light of this it seems imperative that professional early years practitioners are able to bring a maturity of self-awareness to their job. They need to be able to engage with the more difficult aspects of children's learning and development described earlier, and also to become experts in themselves, including their own darker side. They need to be able to look at their own motivations and understand where they come from and through the knowledge they gain about themselves to better understand and adjust their responses to children. This is the basis of emotionally intelligent practice (Goleman, 1996; Manning-Morton & Thorp, 2003).

Consideration of these issues became integral to the process of the Key Times project group and many exercises and discussions were based on the principle that in order to better understand children's states and behaviours we need to be aware of our own emotional responses and where these originate. Questioning one's thinking about theory is a challenge in itself; reflecting on one's own childhood experiences as well, is even more challenging. During the sessions that focused on attachment and key working, group members were asked to reflect on the qualities of their close adult relationships and also on experiences of separation in their lives. The Key Times group had established safe enough boundaries for most of the practitioners to be willing to engage in this level of reflection. However, one group member commented, 'It's like a counselling session', with a demeanour and tone that indicated a degree of apprehension mixed with cynicism and resistance. Such a response to this level of reflection is not uncommon and indeed not unreasonable. It is not always appropriate (or safe) for individuals to speak about personal experiences in a work-oriented group. Neither is the group leader necessarily skilled enough to deal with the issues and dynamics that might arise. The task-oriented focus of the Key Times group helped to avoid it becoming 'a counselling session' as it was always clear that the purpose of this personal reflection was to consider the impact of our own experience on our work and not to counsel individual practitioners.

Each session was balanced between personal reflection, theoretical thinking and observations of practice, which allowed practitioners to locate their personal experience in a theoretical context. This, and the recognition of the social and historical context of practitioners' experience such as inter-country migration or issues of prejudice or discrimination in education, appeared to have a 'containing' effect on the group.

The concept of 'containment' (Bion, 1962) describes the process in which a mother is attuned to her infant's state of mind and is able to hold the baby's uncomfortable feelings in her own mind that would otherwise threaten to overwhelm the baby. The project group recognised that the ability of practitioners to understand their own complicated emotional responses to children's intense emotional demands was a key aspect of developing responsive relationships with children. However, we also recognised that the impact of such intensity and responsibility on a practitioner's own state of mind can be hard to bear. This led us to identify the high level of support practitioners require that allows them to reflect on the negative, as well as the positive, emotional aspects of practice.

Judy Shuttleworth (1989) suggests that a major factor in supporting a mother's capacity for containment is 'sufficient external supports that perform a similar containing function' (p. 30). Aspects of the process of the Key Times group that 'contained' the practitioners emotionally were given much attention and practitioners indicated this through statements such as, 'having feelings reflected back' and 'having the situation understood'. However, the concept of containment is not only about 'holding', it is also about how the adult processes feelings and thereby transforms them and makes them manageable for the child. Similarly, the project group was not only comfortable and supportive but also challenging as we reframed our thinking and moved practice forward. This meant taking risks when reflecting on personal experiences of social prejudice and injustice, analysing observations and evaluating practice, and also bearing the disequilibrium of changing our views in the light of new theoretical information or observational evidence.

Comments made by practitioners in response to the project review seem to indicate that a process that offers a high level of support for practitioners enables them to take risks and to meet challenges with open minds and hearts, thereby making practice changes from emotional conviction. Responses such as, 'I'm more sensitive and able to see things from the child's point of view', 'I have more understanding of why children reject you' and 'I can take myself out of myself and wonder why they are crying instead of feeling cross' show a confidence on the part of project group members in reflecting on the emotional dimensions of practice. In addition, comments such as 'I have a better understanding of attachment theory, key working and partnership with parents' show how this reflection is based on a greater general understanding of developmental theory and its relation to practice.

Developing a professional identity through theoretical boundary crossing and expanding practitioners' knowledge of related theories of development was therefore an important part of the Key Times Project. Yet developing knowledge about these particular areas of development may not be enough to change the external value placed on practitioners when it seems that some areas of knowledge are valued more than others. It seems that being seen as the 'ideal' rational professional not only relies on holding specialised knowledge but that it also depends on the kind of knowledge held. The superior value attached to the mind and rationality in a Cartesian view is reflected in the kind of knowledge and scientific enquiry focused on in the study of human development.

For example, Judy Dunn (1999) highlighted the historic lack of emphasis on the affective domain in developmental psychology, stating:

Until quite recently, cognitive and socio-emotional developments were studied as separate domains. The mapping of children's discovery of the mind, which has proved so exciting, did not include a focus on the role of social experience in influencing the development of understanding. (p. 56)

And the neurologist Antonio Damasio (1999) pointed out that:

Throughout most of the 20th century, emotion was not trusted in the laboratory. Emotion was too elusive and vague ... in the end, not only was emotion not rational, even studying it was probably not rational. (p. 39)

But separating different areas of developmental and theoretical disciplines in this way is not helpful to practitioners in adopting a holistic approach to understanding young children or in building an appropriate store of professional knowledge. However, as Judy Dunn (1999) infers, this is a scene that has been changing, and science (in particular neuroscience) has played a major part in the re writing. In his book *Descartes' Error*, Damasio (1994) turns the famous philosophical phrase 'I think therefore I am' on its head and suggests that we can only think because we are. He said: 'being comes first and we think in as much as we are, since thinking is caused by the structures and operations of being' (pp. 248-249). In *The Feeling of What Happens* (Damasio, 1999) he takes this further and outlines his theory of the indissociable integration of mind, body and emotion in the neurological patterns of the brain. Here, he suggests that far from being a dispensable luxury, feelings and emotions are integral throughout our life regulation processes, from the most basic metabolic regulation to conscious and complex behavioural responses, and he describes how the neural patterns that constitute a feeling cause biological changes to our body state and to our cognitive state.

This kind of theoretical bringing together of mind, body and emotion as part of a whole integrated human organism not only enables us to move away from a dualist philosophy but supports boundary crossing among disciplines. In the work of writers and researchers such as Stern (1990) and Trevarthan & Aitken (2001), referred to earlier, explicit connections between different areas of development are made and the work of Schore (2001, 2003) and Damasio (1994, 1999) shows how the theoretical disciplines of neuroscience, psychoanalysis and developmental psychology can be brought together. Such theoretical boundary crossing may offer early years practitioners a more useful professional knowledge base, moving away from looking for a specific area of specialised knowledge and perhaps finding a professional identity in the connections between theoretical disciplines. The split between 'care' and 'education' for young children in the United Kingdom is manifest in the multiplicity of training routes and qualifications early years practitioners hold but means that early years practitioners have traditionally been seen as not 'proper' teachers and 'not really' social workers, yet have drawn on the professional skills and knowledge bases of both of these professions as well as others, and have therefore been professional boundary crossers. This is a position that seems to enable many practitioners to take the outsider's view and critically evaluate practice from different perspectives.

Conclusion

We need to abandon the historical deficit view of what early years practitioners are not and instead promote a professional identity of a critically reflexive, theoretical boundary crosser: a boundary crosser who can see young children as powerful active learners (with autonomy and agency) and yet still hold their dependent and vulnerable selves in mind, hear their distressed or angry voices and accept the centrality of their physical processes to their sense of self and learning. Developing these areas of knowledge and skill to a level that will adequately improve practice cannot happen in short, content-focused training with an emphasis on implementing externally imposed frameworks. Developing self-knowledge as well as knowledge about children has to take place in an atmosphere of trust and mutual respect with people you come to know well over time. By providing a training context that is process as well as content focused, a model of relationship-based learning will reflect positive early years practice.

Correspondence

Julia Manning-Morton, Early Childhood Studies Programme, London Metropolitan University, 166-220 Holloway Road, London, N7 8DB, United Kingdom.
(j.manningmorton@londonmet.ac.uk)

References

- Bain, A. & Barnett, L. (1980) *The Design of a Day Care System in a Nursery Setting for Children under Five*. London: Tavistock Institute for Human Relations.

- BBC (1994) *Leaving Baby*. Panorama.
- Belsky, J. (1988) The Effects of Infant Day Care Reconsidered, *Early Childhood Research Quarterly*, 3, pp. 235-282. [http://dx.doi.org/10.1016/0885-2006\(88\)90003-8](http://dx.doi.org/10.1016/0885-2006(88)90003-8)
- Bion, W.R. (1962) *Learning from Experience*. London: Heinemann.
- Cairns, K. (2002) *Attachment, Trauma and Resilience: therapeutic caring for children*. London: British Agencies for Adoption & Fostering.
- Bowlby, J. (1969) *Attachment and Loss. Vol. 1: Attachment*. London: Hogarth.
- Bowlby, J. (1973) *Attachment and Loss. Vol. 2: Separation*. Harmondsworth: Penguin.
- Cohen, L. & Manion, L. (1994) *Research Methods in Education*. London: Routledge.
- Damasio, A.R. (1994) *Descartes' Error. Emotion, Reason and the Human Brain*. New York: Harper Collins.
- Damasio, A.R. (1999) *The Feeling of What Happens. Body and Emotion in the Making of Consciousness*. New York: Harcourt.
- Dingwall, R. & Lewis, P.S.C. (1983) *The Sociology of the Professions: lawyers, doctors and others*. New York: St. Martins Press.
- Dunn, J. (1999) Mindreading and Social Relationships, in M. Bennett (Ed.) *Developmental Psychology*, pp. 55-71. London: Taylor & Francis.
- Elfer, P. (1996) Building intimacy in relationships with young children in nurseries, *Early Years*, 16(2), pp. 30-34.
- Elfer, P., Goldschmied, E. & Selleck, D. (2003) *Key Person Relationships in Nursery*. London: Sage.
- Eliot, L. (1999) *Early Intelligence: how the brain and mind develop in the first five years of life*. London: Penguin.
- Elliott, J. (1991) *Action Research for Educational Change*. Milton Keynes: Open University Press.
- Gerhardt, S. (2004) *Why Love Matters: how affection shapes a baby's brain*. Hove and New York: Brunner-Routledge.
- Goldschmied, E. & Jackson, S. (1994) *People under Three: young children in day care*. London: Routledge.
- Goleman, D. (1996) *Emotional Intelligence: why it can matter more than IQ*. London: Bloomsbury.
- Hopkins, J. (1988) Facilitating the Development of Intimacy between Nurses and Infants in Day Nurseries, *Early Child Development and Care*, 33, pp. 99-111.
- Johnson, R. (1997) The 'No Touch' Policy, in J. Tobin (Ed.) *Making a Place for Pleasure in Early Childhood Education*, pp. 101-118. New Haven: Yale University Press.
- Knowles, M. (1983) Andragogy: an emerging technology for adult learning, in M. Tight (Ed.) *Adult Learning and Education*, pp. 53-71. London and Canberra: Croom Helm in association with the Open University.
- Kraemer, S. (1999) Promoting Resilience: changing concepts of parenting and childcare, *International Journal of Child Welfare*, 4(3), pp. 273-278.
- Lally, J.R., Torres, Y.L & Phelps, P.C. (1997) Caring for Infants and Toddlers in Groups: necessary considerations for emotional, social and cognitive development, *Zero to Three*, 14(5), pp. 1-8. www.zerotothree.org
- Manning-Morton, J. (2000) Working with Children under Three. Intimacy, Trust and Well-Being in the Nursery. MA Dissertation, University of North London.
- Manning-Morton, J. (2005) *The Key Times Project Concluding Report for the London Borough of Camden Early Years Service*. London: London Metropolitan University.
- Manning-Morton, J. & Thorp, M. (2003) *Key Times for Play: the first three years*. Maidenhead: Open University Press.
- Manning-Morton, J. & Thorp, M. (2006 forthcoming) *Key Times: a framework for developing high quality provision for children from birth to three years*. Maidenhead: Open University Press.
- Marshall, T. (1982) Infant Care: a day nursery under the microscope, *Social Work Service*, 32, pp. 15-32.
- Mental Health Foundation (1999) *Bright Futures: promoting children and young people's mental health*. London: Mental Health Foundation.
- Okin, S. (1984) *Women in Western Political Thought*. Princeton, NJ: Princeton University Press.
- Penn, H. (1994) *Private Day Nurseries in the U.K. A Report for BBC News and Current Affairs*, Panorama. London: Institute of Education, University of London and National Children's Bureau.
- Pound, L. (2005) The Foundation Stage (3-5 years), in L. Dryden, R. Forbes, P. Mukherji & L. Pound (Eds) *Essential Early Years*, pp. 97-116. London: Hodder & Stoughton.

- Qualifications and Curriculum Authority/Department for Education and Employment. (2000) *Curriculum Guidance for the Foundation Stage*. London: HMSO.
- Saks, M. (1983) Removing the Blinkers? A Critique of Recent Contributions to the Sociology of the Professions, *Sociological Review*, 31(1), pp. 1-21.
- Schaffer, H.R. & Emerson, P.E. (1964) The Developments of Social Attachments in Infancy, *Monographs of the Society for Research in Child Development*, 29(3), serial No. 94.
- Schore, A.N. (1999) Foreword to new edition of J. Bowlby (1982) *Attachment and Loss. Vol. 1: Attachment*. New York: Basic Books.
- Schore, A.N. (2001) How Parent–Infant Interactions Enhance or Inhibit the growth of the Developing Brain, *Infant Mental Health Journal*, 22(1-2), pp. 7-66.
- Schore, A. (2003) *Affect Regulation and the Repair of the Self*. New York. Norton.
- Selleck, D. & Griffen, S. (1996) Quality for Under-Threes, in G. Pugh (Ed.) *Contemporary Issues in the Early Years: working collaboratively for children*, pp. 152-168. London: Paul Chapman.
- Shuttleworth, J. (1989) Psychoanalytic Theory and Infant Development, in L. Miller, M. Rustin & J. Shuttleworth (Eds) (1989) *Closely Observed Infants*. London: Duckworth.
- Stern, D. (1990) *The Interpersonal World of the Infant*. London: Fontana.
- Tobin, J. (1997) *Making a Place for Pleasure in Early Childhood Education*. New Haven: Yale University Press.
- Trevarthan, C. & Aitken, K.J. (2001) Infant Intersubjectivity: research theory and clinical application, *Journal of Child Psychology and Psychiatry*, 42(1), pp. 3-48. <http://dx.doi.org/10.1017/S0021963001006552>
- Weiler, K. (1991) Freire and a Feminist Pedagogy of Difference, in P. Edwards, A. Hanson, A. & P. Raggatt (Eds) (1996) *Boundaries of Adult Learning*, pp. 128-151. London: Routledge.