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ABSTRACT

Noting that the preschool period is important for the formation of individual habits and modes of behavior related to health, the Czech Republic initiated the Healthy Kindergarten (HK) Project, thereby expanding the Healthy School Project for primary schools introduced into the country by the World Health Organization. This report describes the HK Project and details procedures for its development and implementation at individual schools. Part 1 explains the objectives of the HK Project and sets out the 16 underlying principles. The first nine principles concern creating conditions for children's well-being and health: (1) a holistic health concept; (2) meeting children's needs; (3) spontaneous play; (4) free movement; (5) healthy diet; (6) self-esteem support; (7) social climate of respect and cooperation; (8) rules and rhythm; and (9) environmental comfort. The next two principles relate to education for a healthy lifestyle: (10) early education for a healthy lifestyle; and (11) experiential learning. The remaining five principles address support of social and professional partners: (12) kindergarten and family community; (13) participation in management and education; (14) teacher's healthy lifestyle; (15) kindergarten as part of the community; and (16) stress-free transition to primary school. Part 2 of the report outlines conditions for promoting children's well-being and health, presents a curriculum outline, and discusses ways to obtain support of community, parent, and professional partners. Part 3 details ways individual programs can participate in the HK Project and become part of its organizational network, and part 4 provides detailed information on how to develop a health project in an individual school. (Each part contains multiple references.) (KB)



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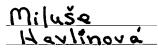
Miluše Havlínová, Pavel Kopřiva et al.

THE HEALTHY KINDERGARTEN



A Model Project of Health Promotion in the Kindergartens of the Czech Republic

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THE HEALTHY KINDERGARTEN



THE HEALTHY KINDERGARTEN

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It is not an exaggeration to say that health promotion in kindergarten is connected with the whole educational system, society and the general population. In fact it is related to all that goes on in society. Nothing in kindergarten is neutral in relation to human health.

So the task of developing a health promotion program for kindergartens is not an easy one. No project of this kind probably can cover all the issues completely. We are aware of this; we did not, however, have to start from scratch, either.

In modeling the health promotion project we concentrated on facts and knowledge coming from three sources:

- elements of current practice that clearly have the aim of health promotion;
- hidden possibilities in current practice that could be taken advantage of if reconsidered in relation to health;
- new possibilities that we have to search for, preparing the grounds for their development.

As a result, the project includes much that kindergartens have consciously been doing for health promotion already. In other cases, they have been doing certain things, but have not linked them to health support, or have done so just randomly. Accordingly, they can venture to re-define the existing possibilities. These two areas will probably form the greater part of any health promotion program. The third, and smallest, area is a space for new discoveries, creativity and experimenting. It is this last that we decided to explore and test for new ideas. We have found out that some kindergartens have already taken some steps in this direction and are exploring further on their own initiative. There are still issues, however, that remain undiscovered, and this will no doubt be true even after this attempt of ours.

Progress can be made if kindergartens who wish to promote health begin to develop their own projects, implement them and share their experience with others.

What can kindergartens do to reach this stage? We have attempted to answer this question. This model project, entitled "Healthy Kindergarten", is the result. This book presents its objectives and contents.

What is the structure of the book?

We have tried to structure this book in a way that will not only enable you to read it word by word, but also browse through it, choosing only issues that are of interest to you.

The introductory chapter "About the Healthy Kindergarten Project" should facilitate for easier browsing. It explains the project's objectives and sets out sixteen underlying principles that are its core. Another feature that simplifies searching is the division of the topics into three sections corresponding to three areas of health promotion; these are further divided into sixteen chapters covering the above mentioned sixteen principles. The structure of each chapter remains the same, in keeping with the contents of the sections. Last but not least, the graphics of the book are intended to be user-friendly and enable easy reference to relevant information.

Each chapter consists of three parts: a brief explanation of the principle (shaded text), the core text (in very condensed and accessible language) and additional reading. (Note: the



English edition does not contain the full texts of additional sources; however, their titles are mentioned at the end of each chapter.)

To enable users to browse through the book and choose only issues of interest, the contents of individual chapters are relatively independent of each other. This leads, however, to some repetition of ideas throughout the text.

The book also includes a description of our guidelines for implementation. The third chapter "Participating in the Healthy Kindergarten Project" gives advice on how to develop one's own project and become part of the network. There is also information on the organizational structure of the network. The final, fourth part of the book contains a very detailed description of the procedure of the project development. It provides kindergartens with a very useful tool for the creation of their own, tailor-made individual projects and thus facilitates the implementation of health promotion principles in their everyday activities.

At the end of each chapter, there are bibliographic references of additional reading connected with the topic discussed and intended to offer more detailed information on the given topic. (Note: in this English edition, titles have been translated in order to give an idea of the content. The original Czech title follows, printed in italics.) The vocabulary at the end of the Czech edition should answer any questions about terminology, especially the loan words used throughout the book.

Any questions, observations and suggestions from the readers of this booklet would be appreciated. The overseeing Council of the Healthy Kindergarten Project that has been appointed for this purpose will read them and use all inspirational stimuli to improve the existing project.

The correspondence address is: Poradna pro podporu zdraví ve školách ČR, Státní zdravotní ústav, Šrobárova 48, 100 42 Praha 10.

The authors

Reactions of a group of kindergarten teachers to the first version of the HK project

- "The impressions of all teachers after getting acquainted with the HK project were the same:
- 1. We browsed through the project and looked at the contents. Our first impression was not very positive. Maybe it was the length of the text, or the fact that we had only two days to read the project.
- 2. After we have read the texts, we changed our mind and began to like the project.
- 3. Our second reading was much more careful and detailed. We tried to spot passages that could be omitted, but found none. We realized the project was intended for the wider public in the educational world. What is a matter of fact for us, does not necessarily have to be so obvious to others, for example young teachers or non-teaching kindergarten staff. At this stage, we have grown enthusiastic about the project!"



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PART I

ABOUT THE "HEALTHY KINDERGARTEN" PROJECT



ABOUT THE "HEALTHY KINDERGARTEN" PROJECT

What is meant by the attribute "healthy"?

The expression "healthy" in the name of the project is not meant as a criterion of any formal division of kindergartens into healthy and unhealthy. The attribute of "healthy" is taken as

a goal that each school or kindergarten should try to achieve sooner or later. If a kindergarten is admitted to the network of the so-called "healthy kindergartens", it is an expression of an appreciation of its initiative, effort and insight into its own conditions and needs, of its willingness to cooperate with partners and of the steps it has already taken towards global health on its premises. "A health promoting kindergarten" is an expression which would hardly be accepted into wider use, therefore we decided to use the more simple attribute "healthy". It should be kept in mind, however, that it does not designate a state, but instead it marks a goal that the kindergarten is trying to come close to.

Why a health promotion project for kindergartens?

There is already a project for primary schools called "The Healthy School". It was introduced in our country via the European Office of the World Health Organization in 1991 and then implemented. The network of the "Healthy Schools", however, relates to primary schools only.

Because teachers and headteachers of kindergartens as well as school inspectors from various parts of the Czech Republic have shown great interest in having a similar project specified for preschool age and kindergarten, we decided to elaborate such a project. But this formal reason is not the most important. More significant is the fact that preschool age is a decisive period for acquiring an individual's habits and modes of behavior, the basis for his/her future lifestyle and life as a whole. Our project intends to create preconditions for a healthy and worthwhile life.

What are the grounding ideas of the "Healthy Kindergarten" project?

- Humans live in interrelations with the world as a whole and in a mutual interaction with the surrounding natural and social environment, regardless whether they are aware of it or not.
- Awareness that each individual must live in harmony with the surrounding world and environment is the prerequisite for the maintenance of his/her health and a healthy world.
- Health is not only absence of disease. It is one of the primary values that form the quality of human life.



- At a time when individuals and mankind are threatened by diseases of civilization and destructive dependencies on chemical substances, active health protection and promotion is important.
- An individual's health must be promoted in a comprehensive way, as its constituents are interlinked and indivisible (physical, mental, social and spiritual health and well-being).
- An individual's health is associated with the environment (society and nature); this applies to all its constituents.
- The health status of each human being depends to a large extent on their attitude to their own health. From a long-term perspective this implies that it depends on the lifestyle they choose or which is imposed on them.
- The lifestyle of children, in particularly the young and the very young, depends above all on the lifestyle of their families.
- The habits of a sound lifestyle and health promoting behavior must be created during preschool age when habits and attitudes of all kinds become established most permanently.
- Healthy habits and attitudes in preschool age are most easily created spontaneously by the children's own experience, i.e. by witnessing examples of a healthy behavior in the surrounding environment and living in healthy conditions.
- Model behavior as regards their own health and the health of others as well as the effort to create healthy living conditions for children is the responsibility of adults. No person or institution is an exception in this respect.

What are the objectives of the "Healthy Kindergarten" project?

It wants to make a contribution to:

- 1. the creation of conditions for physical, mental, social and spiritual well-being of children during their stay in the kindergarten (promotion of current health)
- 2. the education of the preschool child for a healthy lifestyle characterized by:
- habits and skills of a healthy lifestyle
- resilience to stresses and health damaging factors which can lead to abuse and dependence (promotion of future health)

The two objectives are in mutual interaction. Health education is purposeful if it is based on practicing of everything which promotes health and the elimination of what is harmful to



health, i.e. if it is based on the creation of conditions for well-being in the kindergarten. Although we create these conditions with the aim of promoting the current health status of the child, the experience of well-being is of immense importance for education. To achieve harmony between the two objectives is of general significance for education, but is specific for preschool education because the preschool child learns almost exclusively by direct experience.

Which principles characterize the "Healthy Kindergarten" project?

The general starting points of the project were applied to preschool age characteristics and to our kindergarten structure.

Note: Kindergarten in the Czech Republic is organized separately from school but run by qualified kindergarten headmasters and teachers. Traditionally it represents an effective balance of educational institution and day care center. Currently, kindergartens are still appreciated by families with children from 3 to 6 years either because most women return to their jobs after the child has reached the age of three or because they have younger children at home.)

The main principles are based on the interaction between the child, family, kindergarten, legislation framework, community, society and environment.

In our understanding, a principle is a requirement which cannot be omitted in the project without impairing its identity. On the other hand, the principles are general enough to provide each kindergarten with space to choose their own priorities and means to implement them. A lot depends on their own circumstances, needs and educational skills.

The following principles are divided into three areas of health promotion, corresponding to three sections of the project and the chapters within these sections. They are formulated with the kindergarten perceived as the main agent of change.

Healthy kindergartens work on the basis of the following principles:

I. Creating Conditions for Well-Being and Health



1. HOLISTIC HEALTH CONCEPT

HK perceives well-being as a subjective sense of health. Health is a state that can be assessed and verified objectively. There is mutual interaction between well-being and health. The sense of health is the sum of the physical, mental, social and spiritual well-being of an individual. This is true of both adults and children.



2. MEETING THE NEEDS

HK satisfies and respects the everyday needs of children: the general human needs, the specific needs of their age as well as their individual and specific manifestations. In the same sense, it takes care of the well-being of adults - teachers and parents alike - without which the well-being of children would not be possible.





3. SPONTANEOUS PLAY

HK provides space, time and tools for spontaneous play emerging from the natural needs and interests of children. Play is the main activity that enhances self-developmental learning.



4. FREE MOVEMENT

HK protects and strengthens children's health by creating an appropriate environment with enough free movement, optimum daily routines and a well-balanced diet.



5. HEALTHY DIET

HK takes care of a nutritious diet, a factor which has a great impact on mental and physical well-being. A well-balanced diet optimally satisfies the demands of the human organism in terms of its growth and development, regeneration of tissues, mental and physical performance and immunity against external as well as internal influences.



6. SELF-ESTEEM SUPPORT

HK respects and supports the natural development of preschool children. It promotes their self-esteem, protects them from situations and influences that they cannot handle and that are therefore stressful for them, creates a positive emotional environment and gives them opportunities to strengthen their resistance.



7. SOCIAL CLIMATE OF RESPECT AND COOPERATION

HK builds its social climate on the basis of mutual trust, respect, empathy and cooperation among all people who participate in the kindergarten's work and activities.



8. RULES AND RHYTHM

HK draws up a framework of rules structuring daily life in the kindergarten so as to create a rhythmic order while still providing space for teacher's flexible decision making, good access to information and effective communication with parents.





9. ENVIRONMENTAL COMFORT

HK creates a welcoming, aesthetically pleasing, inspiring and hygienic environment. The quality of environment determines the well-being of all participating persons.

II. Educating for a Healthy Lifestyle



10. EARLY EDUCATION FOR A HEALTHY LIFESTYLE

The HK project is based on the general goal of health education. All children should grow up to treat their health as well as the health of others as an irreplaceable value and a precondition of a meaningful life.

The content of health education is derived from such natural topics as human physiology, mental health and personality, interpersonal relations, attitude to life, society and nature. All this should be presented in a form understandable for preschool children.

In applying the goals and content of health education, kindergartens should bear in mind their own specific circumstances, both internal and external.



11. EXPERIENTIAL LEARNING

HK uses methods of health education that are natural to children. At the preschool age this means that children learn during play through experimenting and experiencing. They learn by living which includes their life in the kindergarten. If we decide to teach in a planned manner (employ organized learning), we should not teach by lecturing, but by doing things and modeling situations that are natural to children.

III. Seeking the Support of Social and Professional Partners and Collaborating with Them

Community of Kindergarten and Family



12. KINDERGARTEN AND FAMILY COMMUNITY

HK promotes partnership between kindergartens and families as the strongest prerequisite for the effectiveness of the health promotion project. Such a community comes into being by mutual interaction of influences from home and school. It can exist only if there is tolerance, partnership and openness on both sides.

HK knows and takes into account the quality of the family background in which each child lives. It strives to compensate for harmful influences, substitute the missing and enhance the positive ones.



Kindergartens should offer ideas, skills and inspirations to families. Families offer insight into their methods of upbringing, a deeper knowledge of the children and an introduction of real life into the kindergarten.

Kindergarten Management and Collaboration with Community



13 PARTICIPATION IN MANAGEMENT AND EDUCATION

HK uses and develops a style of management which is based on the participation and cooperation of all members of the educational community.

The Teacher



14. TEACHER'S HEALTHY LIFESTYLE

HK relies first of all on teachers as the main integrating element in the kindergarten. Their abilities are the prerequisite of the project's success. Their healthy lifestyle habits and attitudes to health work as behavior models for the children to imitate.

Community programs, professionals



15. KINDERGARTEN AS PART OF THE COMMUNITY

HK strives to be part of the wider community and thus become one of the preconditions of its stability. It participates in community development programs through its activities. Through promoting a positive social climate at school and productive relations with parents, it contributes to the improvement of the overall quality of the social climate in the community. Within their educational program they thus enrich the cultural and spiritual life of the community.

Primary School



16. STRESS-FREE TRANSITION TO PRIMARY SCHOOL

HK strives to promote good relations with primary schools in the community so as to create conditions for a stress-free, fluent transition of children from kindergarten to the first grade of primary school. In this, it is led by the belief that school attendance is meaningful and rewarding only if all children are encouraged to believe in their own abilities and be confident in their new role as pupils.



What are the means recommended by the HK project?

The goals and principles of the HK project cannot be achieved by short-term efforts or isolated activities. Instead, a systematic and complex approach must be used, permeating all the activities carried out in the kindergarten and involving everyone concerned (family, school, community representatives).

The means recommended for health promotion in kindergarten are based on the following three areas:

- 1. Conditions for well-being and health
- 2. Educating for a healthy lifestyle
- 3. Social and Professional Partners of the HK project.

Documents

Documents of the WHO on health protection and promotion policy up to 2000 (1976-1994). National Program of Health Restoration and Promotion for the Czech Republic (1992). Health Program for Primary Schools in the Czech Republic (Ministry of Health and Social Welfare, 1988).

Scottish program "Healthy School" adopted by WHO for Europe (1986/91).

Convention of Children's Rights (Czech Republic, 1990).

Personality-Oriented Model of Preschool Education. E. Opravilová, Pedagogical Faculty, Charles University, Prague. (Grant of the Ministry of Education of the Czech Republic, 1993.)



PART 2

THE "HEALTHY KINDERGARTEN" PROJECT



I. CREATING CONDITIONS FOR WELL-BEING AND HEALTH

Children learn what they live

If a child lives with criticism, she learns to condemn.

If a child lives with hostility, he learns to fight.

If a child lives with ridicule, she learns to be shy.

If a child lives with shame, he learns to feel guilt.

If a child lives with tolerance, she learns to be patient.

If a child lives with encouragement, he learns confidence.

If a child lives with praise, she learns to appreciate.

If a child lives with fairness, he learns justice.

If a child lives with security, she learns to have faith.

If a child lives with approval, he learns to like himself.

If a child lives with acceptance and friendship, she learns to find love in the world.

If a child lives with	
he or she learns to	

What other pairs of words can you think of? Continue and create your own statements.





HOLISTIC HEALTH CONCEPT

HK perceives well-being as a subjective sense of health. Health is a state that can be assessed and verified objectively. There is mutual interaction between well-being and health.

The sense of health is the sum of the physical, mental, social and spiritual well-being of an individual. This is true of both adults and children.

Rationale

As preschoolers, children undergo a rapid development of both their physical and mental capacities. In particular, the brain and the nervous system develop during this period; the organism grows - both in terms of its morphology and function.

To ensure their gradual physical development, the children's everyday physiological needs have to be fully satisfied: they should have enough free movement, stay outdoors (best of all in the countryside) and keep up a healthy diet. They should not be burdened by too demanding tasks at school or in sporting activities; a view which is taken as a matter of fact in our culture, but not necessarily shared in other cultures.

What is not always realized, however, is that sound development during the preschool years is made possible only if children experience the state of well-being in the mental and social sphere.

Recognizing the mutual links between the subjective and objective state (between different parts of the individual's life for his/her overall well-being and health) is consistent with the concept of health promoted by the World Health Organization (WHO). WHO puts emphasis on the prevention of diseases, on the comprehensive support of health and on the significance of the individual's attitudes and behavior for his/her health.

Kindergarten creates conditions for well-being and health by implementing the principles listed in the section "About the HK Project" at the beginning of this book.

What is most detrimental to well-being

Stress is the most detrimental factor for well-being. It is a dynamic, psychosomatic process that includes emotional perception of a situation which the adapting mechanism of an individual is unable to cope with.

Long-term stress at any age contributes to the emergence of most of the diseases that also represent a threat to life in later periods of life. Among these are:

1. Cardiovascular diseases, metabolic disorders, deficient immunity against infectious and neoplastic diseases, etc.



2. Addiction to unhealthy substances.

It is precisely during the preschool years that stress harms the child's health most seriously. In this period, the organism is still immature and the emotional constituent of stress is very strong. This is caused by the fact that in preschool children, emotions dominate over intellect and spontaneous and self-centered emotions dominate over more objective feelings and the ability of self-control.

"A bit of stress" won't kill a child, will it?

There is a great danger in the widespread belief that the best way of preparing children for the grown-up life of which stress is an inevitable part is to expose them to stress from a very early age. What in fact is the result of this?

In reality, by doing this we just exhaust children emotionally, weaken them mentally, deprive them of the strength they need for physical achievements, slow down their genuine maturing and impair the balance and immunity of the future adult. They will not be prepared for stress in adult life or for organized learning at school. Children first have to mature at the preschool stage in order to develop healthily and reach school age maturity.

The difference between effort and stress

There would be less proponents of education through stress if stress did not get confused with effort which can be made by the children without harm when they are exposed to demands for which they have matured.

Such effort is healthy and enhances the children's development in a positive direction, unless the demands exceed a critical limit. In such a case, the effort that was perceived as pleasant by the child, is replaced by stress with all its physiological symptoms which, if repeated on a long-term basis, may lead to functional disorders or even to organic changes.

The physiological symptoms of stress are among others: headaches, sweating, stomachache, lack of appetite, palpitation of the heart, accelerated breathing, and restlessness.

Telling the difference in each child between effort and stress, between demands that are supporting health or detrimental to it, is one of the major educational qualities of a kindergarten teacher.

Self-directed stress

There are individuals who are prone to stressing themselves. We can identify them even among preschool children pretty easily, although the tendency to self-stressing is more marked at school age.

The tendency to self-stressing is in part an innate psychological characteristic of these individuals; in part, it is acquired through upbringing. Children who are willing to accept and fulfill the demands and expectations of the adult environment are perceived as well-behaved, hardworking, conscientious, ambitious and successful. Unawares, they are



thus encouraged to behave in ways that consequently may become harmful to them in later life.

Few people realize that such children will soon reach a state when they will either seek stress or create their own.

Stress-resistance through well-being in childhood

We can make preschool children resistant to stress most of all by creating conditions for them in which they can live both their present and their future life in a state of well-being.

ADDITIONAL READING:

Let us Be Attentive to Emotional Disturbances of Children! (based on the text by E. Šulcová)

Sources

Šulcová, E.: The Importance of Preschool Age for the Healthy Development of the Population. / Význam předškolního věku pro zdravý vývoj populace. / Čs. psychologie, roč. XXXIII., 1989, č.2: 193-206.

Šulcová, E.: New Ways to Health. / Nové cesty ke zdraví. / Predškolská výchova, roč. XLIV., 1989-1990, č.5: 2-4.





MEETING THE NEEDS

HK satisfies and respects the everyday needs of children: the general human needs, the specific needs of their age as well as their individual and specific manifestations.

In the same sense, it takes care of the well-being of adults - teachers and parents alike - without which the well-being of children would not be possible.

Rationale

A need is a demand of an individual towards his/her environment. One is motivated by needs. Needs help us maintain the basic vital functions and to live a full-fledged life.

If needs (or any one of them) are not satisfied, the exchange of values between the individual and the environment is limited or harmed, resulting in a negative emotional experience called frustration.

If children spend a greater part of their day in the kindergarten, the requirement to meet the majority of their everyday needs is transferred to the kindergarten as a duty (toilet, food, drinking, hygiene, movement, staying outdoors, play). On the other hand, the fact that the children spend a great part of the day in the kindergarten also creates opportunities for satisfying some of their more demanding needs (cultural and hygienic habits, play in the company of other children, stimulating environment, love and respect of adults outside the family, sense of security in a new environment).

The question what needs are common to all people is a subject of research of many experts in various fields of knowledge. There have, therefore, been various concepts of needs. For the purpose of this book, let us mention at least two of them: Maslow's hierarchy of general human needs and the concept used in the system of global education (square/circle of the needs for everyone).

We have intentionally chosen general models involving human needs regardless of age and state in order to make them applicable not only to children, but also teachers and parents.

The needs of preschool children are a specific manifestation of general human needs whose variation with age gives them features and meanings corresponding to specific ages (for instance, the need of love is common to all ages, but for a preschool child, this is a need the satisfying of which cannot be replaced by anything else. If a child is deprived of it on a permanent basis, his/her development suffers). Let us mention here that concepts specific to this age are also manifold. We have chosen two concepts of the psychological needs of children: one developed by J. Langmeier and Z. Matějček and one worked out by E. Skiera (Children's Needs and School). The latter is especially useful for gaining an understanding of children's needs and their satisfaction at school.



Means

Kindergartens choose the means for the satisfaction of needs on the basis of their knowledge of the needs of specific children and adults around them. In this, they are guided by general models that are appropriately applied, for instance, in the following manner:

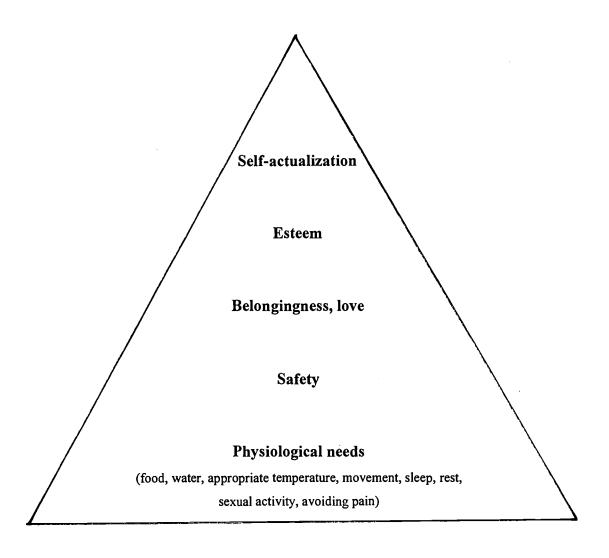
- The various concepts of needs become a useful tool if used actively. They may become a tool for us, indicating the well-being and satisfaction of both ourselves and the children.
- We are assessing how the needs of preschool children are manifested (it is possible to examine each age group in more detail). In addition, we are trying to do the same with teachers and parents (it is possible to examine different groups of parents separately) using the following categories: speech, behavior, communication.
- We notice what ways of satisfying a need suit the children best and how frustration is manifested in individual children.
- We search for educational answers to the question of how to satisfy needs through:
- the behavior and communication of the teacher during activities and in personal contact with the children;
- the structuring of an everyday routine and program, through the specialization, curriculum and educational approach of the kindergarten.

ADDITIONAL READING:

The Importance of Satisfying Individual Needs of Children



MASLOW'S HIERARCHY OF GENERAL HUMAN NEEDS



Maslow has arranged human needs into a structure that fits any person at any age. We can use the hierarchy shown above to analyze the needs of preschool children as well as of their parents and the kindergarten teacher.

This universal validity of Maslow's hierarchy of needs is a great advantage. It enables one to use the same criteria to assess to what extent the needs of different groups concerned with kindergarten education are being satisfied.

The universal character of Maslow's hierarchy, however, is associated with a great responsibility. It reminds us that all needs are omnipresent and in order to secure health and a sense of well-being, it is necessary to constantly create conditions for the satisfying of those needs.



Square / circle of universal needs

LOVE

FREEDOM

belonging to someone

having choice

MEANING

ENTERTAINMENT

being important

experiencing joy

In each square or circle of universal needs, the authors of global education put emphasis on the ways of satisfying those needs through personal experience. Although people have the same needs in common, they differ in form and ways of satisfaction. Consequently, everyone should know his/her own needs and come to learn the preferences and specific needs of others.



CONCEPT OF THE NEEDS OF A YOUNG CHILD

according to J. Langmeier and Z. Matějček

1. Need for a certain number, quality and variety of external stimuli

Such a supply of stimuli makes it possible for the organism to "get tuned" to the desired level of activity. For human beings this means that they will neither get bored, nor be permanently overburdened by stimuli.

2. Need for a certain stability, order and meaning of the stimuli

We call it "a meaningful world". Satisfying of this need makes it possible for the stimuli coming to us through our senses to transform into experiences, knowledge and work strategies. If we perceived all happenings as random, it would result in a feeling of chaos and we could not learn anything. It is therefore a basic need that facilitates learning.

3. Need for primary emotional and social relationships, i.e. relationship to primary caregivers

Proper satisfying of this need gives children a feeling of security in life and is a precondition

of the desirable internal structuring of their personalities.

4. Need for identity, i.e. need for social involvement and social value

Proper satisfying of this need facilitates a well developed sense of oneself. This self-awareness sense is necessary if one is to adopt useful social roles and set valuable goals for

one's own effort.

5. Need for an open future or a life perspective

Its satisfying provides human life with a time horizon. This, translated into the language of psychology, means the range between the openness and the limitations of fate, hope and hopelessness, vitality and despair.



Ehrenhard Skiera

CHILDREN'S NEEDS AND SCHOOL

NEED 1	emotional support, security, stability trust in oneself, the world, other people; self-esteem
NEED 2	reward, increasing the sense of one's own value and self-assurance
NEED 3	active encounter with reality, learning about and gaining of new experiences, knowledge and skills self-assurance, self-preservation, self-defense, self-assertion of authority, cultural, social, speech/communication, rational/critical, political, objective and instrumental/technical skills
NEED 4	authorship, self-esteem, stabilization of own identity and the awareness of meaning
NEED 5	own responsibility and shared responsibility, independence realizing of meaning, morality, competence and transcendence
NEED 6	aesthetic experiences and interests emotionally grounded approval of the world
NEED 7	spontaneous expression of internal feelings, self-perception, access to deeper levels of emotional life

Sources

Matějček, Z: What Do Children Need Most? / Co děti nejvíc potřebují? / Praha, Portál 1994 Pike, J., Selby, D.: Global Education. / Globální výchova. / Praha, Grada 1994.

Skiera, E.: Needs of Children and School. Appendix to the paper at the international conference on alternative education. / Potřeby dítěte a škola. Dokumentace ke sdělení na mezinárodní konferenci o alternativním školství. / Olomouc 1992.

Vančurová, E.: Psychology of Preschool Children and Their Education in the Family. / Psychologie předškolního dítěte a jeho výchova v rodině. / Praha, Avicenum 1960.





SPONTANEOUS PLAY

HK provides space, time and tools for spontaneous play emerging from the natural needs and interests of children. Play is the main activity that enhances self-developmental learning.

Rationale

- Play is the main activity of preschool children.
- Play is a distinctive self-developmental activity due to its spontaneity and intensity. The need for play in preschool children ensues from their internal desire to enter the surrounding world, get to know, control and do well in it.
- Play develops all capabilities of preschool children. In playing, children learn safely and effectively and gain new experience.
- Play is a serious activity for children, although it is full of joy. It is serious because it fulfills a very important purpose: it satisfies the need of preschool children to develop into grown-up individuals. Up to the first years at school, play works as a children's confirmation and fulfillment of their human existence.
- Without the possibility to play, children would be frustrated or even deprived. If, for example, we prevented a child from playing and constantly disturbed his/her attempts to play, we would disrupt the process of learning; the child's overall development would, in turn, suffer from an irreversible stagnation and retardation.
- An unmet need to play may even result in problems in the later life of an individual. Individuals who did not have the opportunity to play according to their needs are not capable of working efficiently in adult life.
- From the play of preschool children, we can recognize the level and character of their self-developmental needs in a sufficiently clear and open way. From the nature of children's play, we can tell how they will behave in other activities in a later developmental phase.
- The nature of play changes throughout childhood development; a preschool child goes through several stages of play. The symptoms of a later developmental period already appear during the early period. The later stage cannot precede the earlier one, but the two may overlap.

The above rationale demonstrates the irreplaceable role of play for preschool and early school age children. Teachers in health-promoting kindergartens therefore devote great care to spontaneous play of children and take advantage of all educational opportunities that play offers children.



Means

- observing individual children during play with the aim of distinguishing their developmental stages;
- sufficient number of functioning, stimulating and aesthetically satisfying toys, objects and materials for play;
- safe environment suitable for the needs of play;
- clothing that does not inhibit play;
- enough space;
- space for solitude, intimacy;
- enough time, possibility to finish or continue the play and to preserve the products of play for a period of time;
- respect for and understanding of play by adults;
- encouragement of play by choosing and creating situations that stimulate the beginning or the process of play.

ADDITIONAL READING:

Developmental Stages of Play. Intrusion of Adults into Play.

Sources

Dřízhalová, H.: Looking for New Ways in Upbringing and Personal Education of Children. / Hledání nových postupů při výchově a vzdělávání osobnosti dítěte. / Praha, PCVPP 1994 (rewarded by a prize).

Chlup, O.: Kindergarten. / Mateřská škola. / Association of Kindergarten Teachers. / Svaz učitelek mateřských škol. / Praha 1928.

Jarníková, I.: Curriculum for Kindergartens. / Výchovný program mateřských škol. / Praha, Česká grafická unie 1927.

Komenský, J.A.: Treasury of Information on Kindergarten. / *Informatorium školy mateřské*. / In: Vybrané spisy. Praha, SPN 1958.

Opravilová, E.: Children Play and Get to Know the World. / Dítě si hraje a poznává svět. / Praha, SPN 1988.



Příhoda, V.: Ontogenesis of Human Psychology, vol.I, 4th edition. / Ontogeneze lidské psychiky, 1. díl. 4.vydání, / Praha, SPN 1964.

Příhoda, V.: Issues of Preschool Education. / Problematika předškolní výchovy. / Praha, SPN 1966.

Vrána, S.: Czech Kindergarten for the New Period. / Česká mateřská škola do nového údobí. / Brno 1947.





FREE MOVEMENT

HK protects and strengthens children's health by creating an appropriate environment with enough free movement, optimum daily routines and a well-balanced diet.

Rationale

- Health is the state of complete physical, mental and social well-being, not the absence of illness or defect (definition of WHO).
- Physical well-being is negatively affected by stress which are always associated with negative emotional experience.
- Physical well-being of children is also conditioned by their optimum physical development under ideal circumstances.
- Physical growth and an intensive development of the organism are characteristic features of the first stage of human life childhood. An important part of the overall development is the development of neuropsychological structures and functions.
- The intensity with which structures and functions develop during preschool age implies that most of the child's energy focuses on this dominant direction.
- The growth and process of physical development of an individual are conditioned genetically as well as by life circumstances.
- Diet, movement, sleep and social climate are among the main external factors that influence the physical development of children and that can be optimized.
- The physical development of preschool children proceeds favourably if we recognize and respect its specific features and encourage what is ideal for specific children in accordance with their age and personality.

Means

- providing optimum conditions in the kindergarten to suit the age and individual needs of the children;
- sound diet (see the separate chapter on this issue);
- optimum daily rhythm regular alternation of activities and rest, sufficient sleeping time, appropriate way of spending the afternoon siesta, good eating habits, etc.;
- enough free movement maximum opportunity for the spontaneous activity of children in a comfortable environment;
- appropriate activities strengthening health, development of individual physical skills, etc.;
- pleasant classroom environment good architectural arrangement, readily accessible activities, material equipment, microclimate, suitable light and acoustic conditions, etc.;



- ensuring hygienic standards cleanliness of operation, regular cleaning;
- compensation for negative conditions existing in the kindergarten environment.

ADDITIONAL READING:

Examples of Appropriate Activities in Kindergarten.
The Movement Activity of Preschool Children.
Sleep of Preschool Children.
The Prevention of Accute Respiratory Diseases.
Strengthening the Health of Preschool and Schoolchildren.

Sources

Berdychová, J.: Let Our Children Grow Healthily. / Aby naše děti rostly zdravě. / Praha, Olympia 1978.

Filipová, V.: Moments with Physical Education. / Tělovýchovné chvilky. / Metodický dopis pro I. stupeň ZŠ, KHS Středočeský kraj. Dittrichova 17, Praha 2, 120 07.

Hermochová, S.: / Psychomotor Games for Children in Nursery Schools and Kindergartens. / Psychomotorické hry pro děti v jeslích a mateřských školách. / Praha, Portál 1994.

Measures Against Accute Diseases of the Respiratory System in Kindergarten Children. / Opatření proti akutním nemocem dýchacího ústrojí u dětí mateřských škol. / Metodický materiál MZ ČSR. Praha, ÚZV 1987.

Prekopová, J., Schweizerová, Ch.: A Restless Child. / Neklidné dítě. / Praha, Portál 1994.

Sameková, P. H.: Physical Exercises with Children. / Cvičme s dětmi. / Praha, Svoboda-Libertas 1993.





HEALTHY DIET

HK ensures a nutritious diet, a factor which has a great impact on mental and physical well-being. A well-balanced diet optimally meets the demands of the body in terms of its growth and development, regeneration of tissues, mental and physical performance and immunity against external as well as internal influences.

"The interplay of what we think and what we eat creates what we are - mentally and physically." (Edgar Cayce)

Rationale

- Nutrition is one of the basic conditions of life which create a subjective sense of well-being as well as an objective state of health.
- Nutrition contributes to both present and future health.
- A well-balanced diet is the basic precondition for "ideal" physical and mental development, immunity, performance and the overall health of an individual.
- A healthy diet is important in all periods of life, but in childhood it is of special importance, as it is the period of the most intense changes and growth
- A poor diet in this period of development may cause irreparable damage; many adult diseases stem from childhood.
- In assessing the impact of nutrition on health, it is necessary to keep two aspects in mind:
 - 1. Quality the energy content of food
 - 2. Quantity the biological value and time schedule of eating during the day.
- For a child, only a varied diet is a good diet. Any imbalance may cause significant nutritional deficiences and thus impair normal development.
- The growing body of a child can be endangered by lack as well as excess of energy, certain nutrients, vitamins and minerals, etc. kindergarten provides the child with a significant part of the daily food requirements and supplements the amount and quality of food provided by the family.
- Children's health must not be negatively affected by a poor diet in kindergarten
- The style of diet is created primarily by the family.
- The kindergarten, however, plays an important role in the formation of eating habits.

Means

• close cooperation between home and family in the formation and strengthening of sound dietary and eating habits;

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- varied and well-balanced diet securing the physiological needs children both in terms of quality and quantity;
- informed approach to alternative diets and critical evaluation of these from the viewpoint of a developing child
- respect for the health condition and needs of individual children;
- prevention and elimination of children's poor dietary habits;
- optimum scheduling of meals according to the children's needs;
- ensuring a sufficient supply of fluids during the day in an appropriate form;
- providing a quiet, cultivated and aesthetically pleasing environment and sufficient time for eating;
- offering food to all children present in the kindergarten at a given time;
- forming and strengthening good table manners;
- using proper technological procedures during the preparation of food;
- creating optimum conditions for children who are on special diets;
- enabling the smooth operation of the catering service;
- prevention of mass alimentary diseases.

What is a healthy diet for preschool age?

A healthy diet is a varied and full-fledged diet in keeping with the biological needs of the rapidly developing child's body. It should include enough fruits and vegetables, especially in the raw state, a sufficient amount of low-fat dairy products (yogurt, milk, cheese), lean meat, fish, poultry, legumes, cereals and suitable liquids.

The goal is an adequate supply of all the basic nutrients: vegetable and animal fat, carbohydrates, sugars, dietary fibre, vitamins, minerals - in childhood especially calcium and iron. The traditional Czech cuisine contains a lot of fat, that is why it is important to reduce the amount of animal fat and cholesterol; the amount of salt should also be reduced as much as possible.

It is necessary to remember that any one-sidedness may be harmful to a child's healthy development. We also have to realize that each child has his/her individual needs. The optimum amount of food that should be eaten varies from child to child and may differ from our idea about the right amount of food. It depends on the constitutional type of the child, his/her health status, physical activity, etc.

What are the most common mistakes in children's diets?

The most common mistakes include a poor supply of dairy products resulting in an insufficient amount of calcium, lack of fruits and vegetables, low supply of fluids, too much animal fat (butter, lard and fatty meals), eating too many sweets and smoked meat products, using too much salt, poor distribution or disbalance of meals throughout the day (small breakfast and big dinner), lack of rest, rushed and nervous eating.

Kindergartens should be aware of the most common shortcomings and try to compensate for them by offering a varied and nutritious diet.



ADDITIONAL READING:

The Setbacks of Alternative Diets.

Sources

Kačenová, S.: Nutrition. / Výživa. / A contribution to the HK Project. A text for specific purposes.

Kleinwächterová, H., Zmátlová, H.: Nutrition Needs of Humans. / Výživová potřeba člověka. / Brno, učební texty IDV SZP.

Kotulán, J., Hrubá, D., Bencko, V.: Preventive Medicine. / Preventivní lékařství. / Brno, skripta FL MU 1993.

Mom, I am Hungry. / Mámo, já mám hlad. / Praha, Erasmus 1995.

A Set of Healthy Recipes for Schoolchildren. / Receptář zdravé výživy školních dětí. / Praha, Erasmus 1994.

A Set of Healthy Recipes for Preschool Children. / Receptář zdravé výživy předškolních dětí. / Praha, Erasmus 1993.

School Catering. Magazine of the Ministry of Education of the Czech Republic. / Školní stravování, časopis MŠMT ČR. /

Regulation No. 48/1993 of the Czech Ministry of Education on school catering.

Nutrition and food, magazine of the Nutrition Society, Soběslavská 40, 130 00 Praha 3. / Výživa a potraviny, časopis Společnosti pro výživu. /





SELF-ESTEEM SUPPORT

HK respects and supports the natural development of pre-school children. It promotes their self-esteem, protects them from situations and influences that they cannot handle and that are therefore stressful for them, creates a positive emotional environment and gives them opportunities for strengthening their resistance.

Rationale

- The core of psychological well-being and a well-balanced personality is a healthy self-esteem.
- Emotional well-being flourishes if the following features are respected: the characteristics of mental development for the preschool age, balance between the emotional and intellectual component of school and a rate of psychological development in harmony with the other developmental components.
- Stress is the factor most detrimental to mental well-being in an educational environment. It is accompanied by negative emotional states, causes psychosomatic problems and thus harms physical well-being and health.
- Stress is, besides other factors, caused by inappropriate or excessive educational demands that the child is unable to handle. Demands that the children have matured for, on the other hand, enable them to develop a healthy level of effort that supports and enhances their psychological development (optimum demands).

Means

- accepting children's identity and respecting their personalities;
- supporting their self-esteem as well as their ability of self-judgment: promoting positive relation to oneself, emphasizing what each child is good at (finding individual abilities), encouragement, using communication games and creative drama, establishing conditions and situations for experiencing success and satisfaction from creative activity.
- attention to and respect for developmental and individual needs of children;
- appropriateness of educational demands (difficulty of tasks, reasonable limits)
- friendly social climate;
- well-balanced stimuli and offered activities;
- developing positive thinking, feeling and behavior in relation to others;
- presence of humor;



• taking advantage of natural situations in order to prevent and handle stress - elimination and prevention of emotional disturbances that may come from the family in addition to those that the kindergarten may create.

ADDITIONAL READING:

Optimum Conditions for a Healthy Psychological Development of Preschool Children. Psychological Development of Preschool Children from the Viewpoint of Health.

Sources

Šulcová, E.: Emotional Problems and Health of Preschool Children. / Citové problémy předškolních dětí a jejich zdraví. / Predškolská výchova, roč. XLIV., 1989-1990, No3: p. 2-5.

Šulcová, E.: Emotional Disturbances of Preschool Children. / Citové poruchy předškolních dětí. / Predškolská výchova, roč. XLIV., 1989-1990, No6: p. 2-5.





SOCIAL CLIMATE OF RESPECT AND COOPERATION

HK builds a social climate on the basis of mutual trust, respect, empathy and cooperation among all people in the kindergarten.

Rationale

- First, the quality of social climate in a kindergarten is a model for the children to imitate directly. Second, it has impact on the overall development of the children, and third, it is vital if all the activities of the kindergarten are to succeed in supporting health and teaching of a healthy lifestyle.
- The social climate of any human community is determined by the quality of interpersonal relations and affects the health and well-being of all participants.
- The quality of interpersonal relations depends on the character and competence of the people and groups (children, teachers, parents) involved; it relies especially on the quality and abilities of the headteacher, school administration and local government, and on cooperation between these subjects.
- Specific habits and ways of cooperation and communication are formed in each community in the course of time. There are fixed patterns of behavior and relationships within and among groups. In kindergarten, this concerns relationships among children, teachers, between teachers and children, headteacher and teachers, teaching and non-teaching staff, the kindergarten and parents as well as between the kindergarten and primary schools.
- If these fixed patterns in the kindergarten are not positive, it is necessary to begin turning them into cooperative partnerships. Such a goal does not reflect lack of concept or organization. On the contrary, it leads to more transparency in the functioning of the kindergarten and, therefore, to higher accountability for achievement. This is the only way to begin implementing the Healthy Kindergarten project.
- The above mentioned changes in interpersonal relations will make further changes possible which may improve the lives of both children and staff.

Means

- paying attention to interpersonal relations in all groups that form the community and if necessary, striving for their improvement;
- conflicts and disagreements should change into relationships of respect, trust, cooperation, participation, mutual help and openness;



- paying special attention to the teacher-child relationship. A really good relationship can form only if based on equality. Its quality is determined by the same factors as relationships between adult people;
- opening up to the surrounding social environment, especially to parents and the wider community, seeking new partners for the kindergarten (social institutions and organizations) and establishing contacts in which the children themselves can participate.

ADDITIONAL READING:

Optimum Conditions for the Social Development of Preschool Children. The Features of a Healthy Social Climate.

Sources

Lašek, J., Mareš, J.: How to Measure the Social Climate in the Classroom? / Jak změřit sociální klima třídy? / Pedagogická revue, ed. by the Slovak Ministry of Education, ŠPN Publishing House in Bratislava. 1991, No.6, p. 401-409.





RULES AND RHYTHM

HK draws up a framework of rules structuring daily life in the kindergarten that will create a rhythmic order while providing space for teacher's flexible decision making, good access to information and effective communication with parents.

Rationale

- This concerns all who participate in the life of the kindergarten directly (children, parents, employees) or indirectly (experts, local government and institutions, school administration).
- It contributes to the establishment of a wider community.
- It plays an important role in creating a positive environment of the kindergarten.
- It should be based on partnership, cooperation, openness, trust and participation in the common effort bringing up healthy children and training them for a healthy lifestyle.
- It enhances the sense of belonging to the kindergarten.
- It supports communication among all participating individuals and groups (classes, teachers, parents, non-teaching staff).
- It encourages frequent contacts especially with parents, e.g. by allowing them to enter the kindergarten throughout the whole day and participate or assist directly in educational activities. It creates space for informal social events involving kindergarten and parents, mutual access to information, educational and advisory services, and encourages a healthy lifestyle at home.

Means of introducing rhythm

Enrollment of new children is an important moment in the life of every kindergarten. If properly organized, it provides a great opportunity for meeting and getting to know new people as well as obtaining any information needed. At the same time, children can become familiar with a new environment in the company of their parents. This makes their later participation in a kindergarten much easier for them. The issue of entering a healthy kindergarten is treated into more detail in the sub-chapter "Community of Kindergarten and Family".

The healthy environment of the kindergarten is arranged in such a way as to achieve the necessary level of order and organization. To achieve this, kindergartens postulate certain rules and measures for themselves based on their own circumstances. They do so in cooperation with experts: doctors, psychologists, social workers, local government representatives and teachers from local elementary schools. They must always bear in mind



the openness of the system and the character of relationships needed for a healthy atmosphere in the kindergarten.

It is helpful to create a document outlining all these rules. This document is created in cooperation with all participating groups. Then it becomes binding for all of them.

Means of introducing rhythm

The daily rhythm and routines cannot be strictly prescribed. On the contrary, they should only provide a framework allowing for flexible adjustment according to the situations and circumstances of a concrete group of children. The teacher is free to make decisions about this.

Basic principles for introducing daily rhythm

- 1. Find harmony between the need for freedom and the need for order. It is vital for the healthy development of preschool children.
- 2. Base the daily rhythm on a healthy lifestyle for children.
- 3. Organize the day in such a way as to provide enough space for play, the main self-developing activity of children.
- 4. Bear in mind the specific circumstances of the school and the children.

In creating these principles, we have to cooperate with parents and harmonize the children's' life in the kindergarten with that in their families (intervals between meals, need for sleep), making sure that children understand the rules and routines and that all their needs are met within the chosen routine.

ADDITIONAL READING:

A Healthy Start of Primary School. Factors that Can Harm the Adaptation of Children to School.





ENVIRONMENTAL COMFORT

HK creates a welcoming, aesthetically pleasing, inspiring and hygienic environment.

The quality of environment determines the well-being of all participating persons.

Rationale

Material, functional and aesthetic qualities

By material, functional and aesthetic qualities we mean architecture, spatial arrangement and equipment of the kindergarten building and of the adjoining spaces (playground, access roads, garden, immediate surroundings, etc.). These qualities are to a great extent given, but it is up to the kindergartens to take advantage of, care for and improve them as much as possible.

Physical, chemical and biological qualities

Physical, chemical and biological qualities concern all components of the microenvironment as well as the intervening external environment. These qualities are to a great extent in the hands of kindergartens. There are many legal norms that provide explicit instructions in terms of ensuring the hygienic quality of all components of the microenvironment and mitigating the harmful influences of the external environment. The microclimate of environment has an impact on its inhabitants' sense of well-being, fatigue and performance levels.

In addition to this, health promoting kindergartens strive to improve the living conditions in their environment with respect to:

- primary prevention of negative influences on all children;
- supporting treatment of children with specific diseases (allergies, asthma, bronchitis).

In the light of disease prevention, the requirements for the environment in regular kindergartens coincide to a great extent with those for special preschool institutions for children with a susceptibility to allergies. This is because among preschool children, there are many who have hidden or undiagnosed allergies. The quality of preschool environment has a great impact on the later development of diseases.

The main principles for choosing furniture, equipment, fabrics, etc. are: safety, easy maintenance (including disinfection) and good hygienic standards.



Emotionally aesthetic qualities

Emotional and aesthetic qualities should give the environment a sense of cosiness, pleasant atmosphere and harmony.

Harmony of the environment is a variable feature. The teacher and the children imprint a special charm on the environment depending on their tastes. They use it, care for it and keep it tidy in order to ensure easy accessibility of equipment and to show respect for the needs of others. Products of unfinished activities are left in their place so that they can be completed, the finished products are exhibited for a period of time as feedback for the children. The furniture and other equipment contribute to the well-being and satisfactory development of children. The basic requirement is choosing furniture appropriate for the size and proportion of the children of certain ages.

Experiential and learning qualities

Experiential and learning qualities of an environment are appropriate if they inspire and provide enough stimuli. An inspiring environment is closely connected with the overall goal of a kindergarten and with the educational content of the curriculum.

An inspiring environment is most dynamic when it constantly reflects new tasks, progress, changes and news contained in the implemented curriculum.

Teachers in health promoting kindergartens consciously create an inspirational atmosphere for spontaneous learning while at the same time encouraging the children to participate actively in the creation of such an environment.

Means

Material, functional and aesthetic qualities		
Appropriate	Inappropriate	
 enough room (respecting the square meter floor space norm per child) and amount of air (cubic meter per child) playground, garden, free space connection of rooms and their easy accessibility a structured terrain, trees and lawns outside 	- lack of adherence to the floor space norm and air norm - over-dimensioning of the spaces - building without adequate background (equipment, facilities, furnishings)	



Physical, chemical and biological qualities		
Appropriate	Inappropriate	
 location of the school: quiet, dust-free, far from sources of noise microclimate - optimum temperature, humidity and cleanliness of air cleanliness of inside and outside spaces high quality drinking water satisfactory illumination 	- close to city center or busy roads, dusty and noisy places - overheated rooms, dry air - polluted water - poor drinking water supply - overexposure to sun or artificial light	
Emotional and a	esthetic qualities	
Appropriate	Inappropriate	
 appropriate interior equipment within the visual field of children adequate size of furniture appropriate decoration adjusted to the understanding of preschool children easy access to toys and materials 	- inappropriate furniture and equipment - tasteless, unattractive decoration - objects or their arrangement unsuitable for preschool age - toys stored in inaccessible places	
Experiential and	learning qualities	
Appropriate	Inappropriate	
- well-planned changes of the environment, respecting current events, seasons and holidays of the year and the wishes and creativity of the children (exhibiting their pictures, etc.)	- one-sided, monotone environment lacking stimuli - ignoring the work of children or exhibiting the very best ones only	
- placement of stimuli that arouse immediate interest of children and encourage their activity		

ADDITIONAL READING:

Recommendations for Teachers of Allergic Children. Ways to Improve the School Environment.



Sources

Drahoňovská, H., Komárek, L.: How to Deal with Allergy: About Silly Sally and the Sick House. / Víme si rady s alergií - O hloupé Báře a nemocném domě. / Praha, Erasmus in cooperation with the NIPH 1993.

Well-Being in Kindergarten. / Pohoda v prostředí MŠ. Doporučení - odkaz na Typizační směrnici č. 48/1987: Mateřské školy a polečná zařízení jesle - mateřské školy. /

Štaifová, A.: Improving the Health of Children. / Otužování dětí. / Praha, Avicenum 1989.



II. EDUCATING FOR A HEALTHY LIFESTYLE

(A Curriculum Outline)

"All I really need to know I learned in the kindergarten:

Share everything.

Play fair.

Don't hit people.

Put things back where you found them.

Clean up your own mess.

Don't take things that aren't yours.

Say you're sorry when you hurt somebody.

Wash your hands before you eat.

Flush.

Warm cookies and cold milk are good for you.

Live a balanced life - learn some and think some and draw and paint and sing and dance and play and work every day some

Take a nap every afternoon.

When you go out into the world, watch out for traffic, hold hands, and stick together."

Robert Fulghum





EARLY EDUCATION FOR A HEALTHY LIFESTYLE (Content)

The HK project is based on the general goal of health education. All children should grow up to treat their health as well as the health of others as an irreplaceable value and a precondition of a full-fledged and meaningful life.

The content of health education is derived from such natural topics as human physiology, mental health and personality, interpersonal relations, attitude to life, society and nature.

All this should be presented in a form understandable for preschool children.

In applying the goals and content of health education, kindergartens bear in mind their own specific circumstances, both internal and external.

The goals of health education in kindergarten are for the children to:

- 1. acquire habits and skills that will enable them to
- have an independent hygiene and self-service routine;
- understand their own identity and become part of the family and the surrounding community;
- have a global orientation in their own physical and mental states;
- 2. possess skills and behavior patterns that will enable them to react well in situations that might threaten their sense of personal balance and health;
- 3. possess basic habits and skills of a healthy lifestyle, be able to tell in everyday situations what is or is not consistent with it and adjust their behavior accordingly.

Rationale for the curriculum development

What children really learn in kindergarten (level and scope of experience, knowledge, skills and habits) varies to a great extent from child to child. That is why each kindergarten should set its own goals and its own curriculum (educational program) in order to make it accessible to all children in its care. In addition it may develop a graded curriculum involving different developmental stages. (Developmental capacities are a combination of the age characteristics and the individual disposition of each child.)

The provision of a health education curriculum in kindergarten depends on actual circumstances even more than in the elementary school. That is why it is so important that the curriculum should be developed within the workshop of each kindergarten.



In developing the health education curriculum, kindergartens should bear in mind the following circumstances:

1. The actual conditions of the kindergarten

a) external

- type of surrounding landscape, locality of the school, size of the building, architecture;
- owner, social climate of the environment, attitude of the community to the kindergarten;
- way of financial management;

b) internal

- composition of staff;
- style of leadership (headteacher);
- teaching staff: health condition, age, quality of interpersonal relationships, personal characteristics, education;
- existing quality of kindergarten-family relationships

2. Individual characteristics of every child in care

- bio-psychological: temper, inclinations, dispositions;
- socio-cultural: social and cultural level, lifestyle of the family.

3. Natural calendar (seasons, holidays)

- symbiosis with nature;
- local and national culture;
- everyday situations and events;
- events.

The health education curriculum in the kindergarten is based on three naturally overlapping areas that form a background for the lives of all human beings from birth to death. All people live and work within the framework of these areas. They belong to it with all the consequences, both positive and negative, and the health consequences rank among the most significant ones. That is why kindergartens should build on these areas in developing a health education curriculum.

The concrete topics are drawn from the relationships of children to themselves, other people and the world.

- 1. To their own body: understanding one's own body, perceiving health as a value.
- 2. To their own personality: identity (name, sex, age, home, family, relatives), situational role of the child (behavior patterns), self-knowledge (my temper, my reactions), tendencies (likes and dislikes) and dispositions (what I know how to do, what I am good at), self-control (handling negative impulses, creating self-motivation), healthy self-esteem.
- 3. Social relations: mother, father, parents, brothers and sisters, grandparents, wedding, marriage, family, living together, destructive behavior, divorce, friends, acquaintances,



foreigners, enemies, kindergarten, teachers, cook, janitor, classmates, community, town, neighbors, postman, doctor, nurse, etc.

4. Relationship to the world: surrounding countryside, nature, Earth, universe, inanimate nature, life, health, illness, air, water, fire, Sun, weather, plants, animals, mankind, nation, race etc.



Examples of health education topics in the kindergarten

At preschool age, children develop in all aspects of their life - biological, ecological, psychological and interpersonal. These areas comprise relations to one's own self, other people and the world. In addition, the vertical line of the following chart marks separate components of education that are sequenced in order of their importance at preschool age. The most important ones are experiences, followed by habits, skills, knowledge and attitudes. Each component offers certain possibilities that a preschool child can explore and use to grasp all three types of relationships.

1. THE HUMAN BODY

psychological characteristics	goals
experiences	illness, injury, handicap own, of family member or pet, subjective sense of health including emotional well-being; observing differences and similarities in the way grown-ups care for younger siblings or friends and realizing that other children are similar in some ways and different in others
skills	treatment of small injuries, how to treat a cold, cough, fever; caring for a family member who is ill, self-defence (ability to say no, escape, put oneself into someone's care); anti-drug programs; ability to help a friend who is ill; preparation of simple healthy meals
habits	lifestyle, diet, regular toilet, regular sleeping habits, switching between work and rest (biorhythms); healthy diet; hygiene; self-care (dressing, toilet, eating); noticing if someone needs help; getting exercise
knowledge	understanding the functioning of human body and its needs as well as the potential risks; how the body responds to emotional perception (joy, fear); parts of the body; the five senses; sex education; how children are born, internal organs and their functions, illness and health; internal and external environment; realizing that not all children are born healthy



2. PSYCHOLOGY AND PERSONALITY

psychological characteristics	goals
experiences	physical and psychological self-perception, discrimination between simple emotions; success and failure; appreciation of moral actions and values and the positive feelings they evoke (pleasant aesthetic sensation)
skills	self-assertion and self-control (being able to handle disturbing impulses and desires or postpone them to a more appropriate moment), self-defence (situations)
habits	depth of emotional perception; encouragement of vital energy; readiness to help
knowledge	self, understanding one's own identity and value, temper, likes and dislikes, needs (what I really need and what I can give up); inclinations (what I like and dislike doing), similarities and differences between self and others, respecting the identity of others;
attitudes	being part of a family and community; realizing that one can develop only with the help of other people; positive attitude to life and other people, good mood and psychological well-being as factors affecting the global health

3. SOCIAL RELATIONSHIPS

psychological characteristics	goals
experiences	communication, cooperation, various behavior patterns
skills	ability to communicate and cooperate, discrimination between right and wrong, good and bad, healthy and unhealthy, adopting various roles (both in play and reality)
habits	respect, tolerance, decision making in interpersonal relationships and assessment of those choices; politeness
knowledge	knowledge of people, social roles, awareness of difference between people, rules of social behavior
attitudes	no lying or stealing, returning things borrowed from others, having respect for and trust people, being polite, tolerant and helpful, being able to forgive, loving people



4. RELATIONSHIP TO THE WORLD

psychological characteristics	goals
experiences	observing through all senses, experimenting
skills	staying in the countryside (what to do and what to avoid), protecting the natural world, finding one's way in the countryside, caring for simple plants and small animals
habits	caring for one's environment, active participation in the creation of a pleasant environment and in the renewal and protection of nature
knowledge	about nature, eco-systems and natural cycles; about health and its promotion; understanding the connection between the state of environment and the level of our care for it; being aware of human influences upon nature and people's health
attitudes	understanding that the Earth is part of the universe and that we are part of life on the planet; being aware of the responsibility of caring for nature

Results of health education in children from the kindergarten when entering elementary school:

Preschool children who finish their attendance of kindergarten at the age of six should have a basic range of experiences, skills, habits, attitudes and knowledge that will enable them to make the following further steps in the course of their school attendance:

- trying to experience and learn about the world, nature and people as a whole as well as through the interactions they take part in;
- understanding relationships and connections between different phenomena, especially between cause and effect, in many areas of life (in the case of health, the consequences are often significant and of a long-term nature);
- shifting from a general idea to a well-grounded conviction about the health risks of various substance addictions (tobacco, medication, drugs, alcohol) that concern them, their family members, classmates and the rest of the society. They should be able to make their own decisions independently and responsibly and, at the same time, their behavior should prove their perception of health as a value;
- learning to resist harmful influences both by prevention and analysis of real-life situations;
- learning to understand what stress is (how one gets into stressful situations, how to cope with stress (how to get rid of and prevent it);
- being able to promote habits and requirements of a healthy lifestyle even in environments that are not supportive of it.

A health promoting primary school should then be able to build on the potential and opportunities that a health promoting kindergarten has created.





EXPERIENTIAL LEARNING (Method)

HK uses methods of health education that are natural for children. At preschool age this means that children learn during play through experimenting and experiencing. They learn by living which includes their life in the kindergarten. If we decide to teach in a planned manner (employ organized learning), we do not teach by lecturing, but by doing things and modeling situations that are natural to children.

Rationale

To educate children for a healthy lifestyle and behavior means to teach them with the help of healthy methods.

The following can be considered healthy methods at preschool age:

- offering an environment where everyone perceives a sense of well-being;
- encouraging socially conscious, ethical and health promoting behavior patterns in people, especially adults;
- supporting spontaneous experiential learning during play.

In this way, children educate themselves without much effort. None of the aspects of people's behavior are indifferent in relation to children. They all imprint on their bodies and minds and leave marks for life.

For characteristics of an environment of well-being, see the chapter "Holistic Health Concept". In other places in the book, you will find references to socially conscious and ethical behavior patterns, especially in the chapters "Social Climate of Respect and Cooperation", "Community of Kindergarten and Family", "Participation in Management and Education" and "Teacher's Healthy Lifestyle".

At this point, let us concentrate on health education through learning.

At preschool age, children learn mainly through "learning" in the broad sense of the word, as opposed to "learning" in the narrower sense of the word which will prevail at a later stage in life.

Learning in the broader sense means that individuals collect and processes experiences from all areas of life using natural ways and mechanisms throughout life. Experience is gained by doing and perceiving what is being done. What makes experiential learning and its mechanisms natural is the fact that it takes place spontaneously and simultaneously with the activity of the brain (which is still developing in childhood) and in keeping with the intelligence and personality of each individual. Learning of this type is stress-free and healthy for children. This is especially true of preschoolers for whom spontaneous learning is the most natural ability. There is no later stage of life in which they will work on their



personal development with such intensity, imagination and effectiveness as at the preschool age.

Learning in the narrower sense of the word, on the other hand, is based on a purposeful, planned process organized by teachers and school for the students or by the students for themselves. This learning builds on different dispositions that develop at a later age. Learning in the organized educational process, however, is healthy only when natural bio-psycho-social mechanisms are used and when organized learning is based on them. The current efforts to change the teaching style in schools is inspired by these facts.

As far as preschool age is concerned, it always has to be considered carefully whether the second type of learning should be used at all, as organized learning is not natural to the mentality of preschool children and it is precisely at this stage of life that it can cause most harm.

Means

1. Health promoting kindergartens should create as much space for learning in the wider sense as possible, as this type of learning is the most suitable for preschool age. They should make sure that it is carried out in a healthy way and that it predominates over organized learning.

The type of learning characterized as spontaneous learning by experience is healthy if all the criteria of healthy teaching and learning style in the kindergarten are respected:

- spontaneity (activity evolving from one's own initiative);
- discovery (discovering new aspects of reality, joy in learning);
- communication (both verbal and non-verbal);
- wholeness (inclusion of all senses and both cerebral hemispheres);
- space for activity and creativity;
- concrete activities: handling objects, experimentation and play;
- safe and stimulating environment (social as well as material).
- 2. If teachers decide to use some elements of organized learning, they should be aware of and prevent the risks that this type of learning entails.

The most important thing is a non-directive approach of the teacher based on the activity of each child and oriented towards the desired experience.

To succeed in doing this, teachers have to adjust their teaching pattern (external conditions) according to the bio-psychological dispositions of the children (internal conditions). This should result in a harmony of external and internal factors, of pedagogy with the personality of the child.

Conditions of organized learning

1. Internal learning conditions (the child who learns)

The internal conditions are given by the biological, psychological and social dispositions of each child which consist both of innate individual characteristics and developmental features typical for a given age.



The main components that play a part in organized learning are: the functional characteristics of the brain, nervous system and sensory organs; temperament; abilities, motivation, cognitive style, type of intelligence, study results, self-perception; emotional characteristics and relations; the situation in the family and the position in the peer group; the level of communication and cooperation abilities.

The sum of all these internal conditions expresses the uniqueness of the learning individual and provides a basis for the whole personality to function in keeping with the optimum possibilities of its development.

2. External learning conditions (the teacher who teaches and his/her educational approach)

The external conditions of learning depend on the teaching person (teacher, parent, older sibling), the method used (in what way the child is taught), the content (what children learn), motivation, purpose (why a certain topic is taught) and evaluation (what each child is successful in).

Those who organize the learning process (parent, teacher, friend, mass media) should try to make the learning process healthy in a holistic way: They should do so by adjusting all the above mentioned conditions to the needs of the children in their care, not by manipulating the nature of children by the educational objectives and methods. (This requirement, however, is difficult to meet if the teacher-centered method is used). Such an adjustment is the crucial point of directed learning both in kindergarten and primary school.

Another important factor is the relationship between the teacher and the pupil. Healthy learning requires an equal relationship of two or more subjects and a lively contact with the teacher. It does not necessarily have to be a relationship between an adult and a child. Experience has proven that group learning when children learn with the help of peers is very effective. Besides its enrichment of learning it also provides contact with the peer group. This way of learning is suitable especially for kindergartens with heterogeneous groups of children, as it brings the kindergarten closer to the real social environment.

The developmental transition between spontaneous and organized learning

Spontaneous activities of preschool children in kindergarten give the teacher an opportunity to participate in them as a playmate in order to learn more about them and to use sensitive ways to help the course of play when necessary. The level of her participation is determined by the wish of the children and their interest in working together with an adult.

The teacher should be able to recognize the right moment when the children have matured to such an extent that they begin to need learning with a certain structure, organized in some way. When activities of this kind are offered to the children, they should feel that they are discovering what they themselves want to discover. If the case is such, they willingly accept even the limitations presented by organized learning. It is only under these conditions that the teacher can gradually change spontaneous into organized learning. Otherwise real maturing cannot take place (see the chapter "Spontaneous Play" in the first section).

At first, organized learning happens more or less accidentally. We can perceive them as a process of discovery when children find out new facts and the teacher carefully monitors the ways in which they do this. Then the teacher can create such situations that will make the children use their



previous experiences in order to gain new ones. The process of regulation gradually changes into one of self-regulation.

It is, however, not easy to assess when a child is ready for this transition to organized learning. It is better not to rush the process. If preparations for school come too early, the natural preschool development can be impaired.

In health promoting kindergartens teachers strive to use educational methods to support children in learning through their spontaneous activities. The best ways of preparing for school work are play, handling objects and experimenting. Using these skills, children develop in the whole range of spontaneous activities, movement and imagination that are characteristic of this age to an extent never repeated later in life.

ADDITIONAL READING:

The Eight Components of Brain Compatible Learning.

Sources

Badegruber, B.: Open Learning in 28 Steps. / Otevřené učení v 28 krocích. / Praha, Portál 1994.

Fountain, S.: A Place in the Sun. / Misto na slunci. / Praha, Arcadia and the Centre of Environmental Education Tereza 1994.

Holt, J.: How Children Fail. / Proč děti neprospívají. / Praha Strom 1994.

Jirásek, J., Vančurová, E., Havlínová, M.: We Play for Real. / Hrajeme si doopravdy. / Praha, Avicenum 1983 and 1987.

Komenský, J.A.: The Great Didactic. / Velká didaktika. / In: Didaktické spisy, Praha, SPN 1951.

Kovalik, S.: Integrated Thematic Education. / Integrovaná tematická výuka. / Kroměříž, Spirála 1995.

Langmeier, J., Matějček, Z.: Psychological Deprivation in Childhood. / Psychická deprivace v dětství. / Second edition, Praha, Avicenum 1974.

Opravilová, E., Dostál, A. M.: Introduction to Preschool Pedagogy. / Úvod do předškolní pedagogiky. / Praha, SPN 1985.

Palouš, R.: The "Divine World" by Comenius. / Komenského Boží svět. / Praha, SPN 1992.

Tonucci, F.: Teaching or Learning? / Vyučovat, nebo naučit? / Praha, PedF UK 1991.

Velinský, S.: Systems of Individualized Learning. / Soustavy individualizovaného učení. / Brno 1993.



III. SEEKING THE SUPPORT OF SOCIAL AND PROFESSIONAL PARTNERS AND COLLABORATING WITH THEM

The Three Oldest Institutions: Family, School and Community

"The family is part of an ancient lineage grounded not so much in tradition as in the ever lasting needs of individuals. It is an elementary bond the absence of which would make even the most perfect society fall apart into disconnected atoms."

(J. Máchová)

The family "has emerged not only from the natural sexual instinct... but also from the urge to protect, teach, educate and prepare one's offspring for life". A family fulfills yet another need: "the need for mutual help and support by those to whom the child belongs". Although the content and form of the needs change with time, the family remains "a life need".

"The family is not the only institution" - although its position is a privileged and exclusive one - "that will care about the well-being, protection and development of the child's personality. School, playground, friends and other subjects also play their roles here."

At preschool age, other children come into play and the security associated with the closest people changes to a mediated, long-distance security. That is the period of kindergarten...."That is when children begin to understand that others also have their "home", their background. The scope of acquaintances grows as does the size of the familiar environment, now including the surrounding streets or parks passed on the way home. It now encompasses the community as well. " (Z. Matějček)

"Those who do not grow up under the rule of fair laws will hardly get the right upbringing. That is why it is so crucial for a man - if he is to become a good man - to be brought up and led to have the right habits, to live an honest life according to reason and a good order." (Aristotle)





KINDERGARTEN AND FAMILY COMMUNITY

HK promotes the cooperation between kindergartens and families as the strongest prerequisite for the effectiveness of the health promotion project. Such a community comes into being by mutual interaction of influences from home and school. It can exist only if there is tolerance, partnerhip and openness on both sides.

HK knows and takes into account the quality of the family background in which each child lives. It strives to compensate for harmful influences, substitute the missing and enhance the positive ones. Kindergartens should offer ideas, skills and inspirations to families.

Families offer insight into their methods of upbringing, a deeper knowledge of the children and an introduction of real life into the kindergarten.

Cooperation of both partners

If children are to develop in a healthy way, it is necessary that they grow up in a functional family, no matter whether it is their own or a foster family.

The family environment is the first place where children learn about the way a human community lives. The family's way of life, set of values, emotional feedback and methods of upbringing have a major influence upon their physical, psychological and social health from the very moment of conception.

The way in which a family brings up children depends on the personalities of the parents and the quality of interpersonal relations that are manifested in the life both inside and outside the family. The psychological well-being of children, their positive attitude to people, a positive approach to life and to the world - all this depends on whether they have been welcome and accepted to the world with unconditional love and whether the family has managed to maintain this attitude even despite possible setbacks. In this way, families provide the children with their first experiences about the world in which they live.

Kindergarten is also considered to be a part of the wider environment of the family. It works as an educational institution, but besides that it is a community of preschool children and adults. That is why it has a great impact on the global health of the children it cares for. Owing to the fact that in the Czech Republic most children attend kindergarten, it is to a great extent responsible for the health status of the population. If parents decide to put their children in kindergarten, it is desirable that both communities - family and kindergarten - know what they expect from one another and act on the basis of mutual cooperation.



BEST COPY AVAILABLE

How to improve poor cooperation?

The first step: Finding the causes

Finding the causes of poor cooperation can be the first step on the way to improving it. There may be a whole range of problems, as the survey carried out among parents suggests (for selected quotes, see the box at the end of this chapter). The survey was anonymous and the question asked was "Why do you think cooperation between home and family is difficult or impossible?"

Parents often use kindergarten as a threat to the child: "Wait when you'll be in kindergarten, you will see!" What the child shall see, however, is not specified. Most of today's parents have experienced a kindergarten education based an authoritarian and collective style of work and now they project this experience onto their children. A certain percentage of parents takes kindergarten as an inevitable, not welcome partner. They just need to get rid of the child for a few hours a day. Some parents understand the educational importance of kindergarten, but unfortunately, many of them only as preparation for "real school" - a role often attributed to kindergarten in the past.

Nowadays, more and more parents are beginning to realize the contribution and importance of kindergarten. It can offer something unique to children, namely, experiences that they cannot get in the family: a community of other children, a stimulating environment, and a professional educational background conscious of the developmental needs of preschool age. This group of parents also realizes the importance of mutual cooperation and takes an active part in school activities.

The second step: Opening the school to parents

If good child development is to be ensured, kindergartens have to be open to parents. They must allow parents to participate directly in the educational process, not only in marginal events - from short visits all the way to all-day attendance and assistance.

The situation of parents participating in kindergarten activities is new for everyone at first - parents and teachers as well as children. It is desirable that both sides seek ways of cooperation and set up rules for it (offers - wishes - agreement - keeping of the agreement). Kindergartens should be open and build on the family upbringing. They should support initiative on the part of parents.

A good way to begin such cooperation may be if parents (or one of them) spend some part of the day with their child in the kindergarten and do all the activities with him/her. Especially in cases of very young children or those who have never attended kindergarten before this makes their adaptation to the new environment and new people much easier. At the same time, it helps teachers in their work. (For more ideas, see the chapter "Rules and Rhythm".)

Both family and kindergarten profit from mutual cooperation in the following ways:



Kindergarten:

- 1. The active presence of parents in the classroom gives teachers insight into the attitudes toward child care in a given family. They get to know the children better which helps them in their future work with the child.
- 2. Through parent participation in education kindergartens gain new directions from the professional backgrounds, experiences and personalities of the participating parents. They are constantly in touch with the wider social environment, the "real world", thereby compensating for the potential harm that a closed social environment may involve.

Parents:

- 1. They learn about the educational intentions and methods of the kindergarten. If they accept them, they allow the school to strengthen its positive impact on the children.
- 2. They have a good opportunity to gain new stimuli, ideas, skills and knowledge to enrich their play with the child. There are many who do not know how to play with their child. Staying in the kindergarten can help and inspire them in this respect. Many young parents, for example, do not realize that unawares, their behavior and bad habits may be working as a poor educational model for the child.
- 3. They get a better idea of the specific features and developmental needs of preschoolers in the fields of health, psychology and education. Some parents do not know how to treat children with behavior problems to help them effectively instead of making the problem even worse. They do not realize that some of the requirements they place on their children may simply be beyond their current capacities and thus harm their psychological development.
- 4. They can observe their own children in a different social setting and see how well they communicate with other children and the teacher, how they act in planned learning as well as in spontaneous activities, how they use their skills. They draw conclusions from this observation in two directions: towards themselves (what they should do or change in their contact with the child) and towards the school (what they would like the school to do/not to do in relation to their child). Parents often show restraint in exercising their rights; often, they are not even aware of them. These rights include the possibility to influence what is going on in the kindergarten. Ways of doing this include: sharing their opinion with the teacher concerning the personality and needs of their child, informing her of any diseases, events or changes they went through and trying to find a common plan of how to treat child in the kindergarten.



If a state of mutual trust has been achieved, teachers and parents can begin to extend the existing cooperation. The appropriate time for this is when parents share their ideas and expectations with the teacher concerning the future of their child.

Plans of parents may be well-wrought or intuitive, complex or simple. In any case, there will at least be a framework of what they definitely want and refuse. The interest shown by the teacher may help parents to specify what kind of person they would like their child to become, what role they intend to play in this regard and what they can expect from the kindergarten.

To make this step, kindergartens should first prepare by establishing an atmosphere of trust and respect for parents and by informing them of their rights. They should constantly emphasize that the creation of common projects consisting of the parents' ideas combined with the teacher's professional experience is beneficial for both sides. If parents share their views, the teacher has a better chance to design a program that will suit each child. The offers of the kindergarten are thus modified according to real needs.

Positive changes in the collaboration of family and kindergarten

When parents participate in the educational process, they get closer to the school, making them see it as a friendly institution. This results from the fact that the long, stressful separation of the child from the parents and the mutual distrust of parents and kindergarten no longer exists. Family talks include kindergarten activities more frequently, thus enriching family relations. Kindergarten teachers get to know the children's parents and may even find some they can learn from. Individual parents enter the educational process with ideas about education and the overall development of their child and, together with the teacher, create a well-designed educational project.

The former authoritative approach of kindergartens towards parents transforms into a partnership.

In looking for further means of cooperation (only the first three steps have been mentioned) kindergartens should not suppress the crucial importance of the family in a child's life and development. Kindergartens have to respect the opinions of parents on goals and ways of bringing up children and they take them into account when planning the curriculum. If views are so contradictory that problems emerge, the school has to solve them sensitively and with tolerance. Even in this case, however, the final aim should be to achieve some form of cooperation.

It will never be possible to make all parents to cooperate actively. The causes of lack of interest in collaboration may be other than a dysfunctional family. No matter what the causes are, however, in problematic situations the teacher has to help the child to overcome his/her difficulties in order to prevent feelings of guilt, inferiority and sadness. Under all circumstances, the teacher has to talk about the child's family with respect and try to improve the family relations.



Children from dysfunctional families

Families that are difficult to cooperate with are usually families that are dysfunctional in some way or other. Only few of them, however, decide to seek help. Some adopt an indifferent or even resentful attitude to their child.

In these problematic cases, the teacher and her professional ability is of great importance. Kindergarten should compensate for and mitigate negative influences coming from the family environment.

In what ways can kindergartens support the healthy development of children from dysfunctional families?

A classification worked out by Zdeněk Matějček

Kindergartens can:

- compensate for negative impact of parents (primary educators);
- influence parent's attitudes to upbringing using a sensitive and indirect approach;
- mediate professional knowledge and recommendations, provide children and parents with a so-called corrective experience;
- exert threrapeutic influence in diagnosed cases.
- 1. Due to the very fact of looking after children during a great part of the day, kindergarten can reduce the permanent influence of poor attitudes on the part of home educators.
- 2. The children themselves play an important role in this. In the kindergarten, they learn different ways of social communication, adopt different models of social relations, imitate different behaviour patterns (e.g. in eating, hygiene, adopting of tasks and responsibilities, respecting the rights and interests of others, cooperation, expressing themselves etc.). They get used to a different lifestyle.

As this is taking place at an age of high conformity and impressionability when the environment "imprints" most on children, they inevitably bring to their families what they have learned in the kindergarten. To a certain extent, children thus become teachers or therapists in their family environments.

- 3. A kindergarten is the best facilitator of information to parents. In meeting with the teachers, parents experience lively contact with well-informed professionals who, unlike doctors or psychologists, know the children from everyday interaction.
- 4. In such cases of family dysfunction as conflicts, crises, divorce, death or serious physical or psychological illness when the parents' care for the child decreases, kindergarten provides



the child with a sense of security, relative peace and well-being and facilitates joyful experiences stemming from play and other interesting activites.

The mere encounter of this "other world" is a source of a better mood and of an increased ability to cope with new emotional burdens waiting at home.

With the strength gained in kindergarten, children can even bring a "healthful" atmosphere into the family interaction in which they usually actively participate, and they can help calm down emotions.

5. In dysfunctional families, children have special needs. Parents are usually not able to solve the children's problems completely, that is why their stay in the kindergarten has a favourable impact on them.

Cases of physical or sexual child abuse by parents require an extremely sensitive approach. In such cases, the kindergarten is obliged to:

- inform the competent health institution (crisis centre);
- cooperate with them, if invited to;
- use all available means to provide the child with a sense of security and understanding, as stated above.

Barriers to cooperation between home and kindergarten

- "I cannot feel equal to the teacher, because she used to be my teacher too and she always was an authority to me."
- "... and I did not like her and I don't like putting my child in her care."
- " I feel a little jealous, because she spends more time with our child than I do and my son talks about her all the time and behaves like her."
- "I think the teacher is not being herself when she talks with us. What children say suggests that she acts in a much less friendly way when she deals with them."
- "I do not quite agree with the teacher's approach, but I am not able to say what she should do instead."
- "When I talk to the teacher, I feel like a child being reprimanded. I think she is irritated when she talks to me."
- " I don't know how to deal with people I don't know well enough. I don't know in what way I could help."
- "Why should I cooperate? It is the kindergarten's responsibility to take care of my child, so let them do it."
- "I would send to hell all those who talk about learning by play. Look how children and youth behave these days."
- "The teacher thinks she is the one who is always right. She does not listen to the opinions of others."



Sources

Anderson, J.: Good Start in School. / Dobrý start do školy. / Praha, Portál 1994.

Haefele, B., Wolf-Filsinger, M.: Every Beginning in Kindergarten is Hard. / Každý začátek v MŠ je těžký. / Praha, Portál 1993.

Matějček, Z.: Natural and Foster Families. / Rodina vlastní, nevlastní a náhradní. / Praha, Portál 1994.

Matějček, Z.: Parents and Children. / Rodiče a děti. / Praha, Avicenum 1986.

Vančurová, E.: Considerations of Children and People in the Family. / Úvahy o dětech a lidech v rodině. / Praha, Avicenum 1988.





PARTICIPATION IN MANAGEMENT AND EDUCATION

HK uses and develops a style of management which is based on the participation and cooperation of all members of the educational community.

The changes in management that should improve the operation of the kindergarten depend on the style of management which is used. An autocratic, directive model, for instance, is in direct contradiction to the healthy environment of the kindergarten, whereas a participatory model, in turn, promotes overall health.

Types of management:

- 1. conceptual
- 2. staff-oriented
- 3. technical and economic

The headteacher should always try to keep balance between all three types. The participatory element is manifested in the following manner:

Conceptual management

The kindergarten has a clear and concrete concept of health promotion that is shared by all who are supposed to implement it. The conceptual frameworks of individual kindergartens stem from the goals and principles of health promotion in keeping with the "Healthy Kindergarten" project. Kindergartens will implement them according to their own projects based on an analysis of their specific needs and circumstances.

Circumstances:

- educational level attained by staff, the current state of their educational knowledge and abilities, personal disposition, age composition of staff;
- long-term perspective of the teachers' work, their in-service training and professional growth;
- the composition of the children's group;
- social structure of the community (city, town or village) and of the parent group, their level of interest in the kindergarten, willingness and ability to participate in its activities;
- the interest of the owner and other institutions in the community in cooperation;
- the possibilities of employing the building and the surrounding spaces for activities, their equipment (toys, tools, etc.);



• the area (city, town or village) and its natural surroundings.

The creation of a "Healthy Kindergarten" project is connected with a quality of conceptual management which requires:

- analyzing the school's circumstances;
- identifying the concrete objectives of health promotion;
- identification and implementation of planned monitoring of task fulfillment;
- follow-up evaluation (feedback).

The idea of feedback is to create grounds for change. The headteacher should encourage and maintain feedback by monitoring. It has to be systematic, differentiated and based on objective information and analysis.

The main sources of feedback are parents, school council, community members and, indirectly but importantly, also the reactions of the children.

This means the kindergarten has to analyze and evaluate the past results of its work in light of the changes that it intends to introduce or those that have proved necessary during the project implementation.

Staff-oriented management

Headteachers try to apply maximum participatory management exercised on a professional level.

They employ the following principles of management:

- providing more space for participation to all staff members by delegating some powers to them. In teamwork, all staff members (including teachers, administrators, cooks, domestic staff) experience professional growth - their self-confidence increases and they are able to handle more responsibility and decision-making powers;
- finding objective arguments and being able to convince others (junior as well as senior staff) of these arguments; solving conflicts and problems objectively and at an early stage, preventing them if possible;
- maintaining dialogue with the school board;
- being able to make decisions promptly and take responsibility; adopt appropriate attitudes in all situations, especially in unexpected ones;
- bringing initiative, professionalism, flexibility, creativity and teamwork to the kindergarten activities; removing obstacles that may impair long-term motivation;
- seeking contacts, being open to others, providing true information;
- keeping the necessary written records that provide evidence of the progress of health promotion in the kindergarten and the gradual implementation of the project (achievements, critical evaluation, suggested changes).



Technical and economic management

Kindergartens need a sufficient financial and economic background for their operation. In order to improve the quality of their services, they should also seek supplementary financial and material resources.

In the implementation of the Healthy Kindergarten project (which they have worked out in a written form) they address first the local authorities as well as potential sponsors in the community. In addition, they may apply for grants to agencies or foundations set up for these purposes.

Using participatory style management will lead to the following results:

- Staff, children and parents are satisfied. There is a sense of well-being at school and there are good relations between people (individuals as well as groups, staff as well as authorities). There is an atmosphere of respect, trust and security both in and outside the kindergarten.
- People are motivated to improve and go for in-service training. Headteachers should encourage this extensively.
- The kindergarten does not rule, but serves children, parents and the public.
- Interpersonal relations are marked by cooperation (teacher-child, teacher-teacher, teacher-headteacher, teacher-parents).
- Kindergartens and their staff report only what has been actually achieved.

Kindergartens should build their own image by becoming educational, cultural and social centers of their communities. They can organize educational activities, provide counseling, lend books and other information materials related to child upbringing, education and healthy lifestyle for both children and adults. They should do this in cooperation with experts from different fields of knowledge.

Sources

Solfronk, J.: Educational management. / Pedagogické řízení školy. / Praha, PedF UK 1994.

Bacík, F., Kalous J., Svoboda, J.: Introduction to the Theory and Practice of School Management. / Úvod do teorie a praxe školského managementu. / UK Praha 1995.

Štěpánek, F.: School Management. / Řízení školy. / Brno, Signet 1993.





TEACHER'S HEALTHY LIFESTYLE

HK relies first of all on teachers as the main integrating element in the kindergarten. Their abilities are the prerequisite of the project's success.

Their healthy lifestyle habits and attitudes to health work as behavior models for the children to imitate:

All staff members contribute to the success or failure of the health promotion program in the kindergarten. However, teachers play the most important role in this as they are in immediate contact with the children during the whole day.

Teachers who have identified themselves with the HK project,

- take a responsible approach to the world, nature, society, mankind and health all of which they perceive as a whole with interlinked parts;
- take care of their life-long education both in terms of theoretical knowledge and practical skills of the teaching profession;
- behave in a way that supports their own health as well as that of other people and whole communities (family, school, town); their balanced personality will have a positive influence on their environment;
- can serve as role models for a healthy lifestyle both at work and in personal life;
- are able to exercise a permanent loving relationship to all children who are in their care;
- think about, use and apply both theoretical knowledge and practical skills in everyday activities and situations.

Where to begin as a teacher?

- Begin with yourself. Think about your own approach to health, your lifestyle and its flaws, your ability to promote health education in the broadest sense of the word;
- Try to improve your relationship to children by learning more about their individual characteristics, respecting the personality of each, accepting children as partners, while at the same time refusing to promote potentially harmful interests (watching inappropriate TV programs or action films, eating sweets, etc.).
- Prefer dialogue with the children, stimulation of their activity and respecting rules to issuing commands.
- Respect the families' opinions on healthy lifestyle and child upbringing; tolerate other opinions. If you disagree with them because you think they might be harmful for the child, try to modify them in a sensitive manner, using indirect ways if possible; perceive



parents as partners and colleagues in initiating and implementing of the health promotion program.

- Think about and modify the kindergarten environment in order to make it cognitively stimulating, aesthetically pleasing, hygienic and health supporting.
- Let your work be conceptual. Bear in mind what goals and objectives you are trying to achieve.
- Be familiar with means, methods and techniques that will help you implement the health promotion program and enhance a healthy lifestyle.
- Change the form of your participation in the educational process by becoming a catalyst of children's activities, a mediator of their relationship to the world. Give up being the focal point of all activities, but remain aware of them. Do not leave the children entirely to themselves, but stay among them and with them. Notice what they are doing and help them to make their efforts, games and activities worthwhile and enjoyable. Be aware of the fact that real authority is not a result of managing children and their activities by giving orders or even of using such an approach with parents, but of a state when both parents and children respect your personality.
- Manipulate teaching equipment and environment, but never children.

Factors independent of teachers, but influencing their work

- style of the kindergarten management which, in the case of health supporting schools, should be based on participation and cooperation;
- atmosphere of trust and respect between the headteacher and individual teachers, between teaching and non-teaching staff;
- respect of people to the teaching profession, access to information and the possibility to cooperate and communicate with other educators and experts from various fields of knowledge;
- sufficient professional qualification and the possibility to extend and enrich it on a lifelong basis.

Training for the HK project

The most recent knowledge about skills of kindergarten teachers necessary for a high standard education and a healthy lifestyle has not yet been included in the secondary preservice training for kindergarten teachers in the Czech Republic. That is why special inservice courses should be organized. Here, headteachers have to rely on the willingness and interest of teachers to take part in such training. However, this form of education will by no means be sufficient in the future.

The importance and scope of the new areas of knowledge show that it will be necessary to transform the current system of pre-service training of kindergarten teachers.

The scope of activities, knowledge and skills and the independence necessary for their meaningful application in practice require higher education - a bachelor's or master's degree; this is the case in the majority of West European countries where the importance of health



education is understood in all its complexity. Kindergarten teachers are therefore expected to possess more extensive knowledge and skills in various fields, not just general knowledge.

ADDITIONAL READING:

The Health Condition of a School Teacher.

Sources

Vrána, S. (ed.): Czech Kindergarten for the New Period. / Česká mateřská škola do nového údobí. / Brno 1947.





KINDERGARTEN AS PART OF THE COMMUNITY

Healthy kindergartens strive to be a part of the wider community and thus become one of the preconditions of its stability. They participate in community development programs through their activities. Through promoting a positive social climate at school and productive relations with parents, they contribute to the improvement of the overall quality of social climate in the community. Within their educational program they enrich the cultural and spiritual life of the community.

No matter who runs the school, a kindergarten always is a part of the community. Although kindergartens are transforming into self-administered institutions, they are always dependent on the community:

- financially by receiving allocated funds from the state budget;
- by the scope of responsibilities that local governments delegate to them;
- through the possibility of creating a relationship of mutual trust that can develop only as a result of a true implementation of the law;
- by the accredited program that can be functional only if it is in keeping with the development of the whole community.

On the other hand, community development is to a certain extent affected by the existence of the kindergarten. Kindergartens make their contribution by:

- stabilizing the community in terms of population structure;
- implementing the Convention of Children's Rights;
- supporting the healthy development of the preschool population;
- laying down the foundations for the future healthy lifestyle of the population;
- creating a "space for children" within the community;
- promoting democratic values, as education for democracy begins as early as preschool age:
- enriching the cultural life of the community;
- influencing the educational program of the community.

There is no one answer to the question what the relationship between HK and the community activities should be. It always depends on local conditions. The relationship is always a sum of the civic maturity of both parties. Citizens can tell the attitude of local representatives to community development, i.e. whether they promote the growth of the kindergarten and thus help the healthy development of the youngest generation, or whether they have chosen the economically simplest solution, e.g. closing the kindergarten when its



operation does not "pay". (Many kindergartens in the Czech Republic have been closed on similar grounds in the past few years.)

Parents should choose kindergartens that appear to be independent of political or sponsorship pressures and ready to follow the main prerequisite of well-being for the children at all times. Then the parent's choice may become the means of pressure on local authorities to support the kindergarten. Caring for the well-being of children may even lead kindergartens into conflict with the local government. It is the duty of every kindergarten, however, to protect the children's interests both against lobbying of any kind and lack of understanding on the part of local government or parents. Here, kindergartens may want to seek the help of pediatricians, psychologists, lawyers, hygienists, ecologists and other experts.

The most difficult task of a kindergarten is to help the local representatives as well as the wider public to understand what the healthy development of children truly means. The ability to do so is a manifestation of its genuine professionalism. If the kindergarten has succeeded in this, it has at the same time fulfilled other responsibilities in relation to the community:

- laying foundations for the future structuring of the society;
- providing children with opportunities for healthy development both within the school and the community.

ADDITIONAL READING:

School Maturity and the Beginning of School Attendance. (based on the text by M. Havlínová)

Sources

Law of the Czech National Council No 13/12/90 On School Administration and Selfgovernment. / Zákon ČNR č. 13/12/90 O státní správě a samosprávě škol. /

Law of the Czech National Council No 10/9/91 On Preschool and School Institutions. / Zákon ČNR č. 10/9/91 O předškolních zařízeních a školských zařízeních. /

Rýdl, K.: Foreground to the World of Adults. / V předpolí života dospělých. / "S 94", a weekly of the Czech Government. / "S 94", týdeník vlády ČR, 1994, č. 25. /





STRESS-FREE TRANSITION TO PRIMARY SCHOOL

HK strives to promote good relations with primary schools in the community so as to create conditions for a stress-free, fluent transition of children from kindergarten to the first grade of primary school.

In this, they are led by the belief that school attendance is meaningful and rewarding only if all children are encouraged to believe in their own abilities and in their new role as pupils.

Preschool children usually look forward to school, trusting it without reservations. It is a paradox that after a certain period of school attendance, they often lose this enthusiasm. Instead of joy, they experience unpleasant feelings and sometimes even fear or anxiety when they are supposed to go to school in the morning.

In the primary school, adaptation problems emerge only after a certain period of time, when children find themselves in a situation they are unable to cope with under the given circumstances. If such situations continue to add up, an adaptation crisis may occur. In many cases, such a crisis takes place on a long-term basis, especially if the teacher does not notice or pay attention to the emerging problem. This happens when teachers put the main emphasis on fast progression and on testing and marking of pupils. For a healthy climate in the classroom, it is necessary for every child to adapt to the school environment. Otherwise, the relationship of children to school and their development is endangered.

Conditions for a healthy start of school attendance

HK cares how primary schools accept their first-graders.

The best way for kindergartens to make a fluent start of school attendance possible is to promote close cooperation with the primary schools in the community. That is why kindergartens:

- have a natural right to initiate cooperation with the primary schools in the area;
- should be interested in teaching styles and health promotion efforts in primary schools (or in projects taking place in the schools);
- share their experience of health promotion projects with the schools and try to encourage them to adopt some of the principles if they have not done so already;
- seek primary schools engaged in the Healthy Kindergarten project and establish close cooperation and exchange of experience with them.



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Ways of cooperation between HK and primary schools

- Cooperation begins with good access to information for all parties the kindergarten, parents and the primary school about the expectations and contributions of each party;
- An important element is knowledge of each other's curriculum (including the health education curriculum), the educational specialization of both schools and teaching methods used, especially in first and second grades.
- Written reports concerning the years children have spent in the kindergarten help a lot; however, only if they are conceived in a positive way, i.e. if they concentrate on the abilities and strong sides of each child and on noticing areas where help is needed. Many kindergartens nowadays refuse to do this due to a lack of trust. However, it would make the job of first grade teachers much easier because it would enable them to get to know and respect the individual characteristics and needs of each child at an early stage.
- Mutual visits of lessons help both sides to get to know each other and create an atmosphere of trust. Primary teachers get to know their future pupils in the kindergarten, kindergarten teachers can observe how their children are adapting to school attendance. They can consult each other about individual cases.
- The cooperation should result in a meeting of kindergarten and primary school staff where they can create a plan for the healthy transition from kindergarten to primary school, e.g. by establishing a "pre-adaptation period" when children visit the school (and possibly assume the role of pupils for an hour or two), primary teachers take part in the kindergarten activities or children and first-graders spend an afternoon of games together.

Preparation of parents for the beginning of school attendance of their children

- Healthy kindergartens inform parents about primary schools in the community and with their teaching methods and curriculum to enable them to make choices.
- If parents are interested, kindergarten can help them to look for the best school with respect to the needs of a given child, especially where a child with special needs is concerned.
- They discuss individual cases of postponement of school attendance with parents and do so sufficiently in advance. Health promoting kindergartens should consider these cases carefully, because it is necessary to distinguish between maturity corresponding to 6 years of age and real maturity for school attendance. The latter is an important concern in schools that use traditional teaching methods. In such cases, postponement of attendance can protect the child from stress and overburdening. Of course, in and ideal case schools should be able to accommodate all children who have reached the maturity level of 6-year olds and guide them so as they will gradually come to terms with the school environment and schoolwork. If a school requires the children to perform tasks that exceed their maturity, many children will seem immature. It is possible, however, to assess school maturity objectively, in collaboration with experts.
- Kindergartens organize lectures and workshops for parents about topics concerning the beginning of school attendance and its potential difficulties. What parents should know includes: the definition of school maturity, the issue of laterality (right-handedness vs.



left-handedness), the importance of play for a child of young school age, the importance of a regular daily routine, the level of independence that first-graders can achieve and cope with, what kind of tasks are appropriate for them, the terms of stress and overburdening, the phenomenon of a mistake in learning, etc.

• They make parents familiar with their rights and responsibilities.

What are the characteristics of a school that builds on the efforts of a healthy kindergarten?

In order to promote the healthy development of children, first- and second-grade teachers should base their teaching on their knowledge of developmental and individual characteristics of children between the ages 5 and 8. They should bear in mind that there are a lot of similarities between preschool and younger school children, since up to the age of 8 spontaneous play is still the main activity of children and direct experience the main way of learning. To ensure a smooth transition to school, this means that:

- even at school children should be given opportunities to engage in spontaneous play among themselves;
- teaching should be based on the experiences of children that they have either acquired spontaneously, or that the teacher has prepared for them; experiential learning should prevail over theoretical learning during the first two years of school;
- children should feel comfortable at school and have the sense that their needs have been met:
- teaching should promote the individual development of all children; it should not focus on achievement and grading, as this leads to public comparing of children and thus to the experience of fear of failure for some children;
- children should be educated and prepared for real life that they will lead in adulthood;
- primary schools should be able to accommodate all children who have reached the maturity level of 6-year olds as well as children with such causes of immaturity that can easily be remedied; they should help all children to overcome initial difficulties;
- the school should be open to parents to the extent they had been used to in the kindergarten; most importantly, they should have an opportunity to attend or participate in classes.

Sources

Havlínová, M., Josífko, M.: Non-specific Distrurbances of School Interaction of Children in the First Year of School Attendance. / Nespecifické poruchy školní interakce dětí v prvním roce školní docházky. / Psychológia a patopsychológia dieťaťa, 22, 1987, č.1: 69-80.



Havlínová, M.: Assesment of School Maturity in the Light of Regular School Attendance. / Posuzování školní zralosti a posuzování v souvislosti s plněním školní docházky. / In: Lékařské posuzování dětí a dorostu, ed. Jílek, V.: Praha, Avicenum 1992, 49-61.

Holt, J.: How Children Fail. / Proč děti neprospívají. / Praha, Strom 1994.

Jirásek, J., Tichá, V.: Psychological Aspects of Preschool Medical Check-ups. / Psychologická hlediska předškolních prohlídek. / Praha, SPN 1968.

Langmeier, J.: Developmental Psychology for Pediatricians. / Vývojová psychologie pro dětské lékaře. / Praha, Avicenum 1983.



PART 3

PARTICIPATING IN THE "HEALTHY KINDERGARTEN" PROJECT



1. HOW TO DEVELOP ONE'S OWN PROJECT

Stages of development

The whole process consists of approximately four consecutive stages. Each stage is marked by a different form of work that participants have to do in order to give the process the necessary dynamics and to bring the project to life in practice.

In the course of development, project participants do the following:

- 1. They get familiar with the model (intended) project, gather further inspiration and look for partners.
- 2. They create their own healthy school project to implement in their kindergarten;
- 3. They carry out activities which were designed as part of the project and adjust it flexibly if necessary.
- 4. They evaluate the outcomes of the project.

Stage 1

Getting familiar with the model (intended) project, gathering further inspiration and looking for partners

This stage is made easier by the fact that this "Healthy Kindergarten" project brochure is available to kindergartens, parents, local educational authorities, local government representatives as well as the wider public. The model project serves as the main source of information for them to gain an understanding of what the term "health promotion in the kindergarten" means, or, to be more exact, what the authors of this project mean by it. Those who are interested in the project, both get familiar with this information source and search for further information and ideas in brochures, books, lectures, seminars, workshops and discussions. They write down their own ideas. In this way, a kind of "common treasury of information" is created that can serve as a useful source of ideas for everyone involved.

It makes no difference who initiates the change in the kindergarten. What is important is whether cooperation and contacts have been established and enhanced.

Owing to the current state of interest taken in the development and innovation in preschool education, the main initiative is most likely to come from kindergarten teachers and headteachers. It is therefore up to them to further an effort to find and cooperate with other partners, most of all parents.

For ideas how to promote relations marked by partnership between kindergarten and home, see chapter "Community of Kindergarten and Family".



Stage 2

Creating one's own healthy school project to be implemented in each kindergarten

As soon as there is a group of people who have agreed upon the basic principles of the "Healthy Kindergarten" project and who wish to implement it in their kindergarten, they continue by taking further steps. These may be some of the following:

- they analyze conditions, possibilities and needs. To analyze the state of health promotion in their kindergarten, they use the list of general criteria of health promotion at school published at the end of this chapter;
- on the basis of the analysis, they identify objectives of health promotion in their kindergarten;
- they analyze areas of school life and the mutual links between them, for example the area of school management, using the schemes provided in the chapter "Management";
- they re-define those areas and their mutual links in light of the project objectives they decide upon means and tools for achieving the objectives within each area;
- together with all partners they develop a project budget;
- they develop a schedule for the separate stages and a way of monitoring the progress of this schedule;
- they identify potential risks and weak points that may be expected (objective as well subjective external conditions, the human factor, etc.) and design scenarios for overcoming them in case they do occur;
- they agree upon other necessary elements of the project, e.g. establishing ways of getting feedback and carrying out monitoring, searching for new solutions, creating the possibility for schedule change in the course of the project, etc.
- they put their health promotion project into written form, at first for their internal use, then, after getting internal feedback from the participating parties, they develop a written project that will serve both their own purposes and those of the public;
- they make copies of the project available to all participants to use on an everyday basis.

Stage 3

Carrying out activities designed as part of the project

At this stage, all participants refer to the project outline and make sure that it is put into practice. They pay attention to the goals of health education and to the structure and procedure of the project that should always be respected.

They pay special attention to feedback concerning the effects of new measures, activities and changes on children, teachers, parents and the public.

They make sure that agreements and contracts and their dates and deadlines are kept.



Stage 4

Evaluating the outcomes

The following approach to evaluation brings change into the whole evaluation system of the kindergarten's work.

- 1. Kindergartens should base the evaluation of the project outcomes according to
- what the children have actually learned and adopted, i.e. what they have internalized in their behavior, habits, attitudes, skills and knowledge;
- how the children are dealing with problems that have been observed earlier;
- whether the number of children with problems is increasing or declining;
- the level of subjective well-being perceived by children, teachers, parents and the community in the activities of the kindergarten;
- what the objective indicators of healthy lifestyle in the kindergarten are before and after a period of the project implementation
- a) in children (number of illnesses and the overal health status of all the children, effects upon children with psychosomatic and emotional disturbances and children with a problematic family and social background);
- b) in the staff (the overall health status of all teachers, the headteacher, teaching as well as non-teaching staff, effects in cases of previously diagnosed diseases).
- 2. We use the results of the evaluation to draw conclusions. Those conclusions will serve as the basis for designing future changes to the project. These changes may concern the contents as well as the time schedule.

The above mentioned self-evaluation approach should be supported from outside, e.g. by the school inspection board. Any inspection, however, should follow such criteria that respect the goals and objectives that the kindergartens have set for themselves. In our case, those are based on the "Healthy Kindergarten" project.

An example of a formal project structure

- 1. Name of the project
- 2. Authors of the project:
 - a) exact name and address of school, the name of headteacher;
 - b) name and address of the main author of the project;
- c) contact person who will facilitate flexible communication between the author of the project and the institution assessing the project;
- 3. Theme of the project: the main problem to be solved
- 4. Goal of the project: a brief description of the overall intention and the main ways to achieving it



- 5. The content of the project: maximum three pages containing the rationale, objectives, steps and procedures designed to achieve the objectives, plus information about any other important elements of the project
- 6. Time scale of the project implementation (schedule)
- 7. Budget
 - a) the total sum
 - b) the level of financial contribution of all partners together with a statement of their specific purposes;
- 8. Appendices (details on the objectives, cooperation with other partners, etc.)
- 9. Financial data: account number of the kindergarten
- 10. Conclusion, stamp of the kindergarten, signature of the headteacher, date, place and, if applicable, tax identification number.

Criteria of health promotion at school

Criteria covering areas connected with health promotion in schools of any type (from kindergarten all the way to secondary schools) do not form a vertical hierarchy, but a circle.

If we look at the last and and then again at the first criterion, we realize that that they all are of equal importance. If we conceive them as sections of a circle, we see they all connect in a common center.

Schools can use these criteria at any stage of their progression to health promotion - at the moment when they are only starting the project as well as in the course of the implementation or when any problems might appear.

What does health promotion mean for each group of people participating in the kindergarten

(leadership, staff, children, parents)?

To what extent is the school part of the community?

What are the interpersonal relations between the groups of people involved (management, staff, children, parents) and within each group (especially between teacher and child, teacher and parents)?

What activities does the school undertake to create an environment that is healthy in a holistic way (i.e. from the viewpoint of physical, psychological, social and moral influences)?

- the overall ecological and aesthetic environment both in the school's inside and outdoor spaces;
- the principles of healthy work habits (balance of work and rest, changing of activities,



individualized expectations put upon each child, respect for the individual pace of each child, enough free movement, spare time for personal needs and spontaneous activities);

- healthy lifestyle (drinking and eating habits, nutrition, relaxation and physical activities);
- care for the well-being of teachers so that they may become role-models for a healthy lifestyle;
- integrating children of all levels of ability (special needs as well as gifted) into the educational process of the same school;
- openness of school activities towards parents and the wider community.

How does the school prevent health risks that may inhibit the healthy development of children, the well-being of teachers and children, a good atmosphere at school? It should attempt to do so by introducing a systemic change (e.g. by using alternative teaching methods) or at least by compensating those risks (while adhering to a traditional teaching style).

What is the role of each child in the classroom? This includes the teacher's respect to the children's rights, needs and individual characteristics, the right of the children to express their opinion, the possibility to choose the teacher/?/ and the right of the parents to require a special approach to their child on the basis of cooperation between school and home.

How does the school support a good degree of self-awareness in the children (which is the basis for a development of a well-grounded personality capable of resisting harmful influences or addictions)? This is preconditioned by the development of healthy self-esteem together with realistic self-perception and effective self-control.

How does the school take advantage of the services of experts? This includes health institutions, counselling, educational activities as well as material goods and services.

To what extent is the school aware of its identity and unique features? Where do its individual characteristics lie and how do they reflect the needs and expectations of the community?

What is the school's approach to the development of its own project? Has it already tried any other project of this kind and how successful was it?

How does the school communicate and cooperate with other schools in the community and the region, or even with schools in the whole country and abroad?

The above criteria for health promotion at school were worked out by the participants of a workshop held by the Fellowship of Hygienists at a conference in Rožnov pod Radhoštěm in 1993.



Twelve Criteria of WHO for Health Promoting Schools

The World Health Organization for Europe, together with the Council of Europe and the Commission of European Communities has set up the following criteria for schools participating in the Europan network of health promoting schools.

All schools admitted to the European network have to agree to work according to the following criteria:

- 1. Promoting actively the self-esteem of all pupils by demonstrating that everyone can make a contribution to the life of the school.
- 2. Developing good staff/pupil and pupil/ pupil relations in the daily life of the school.
- 3. Making clear for staff and pupils the social aims of the school.
- 4. Providing stimulating challenges for all pupils through a wide range of activities.
- 5. Taking every opportunity to enhance the physical environment of the school.
- 6. Developing good school/home/community links.
- 7. Developing good links between associated primary/secondary schools to plan a coherent health education curriculum.
- 8. Promoting staff health and well-being.
- 9. Considering the exemplar role of staff in health-related issues.
- 10. Considering the complementary role of the school meals provision, if provided, to the health education curriculum.
- 11. Utilising the potential of specialist services in the community for advice and support in health education.
- 12. Developing the education potential of the school health services beyond routine screenig towards active support for the health education curriculum.



How to use the above criteria to evaluate the current state and development in your kindergarten:

Take a sheet of paper and draw 12 lines (one for each criterion) divided into ten columns marking a ten-point scale. For each criterion, mark the level of development in your kindergarten 1. at the beginning of the HK project;

2. now.

This will show you clearly whether or not you are making progress. A few simple statistics may serve as an additional source of information.

Sources:

Havlínová, M. ed. a kol. autorů NEMES: How Can we Change and Develop Our School? (On Individual School Projects) / Jak měnit a rozvíjet vlastní školu? (O individuálních projektech škol) /: Praha, Strom 1994.

Health Promotion Projects. A Practical Handbook for Authors of Projects. / Projekty podpory zdraví. Praktická příručka pro předkladatele projektů./ MZ ČR, Praha 1994.

School and Healh Promotion. A discussion material. /Škola a podpora zdraví. Diskusní materiál /. Praha, NCPZ 1992.



2. THE ORGANIZATIONAL NETWORK OF THE "HEALTHY KINDERGARTEN" PROJECT

The official admission of a kindergarten into the "Healthy Kindergarten" network works as a confirmation of participation in the project.

For the kindergarten this means it is entitled to:

- official membership in the HK project;
- the right to use the name of a "healthy kindergarten";
- the right to use the logo of the HK project in its publicity materials;
- participation in the activities organized by the authors of the project, the regional advisers or by authorized people, organizations and schools;
- active exchange of experience and training in the issues of health education,

At the same time, the kindergarten is required to

- share ideas and experience with other kindergartens
- open the school to visitors or advisers working within the project

The membership in the network does not entitle any kindergarten to direct financial resourcing of any kind from the HK project funds. If additional funds are raised, they will be used for organisation of workshops, publishing and other activities within the project.

Kindergartens interested in the HK project

Kindergartens that decide to participate in the project upon consent of all its staff should do the following:

- 1. They become acquainted with the HK project. Every kindergarten interested in participation should have its own copy of the book "Healthy Kindergarten".
- 2. They work out their own health promotion project in a written form. There is no deadline for this.
- 3. As soon as the project is approved of by the staff members, the kindergarten can apply in writing for membership in the HK network. The application letter has to include:
- identification data of the kindergarten: full address including the postal code, name of the headteacher, telephone number;
- list of appendices;
- one copy of the kindergarten's project in written form.



Without the inclusion of the project, the application is not valid. If the project is sent later, the application has to be submitted for the second time.

The correspondence address is: Poradna pro podporu zdraví ve školách ČR, Státní zdravotní ústav, Šrobárova 48, 100 42 Praha 10.

- 4. After the application with the project arrives, the organizer of the project will confirm the receipt. At this point the kindergarten can begin to implement its project. At the same time, cooperation between the kindergarten and the regional adviser and educator for the HK project will begin (explanation of this office follows). The kindergarten will be asked to allow a visit with the aim of an assessment and consultation of the project.
- 5. The guarantor of the project will keep all written materials serving as background for the admission to the network.

A special body appointed by the guarantor for this purpose will decide about the admission.

- 6. The deadline for sending of applications has not yet been set. It will depend on the number of applications and the time scale of their arrival. Due to the fact that it will be possible to apply for a longer period of time, a time interval will be given during which the school will receive the letter of notification.
- 7. Kindergartens may begin to send their applications from 1 September 1995.

The guarantors of the HK project and their services

The National Institute for Public Health (NIPH) will continue to be the official guarantor of the HK project for the period of its implementation.

For this purpose, organizational conditions have been created that should enable the following:

- protection of the quality of the project by direct care of the warranting team.
- respecting of the conditions for its implementation, feedback and exchange of experience among kindergartens participating in the network. A council has been set up for this purpose.
- spreading of the project in all regions of the country
 - a) By coordinators appointed for each region. They will work as advisers for health promotion. There has been a network of "Healthy School" coordinators who work as advisers for primary schools. They have been acquainted with the HK project as well and they will provide advisory services to kindergartens.
 - b) A network of educators for the HK project is being prepared at present. They will be recruited from "pilot" kindergartens with experience in global health promotion.



This network will be set up in cooperation with the regional coordinators of the HK project as well as associations active in related areas of interest.

Both experts in the region will be:

- functioning as warrantors of information exchange between the guarantor of the project and kindergartens as well as among the kindergartens themselves;
- providing organizational and methodological help to kindergartens;
- commenting on the projects submitted by kindergartens.

The above structure and procedures of participation may later be modified according to emerging needs and circumstances.

All the advisers nominated for the network have participated in a three-day training workshop called "How a Kindergarten Can Develop Its Own HK project". A respective book serving as a training manual titled "Our Kindergarten on the Way Toward Health" was published in 1997.

Research within the HK project

It will be necessary to carry out research as a logical follow-up of the project implementation. It will provide important feedback.

The HK research project will be submitted to the Council of the HK Project by the end of 1995.

This research shall be carried out by teams independent of the project. University teams would be ideal for this, as they could research kindergartens in their region.

We welcome any offers of cooperation. If interested, please, contact us at the address mentioned earlier in this chapter.



PART 4

DEVELOPING YOUR OWN PROJECT



1. HOW TO DEVELOP A PROJECT

What stage do you find yourselves at?

In Part 3 of the Healthy Kindergarten book, four consecutive stages of the project's development and implementation were described. Let us review what participants do during the four stages. In doing this, try to identify what stage your kindergarten is at:

WHERE WE ARE	BEGINNING (date)	END (date)
I. Getting familiar with the model (intended) project, gathering further inspiration and looking for partners.		
2. Creating own healthy school project to implement in the kindergarten;		
3. Carrying out activities designed as part of the project and adjusting them as necessary.		
4. Evaluating the outcome of the project.		

Fill out the approximate date of your first encounter with the Healthy Kindergarten project and approximate dates of the beginnings and ends of the stages that you may have gone through already. If you have decided to create your own project, put down planned dates for the upcoming stages, using a pencil. You will gradually fill out the real dates as you go through the stages.

Most readers getting acquainted with the project will find themselves finishing the first stage, facing the decision whether to create their own project. The following description of the procedure should make this decision easier for you.

Those at the second stage - i.e. who have begun to develop a project or are just about to do so, may want to compare their project or its components with our procedure.

Those who find themselves at the third stage and are implementing their project already, may find inspiration to enrich it with new elements.

Finally those who have already carried out a project and are evaluating it, may be thinking of creating another one. They can compare their experience with ours and take advantage of some of the ideas mentioned in this book. At the same time, we would be grateful to learn about the experience of others that may help us develop or modify the Healthy Kindergarten project.



9.0

Five "P's" or five steps within your project

The final form of a Healthy Kindergarten project consists of five consecutive parts. They may be perceived as steps on the way from the initial outline to the evaluation of the project. We have called this structure "the five P's", based on key expressions contained in each step.

From the reader's viewpoint, the finished project is structured in the following way:

Step 1 PRESENTING the school and the project

Our kindergarten on the way to health: WHO we are and WHY we have created our project

Step 2 Analyzing to what extent the school PROMOTES HEALTH

Assessment of the current situation at school in light of the 16 principles of a healthy kindergarten: HOW we are doing from the viewpoint of health promotion.

Step 3 PROJECT FRAMEWORK

Objectives and means of achieving those objectives: WHAT we want to achieve and HOW we want to do it.

Step 4 Action PLAN

Specific measures: WHO will contribute to the improvement of and changes in our kindergarten, HOW and WHEN they will do it. This includes the budget: HOW MUCH it will cost and - this is an optional part of the project - from what sources we shall get the money.

Step 5 PROJECT EVALUATION

Feedback: HOW did we do with this project outline.... and how are we going to find out how successful we have been with its implementation (ideas for further development and changes to the project).



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If structured graphically, it would look like this:

	starting point	objectives	means	specific measures	feedback
Our kindergarten on the way to health	? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ?	Objective(s):		1	1. 2. 3
	? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ? ?	Objective(s):		1	1. 2. 3. 4. 5
Presenting your school and your project	School analysis from the viewpoint of 16 HK principles	Project framework	*	Action plan	Project evaluation

The Healthy Kindergarten project is in fact a sum of answers to a series of questions: WHO? WHY? HOW? WHAT? WHEN? For HOW MUCH? The question HOW which appears in several places is the crucial one: HOW are we doing from the viewpoint of health promotion? HOW shall we introduce the desired change? HOW shall we get feedback?

The scope of the project is left up to each team. However, most schools that have already handed in their projects have chosen either of the following two formats: 15 - 20 pages without appendices, or 10 - 15 pages plus appendices.

The structure above refers to the final form of the written projects. In the development of your project itself, you may want to begin with the main four parts, i.e. analyzing the current state of the school in terms of health promotion, and outlining the project framework and its execution After you have done that, you may want to do the initial part of the written project (the introduction of your school and your project) and give the whole project its final shape.

The project writing procedure involves the following:

STAGE I - CREATION

Putting together the main parts of the project. The goal is to create source material which is not yet the final form of the project.

Step 1	Analyzing the school in terms of health	promotion

Step 2 Framework of the project

Step 3 Action plan

STAGE II - CREATION AND COMPLETION

Putting together the introduction part of the project and organizing other parts into a final written form, completing the project

Step 1	Presenting the school and the project
Step 2	Analyzing the school in terms of health promotion
Step 3	Project framework
Step 4	Action plan (and budget - optional)
Step 5	Evaluation

The initial section (presenting the school and the project) can be compared to an introduction or preface - although they are at the beginning of the book, they usually get written last, after the author has more or less finished the main contents of the book.

This development procedure remains open to new ideas and improvement. It is included in workshops designed for project advisors as well as other people interested in participating.

During the 12 months of testing the project we have made several changes. The number of steps has been reduced from seven to five; the content of some steps has also been modified. We have used experience gained in workshops as well as the first projects. The current version of the procedure is one that we have found the most suitable. It is up to you when to write the introductory



chapter. Also, the names of the sections are not obligatory. The analysis of the school, however, always has to precede the project framework which, again, has to precede the action plan. If you decide to use the suggested project writing procedure, please accept it as a whole. If you omit any of the steps, it might impair the quality of the project and make the implementation more difficult for you. On the other hand, feel free to add your own comments, observations or explanations how things worked or why you decided to do things in a certain way. The following chapters of this book will demonstrate that there are more ways to treat the final written project.

If you have put together your own project already, using a different format, it is also acceptable provided that no major part is missing.

In the following chapters we shall treat the procedure in more detail both from the viewpoints of it authors and the reader. We recommend that you get acquainted with all the steps before you begin working on the project. To make for easier orientation in the terminology used throughout this book, we have included a glossary at the end.



Your kindergarten on the way to health: Who you are and why you have created your project

Imagine that you are looking for partners to participate in a project that has already cost you a lot of time and effort; its success, however, depends to a great extent on finding suitable people to implement it. You are standing in front of their office, getting ready to introduce yourself. You want to arouse interest and trust, behaving naturally, yet be yourself at the same time. What will you do? Knock on the door, enter, say hello, shake hands with your partner, introduce yourself and say a few things that are crucial for the purpose of your visit. All this may not last more than a few minutes - and how much it can mean for the future of your project! What is your aim? To arouse interest while telling only the truth; to be friendly without false flattery; to say as much as possible about your project even though you might have just a few minutes. You should therefore pay attention not to use clichés or go into unnecessary details.

Presenting your school and your project is a similar case It works as a presentation - you want to introduce yourself, arouse interest and find partners for cooperation. Try to formulate your answer to the question WHO is submitting the project and WHY it was developed.

As already mentioned in the previous chapter, the presentation of the school is always the first part of the written project. When creating it, however, you can begin with Step 2 - the analysis of the school - and join the introductory section only after you have finished the main components of the project (analysis of the school, project framework and action plan). You may want to write a brief introduction first in order to organize your thoughts and clarify your motivation for your own purposes and return to it after you have done the main parts, modifying or changing it in any way necessary.

No matter which way you decide to use, you should know what the presentation should include. We also recommend that you get acquainted with several principles mentioned on the following pages.

At the very beginning, write down the identification data - the basic information the readers need to be able to get in touch with you.

Identification data

- 1. Name of the project, including information that it is a Healthy Kindergarten project
- 2. Exact name and address of the school (inc. the post code), phone number (incl. area code); if the school is a legal subject, include the tax ID and the bank account number (incl. the bank code)
- 3. Name of the headteacher
- 4. Name of the person submitting the project (the guarantor of the project). It does not



have to be the headteacher; however, if the case is such, Nos. 3 and 4 may be put together.

5. Name, address and phone number of a person who may be contacted in any matters concerning the project - again, this can be the same person as in Nos. 3 and 4.

The introduction itself follows - it should consist of a few paragraphs that should give the readers a general idea about your school, its activities and the people who work there. A statement of the reasons you have developed the project should be included. Experience received from the projects already submitted has brought us to formulate several recommendations. We mention them for the purposes of the presentation; they may, however, help you during further stages of your project as well. No doubt many more ideas could be added.

Recommendations for the presentation of your school and your project

Please take note of the following suggestions even in writing the other parts of the project. In a way, the whole project works as your presentation.

- 1. Be factual and relevant, keeping in mind the main point of each section.
- 2. Be personal (the project concerns your own school)
- 3. Use comprehensible language.
- 4. Avoid cliché and self-praising statements.
- 5. Do not describe your kindergarten only in figures; write about your style of work and people who work there.
- 6. Do not accuse others take responsibility for the problems of your kindergarten.
- 7. Present your kindergarten in a way to attract social and professional partners to cooperation.

1. Be factual and relevant, keeping in mind the main point of each section

In the presentation, do not go into details - you will have enough space to discuss them in the other parts of the project or in the appendices. Help the readers get an overall idea of your school and your project at a point when they might not know anything at all. A few paragraphs are enough; the maximum length should be no more than two pages.

The following information can become the framework of your presentation:



A. Basic information about the school and the community

- very brief characteristics of the community (village, town, neighborhood), local traditions, specific features
- location of the school, equipment and spatial conditions
- number of children, teachers and classes
- the prevailing style of work
- brief summary of present results in the area of health promotion

B. Basic information about the project

- the reason you have developed the project
- who were the people participating in the development (teachers, children, parents, non-teaching staff, other social and professional partners)
- sources that helped you in development (books, workshops, seminars, personal experience, visit to another kindergarten implementing the Healthy Kindergarten project, etc.)
- the structure of your project what you have included in the main parts, what appendices are there, how you have treated the project framework and the action plan, etc.

2. Be personal (the project concerns your own school)

Do not talk about your kindergarten as about the kindergarten in this or that street and this or that city. Instead, refer to it as *your* kindergarten (you have mentioned the identification data already). Do not always talk about *the educational staff*, but about *teachers*. Talk about children, parents and other people in the same, that is, natural way. Whenever possible, use first person plural.

3. Use comprehensible language

Put yourself into the shoes of your readers. The quality of your project is not determined by the number of loan words and complex sentences. Use special terminology only when necessary and check the last edition of the dictionary for spelling from time to time. Your project will be read not only by people from the educational field. Parents who are deciding which kindergarten to choose for their child, for instance, may want to read - and understand - the project too.



4. Avoid clichés and self-praising statements

Do not underestimate the readers. Let them make their own judgment on how good you are. They will make it on the basis of the factual information and, most importantly, of your approach. You know from your own experience how much one can read "between the lines" and how one feels about self-praise. Mention facts and try to avoid statements like "our cooperation with parents is very good", "our cooks are doing a great job" or "we have been using an individualized approach with special needs children". Besides the fact that such general and vague statements are impossible to verify, the reader's reaction may be the opposite of what you have intended.

5. Do not describe your kindergarten only in figures; write about your style of work and people who work there

It is much easier to write about the organizational structure and equipment of a kindergarten than about the style of work with children, for instance. It is the latter, however, that will make your description more vivid and interesting for the reader, even if it consists of no more than a few lines. In addition, formulating how you go about doing certain things may be helpful for your own purposes too.

6. Do not blame others - take responsibility for the problems of your kindergarten

When things are not going well, all participating parties have their share of responsibility, although the extent to which they are to blame may differ. It is of no use to try find the one who is to blame most. The only reasonable solution is to try to look for alternative ways, do things differently. Whomever we accuse, will defend themselves, no matter if we were right or wrong, and will hardly want to cooperate with us again. Let us not say that parents are unwilling to participate or that communication with the community or school cafeteria is poor. These are very generalizing statements and therefore unfair. Besides, in this way one puts obstacles in one's own way which, as a result, will be very difficult to pass in the future.

In presenting your school, there are two ways you can treat problematic topics. Either you can leave them for later (i.e. deal with them within the analysis, project framework or action plan), or identify the problem without accusing others, admitting your own share of the responsibility. The latter is more difficult, but it is a testimony of your good will and serious approach. You may say, for example, that you have not yet been able to attract more parents to cooperation, but in your project, you are going to look for ways of improving it.

¹ In the traditional concept, we have grown used to recommending the individualized approach to use with children who are in any way "outside the norm" - as if we were thereby saying that others do not need it. Every person is unique and has his or her own individual features and needs. Respecting the individual needs of all children - not only those with special problems - should be a matter of fact in every health promoting school.



7. Present your kindergarten in a way so as to attract social and professional partners to cooperation

Never mind if you have not yet been doing everything you could in the area of health promotion or if you are not sure about certain things - that is why you have created your project, after all. Never mind that you have problems - it is very important that you are aware of them and willing to solve them. Try to be convincing with your approach - talk both of your achievement and your doubts and searching. No objective reader of your project will expect you to be free of difficulties or to submit a perfect project that needs no improvement.



3. ANALYZING YOUR SCHOOL FROM THE VIEWPOINT OF HEALTH PROMOTION

The current state: How our kindergarten is doing in terms of health promotion

This is a very important step of the whole procedure, as it is the starting point of everything you are going to do next. In order to identify your objectives and seek ways to reach them, you need to know what your starting point is. The more thorough the analysis will be (worked out on the basis of the 16 health promotion criteria), the easier will it be for you to design the other parts of the project, i.e. the project framework and the action plan. This has been the experience of those who have already done their own projects.

The well-known "plans of school activities" that have existed for a period of tie have a major weakness: it is not clear what their starting point is. There is a list of activities seen as ones that "should be done". Many of them can actually be useful; implementation, however, often gets stuck, because the current conditions and available means have not been considered from the very beginning. At other times, schools list activities they have been doing already or some minor improvements - such objectives are obviously easy to achieve. On the other hand, they forget to list important issues just because no-one has thought of them.

The school analysis therefore has two purposes:

- to enhance one's awareness of one's own strong points (that can be built on) as well as weaknesses (that can be worked on)
- to help one identify what is really important and distinguish what should be done
 immediately and what can be put off for later when more favorable conditions have been
 created

The importance of feedback has been discussed earlier. The school analysis concentrating on health promotion serves as initial feedback that is necessary if our efforts are to reach the desired goals. During the analysis, one does not ask what should be done and how it should be done (that will be part of the project framework and action plan), but the following questions have to be answered:

- what do we see (when we look around our kindergarten)?
- what do we hear (when we listen attentively to other people in the kindergarten)?
- what do we feel (when we let the environment affect our senses and emotions)?
- what do we think (when we sit down to assess the work of our kindergarten)?

/ Answer the questioins from the viewpoint of the 16 health promotion principles. /



It has already been said that the analysis can be the very first step of your project development, although in the written project it comes only after the introductory presentation.

The analysis of your kindergarten - just as the whole project - should be a shared responsibility of all participants. (Possible ways of cooperation are described in chapter 8 where you can get ideas how to make not only teachers, but also parents, non-teaching staff and children involved in the analysis of your kindergarten.

What is the point of the analysis?

Go through all 16 principles of health promotion and look at the life of your kindergarten in light of those principles. To do this, you will need the "Healthy Kindergarten" book which deals with each principle in detail. Besides, you can take advantage of the suggestions for analysis included later in this chapter.

We suggest that you use the following 6-point rating scale to assess the level of your familiarity with the "Healthy Kindergarten" book:

- 1. I have not seen the book.
- 2. I have seen the book, but have not read it.
- 3. I have browsed through the book.
- 4. I have read selected chapters.
- 5. I have read the whole book.
- 6. I have studied the book in great detail.

This will make you realize where you find yourselves in terms of knowing the 16 principles for health promotion in kindergarten. If you have rated yourself lower than 5 and want to create your project, you should read the whole book as soon as possible.

How to go about the analysis

The following process has proven most suitable in workshops that have been carried out for schools writing their projects. Take a large sheet of (wrapping) paper, put it on the table and write down the headline "School Analysis In Light of 16 Health Promotion Criteria". After that, write down each criterion one by one, dividing the page into two columns marked + and -. Under the heading of each, list all the aspects in which your kindergarten promotes health within the given principle (+) and, on the other hand, all the aspects in which it impairs or even harms health (-). To distinguish each column visually, you may use markers of different colors. The whole page will look like this:



School Analysis in Light of 16 Health Promotion Criteria 1. Holistic Health Concept		
etc	etc.	
2. Knowing and Meeting	ng the Individual Needs	
+	-	
etc	etc.	
In the same way, go th	rough all 16 principles.	

Stay with each point as long as you have ideas to jot down. You will certainly need more than one sheet of paper and more than one afternoon. Go on with the analysis for so long as you need. Never mind if some aspects repeat themselves under different headings - as we have pointed out earlier, some principles naturally overlap. Also, you may find out that you want to get back to some principles in order to add something, clarify or modify what you have written, or, on the contrary, leave something out or move it to another place. The scope of the analysis is not limited. You do not need to be afraid of the analysis getting too long or detailed. As far as the final written project is concerned, you can enclose the whole analysis as an appendix for those who want to read it in more detail; in the project itself, you will write down a summary of the analysis one or two pages long. (The final form of the project will be discussed later separately.)

Sooner or later, you should organize a workshop in your kindergarten in which all the participants will work together. You will hardly be able to hold such workshops more often; you can therefore work on the different parts of the project on an individual basis and after some time meet with everyone and put it all together.

You can use the following analyzing procedure both in working individually and in group work. Everyone should get the opportunity to express their opinions about the life of the kindergarten in light of all 16 principles. If you decide to work individually at first, do not assign different principles to different people, having each of them work out "his" or "her" own part.

There is one recommendation for the individual analysis:



Choose one or two suitable days in the week and try to look at all that is going on in your kindergarten primarily from the viewpoint of one of the 16 health promotion criteria. Each time, pay attention to only one of them. In this way, go through all of them. Take a few notes during your observation; they will help you later to put together your written analysis.

This is great training to give you a better insight into the principles and teaches you to be observant to everything that has to do with them. It may be helpful to look in the "Healthy Kindergarten" book from time to time. Try to find a colleague (or even one of the parents whom you invite to the kindergarten for a given day) and agree with him or her to pay attention to the same principle during the day. During and at the end of the day, share your observations.

When you get to the same principle again after having gone through all of them, you may be surprised how the way you look at certain things has changed.

Participation of parents and non-teaching staff

Try to draw both parents and non-teaching staff into the development of your project. If you have managed to find one, two or three parents who would read the "Healthy Kindergarten" book, make their own analysis according to the 16 principles and participate in a common workshop, it would be greatly beneficial for your project. You can be less demanding and ask parents to write down anonymously what they consider healthy in the life of your kindergarten and what, on the other hand, they find potentially harmful. When they have done it, make their feedback a part of your analysis. You can ask them to cooperate in this way at a parents' meeting, write a letter to them, or do both - you can, for example, hand out brief questionnaires, explain what you plan to do and ask the parents to fill them out and return next week. Never mind if you do not manage to interest all parents in cooperation. Even if you have found just one interested parent in the whole kindergarten, it would make your effort meaningful.

Later in this book, you will find an example of a letter inviting parents to cooperate in the HK project. Now let's look at the questionnaire. One sheet of paper is enough, beginning with a few explanatory sentences, followed by three questions. Those of you who are parents of preschool children may try to imagine "your" kindergarten and how you would answer the questions suggested here. You may even ask the employees of the kindergarten your own child goes to whether they are familiar with the HK project and/or whether they are thinking of implementing it.

Dear parents,

As you already know, our kindergarten is interested in joining the Healthy Kindergarten project. The condition for acceptance, however, is a development of an original written project. We would like this project to come out of a common effort between you and us. We are therefore going to invite you to cooperate in a variety of ways and inform you regularly



how project development is going on. We would like to ask you to anonymously answer the following three questions:

- 1. What do you find right / healthy in our kindergarten?
- 2. What do you find wrong / unhealthy in our kindergarten?
- 3. Do you have any suggestions on what you and we could do together for the health of the children, parents and teachers of our kindergarten?

The third question will be referred to later, in the chapter dealing with project framework.

As the questionnaire should be anonymous, you really have to enable the parents to hand their answers in anonymously. A box placed in the school corridor or entrance hall is a good way to do this.

It is immensely important that the parents know their contributions are taken seriously. This, however, is one of common obstacles to effective cooperation. You can come back to the survey at the next parent's meeting, but most importantly, the ideas submitted by parents should play a role in the project.

Participation of children

Here are a few ideas on how children can contribute to the analysis of your school.

A technique called The Community Circle is an excellent way to have the children express their opinions on certain issues. Here, the children sit, stand or even lie in a circle together with the teacher. A small object (a pebble, an apple) or a ball is passed around. The person holding the object is the one who has the right to talk at the given moment. However, the possibility of abstaining from the discussion by passing the object on should be allowed for as well - answers should never be elicited under pressure.

In the analysis, the following questions can be asked of children (the teacher should of course share his or her answer too):

- What do I look forward to when I get ready for school in the morning?
- What was my favorite experience in kindergarten today?
- Have there been any unpleasant experiences?
- What is it like....
- (to celebrate Christmas in the kindergarten; to go for a walk together; to imagine going to school next year; to be forced to eat; to be yelled at; to have to lie in bed in the afternoon despite not being sleepy...., etc.

The basic criterion for assessing the quality of your analysis is:

Does your analysis provide a global and objective picture of your kindergarten?



Your objectives: What you want to achieve

A good analysis of your school will demonstrate almost at the first glance what you should concentrate on in the project framework development. The project framework - the third part of your Healthy Kindergarten project - is, to put it briefly, an overview of your main objectives and means in the area of health promotion for the next few years. It is a rough idea of how your school should be developing and changing within the next three, four or five years. During that time you can of course modify and improve the project. The initial material, however, will remain the basis for all future short-term planning of activities, e.g. for the period of one school year.

What is the difference between the project framework and the annual action plan?

The project framework includes all that you want to do continuously, during the whole upcoming period of several years and that cannot be done within a year. Naturally, the formulations of such long-term objectives will be more general, for example "supporting self- esteem in children". The description of the means used to achieve those objectives, however, should be specific enough to give the readers an idea of how you intend to proceed (see the examples on the following two pages). The project framework reflects your approach to health promotion in the kindergarten; it is a representative sample of the way you think about it.

The action plan is a set of answers to the questions of when, how and by whom the activities leading to the fulfillment of the framework objectives will be carried out. Athough some issues may repeat themselves, there is a new action plan for each year, reflecting the progress and development made during the past year. The action plan is a manifestation of your ability to implement your ideas and plans through concrete activities.

The project framework basically covers the main concept of one's work. As it is based on a thorough analysis of the specific circumstances of each kindergarten, it is - especially in formulating the means - tailor-made for the needs of each of them and becomes therefore a practical and useful tool.

In creating the project framework, it is necessary to distinguish between:

- the objectives (WHAT one wants to achieve)
- the means (IN WHAT WAYS one wants to achieve it)



This distinction is of crucial importance if your project is to succeed. To move your ideas and objectives from paper to practice, you have to be clear about the means that you want to use. The clearer you are about them, the easier will it be for you to create the action plan which should be a very concrete overview of everything people will be doing within the project. This will help make the project a part of the kindergarten's everyday life.

objectives	means	specifi	c measures
objective	>>>	1 2 3 4	5 6 7
objective	>>>	1	5 6 7
Proje	ct framework	and it	s action plan

The objectives should be formulated in a more general way so that all areas of health promotion in kindergarten are covered. There should be just enough objectives to make a clear overview.

In implementing the project, you will on one hand do the tasks listed in the annual action plan, while on the other hand you will keep coming back to the project framework or even the analysis as the "ideological" background of the project. That is why you should try to choose only as many objectives as enables you and your team to sit and think about each of them in greater depth at least once a school year. For example, if you decide to have 16 objectives in your project, in keeping with the number of Healthy Kindergarten principles, it means - the year having twelve months - that you will have to meet at least once a month in order to deal with one or two of the objectives at a time.

In the "means" part of the framework, however, formulations which are too general are no longer useful. Here, try to identify the main methods and procedures (IN WHAT WAYS you want to achieve your goals). Do not mention details (which will be included in the annual action plan), for that would impair the simplicity of the structure, not to mention the fact that there would be unnecessary repetition in your project. It is enough for one issue to appear only once, but at the proper place.

It is usually effective to combine several means to achieve one goal. For instance:



WHAT (the objective):

PROMOTING SELF-ESTEEM AND PSYCHOLOGICAL RESILIENCE IN CHILDREN

HOW to promote self-esteem and resilience in kindergarten children (the means):

- broaden the range of one's behavior that is supportive of children's self-esteem and avoiding behavior that impairs self-esteem, take advantage of natural everyday situations in the kindergarten; work with a list of positive behavior models which one creates with the help of one's own experience, discussions and literature.
- learn to discriminate between reward, praise, feedback and appreciation and to provide feedback and appreciation
- strive to elicit feedback of one's own behavior in trying to promote children's self-esteem;
 consult one's own experience with colleagues and parents; provide supervision to one
 another, role-play simulated situations
- seek literature on self-esteem promotion, participate in workshops, seminars or training groups
- ...

Or another example:

WHAT (the objective):

IMPROVING DIET THROUGH COMMON EFFORT OF KINDERGARTEN AND FAMILY

HOW (the means):

- organize a meeting of teachers, parents and cooks at least one a year concerning the meal service in the kindergarten and dietary habits in the families; combine this with a tasting of food and a lecture which would inform parents about the current dietary trends.
- modifying the kindergarten menus; trying to have fruit and vegetables every day, reduce the amount of animal fat, offer whole grain bakery products, limit the amount of white flour pasta products, introduce meat free meals one or twice a week; exclude smoked meat products; introduce other measures after consulting parents and cooks
- allow for children to have a drink at any time of the day, offer a choice of two drinks (herbal tea, water with syrup)
- enable children to participate in snack preparation, setting and cleaning up the table, etc.; make them acquainted with the healthy diet principles in a natural way
- affer education to the wider community in the area of healthy diet trends
- ...



There are three basic types of objectives and means. One can:

- further develop and improve what one has been doing in terms of health promotion already
- start doing things one has not been doing so far which, on the basis of analysis, seem desirable and feasible at the same time
- include such measures in the project which one cannot yet implement but which appear so important that they inevitably have to be implemented sooner or later. (It helps to remember them and be aware of their importance, even though they cannot be dealt with at the present moment; by this very awareness one helps make the way to their implementation in the future.)

How to go about making the project framework

As in the analysis, colored markers and big sheets of paper are very useful here. At this point, you already have sheets containing the school analysis.

There are several ways of structuring the project framework. Three options are suggested here.

OPTION 1: As in the analysis, go through the sixteen health promotion principles. This will segment your framework into sixteen corresponding areas. Within each principle, suggest as many objectives as you find useful and as many respective means as you can think of. If you choose to use this procedure, your project may grow into a large scope containing a rich treasury of ideas for your work.

The sheet of paper that you put your ideas on may then look in the following way:

Proje	ect framework
WHAT (objectives)	HOW (means)
1. Holis	stic health concept
etc.	
	etc.



2. Knowing and respecting individual needs		
And so on You will go through all 16 group ago	ch of them containing as many objectives and means	
as arise from your analysis.	n of them containing as many objectives and means	

OPTION 2: Again, work with the 16 health promotion principles. This time, however, each of your project framework objectives directly corresponds to one principle. That means you have 16 more or less given objectives and should try to look for effective means for each of them, suitable to the particular conditions of your kindergarten. Your analysis is the main source for your choice of means. In formulating the objectives, you obviously do not have to stick literally to the heading of each principle; try to find a formulation which will express your intentions as precisely as possible. The above-mentioned examples of objectives and their respective means illustrate such an approach.

In this case, the sheet of paper with your framework could look in the following way:

Project framework
WHAT (OBJECTIVE): Adopting and promoting the holistic concept of health
HOW (MEANS):
•
•
•
·
WHAT (OBJECTIVE): Respecting individual needs of all people in the kindergarten
HOW (MEANS):
•
•
•
•
There will be a total of 16 general objectives; the means to achieve them will be chosen according to the specific conditions of your kindergarten and the analysis you have made.



The main advantage of both aforementioned methods is their well-organized structure. Both you and readers can easily look over the objectives corresponding to the 16 principles. Let us say you are just looking at principle 11 (Experiential learning) and you want to know what the analysis has said about this point and what the action plan looks like. If one of the aforementioned approaches has been used, you will have an easy job finding your way through the project. The OBJECTIVES are based on the 16 principles, which means the focus of your work is finding the right means to achieve each objective.

On the other hand, the limitation of the given areas one is supposed to fit into may be perceived as a disadvantage by some who would like to set a different framework to structure their ideas, or who find the 16 criteria to be too many. That is why we offer yet another option for structuring a project, one with a looser structure and independent of the 16 Healthy Kindergarten criteria.

OPTION 3: Leave aside the structure suggested by the 16 criteria and choose another key to work with. You may, for example, begin by identifying one single problem you find so significant that would impair the rest of your work if it were to remain unsolved.

Be careful, however, not to make the project a tangle of many isolated problems in which case your readers as well as you yourselves would have a hard time finding your way through the project. On the contrary, you may try to combine different issues that have appeared in the school analysis so that the final number of your areas will be less than the original 16. The number of problem areas (not to be confused with the number of objectives!) can be reduced down to three: healthy environment, education for a healthy lifestyle and self-development including cooperation with social and professional partners. The lower the number of areas, however, the more objectives it is necessary to identify in order to cover all areas of the kindergarten's life and to utilize all material provided by the school analysis. No important issue raised by the school analysis should remain unanswered; on the contrary, each of them should be turned into a specific measure included in the project framework.

In this case, the shape of your project may look like this:

Project framework		
WHAT (OBJECTIVES):	HOW (MEANS):	
The area of health promotion:		
And so on: choose your own number of health pr	omotion areas (not to be less than three).	



The initial form of your project framework should be a draft that can be changed, reduced or added to as necessary until you are satisfied with it. Again, you may want to use colored markers to distinguish visually between WHAT and HOW.

When your draft is finished and you are getting ready to re-write it, use a well-organized structure that will allow you to follow up each part of the project framework with an action plan for that same part later (for this, see the following chapter). Under this option as well as if you are working according to the 16 Healthy Kindergarten principles, you can use a large separate sheet of paper. From now on, use only one side of the sheet to write on. It may look like this (we use the example for OPTION 1):

first sheet

second sheet

Project framework 1. Holistic Health Concept		Action plan for 19/ 19 1. Holistic Health Concept	
	And so on.		

In this way, you will be able to change the action plan and add to it without affecting the already finished project framework that will always be at hand. Leave some free space on the project framework sheet so that you can include other issues you may come up with later.

Using large sheets of paper is beneficial especially in group work. It has the following advantages:

- it makes for a clearly organized structure you can overlook the whole part you are currently working on, there is enough space to add things without having to re-write the whole part on different sheets; also, you can use different colors to write things down
- at any given time, all members of the workshop group can read what has already been written; you may post the finished parts of the project on the walls so that anyone can have a look at them whenever needed

Larger sheets of paper, however, are useful for individual work as well - you do not necessarily have to use wrapping paper, but a double page sheet of the A4 format, for example, is comfortable to work with.

Just like the school analysis, the project framework is a collective piece of work and it is desirable that everyone involved in the kindergarten take part in it - teachers, parents as well



as non-teaching staff. Of course you can do some individual work before you all get together, for this will increase the efficiency of the group work to follow.

Get parents and children involved!

If you have managed to find partners to cooperate with on the school analysis, they are likely to be willing to participate in the other project development stages as well. You can also take advantage of the questionnaire (the third question concerns the project framework and the action plan in part).

When introducing the Healthy Kindergarten project at the Primary School in Holešov, we got parents involved by asking them: "What is your idea of the school you would you like your children to attend?" In every class, there were a few parents who answered in writing. This provided us with valuable material for the project development.

(Just to outline the wider context, teachers were to answer the question: "What is your idea of the school you would like to teach at?" and children from the third grade on, "What is your idea of the school you would like to attend?" First- and second-graders drew pictures to express their ideas and then discussed them with teachers.)

You can use similar questions to address parents and staff in your kindergarten:

- "What is your idea of the school you would you like your children to attend?"
- "What is your idea of the school you would you like to work in?" (including non-teaching staff)

Last but not least, children should also get the opportunity to share their ideas about a school they would like to attend. They can first draw pictures to express their ideas and then share them with the teacher and with their classmates in a discussion (sitting in a circle is a good way to do this).

The basic criteria for assessing the quality of your project framework are:

- Is the framework well-organized?
- Does it cover all important areas of your kindergarten's life?
- After identifying the main objectives, does it provide a basic idea of the means to be used?



Specific measures: How does each person contribute to the changes and development of our school?

While the project framework is an illustration of the way you think about health promotion at school, the action plan is a set of concrete steps taken to implement your ideas in the everyday life of your kindergarten. Efficient action always has to be preceded by a clear idea of the objectives and means - that is why the project framework has to precede the action plan.

One without the other never leads to a satisfactory end: The action plan without the collection of thoughts contained in the framework (and without an analysis) is a mere set of measures lacking justification of what they serve and why they should be taken at all - not to mention the fact that the action plan is immensely difficult to put together without ideas evolving from the framework. The framework without an action plan, on the other hand, lacks a link to everyday life.

That is why for everyday work in the kindergarten, it is beneficial to have both parts readily at hand:

- the project framework as the collection of thoughts, as the set of objectives and means
- the action plan as a set of concrete measures to root the ideas above in reality

The structure of the project should convene to this. In the previous chapter we suggested a way to put both the framework and the action plan on paper that will allow the two parts to be linked (see pp. 107-108). The finished project can have a similar structure.

It has already been pointed out that the project framework contains the objectives and goals for several years while the action plan is worked out for each year anew. That is why it is all right if some of the ideas from the project framework do not appear in the action plan for a certain year. Maybe you do not know yet how to implement the desired change or you have given priority to other issues. The most important criterion is for the project to be feasible in the given circumstances of each kindergarten, and this is especially true of the action plan. In the action plan for each year, include only so much that you really manage to promote health in some areas without finding yourselves stressed.

No important issues, however, should be missing in the project framework. Even though some of them may not yet have been made part of the action plan, you can work on them in your head for the time being.



Even though you are not doing a certain activity yet, you are getting used to the idea that you may be doing it in the future. You are modifying your views, discovering new ideas, seeing new horizons. These "invisible" trains of thought can hardly be made visible in the action plan, yet they are so crucial for health promotion in your kindergarten. If you want to change and improve your school, you have to change and develop your thinking first.

How to make the action plan

Try to "anchor" the chosen objectives and means in everyday reality by identifying:

- what your priorities are in the current school year
- what the responsibilities of each person will be
- when each thing will be done
- what materials will be used and where you will get them
- whom it will be necessary to meet to discuss certain points and when it should happen
- who should be addressed with the offer of / request for help and partnership
- how and when all participants will get together to exchange their experiences
- in what way ideas for each topic will be gathered and exchanged
- what outside events (workshops, lectures) it will be beneficial to participate in
- what events you yourselves want to organize
- in what ways feedback will be elicited

• ..

Again, it is recommended to use very large sheets of paper (A2 or A3), especially in group work. Work on the basis of the project framework.

Each time, formulate as many specific measures as necessary to move towards the identified objectives at least by a few steps each year, though of course all you include has to be within your capabilities. Your work can look like this (we use the example based on Option 2 of the framework - see page 106.)

first sheet second sheet

jirsi sneet	Becond sheet		
Project framework	Action plan for 19/ 19		
OBJECTIVE: 15. Our Kindergarten as a Part of the Community	15. Our Kindergarten as a Part of the Community		
MEANS (HOW)	WHAT, WHO, WHEN		
•			
•	•		
•			
•			



Try to formulate your measures in a way that will enable you to tell without difficulty whether you have achieved what your wanted or not. Each time try to write down when a certain thing will be done, who will do it (a name) and who will take care of any material provision needed to complete the task. Of course there might be situations where all this is not yet clear - you might not know, for example, who will participate in a certain event - but in most cases, specifying such details is crucial.

Some activities will obviously have to be done by everyone and throughout the whole year. Activities like that do not require such measures. However, the efficiency of such a process will be very difficult to assess at the end of the year unless people have meet a few times throughout the year to exchange their ideas and observations.

The objectives and measures have to be formulated in a such a way as to be understood not only by all people participating in the project, but also by those who will read it. Avoid anything that you find useless, difficult to identify with or that you are not sure about. Use common sense whenever hesitating about an issue.

Just like the other parts of the project, the action plan is made in cooperation with all people concerned. Teachers are the most important group, but it is desirable that parents, non-teaching staff and even children also get the right to contribute. Everyone involved in project development at this stage should be active in its implementation as well - no-one should be coming up with tasks for others while standing aside themselves.

In Chapter 1, describing the five steps of project development, the budget has been mentioned. This issue will be dealt with at the end of the following chapter.

The basic criteria for assessing your action plan are:

- Is it specific enough?
- Is it realistic?
- Can its implementation be easily followed and assessed?
- Have you focused on what is really important?
- If you carry it out, will it lead to visible changes in your kindergarten?

Example of a part of the project framework and action plan

Let us use one of the examples of a framework mentioned in the previous chapter in order to work it out into a concrete action plan for one year.

The large sheets of paper are useful in putting the project together; to put it into the final written shape, however, you will have to use a smaller format. Please be aware that the example mentioned below is only one of several possible approaches to the final form of the project framework and the action plan. We have based it on the option where each objective is identical with one of the 16 Healthy Kindergarten principles. If each objective occupied one page, for example, the main part of the written project (e.g. the project framework and the action plan) would thus have 16 pages in total.



THE OBJECTIVE: Increasing self-esteem and resilience in children

- The means: How do we intend to increase children's self-esteem and resilience
- broaden the range of behavior patterns promoting children's self-esteem, avoid behavior detrimental to it by taking advantage of natural everyday situations in the kindergarten. Make a list of behavior patterns based on our own experience, discussions and available literature

learn to distinguish between praise, reward, feedback and appreciation, learn to give feedback and appreciation

try to elicit feedback on our own behavior, through which we are striving to
promote children's self-esteem, consult our experience with colleagues and parents,
provide supervision to one another, role-play situations

search for literature on self-esteem support, monitor the possibilities to participate in workshops, seminars or training groups

WHO will contribute, HOW and WHEN (action plan for 1996-97)

at the final stage of our project development in June 1996, we agreed that selfesteem and resilience promotion are to be one of our five areas of special focus next year

all teachers will get a copy of the text by E. Grothberg quoted in "Our Kindergarten on the Way to Health" called "What Can Parents and Other Caregivers Do to Promote Self-esteem of Children from 4 to 7" (Mary responsible for xeroxing and distributing the text)

• in October, we will all meet to discuss the text

• in December we will also provide the text to parents at the Christmas party (Mary will take care of xerox during September)

• all teachers will put down their ideas and observations concerning self-esteem support; each of them will get a notebook to put down anything connected with the Healthy Kindergarten project (Alena will take care of the notebooks in September)

• we will share and discuss our experience at a meeting in April, offering participation to parents as well (Petra will take care of the invitation letter)

• in pairs, teachers will try to provide feedback to each other during the whole school year monitoring how successful the other is in promoting the self-esteem of children in their class; at the April meeting, they will evaluate how successful they were in this respect

we have booked places for two teachers to participate in the workshop on strengthening self-esteem and resilience in kindergarten children, organized on our initiative by the Local Educational Authority; the date is yet to be specified (Alena responsible)

• we have booked places for two teachers to participate in the workshop "Practical exercises in Communicating with Children" organized by the Society of Brain Compatible Learning; the date is yet to be specified. The opportunity to participate will be offered to parents too (Alena responsible)

• teachers participating in the workshops will share their experience with other teachers. If possible, they will organize a similar workshop in our kindergarten

• this plan will be extended as necessary at the October meeting



6. THE FINAL SHAPE OF THE WRITTEN PROJECT

Who will read your project?

The seventh principle mentioned in the recommendations for presenting your school and your project was:

Present your kindergarten in a way so as to attract social and professional partners to cooperation.

In a wider sense, the whole project is your presentation, not only its first part.

There are two main reasons why to write your project:

- 1. Your own purposes to work according to it yourself and arouse the interest and get the cooperation of:
- parents
- non-teaching staff
- community representatives
- other people who are potential partners
- 2. As a part of your application to participate in the Healthy Kindergarten network

Many people interested in your kindergarten will of course not want to read the whole project in detail. It is, however, important that they have that option. No doubt there will be some who will take advantage of it.

For parents and public, you may put together an abbreviated version of your project (illustrated by your kindergarten children). It may play a role in the decision parents will make in choosing a kindergarten for their child.

The draft and the final shape

From the previous chapters, it is clear that the shape of each chapter during the process of project development is somewhat different from the final shape of the written project. This concerns three sections: the school analysis from the viewpoint of health promotion, the project framework and the action plan.

During the creation, you are expanding, modifying and adding to the sections in keeping with the development and clarification of your thinking and the discussions emerging from workshop style group work (which should be part of the project at least in its key stages). Owing to these conditions, the procedure described in the previous chapters is most appropriate (including the use of large sheets of paper).



When you are ready, you can begin to put your draft materials together to create the final written shape. To this end, follow two criteria:

• The project should suit your own purposes.

You want to create a project you will enjoy doing in practice. It should be turned into a helpful prop to use in your work.

• The project should capture the interest of readers:

You want your project to arouse the interest of people who might be your potential partners for cooperation. Remember to keep it well-organized, brief, true, intelligible and easy to read.

The process of your work should, however, be reflected in the project itself. This may be done in a summary or commentary at the end.

Some people might find such a procedure too lengthy - why should one do so much work for the sake of a few pages! The matter, however, is not the ten or twenty pages of written text. The proposed procedure should at the same time open up an exchange of opinions, clarification and sorting out of thoughts plus a deeper study of certain issues. The very creation of the project may be even more exciting and enriching for the participants than the project and its implementation.

The finished project is not definite, either. Soon you will get new ideas on how to improve it and you will want to incorporate them into the annual action plans at the very least. Surely you will be interested in knowing how well you have been doing with the implementation. This means you will have to look for ways of eliciting the desired feedback.

The final shape of the project

Let us go through all the sections of the project with respect to their final written form.

1. Presenting your school and your project

All necessary information has been said in Chapter 2.

2. Analyzing the school from the viewpoint of health promotion.

There are two possibilities:

- Re-write the whole analysis just as it has been worked out, putting it down on regular A4 sheets. Then make it a second part of the written project.
- Write a one- to two-page summary of the analysis which you will make into a second part of the project. Then re-write the original, detailed analysis and make it an appendix to the project.

The latter is more demanding to do, but it has two advantages:



- the project is not so extensive and is well-organized
- the school analysis will be available for your own use as well as for anyone else's (the detailed analysis according to the 16 principles, however, is an obligatory part of the project copy which you will send to the Healthy Kindergarten guarantor with the request to be included into the HK network)

3. The project framework and

4. The action plan

You will have to re-write the two parts from the large sheets of paper to regular A4 sheets. There are two ways of structuring them:

- After the analysis (or the analysis summary), gather together the complete project framework followed by the complete action plan
- Combine the two parts so that for each health promotion area (or even for each objective), the project framework is placed together with the action plan (see the example on page 113).

The main advantage of the first option is the fact that you do not have to re-write the framework every year, but you simply update the action plan part. Even the framework, however, can be added to if you have left blank spaces for this purpose.

The benefit of the second option is the fact that readers can find their way through the project very easily without having to browse back and forth. A computer is a great help, for if you have the text in the word processor, you do not have to re-write the project either - you can add to it, put down new parts of the action plan and print it.

5. Project evaluation and conclusion

This last section of the project, which concerns its evaluation, will be dealt with in the chapter to follow. Optionally, you may write a conclusion containing anything you want to add - for example, what it was like to work on the project development.

Some of the project's parts will be written in an essay style - for example the presentation of your school and your project, the analysis summary, project evaluation or even other parts. For the detailed analysis, project framework and action plan a more schematic, well-organized format including such elements as charts or graphs.

Of course you can add your own comments to any section of the project; they will make the text more lively and readers more involved.

No doubt you will be able to think of other ways of structuring your project. In employing them, however, keep in mind the criteria described on page 115.

The scope of the project

As has been said earlier (Chapter 1), the scope of your project is up to you. Be more careful about the quality and good structuring of the project than its scope. It can be of twenty or



twenty-five pages plus appendices and still be interesting for the reader, provided it contains inspirational thoughts, is well organized and easy to read. If this is the case, it would be for the worse to try to reduce its length. On the other hand, you can have a project ten pages long plus appendices; provided you find it beneficial to work with and the reader is satisfied just as in the first case, it is all right. In any case, avoid cliché and confused structuring. You would find the project difficult to use and it would not capture the readers' attention no matter how short or long it would be.

It is difficult to plan the scope in advance. If it seems to be longer than 20 or 25 pages, add appendices. They can be useful in shorter projects too - the detailed analysis, for example, can be an appendix and the project itself can contain only its summary. There may be other materials connected with your project that would be suitable to attach as appendices.

You do not have to stick to what is called the standard page format (60 characters per line, 30 lines per page). If you choose a denser format, you fit more text into one page and you will even find it easier to structure.

All that has been described will hardly fit into three or five pages. On the other hand, do not burden your project by repeating what has been said elsewhere or by describing unnecessary details that are clear from the context anyway.

Keep in mind that you could use certain parts of your project for several years. The more thorough the project framework, the longer you will be able to use it in your work. You can implement the project step by step for any period of time. No important area of your kindergarten life should be missing, despite the fact that each annual action plan does not need to include all areas (Chapter 5).

The improvement of your life and work in the kindergarten will be the main reward for making a good project. There is no doubt that such a reward is worth writing a few pages of text. Besides, bear in mind that after making your Healthy Kindergarten project, you will not have to write the obligatory "concept of the school's work" or "plan of school activities". A quality Healthy Kindergarten project should meet the requirements of the Czech School Inspection.

To illustrate what the scope and content of a finished HK project may look like, we give two examples - of course, they are only two of *many possible* ways.



Example 1

Introductory page

1. Presenting your school and your project 2. School analysis

Healthy Identification data School and project Analysis summary Kindergarten of your kindergarten presentation continued Project of the Presentation of your kindergarten school and your project 2 1 3

3.- 4. Project framework and its action plan for the year

Principle No.

Project framework

Action plan

4 - 19

If you proceeded according to the 16 principles, putting each of them on one page, the main part of the project would take up 16 pages (as in the example on page 113).

5. Project evaluation and conclusion

Project evaluation

Conclusion

6. Appendices:

- detailed school analysis from the viewpoint of health promotion
- other appendices (scope not limited)



Example 2

Introductory page

1. Presenting your school and your project 2. School analysis

Healthy Identification data School and project Analysis summary Kindergarten of your kindergarten presentation continued Presentation of your Project of the kindergarten school and your project 2 1 3

3. Project framework

I.	II.	III.	
Creating healthy environment	Education for a healthy lifestyle	Self-development, cooperation	Project framework for three health-promotion
4 - 5	6	7	areas (4 pages)

4. Action plan for (school year)

I.	II.	III.	
Creating healthy environment	Education for a healthy lifestyle	Self-development, cooperation	Action plan for three health-promotion
8 - 9	10	11	areas (4 pages)

5. Project evaluation and conclusion

Project evaluation	
	6. Appendices:
Conclusion	 detailed school analysis from the viewpoint of health promotion
20	other appendices (unlimited scope)



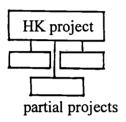
Partial projects, budget

The expression "partial project" was chosen to signify a part of the Healthy Kindergarten project worked out in more detail in order to get a grant.

Requirements for the format of such a project are always set up by the institution offering the grant.

Partial projects are not an obligatory component of the Healthy Kindergarten project, but you can of course include them in your project. As grants are always bound to a specific purpose and a specific period of time, the budget will most likely be a part of the action plan. Another option is to enclose the whole partial project as an appendix and refer to it at an appropriate place in the action plan.

The guarantor of the Healthy Kindergarten project cannot provide kindergartens with funds for equipment or for their individual activities. Assistance to kindergartens is of a different nature, namely a complex and long-term one.



HK project:

- to use in the kindergarten's work
- to become a part of the HK network

partial projects:

• to get financial help (requirements for the written project specified by the institution offering the grant)



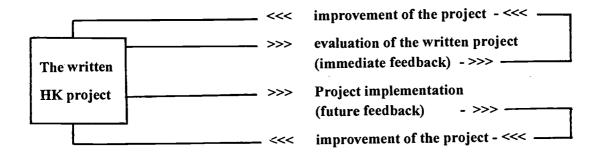
Feedback

It has already been pointed out that school analysis is the initial feedback and starting point of change and development of your kindergarten. Project evaluation serves similar purposes: getting immediate feedback on the finished written project and preparing a concept of how you are going to evaluate the implementation and the progress of the project in future. In the fifth step of the project development it is you who assesses your own projects. In this, you are trying to answer two questions:

- what is the quality of the material you have created
- how you are going to monitor the implementation of the project (a plan for the future)

The feedback thus gained makes you move forward all the time and enables you to improve your work constantly. That should therefore be reflected in the fact that you change and develop your project as time goes.

Do not rid yourself of the right to self-development and do not be afraid of change and innovation. Do not be afraid to use new experience and observations to change something that you had previously considered given and unchangeable.



How well did you do with your written project?

To judge the quality of your "final product", namely the written project, you can use various criteria - either your own or ones invented by someone else. In this chapter, we are going to mention some you might use for inspiration.

The first concept is the list of five criteria called the Rules for Coexistence taken from the Integrated Thematic Instruction model. They are: trust, truth, active listening, avoiding put-downs and personal maximum.

The Rules for Coexistence related to your project are very subjective criteria, for it is only you who can use them to assess the project. You can, for instance, ask yourselves:



- 1. Are we making a trustworthy impression with our project?
- 2. Do we respect the truth? Have we avoided any pretense?
- 3. In creating the project, have we listened actively to everyone involved?
- 4. Have we shown respect for the needs of all people concerned?
- 5. Have we done our best?

The other set of criteria is also inspired by the ITI model, one using three criteria called "the three C's": COMPLETION, CORRECTNESS and COMPLEXITY. Unlike the previous criteria, this set allows for a more objective assessment of the project. That is why it can be carried out by independent observers as well.



ASSESSING THE WRITTEN PROJECT ACCORDING TO THE THREE "C-s":

I. Completion

- Is the result in keeping with the ASSIGNMENT? That is:
 - is it really a health promotion project (and not just a plan of school activities, for instance)?
 - is it tailor-made to the particular school or is it just a set of general phrases from the model project?
 - does the project respect the structure recommended by the HK guarantors? (16 health promotion principles, five steps of project development, cooperation of all people concerned, official application for the network)
- Is the result in keeping with REAL LIFE NEEDS? That is:
 - does the project correspond to what really needs to be changed in the kindergarten?
 - is it inspirational for others, could it be published?
- Is the result in keeping with ACTUAL CIRCUMSTANCES? That is:
 - is the project realistic? Is it based on realistically assessed personal, material, financial and time possibilities?
 - does the project take advantage of the existing conditions and possibilities, including cooperation with various partners, the character of the environment, etc.? (Often one seeks treasures far away while having them round the corner.)
 - does the result stimulate pride in one's own work?

II. Correctness

- Are all the FACTS mentioned in the project CORRECT?
 - do all proposed changes correspond to the latest state of knowledge on what is good for human health?
 - has correct terminology been used in the right context?
 - is the text correct from the viewpoint of grammar and spelling?
- Have A VARIETY OF SOURCES been used?
 - does the project contain views of various groups in your kindergarten? Is it not biased or one-sided?

III. Comprehensiveness

- Have ALL ASPECTS of the task been covered? Can readers tell you have put a lot of hard work and effort into the project?
- Does the result reflect an UNDERSTANDING OF THE PROBLEM? Are you able to defend your positions and explain your views to others?



Finally, let us review the assessment criteria for the first four project sections which have been mentioned earlier in separate chapters.

ASSESSMENT CRITERIA FOR EACH PROJECT SECTION

Presenting your school and your project

- Have you taken advantage of the recommendations on presentation? They were the following:
 - 1. Be factual and relevant, keeping in mind the main point of each section.
 - 2. Be personal (the project concerns your own school)
 - 3. Use comprehensible language.
 - 4. Avoid cliché and self-praising statements.
 - 5. Do not describe your kindergarten only in figures; write about your style of work and people who work there.
 - 6. Do not accuse others take responsibility for the problems of your kindergarten.
 - 7. Present your kindergarten in a way to attract social and professional partners to cooperation.

School analysis from the viewpoint of health promotion

• Does your analysis provide a global and objective picture of the current state of your kindergarten?

Project framework

- Is it well-organized?
- Does it cover all important areas of your kindergarten's activity?
- After identifying the main objectives, does it provide a basic idea of the means to be used?

Action plan

- Is it specific enough?
- Is it realistic?
- Can its implementation be easily followed and assessed?
- Have you focused on what is really important?
- If you carry it out, will it lead to visible changes in your kindergarten?

The assessment of the project that you make in light of the above criteria is intended for your own purposes; do not include it in the written project.

You can, however, ask independent persons for their judgment (they may use the second and third set of criteria mentioned earlier in this chapter). Their evaluation can be



enclosed as an appendix to the written project. Members of the committee deciding about the inclusion of schools into the Healthy Kindergarten network will use the second and third set of criteria to assess your projects. We would like to point out that it is not a question of comparing schools with each other, but assessing each individual school according to the same set of criteria.

How are you going to find out how well you have done?

Your written project should include a few sentences on how you intend to monitor the implementation of your project: how you are going to elicit feedback which is to become a starting point for you to improve your project, your school and to enhance your own self-development. Some of it may have already been included in the action plan. In such case, summarize your concept at the end anyway.

On the next pages we provide some ideas on how you might do this.

IDEAS FOR ELICITING FEEDBACK

Feedback people in the kindergarten give to one another

- Plan how often you are going to meet to evaluate how well you have been implementing your project. Make these meetings part of your regular meeting and activities schedule.
- Schedule topics for each meeting in advance so that no important objective is missing in your health promotion program throughout the year.
- Look for ways to provide feedback to one another "on the way" without having to set up extra meetings for this purpose.
- For example, pair up and let the two people give feedback to each other on a specific issue (these might be things like avoiding manipulation with children, etc.)
- Use a list of life skills, rules of coexistence (pp. 121-122) or other lists of positive behavior models. When you see someone behaving like that, let them know, being very specific. (This can be done not only among adults themselves, but adults may thus provide feedback to children.)
- Do not forget about feedback from children and parents. Hold a brainstorming session in the kindergarten (see the next chapter) on how you might elicit it.

Feedback received from people outside school

- Workshops, seminars and other educational ventures are good occasions for people to think of their work in a more complex way. Be active in such situations the more you contribute, the more you will get back.
- Books, magazines, field trips or meetings with people are another opportunity for feedback - anything that makes you confront your experience with various concepts and enhances your self-development.
- Invite someone you trust to observe the classroom activities during one day. Let them sit in the back and write down ideas and observations. At the end of the day, sit down to talk about what they have seen and how they have felt in your kindergarten.



¹²⁵ 129

Organize workshops!

We have pointed out several times that a good HK project can only develop out of cooperation. Workshops (or creative seminars) are one of the methods that can be used; they are, at the same time, a rich source of new ideas.

Two things one usually does at a workshop is learn and create. What is "normally" transmitted in the form of a lecture or (in the best case) discussion, gets DONE at a workshop. A school project development is almost an ideal topic for a workshop.

Participants whose number may be up to about 30, work in small groups of 4 - 6 people or sometimes individually. This is not to say, however, that two teachers in a small school cannot have a workshop. (Don't forget that it is desirable to extend the number of participants by members of parents and non-teaching staff.) During the workshop, people talk, discuss, collaborate, split roles (speaking for the group, recording the ideas, etc.) and switch their roles from time to time. Working in small groups enables everyone to get involved actively and contribute their thoughts and experiences to the collective work, especially if they have a chance to prepare in advance. It breeds many interesting ideas which one person could never think of. Workshops are thus a means of moving your work forward.

Everyone should try to keep rules agreed on in advance - rules like active listening or other rules of coexistence from the ITI model. It helps to establish an atmosphere of trust and partnership and improves the quality of communication. Besides, skills acquired in this kind of work are subsequently reflected in the teachers' work with children and communication with parents.

A workshop can take a few hours, but often it takes a whole day (of course with coffee and lunch breaks). The workshop leader prepares a program in advance. In developing your Healthy Kindergarten project, you should organize a workshop several times and take turns in the role of the leader. At the end of the workshop, the leader asks participants for a brief, written and anonymous feedback.

No-one should under any circumstances be forced to participate in a workshop and no-one should feel unsafe in expressing their opinions. Creating an atmosphere of safety, trust and understanding is the first prerequisite of successful cooperation.

Any chapter from this book might serve as a workshop topic. Two other topics are mentioned on the following pages. The first one is suitable for the initial stage of project development, after you have got acquainted with the model project. The other one can be used at any time when you need to collect as many ideas as possible to solve a problem - for example, when you are looking for appropriate means to achieve the objectives identified in your project framework. In addition, the third volume of this book is going to deal with workshop activities in more detail.



WHERE YOU ARE

Questions for teachers - ideas for a workshop

You can answer the following questions individually, but it will be more beneficial if they are used to stimulate collective work in a workshop. (The "you" in the questions addresses the whole teaching staff as a group. Write your answers down.

- 1. Are you thinking of developing your own HK project? Have you gotten acquainted with the model HK project? Is it acceptable for you? Do you have any comments on it?
- 2. If you imagine developing your project collectively, in a collaboration of all staff and other people, what advantages or disadvantages would it bring?
- 3. If you were to begin developing your project today, what would you use as the basis for it? Note down: We can build on ... (name experiences, materials), We are missing ... (name experiences, materials). Where could you get what you need? By what date?
- 4. Do you have a functional library in your school? If not, what has to be done to bring this about? Where could you get more literature? By what date would you be able to do it?
- 5. What books or magazines on health and education could you use?
- 6. Would you be interested in a workshop or training? Of what kind? Do you know of any specific opportunities? Do you know who to address with the invitation to participate?
- 7. Are you aware of anything that might be changed immediately to improve the health of your classroom and the whole kindergarten?
- 8. Would you be able to go and carry out a classroom activity with your children containing a health education topic? What would it be? How would you go about it?
- 9. How could you get parents involved in the development of the project?
- 10. Would local representatives support your HK project? What do you consider to be appropriate support? Who are other potential partners for cooperation?
- 11. Using your experience and available materials and with the help of parents, would you be able to create a fifteen-page Healthy Kindergarten project and start working in accordance with it?
- 12. Are there any obstacles to you actually doing what we have just written? What are they?

Brainstorming

Our own thinking is often the main obstacle to finding a solution to a problem:

- we have grown used to something to an extent that makes us unable to imagine it could be otherwise
- we live with a false belief (unfortunately widely supported by school) that each question
 has only one correct answer

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- we are afraid to express disagreement in order to avoid conflict
- we are afraid to share our views because we do not want to "look stupid"
- we say something is not possible or we gather arguments why it is not possible, because it is more comfortable to keep things as they are

Brainstorming, one of creative thinking methods, is an attempt to overcome the aforementioned barriers in one's thinking. In brainstorming, people are trying to come up with as many ideas as possible for one topic (for example What could we do to support trust and cooperation between our kindergarten and the community?), bearing the following principles in mind:

- PUTTING CRITICISM ASIDE (all ideas will be judged later)
- FLIGHT OF IMAGINATION (manifold ideas)
- NUMBER OF IDEAS (the more varied ideas, the better)
- MUTUAL ENRICHMENT (thoughts of different individuals influence and enrich each other)

The most common procedure (which of course can be modified) is the following:

- identify a problem
- let thoughts flow and associate freely (record them on a paper or tape, avoid any judgment)
- you can interrupt the activity thereby you give your thoughts time to develop and clarify
- finish when you feel you've "got it"
- assess all ideas and choose the best ones
- make appropriate arrangements based on what you have decided upon

An atmosphere of trust, well-being and cooperation is absolutely crucial for a successful brainstorming session. Always try to choose a suitable moment, allow enough time, ensure refreshments, etc. You can carry out a warm-up at the beginning which can be a short brainstorming, for example:

- If we ourselves were to begin attending kindergarten tomorrow, what would we like it to be like?
- Where would children learn if there were no schools?

(Sources: Reports from creative thinking seminars of the International Journalists' Organization, and the "Health Education in Elementary School" by the author of this book)

Letter as an invitation to cooperate

We do not always have the possibility to meet everyone we want personally or in other cases, we want to save time. In such situations, a letter is a helpful tool which, in addition, has the advantage of being a piece of evidence on what we have really said and when. To ensure your letter will not remain unanswered, it is advisable to follow the foremost



principle of successful cooperation: if we want something, it is important to offer something in return.

You may have already thought of addressing the parents in your kindergarten with a letter informing them about the Healthy Kindergarten project and inviting them to cooperate in project development. This issue is dealt with in the "How to Write Your Own Healthy Kindergarten Project" workshops. On the following page you will find two examples of such an invitation letter.

Dear parents,

a child is a gift everyone loves. No doubt each parent strives to find ways to ensure that their children have a rewarding life.

Children are both a source of joy and worries and we often experience uncertainty whether what we do is really the best for them. We would be very happy to cooperate with you in our quest for improvement.

That is why we would like to invite you to participate in the "Healthy Kindergarten" project whose aim is to create conditions for well-being and health and education on a healthy lifestyle.

We cannot do it well without your assistance. That is why we would like to invite you to the meeting held at

where we can discuss all your views and ideas.

We look forward to talking to you.

Your kindergarten staff.

(Source: a workshop of the HK pilot group at the Kindergarten in Šlapanice held on 21/2 1996)

Dear mother, dear father,

some time ago we became acquainted with a new project which we would like to implement in your kindergarten. Its aim is to meet the natural needs of children in the best ways possible and lead them to a healthy lifestyle. In cooperation with you, we would like to create an environment where children would really feel comfortable.

You of course play an important role in this program. That is why we would like to introduce you to the project and listen to your comments, suggestions and ideas.

Let us invite you to an informal meeting over coffee held on

Wednesday 28 February 1996 at 4 p.m. in the "Rabbits" classroom.

In addition to the program, there will be a tasting of healthy meals prepared by our cooks. We look forward to seeing you.

Your kindergarten staff

(Source: Workshop of Healthy Kindergarten advisors /Group 4/ held on 20/2 1996 in Prague)



Finally, this is the letter that the HK team (the project guarantor) has sent to the heads of all Local Educational Authorities to support kindergartens that will be interested in participation in the project.

Dear Sir or Madam,

we would like to inform you about the existence and intentions of the Healthy Kindergarten project.

Recently, the Healthy Kindergarten team met with the Ministry of Education representative Mr. Kříž to negotiate the implementation of this nationally approved project in kindergartens in cooperation with Local Education Authorities in the Czech republic. In this letter, we would like to inform you about the current state of the project including events organized for the kindergarten within the implementation of the project. At the same time we would like to ask your Local Educational Authority to cooperate in a specific manner.

The Healthy Kindergarten model project was developed at the National Institute for Public Health (NIPH) as part of the National Program of Health Restoration and Promotion declared by the Government of the Czech Republic. The development was aided financially by the health promotion program of the Ministry of Public Health of the Czech Republic.

Anyone can get acquainted with the HK project in the *Healthy Kindergarten* book published in 1995 by the Portál publishing house. The book has received the note of approval by the Ministry of Education (No. 17147/95-24) as an educational material recommended for use in kindergartens.

The HK project is based on verified knowledge about the mutual interaction of physical, psychological and social health, on repeated experience that the prevention of diseases is more effective than their subsequent cure and on the presumption that bringing up resilient individuals is the best prevention of civilisational diseases and harmful, life damaging addictions. The sooner it is begun, the better.

That is why the aims, forms and methods of health promotion and education for healthy lifestyle in the HK project are focused on pre-school population who is the most sensitive to all environmental and educational influences. The project is based on wide collaboration among all people in the kindergarten as well as other partners outside school.

To achieve the aforementioned aims, we have established a body of lecturers and a network of regional advisors consisting of health and educational (i.e. kindergarten) experts in equal proportion. The NIPH trains these regional advisors to work with kindergartens in the area of health promotion. The training is funded from health care budgets. So far, 76 people have received the HK advisor certificate, covering 47 districts of the Czech Republic (list enclosed). After the training, the advisors are qualified to organize lectures, seminars, workshops and methodological consultations within the



HK project directly in their region. The events may be initiated by the kindergarten, but also by other subjects including Local Educational Authorities, as is the case in some regions already.

We would therefore like to ask you for cooperation in the sense of creating conditions for the regional advisors to organize educational activities enabling kindergartens to participate in the HK project. Our experience has been that any form of participation from Local Educational Authorities in these events works as significant support and encouragement for kindergarten teachers and headteachers in the region.

We firmly believe you will support kindergartens in your region joining the HK network. By doing so, you will contribute to the education of citizens who are capable of changing their behavior and living in a healthy way.

We look forward to our mutual cooperation.

Best regards,

Lumír Komárek, M.D. Head of the Health and Living Conditions Center Jaroslav Kříž NIPH Director



PART 4

Sources

Grothberg, E.: A Guide to Promoting Resilience in Children: Strengthening the Human Spirit. Haag, Bernard van Leer Foundation 1995.

Kovalik, S.: Integrated Thematic Instruction: A Model

Křivohlavý, J.: You and Me. / Já a ty. / Praha, Avicenum 1977.

Křivohlavý, J.: How We Can Understand Each Other Better. / Jak si navzájem lépe porozumíme. / Praha, Svoboda 1988.

Lotar, P.: On the Sense of Life - Life and Work of Albert Schweitzer. / O smyslu života - Ze života a dila Alberta Schweitzera. / Praha, Primus 1995.

Madsen, K.B.: Modern Theories of Motivation. / Moderní teorie motivace. / Praha, Academia 1979.

Mareš, J. - Křivohlavý, J.: Communication at School. / Komunikace ve škole. / Brno, Masaryk University 1995.

Matějček, Z.: What do Children Need Most? / Co děti nejvíce potřebují? / Praha, Portál 1994.

Matějček, Z.: Parents and Children. / Rodiče a děti. / Praha, Avicenum 1986.

NEMES (ed Havlínová, M.): How to Change and Develop Your Own School - On Individual School Projects. / Jak měnit a rozvíjet vlastní školu - o individuálních projektech škol. / Praha, Agentura STROM 1994.

Schweitzer, A.: Respect For Life. / Nauka úcty k životu. / Praha, DharmaGaia 1993.

Wondrák, E.: Albert Schweitzer and Lambarene. / Albert Schweitzer a Lambaréné. / Praha, Globe 1995.

Magazines, bulletins and other sources

Bartesová, I., Říha, P., Šmétková, J., Wasserbauer, S.: Zdravá škola - A Collaborate Health Promotion Project of the Basic School Březinova, Kindergarten Březinova and Regional Hygienic Institute in Jihlava. Basic School Březinova, Jihlava 1995.

Břízová, M.: The HK Project After Three Years of Its Existence. Ratolest Magazine, Nos. 2-4/95. Includes map and list of 94 participating schools.

Kopřiva, P.: Health Promotion at Elementary School. Appendix of the Health Promotion bulletin 3/1995. National Center for Health Promotion (NCHP) 1995.



Kopřiva, P.: What Our Pupils Experience and How They Behave. / Co prožívají a jak se chovají naši žáci. / Results of the 1st stage of the "Healthy School" research. Ratolest Magazine 4/94.

Mudra, M.: Content Analysis of the HK Projects. Ratolest Magazine 2/93, 4/93, 4/94 and 1/95.

Nováčková, J.: Basic Human Needs Versus School. / Základní lidské potřeby versus škola. / NEMES (Independent Interdisciplinary Group for the Transformation in Education. / 1993; also ed. by the Family and School magazine 1992-93.

Ratolest - special double issue on Healthy School projects of 12 schools. NCHP 1995.

Reports from Creative Thinking Workshops. International Journalist Organization. / Mezinárodní organizace novinářů. / Prague 1971.

Vencálková, E.: How to Develop your Own HK Project. A workshop outline for the individual need of the HK team. NIPH 1995.

Who is Who in the HK Project. / Kdo je kdo v projektu Zdravá mateřská škola. / - name list of authors, lecturers and regional advisors of the HK Project. Ratolest Magazine 1/96.

Young, I., Williams, T.: Healthy School: A Report of the Scottish Unit of Health Education and WHO; appendix of 1/1991 Health Promotion bulletin issued by the NCHP, Prague for the use of Czech elementary schools.



VOCABULARY

There is a list of vocabulary attached at the end of the Czech edition of this book containing more than 100 expressions from the fields of psychology, pedagogy and medicine used throughout the book as well as terminology relating to the HK project development. Brief definitions are attached to each expression. The vocabulary contains words like emotional disturbance, functional family, identity, educational alternative, integrity, role, self-control, self-perception, impressionability, vegetarianism or macrobiotics; in relation to project development, readers can find explanation of such terms as action plan, brainstorming, project framework, school analysis or workshop.

Sources

Blížkovský, B.: Systemic Pedagogy. / Systémová pedagogika. / Ostrava, Amosium servis 1992.

Edelgerger, L. et al.: Dictionary of Defectology. / Defektologický slovník. / Praha, SPN 1984.

Haller, J.: Pocket Dictionary of Loan Words. / Kapesní slovník cizích slov. / Praha, SPN 1956.

Hartl, P.: Dictionary of Psychology. / Psychologický slovník. / Praha, Budka 1994.

Nakonečný, M.: Outlines of Personality Psychology. / Základy psychologie osobnosti. / Praha, Management Press 1993.

Příhoda, V.: Ontogenesis of Human Psychology, vol.I, 4th edition. / Ontogeneze lidské psychiky, 1. díl. 4.vydání, / Praha, SPN 1977.

Říčan, P.: Personality Psychology. / Psychologie osobnosti. / Praha, Orbis 1972.

Singule, F.: Current Educational Trends and their Psychological Aspects. / Současné pedagogické směry a jejich psychologické souvislosti. / Praha, SPN 1992.

Trávníček, F.: Dictionary of Czech Language. / Slovník jazyka českého. / Fourth, revised and extended edition. Praha, Slovanské nakladatelství 1952.





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