

Wellbeing Practice Guide



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- Maribyrnong City Council – Family Day Care and Early Years Support
- Moonee Valley City Council – Pedagogical Leader
- YMCA – Early Childhood Specialist, Kindergarten Cluster Management

Early Childhood Intervention Services:

- Aurora School, Blackburn South – Principal
- Pinarc Disability Support Services

Maternal and Child Health Services:

- Knox City Council – Enhanced MCH and MCH Services

Playgroups and Supported Playgroups:

- Maribyrnong City Council
- Robinson Reserve Neighbourhood House, Coburg

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- Aurora School, Blackburn South – Principal
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Introduction

The Wellbeing Practice Guide has been developed by the VCAA to support implementation of the Victorian Early Years Learning and Development Framework (VEYLDF).

Its scenarios and learning activities will support engagement with key concepts of the VEYLDF, including Learning and Development Outcome 3: 'Children have a strong sense of wellbeing'.

This is one of the five Outcomes identified in the VEYLDF, and has two elements:

- Children become strong in their social, emotional and spiritual wellbeing.
- Children take increasing responsibility for their own health and physical wellbeing.

Purpose

The purpose of the Wellbeing Practice Guide is to:

- strengthen early childhood professionals' understanding of the importance of wellbeing
- support practice that strengthens children's dispositions for wellbeing learning
- promote practice that strengthens children's knowledge and self-awareness of their own wellbeing and sense of identity
- guide assessment practice decisions of early childhood professionals working within and across early years services and settings and in the early years of school
- highlight the importance of the birth-to-three-years period in establishing a strong foundation for subsequent and lifelong wellbeing.

This guide draws on evidence detailed in the *Assessment of Wellbeing in Early Childhood Education and Care: Literature Review* (2015), written by the University of Melbourne, for the VCAA and DET.

This guide is designed to inform a greater understanding of wellbeing and its place as both a prerequisite for, and outcome of learning. This will support the development of wellbeing assessment practices for early childhood professionals, and strengthen collaboration across service types between those professionals.

How to use this guide

This guide presents ways to place wellbeing at the forefront of professional practice, using the theory and pedagogy that already underpin day-to-day practice.

The scenarios have been developed in consultation with a range of early childhood professionals, from a variety of early childhood settings. They provide professionals with an opportunity to critically engage with contemporary, high quality practice to affirm the work that is already taking place and facilitate discussion of how practice could be improved to better support wellbeing in the early years.

The concepts, scenarios and reflective questions in this practice guide align with the National Quality Standard (NQS) and support all early childhood professionals to engage with the materials in a way that will show a commitment to ongoing quality improvement. Those responsible for professional development can choose how to engage with the guide so their specific setting and team are supported.

The scenarios are designed to provoke rich and meaningful conversations. Each scenario begins with a guide to a particular wellbeing disposition and key learning points, and concludes with reflective questions that serve as discussion prompts.

Before engaging with colleagues, early childhood leaders should become familiar with the *Assessment of Wellbeing in Early Childhood Education and Care: Literature Review* (2015). This will support informed decision-making about how best to incorporate materials into practice discussions.

The flexible design of this practice guide provides the opportunity to either engage with one scenario at a time (perhaps as part of regular team meeting time) or to set aside blocks of time to look at whole sections.

The material can be revisited depending on current themes within settings and used as a reference tool to help work through practice challenges. Group discussion will maximise engagement; however, the scenarios can also be used on an individual basis with staff to support discussions as part of their regular professional mentoring or supervision sessions.

Wellbeing in the early years

What is wellbeing?

Across professional disciplines there is some variation in the way wellbeing is defined, but there are common traits, observable qualities and dispositions that are widely identified as supporting the development of wellbeing in a child's early years.

The VEYLDF defines wellbeing as 'good mental and physical health, including attachment, positive affect and self-regulation, being able to manage emotions productively and build resilience and persistence, being adaptable and confident and experiencing feelings of satisfaction and happiness' (DET 2016, p. 23). This definition reminds us of the broad range of factors that are known to influence positive wellbeing.

The VEYLDF also recognises children's wellbeing from birth as both a prerequisite for and an outcome of learning. That is, a strong sense of wellbeing enables children to engage positively with their environment so they can take full advantage of all learning opportunities that will influence their life chances.

We know that wellbeing is necessary in order for children to flourish and thrive, and the children most likely to experience school success are those with strong social and emotional foundations (Shonkoff & Phillips, 2000). Social and emotional wellbeing is an emerging capacity; a developmental journey that continues over time.

The foundations for social and emotional competence and wellbeing are laid well before a child enters formal schooling. To really set children on a positive lifelong learning trajectory, wellbeing and social/emotional capacity must be a focus from the earliest days of a child's life (Roberts, 2010; Australian Government Department of Health and Ageing, 2010).

From birth, babies are already laying the foundations for their wellbeing development. Secure attachments and responsive relationships are the crucial platforms from which all learning and development takes place. Infancy is a time of critical development with birth to three years as the optimum learning period for wellbeing dispositions.

Respecting and acknowledging the rights of children

The Victorian Early Years Learning and Development Framework (VEYLDF) is a powerful foundation document to support all early childhood professionals to think more deeply about their everyday practice with children and families.

The VEYLDF forms part of an integrated set of reforms aimed at supporting young children's learning and development. These reforms:

- recognise and respect Aboriginal cultures and their unique place in the heritage and future of Victoria
- draw upon the United Nations Convention on the Rights of Persons with Disabilities
- recognise all children as rights holders and full members of society, capable of participating in their social worlds through their relationships with others.

These rights, expressed in the United Nations Convention on the Rights of the Child (1989) are:

- the right to life and development
- the right to be heard
- the right to non-discrimination
- the right for the best interests of the child to be upheld.

Professional accountability and what this means for children's wellbeing and safety

A code of ethics defines the core aspirational values of a profession and provides guidance for professional decision-making, especially when there are conflicting obligations or responsibilities.

The Early Childhood Australia Code of Ethics (2016) reflects universal values enshrined in the Convention on the Rights of the Child (1989) and the Declaration on the Rights of Indigenous Peoples (2007). It describes the protection and wellbeing of children as paramount and that speaking out or taking action in the presence of unethical practice is an essential professional responsibility.

In practice, how do early childhood professionals ensure the rights of all children?

Early childhood professionals sensitively gather information to inform and support their professional judgments concerning children. Early childhood professionals are able to make informed decisions that support positive outcomes for children when they:

- develop a deep and thorough knowledge of each child
- value each child's views and experiences
- support each child to actively make choices and influence decisions that are important for them
- 'tune in' to each child, noting what and how they are communicating (verbally and non-verbally)
- demonstrate respect and regard for what each child says or indicates
- understand and respect each child's culture and the values and culture of their family.

Targeted supports

Some children and families have additional pressures impacting on their capacity. For example, they might experience significant adversity and hardship, family violence, trauma or loss. When these are long lasting or chronic, children can suffer a loss of wellbeing and long-term negative outcomes. Responsive relationships nurture, regulate and provide protective factors to support children's wellbeing, resilience and learning capabilities (VEYLDF pp. 9-11).

Leaders in early childhood education and care services, health services, family support services and schools can develop collaborative partnerships that influence wellbeing in children and families (VEYLDF p. 16).

Interdisciplinary practice can help strengthen integrated and consistent support for families as they raise their children, including appropriate referrals for targeted and intensive support (VEYLDF p. 16).

Targeted support could include referral to:

- Child FIRST can connect vulnerable children, young people and their families to the services they need to protect and promote secure attachment and healthy development: <https://services.dhhs.vic.gov.au/child-first-and-family-services>
- Child Protection teams providing child-centred, family-focused services to protect children and young people from significant harm caused by abuse or neglect within the family: <https://services.dhhs.vic.gov.au/child-protection>.

Regardless of circumstances, effective, sustained, collaborative partnerships between families and all children are in the child's best interests. It is through these relationships and interactions that respectful relationships and responsive engagement can be modelled (VEYLDF p. 9).

The Trauma Informed Practice section of the VEYLDF Appendix 2 has links to specific resources.

Victorian Government Child Safe Standards

A range of new requirements are now in place in Victoria to strengthen the protection of children. On 1 January 2016 the Victorian Government introduced Child Safe Standards that are compulsory for all organisations providing services to children.

From 30 September 2015, early childhood teachers registered with the Victorian Institute of Teaching (VIT) are legally required to make a report where they form a reasonable belief that a child in the care of their organisation is at risk of significant harm arising from physical or sexual abuse and their parents are unlikely to protect them from harm of that kind.

All VIT-registered teachers (including primary and early childhood teachers) and staff who have been granted permission to teach by the VIT, registered nurses, doctors and police are deemed to be mandatory reporters.

Protecting children is a shared responsibility and non-mandated staff members also need to understand their obligations to protect children in their care.

In complying with each of the Child Safe Standards the following principles must be considered :

- promoting the cultural safety of Aboriginal children
- promoting the cultural safety of children from culturally and/or linguistically diverse backgrounds
- promoting the safety of children with a disability.

The focus of the standards is to help organisations drive cultural change so that protecting children from abuse in organisations is embedded in everyday thinking and practice.

The Child Safe Standards are:

- Standard 1: Strategies to embed an organisational culture of child safety, including through effective leadership arrangements
- Standard 2: A child safe policy or statement of commitment to child safety
- Standard 3: A code of conduct that establishes clear expectations for appropriate behaviour with children
- Standard 4: Screening, supervision, training and other human resources practices that reduce the risk of child abuse by new and existing personnel
- Standard 5: Processes for responding to and reporting suspected child abuse
- Standard 6: Strategies to identify and reduce or remove the risk of abuse
- Standard 7: Strategies to promote the participation and empowerment of children

Victorian Child Safe Standards online resources

An overview of the Victorian child safe standards has information to assist organisations to understand the requirements of each of the Child Safe Standards, including examples of measures they can put in place and a self-assessment tool.

<https://www.education.vic.gov.au/school/teachers/health/childprotection/Pages/safeenviro.aspx>

PROTECT Child Safe Standards online resources

The Child Safe Standards are compulsory minimum standards for all Victorian early childhood services and schools, to ensure they are well prepared to protect children from abuse and neglect.

The **online early childhood and school resources** have been developed to support staff employed in all Victorian early childhood services and schools to take action if they suspect, or are witness to any form of child abuse.

<https://www.education.vic.gov.au/about/programs/health/protect/Pages/ecguidance.aspx>

Protecting Children – Mandatory Reporting and Other Obligations

This Early Childhood Sector eLearning Module supports all professionals in early childhood settings to increase their capacity to respond effectively to children whose safety, health or wellbeing may be at risk.

<https://www.education.vic.gov.au/about/programs/health/protect/Pages/econlinelearning.aspx>

Children's agency refers to children being able to make choices and decisions, to influence events and to have an impact on their world. The concept of agency applies from birth: children are active contributors to their own experiences, interactions, learning and development (VEYLDF 2016, p. 35).

What does a child-safe organisation look like in practice?

In Table 1 the left-hand column sets out seven features that demonstrate effective organisational responses to implementation of the Child Safe Standards. The right-hand column lists wellbeing actions in everyday learning environments can build and strengthen the rights, wellbeing and safety of all children.

Table 1: Effective organisational responses and actions to implement and maintain Child Safe Standards and environment

Effective organisational responses to the implementation of the Child Safe Standards	Wellbeing actions that can contribute to and maintain a child-safe environment
<p>A visible culture of child safety that is part of everyday practice</p>	<p>Induction and training in recognising and responding to child abuse is available for leadership teams, management, staff and volunteers</p> <p>All aspects of visual and physical environments are reviewed to ensure that they are welcoming and supportive of Aboriginal peoples, children and families from culturally and linguistically diverse backgrounds and children with a disability.</p>
<p>Strong leadership driving a culture of accountability</p>	<p>Early childhood professionals understand their roles and responsibilities in relation to children’s safety and wellbeing and are sensitive to the impacts of abuse and trauma on children.</p> <p>There is regular review of child-safe policies and procedures in team meetings.</p> <p>All staff, volunteers, children and families understand a confidential reporting culture for suspected abuse within the organisation.</p> <p>Child-safety representatives throughout the organisation are appropriately trained and resourced.</p>
<p>Well-articulated policies and procedures to implement a child-safe approach</p>	<p>There is development of new (or review of existing) child-safe policies and child-safety statements of commitment.</p> <p>The organisation ensures all early childhood professionals are aware of these policies and use them to guide action.</p> <p>Child-safe statements and policies are publicly available online, in welcome packs, newsletters, annual reports, vision statements and recruitment advertisements.</p>
<p>Active encouragement of partnerships with families and professionals to protect children</p>	<p>Leaders encourage early childhood professionals to collaborate in teams, with colleagues from other disciplines, and with family members and kinship groups in the ongoing protection and support of children.</p>

Effective organisational responses to the implementation of the Child Safe Standards	Wellbeing actions that can contribute to and maintain a child-safe environment
Active consideration of the risks of abuse within the organisation	<p>Leaders ensure clear and accessible processes for evaluating risks posed to children by situations and activities that are taking place in the setting.</p> <p>The Child Safety Review Self Audit Tool is used in review and planning to identify important areas of child safety, how children can be included in the process, and how to assist staff and volunteers in identifying any areas of risk that require improvement.</p>
Engagement with children to create a child-safe environment and empower children to speak up if something is wrong	<p>Early childhood professionals value and respect children’s communicative efforts in everyday routines and experiences</p> <p>Early childhood professionals maintain responsive and respectful relationships with children and:</p> <ul style="list-style-type: none"> • help children to establish secure attachments and develop self-regulation • listen to and take into account views and feelings of each child • pay attention to behaviours • believe children when they talk about or indicate their experiences of abuse or neglect. <p>Children are provided with appropriate and accessible information about child safety and how to seek assistance from trusted adults.</p>
Inclusive approaches for children with a disability, Aboriginal children and children from culturally and/or linguistically diverse backgrounds	<p>Early childhood professionals value diversity and do not tolerate any discriminatory practices.</p> <p>Early childhood professionals are aware of responsibilities to respond to every child at risk of abuse or neglect by following the organisation’s policy for reporting.</p> <p>Early childhood professionals ensure information provided to children about child safety is accessible and culturally appropriate for Aboriginal children, children from culturally and linguistically diverse backgrounds, and children with disabilities.</p>

Maximising wellbeing development

The architecture of the brain is such that the development of wellbeing is shaped by experiences and can, in fact, be explicitly taught (Ashdown & Bernard, 2012; Joseph & Strain, 2003). The more practice children have in activities that strengthen emerging wellbeing dispositions, the stronger the neural pathways become and the set of cognitive and social capabilities that underpin wellbeing develops (National Scientific Council on the Developing Child, 2004a; National Scientific Council on the Developing Child, 2004b).

We know that neuroplasticity of the brain is greatest in the first few years of life. We also know that executive function capacity has the greatest window of opportunity to develop up to the age of six years. What exactly is executive function and why is it so critical in the development of wellbeing?

Executive function and the development of wellbeing

Executive function is a set of mental processes that play a critical role in how our brains plan, organise, remember details and pay attention to incoming information. Executive function allows us to connect things we have learnt or done in the past with present actions. We do this by recalling the internal memory of how we did something previously in order to improve on or do it more easily or effectively the next time (National Scientific Council on the Developing Child, 2011). Executive function allows us to filter distractions when we are trying to concentrate on something and it helps us to regulate and control our impulses in response to what is going on around us. This in turn helps us to stay on task, to better manage our time effectively, and, ultimately, to make us more productive (Blakemore & Frith, 2005; National Scientific Council on the Developing Child, 2011). In everyday life we are required to utilise our executive function skills almost continually. We make plans, keep track of time, change our minds about what to prioritise, depending on the situation, and refocus our attention between a variety of activities, all at the same time.

The Center on the Developing Child at Harvard University (2011) likens executive function development in the early years to an air-traffic control system. Imagine dozens of planes landing and taking off from multiple runways

at the same time and the air-traffic control system not only managing the multiple streams of incoming information, but coordinating and integrating this to ensure things run smoothly and safely. Young children in the early years have to manage a barrage of incoming information, from one moment to the next. From the very first days of life, their brains are bombarded with a constant stream of information, and infants are required to begin refining their responses to both external and internal stimuli (Lally & Mangione, 2006). Many of a newborn's responses are innate and reflexive and nature's way of protecting them and ensuring they begin to connect with what is going on around them (Riley, Carns, Ramminger, Klinsker & Sisco, 2009). Initially these reactions and interactions are based on survival (crying when hungry, for example), but gradually as developing neural pathways are engaged, their responses and reactions become less instinctive and more regulated and controlled.

While executive function continues to develop into adolescence, the greatest window of opportunity exists between the age of 12 months and six years. At 12 months, rudimentary signs of executive functions, such as self-control and the beginnings of mental flexibility, are starting to emerge. By three years of age these capacities are becoming more refined but are still very much in the developing phase. By five to six years of age there has been an enormous leap in executive function with much more complex capacities emerging, including impulse control, the ability to get along with others, the ability to follow rules and to keep trying when something doesn't go as expected (National Scientific Council on the Developing Child, 2011).

The Brain Builders video, developed by the Alberta Family Wellness Initiative, presents the science of how children's brains develop, using an engaging and accessible story that highlights the importance of all children having the nurturing experiences they need to support positive development and growth.

Watch the video to explore how different experiences affect the architecture of the developing brain:
<http://blogs.rch.org.au/ccch/2015/11/>

Learning Activity 1

Wellbeing focus

- Managing emotions and impulses
- Good organisational skills, ability to follow instructions
- Persistence and ability to stay on tasks

Key learning points

- Wellbeing is inextricably linked to executive function and the range of cognitive processes essential for learning success.
- Supporting children to further develop and strengthen their wellbeing skills enables children to maximise their full learning potential.

Scenario

Evan is five years old and attends long day care five days per week. He has attended the same setting since he was a baby and has been fortunate that the centre educators have always placed wellbeing high on the learning agenda. He has benefited from the nurturing and responsive environment in which modelling and cumulative social-emotional learning experiences have been promoted and developed.

There is a whole-centre policy dedicated to supporting children's mental health and there are regular professional development sessions to strengthen and enhance practitioner practice. The centre director, Bel, knows that when educator wellbeing is high, then so too is their commitment to enhancing children's wellbeing.

Evan will transition to school in a few months' time. The room leader, Gina, knows that the children most likely to experience the greatest learning success are those who enter their schooling years with good organisational skills, the ability to follow instructions, stay on task and keep trying when tasks are difficult. Gina also knows that those children who are able to filter out distractions, concentrate and attend to a particular task are able to engage with and maximise the learning opportunities around them.

Throughout the year Gina has made sure the children have been offered a variety of learning experiences that not only specifically teach children many of the skills and dispositions associated with wellbeing, but also offer multiple opportunities to practise and refine

them. One of the ways that Gina does this is by giving the children simple, sequenced verbal instructions such as 'wash your hands and collect your snack box'. Over time, Gina gradually increases the complexity of these instructions by adding additional tasks to them, such as '... and your drink bottle' or 'put your sunhat in your locker then ...'. Gina observes the children closely and provides additional strategies and support as they are needed, so that the children experience success and see themselves as capable. Gina might support her instructions with gesture and then use the gesture to prompt a child's recollection of the instructions, or ask them to check off the number of 'mini-tasks' that the instruction involved.

This allows Evan and the other children to practise their ability to concentrate on tasks and filter out unnecessary distractions, and also develops their sense of responsibility, self-esteem and independence.

Gina also includes Evan and other children in regular discussions about feelings and emotions. She knows that children as young as three years can reliably contribute to discussions about wellbeing, particularly their own.

Evan has already had multiple opportunities to develop, practise and extend his executive functioning and the skills and dispositions associated with positive wellbeing. He will have a significant learning advantage as he enters his school years.

Reflective questions

- What types of explicit wellbeing skills and disposition scaffolding do you provide to the children and families attending your setting?
- Applying a strengths-based approach is the most effective way to support and extend wellbeing in the early years. Can you think of examples of when you have had to support a child to develop the skills of persistence or perseverance, so that they could experience feelings of competence and success that would enhance their wellbeing? How did you go about it? What were the results?

Learning Activity 2

Wellbeing focus

- Self-esteem, confidence, peer relationships
- Beginning to problem-solve social challenges
- Children's views of their own wellbeing dispositions

Key learning points

- Skills and dispositions associated with wellbeing can be explicitly taught through role play, observations of others and modelling.
- Making and maintaining friendships and the pro-social skills essential for long-term wellbeing.

Scenario

Remi and Lola attend the same kindergarten.

Remi is nearly five years old and attends four sessions per week. She is a confident child who is the eldest of three children in her family. She has a large extended family with a number of older cousins. Remi regularly spends time socialising with her family and their friends. She is confident and popular with the other children.

Lola is almost six months younger than Remi, and also attends four sessions per week. She is an only child and her family have recently moved to Melbourne from overseas. Her family has established a small network of friends but has no extended family living near them. Lola's mum states that Lola is quiet and prefers to spend time playing on her own. Tayla, the kindergarten teacher, has found Lola crying on three separate occasions over the past week and, when comforting her, Lola has told her that no-one likes her and that she has no friends. Tayla knows that it is important to reassure Lola and provide her with emotional support. Tayla also knows that it is even more important that she introduces some explicit learning activities which will help to extend Lola's self-esteem and confidence with peers. Tayla decides to incorporate a range of 'friendship focused' learning experiences with the kindergarten group to further develop an understanding of positive peer relationships and practise the skills associated with making and keeping friends. In addition, Tayla plans some specific paired and small-group activities in which Remi and Lola can participate.

Tayla knows that Remi's social and interaction skills will provide an excellent model for Lola, so she purposefully pairs them for some experiences.

Tayla and her co-educator also plan some targeted role-play that will enable rich conversations with the children about the most, and the less favourable ways to interact with friends.

After several weeks Tayla meets with Lola's mum to discuss her progress. Lola's mum is delighted with her progress and is feeling very pleased that Lola has had some playdate invitations. Although Lola is still quiet and reserved, she now tells her mum that she has some friends at kindergarten and she enjoys seeing them outside of kindergarten.

Reflective questions

- Think of a time when you have had to specifically scaffold or teach concepts such as tolerance or inclusive peer relations. What prompted your intervention? How did you go about it and was it successful?
- Think of ways you might go about gathering and including children's views of their own wellbeing strengths and needs.
- Think of at least three intentional learning experiences that would support peer relations skills. What types of resources would you use to reinforce the concepts?

It is now clear that many of the skills and capacities cited as crucial in the development of wellbeing are underpinned by executive brain function (Ashdown & Bernard, 2012; Roberts, 2010; Laevers, 2005; Shonkoff & Phillips, 2000). Children who have had multiple, cumulative and repeated opportunities to develop and refine their executive function across the early learning trajectory are those with the most well developed wellbeing capacities. They also have the greatest chance of succeeding both academically and socially, even if they have been identified as being at the greatest developmental risk (Davis, et al., 2010; Ashdown & Bernard, 2012).

Assessing wellbeing

Assessment of children’s knowledge, skills and capabilities is at the core of all work undertaken with children and families in the early years. Guided by evidence-based practice and underpinned by the Early Years Planning Cycle (as first described in *Educators Belonging, Being and Becoming: Educators’ Guide to the Early Years Learning Framework*, 2010), early childhood professionals use a wide range of reliable and accessible assessment tools to develop individualised, targeted, holistic and effective programs of learning.

Principles of assessing wellbeing

Assessment of wellbeing is an integral part of early years practice. In order to observe and support wellbeing development in children, early childhood professionals require a well-defined concept of wellbeing together with reliable and accessible assessment tools (Marbina, Mashford-Scott, Church & Tayler, 2015). Effective assessment needs a clearly defined purpose. Professionals need to understand what they are looking for, why it is important and how they are going to document this. Pinpointing areas of wellbeing dispositions and skills is crucial in ensuring that assessment is effective and leads to further learning and development for the individual child, the learning group and the setting.

Effective assessment of wellbeing requires an understanding of how wellbeing is enacted, what it looks like and how it can be supported in the early years. *Assessment of Wellbeing in Early Childhood Education and Care: Literature Review* (2015) has identified six principles for the effective assessment of wellbeing:

- Effective assessment needs a clearly defined purpose.
- Effective assessment of wellbeing is based on multiple sources of information.
- Assessment of wellbeing includes individual, group and centre evidence.
- Assessment of wellbeing includes children’s own reports and actions.
- Assessment of wellbeing includes evidence from parents.
- Assessment of wellbeing is an opportunity for multidisciplinary collaboration.
- Incorporating these elements into the assessment of wellbeing will enable practitioners to ensure a holistic and effective approach. They also provide opportunities for critical reflection on service practice and philosophy.

Early Years Planning Cycle

Reflection occurs at every step in the Early Years Planning Cycle.



The EYPC is adapted from the *Educators’ Guide to the EYLF* (2010)

The ecological model (adapted from Bronfenbrenner, 1979) that underpins the VEYLDF acknowledges the life of each child within a social, environmental, political and economic context.

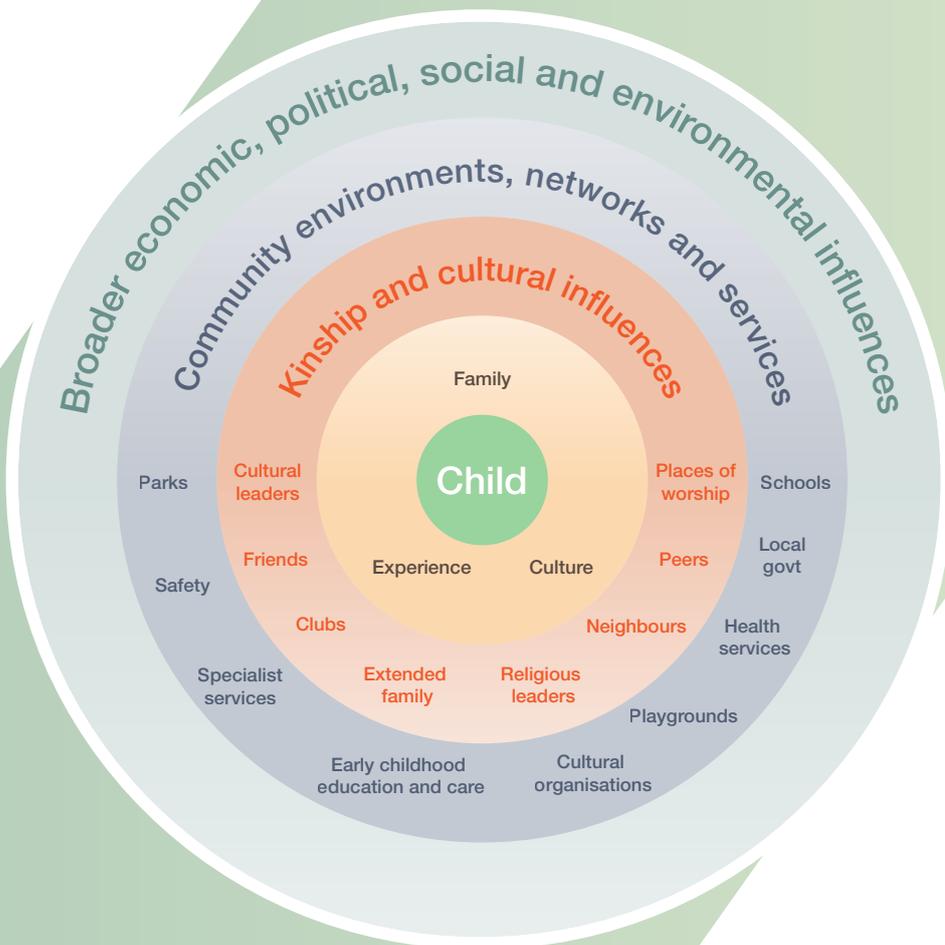
The model, with the child at the centre, recognises that all children influence and are affected by the environments that surround them. The child is viewed as active and engaged in their learning and development within their local context shaped by family, culture and experience.

Families and kinship members have primary influence on the child's learning and development. They provide the child with relationships, opportunities and experiences that shape each child's sense of belonging, being and becoming.

A child's local community, cultural events, spaces and their accessibility reinforce a sense of belonging and wellbeing for a child and their family.

Each adult around the child learns, leads, supports and actively invests in the child's success. Each professional who engages with the child has a part to play.

Wellbeing assessment should be based on multiple sources of information, including individual, group and service assessments, and include the perspectives of early childhood professionals, families and children.



When you consider assessment of wellbeing through this lens it is evident that effective assessment will need to take account of multiple sources of information from the different environments that surround the child.

The scenarios within this practice guide provide examples of the effective practices and positive outcomes for children and families that can be achieved when the ecological model underpins thinking and decision-making.

Learning Activity 3

Wellbeing focus

- Creating a climate of wellbeing
- Engaging with the environment
- Building self-esteem

Key learning points

- Ongoing assessment
- Professional partnerships
- Communication with families

Scenario

Arlon is 27 months old and has been diagnosed with autism spectrum disorder. He has just started attending his local early childhood intervention service (ECIS). He also attends speech therapy and occupational therapy as part of his Helping Children with Autism (HCWA) funding package.

Arlon's ECIS case worker, Irene, has suggested to his mum that he would benefit from attending the local playgroup so he has the opportunity to practise his social skills. Cathy, Arlon's mum, and Toby, his dad, are very nervous about this and are worried about what the other parents might think, given Arlon has a tendency to become very upset when things don't go his way.

Irene arranges a joint meeting with the playgroup leader, Marion, and his parents to discuss Arlon's inclusion. Irene knows that consistent and clear boundaries will assist Cathy and Toby to be proactive in their responses to Arlon's behaviour and that this will really help Arlon to build his self-regulation skills. Irene also knows how important it will be for all the professionals in his life to communicate regularly with each other to provide as many opportunities as possible for Arlon to practise these early self-regulation skills in a supportive environment so that he experiences success. At the meeting, Cathy and Toby have the opportunity to lead the discussion about their concerns, with both practitioners acknowledging the stress that the family is feeling. Given Arlon's recent diagnosis Marion emphasises how important it will be for both Cathy and Toby's wellbeing that they feel connected to and have a sense of support from local services such as the playgroup.

The discussion then focuses on the practical strategies that could be put in place to help support Arlon. Cathy and Toby give permission for Marion to discuss the issues with Arlon's speech and occupational therapists. All agree that a gradual introduction to playgroup would work best for Arlon, and decide to begin with 30-40 minute sessions.

ECIS professionals develop simple visual schedules over the next couple of weeks and share them with all the adults who are supporting Arlon. Cathy has provided a list of Arlon's favourite activities to Marion and his therapists have shared some helpful behaviour and communication strategies. Everyone is trying to make things as predictable and consistent as possible. The family and professionals work closely and communicate regularly about what's working and what's not working.

Arlon now successfully attends the local playgroup for two sessions per week. Both Arlon and Cathy look visibly more relaxed and happy, and although Arlon occasionally becomes upset, his self-esteem and sense of success is apparent.

The early childhood professionals continue to meet regularly with Cathy so that they can all share information that will inform ongoing plans for Arlon, as well as providing an opportunity to monitor Cathy and Toby's general wellbeing.

Reflective questions

- In your own professional experience, think of a time when you have worked collaboratively with a range of other early childhood professionals to support the wellbeing of a child or family. What did you do? Was it successful? What would you do differently?
- Think of a child who has required additional support while in your care. What environmental or program changes did you make to ensure the child was able to engage to their full potential with the learning environment?

Tools to support the assessment of wellbeing

Different assessment tools focus on different aspects of wellbeing. *Assessment of Wellbeing in Early Childhood Education and Care: Literature Review (2015)* identified nine of the most relevant and contemporary wellbeing assessment tools currently used in Australian early years settings and summarised these in terms of their identification of the core wellbeing dispositions. Some focus on the individual child, others focus on pedagogy and the learning environment, while others have a whole-of-setting focus.

This summary assists early childhood professionals to make informed decisions about the most appropriate wellbeing assessment tools for their context and setting.

Regardless of what tools are used, evidence tells us that the best long-term outcomes for children are achieved when wellbeing is high on the agenda and incorporated as part of the everyday assessment culture (Roberts, 2010).

As with all aspects of development, the skills associated with positive wellbeing are progressive and develop across time. Early childhood professionals might assess and provide a range of explicit learning opportunities to support a child's cognitive development. The same approach should be taken for assessment and development of the capabilities associated with wellbeing. Having a clear understanding of the indicators of wellbeing progression and each child's developmental trajectory supports early childhood professionals to be specific and explicit in assessment of and subsequent planning for wellbeing development. Using a variety of assessment tools across multiple contexts, in partnership with early childhood professionals, families and their children, will provide the most balanced and accurate account of how a child is progressing in their wellbeing development.

Effective practice is strengthened when early childhood professionals reflect with children and families as collaborators ... to advance each child's learning and development. (VEYLDF, p. 8)

It is critical to remember that no single assessment tool or method will give a full picture of a child's learning. Particular assessment tools have been designed for specific purposes and cultural contexts. Using a range of assessment tools gives the most accurate and holistic picture of where a child is at and where they need to be. Sensitive assessment involves real situations and methods that open up rather than narrow learning down. (Educators Belonging, Being and Becoming: Educators' Guide to the Early Years Learning Framework, p. 38, 2010)

Learning Activity 4

Wellbeing focus

- Assessment of wellbeing
- Wellbeing assessment tools summary

Key learning points

- Effective assessment of wellbeing is based on multiple sources of information. It is an opportunity for multidisciplinary collaboration.
- Assessment of wellbeing includes evidence from families. Most importantly, assessment of wellbeing includes children's own reports.

Scenario

Elliot is four years old and has been attending family day care three days per week since he was 12 months old. Elliot has a chronic health condition that requires him to attend hospital a couple of times a month for a transfusion, sometimes staying overnight. He is becoming increasingly upset and withdrawn in the build-up to these days.

Amir, Elliot's family day care educator, is becoming increasingly concerned about Elliot. As part of her usual observation and planning cycle, Amir decides to spend some time focusing her assessment on some of the key features she knows underpin positive wellbeing development, including Elliot's self-confidence and his self-regulation abilities.

In addition, Amir also wants to assess the environment she is providing for Elliot to ensure that it allows him lots of opportunities to practise and develop the dispositions associated with positive wellbeing. Most importantly, Amir wants to make sure she includes Elliot's perspective so that her assessment 'picture' is as complete as possible.

Amir knows that her observations need to be holistic and include Elliot's wellbeing development across a variety of contexts. Amir knows that Elliot's behaviour is likely to be different at home and also when he attends hospital. She contacts Elliot's dad, Marcus, to build a more detailed understanding of Elliot. Marcus is delighted to discuss things with Amir. He lets her know that the family has also noticed an increase in Elliot's anxiety about his hospital visits.

He thinks this is impacting negatively on Elliot's overall wellbeing. Marcus tells Amir that during

his last hospital stay Elliot met with a child life therapist, Alex, to begin some sessions to help him develop some practical coping strategies around his treatment and an age-appropriate understanding of his illness.

Amir asks if she can contact Alex to get some ideas of how to talk to and support Elliot in his understanding of his illness and Marcus agrees that this would be a great connection to make.

Several weeks later Amir has undertaken a range of assessments and has a much clearer understanding of Elliot's wellbeing skills, including those that will benefit from targeted support. She has also spoken several times with Alex and is much more confident about how to talk to Elliot about his hospital visits and what happens there in a positive and developmentally appropriate way.

With guidance from both Alex and Marcus, Amir has created a small hospital play space. To support Elliot's play and conversation, she adds some of the medical equipment that Elliot might see during doctors' visits and hospital stays. During their focused play sessions, Elliot and Amir have had multiple opportunities to have meaningful conversations about his feelings and worries. This has been crucial in assisting Amir to develop targeted learning opportunities focused on truly supporting Elliot's wellbeing in specific and meaningful ways.

Reflective questions

- Think of the range of assessment tools you currently use in your daily practice. How many of these include a wellbeing focus (for example, attachment; affect; regulation; resilience; persistence; flexibility; confidence; peer relations; prosocial skills)?
- What types of processes do you have in place to ensure there is open communication with families and other early childhood professionals? Think of some ways that you could improve on this.
- How do you make your assessment and observations relevant to the children and families you support? How could you make this more meaningful?

Effective practice is strengthened when early childhood professionals gather information, including the views and perspectives of each child, and use it to inform, review and enrich decision-making. (VEYLDF, p. 8)

Multiple perspectives are essential for the accurate assessment of wellbeing. The perspectives of the family and the child should be included wherever possible. Assessments across time and at different intervals of the day provide the most holistic view of the child's wellbeing. Partnerships with families and other professionals assist this process greatly. The importance of a shared language, one of the aims of this document, is central. Approaching assessment as a collaborative process enables the knowledge of the family and the expertise of the professionals involved to build an in-depth, culturally relevant picture of the child's development.

Enrich your thinking about assessment for wellbeing by watching two short videos featured in the Early Years Exchange, No. 11, 2013 of Belgian early childhood expert Professor Ferre Laevers talking about his research, with a focus on:

- what children's wellbeing and involvement is
- what to look for in seeing and understanding children's levels of wellbeing and involvement
- how to create powerful learning environments to support and improve children's wellbeing and involvement.

Watch the video: <http://bit.ly/2ciWmQK>

Wellbeing in practice

The Early Years Learning Framework (EYLF) and the VEYLDF explicitly highlight the key capacities associated with whole-of-setting wellbeing. The principles, practices and outcomes described in both documents provide evidence of what is necessary to maximise wellbeing for both early childhood professionals and children alike.

Having high expectations for children, with environments that promote children's agency and choice, further enhances each child's wellbeing. When these environments are underpinned by pedagogical practices that use integrated teaching and learning approaches to support sustained shared interactions, the positive effect on wellbeing of children and early childhood professionals is even stronger. Children need predictability and consistency in their lives to feel confident enough to try new things and build relationships with new people. Respectful relationships and responsive engagement are fundamental to supporting children's wellbeing dispositions.

Learning Activity 5

Wellbeing focus

- Promoting secure attachment

Key learning points

- Responsive care giving lays the foundation for secure attachment.
- Open communication with families builds strong and meaningful relationships.

Scenario

Sam is 15 months old and has recently started to attend long day care. He attends three days a week and is usually dropped off and picked up by his mum, Janice.

Drop-off is becoming increasingly stressful for Sam and he cries loudly and clings to his mum. Sam remains upset once Janice has gone and will often lie on the floor at the playroom door, crying whenever anyone enters or leaves the room. The room leader, Shannon, is concerned about the anxiety the situation is causing for both Sam and Janice.

Shannon decides to meet with Janice to have a chat about some coping strategies they might try to increase Sam's familiarity with the centre and help ease the transition. Shannon suggests developing a little photograph book with some familiar family members so that the educators can talk with Sam about his family. Janice asks if she can have some photographs of Sam engaged in room activities so she can talk about these at home. Shannon also suggests that Janice could try sending Sam in with a scarf or small piece of clothing that has the scent of Janice's perfume so that Sam could hold or snuggle it for some reassurance when he is upset. Shannon knows that predictability and consistency are really important for very young children so she suggests that she will try to ensure there is staffing consistency in the room.

Janice indicates she has some work flexibility and suggests that she might try dropping Sam off a little bit later so there aren't as many parents coming in and out of the room doing morning drop-offs. Shannon agrees that arriving at a time when there are multiple adults entering and leaving the room is challenging for Sam and says she will ask the other centre educators to limit coming in and out of the room too, unless absolutely necessary.

Shannon asks Janice if Sam has any favourite activities that she could set up in advance of him arriving. Janice suggests some favourite stories that he loves. Finally, Shannon and Janice agree to develop a predictable routine where Janice spends a few minutes engaging Sam in an activity alongside Shannon, before directly 'handing him over' to Shannon.

After several weeks there is a marked improvement in Sam's transitioning, with much less upset on his part. Shannon's proactive approach and her inclusion of Sam's mum in the discussion were crucial elements in the success of the support plan. Sam is now happy to engage with the learning activities throughout the day and is much more confident to engage with a variety of educators within the room.

Reflective questions

- Consider the practice within your own setting and list three ways improvements could be made to promote secure attachment in your under-three-years program.
- How do you assess very young children's wellbeing in your setting? What does secure attachment look like?
- Think of some examples you can share with your team to support very young children to develop secure attachments within your setting.

Wellbeing and protective factors

The wellbeing of children in vulnerable circumstances is at risk. In addition, significant life-changing events, such as serious illness, family separation and bereavement can have a negative impact on all children. Planned and coordinated support is crucial to mitigate some of the risk factors associated with these events to ensure the most vulnerable children and families are effectively supported. However, we must also remember that even the most resilient child's sense of security will sometimes be tested. What might seem like a relatively small change in a child's life can have a long-term impact on wellbeing if the child doesn't have the capacity and support to manage the experience effectively. A new sibling, starting in a new early childhood setting or transitioning to school are all experiences for which many young children might need additional support to manage positively. Providing warm and stimulating environments where children are included and supported to discuss and manage their own wellbeing can help to strengthen the protective factors that act as a buffer against some of the life challenges children will face.

Secure attachments are critical for all children from birth and link to positive mental health outcomes. Attachment means having attentive, affectionate, consistent, available, attuned adults as a source of comfort and reassurance. (VEYLDF, p. 18)

Learning Activity 6

Wellbeing focus

- Positive relationships
- Positive affect
- Resilience

Key learning points

- Consistent and predictable relationships contribute to a child feeling safe and secure.
- Open communication with children and families is essential for developing a range of protective factors.

Scenario

Gabriel is seven years old and has recently started to attend after-school care. His mum, Vicky, has had to increase her hours of work as his dad has a chronic health condition and is no longer able to remain in paid employment. Gabriel's classroom teacher, Paul, is aware of the home situation, as is Anna, the after-school hours care coordinator.

Gabriel has been visibly upset on the last two occasions that he has attended the after-school care program. On one occasion he refused to leave the classroom and required Paul to stay with him until he calmed down. Vicky knows that he is worried about what is happening at home so she hasn't been telling him on the days he needs to go to after-school care as she doesn't want him to worry about it throughout the day. Both Paul and Anna feel this is adding to Gabriel's anxiety, so they ask Vicky to meet with them to discuss a joint strategy.

Prior to the meeting, Paul talks to Gabriel about how he is feeling and what might help. Gabriel tells Paul that he is worried about his mum and dad, and how he feels sad that he can't help. Gabriel tells Paul that when he goes to after-school care he is worried that there won't be anyone at home to help his dad if he gets sick, as he knows that his mum is at work. Gabriel says he thinks his dad is lonely because he has seen him crying. Paul acknowledges and affirms Gabriel for being able to describe how he has been feeling and reassures him that it is okay to feel worried and sad some of the time. Paul asks Gabriel if there is anything that might help him feel less worried and sad.

Gabriel says he will think about it and let him know.

At the meeting with Vicky, Paul relays the conversations he and Gabriel have had. Vicky is surprised that Gabriel is keenly aware of the emotional strain at home and that he is able to describe his own emotions so well. She agrees that she needs to better prepare Gabriel on the days he is coming to after-school care and reassure him that there are things in place should his dad get sick.

A follow-up meeting is scheduled for two weeks' time and everyone agrees that it would be good to ask Gabriel if he would like to be included in this next meeting. At the time of this next meeting, Gabriel attends with his mum and dad and looks visibly more settled – smiling and holding his dad's hand. Gabriel suggests that he would like to call his dad before he goes to after-school care to make sure he is okay. Anna says this isn't a problem and that she will arrange for this to happen. Vicky agrees that it will be best if she tells Gabriel in the morning on the days he is attending after-school care so it isn't a surprise at the end of the day. Gabriel's dad also gives Gabriel a job to do – he tells him that he is to have a fun time at after-school care and bring home lots of stories about the activities he has been doing. Anna suggests that Gabriel might like to make a video diary of the activities he gets involved with to share with his dad when he goes home. Gabriel is delighted with this idea.

Reflective questions

- Can you think of some examples of situations where a child might need support to help develop their resilience? What kinds of proactive approaches could you use?
- Can you think of positive ways to include the children in your setting to contribute to the discussion about their own wellbeing?

All children have a right to respectful treatment and the inclusion of their perspectives in decision making. Children have a right to participate in decisions that affect them. This requires professionals to provide opportunities and challenges that afford children the space, time, voice, audience and capacity to make a difference in their environment. Children may show ingenuity, creativity and skills that were previously unnoticed. (VEYLDF, p. 10)

Children as young as three years old can reliably begin to talk about their own strengths and wellbeing dispositions. Their own contribution in the assessment of and planning for their wellbeing is crucial. (Mashford-Scott, Church & Tayler, 2012)

A whole-of-setting approach

The most effective early years settings are those in which a climate of wellbeing is promoted, not only with regard to the children and families attending the setting, but also for the professionals working within it. When early childhood settings are caring and nurturing, everyone's wellbeing is supported.

Learning Activity 7

Wellbeing focus

- Positive affect
- Positive attitude
- Modelling wellbeing dispositions and skills

Key learning points

- The most effective settings have a whole-of-setting focus on the promotion of wellbeing.
- Children, families and early childhood professionals are supported to develop the skills and dispositions associated with positive wellbeing.

Scenario

Jay has worked as a Foundation Level teacher in the local primary school for the past five years. Jay loves her work and takes a great deal of pride in the positive learning environment she and her co-educator provide for the children in her class.

Jay has also recently become the main carer for her mother, who is unwell. Jay is finding it increasingly difficult to remain as positive and enthusiastic about her work as she would like. During a planned art experience Jay is feeling particularly low; one of the children she is next to draws Jay a sunshine picture and says: 'This is for you, to make you happy because your face looks very sad.' Jay knows that just as a positive mood can be modelled to children, so too can negative emotions. Jay takes this opportunity to explain she is feeling sad because her mum is unwell, and this reminds her of how important it is that she expresses her emotions in appropriate ways and models this to the children.

Jay reflects on this and decides to be proactive. She makes a time to discuss how she is feeling with her leading teacher. Jay knows supporting her own wellbeing is essential for her to be able to be a positive model to the children.

Jay discusses the impact of the current stresses in her life with her leading teacher and together they identify some strategies that Jay feels will help her balance her personal commitments and her work.

Jay also identifies some specific wellbeing professional development she would like to attend and suggests that 'supporting professional wellbeing' become a regular discussion point on the monthly staff meeting agenda. Jay and her leading teacher decide to establish a roster of regular catch-ups to discuss and review the strategies that Jay is going to implement, to explore any learning from the professional development she has attended and look at whether any other specific support may be necessary to assist Jay to adjust to the changes in her family circumstances.

Feeling supported by her senior management team, Jay feels much more able to set a positive role model to the children she teaches. She knows that by modelling her capacity to manage the stress in her life and the emotions she is feeling, she is modelling resilience. This modelling helps the children to further develop their own emerging wellbeing capacities.

Reflective questions

- Settings where wellbeing is valued have the greatest outcomes for children. Can you identify some ways in which staff wellbeing could be supported in your setting?
- Can you reflect on a time when your own wellbeing disposition was challenged? How did you feel? How did you manage things? What impact did it have on your colleagues? What impact did it have on the children you supported? What support did you find helpful?

Targeted wellbeing support

When children's wellbeing is the focus for early childhood professionals, wellbeing skills and dispositions are strengthened and supported in routine, everyday engagements. Early childhood professionals have a thorough understanding of child development and how best to provide explicit experiences to extend children's cognitive and physical development. When early childhood professionals have the same understanding of wellbeing development, they can give the same level of attention to providing experiences that explicitly target the development of children's wellbeing skills and dispositions. Making the most of opportunities to support children's wellbeing in both incidental and deliberate ways underpins the most effective and successful early childhood settings and embodies the vision of the VEYLDF.

Studies have found that as few as 40 per cent of children begin their first year of schooling with the necessary wellbeing skills to enable them to maximise their full learning potential (Bernard, Stephanau & Urbach, 2007). Children who have been supported to develop a strong foundation for wellbeing demonstrate a greater capacity to manage their own emotions and those of others, assert themselves when required, articulate how they feel and regulate their emotions.

Learning Activity 8

Wellbeing focus

- Responsive relationships
- Self-esteem
- A sense of belonging

Key learning points

- The foundations of wellbeing are laid in the very early years of life. These skills build and strengthen with repeated exposure to positive feedback and affirmation.
- Children respond positively when there are clear boundaries and consistent expectations.

Scenario

Kate has recently given birth to her second child, and must attend her baby's six-week assessment with the maternal and child health nurse, Fiona.

Kate's older child, Noah, is 23 months old. His behaviour has become more challenging since the arrival of his sister. Kate knows it is important to provide reassurance and praise to support him through this life-changing event, but she is struggling, and describes his behaviour to Fiona as increasingly 'naughty and attention seeking'.

Fiona knows Noah from previous visits and considers his behaviour typical for a child his age and is confident that with some supportive strategies Kate can support Noah to connect with his sister and feel a sense of belonging in his family.

During the appointment, Fiona models some strategies for Kate. When Noah is playing well with the toy kitchen, Fiona acknowledges and affirms how well he is doing and how kind he is for making tea for everyone.

Fiona asks Noah if he could make baby a 'tea' and emphasises again how well he is doing in his new role as a 'big brother'. When Noah responds with excitement to the request, Fiona again models for Kate some additional ways to reinforce Noah's positive behaviour.

Kate and Fiona discuss some simple tasks, in the new baby's care routine, that Noah could participate in so he can feel a real sense of worth. They talk about giving Noah the opportunity to feel included in things, and how Kate setting aside some dedicated one-to-one time with Noah each day might help regulate some of his challenging behaviour. Kate acknowledges how vulnerable Noah must be feeling since his new sibling's arrival. They also talk about ways to manage Noah's behaviour when it is not so positive and how children benefit from clear and consistent expectations of what is and isn't acceptable behaviour.

At Noah's 24-month visit Kate appears much happier. Noah is laughing with his mum as they enter the room, and is carrying a toy for his baby sister. On repeated occasions throughout his visit he demonstrates positive affection towards both his mother and his sister with hugs, kisses and smiles.

Reflective questions

- Think of a time when you have used positive praise and affirmation to raise a child's self-esteem. What did you do or say? How did it influence the child's behaviour?
- Think about how you respond to children's challenging behaviour in the setting in which you work. Do you respond reactively or in a planned and consistent way? Think of two ways your approach could be more consistent.

Early childhood professionals use integrated teaching and learning approaches to share strategies with families and other adults to support learning in the home and other settings. (VEYLDF, p. 15)

Conclusion

This practice guide focuses on the most relevant, contemporary and prominent assessment tools to use across early childhood education and care settings. The tools identify key aspects of progressive development of wellbeing in children from birth to eight years, and the typical developmental trajectory that this follows.

Early childhood professionals need to be aware of how wellbeing capacities can be identified, supported and strengthened, and the range of assessment tools that can be utilised to contribute to this.

Beginning in infancy, responsive care giving, warm and loving environments, secure attachments and a sense of security provide the foundation upon which all other wellbeing capacities are based. Infants who are supported to gradually become more regulated and controlled are beginning to show the very early signs of positive self-control. By three years of age, these capacities have strengthened and with careful nurturing will become much more refined. By the time children reach the age of five or six there has been a huge leap in their social-emotional wellbeing skills and for those children who have had the opportunity to engage in repeated positive learning experiences, executive function now plays a much greater role.

Impulse control, following rules, persisting with tasks when they are difficult or don't go as planned, getting along with others and making and keeping friends are all crucial skills in the development of lifelong wellbeing.

This practice guide and its scenarios provide a platform to reinforce current best practice, while also prompting early years professionals to reflect on and discuss those areas of practice that could be strengthened. The guide provides a common lens and a shared language for use across the various settings that children participate in, and this fosters greater multidisciplinary collaboration. In turn, this will support professionals to use more consistent approaches with children involved in multiple programs and settings, and will allow all children to develop the necessary wellbeing skills required for lifelong learning.

At any point in their lives children can experience a range of factors that might challenge learning and wellbeing development. Placing wellbeing firmly on the early years agenda and enriching and building partnerships with families and other professionals is crucial. Communicating with children and families in meaningful ways will assist children to further develop and strengthen their range of capacities, dispositions and skills associated with lifelong positive wellbeing, which will in turn maximise their life chances.

The premise is simple: repeated positive experiences strengthen positive neural pathways and the areas of the brain that stimulate positivity, optimism and resilience. Repeated negative thoughts and experiences in the early years strengthen negative neural pathways (such as those for sadness, fear, anger and helplessness).

Positive wellbeing is an emerging capacity: a developmental journey with its critical learning period in the early years. Wellbeing skills and dispositions are cumulative and can be scaffolded, modelled and explicitly taught.

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