

University of Southampton Research Repository
ePrints Soton

Copyright © and Moral Rights for this thesis are retained by the author and/or other copyright owners. A copy can be downloaded for personal non-commercial research or study, without prior permission or charge. This thesis cannot be reproduced or quoted extensively from without first obtaining permission in writing from the copyright holder/s. The content must not be changed in any way or sold commercially in any format or medium without the formal permission of the copyright holders.

When referring to this work, full bibliographic details including the author, title, awarding institution and date of the thesis must be given e.g.

AUTHOR (year of submission) "Full thesis title", University of Southampton, name of the University School or Department, PhD Thesis, pagination

UNIVERSITY OF SOUTHAMPTON

FACULTY OF LAW, ARTS AND SOCIAL SCIENCES

School of Education

The professional role of key persons using symbolic gesturing and their perspectives on its value in supporting the emotional relationship with infants in day nursery

By

Amanda Norman

Thesis for the degree of Doctorate in Education

September 2011

University of Southampton

ABSTRACT

FACULTY OF LAW, ARTS AND SOCIAL SCIENCES

Doctorate in Education

The professional role of key persons using symbolic gesturing and their perspectives on its value in supporting the emotional relationship with infants in day nursery.

By Amanda Norman

This thesis examined key persons' views about the effect of symbolic gesturing to positively influence the emotional relationships between themselves and the infants they care for in day nursery. Having reviewed the literature, this thesis builds on both the professional and emotional key persons' role with the infants in their care in nursery and how symbolic gesturing as an approach during interactions might enhance those attachments. Its originality is situated in the way it explores symbolic gesturing in the context of a day nursery from an emotional perspective rather than a communicative aid to develop infants' literacy skills. Using a case study approach, which employed biographical accounts of three key persons', observations and documentation their journey was documented as they used symbolic gesturing during a three month period. It considered what impact symbolic gesturing had on their practice and whether their emotional relationships with the infants they cared for were enhanced as a result of its implementation. The thematic analysis of the biographical journeys revealed symbolic gesturing was a valuable approach in enhancing emotional relationships with infants as long as it was implemented in a flexible way and its use was navigated by the key persons. The influence of symbolic gesturing was apparent in the key persons' changes of perceptions and reflections within the pre and post interviews and to a lesser extent from observational data. Documentation was used to contextualise the role of the key persons in a day nursery and more widely within local and national policy and legislation. The thesis concludes by making a number of recommendations about the use of symbolic gesturing for practice in day nurseries.

TABLE OF CONTENTS

Chapter 1: INTRODUCTION

1.1	Background to the research	1
1.2	Symbolic gesturing	2
1.3	Context of the study	4
1.4	Pilot study	5
1.5	Methodology	5
1.6	Outline of the thesis	6

CHAPTER 2: LITERATURE REVIEW

2.1	Introduction	8
2.2	Symbolic gesturing	
2.2.1	Derivations of symbolic gesturing and sign language	9
2.2.2	Variations of symbolic gesturing within signing systems	10
2.2.3	Symbolic gesturing and physiological development of the infant	10
2.2.4	Symbolic gesturing and enhancing communication between adult and infants	11
2.2.5	Concerns with symbolic gesturing	13
2.2.6	Benefits of symbolic gesturing	13
2.3	Symbolic gesturing and its value in supporting the emotional relationship between infant and carer	
2.3.1	Interactions between carer and infant	15
2.3.2	Communicating emotions through symbolic gesturing	18
2.3.3	The significance of the primary carer: attachments	19
2.3.4	The significance other	21
2.3.5	Social referencing	23
2.3.6	Leaving the primary carer	25
2.4	A nursery setting	26
2.4.1	The curriculum requirements for meeting infants' emotional needs	29

2.4.2 The key person and the EYFS (2008) framework	29
2.4.3 The professional key person	31
2.4.4 The process of key person building emotional relationships	33
2.5 The emotional labour of the key person	
2.5.1 Emotional management and the need for training and comprehension of the issue	34
2.5.2 Surface and deep acting: the authentic self	36
2.6 The contribution of symbolic gesturing to practice and a need for further research	
2.6.1 Further research	38
2.7 Chapter summary	39

CHAPTER 3: RESEARCH METHODS

3.1 Introduction	40
3.2 Rationale: Research paradigm and methodology	
3.2.1 The qualitative paradigm	41
3.2.2 The case study	43
3.3 The context of participants	
3.3.1 Sample selection and recruitment – caregiver participation	45
3.3.2 The key persons	46
3.3.3 Choice of infants observed	47
3.4 Methods of data collection	
3.4.1 Data collection procedures	47
3.4.2 Observations	49
3.4.3 Reflective journals	50
3.4.4 Documentation	51
3.5 Ethical issues	51
3.7 Data Analysis	54
3.8 Summary of chapter	55

CHAPTER 4: ANALYSIS AND DISCUSSION

4.1 Introduction

4.1.1 Review of data collection	56
4.1.2 An overview of the analysis	56
4.1.3 Accounts of the key persons contributions	58
4.2 Theme 1: Practitioners sense of self as key person using symbolic gesturing: roles and attributes	59
4.3 Theme 2: Interactions: emotional responses using symbolic gesturing	68
4.4 Theme 3: Intimate relationships using symbolic gesturing: recognition of attachment and connectivity	78
4.5 Theme 4: Practices: gesturing and symbolic gesturing	85
4.6 Theme 5: Potential barriers to symbolic gesturing	91
4.7 Concluding thoughts	
4.7.1 The themes	94

CHAPTER 5: CONCLUSION AND RECOMMENDATIONS

5.1 Introduction	97
5.2 Findings of the research	97
5.3 The conclusions drawn from the findings and how have they helped to answer the research questions	98
5.4 Limitations of the research	100
5.5 Implications for theory and practice	101
5.6 Further Research	103
5.7 Concluding Remarks	104

LIST OF REFERENCES

APPENDICES:

Appendix 1 Ethical letter

Appendix 2 Interview schedule

Appendix 3 Interview key questions

Appendix 4 Sample transcript

Appendix 5 Key person policy

Appendix 6 Achieving positive behaviour policy

Appendix 7 Job description

Appendix 8 interview consent

ABBREVIATIONS

ASL American Sign Language

BSL British Sign Language

DCSF The Department for Children Schools and Families

EYFS Early Years Foundation Stage

DfE Department for Education

KP Key Person

NLT National Literacy Trust

Ofsted Office for Standard in Education

RCSLT Royal College of Speech and Language Therapy

STATEMENT OF ORIGINAL AUTHORSHIP

I, Amanda Norman declare that the thesis entitled The professional role of key persons' using symbolic gesturing and their perspectives on its value in supporting the emotional relationship with infants in their care and the work presented in this thesis are both my own, and have been generated by me as a result of my own original research. I confirm that:

- This work was done wholly or mainly while in candidature for a research degree at this university
- Where any part of this thesis has previously been submitted for a degree or any other qualification at this university or any other institution, this has been clearly stated
- Where I have consulted the published work of others, this is always clearly attributed
- Where I have quoted from the work of other, the source is always given. With exception of such quotations, this thesis is entirely my own work
- I have acknowledged all main sources of help
- Where the thesis is based on work done by myself jointly with others, I have made clear exactly what was done by others and what I have contributed myself
- None of this work has been published before submission

Signed:

Date: 29 September 2011

Acknowledgements

I should like to thank those people who have supported me, in particular my supervisor Dr Jenny Byrne whose patience, guidance and encouragement made my journey a valuable and reflective experience. To my dear friend Michelle who was incredibly helpful and supportive at all times through my studies, providing a critical ear.

To my family, particularly my mother and her expertise, my husband Phil for his support and my two children Xavier and Pandora who gave a fresh perspective to my thinking around the subject area and studying in general.

Chapter 1: INTRODUCTION

1.1 Background to the research

The interest to pursue this research came from a personal experience of being exposed to symbolic gesturing from information provided by health visitors and attending baby signing classes. This interest led to a further investigation of the value of symbolic gesturing alongside additional signing systems. As a lecturer in care and education for over ten years, and recently qualifying as a play therapist, approaches to support the emotional relationship between professional and infant have been a particular personal and vocational focus of interest. Symbolic gesturing has gained increased public interest, but is under-researched in the UK, especially from an emotional perspective, and therefore this seemed to be a valuable and worthwhile area for investigation. During the time of the initial investigation two issues have presented themselves as worth pursuing. These were the researcher's own interest in the emotional interactions between infant and key persons' professional perspectives when using symbolic gesturing in day nursery, and secondly how symbolic gesturing could be employed to enhance the relationships between infant and key person (Acredolo and Goodwyn, 1988; Vallotton 2005). At the time of writing there have been significant and credible studies on practitioners working as a key carer responsible for looking after infants in the baby room of nurseries. This has culminated in recent understanding and interpreting how key persons are supported when putting this complex role into practice (Elfer, 1996; Goouch and Powell, 2010; Nutbrown and Page, 2008). The researcher's own interest into the different approaches employed to enhance the emotional relationship between key person and infant from a key person's perspective paved the way for an investigation into symbolic gesturing. In this study symbolic gesturing was carried out during a twelve week period in a day nursery. Symbolic gesturing was introduced to, and used alongside, everyday interactions. This study explored symbolic gesturing from a key person's viewpoint and whether it constituted a

valuable interactional approach in enhancing emotional relationships and could, therefore, be of benefit in developing attachments between infant and key person. Consequently this study differs from the predominant focus on literacy and language advancements associated with studies on symbolic gesturing by focusing on emotional aspects of the key person and infant relationship (Goodwyn and Acredolo, 1993; Garcia, 2005). Furthermore, what makes this research distinctive are practitioners working in day nursery to articulate the sense they make of their interactions using symbolic gesturing as a mode of communication to enhance emotional relationships. The use of symbolic gesturing is also considered in exploring the key persons' reflections of their role as care professionals and the implications for this in terms of their own emotional management and emotional labour (Elfer, 2006; Theodosius, 2008).

1.2 Symbolic gesturing

Symbolic gestures are naturally occurring gestures framed in a way so the consistently manipulated gestures of the hand represent something meaningful both to the infant and adult using them (Jones, 2010). Symbolic gesturing has emerged in the UK receiving a mixed view about its value (Howlett, Kirk and Pine, 2010). Symbolic gesturing or baby signing, as it is more commercially referred to, is generally studied from a language and literacy perspective. Little research exists about the effect on the emotional relationships of gesturing, particularly in childcare settings (Namy and Waxman, 1998). Furthermore, from a childcare practitioner's perspective, where the primary importance is to enable infants to form close attachments to one key practitioner/person there has been little research into approaches such as symbolic gesturing to aid emotional relationships (Vallotton, 2008). There has however been some exploratory research on the issues around the complexities of the emotional relationships between infant and practitioner in day nurseries (Elfer, 2007). Hopkin's study (1988) showed that staff actively constructed their daily tasks so as to avoid attachment. The study reported that this was done for a variety of reasons including a key person's own fears of attachment and then separation with the infant in their care, as well as managing their own emotional states and anxieties. This study explores some of these attachment issues from a

key person's perspective and how symbolic gesturing, as an interactional approach, could enhance the emotional relationship between key person and infant. Elfer's (2006) study concluded that the key person's professional role in a day nursery was complex and that establishing bonds were essential for infants to emotionally flourish. The key person role has become a legal requirement in every setting and the quality of relationships between them and the infants in their care has become an important consideration (Elfer, Goldschmeid and Sellek, 2003). Ways to develop and enhance the emotional relationship have been explored. Page (2007) explored the need for professional love of children in day care, and how the boundaries of personal to professional carer are meshed (Nutbrown and Page, 2008). Gerdhardt's (2004) discussed the importance of nurturing infants' emotions and its effect on physical and psychological growth, whilst Goouch and Powell's (2010) research examined the complexities of practitioners working with babies in the nursery. This research aims to consider whether symbolic gesturing is viewed by practitioners in their role as key person, as an appropriate and beneficial approach to enhance their emotional relationships with the infants in their care in order to develop attachment. Its originality lies in the way it explores, over a three month period, the experiences of key persons and the impact symbolic gesturing had on their practices. It is from this context that the two questions central to the research project emerged. These are:

- Does the use of symbolic gesturing facilitate key persons' ability to reflect on their professional role when considering the emotional interactions with the infants in nursery?
- Is symbolic gesturing a valuable approach to enhance the key person/ infant emotional relationship and therefore effect attachment?

In attempting to answer these questions it is hoped this exploration will add to the current debate on the value of symbolic gesturing. The early use of symbolic gesturing with infants has shown an increase in their literacy skills (Acredolo and Goodwyn, 1996). More recently in the UK its potential value as an approach for children deemed as being at significant risk of language delay has been explored (Howlett, Kirk and Pine, 2010). Additional studies have also focused upon symbolic gesturing as supporting those whose second language is English (Jones, 2010; Marcus, 2010). This study therefore attempts to build upon the little that is known

about how symbolic gesturing could enhance the emotional relationship between key persons and infants.

1.3 Context of the study

The study was carried out in a day nursery in the South of England. The thirty place nursery setting is Ofsted registered and meets national standards of care and education within the Early Years Foundation Stage (EYFS, 2008). It employs ten full-time members of staff with varied qualifications and experience that enable them to care and educate the children they look after. Each member of staff has responsibility for a small group of key children, alongside additional roles such as, behaviour co-ordinator or first aider within the setting. The children at the nursery were organised into three separate groups according to their age. The age groups were from birth and two years, between two and three years and three to four years. Each group followed the curriculum of the Early Years Foundation Stage (EYFS) (DFES, 2003; DCSF, 2008) within a base room where they were cared for. This study focused upon three participants in their role as key person, who cared for children between birth and two years within the nursery: the infants. The term infant in this study describes those children between the ages of birth to two years old. At the time of writing, projects focusing on practitioners as key person working in the infant rooms have emerged across the UK which encourages networking amongst those working with infants. Some of the projects have highlighted requests from key persons for more support and training to develop relationships with infants (Powell, 2009). Symbolic gesturing was an approach that was therefore considered valuable to investigate further. Symbolic gesturing is still an emerging phenomenon in the UK, although its popularity has grown and programmes such as *Sing and Sign* have developed nationally with classes held in local communities (Felix, 2009).

1.4 Pilot Study

An initial survey was carried out to inform the main study about practitioners' views of symbolic gesturing. The practitioners were from across the South of England and

were all studying for a higher degree. Forty-two surveys were completed. All those who completed the survey were in senior and/or management positions in a variety of early years settings. The responses showed that the majority had heard about symbolic gesturing, but no-one was implementing it as part of practice. Responses indicated that symbolic gesturing could be an effective approach for key persons to use in enhancing infant relationships.

1.5 Methodology

In studies on symbolic gesturing, which have employed statistical rating scales, there have been claims that literacy levels in young children have been enhanced through the use of gestures (Goodwyn and Acredolo, 1993). In this study the emphasis, however, was not upon measuring how many symbolic gestures were used and reciprocated to determine the quality of a relationship. Rather, this study has taken a qualitative approach and focused on key persons' views about symbolic gesturing and if they thought it could enhance relationships with infants, how they came to their conclusions and why they thought what they did (Miller, 1999; Glaser and Strauss, 1999). Therefore, this study aimed to develop and contribute to the previous research into symbolic gesturing, from a key person's perspective with those studies that focused upon emotional states of pre-verbal children (Vallotton, 2008). A case study approach was chosen for this study as the most appropriate means of collecting the necessary data in a manageable and valid manner. The value of this approach was its process in determining the 'how' and the 'why' of the research focus (Yin, 2009).

Data was collected during a three-month period in 2009 using semi-structured interviews, observations, reflective journals, and policy documents. Three key persons were interviewed pre and post-introduction of symbolic gesturing, Observations were carried out by the researcher, and relevant documentation was collated. Emerging themes that occurred within the semi-structured interviews with supporting data from observations, journals and documentation were analysed, and together this data helped to answer the research questions posed (Goodson and Sikes, 2001; Goodley, Lawthorn, Clough and Moore 2004).

1.6 Outline of the thesis

The thesis is organised into a series of chapters. Chapter 1 has described the context in which the research project was conceived, planned and executed. It also provided a justification for the research and outlines the two key research questions.

Chapter 2 explores selected literature that is pertinent to the study. It considers the definitions of symbolic gesturing and describes some of the most influential theories and models in the field of emotional interactions and attachment. It examines the complexity of the key person role and the tensions between professionally caring for infants and emotionally investing in relationships with these infants. It then provides a critique for how symbolic gesturing could be an approach to enhance the emotional relationship between key person and infant that may lead to attachment.

Chapter 3 provides a rationale for selecting a case study approach as a framework for this biographical research. It considers the merits and potential difficulties of using interviews, observations, journals and other sources of data. It also describes the ethical implications in carrying out such a study.

Chapter 4 presents an analysis and discussion of the data. It examines the data primarily from the interview transcripts and relates this to the literature. It considers the influence of symbolic gesturing and the themes that emerged. The themes include the role of the key person and the emotional interactions between the infants they care for. This led to consideration and reflection from the participants in their role as key person about how symbolic gesturing could influence attachments. The chapter then considers the significance and value of symbolic gesturing compared to naturally occurring gestures and the potential barriers to employing symbolic gesturing in a day nursery.

Chapter 5 offers a number of conclusions about each of the research questions and considers the implications that these findings have for theory, policy and practice. It reflects on the limitations of the research presented in this thesis and points to areas where future research is worthwhile and desirable in the field of symbolic gesturing.

CHAPTER 2: LITERATURE REVIEW

2.1 Introduction

As a development process, naturally occurring gestures are interventional and communicative, being pre-verbal infants' attempts to share meanings with others (Wenger and Kaplan, 1963). Pre-verbal infants are therefore considered capable of learning and inventing gestures, both naturally occurring as well as a symbolic mode of communication (Acredolo and Goodwyn, 1996; Garcia, 2005). This chapter discusses several research studies that consider symbolic gesturing as a way of communicating to enhance the emotional interactions between carer and infant relationships. It also explores why symbolic gesturing has come under some debate regarding its value and use (Namy and Waxman, 1998; Vallotton, 2008). Consideration of interactive, emotional responses between carer and infant in their relationship is discussed to highlight one of the complex and challenging aspects of the role key person's face when looking after young children in day nurseries. The chapter then outlines a number of influential studies and theories in relation to the professional role of the key using symbolic gesturing and the development of emotional relationships between carer and infant. The final part of the chapter presents an examination of the context of the key person's professional life in a day nursery; including the complexities of their employment when supporting the infant's emotional well being. How symbolic gesturing could be influential in enhancing the professional and emotional relationship between key person and infant concludes the chapter (Briant, 2000).

2.2 Symbolic gesturing

2.2.1 Derivations of symbolic gesturing and sign language

Symbolic gesturing is regarded as consigning symbolic meanings to the naturally occurring gestures pre-verbal infants make when they begin to communicate (McNeil, Alibali and Evans, 2000). The symbolic representations are employed consistently so that infants and adults can meaningfully communicate in a similar manner to conventional sign language. Conventional sign language has predominately been used to aid communication with individuals who have a hearing impairment or an additional language (Brereton, 2008). Sign language is the term used to describe hand shape movement and placement to represent a word or context (Edmunds and Kupprinski, 2006). The use of signing dates back to the nineteenth century and aimed to improve children's vocabulary and language development, particularly with those having a hearing impairment (Daniels, 1994). Throughout the nineteenth century, sign language was considered a useful support system to help children to read, spell and write, particularly with those who otherwise had difficulties communicating. However, signing as an independent language became passé during much of the twentieth century, with lip reading being predominantly used by those with a hearing impairment as way to communicate (Brereton, 2008). In the 1960s, signing began to be considered part of an individual's natural language repertoire again (Daniels, 2004). This assumed that speech and language could be separated and signing can form part of language equivalent to speech (Brereton, 2008). The appreciation of its diversity with hearing children has led signing to become a legitimate language in parallel to speech development and thus aiding speech. Infants naturally begin to gesture and sign as a way to fulfil their daily communication needs (Daniels, 2001). Therefore, signing referred to as symbolic gesturing, when used with infants, enhances and enriches the communicative language base and contributes to infant development of motor ability and visual perception (Barnhardt, 2006; Bretherton and Bleeghly, 1982).

2.2.2. Variations of symbolic gesturing within signing systems

Similar to the variety of languages one encounters, there is a range of signing systems. The specific signing gestures may differ in hand movement depending on the origin of the signs. These include American Sign Language (ASL), British Sign Language (BSL) where grammar function is included, and Makaton, focusing upon whole words. The infant-orientated programmes, with pre-verbal children, including *Sing and Sign* (Felix, 2009) and *learn2sign* (2010), don't include grammar function in their systems. Therefore, it is the quality and meaning of interactions and communication that is the focus of symbolic gesturing rather than the grammatical development of sign language (Barnhardt, 2006). The infant orientated programmes using symbolic gesturing are discussed in this study.

2.2.3 Symbolic gesturing and physiological development of the infant

Gesturing of all forms has been considered another way to enhance communication and language development with pre-verbal infants (Acredolo and Goodwyn, 1996; Acredolo and Goodwyn, 1988; Howlett, Kirk and Pine, 2010; Johnston, Durieux and Bloom, 2005). At four to six months, infants make babbling sounds and begin to make vowel sounds. Pre-verbal babies practice sounds, rhythms and intonations of language, as well as using body language and facial expressions to communicate. At six to twelve months, a combination of non-specific hand gestures and intentional motor actions are used as communicational tools, alongside verbal communication (Bates, 1976; Boyatzis and Watson, 1993; Vallotton, 2009). Symbolic gesturing at approximately six to twelve months is therefore perceived as one form of interaction that could be enhanced between carer and infant, alongside the natural development of gestures, such as pointing (Kelly and Church, 1998). With the hand gestures already being evident, symbolic gesturing puts meaning to them and provides a frame for the gestures to be used in creative ways so infants and adults can effectively communicate to each other through shared meanings (Green, 2006; Jarvis, 2008; Kirk, Lufkin and Messer, 2004; Werner and Kaplan, 1963). This may begin at approximately seven months when the muscles in the hand are sufficiently formed to make gestures. Therefore, naturally occurring gestures are considered part of typical development as the dexterity in the infant's hand develops and they are trying to communicate non-verbally about their needs (Goldin-Meadow, Goodrich, Sauer, and Iverson, 2007). Symbolic gesturing frames these naturally

occurring gestures in a meaningful way so the consistently manipulated gestures of the hand represent something both to the infant and adult using them (Jones, 2010).

2.2.4 Symbolic gesturing and enhancing communication between adult and infant

Symbolic gesturing has been perceived to have made a positive contribution to the use of communication and expressive language development in hearing nursery school children (Ellison, 1982; Goldin- Meadow and Singer, 2003). Daniels' (1994) longitudinal study found the addition of signing in the pre-kindergarten curriculum increases hearing children's receptive English vocabulary (Daniels, 2001). Signing can therefore assist in scaffolding children's comprehension of spoken language by using reinforcing gestures (Barnes 1995; Johnstone, Durieux- Smith and Bloom, 2005). Daniels (2001) also found children receiving sign language scored significantly higher than those who had not received any signing input. Acredolo and Goodwyn (1985) supported this claim and concluded that the infants they studied spontaneously developed thirteen symbolic gestures. Taking this further in a longitudinal study of nine months in 1988 - including sixteen children between eleven and twenty months - they investigated the age onset of gestures and first spoken words when symbolic gesturing was introduced. They concluded the age of onset for object gestures and request gestures were used between twelve and fourteen months. These results support other findings that indicate symbolic gesturing forms part of early language development (Legere, 2008; Acredolo and Goodwyn, 1988). A study on the effects of American Sign Language (ASL) as an early intervention on hearing children's pre-literacy skills found that it also had a positive impact in encouraging strong pre-literacy skills in young hearing children (Prevatte, 2005). The study concluded that typical hearing children had larger vocabularies, developed greater self-esteem and increased phonemic awareness and spelling skills as a result of the intervention. In another supporting study, Lawrence (2001) similarly found that children acquired larger vocabulary than expected when symbolic gestures were introduced. The symbolic gestures were introduced around eight months of age with the core ones being:

- more
- eat

- milk
- thank you
- all done

The benefits of symbolic gestures included the facilitation of children's communication skills as well as a reduction of child frustration, and an increase in caregiver/child enjoyment and caregiver/child bonding (cited in Prevatte, 2005). Prevatte, (2005) found that when observing symbolic gesturing a) children were able to express their thoughts and needs that would have previously gone undetected, b) children expressed emotions at a much earlier age and c) there was an intimate bond between carer and infant. Signing was therefore considered to promote a deeper level of interaction because carers automatically adopted positive interaction strategies, such as following the child's focus of interest, making eye contact, speaking slowly, and using simple key words when signing was used (Prevatte, 2005; Vallotton, 2010). Acredolo and Goodwyn (1992) indicated that children who symbolically gestured had carers who were less frustrated, carers communicated more to their infants and there was an enriched relationship between them. These findings indicate symbolic gesturing makes a positive contribution to interaction and development of emotional relationships (Bonvillan, Orlansky and Novack, 1983). However there have been concerns about symbolic gesturing and how it has been promoted in the community as an approach to advance infants' speech (Doherty-Sneddon, 2008).

2.2.5 Concerns with symbolic gesturing

One of the significant concerns is that using symbolic gestures could be used instead of talking and therefore become detrimental to speech development. This was raised by the Royal College of Speech and Language Therapists (RCSLT) whose stance on symbolic gesturing highlights that the use of symbolic gesturing does not replace and take priority over the needs for parents to talk to their infants. They considered that although symbolic gesturing was perceived by parents as a way of bonding, there are arguably more suitable ways in which parents can

stimulate communication development (Doherty-Sneddon, 2008). However it is argued that naturally occurring gesturing is considered part of infant development and therefore symbolic gesturing is perceived as complementary, alongside talking to infants, as enhancing communication and speech (Goldin- Meadow 1998; McNeil, Alibali and Evans, 2000; Pizer, Walters and Meier, 2007; Rowe and Goldin-Meadow, 2008). This was evident in a study where interaction was low and infants were deemed at most risk of language delay. Parental use of symbolic gesturing increased mother, infant interaction and increased their motivation to communicate with their infants (Pine, 2010). Therefore symbolic gesturing enhanced both interaction and communication (Bonvillian, Orlansky and Novack, 1983; Brereton, 2008; Woolfe, 2007).

2.2.6 Benefits of symbolic gesturing

Symbolic gesturing, coined baby signing, was popularised in the USA by Garcia (1970) and Acredolo and Goodwyn (1980). Acredolo and Goodwyn (1980) initially researched symbolic gesturing as a result of Acredolo's daughter being observed inventing gestures for objects in her environment at approximately one year old; thus communicating her needs before she was able to verbally articulate them (Acredolo and Goodwyn, 1985). Garcia (1970), an interpreter, was also intrigued that the infants of his hearing impaired friends were rapidly becoming sign language experts at around nine months and their communication was more advanced compared to those who were not signing (Garcia, 2005). Similarly, two case studies involving twelve hearing children of hearing impaired parents using American Sign Language concluded that the infants and children typically attained milestones in language development and understanding several months in advance of those who only used speech (Holmes and Holmes, 1980). Taking this further Garcia (2005) began to use American Sign Language (ASL) for hearing infants of hearing parents with the result that infants could develop pre-speech much earlier and communicate their needs earlier than those not exposed to signing.

Acredolo and Goodwyn's (1988) longitudinal research studied the impact of symbolic gesturing with infants compared to those who did not symbolically gesture, and considered how infants' signing affected their linguistic and intellectual development when they were older. They were able to identify the progress of children at ages

two, three and eight years old. The study began by comparing three groups of eleven month old infants, these were:

- Group 1 – parents asked to encourage symbolic gesturing alongside speech when interacting.
- Group 2 – parents were to focus on naming things – verbally – for their baby
- Group 3 – parents had no specific instruction at all.

Infants underwent a language assessment at regular intervals up to the age of three and were followed up again at eight years old. The initial results showed that the children in Group 1 were more advanced and they spoke in sentences earlier than the non-signers. At three years of age, the children who symbolically gestured had language skills normally expected of four year olds. At age eight, the children who had used symbolic gestures scored significantly higher on the IQ test than those who didn't symbolically gesture. Acredolo and Goodwyn concluded, after a further period of research, that infants and children who symbolically gestured out-performed those who didn't in many areas of cognition and language development (Goodwyn and Adredolo, 1993, 2000; Jarvis, 2008). Symbolic gesturing also facilitated the integration of the infants into their cultural world of communication in developing socially appropriate behaviour. Ochs and Schieffelin (1984) found that when symbolic gestures were promoted, for example using request signs to replace pointing or protesting, understanding and naming items improved. Daniels (2001) also found symbolic gesturing with pre-schoolers improved children's reading ability and spelling proficiency, as well as their self-esteem and comfort with expressing emotions as they developed. The multi-faceted ways of communicating and developing a diverse language to enhance emotional responsiveness is therefore an empowering realisation (Barnes, 1995). Human interactions depend upon a variety of forms of communication and gesturing; and therefore symbolic gesturing can potentially lead to more meaningful relationships. For example, Brereton's study (2008) illustrated that there were many instances where the kindergarten child, although able to speak, was too distressed to speak. The strong emotions the children felt made it difficult for them to verbally communicate and articulate the message they were trying to manage and convey. However, through learning gesture they were able to communicate to the adults effectively during moments of

intense emotion and be understood which reduced their frustration and anxieties. Brereton's study provides the potential for understanding how gesturing could enhance and support communication during times of intense emotions frequently observed in infants. Therefore, symbolic gesturing may lead to enhanced emotional relationships between carer and infant that are vital for the successful psychological development of the infant.

2.3 Symbolic gesturing and its value in supporting the emotional relationship between infant and carer

2.3.1 Interactions between carer and infant

An appreciation of the complexities of interactions between carers and infants is necessary in examining the value of symbolic gesturing to enhance their emotional relationship. The close relationship between carer and infant in which infants experience the world in physical and emotional safety is known as intersubjectivity. Intersubjectivity was first described as the meshing that occurs between caregiver and infant, with the caregiver allowing an infant to be introduced into their understandings of the society and culture they exist in (Anning and Edwards, 2006). It is considered as a meeting of minds when one person brings another into their culture. It demands considerable attention to the emotional state of the infant, and the adult needs to gradually tune into the infant's way of experiencing the world (Hopkins, 1988).

Trevarthan (1992) considered infants are born with the readiness to know another human and engage with them. He illustrated that interactions between carers can be mutual, with infants taking the lead within the interaction and not simply responding to their carer's behaviour (cited in Meil and Dallos, 2005). Trevarthen and Murray (1993) describe this mutual interaction between infant and carer as turn taking. Through turn taking the carer is able to adapt their interactive behaviour to the rhythms of their infant and encourage the infant to lead the interaction (cited in Macleod-Brudenell and Kay, 2008; Degtardi and Davis, 2008). These early exchanges between infant and carer have been termed proto-conversations. As the term suggests, the patterns of turn taking include mutual attention, changes in

movement, smiling and so on, and these early interactions have been regarded as embodying the fundamentals of the relationship and the communication between carer and infant (Meil and Dallos, 2005). Studies have revealed when infants take the lead in the interaction but then fail to receive a response from the adult they lapse into silence (Murray and Andrews, 2005). The results confirm infants need to get adult attention in order to interact with them and communicate (Brazelton, 1990; Davis and Wallbridge, 1991). Brazelton (1990) explored whether particular types of early interactions between mother and infant led to the development of relationships. He videotaped the interaction that occurred between them and initially coded the behaviours of the mother and infant by a scoring method of vocalisations and gestures. The gestures that occurred informed how the reciprocal relationship between mother and infant is interplayed and the role of the infant within the interaction. In order to make sense of the mother/child behaviour over a period of time, Brazelton (1990) looked in terms of sequences of joint action - the notion of sequences of mutually creating actions. This concept of joint action involves regarding the behaviours of the partners as contingent and reciprocal so rather than simply asking who started a sequence, or who controlled it the focus was on how each continually influences the other. This is significant in relation to how symbolic gesturing could be part of the development of a reciprocal relationship using meaningful cues to provide an enriched relationship between carer and infant when interacting and communicating together. Bradley (1981) considered it was the quality of the relationship, not just quantity of arousal and stimulation that was of crucial importance in enabling the infant to develop emotionally, and for attachment to occur (cited in Meill and Dallos, 2005). From birth, the infant is not only able to respond to its mother's voice, movements, gaze, smiles and so on, but is also able to actively influence her behaviour. Goldin-Meadow and Singer (2003) hypothesised that symbolic gestures elicited responses from the mother, which in turn facilitated development of communication. Communication was, therefore, a collaborative interactive process. Infants are essentially social beings, driven by their own needs to live and learn in a culture and to be a part of that culture by constructing meaning with others (Murray and Andrews, 2000; Wood, 1997). Therefore, interactions have a powerful influence on emotions and can be observed through the display of pleasure and excitement. When the inability to exert influence or establish mutual, synchronized interaction, negative emotions, such as frustration and anxiety, are

generated and observed in the infant. Infants who have a rich and concentrated experience of focused attention - as when symbolically gestured to by the carer - appear to develop more rapidly, including their social and emotional development.

Fivas-Depeursinge (1991) believed that interactions can fall into categories such as mutual gazing into each other's face and then using gestures. He considered how interactions between carer and infant change over time and have the power to influence the relationship. Similar to Brazelton's (1990) studies he found the relationship between carer and infant became problematic when the infant was unsuccessful in developing a sense of control and autonomy when the carer was emotionally withdrawn. He found when the child was able to direct the change of the responsiveness of their caregiver, and share in leading the interaction autonomy and independence were fostered (cited in Meil and Dallos, 2005). Vallotton (2009) studied the autonomy of the infant in the development of the emotional relationship between infant and carer through the use of symbolic gesturing. Twenty two pre-verbal infants were observed between five and twenty eight months. The process of symbolic gesturing was modelled by adults through everyday actions. Infants were able to elicit sophisticated gestures and had the ability to communicate their emotions, including some not initiated by the adult gestures. As a therapeutic communication tool then, symbolic gesturing may help infants and children express emotions, participate in conversations about emotions and construct their own understanding of internal states, and therefore become more autonomous.

The key is to provide an enabling environment for adults to create opportunities to talk and sign with infants (Daniels, 1996). Playful use of sounds initiated by the infant could be a means of drawing in and involving the adult. Consequently, the use of symbolic gesturing has a purposeful part to engage in the infant's world and draws in both adult and infant. When employing symbolic gesturing, the overall consideration is that the responses of visual cues in conjunction with sound are crucial, and with successful responses, interactions and relationships will be enhanced (Macleod-Brudenell and Kay, 2008).

2.3.2 Communicating emotions through symbolic gesturing

There are many forms of communication that infants may use (Gopnik, 2009; Rinaldi, 2006). These include facial expressions, body language, gestures, and

speech. Malaguzzi referred to these forms as the 'hundred languages' of children (Edwards, 1998). An understanding of the many languages young children use enables the practitioner to listen to and communicate with infants in order to gain an appreciation and better understanding of their emotions when interacting (Meier and Newport, 1990). Listening and recognising infants' emotions therefore becomes more than a simple interactional engagement (Rinaldi, 2006). It requires reflections on the part of the practitioner about their own emotional state and the communicative approaches they use. In this study it is using symbolic gesturing, to consider relationships can be enhanced with infants in their care (Clarke, Kjholt and Moss, 2005; Clark and Moss, 2001).

2.3.3 The significance of the primary carer: attachments

Attachment is the strong affection infants feel for key people in their lives which leads to feelings of pleasure through interaction with them and being comforted by their nearness during times of stress (Bowlby, 1997). These relationships are considered prototypes for later socialisation and continue to exert influences throughout the life span (Berk, 1989).

Bowlby (1969) theorised infants had an in-built bias to form one main attachment to one carer, termed monotropism. He concluded subsequent attachments would be of minor significance and it is the one primary attachment that is most influential. However, more recent studies have concluded infants can form up to five attachments at any one time although all agree good quality relationships are advantageous (Lamb, Thompson, Gardner, Charnov and Estes, 1984; Schaffer and Emerson, 1964). What is considered is the importance of the quality between infant and key carers, the consistency of care and how large numbers of carers can disrupt the formation of positive relationships (Schaffer, 1996). To understand what is significant about attachment between carer and infant is to understand what is meant by attachment. Attachment and relationships cannot be directly observed but inferred through the joint behaviours occurring between the carer and infant. However,

observing behaviours to define attachments is considered too simplistic: it doesn't account for the personalities, the temperaments and the warmth of the relationship (Braidley, 1989; Goldschmeid and Jackson, 1994; Schaffer, 1996). To appreciate the complexities of the emotional relationship between the key person and infant, an overview of the psychological perspectives and developments of attachment need to be considered when exploring symbolic gesturing. Attachment is not a one-off event, but a developmental process which occurs as a function of the developing relationships between infants and young children and their caregivers (Barnes, 1995; Cooper and Roth, 2003). Behaviourist theory accorded central importance to the role of feeding in a relationship. This was overturned by Harlow and Zimmerman (1959) with an experiment of rhesus monkeys whereby the infant monkey preferred the cuddle cloth monkey rather than the wired meshed monkey that possessed the food. Winnicott (1986) also referred to transitional objects, where the infants made preference to a cuddle cloth as a form of security rather than food as the basis for their comfort (Winnicott, 1986). Another aspect of the behaviourist theory, operant conditioning, provided a further perspective in how attachment was formed and the infant's social responsiveness was developed. If the mother reciprocates smiles and vocalisations, then this positively reinforces the baby's social engagement. This is undoubtedly an aspect which impacts on the emotional relationship, but on its own is perceived as too crude an explanation of the attached bond. The psychoanalytical theory propounded another perspective to the theoretical concept of attachment, and considered the close association between physical and psychological needs (Berk, 1989). When the mother satisfies the infant's urgent needs, such as hunger, but is also actively sensitive, loving and caring, the infant gains a sense of trust and confidence and their physical and emotional needs will be satisfied, leading to attachments being formed (Erikson, 1963; Maslow 1968; Murray and Andrews, 2000). The psychoanalytical perspective emphasises the quality of the mother/infant interaction and the impact this relationship has on the infant's development as they mature socially and emotionally. A further perspective, having commonalities to the psychoanalytical theory, is known as the ethological theory. This perspective also considers attachment as essential for the successful emotional development of the infant. The central feature of this theory is that infants, like animals, have in-built behaviours which elicit parental care and, as a result, increase the baby's chances of survival. This repertoire of attachment-related behaviours takes the form of crying,

smiling, clinging, sucking and gesturing. The infant looks to the adult for reassurance and if provided with a secure base they will develop and gain independence (Berk, 1989). The ethological theory, developed by Bowlby (2005), is considered relevant to this study and is the most current and widely accepted view of attachment today (Barnes, 1995). It emphasises the infant as being biologically prepared to be an active contributor in the attachment relationship from the beginning. Symbolic gesturing is therefore one approach the carer can use to enhance individual attention by promoting the infant as an active contributor to the relationship (Bowlby, 2005, Degtardi and Davis, 2008). However, in the UK there is a view that individualised care and close one-to-one care can result in the infant becoming less independent and lacking the social skills to develop wider relationships. Peer relationships and developing attachments with several adults, rather than forming one-to-one attachments, are thought to be beneficial for infant development (David, Goouch, Powell, and Abbott, 1996; Elfer, 2007). Belsky, Burchinal, McCartney, Vandell, Clarke-Stewart, and Owen (2007) also argue that attachment is not a single or stable relationship but that it changes over time and is context-dependent. Similarly, Dunn (1993) argues that mothers display different levels of bonding depending on the age of the infant, and as the infant's independence develops in the first two years the intensity of the attachment lessens. However, although attachment is conceived as being fluid, particularly after the first year, one-to-one key attachments remain advantageous in emotional development (Barnes, 1995). Symbolic gesturing is therefore considered an approach where the individual interactions could create more meaningful relationships and attachments. The infant develops more complex understanding of the adults that look after them and they begin to make assessments about the environmental situation including their own role and the adult's role within it (Cooper and Roth, 2003, Goleman, 1995). This is significant when considering how symbolic gesturing could be a way for the key person to convey a given situation and consciously make adjustments to their own body language through signing when interacting with an infant.

2.3.4 The significant other

To appreciate how symbolic gesturing enhances the emotional interactions between key persons, as a significant other, and infants in day nursery, as well as how

symbolic gesturing evokes the key person's emotional responsiveness, a consideration of their role as secondary carer needs to be examined. This includes why, in some instances, the relationship doesn't thrive emotionally and what the barriers are that cause young infants to receive less than good quality emotional interactions and responses from their carers outside the home. Nickel and Milne (1992) suggested that development of social and emotional competence is actually a lifelong process beginning in the first few weeks of life and is a process that can be supported by secondary carers beyond parents. (cited in Siraj Blatchford, 2000). As more infants attend nursery care outside the family home the importance of the secondary carer relationship is equally significant to the primary carer. Belsky and Roxine (1988) concluded infants in group care are more likely to develop insecure attachments to the mother if the child has been in day care before six months of age, and if they are attending for more than twenty hours per week. This assertion has implications for the type of care nurseries provide for infants (Mooney, 2010; Smith, Cowie and Blades, 2005). Similarly Baydar and Brooks-Gunn (1991) studied a thousand families and concluded if mothers started work in the first year of their infant's life, the infant receiving care outside of the home was more likely to have behavioural difficulties or poor intellectual development. Nurseries with a lower staff/infant ratio and a higher turnover of staff do limit the ability of the infant to form attachments and may be why emotional bonds are less evident in these circumstances (Elfer, Goldschmeid and Sellek, 2003). Schaffer (1996) believed separation from the mother need not result in insecurely attached infants. They may benefit socially if the stability and quality of care received is of a high quality, with close bonds being established and the carer establishing an emotionally rich relationship with the infant (Macleod-Brudenell, 2004). Affection and attachment are therefore vital for young children's well-being. Fundamental to infant's healthy development are the parts adults play in their lives and their development. Positive and close relationships are crucial. Vorria (2003) examined the quality of attachment and showed how infant's capacity for attachment was related to their cognitive and psychosocial development, their behaviour, temperament and the sensitivity of their caregivers. Those securely attached to carers outside of the family home showed more frequent positive affect and social behaviour, and initiated more frequent interaction with their caregivers (cited in Nutbrown and Page, 2008). Therefore, for those infants in day care, the secondary carers were regarded as equally significant

as the primary carer in promoting healthy emotional development. However, this was only comparable to the primary care giver when the quality of care was consistently good enough with one-to-one opportunities available (Davis and Wallbridge, 1991). It is these individualised opportunities, by using symbolic gesturing to enhance the emotional responsiveness of the key person and infant that is of interest in this study.

2.3.5 Social referencing

At approximately nine months, an infant will look at an object and then at the mother/main carer or familiar person present before taking action. The infant will seek cues from the other person's expressions or behaviour, such as gesture, that will guide their own appraisal of the situation. Therefore, the response is not just child perception but also the reaction of others. Social referencing provides an avenue for the communication of feeling, particularly useful in situations of uncertainty. It is an active mental process to make sense of the world and uses trusted adults (Schaffer, 1985). The infant remains within the visual field of the adult they trust to retain sight of facial and gestural cues, and adults are then a source of emotional information during uncertain situations (Barnes, 1995; Goldschmeid and Jackson, 1994; Goleman, 1995). Symbolic gesturing is particularly valuable then in conveying messages alongside speech so the infant is able to read the given situation and make an assessment of it. With infants, this engagement is directed to the main carer/key person only, but by about two years, indirect social references are established with the infant being able to identify emotional cues by watching the behaviour of other carers/key persons with whom they are not necessarily directly engaged with (Berk, 1989). Using symbolic gesturing with infants enables these cues to be developed and - through signing the infant can ascertain different forms of communication, expectations and understanding of a given situation as a result of how their carer and peers respond. This is particularly helpful in group care where the key person is conveying a message to a number of infants and the infants themselves are consistently assessing their environment and occurrences between themselves, their peers and the key persons involved in their care. Infants develop internalised working models of relationships which can change as a result of experience, and in the light of new information they receive, in making assessments

to how individuals relate to one another (Bowlby, 2005; Holmes, 2001; Steiner, 1999). The relationship between the key person and infant therefore primarily includes the key person supporting changes with the infant by creating external experiences, and providing a secure base (Dryden, 2005). The attachments formed occur in a developmental sequence and are dependent upon how the emotional relationship is shared with the key persons. How the relationship is reciprocal and provides the foundation for future relationships when successful attachment is formed is indicated below:

- Birth to three months: pre-attachments are formed and are indiscriminate
- Six to eight months : attachment in the making/preferences begin to be made to adult carers
- Eight to eighteen months: attachments are formed and established with key carers. When separation occurs from key carers anxiety and distress is displayed
- Eighteen months to two years: formation of a reciprocal relationship

(Schaffer, 1996: 73)

When an infant is separated from the carer with whom they have established an attachment they may experience apprehension, fretfulness and a feeling of abandonment. Bowlby (1950) called these feelings separation anxiety. Bowlby considered forming attachments and then being separated by their main carers for short periods was an inevitable part of an infant's emotional development. He believed the anxiety could be greatly reduced if the carer handled the separation sensitively and positively (Bowlby, 2005). This could be through talking and gesturing to the infant about the given situation as a means to supporting the infant's emotions (Bruner, 1983; Green, 2006). If the infant is not supported through their feelings, Bowlby believed this could have a lasting impact on their emotional state as an adult (Gellner, 1993). Schaffer and Emerson (1964) supported Bowlby in that babies form attachments to those adults who are aware of their social needs and interact with them in a variety of forms, including eye contact, touch and gesturing, rather than those who largely ignore them except when attending to care routines (cited in Bruner, 1983). Symbolic gesturing can therefore be one approach where the

deliberate engagement provides the opportunities for carers to engage with individual infants throughout the day rather at specific times.

2.3.6 Leaving the primary carer

When a child leaves their primary carer for the first time it can be very distressing for both the child and the adult, and how secure these attachments are will affect how the child builds loving and trusting relationships with other people (Dowling, 2005; Elfer, Goldschmeid and Sellek, 2003). Goldschmeid (1994), influenced by the work of Bowlby, extended attachment theory to introduce the key person idea and the importance of close early attachments between practitioners, parents and young children (Clasien, 2008; Goldschmeid and Jackson, 1994; Nutbrown, 2011). Goldschmeid (1994) believes it is important for families using childcare to be supported by practitioners through the key person approach, so close secondary attachments can be made between the infant and the practitioner/key person. The secondary attachment can therefore influence how the infant deals and copes with changes in their life. As Dryden, Forbes and Pound (2005, p.81) state 'the quality of learning depends on the quality of the relationship', therefore emphasising the importance of sensitivity, stability and consistency of care.

A study by Melhuish, Mooney, Martin and Lloyd, (1990) looked at types of childcare at 18 months and the differences in the interactional experience between carer and infant. They studied a total of 255 infants who remained in maternal care compared to those experiencing different types of care at home, with a relative, childminder or nursery. The infants were observed from birth to three years and differences were found in their behaviour. The amount of vocalisation of infants at eighteen months was compared as being the greatest with mother than with a relative. There were less vocalisation with a childminder, and in nurseries there were the least vocalisations. Measuring displays of aggressive behaviour by infants between care settings, the nurseries scored the highest, although the infants' social skills were more developed when compared with those cared for solely by the mother. As expected, levels of affection were the greatest when mothers were the main carer

and the lowest in nurseries when the infants had multiple carers. However, no significant differences emerged in the proportion of infants showing secure attachments to their mothers who attended the different care settings and were looked after by a number of secondary carers. This highlights that more than one attachment can be formed, but as Bowlby (1953) suggested, the main carer remains the most significant, irrespective of how many additional attachments were made (cited in Bowlby, 1990). However, the quality of attachment to the secondary carer is vital for the infant's emotional development and the study by Melhuish et al. (1990) showed that within day care nursery settings there were a number of problems that compromised the success of secondary carer relationships being formed. These were less experienced staff that did not have their own children; a higher turnover of staff; low adult/infant ratio and low responsiveness to communication. This indicates the lack of quality of care which in turn poses risks to an emotionally secure base for the infant (Bowlby, 1997; Holmes, 2001). Therefore, experienced staff and a low staff turnover are essential for any type of child care alongside an understanding and consideration of what creates good quality relationships with infants. This includes an understanding by carers about emotions and their own role in becoming an attachment figure and how this could be approached, including consideration of symbolic gesturing in supporting secure emotional relationships.

2.4 A nursery setting

A nursery setting is day care provision for infants and children between birth to four years providing care and learning opportunities. Nursery practitioners are all professionally qualified and have responsibility for delivering the early year's curriculum to ensure the children's development from birth to four years is supported and extended.

Within the EYFS (2008) there is a legal requirement for those working with children in day nursery to fulfil the criteria to be a suitable person (EYFS, 2008). The three legal requirements in meeting the suitability to work in day nursery are 1) all practitioners whether working independently or under supervision are screened through a criminal register, highlighting any convictions that may prevent them from working with children, 2) the deployment of staff with appropriate qualifications is

organised to ensure that the safety and needs of children are met throughout the day and 3) staff have or are working toward appropriate qualifications, training skills and knowledge to successfully support children when working with them (Tassoni, 2008).

Currently In the UK unqualified staff working in day nurseries are not legally obliged, but recommended, by local authorities, to complete the minimum of a level 2 qualification in childcare (Tassoni, 2008). A level 2 qualification is equivalent to the general certificates awarded in secondary education in the U.K. Level 3 is equivalent to the advanced certificate in education. Therefore, a key person responsible for a group of children, rather working in a supportive role, is expected to be qualified at, or working towards, level 3. Working as a nursery assistant, being supervised by more qualified staff is the more common route to becoming a nursery practitioner with full key person responsibilities. To gain the experience necessary to work up to this position the qualifications required are:

- CACHE Level 2 Certificate in Child Care and Education
- City & Guilds, CACHE or BTEC Certificate in Children's Care, Learning and Development
- A nationally recognised vocational course at Level 2 in Children's Care, Learning and Development
- Apprenticeships are available in the area will depend on the local job market and the types of skills employers need from their workers (CWDC, 2011).

Practitioners with a level 3 can count in the qualified ratio of staff, sometimes referred to as 'in a supervisory role' (CWDC, 2011, Tassoni, 2008). The qualifications recognised at level 3 to work with young children are:

- CACHE Level 3 Diploma in Child Care and Education
- BTEC National Diploma in Children's Care, Learning and Development
- NVQ Level 3 in Children's Care, Learning and Development (Nutbrown and Page, 2008, CWDC, 2011).

Whilst working as a nursery practitioner at level 3 it is possible to complete further qualifications including:

- CACHE Level 3 Certificate of Professional Development (CPD) in Work with Children and Young People
- BTEC HNC/HND in subjects such as Advanced Practice in Work with Children and Families, or Early Childhood Studies
- A degree or foundation degree in, for example, Early Years or Early Childhood Studies (CWDC, 2011).

If management responsibilities have been undertaken whilst working as a nursery practitioner and/or key person, it is possible to complete higher education courses. Foundation degrees focus on a particular job or profession combining academic study with work place learning. There are a number of Sector Endorsed Foundation Degrees for the early year's workforce, which means they have been assessed as meeting the requirements of the children, and young people's workforce and reflecting employer needs. They offer a good progression route from the Level 3 Diploma and to Early Years Professional Status. Introduced in 2007, EYPS is a professional status (not a qualification) where candidates have to demonstrate their skills and knowledge across a number of standards with the view that they will lead practice (Pugh and Duffy, 2008). A practice leader in early years is the most recent development in qualifications and seeks to attract graduates to work and become strategic and practice leaders. Candidates undertaking this will expect to gain a masters qualification and EYPS as part of their training (CWDC, 2011).

There is still a need for qualified staff to understand the complexity for the emotional and social relationships that they share with infants and parents (Nutbrown and Page, 2008). Approaches such as symbolic gesturing provides a practical way the key persons, once trained, can continue developing ways to enhance the emotional relationship with the infants they care for, whilst continuing to meet the EYFS requirements.

2.4.1 The curriculum requirements for meeting infants' emotional needs

Nurseries providing funded places are governed by Ofsted and inspections are carried out to monitor standards and ensure the EYFS (2008) curriculum is implemented. A child's personal, social and emotional development is provided for with experiences and support which will help to develop a positive sense of them self and others. Providers must ensure support for children's emotional well being from birth to five years to help them to know themselves (DCSF, 2008b). When planning for each infant there are key requirements necessary for effective practice. When considering the EYFS (2008) guidelines the use of symbolic gesturing could become part of practice to support the existing framework that the key person is expected to follow, for example, making relationships.

Making relationships between eight to twenty months includes giving full attention when babies look for a response. This could be supported with the use of symbolic gesturing. Similarly when young children learn to label emotions such as sadness, happiness, symbolic gesturing alongside talking to them about their own feelings could be part of practice. Development of emotions depends on close attachments with a special person in the setting (Dowling, 2005). Recognition that infants will seek comfort from being given individual attention, using symbolic gesturing is one way in initiating the bond between key person and infant (Vallotton, 2009).

2.4.2 The key person and the EYFS (2008) framework

The influence of the key person system within the EYFS (2008) is that they have a special responsibility for working with a small number of children in promoting secure attachments and promoting independence. The EYFS (2008) refers to the infant needing a key person relationship where the individualised relationships can be intimate providing consistent care (Dryden, Forbes and Pound, 2005). The key person approach has been described as a way of working in nurseries in which the whole focus and organisation is to enable and support close attachments between individual children and individual nursery staff (Wilcock, 2007). The key person approach is an involvement, an individual and reciprocal commitment between a member of staff and a family. It is an

approach which has benefits for children, parent, the key person and the nursery (Elfer, Goldschmied and Sellek, 2002; Leach, 1997). Infants who are not in attentive one-to-one relationships during this period will not receive the stimulus they need to ensure the hormonal responses that trigger the optimum development of the pre-frontal cortex. This part of the brain – which plays the major role in managing emotional life – develops in response to social experience, particularly through being with a responsive adult who holds them close and looks at them with genuine warmth and understanding (Anning and Edwards, 2006; Gerdhardt, 2004). Although this study does not allow scope to discuss the impact neuroscience has had on early years practice, these findings do illustrate that nurseries providing such individualised care in supporting development are necessary (Goldschmied and Jackson, 1994). However, in some instances nurseries can have a different ethos in how to care for infants that deprives them of close individualised relationships, by focusing on practical care and cognitive development (Gerdhardt, 2004). This is in direct contrast to the research that suggests close relationships to form attachments are essential, as Bowlby theorises. He believed infants have a biological need to be in close proximity to their main carer and to be able to follow them around remaining in close contact (Bowlby, 2005). At the time of writing, there has been an increase in research into the type of close one-to-one relationships particularly those working with infants that Bowlby advocated. Current research into the infant rooms within nurseries has provided a platform to hear the direct views of practitioners about their experiences as carers with the infants they look after and the need for more support (Goouch and Powell, 2010; Nutbrown and Page, 2008). The significance for this study is to continue to hear the views of key persons and their thoughts about what support they need in developing emotional relationships with the infants they care for. Enabling the voice of the key person to be heard provides shared experiences about symbolic gesturing and its influence on developing emotional relationships. Neuroscience and the role practitioners play in nurturing emotional relationship is better understood by key persons although how to practically support working with infants to develop close one-to-one relationships remains less understood (Pugh and Duffy, 2006). Continued emphasis remains on learning even with the youngest infants

in nursery rather than relationship building. There are fewer opportunities for ways to support and enhance the emotional relationship, therefore highlighting the need for practitioners to have more practical support and strategies such as symbolic gesturing when working with infants (Elfer, 2006).

2.4.3 The professional key person

The terms key worker and key person are used in conjunction with each other, although there is distinction between the two. As the term suggests, the key worker is more responsible for procedural documentation, interacting and communicating information (Dryden, 2005). Conversely the key person role is also focused in supporting children to settle into the nursery, establishing and providing a nurturing environment (Elfer, 1996; Goldschmeid and Jackson, 1994). The key person doesn't replace the parent of the infants they care for, but instead provides additional care and love during their attendance at nursery. They offer security, meet the child's individual needs and communicate with parents on a regular basis (Goldschmeid and Jackson, 1994).

As well as having a commitment to good care, the key person role within a setting is now a legal requirement (DCSF, 2008). The key person's role is to enable all children to feel safe and to express their feelings, who are they are and what they can accomplish, irrespective of age. The key person's role is to be supportive through care, attentiveness and interact with their children (Hopkins, 1988; Barnes, 1995). The infants themselves do not understand why they are in a setting away from home and may feel abandonment, therefore a relationship of comfort and knowing, using a range of approaches to bridge the communicative and emotional responsiveness gap, helps reduce these anxieties (Mooney, 2010). However, in group care, such as nurseries, the key person's time is organised and distributed between various tasks in fulfilment of their role. Separation between the key person and the infant when the key person has additional responsibilities such as having to complete paperwork is therefore common. In addition the key person's time is also divided between several infants. Being left with different carers and having to share a special key person can potentially result in the infant being anxious and insecure in

developing secondary attachments. Symbolic gesturing could reduce the anxiety because it allows the individualised connections between key person and the infant to be made. When the key person has to leave the room they could communicate through symbolically gesturing that they will be returning so the infant knows when they are going and returning. This also aids the momentary times when the infant is left with a less familiar practitioner. Being left, however short a time, can potentially cause increased stress in young infants and this was illustrated in the stranger situation experiment conducted by Ainsworth (1974). This was an experimental procedure subjecting the child to a series of relatively mild stresses, highlighting their behaviour when they were securely or insecurely attached. This experiment confirmed that the presence of a significant adult is central to the infant's emotions and if they leave or are replaced momentarily by another adult an increased level of stress in the infant is evident (Berk, 1989; Goldschmeid and Jackson, 1994). Therefore the central consideration remains: for infants to become independent and secure, the key person's role and how they approach the role is crucial. Interaction by listening to infants enable practitioners to create meaningful activities and help them to make connections with them (Abbott and Moylett, 2003; Manning-Morton and Thorp, 2003). When considering dispositions and attitudes with infants, key persons are encouraged to respond and build on their expressions and actions. Practitioners are encouraged to engage young infants to respond to, or mimic adults through approaches such as gesturing, and the possibilities of symbolic gesturing in gaining an understanding of infant needs and requests could be valuable in creating these meaningful relationships. The key person often needs help to accurately read the infant's behaviour as communicative cues and this may be more challenging for a non parental care-giver who doesn't know the infant well and whose attention is split between several children (Meill and Dallos, 2005). Therefore, the challenge is in helping carers tune into the individual children in their care and provide opportunities, such as symbolic gesturing, to support carers in practice (Vallotton, 2009).

2.4.4 The process of a key person building emotional relationships

Infants need time to make special relationships and build up trust, just like adults. These special relationships create vital foundations for infant's development: their mental and physical health, and their ability to think, wonder and learn (Leach, 1997). In a nursery, the best way for this to develop is, as discussed in the previous section, through the key person system. According to Elfer et al. (2003):

“a key person’s role is a way of working in nurseries in which the whole focus and organisation is aimed at enabling and supporting close attachments between individual children and individual nursery staff. The key person approach is an involvement, an individual and reciprocal commitment between a member of staff and a family. It is an approach that has clear benefits for children, parents and the nursery” (p.20)

Familiarity, pattern and predictability of carer responses give infants a sense of self. Continuity of attention from key people who know children well, who are interpreting and responding to their gestures and cues, enable children to attend to their inclinations and to play freely is known as ‘tuning in’ (Elfer, Goldschmeid and Selleck, 2003). Tuning in to infants can be helpful in unexpected ways, because they often express emotions that are challenging to manage and with the support of the key person they can share their feelings. Tuning in can also be advantageous as a reflection tool for key persons to acknowledge infants who are less expressive and more insular in conveying their emotions (Mooney, 2010) Vallotton (2009) studied whether infants can influence their quality of care and concluded that infant communicative gestures predict caregiver responsiveness. Therefore an understanding of the effects of infants’ behaviours on caregivers’ responses is critical in helping caregivers appreciate their own behaviour toward the infants they look after. However, in practice, the care of all infants as individuals as well as emotionally investing in their life is complex for the key person. It may be that approaches such as symbolic gesturing can facilitate the connections between them and their infants in order to enhance the emotional relationship.

The complexity of these emotional demands of the key person is discussed in relation to the emotional labour in the next section of the chapter.

2.5 The emotional labour of the key person

2.5.1 Emotional management and the need for training and comprehension of the issue

“Maintaining an appropriate professional intimacy, which every child needs in order to feel special while keeping an appropriate professional distance, requires emotional work of the highest calibre” (Elfer, Goldschmeid and Sellek, 2003, p.27).

Emotional management is the ability to create a publicly observable facial and bodily display. It requires emotional work, because learning how to do it takes effort (Taggart, 2011). For an adult it could be the disappointment of not receiving a wanted item they were hoping for, but being taught to be grateful by their carer when young. They learn to manage their disappointment and instead show pleasure and gratitude for the benefit of others. This is learning the difference between public expression and private feelings (Goffman, 1959). In the caring profession the public persona is an important aspect of the job although still requires emotional investment to do the job successfully. Employment of this nature can cause tensions when the key person feels inwardly different to the outward visible appearance they display when doing the job. However the limited support, and at worse, exploitation of those working with young children, particularly in the infant room of day nurseries, suggests emotional labour is not uncommon (Taggart, 2011). Reliance on the goodwill and emotions of the key person to successfully do their job can be assumed without consideration to how the key person is feeling and personally managing their role by those who employ them (Taggart, 2011; Theodosius, 2008). For the key person with responsibility of looking after infants, how they behave in private and how they present themselves publically in the workplace can be markedly different. The key person public persona could be smiling to the parents and children in their care role whilst feeling anxiety internally but they are unable to express their true feelings for fear of appearing inadequate or incompetent as a professional. However, feeling and expressing different emotions can lead to caring for infants in a rather mechanical and superficial

way which undoubtedly the infant will sense (Barnes, 1995). Emotional management therefore describes the kind of caring which stems from conscious effort of investing in the emotional relationship and reflecting on one's own emotions for self-management to be successful (Theodosius, 2008). However, there is little training for key persons in this respect. The annual Kent Early Years and Provider survey (2008) revealed that in 536 settings the leaders were the most likely to be trained with an average of fewer than two days training for remaining practitioners. The least qualified and experienced were allocated to the infant room with the perception that caring for older children in some ways required the higher qualified and more experienced practitioners. Practitioners in the infant rooms were also expected to manage their own emotions when caring for the infants with little recognition of the stress caused by attending to the demands of the infants in their care (Elfer, 2005, 2007; Powell, 2009). Managing emotions from the key person's perspective in the infant room was therefore unrecognised as an issue that required attention and needed to be resolved as it was assumed to be an inherent part of their professional role. In consideration of the emotional management, key persons have something of a paradox in their professional life. On the one hand emotional investment and passion are necessary to work with children in a caring role. However, these same emotional qualities can prevent them from being considered 'professional'. Cheerful, amateurish enthusiasm is seen to be all that is necessary, particularly in the infant room (Clasian, 2008). Key persons are expected to be kindly in nature, patient and competent presenting toys and resources for learning (Moyles, Cable, Devereux, 2001). Emotional labour being the 'work' therefore required of a person in maintaining their perception of a particular professional role whilst at times feeling something different is not unusual within the caring profession (Theodosius, 2008). This in turn has led to self-sacrifice, reduced job satisfaction, as well as both surface and deep acting within their role (Taggart, 2011). If a key person has these conflicting inner feelings, then their emotional relationship with infants may be superficial with attachments being less than satisfactory. Symbolic gesturing has been conceived as one possible way in supporting key persons in their struggles, to aid and develop the emotional

relationships with the infants they care for (DiCarlo, Stricklin and Banajee, 2001; Garber, 1998).

2.5.2 Surface and deep acting: the authentic self

When key persons first use symbolic gesturing, they may initially feel disingenuous, particularly when conveying an emotional message. Hochschild (2003) suggests that this isn't uncommon and individuals manage their emotions through a process known as surface and deep acting. In surface acting, the individual uses her body to portray feelings that they do not really have, such as smiling, shrugging, laughing, and with respect to this study, symbolically gesturing when conveying an emotional feeling. The disconnection between this outward display and their genuine feelings causes emotional labour. In deep acting however the individual learns to really believe in the emotions they are expressing through conscious mental work (Hochschild, 2003). Eventually, a person can learn to deep act so well that they really believe the feelings that deep acting produces, unaware they have worked on them and created the required feelings and expressions (Berk, 1989). In consideration of continued use of symbolic gesturing, this deep acting could provoke long-lasting and genuine feelings. A key person working in a group care situation creating an emotional holding environment can be challenging and this may mean they resort to surface acting for a variety of reasons. To be successful the key person has to be emotionally in tune with the individual infant within the group and they may have to consciously use effort to ensure this occurs (Holmes, 1993). When the key person is dealing with the emotional climate of a given situation they may resort to their own personal experiences of upbringing, rather than their professional training, to cope with the emotional demands of the job and managing their own emotional vulnerability. Working in group care whereby some infants are commonly transient either within the organisation or from external circumstances the key person may not fully invest their emotions into the relationship. The reasons being because they are aware the infants may leave or be allocated to another group (Taggart, 2011). They may also feel it is not their role to be emotionally invested in the relationship

and therefore engage in surface acting (Elfer, 2007). Furthermore professionals working in care systems often devise ways of controlling their feelings in line with their professional role. This may be a mechanism that the key person employs to separate their professional and personal self in order to protect them self emotionally from becoming too involved in the emotional attachment (Hochschild, 2003). In addition, when there is a high turnover of underpaid staff and no systems of support, the key person is more likely to be unwilling to become emotionally involved with particular children, and at worst avoid any emotional investment thus resulting in little or no eye contact, little holding, and little comforting - the very things infants need most (Belsky, 1988). This could result in the key person unsuccessfully recognising and interpreting what the infant is trying to express through body language or otherwise (Dryden 2005; Elfer, Goldschmied and Sellek, 2003). Gerber (1988) observed practitioners in nursery settings and found at times emotional investment was lacking when they carried out care routines. The infants she observed at times were viewed as inanimate objects by staff looking after them. She concluded it was better to provide good quality one-to-one care some of the time, than half of the attention all of the time, because then the infants would have some opportunity to be active participants in the relationship with their carer (Gerber, 1988 cited in Mooney, 2010). In developing approaches such as symbolic gesturing, the two parties - the key person and infant - are creating active participatory interactions at intervals during the day and thus developing their emotional connections and understanding of one another (Acredolo and Goodwyn, 1996). By observing gestures, the key person can meet the needs of the baby quickly and effectively without the baby becoming frustrated or apathetic because of not being understood or not having their demands met (Edington, 2004; Elfer, Goldschmied and Sellek, 2003; Vallotton, 2005). Therefore, an approach that requires both the key person and infant to be actively involved can result in the key person being fully attuned and consequently more involved in the deep acting that is associated with successful emotional management. This can form richer and more personalised relationships, with each participant being valued as a result of the contribution they give when interacting (Meil, 2002).

2.6 The contribution of symbolic gesturing to practice and a need for further research

2.6.1 Further research

This literature review set out to examine and provide an understanding of the theoretical underpinnings of the emotional relationship between key person and infant and how symbolic gesturing could be a valuable approach in developing their emotional relationship that may lead to attachment. Although initiatives by the National Strategies such as ECAT (2009) which supported ways to develop relationships, the focus has remained on language development rather than emotions (Anning and Edwards, 2006). Engaging with pre-verbal infants through symbolic gesturing as a mechanism to develop emotional relationships is an area requiring more research. Of current concern is the conveyor belt type of care evident in nurseries that suggests infants' physical needs and care needs are met (Elfer, 2007), but, as Gerber (2003) indicates they are treated almost as if they were inanimate objects. Trevarthen (1992) suggested that within the adult and infant relationship conveying emotions together and becoming in tune with one another are central ingredients of successful early relationships (cited in Meill and Dallos, 2005; Whitehead, 2007).

In consideration of this it is argued that symbolic gesturing is an approach that can help to facilitate the development of the emotional relationship, and encourage the attachment between key person and infant. As discussed, the emotional engagement and investment is complex in developing attachment, particularly in nursery group care. As the section on emotional labour suggests, symbolic gesturing paves the way for how this approach could be used in creating genuine positively emotional relationships between infant and key person.

2.7 Chapter summary

This chapter has focused on research about symbolic gesturing and its influence on the development of pre-verbal infants. It then examined the emotional aspects of development in relationship to the theory of attachment and the types of interactions occurring between pre-verbal infants and those caring for them. How symbolic gesturing could potentially be an approach used in developing the emotional relationship between key person and infant was then considered with attention focused particular upon the early years context.

CHAPTER 3: RESEARCH METHODS

3.1 Introduction

With the aim of gaining the perspectives of key persons in a day nursery as symbolic gesturing is introduced, as well as the dynamics of their relationships with the infants in their care change, the research was located within the interpretative paradigm. The method employed was a case study approach which is located near the qualitative end of a notional methodological continuum (Newman and Benz, 1998). The case study approach is explained and justified in this chapter.

The research was conducted over a three month period with the intention of studying and recording the journey of three key persons while they used symbolic gesturing as part of practice. Their narratives were explored in relation to whether they considered symbolic gesturing was an approach that could be included to enhance their daily interactions, effectively strengthening the emotional relationships with infants in their care. The primary method used was semi-structured interviews with observations, journals and documents employed as further data collection (Denscombe, 2003).

This chapter outlines the rationale for the methodology used in this research, with the form it took explained and justified. Acknowledgment of the ethical issues that arose to inform and shape the research is also discussed. An explanation of data analysis procedures are then explained and justified.

3.2 Rationale: Research Paradigm and Methodology

3.2.1 The Qualitative Paradigm

In determining the methodology - the framework associated with a particular set of paradigmatic assumptions (O'Leary, 2004) - it was important to first examine the two major paradigms of research - the positivist, functionalist and interpretive - as well as the debates surrounding them. This case study approach and the data collection methods are located within the interpretive paradigm rather than the opposing pole of the positivist, functionalist paradigm (Creswell, 1994; Denzin and Lincoln, 2008a). The positivist, functionalist paradigm contains two main orientating ideas. Firstly, that human behaviour is essentially rule governed, and secondly that human behaviour should be investigated externally by the methods of natural science (Lincoln and Guba, 1985). The interpretive paradigm - in contrast to its normative counterpart - is characterised by a concern for the individual. Also known as the naturalistic paradigm, the focus is upon small numbers and in-depth analysis of human behaviour and perceptions, acknowledging their differences as well as their similarities (Basit, 2010). In this case study approach, the focus was upon the understanding and illuminations of each key person using symbolic gesturing to enhance relationships with the infants they care for (Babbie and Moulton, 2001). Therefore, the aim of the case study approach was to understand the subjective world of the individual experience and go beyond the observed behaviour in consideration of their perspectives through description and interpretation (Denzin 1984; Lincoln and Guber 1995).

Criticism for abandoning scientific procedures of verification and relying on interpretive data that could be incomplete or misleading is a continuing debate (Denzin and Lincoln, 2008a). However, in this research it is not suggested the qualitative rather than quantitative modes of enquiry is superior, rather that the textually replete approach used here better serves the research questions posed than the conventional quantitative procedures (Erben, 1998; Bannister, 2003). Emphasis is placed, therefore, not on making generalisations from findings, but in interpreting social reality in the way it is viewed by the research participants. As

Denzin (1989) notes, the study of lives usually aspires to exploring the relationship between lived experience and the social context in which the researched find themselves. Therefore, it is an approach to illuminate the participants' sense of their inner world of thoughts and experiences and at the same time making sense of their outer world and experiences (Chamberlayne, Bornat and Wengraf, 2000).

The rationale for a biographical approach was to obtain the narratives of the key persons' experiences as they implemented symbolic gesturing. The biographical method is grounded in a desire to illuminate the complexity of the individual lives, in this case during the three month period of using symbolic gesturing, and through analysis of data to provide greater insight into the social and cultural network in which those key persons exist. The narratives of the key persons obtained are thought to help listeners and readers appreciate and understand the lives of others (Erben, 1998). This includes the journey taken with the struggles, anxieties and relationships developed along the way (Cohen and Manion, 2006). In this case, hearing the key persons' voices and their insights may be helpful in understanding other practitioners in different nursery settings with similar circumstances and how symbolic gesturing could be used to enhance emotional relationships between themselves and the infants in their care. Whilst the key person' stories cannot be generalised they can serve as vignettes with some transferability to others in similar circumstances (Boyatzis and Watson, 1993). Reflective diaries recording experiences and illuminations were also completed to support the voice of the key person journey in providing richness to the other biographical data obtained from interviews.

The biographical method is recognised as having considerable potential for self representation amongst research participants (Atkinson and Walmsley, 1999) and evidence suggests it maybe empowering for groups whose voices are seldom heard (Clandinin and Connelly, 2000), for example those working with infants in a nursery setting. This research has provided a platform for them to share their perspective and experiences whilst using symbolic gesturing. As interpretive research the key persons became the focal point in the process, informing the case study through a variety of methods in allowing the voice of the key persons to be heard (Erben, 1998). These methods include semi- structured interviews, observations, reflective journals and other documentation, such as personal, social and emotional curriculum

policies, inclusion policies, behavioural policy, job descriptions, routines and reflections regarding the role of a key person (Baxter and Jack, 2008). The semi-structured interviews were used with the purpose of exploring symbolic gesturing and each key person's perspective about their role as a main carer and, more specifically, how they express and support emotional states of the infants they care for, and whether symbolic gesturing could enhance this aspect of their role.

3.2.2 The case study

This study was undertaken in a single setting at a day nursery. A nursery is defined as a 'service' for parents who need or wish to have their children looked after during the day and children may attend day nurseries full time or part time. The majority of day nurseries are provided by the independent sector. The nursery setting in this study was privately owned and catered for children both full and part time. The staff were all professionally qualified and continued to meet continuous professional development requirements on a regular basis. Symbolic gesturing was identified by the nursery as an approach that could enhance practice and as a result was introduced within the setting in a variety of ways. Posters were placed around the rooms children played in. The posters had pictorial signs illustrating signs that could be used. A music video showing symbolic gesturing was also played in the morning and evening as the children entered and left the setting. Children were not taught to use signs, but learnt the signs modelled by key persons during interactions.

A common concern of case studies in general is that they provide little basis for scientific generalisation, particularly with the small scale case study presented here. Case studies, even by qualitative methodologists, can sometimes be regarded as less significant to the studies intended to obtain generalisations pertaining to a population of cases (Glaser and Strauss, 1967). The consideration of this case study approach therefore had to be its generalisations to theoretical propositions and not to populations or universes. The researcher's aim was to generalise the theories of key persons' views about symbolic gesturing and not to enumerate frequencies of statistical data or make generalisations beyond the scope of the research undertaken (Yin, 2009). In this way, the instrumental case study approach was used, whereby a particular case using symbolic gesturing in a day nursery was examined

mainly to provide insight into the effect of its implementation. The case study approach was used as a research strategy because it provided a way to undertake a qualitative inquiry into whether symbolic gesturing affects practice, and if it specifically enhances relationships, according to the key persons implementing it (Denzin and Lincoln, 2008b). By incorporating a range of methods of inquiry, the case aimed to draw attention and optimise understanding of what could be learned about symbolic gesturing during the early stages of implementation. Furthermore, the case study approach was recognised as having considerable flexibility in describing the early stages of intervention in relation to symbolic gesturing and the real-life context in which it occurred (Yin, 2009).

In case studies, a common misconception is that the research methods should be arrayed in a hierachal framework and case studies are more appropriate to the exploratory phase of an investigation. This outlook conceives of case studies as preliminary research that cannot be used to test or describe propositions. However, far from being only an exploratory strategy, case studies - including single case study - have been highly regarded in the field of research and society (Strauss and Corbin, 1990). In this study, the case study approach was drawn on to illuminate the value of symbolic gesturing and whether it could be used as part of practice (Strauss and Corbin, 1990). It therefore aimed to develop the opportunities and capacity for the researcher to be not only exploratory in the initial phases but to develop reflexivity and consider each key person's thinking about symbolic gesturing. This drew on their perspectives of pedagogical practice, as well as considering their vocational dispositions working in a day nursery (Schon, 1987).

The validation of the research is therefore based upon the degree of consensus among those who have an interest in the investigation regarding it significant. As a single case study, a biographical approach to include the voices of the key persons was undertaken. The semi-structured interviews were therefore conducted with those who had an intrinsic interest in the case. The case study aimed to draw upon the participants' understanding of what was important about the case within their own world, rather than the world of the researcher's understanding and interpretations (Denzin, 2001). Reflexivity is of significant consideration within the study. Qualitative researchers have accepted they are potentially central figures in the process and it is they who actively construct the collection, selection and interpretation of data (Finlay and Gough, 2003). In this case study approach,

reflexivity was engaged throughout to ensure the voice of the participants were heard and meanings within the nursery context were interpreted correctly (Denzin and Lincoln 2008c).

3.3 The participants

3.3.1 Sample selection and recruitment – caregiver participation

The nursery setting was selected because the owner and manager were interested in developing and using symbolic gesturing with the children in their care and were in the consultation phase of implementation. Three female adults from the nursery who worked with the infants were selected to be involved in the study. An initial group meeting of all staff was held, and key persons' were asked to volunteer to take part. This was important because coercion of staff to take part would have affected the outcome. Of those willing to participate in the study the participants were recruited according to three criteria: a) working with infants under two years in the daily setting, b) different positions held within the nursery and c) prior experience regarding use of signing systems. The sample of participants was therefore reasonably representative of the key person population. In addition all participants worked full-time, and held a national childcare qualification. Although a single case may be valid given the respondent is sufficiently represent of a cohort it is recognised no key person will be exactly the same because of previous experience and knowledge. However, it was considered that the participants would echo common themes and concerns in relation to their experiences in the process of implementing symbolic gesturing.

3.3.2 The key persons

Key person one was a member of the team who had been working at the nursery for approximately eighteen months. She was the most recently trained member of staff, having achieved CACHE level 3 Diploma in Care and Education with eighteen months of post qualified experience. She had a daily key group of three infants between the ages of 8 and 18 months.

Key person two had been employed at the nursery for approximately three years and held additional specialised roles related to communication and language with the children at the nursery. She had achieved a BTEC level 3 in Early Years and Education with three years of post qualified experience. In addition she was completing a Sector endorsed Foundation degree in Early Years. This was financed and supported by her Local Authority. She had responsibility for looking after three infants four days a week, and attended University for one day each week. The infants she cared for were between the ages of 12 and 24 months.

Key person three had overall managerial responsibilities at the nursery and had been employed in the nursery for approximately seven years. Key person three had numerous qualifications, including vocational managerial courses to teach adults. Her childcare qualification was a BTEC National Diploma in Early Years with ten years of post qualified experience. In addition she had recently completed a Sector endorsed Foundation degree in Early Years. She had responsibility for a total key group of five infants between the ages of 6 and 12 months, although she looked after only three at any one time. This responsibility was shared with another member of staff and she was relieved regularly to complete managerial duties.

Having three different voices about caring for infants of different between six weeks and twenty four months provided scope for some variation to occur in the interview responses and reflective journals. The key persons had varying experiences in working at the nursery and this was also valuable in terms of relating to their own perceptions of managing their own and the infants' emotions.

3.3.3 Choice of infants observed

The infants observed were selected by the key persons themselves. They made the decision based on being a key person to the infant for longer than three months. Each infant was of 'typical' development and attended nursery for three or more days. These combined factors represented a typical profile of the type of infant they had in their care. Once selected by the key persons the parents were informed and ethical procedures adhered to.

The manager, who shall be named key person three, was observed with an infant aged 8 months, during free play. Key person two was observed with an infant aged

19 months, during lunchtime. Key person one was observed with an infant aged 15 months, during story and group play time.

3.4 Methods of data collection

3.4.1 Data Collection Procedures

To reduce the likelihood of misinterpretation, various data collection procedures were employed. This study primarily used semi-structured interviews, additional methods including observations, reflective journals and nursery setting documentation were also included to clarify meanings and verify interpretations (Denzin and Lincoln, 2008b).

Interview is one of the major sources of data collection and they are also one of the most challenging ones to achieve successfully. According to Mishler (1986) its particular features reflect the distinctive structure and aims of interviewing, namely, that it is discourse shaped and organised by asking and answering questions. An interview is a combined exercise of what interviewees and interviewers talk about together and how they talk with each other (Denzin and Lincoln, 2008a). The record of an interview that researchers make and then use in their work of analysis and interpretation is a representation of that talk. Patton (2002: 373) identifies three types of probes used in interviews:

- Detail-oriented probes
- Elaboration probes
- Clarification probes

In this study interviews were conducted with an emphasis on the *Elaboration probes*. This type of probe is designed to encourage the interviewee to explore and develop their ideas. This also reveals the interviewer's desire to know more by using cues such as gently nodding the head as the person talks, and sometimes by just remaining silent but attentive (Cohen, Manion and Morrison, 2006). As a novice interviewer there was a conscious decision not to lead the interviewee but to try to

facilitate the interviewee to elaborate on what they said without too much intervening. The aim was, therefore, to talk with rather than ask the participants and engage with them without leading their responses (Denzin and Lincoln, 2008a).

It is acknowledged that in a typical interview situation a hierachal relationship exists where the respondents are in the subordinate position. For instance, in this study the knowledge that the researcher has a senior position to the key persons. Bearing this in mind, a semi-structured interview seemed more appropriate to allow the respondent the opportunity to lead and for the interviewer to relinquish her control and the predictability of questions asked. The approach also allowed the respondent to be responsible for initiating and directing the course of the encounter (Patton, 2002). The semi-structured interviews were able to elicit the subtle, ambiguous and sometimes contradictory issues that arise when using symbolic gesturing (Denzin and Lincoln, 2008b). The interviews aimed to provide depth and personal context to the subject with the interview drawing out the affective and value-laden implications of the subject's responses to determine whether the experience of using symbolic gesturing had central or peripheral significance, according to the participants. It was also a particularly valuable technique because it explored the deeper attitudes and perceptions of the participant being interviewed in such a way as to leave them free of interviewer bias (Basit, 2010).

Interviews were held at the beginning and end of the three month period of implementing symbolic gesturing. The semi-structured interviews were centred on the effectiveness of symbolic gesturing and whether it enhances relationships between key person and infant. The second sets of interviews were less scripted compared to the initial interviews and this provided opportunities to discuss emotions more freely. The schedule was therefore planned to enable opportunities for the participants to discuss the association between their professional role and the use of symbolic gesturing to enhance personal relationships with infants in their care (Denzin and Lincoln, 2008b). The interviews were anticipated to take about an hour although the initial interviews only took about half an hour to complete. The schedules of questions were selected in a pragmatic way: they were selected from the pilot study of questionnaires given to a group of early year practitioners.

3.4.2 Observations

During the three month period of this study observations were carried out weekly, with the focus on observing each key person interacting with the infant rather than observing the infant. Each key person was observed once a week with the same infant over the three month period. This provided continuity which random observations with different infants would not, and it also provided in-depth data on the relationship to that particular infant. The observations were primarily recorded using a naturalistic method (Elfer, 2007). Free descriptive observation with elements of the psychoanalytic infant observation, termed the Tavistock method (Reid, 1997) was employed alongside a modified version of Vallotton's (2009) caregiver responsiveness rating scale. The two different approaches to observations were significantly modified in the final design and the use of free descriptive observation, with tally charts to note the numbers of occurrences of gestures used were employed.

The observer detailed narratives of infant and key person's interactions together with the observer's personal responses and reflections of the episode, forming an observational account (Elfer, 2007). After the observation, a written reflection was completed, writing in a free flowing way, outlining the main sequence of events and recording details that came to mind. The overarching reason for using these aspects and modifying this method in the study was that the observer needed to rely on more than the data arising from visible external behaviours as there was an intention to try to capture the communication and emotional atmosphere of the room. The researcher primarily employed observational techniques that were free flowing and narrative rather than data that could be analysed using rating scales and be subject to quantitative analysis and reliability testing. One of the advantages of the former is that significance is placed on authenticity of the observation rather than validity (Basit, 2010; Reid, 1997). It can also be argued that using holistic narratives as a way of registering and recording the subtle external indicators of emotional states and their context, offers a depth in understanding the subject that can be lacking in large sample studies (Cohen, Manion and Morrison, 2006; Patton, 2002). The observations were held each week upon a pre-agreed day and within an agreed time frame with the key person to ensure that consistency was maintained. The key person selected which infant they considered appropriate to be observed with and the observations lasted for approximately fifteen minutes each week at the same

time (Elfer, 2007). Reid (1997) contends that descriptive observations are the easiest to construct but the more challenging to analyse and use.

During the observation, the researcher was positioned to the side of the group and had a small note book in which to make notes. One of the biggest challenges was recording everything that was said, as well as noting any gestures and behaviour. All the infants in the group were interacting with the key person so it was challenging to gain a sense of what was happening between the key person and the selected infant. As a result, the environment was recorded holistically with reflections made afterwards about the infant and the key person.

3.4.3 Reflective journals

The participants were also asked to write a reflective log to record any thoughts and feelings about symbolic gesturing during the twelve week period. They were asked to freely record any challenges and any developments they had observed during the interaction between themselves and the infants in their care. In addition, reflective questions were provided for them to complete on a monthly basis and these were handed out at the end of the monthly staff meeting. These documents would be viewed as social products located in particular contexts to be interpreted rather than accepted (Cohen, Manion and Morrison, 2006).

The reflective responses to the questions were returned individually during the subsequent week when the researcher was visiting. The documents containing participant's reflections of their role during the study proved to be valuable because they provided areas for further exploration during the follow up interviews.

3.4.4 Documentation

Additional nursery documentation was also collated to inform the researcher about the key person's role. The documents were selected because they reflected the professional expectations of the key persons, they offered a rich source of data which were contextually relevant and contain the natural language of the setting. Documents including job descriptions were fixed and so could be analysed and re-analysed without the original document undergoing major changes (Lincoln and Guba, 1985). The documents included in this report were job descriptions, key

person and behaviour policies. The documentations provided the researcher with a behind-the-scenes look at how the organisation is constructed and the value placed on relationships in a caring and educational environment from both a national perspective and a local perspective, where polices are put into everyday procedures in the setting (Patton, 2002).

3.5 Ethical issues

The responsibility of the researcher is to be aware that they are essentially guests in the private spaces of the world they enter (Denzin and Lincoln, 2002). Their approach should have an authentic manner and their code of ethics strict (Denzin, 1989). Case study research shares an intense interest in personal views and circumstances. Those whose lives are exposed run the risk of embarrassment or scrutiny and a moral contract between researcher and participant of the developing relationship is essential. Ethical problems can therefore permeate the whole study if not managed well in developing the researcher participant relationship (Wetherell, Taylor and Yates, 2001). The process is a complex account of the participant's experience and has the potential to be intrusive and may increase feelings of vulnerability when discussing their position (Baxter and Jack, 2008). Therefore, methods of data collection and observation should be discussed in advance. Key persons needed to receive drafts of any write-ups revealing how they are presented, quoted and interpreted and the researcher should listen to responses for signs of concern. O'Leary (2004) argues that taking responsibility for the dignity, respect and welfare of the respondents is paramount in research. This was particularly necessary when in contact with the three participants in this study. It was considered a privilege to be allowed into their daily working lives and to be thoroughly involved in the process. In turn, there was an awareness of their vulnerability to the research process with only one participant having any knowledge of the process of research (Denzin, 1989). The issues of being transparent were therefore regarded as extremely important by the researcher to ensure each step of the research undertaken was agreed and understood and that boundaries were not exploited. There were a few occasions when planned observations had to be re-scheduled due to the participant's requests and this was respected and agreed as part of

researching in a real-life context whereby anticipated events or situations change. It was also the participant's right and entitlement to ultimately decide on how much they were involved in the study although this potentially had implications for the research as a whole. They were all volunteers and therefore not pressured to participate as one way of reducing the risk of the data being distorted (Denzin and Lincoln, 2008a). The three participants were sent an information letter outlining their involvement in the study and this was sent with a consent form. They were asked to complete and return the form. Appointments were then made to visit them in January 2010. Apart from working in the same setting, the participants did not have any other personal relationships with each other. Steps to maintain the anonymity of participants were taken and the relevant sections and appendices demonstrate this. Ethics permission for the study was granted in February 2009 by the School of Education, University of Southampton and as a result research was carried out adhering to ethical procedures (see appendix 1). The participants were made aware of the importance of the 'Agreement to Participate' that they signed and anonymity was again emphasised during the recorded interviews. The participants did not however safeguard their own anonymity at particular times during the research. One told a colleague that she was being interviewed and another asked who else was participating. However, the content of the interviews were not discussed and one participant in particular wanted to ensure her comments remained anonymous and this was respected. The ethical considerations when conducting interview questions should be that they are unambiguous, non leading, culturally sensitive and ethically formed (Denzin and Lincoln, 2008c). Participants were informed that the findings would be disseminated to a wider audience and that they had the right to withdraw and all verbatim transcripts would be destroyed at the end of research process. The interviews were recorded using a digital voice recorded. All data was transcribed once the interviews had been completed. These were sent to each participant to be checked for words and descriptions so they were fairly represented and the interpretations of the findings were not reliant on the researcher's own perceptions. The researcher's own experiences of childcare and education may have impacted and distorted the original voices of the participants. The researcher can unwittingly bias data and avoid certain issues or perhaps by being from a different social background include or omit certain responses made in the final analysis (Baxter and Jack, 2008). The process of editing the data can, if not reflected upon and

considered, fail to provide space for participant's own voice to be heard and as a consequence the researcher's own motivations, views become more prominent (Newman and Benz, 1998). As a researcher, awareness of being as honest as possible is important. The participants had prior knowledge that the researcher held a position in early years teaching elsewhere at a more senior level. The researcher was open about her role as researcher and not as inspector and this afforded a transparency with the key persons during observations and interviews. This was important to ensure that the key persons were able to 'relax' into their role and felt able to negotiate times of visits and when they were observed (Basit, 2010).

3.6 Data Analysis

The qualitative approach adopted in this study places emphasis upon understanding the data through looking closely at people's words, actions and relevant records. Therefore, meanings that are presented in each participant's own words were examined and reflected upon to allow patterns to emerge from data from their perspective (Finlay and Gough, 2003). The patterns were then analysed while at the same time ensuring the veracity of participant's words and actions. Thematic analysis was the principle method used to understand the effectiveness of using symbolic gesturing and the effect on the dynamics of the relationship between key person and infant. Braun and Clarke (2006) defined thematic analysis as a method for identifying, analysing and reporting patterns and themes within data. Boyatzis (1998) also defined thematic analysis as a way of encoding information and processing data. Initially, the data was themed using the semi-structured interviews as the nucleus for gaining key persons' perspectives and to hear their views and opinions about the effect of symbolic gesturing on the dynamics between their relationships with the infants in their care (cited in Glaser and Holton, 2004). The process of initial coding and then creating themes within the data that emerged were then used as guides for analysis of other data, including the observations, the reflective journals and documentation (Glaser and Strauss, 1999). This enabled comparisons to be made between the various units of analysis with the aim being for

the themes in the data to answer the research questions in meaningful ways and give voice to the participants (Lincoln and Guba, 1985).

For interpretive researchers, the individual is the initial starting point and the research aims to understand their interpretations of the world around them, in this study each key person's perspective. The research was therefore not to prove or disprove in order to generalise to a wider population but to present stories and explore them in depth. Theory is therefore emergent and arises from particular situations and is grounded in data generated by the act of research (Glaser and Strauss 1999). Essentially, theory follows research data allowing it to emerge into a set of meanings capitulating insight and understanding of - in this study - the key person's understanding of how symbolic gesturing affects their practice, specifically their relationships with the infants in their care (Cohen, Manion and Morrison, 2006).

3.7 Summary of chapter

The research used a case study approach with the primary data collection being via semi-structured interviews to give voice to key persons using symbolic gesturing. The chapter outlined the rationale for using such an approach. The participants were encouraged to describe their journey and experiences using symbolic gesturing in their own words and to ascribe their own personal meanings to those experiences. The chapter considered the key characteristics of the interpretive paradigm arguing for its suitability to answer the research questions posed. It then examined the methodology used and justified their use. It also described the ethical procedures taken to protect the participants. Finally, it set out the analytical procedures employed with the aim to provide an account of whether symbolic gesturing enhances the emotional relationship of key persons and infants from the perspective of the key person.

CHAPTER 4: ANALYSIS AND DISCUSSION

4.1 Introduction

4.1.1 Review of data collection

Semi-structured interviews were chosen as the primary data source because of their first hand, in-depth explorations and personal reflections. Other data collection methods, including observations, reflective journals, job descriptions and nursery policy documents, were used in conjunction with the interviews to provide further depth to the analysis of the interviews.

4.1.2 An overview of the analysis

The analytical process aimed to bring meaning to the data by allowing the complexity and elaborate nature of the issues to emerge in a thematic approach. The process of initial coding and then creating themes within the data that emerged from the interviews were used as guides for analysis of other data, including the observations, the reflective journals and documentation (Glaser and Strauss, 1999). This enabled comparisons to be made between the various units of analysis. Each set of interview data was read through multiple times to identify emergent themes, recurring ideas and patterns of understanding within the themes (Denzin, 1989). Segments of the interviews in which key persons described their relationships, the use of symbolic gesturing and its impact on emotional aspects of their relationships with the infants - such as developing attachments - were highlighted in the text, with some initial themes emerging. The initial themes then became the drivers for further analysis. Each interview was reviewed again to bring key themes into focus. The interviews were analysed individually and then common themes were drawn from each interview so that the three voices were 'woven together' to create richer information to address the research questions posed (Roberts, 2002). The interviews are identified as 'initial' and 'post' in the discussion to indicate when the responses had

occurred. There was some overlapping within the content of the final themes discussed here although they have been presented as discrete entries for clarity and organisation of the data. Seven themes emerged from the data for analysis. However, after deliberation of the research questions propounded, some of the themes were integrated together because repetition had occurred and they were unnecessary as separate themes (Yin, 2009).

The final themes were sequenced one to five and organised accordingly. What emerged was a biographical account the participants had taken when introducing symbolic gesturing into their practice. The first theme introduced how they defined and explained their professional role in terms of caring for infants and how symbolic gesturing was perceived as part of their role. These responses were predominately taken from the initial interviews carried out at the time symbolic gesturing was introduced into practice. However, some reference was made to their role from the post-interviews of how symbolic gesturing had impacted on their professional role. The initial interview responses and the post-interview responses were examined together in creating the second theme. The second theme focused upon the participants' emotional responses using symbolic gesturing in their daily interactions with the infants. This was central to the aim of the study. Considerations of their thoughts were necessary in gaining a sense of any shift in emotional interactions they had with the infants in their care as a result of symbolic gesturing. In theme three, intimate relationships using symbolic gesturing - recognition of attachment and connectivity - were analysed. This theme was a development of theme two and focused on the participants' understanding regarding how emotional, intimate relationships were developed using symbolic gesturing, therefore affecting attachments. Most of the data regarding intimate relationships using symbolic gesturing was collected from the post-interviews, with additional observations and policy documentation referred to, where appropriate, to provide further exploration of the interview responses. Theme four focused on practices such as gesturing and symbolic gesturing and how symbolic gesturing was evident in daily practice within a nursery setting. It distinguished between gestures in general and symbolic gesturing. This theme primarily used the post-interview responses, although some responses from the initial interviews were used as a comparison to illustrate any shifts or similarities in thoughts about symbolic gesturing and gesturing in general.

Theme five examined each participant's critical reflection of their own journey when employing symbolic gesturing. Some concluding thoughts regarding the barriers that had, or could have, been experienced to prevent successful implementation of symbolic gesturing, as well as future possible issues practitioners could face in a day nursery using symbolic gesturing are also discussed.

4.1.3 Accounts of the key persons contributions

The accounts of the three participants in their role as key person provided an understanding to how symbolic gesturing was initially considered, valued and, subsequently employed. Key person one – being the most recently qualified and newest member of the nursery team – mainly provided thoughts around her own feelings regarding how symbolic gesturing was approached and whether it developed her professional role. Her voice has been used throughout, although her responses, both in the initial and subsequent interviews, remained fairly superficial at times with general statements being made rather than critical reflections of the impact of symbolic gesturing in facilitating attachments. She was the first key person to be interviewed so the researcher's lack of skill in developing and following up comments regarding symbolic gesturing during the interviews to retrieve some more in-depth thinking could have also contributed to some of the more superficial responses. Key person two provided a contrast to key person one in her thinking around symbolic gesturing. During the initial interviews she provided some in-depth responses which may have been in part because of her additional responsibilities as language leader. However, it was in the subsequent interviews that she provided insightful reflections and thinking around her role as a professional when implementing symbolic gesturing to her key group. She was able to articulate her thoughts critically and weave in aspects about attachment and her role within it. The researcher had to make considerable effort not to allow her voice to dominate in the analysis and ensure there was a balance between all the voices without losing the valuable contributions she had made. She made some reflective comments, particularly in theme three, regarding the intimate relationships and how symbolic gesturing had informed her own practices. Key person three also provided some insight into the value of symbolic gesturing with her in-depth reflections regarding symbolic gesturing and attachment. She drew mainly on her experience as a

manager rather than a key person when responding to questions about symbolic gesturing. She discussed what she has observed with the practitioners she was responsible for at the nursery with some inclusion of her own practices. During the initial interviews, this generalised approach to other practitioners in their role as key person was redirected back to herself in the interview with some success, although it was felt she was trying to provide the correct answer rather than a personalised one. During the initial interviews she discussed the responses with theoretical explanations in a rather abstract way, listing roles and responsibilities rather than utilising her experiences. During the subsequent interview, she continued to make generalisations about the staff she had worked with and supported, although within this, she did weave in some of her own practices. This managerial perspective provided another dimension about how symbolic gesturing was used. It was therefore considered equally valuable as a unique voice and complemented the other two voices in creating the whole discussion of the data.

4.2 Theme 1: Practitioners sense of self as key person using symbolic gesturing: roles and attributes

This theme provided an overview of each participant's professional identity as a key person within the day nursery and their views concerning symbolic gesturing as a means to enhance and develop key relationships.

The key person approach in the nursery policy documentation on achieving positive behaviour is described as working where the whole focus and organisation to enable and support close attachments between individual children and individual practitioners (Behaviour policy: 2010, see appendix 6). The key person approach is an involvement; an individual and reciprocal commitment between a member of staff and a family. It is an approach which has benefits for children and parent, the key person, and the nursery (Elfer, Goldschmied and Sellek, 2003). However, nursery practitioners are not always equipped to manage the complexities of working in these close relationships to form successful attachments (Elfer, 2006).

For key person one, an overview of her role was described when she reflected on the infant/key person relationship. However, the specific detail or challenges of her professional role were not considered:

For me it's like having someone a child can go to and know and have a strong relationship with as well as obviously keeping them developed and understanding what they are doing, knowing how to develop them further.

As key person one indicates, in the initial interviews, all three participants tended to cite what was expected of them in terms of duties and job roles as key person rather than revealing their inner feelings about developing relationships with the children in their care, during the initial interviews:

Well I think it's useful having EYFS posters on the wall and things like that on the wall ... especially in the staff room because you're so drawn to it ...it's so clear what your role is.

For key person three the role was described in terms of learning objectives and the bureaucracy of the nursery rather than the emotional aspects of the relationship during the initial interviews:

The key person is responsible for observing children. They then use those observations to plan activities for the children linked to the medium term plan and then evaluate those activities and decide the next step for their own children... their own key group.

Prior to the initial interviews being conducted, each participant had reflected upon and recorded their thoughts about their job role as part of a staff meeting workshop. This data revealed that their focus was primarily in meeting children's enjoyment and to provide their favourite learning activities, similar to the responses of key person three. There was also an emphasis upon the language they used with the children, in particular the open-ended questions they expressed to the infants. These initial reflections corresponded with the nursery job description record (appendix 7):

- *To plan, resource, implement and evaluate learning through play programme.*

It would appear that although each participant was responsible for the holistic care of the infants the continual focus on learning and language through play remained the primary objective of their role. It seems, therefore, that an understanding of the importance of play in the children's lives and all-round growth and development was well understood by the participants (Nutbrown and Page, 2008). Furthermore, they highlighted understanding of what was expected of them in general and what their

professional role entailed. However, in the job description (nursery job description, 2007, appendix 7) there were also statements about the emotional relationship that should be nurtured:

- *Providing secure relationships in which children can thrive,*
- *For children to feel secure and comfortable with staff*
- *The key persons to show unconditional regard for the child in a non-judgmental manner*

This documentation highlighted the importance of close relationships between infants and adults and, in particular, the monotropy relationship between key person and infant (Bowlby, 1997). However, it didn't expand upon how this could be achieved and therefore was interpreted by the key persons in many ways. For key person one, the objectives of the job description was achieved with infants being comforted, although how they are comforted was not clearly defined:

As primary carer in our setting, evidence of settling the infant in is when the infant looks for comfort and goes to the key person. They seek for comfort and the key person seems pleased to be with them.

In the initial interview, when asked about the emotional relationship, key person two described her role, albeit without specific examples, as a person who is aware of personal needs; making the infants feel valued as individuals in addition to meeting their learning needs:

I feel a key person is somebody who takes care of the children's needs, their complete needs and the holistic needs of that child. It is our role to make them feel secure and to make them feel valued when they come and play with us.

Therefore, when probed further about the emotional relationship, key person two began to explore her position and what it meant to the infants she cared for. She used terms such as 'valued' and feelings she had of security associated with the mother-infant relationship. When the 'mothering' role is of high quality, and she is physically and emotionally attuned to her baby, then healthy development occurs (Winnincott, 1986). The reflections of key person two about her relationship included taking care of the holistic needs of the infant and providing a secure base. Attachment is at the core of the key person approach providing close and specific relationships (Nutbrown, 2011). Thoughts concerning attachment were not recorded

in detail during the initial interviews and when indirect references were made they tended to be focused around times of transition, as key person three indicated:

I spend quite lot of time implementing the transition policy when a new child comes to nursery. I also implement it when an infant goes up to another group. When this happens the key person who had the child or baby before would then go up with them and stay with them for several sessions in order for the baby to familiarise themselves with the new key person whilst still having someone familiar close by. Relationships can be built up and any peculiarities - likes and dislikes of the children - can be discussed and talked about prior to the change so no child is actually left alone with a new key person.

This is a common way of describing what attachment means, although undivided attention, finding a secure base and maintaining security could all be considered equally valuable when describing the relationship (Read, 2010:42). When asked the same question, key person one focused upon the one-to-one relationship being important but in more generalised terms of development:

I think having someone a child can go to who they know and have a strong relationship with is important and part of my role. My main job is to keep the children and babies I look after well developed and develop my own understand of what they are doing when they play so I can record this in their records.

The lack of reflection upon specific examples around children in their care, when describing the role as a key person during the initial interviews, was not anticipated by the researcher. This may be because each participant was possibly cautious in revealing too much about their emotional states as a key person to the interviewer during the initial interviews. They generally described their role as a set of perceived attributes, with some initial considerations around the emotional relationships with the infants in their care. It could be argued this was a way to protect their own personal identity and emotions and to maintain a controlled and professional manner and persona (Hoschild, 2003). Reasons for this could be their lack of experience in becoming responsible for infants and coping with nurturing the emotional relationship. Key person three considered this in her reflections during the post-interview as an experienced key person and manager, when discussing new staff at the nursery. She described their lack of confidence and inhibitions as factors in delaying positive relationships with an infant. She believed the newer staff in their role as key person were guarded in showing their real emotions because they were

feeling vulnerable themselves as adults in the care of young babies, but wanting to exude a professional persona:

The adults sometimes find it very difficult to show their emotion with the children and they almost show embarrassment when they are interacting. They seem not to be confident in expressing emotion and tend to be either switched off, or distant, in their facial expressions. More experienced people would overcome this, but with newer, less experienced staff coming out of college they find showing their emotions really difficult, especially in front of people they are working with. I'm not sure why, but they seem inhibited by their own demonstration of emotion and their reactions to the children. It becomes almost like rehearsed statements. So, for example, they tend to say things like 'oh you're fine, you're fine' as a way of trying to suppress any emotions, or emotional behaviour, both in themselves and from the child. I think the child doesn't need you to say that they're fine they actually need a little bit more touching, smiling, or maybe just a different tone in your voice to show it is ok to be emotional. The key person also seem frightened of going to do something wrong especially in front of other adults and act as if it's a reflection of how good they are as a child carer. Sometimes it's to the point that it almost stops them from reacting in any way at all and they just stand there with closed body language looking very awkward and folding their arms.

This was also reflected, in part, in responses of key person one in the initial interviews when discussing how she revealed her feelings to the infants and to her peers. For her this seemed to be maintaining a happy persona at all times and not revealing inner feelings of vulnerability or lack of being able to cope:

I think to be a good key person you need to have good communication, and be always happy so the babies see you're happy. I also think good communication with the parents is important. I think it's good the staff get on here too, especially when we are working in the same room because If we had lots of arguments then it would rub off on each other and cause distress to ourselves and then the babies, so it's better to have a good relationship with each other and be happy. I think being upbeat, bubbly is really important and a practitioner shouldn't be too quiet, or put themselves in a corner and hide away, but someone who is willing to put themselves out there and try new things.

Although this could be considered appropriate behaviour to display to the infant, key person one suggests that revealing an emotional state is challenging and may cause disruption to relationships with the infants and, in particular, peers. The perception of how a key person should present themselves in order to appear professionally adequate and emotionally in control is an area (Hochschild, 2003) describes as 'emotional management.' This is where the professional reveals an image of

controlled persona and behaviour even at times when it could be contrary to the inner feelings they are experiencing, resulting in emotional labour. A key person caring for young children is an intense and emotional relationship requiring the recognition and ability to tune in and recognise their own emotions in order to be successful (Trevarthen, 2001). When the skills to accept one's own emotions are lacking, then the interaction becomes less successful and more superficial. As a result of this, missed opportunities with infants were an area frequently mentioned by key person three. She felt the overwhelming responsibilities of care could become too much to cope with when working with the infants and made particular reference to less experienced staff. She said the less experienced staff observed would use specific strategies as a way of coping with their inadequacies. They would work through the day in a procedural fashion, following the routine but spending little time enhancing quality relationships. Perceiving their role from a procedural perspective could also could result in practitioners unsuccessfully interpreting what the baby is trying to express through body language or otherwise (Dryden, 2005; Elfer, Goldschmied and Sellek, 2003). Key person three considered this was one way the practitioner dealt with stressful situations and managed emotional labour. This was confirmed when each participant was asked about any particular skills they would need to have in the day-to-day work of their role. The response from key person one highlighted the amount of writing and paperwork to be completed. Although this was an important element to her work it also suggested that by referring to the systems rather than the relationships she was involved with, there was a lack of considering emotions as significant, as stated in the job description (appendix 7): '*Encourages positive relationships, spending time with them*' - and this was not drawn upon in her response. She was the most recently trained and less experienced staff member and emphasised the bureaucratic, professional role rather than the personal role. She emphasised the requirements of the professional but not the more intimate aspects of professional emotional engagement thus giving little away in her initial interview responses.

Similarly, in the initial interview, key person three spoke more about a key person's duties in terms of children's learning rather than the attachments formed in emotional relationships:

Well the role of the key person in this setting is quite specific and is discussed with members before they start working so there is not any doubt what their role is. They have their own key children; obviously they have a small group of children who they are responsible for ...they are responsible for observing those children for using those observations to plan activities for the children linked to the medium term plan and then evaluate those activities and decide the next step for their own children.... They also keep the children's learning journeys files.

This rather cool, bureaucratic and official response highlights the balance between what is expected of the key person in terms of meeting legislative requirements and the care and attachment significant in development of the infants in their care. Key person three was the most senior and carried the most responsibility in the team and possibly regarded this response as the answer that was expected. Towards the end of the initial interview with the same key person, it became evident that there were personal qualities not fully defined in the job description, but which were expected in order to be a successful key person in developing the relationship with the infants they care for:

The personal qualities a staff member needs to have are a sense of humour, they need to be kind and caring, they need to care about the children to make them feel secure, and they need to be interested in the children's well being.

It was therefore evident that there was some understanding of the role of the key person, outside of transitional periods, when considering attachment, such as having an established secure base and receiving physical comfort such as 'snuggling in' (Read, 2010:42, EYFS, 2008).

However, a shift occurred in thinking when symbolic gesturing was used in daily practice. Rather than describing the key person role as an extension of their job descriptions and expectations previously recorded, they reflected on how the symbolic gesturing was integrated into the daily routines of the nursery. They expressed how it had helped to build their confidence in becoming more expressive with the infants. It also allowed each participant to initiate a new approach with the infants and learn together at the pace they chose rather than it being imposed on them. As key person two revealed in the post-interview:

The way we learnt how to symbolically gesture was through a DVD, which was actually very musical and expressive. We found watching the DVD with the children was much more useful than sending a girl to go on a training course who would be then too embarrassed to use signs and try to show us,

like when we did makaton we didn't actually use them in the end and it was difficult to get other staff to copy them.

Key person one focused upon how symbolic gesturing was a significant addition to her practices, but how it made her feel was quite daunting:

I think the main issue for me is the confidence because it's quite new and it's not something small in the way we show what we are trying to communicate. However, I think it's important because it's something that's going to make a difference in our relationships.

Confidence and expressing emotion was discussed further by key person three who focused upon how new key persons compared to more experienced key persons found difficulty in expressing themselves with others around:

It's not fair to expect inexperienced nursery practitioners to know exactly how to approach the children emotionally and develop attachments without having any experience. They need more experienced staff with them to model and support their own emotional development and communicate to the babies in a way that supports attachments.

From a Winnicotian perspective, drawing parallels between the key person and his definition of good enough parenting illustrates the challenges of the role for more recently trained practitioners with less experience (Davis and Wallbridge, 1991). Key person three, who was more experienced and in a managerial position, considered how more experienced staff working and carrying out symbolical gesturing with less experienced staff could resolve some of the issues to create an emotional holding climate and enhance attachment.

In the post-interview, key person three discussed how the more experienced key person had proved to be role models for the less experienced key person. As a result the less experienced key person was becoming more experimental in their own approach in using symbolic gesturing and feeling less inhibited, as she says:

The less confident key person will copy and model the confident practitioners. An example of this was yesterday in carpet time, one of the new apprenticeships who had been working with a more senior member of staff and who had been really conscious about body language was gesturing really beautifully about the weather today and babies were really interested in what she was doing, how she was moving. They seemed to be in the moment together and enjoying each other's company. It just goes to show how symbolic gesturing can support and develop confidence when we are doing it and demonstrating it. The apprentice was relaxed and the babies responded

to her and then the babies responding back. There was a real snowball effect... perpetuates the response.

Bowlby (1953) advocated carers to become a secure base for the children in their care and to have the sensitivity, consistency, reliability and attunement to develop the relationship. He also considered carers have the capacity to absorb protest, alongside the ability to see infants as autonomous and sentient beings with feelings and projects of their own (Bowlby, 1990; Holmes, 2001). It seems that symbolic gesturing was one way the key person described above could develop these attributes to support infant's emotional development. As indicated in comments of key person three, and as key person one states below there was flexibility in the use of symbolic gesturing. It wasn't perceived as a set of procedures, or an approach that was uniform with everyone having to master it within a specific time frame, but was much more fluid in its approach. This was in part, was the success of it being implemented and, in turn, building crucial personal relationships with infants. As key person one states in the post-interview:

With symbolic gesturing it can support the child. They then know you are directly talking to them using gesturing. It is part of all the fun it's not about having the correct sign or a strict regime where everybody has to get it right all the time, it's much more trial and error and if they didn't really want their nappy changed and it happens then it doesn't really matter.

This theme drew on the understanding about their roles as professionals working in a nursery setting. This theme introduced a fresh perspective of themselves and the children in their care as they implemented symbolic gesturing. The change in conceptual thinking about their professional role and expectations became more apparent as the weeks progressed. These changes were more evident when responses were drawn from the subsequent interviews. The participants' began to critically reflect on their role and the emotional relationships with the infants in their care, drawing on examples when using symbolic gesturing to enhance this aspect of their role. How the interaction between participant and infant was supported and enhanced by symbolic gesturing is the focus of theme two.

4.3 Theme 2: Interactions: emotional responses using symbolic gesturing

This theme focused upon how symbolic gesturing was used to enhance the interaction between the key person and infant relationship, with a focus on how emotional states were conveyed and expressed between participants in their role as key person, and infant. During the initial interviews, they described the non-verbal interaction between themselves and the infant on a fairly superficial level. A more detailed explanation was expected by the researcher, when asking key person one about how they initially interact with infants:

To be at their level, have your arms open and be welcoming, rather than stood there with your arms crossed.

The initial responses also merged in part with elements of theme one in relation to their consideration of their professional role in the emotional relationship with the infants in their care. During the latter part of the initial interviews, the notion of care and the levels of care witnessed in previous practice with staff were discussed in terms of really knowing their infants. During the initial interviews, they referred to symbolic gesturing being one way that could enhance the relationships, but as key person one explained, the key persons would already need to have an interest in the infants for symbolic gesturing to be successful:

We are quite receptive to how symbolic gesturing could be used at the moment. The key persons are really interested and so they make sure they understand the infants. I mean, other new people caring for babies wouldn't understand and would just think the babies are making noises for the sake of making noises whereas I think we are lucky here because you know the people in the baby room have a good understanding about babies. They care enough about them and understand them and also they want to understand them and what they're saying. I think that's what is good here.

The initial responses, therefore, revealed some acknowledgement of having an interest in the infants they care for and the significance of the close individualised relationship they are encouraged to build based on external policy within the EYFS (2008) framework. Emotional development is central to infant development and this is best achieved through close bonds, with key adults to care for them. Current thinking within EYFS (2008) refers to the infant needing a key person relationship and, where possible, a one-to-one relationship where the relationship can become intimate so that consistent care is provided (DCSF, 2008). Although this study doesn't have the capacity to discuss the impact neuroscience has had on early years

practice, this evidence illustrates that nurseries that are able to provide such individualised care in supporting the emotional development of infants is crucial (Berk, 1989; Gerdhardt, 2004). However, in reality, individualised care is a challenge for any form of group care and opportunities for this type of care were less frequent at this nursery during specific times of the day. For example, an observation at the beginning of the twelve week period showed that the lunch period was challenging in terms of sustaining quality one-to-one relationships with infants, as this observation reveals:

There is so much going on in the meal time environment it is challenging to just record the main interactions between one key person and infant - the key person (3) is looking after a group so her interaction is with everyone which also includes child P. Child P sometimes doesn't respond directly when asked a question, but copies peer behaviour, such as singing, rather than seek the key person's commands or questions. In addition, I felt the interaction may have been even less if I was not there. I felt that everyone was aware of my presence and were looking frequently towards me when an infant or key person made a comment or physically moved.

In her reflective journal key person three also noted during meal times that symbolic gesturing was a method to gain the infants attention because it was a more demanding time of the day, as she states, '*a busy time with lots going on*', although in the early stages of observing the key persons this was not evident. However, key person two did consider the value of symbolic gesturing as advantageous in developing one-to-one relationships within group care at certain times of the day:

I think when you sign you become more aware of each individual within the group and this is helpful during song time or lunch. You sign to an individual and look for the responses. Previously, by just using language, it was so easy just to sort of go over the infants, giving instructions more generally about what to do, without intending to.

Some of the command signs used to support the procedures were the 'stop', 'listen' and 'help' to the group and there was undoubtedly a sense of interest and enthusiasm about using symbolic gesturing in the initial interview responses. According to key person one:

Symbolic gesturing could be a way to encourage staff and parents to move away from the key person's frustration of not understanding what the baby or the toddler wants or is trying to communicate. Using symbolic gesturing could

build up a relationship which involves one-to-one time and gets the infants to use the signs with us when they want something.

However, the focus during the initial interviews continued to be centred around communication. For key person two during the initial interviews, this was about using symbolic gesturing as way to aid communication:

It's a way of enhancing verbal communication, used alongside other forms of communication. It just adds more meaning and it makes language very inclusive.

Although there is some value of symbolic gesturing to aid verbal communication - including ongoing research into the effect of symbolic gesturing, such as word concepts - there is little focus upon how it improves the emotional aspects of the relationship and emotional literacy between key person and the infants in their care, (Daniels, 2004; Goleman, 1994; Steiner, 1999). Emphasis on verbal communication was the therefore unsurprisingly the focus of consideration for the key persons in their initial interview responses, as key person three highlights:

Baby signing being fairly new in the nursery only extends the normal signing we would use with children that were having difficulty in developing their speech patterns. So to me it's just using baby signing at an earlier stage and the results have been very positive from what I've observed in the setting so far.

Although during the initial interviews verbal communication was emphasised, symbolic gesturing was also considered by key person three as a way to communicate when emotionally interacting, as she explains:

When considering the emotional interactive relationships using symbolic gesturing, it's important to use signing as a means to back up the actual words you are speaking; to always remember to gain eye contact, to be down at their level, to look happy and enthusiastic about what the children are doing

Key person three considered the effect of symbolic gesturing as a way to express herself non-verbally as well as verbally (Kirk, Pine and Ryder, 2011; Messinger and Fogel, 1998). This was supported by an observation the researcher carried out with key person two and one of her key children during a lunch period. The time spent communicating to an individual infant was noted and the way the emotional needs were met was noted:

A voice calls 'it's ready' and the key person gets up and walks to the kitchen, 'it's ready!' she says and fetches the plates. 'Oh wait we need to get spoons, can I have some spoons?' she asks. She puts the plate of food down on the table and is passed some spoons. She stirs with the spoon. 'Hot' she says, 'be careful the dinner is hot! You need to blow.' She blows face, puffing her cheeks. She faces child A and says :'It's hot' and passes her the plate – 'be careful'. The child looks at her and makes a blowing face. 'Hot', she says, 'hot. 'Yes hot', replies the key person. Child A takes the spoon and gingerly puts to her mouth. She looks at the spoon. The key person then gives out the remainder of the lunches and sits down again where she was before. She makes a blowing face and says: 'Hot – be careful'. She then watches and responds to any needs. Child A continues to eat and concentrates on her food, swirling the food around on her plate and back and then puts it in her mouth

This observation reinforces the participant as key person in understanding the importance of taking time to slow down at particular points in the day. It highlights the attention in supporting individual infant's needs, especially when such times could be regarded as busy group time. It also illustrates the interaction using symbolic gesturing alongside speech. During this observation, the infant responded to both speech and the signs being used and understood what is being commented upon – the hotness of the food. She is obviously aware of what the message the key person is trying to convey and acts accordingly. Key person two is quick to acknowledge what the needs of the infants are – cleaning hands, giving out spoons - and seems confident in her approach with the infants. The reflective note of key person two also revealed her thinking during the post-interview concerning a busy period and how symbolic gesturing was a useful approach when dealing with emotions:

Symbolic gesturing helps the child calm down before mealtimes

Meal times are challenging in managing and maintaining one-to-one relationships. There are three meal times each day so they are a valuable opportunity to observe how symbolic gesturing was used during busy periods. During the later weeks of implementing symbolic gesturing, there were occasions when the key persons 'forgot' the presence of the researcher and were more natural in their interactions. However, at busier times, it was observed that the interactive episodes between key person and infant were fewer with a greater emphasis upon procedural approaches and verbal interactions which reinforce the details of the routine in order to get through the busy period. This was highlighted in an observation with key person one in week nine:

A lot of general talk is occurring to the group with intermittent one-to-one interaction occurring. However, periods of one-to-one interaction are infrequent. Generally, instructions are addressed to the group, unless a child is doing something different and then they are focused upon – not negatively, but attention is drawn to them to conform with the rest of the group who are following instructions, such as to wipe their hands with a cloth. Help is physically given to the individual where necessary. There are signs used with the instructions given, such as wiping the face, as part of meeting their practical care needs. One-to-one communication with infants is inconsistent although care needs are addressed throughout.

In the UK, nurseries' discourse can be predominately about not giving too much one-to-one time and focusing upon practical care in their ethos on how to care for infants (Gerdhardt, 2004). Although there is increasing research into the emotional care of infants - including the concept of professional love considered by parents and professionals (Nutbrown and Page, 2008) and research into key persons working with infants (Goouch and Powell, 2010) - there continues to be an emphasis upon cognitive development and the significance on peer social relationships (Sellek and Griffin, 1996). In part, this was evident during the observation where the focus was upon meeting the care needs of the infants during a meal time. When referring to the job description a significant element of the key person's role within the nursery setting, is to facilitate and create learning opportunities for the infants. The participant did use some gestures during the meal to aid expected behaviour and this was also discussed by key person two when considering her own use of language during the day:

There was almost too much language in my key group and I have noticed I have better relationships since signing. I have been more responsive and I think that having the space to use signing has helped.

Similarly, when key person one discussed mealtimes she concurred she used specific signs to aid conformity:

I used more subtle signs - sit down, drink - all the vital actions for 'doing' words during the day and at meal times. I do vary them slightly and have used them in conjunction with my body language if a child is getting anxious and when I need the infants to do something for example, sit for lunch.

In the post-interview responses, symbolic gesturing was described as an aid to verbal communication to alleviate frustration, as well as providing time for the infant

to convey their needs through gesturing before the key person tries to meet their needs. Recognition of symbolic gesturing as an approach to knowing the individual more intimately, and allowing response time, was evident as key person two says:

It's a way of enhancing verbal communication. Using symbolic gesturing alongside verbal communication, it just adds more meaning and it makes language very inclusive, obviously everyone communicates differently and some infants get really frustrated when they don't communicate and can't communicate what they want. By using symbolic gesturing they could see what we trying to say visually and verbally and were beginning to mimic the gestures themselves or trying to say what they wanted. All the children were different in their responses and I think you need to have knowledge of the individual (infant) before you jump in and signing helped me to look and listen before I tried to sort things out.

Key person two was therefore able to manage a variety of situations and make sense of the infant's feelings of independence through symbolic gesturing. She was also thereby establishing good and loving relationships with each of the infants in her care as individuals rather than treating them as a group entity by responding differently to each infant and what they were trying to convey (Steiner, 1999).

Similarly, entries in the reflective journal of key person three indicate that the child used symbolic gesturing to express what they were trying to convey and in the process alleviated their own frustration:

Symbolic gesturing has improved the interaction between myself and the child. The child's language has developed because of this. The child is using signs when their speech is not clear and I am not frustrated when trying to make the child understand what I want them to do.

Additionally, key person two felt there were also opportunities for spoken language to be more creative and the infants were able to express themselves more fully using symbolic gesturing:

The infants seem to be a lot more creative with language they used and this has only occurred since I have begun using gestures. They are trying alternate ways to show their emotion, using their own made up signs and body language.

Key person two felt using symbolic gesturing placed more emphasis on building up the relationship through empathic engagement and the different ways they could interact rather than just talk to their infants in their care:

Instead of spending long periods of time talking at the infant I am now trying to encourage them to actually respond to me by using single words with signs alongside using intonation in my voice.

'Reciprocal attention and verbal responses are central to play with very young infants and an important part of the development of attachment between child and carer'. (Macleod-Brudenell and Kay, 2008 p.200) In the post-interviews, deeper reflective thinking about the key person's role and their emotional interactive relationship with the infants was evident and they talked about being much more in tune and contemplative regarding their own behaviour and the ways they allowed the infant to voice their feelings. This was evident as key person three revealed:

I think particularly when children show negative emotions I am much more in tune now than before because before it was, 'oh are you sad?' But when you've now got your gesture for sad, I think its much more personal and you're really tuned in and I think that supports the children as well because they are much more responsive.

It became evident that symbolic gesturing was having an impact on this type of individualised care and key person two explained in her post-interview how it had enhanced the individualised care in supporting development:

I think through the twelve weeks of doing symbolic gesturing I have become more sincere and personable in my approach to the infants I care for. As a result of this I think they feel treated as competent individuals knowing they are being responded to authentically.

This was reinforced within key person two's entry in her reflective journals about the effects of symbolic gesturing during the three month period:

- *Improved awareness about my key children as little people*
- *Made me aware of having a slightly different relationship – a relationship where we learn together*

When discussing proto-conversations between infants and adults, infants are perceived as essentially social beings becoming part of the nursery culture by constructing meaning with others (Trevarthen (2001). Each participant responded to the infants as social beings, and understanding of their role in the relationship, were considered more fully as a result of symbolic gesturing. They were more in tune with the infant and this was considered crucial for effective emotional development and communication. To be fully attuned - when something is the focus of joint attention -

during communication is important in the relationship to ensure that children are listened to and that key persons also listen very hard to themselves when they interact with children. If this is achieved successfully richer and more personalised relationships occur, with each being valued for the contribution they make when interacting (Goouch, Powell and Abbott, 2003). During the post-interview key person two recognises these achievements with the infant:

It's really being in tune with the individual. Some children appreciate a smile, or thumbs up a lot more than verbal communication such as 'wow, look, at what such and such have done.

In addition how these achievements were celebrated was recognised as being approached differently prior to the introduction of symbolic gesturing. Symbolic gesturing facilitated key persons' reflections on their own responses and to question how they were responding to infants, as key person two discusses how celebration of achievement is recognised at a more personal level:

Celebrating achievement... it's a lot of clapping and a lot of big movements, you know, and we are really celebrating that, but I have noticed that celebration now for me doesn't have to be so obvious, now it can be a very small gesture... like a smile to the individual infant.

Using symbolic gesturing, therefore, lessened the exaggerated gestures previously used to show recognition of achievement in a general manner. The quality of the recognition in building infants' self-esteem rather than what could be considered a tokenistic recognition of achievement appears to have proved to be more effective. To build self-confidence, adults should portray a confident reassuring manner. Through a more authentic relationship of genuine recognition, rather than outward exaggerated gestures, the infants in the relationships gain a sense of trust (Kelly, Manning and Rodak, 2008). The use of symbolic gesturing was therefore significant in terms of key persons reflecting on their own behaviour and physical movement when reacting to the infants in their care. In Vallotton's (2008) study sensitivity and responsiveness were more evident to children during interactions in which the caregiver was engaging with them using symbolic gesturing. The study highlighted that when the practitioner used symbolic gesturing, particularly when responding to infants' interactions their own behaviour changed and they became more responsive to what the infant was asking. Similarly in this study, each participant, as a result of

their own initial input and empathic responsiveness, created a process of shared learning and emotional shift within the relationship with the infant. Key person two emphasised the infants' emotional state and how the infants, using symbolic gesturing, she cared for were becoming not only more expressive, but also more self-conscious of themselves within the relationship:

It seemed at the start that the children were showing a kind of embarrassment in trying to tell me things as individuals however these are the same ones that are more expressive with the signing and the ones that are approaching me more so maybe it was them being more aware of what they were trying to say that brought on the type of embarrassment.... I wonder if they would be going through that development stage of being self aware.

This echoes Erikson's (1963) theory on self development the autonomy versus shame stage occurs when the child is about eighteen months and highlighted the tentative balance infants experience at this stage between trying something different, but also how they could become easily embarrassed if this was not successful. It is at this stage that the infant considers whether they can do things for themselves or whether they continue to rely on adults for support. It is the period when an objective view of the self begins to develop and secondary emotions such as embarrassment and self consciousness emerge (cited in Schaffer, 1996). To do things independently means taking risks and becoming autonomous, a challenging aspect in a child's development. Without sensitivity and empathic responsiveness from the key person the infant may not emerge successfully from this stage with repercussion for the development of the self. In supporting the use of symbolic gesturing, the infants were allowed to be embarrassed at their own trials and errors of gestures as a way to communicate alongside speech sounds and knew that they were supported. If the key person expects too much too soon or they are restrictive this embarrassment would have been compounded and the use of symbolic gesturing made redundant in its efforts to support emotional responsiveness (Pizer, Walters and Meier, 2007). The adult's role therefore within the relationship, and the understanding of the personal relationship and the subsequent responsibility that goes with it, continued to be recognised, as was evident in a reflective note from key person two:

Child A seems much calmer using signs more and more regularly when she wants something throughout the day and in communicating simple wants and needs – enjoying the more personal communication from the adult, in a relaxed way

This theme considered how each participant perceived their interactions with infants both before and after symbolic gesturing was employed. During their journey they were able to make informed responses in the post-interviews about the way symbolic gesturing has evolved into more than making word connections, by highlighting how it has helped to enhance emotional relationships and develop a more empathic understanding of the infants' needs. Evaluation of how symbolic gesturing enhances intimate relationships and recognition of attachment and connectivity will now be explored.

4.4 Theme 3: Intimate relationships using symbolic gesturing: recognition of attachment and connectivity

The majority of the responses within this theme were drawn from the post-interviews. This theme appeared to pose the biggest challenge for each participant to convey, particularly key person one, although they did articulate facets of attachment behaviour and how relationships were established and maintained with infants. This was illustrated in a response from key person two about being a 'mother hen' and guiding the infants. Mother hen is defined as someone who assumes an overtly protective maternal attitude and ambience (Oxford Dictionary, 2010).

The practitioners are signalling and guiding their body language... It's more mother henning now in the way we work with the infants than we had previously.

This maternal attitude and overtly protective behaviour forms part of what we consider as forming attachments. Attachment is not a one-off event but a developmental process, which occurs as a function of the developing relationships between babies and young children and their caregivers. Infants develop internalised working models of relationships which change as a result of experience and, in light of new information they receive, about how people relate to one another, as in the example of the 'mother hen' type approach towards them (Bowlby, 2005). In considering attachment, there is a need for the primary carer to be emotionally, as well as physically, available, in order to provide a secure base (Holmes, 1993).

During the post-interview responses, key person three referred to the key persons in the nursery as the mother role and how symbolic gesturing had improved their engagements:

When you are a mother with a young baby on your own you will do all sorts of daft faces, raspberry noises, tickle their tummy. Young adults in nursery are inhibited to touch the child in that way and therefore using signing that doesn't inhibit them helps in a way to train them to actually want to do the same sort of things you want to do at home with baby where you would be making your own gestures up

This highlighted the parallels between the relationship of the mother and the infant relationship compared to the key person and the infant relationship. As with the mother-infant relationship, the key person-infant relationship requires a maternal instinct at some level with close bond taking time, effort and attention to develop (Bowlby, 1997).

An observation record written in her reflective diary illustrated how key person two reflected upon this form of engagement, and how attention and sensitivity towards the infant when using signing had created more insights about the infants she cared for:

I was able to observe my facial expressions. Interestingly, I found my general gestures were far bigger even when I was not signing. I noticed the children were more engaged when I was using signs and I felt this was more personalised as the session was quieter. All children were responded to individually and eye contact between us was far more prevalent.

Key person two also considered how the infants felt when being directly spoken and signed to making them feel wanted and cared for, therefore increasing the level of attachment (Pugh and Duffy, 2006). It was something that perhaps hadn't been employed previously and therefore focusing upon the emotional relationship and how the child became more aware of the one-to-one relationship was significant as a result of symbolic gesturing as she continues:

It definitely helped the emotional relationship because of the closeness that has developed during signing and I am becoming much more self-aware, the infants are also being responded to on a much more personalised level than before symbolic gesturing.

This was also echoed in her dairy when reflecting upon her relationships with the infants when she symbolically gestured:

I am even more eager to find out what is inside those wonderful brains!! As a key worker, my relationships with my key children are far more personal. I find I am helping all the children whereas before with a lot going on it was easier to leave the quiet children.

Considering how infants were differentiated in the level of care and interactions, there seems to be links with the infants' temperaments, their emotional demands and, consequently, the amount of attention they receive. However as a result of symbolic gesturing, the 'quieter' infants' who had previously been left for longer were now getting more individual attention. The moment of 'tuning in' can be helpful in unexpected ways, because infants often express emotions that they find impossible to deal with themselves (Smith, Cowie and Blades, 2005; Trevarthen, 2001). Singular moments of the key person tuning into their own responses may help them consider what type of emotion an infant is expressing. This can be particularly true for those infants who would perhaps had been sidelined by the more demanding infants (Mooney, 2010).

This was considered when key person one discussed how an infant, through symbolic gesturing, was an equal partner in the tuning-in of the relationship and the key person's relaxed attitude enhanced the interaction:

It was not something the infants could fail at, or be expected to do, and because I and the children were learning it together, it was quite nice and more personal with both having time to develop together. I think it also enhanced the relationship between myself and child J as he is showing more awareness of feelings and her emotions. he faces you when communicating and makes hand gestures for me to come when I am wanted or needed, helping me to meet his needs more quickly and appropriately.

However, key person three did draw upon the challenges key persons faced when being confronted with an infant's feelings and emotions and how this affected their own emotional state and responses as key person toward the infant. She touched upon the complexities and tensions of the key person's role and how developing the emotional relationship could be challenging:

Any sort of interaction, including generally observing, has to be achieved through one-to-one interactions where the key person is able to tune-in to the child. Unfortunately, this is particularly difficult to get inexperienced and immature staff to do for varied reasons. There are other things you can always teach them and demonstrate, but the emotional interaction aspect of care is very difficult to teach and very difficult to model. Sometimes the less

experienced staff are so inhibited and concerned they are doing something wrong they hold back, not wanting to make a fool of themselves. I suppose one reason for this could be their own social care from their own environment and the way they were exposed to emotions and interactions as a young infant. Therefore, their own upbringing is undoubtedly influential in how they professionally care for the infants at nursery.

This highlighted the level of attachment from a key person perspective and how individualised it could be when compared to a prescriptive approach found in a job description or a policy. The key person (see appendix 5) discusses how an infant attachment figure in the setting, their key person, is built through a strong relationship to provide security with the infant. However, in reality, how this is interpreted and acted upon to some extent is based upon the key person's own experiences and upbringing of what an attachment figure is. For all carers, their own upbringing would have a significant effect upon how they emotionally invest in the relationship with the infants they care for. The key person would therefore be drawing upon - particularly at stressful times - their own experiences of comfort, attending to needs in relation to what they have been influenced by (Belsky and Rovine, 1988). If a key person's lack of experience or understanding about what an infant requires in terms of love and comfort, then awareness of careful watching and listening to changes in behaviour and tuning-in can be minimal. This can result in the needs of infants being overlooked (Mooney, 2010). Symbolic gesturing is therefore an approach not simply to aid verbal communication but also an opportunity for the key person to reflect on their own movements and behaviours when interacting and emotionally engaging with the infant. It is a form of communication that encourages the key person to observe and listen with purpose thus creating a greater understanding of what the infant is trying to convey and therefore emotionally investing in the relationship (Vallotton, 2010). As an approach to support their role in tuning in and providing comfort and warmth, symbolic gesturing was considered significant by the three key persons during the subsequent interviews and was a way of being physically and emotional available to the infant.

Key person two reflected back to the time before she used symbolic gesturing compared to the present time of carrying it out regularly and how it made her more aware and closer to the infant thus reducing the likelihood of stressful situations occurring and supporting their emotional development:

Right from the beginning when we did our first interview I thought it would maybe help, although I was cautious about the spoken language being less. The emotional relationship has developed with signing because of the closeness that has come from it and the children who are using more symbolic gesturing are tending to show more self-awareness and I am more aware of meeting their needs too.

Key person three drew more generally on the way symbolic gesturing has been used as a way for key persons to approach their role and enhance attachments during interactions:

If it's used correctly and systematically by enthusiastic key workers it can develop attachment and security and being in touch with the infants. It slows the adults down in their approaches and interactions and provides better eye contact with the child. In a busy day nursery the staff will sometimes talk to each other and talk over the infants' heads, which I know can happen at home too. However, signing helps to get down at the child's level and face the child and actually communicate and engage with them rather than barking out directions or comments and not really listening to them.

This view supports the policy on language and listening and positive behaviour highlighting the significance of listening and responding and using eye contact so that the child knows you are listening and as a result improves relationships between key person and infant.

Similarly, in the diary of key person one, there was recognition of how symbolic gesturing had helped the infants, but also the key person themselves in expressing and making connections within the relationship:

It helped me to communicate and let the infants express their emotions to me. Because of this it helps me understand their emotions more, it gives me confidence as a key person to connect more with my key children.

As previously discussed, the concept of connectivity - being emotionally connected to the infant - as a way to enhance attachments, was recognised (Elfer, 2007). When directly referring to attachment, key person three expanded upon how symbolic gesturing was used in particular situations to develop a richer and more emotionally enhanced relationship:

There are many occasions when signing can be really beneficial and opportunities arise to develop attachments. Signing helps to get down and at their level and face the child. Similarly when babies are being fed via bottles, or when they are being changed.

Settling and attachment as a process where one human being learns to connect with another cannot be hurried (Lindon, 1998). More success in terms of quality and relationship development occurred when adults showed warmth and were responsive to the individual needs of the infant (Nutbrown and Page, 2008). Opportunities to enhance attachments were therefore occurring throughout all forms of interactions including symbolic gesturing as key person three indicated and key person two further explained when she spoke about the relationship becoming more expressive and congruent as a result of using symbolic gesturing. She felt it was apparent the confidence of both parties was improving and as a result they were almost taking more risks in the openness of their personal feelings than had previously been evident during the initial interviews:

Children feel they could come to me a lot more and I have got a lot more open and a lot more expressive. I was anyway, but now I am a lot more. I look a lot more open than before.

The development of confidence in the key person is a significant feature of the emotional attachments that can be developed and enhanced (Berk, 1989). Confidence in being able to interpret infants' needs was also supported by the comments in the journal of key person three:

- *Confidence improved, helped in understanding their needs bringing the relationship closer*
- *Gives me chance to understand the children's wants and needs the relationship being a lot more closer*
- *I have started to use baby signing naturally and it helps me to understand the children's personal needs when caring for them*

These entries illustrated her thoughts about symbolic gesturing and how they were developing. Interestingly, in the last point she includes how she was beginning to use symbolic gesturing naturally and was not viewing it as an add-on practice, but part of everyday practice when meeting the infant's personal needs. She also expressed how this in turn enhanced the closeness of the relationship. This illustrates how key person three used symbolic gesturing to support the separation between mother and infant and how the emotional closeness between key person and infant was evident:

His mother puts him down on the floor and he is smiling. His cousin jumps over to him and makes 'aaaah' noise. Child P looks at him and laughs. His mother says 'there you go' and puts him down. 'Have a good day and I will

see you later'. Key person three walks over to P, 'Hello' she says – 'you look cool in your t-shirt' (gestures hello and t-shirt). P responds by laughing and rocking back. He stands up and bounces on his legs. He looks around the room at the other children and makes a noise. He is holding hands with his cousin who is 3 years old. He is emotionally responding to key person three by looking at her and responding, by laughing. Come and play (gestures) 'over here P we have got some toys for you'. He is guided over to the toys and he goes with her readily. 'See you later, bye' says his mother (gestures). He turns and smiles, but doesn't wave. He turns back and goes to the toys.

The smooth transition of handing over the infant to the key person is apparent. There was an emotional bond between the key person and infant, although to describe the bond was to describe what was observable between the two. However, the atmosphere was also significant in this observation and using the reflective technique similar to the psychoanalytical perspective of the Tavistock approach to observing children the sense of what occurred and the atmosphere was also recorded (Reid, 1997). The parent was relaxed and there was evidence of the genuine warmth of the greeting by the key person and the emotional responsiveness of the infant. Although it can't be assumed symbolic gesturing was central to this transition, signing allowed responses to be articulated in more than just words. Babies perceive the mental states, intentions and feelings which inspire and give significance to their mother's expressions. A mother, or in this study, key person who deals affectionately and sensitively with the infant will find that they will respond with attempts at communication during pre-speech. As Klein (1924) says, babies who were well-fed and emotionally comfortable with the mother would be able to balance their psychological defences, depressive anxieties and self-image with the external world as long as their emotional needs were met (cited in Berk, 1989). The observation provided the ways this can occur, not only with the mother, but also with the key person and how the triad relationship was enhanced as a result of symbolic gesturing.

This theme evaluated how the intimate relationships using symbolic gesturing between the key person and the infant had occurred and developed. The post-interview responses highlighted the recognition of attachment and connectivity, as well as the complexities around these areas, including personal feelings being a key person. Each key person discussed how the shift in their thinking about relationships with infants had occurred as a result of using symbolic gesturing.

4.5 Theme 4: Practices: Gesturing and symbolic gesturing

The fourth theme considered how gesturing was used daily as part of practice and whether symbolic gesturing could be distinguished from gestures in general. Some signs could be perceived as gestures that were used naturally rather than specifically symbolic gestures. Gesturing is a development stage occurring with all pre-verbal infants, specifically pointing (Goldin-Meadow and Singer, 2003). The use of gesturing is common as a form of communication and symbolic gesturing simply puts shared meaning to the gestures. This is so the infant and adult can selectively discriminate what the gesture used is trying to convey in terms of message and communication (Namy and Waxman, 1998). This theme drew upon the subsequent interview responses of the key persons. The consideration of how much naturally occurring gesturing was used, compared to symbolic gesturing, was significant when considering its value as an approach to enhance the key person-infant emotional relationship.

During an observation it became apparent that gesturing and symbolic gesturing was used in parallel to each other by key person two during their interactions:

Key person is standing and saying, 'Eat it up' and gestures to eat.... child A is rubbing her eyes and looking at key person two. She is pushing the plate away. 'Wait a minute until your friends have finished and then I will collect the plates', says key person two, signing wait. Child A slowly closes and opens her eyes and pushes the plate away again. 'Wait' is said and signed. Another infant pushes the plate away – 'stop' is said and signed quite loudly, with authority, 'we need to wait for our friends to finish.' Child A rubs her eyes and makes verbal contact with the peer sitting next to her. 'Are you tired A? – signs sleep –'we are going for a sleep in a minute' ... child A looks and acknowledges with a gaze and looks down, she doesn't smile or seem angry but interested and content.

This observation suggests that gesturing and symbolic gesturing are closely linked and that some gestures are perceived as both symbolic and naturally occurring gestures such as eat. This highlights how they complement each other and that they are used together. In another observation of key person one, during the latter weeks of implementing symbolic gesturing, it became evident symbolic gestures were used more frequently, although everyday gestures continued to be used too:

Key person one says and signs 'more J'? J nods his head in agreement. She points to her ears, 'have you all got listening ears'? She points to her ears. 'Good afternoon everyone' she greets everyone with a hand touch and smile, one by one. 'Good reach J, good boy have you got your listening ears on?' 'Yes, it's Friday!' Again goes around the infants one by one signs and says 'can you tell me'? Signs 'yes it's Friday! Well done its Friday!'

This episode was confirmed by the tally records completed as part of the observation process. In the latter weeks symbolic gesturing was recorded as being used by key persons simultaneously with gestures in general and symbolic gesturing was used more frequently as the weeks went on. Although the tally charts estimated that the use of symbolic gesturing increased from 25% in the first month to 75% in the second month. In the third month a furtherance of both symbolic gesturing and gesturing was used although less significant than in the first few weeks. The recording of observed symbolic gesturing from the tally chart showed that the participants in their role as key person used symbolic gesturing alongside gestures during the three months.

In the observation recordings, it became evident that gesturing and symbolic gesturing was used simultaneously throughout the twelve week period. There was an increase in the symbolic gesturing around week nine, and this remained stable until week twelve. Infants didn't initiate symbolic gestures during the twelve weeks, although there was a slight increase in responses as a result of being gestured to. Twelve weeks was considered a very short period of time for the infants to mimic the symbolic gesturing and the focus was upon the perspectives of the key persons' thinking regarding symbolic gesturing, rather than specifically measuring the number of gestures. Although twelve weeks was considered a short time, Goodwyn and Acredolo, (1985) found in their intensive studies infants were mimicking symbolic gestures within a few hours of training and consolidating their understanding during a few of weeks. Similarly Garcia (2005) also evidenced symbolic gesturing could be learnt during a short period of time. However, their focus was its use to support language and verbal development and a specific programme was initiated, with key one-to-one time dedicated to symbolic gesturing being repeatedly used for specific words. In this study, the focus was to explore the views of participants in their role as key person using symbolic gesturing. The participants involved in this study didn't partake in any intense training with the infants they looked after and the focus of the study was not the amount of symbolic gestures used, but how it could enhance

interactions generally in gaining a better understanding of what the infant needs. There was little formality in the way symbolic gesturing was implemented which therefore contributed to the gradual use of the approach and the autonomy about how much was used in practice.

As stated previously the confidence of each key person using symbolic gesturing grew and the introduction of new signs reached a peak around week nine. After this time it became part of the key person's repertoire as an alternative way to communicate with the infants and to express themselves and show emotion. Key person two talked about how this was a gradual process built-up during the course of the day over the 12 week period:

Firstly, I noticed I was implementing it at breakfast for drinking and eating and then at nappy time for about the first 6 weeks. Then gradually I was doing more signs and the infants were responding to them. I then used more throughout play and as I got more confident I began to use it throughout play during the day. A few weeks after that I noticed I was using signing a lot more as a form of self-expression in my language and body language. I found I was using symbolic gesturing with everyday gestures and they went hand in hand.

Key person two reflected how she used symbolic gesturing and gesturing together and how they could be complementary to each other. As she further explained:

Most everyday signs are universal and are a way to use body language. However, I also completely agree with using specific signs for specific things. There are ones which work really well, such as sit down when you put your hands together and sign sit down, or drink, or milk.

Whatever the sign, I think the infants understand meaning from your body language. However, using symbolic gesturing recognises specific meaning. Therefore, I think symbolic gesturing and gesturing complement each other beautifully.

This highlighted how gesturing and symbolic gesturing were closely connected, although symbolic gesturing maintained a uniqueness because of the meanings conveyed compared to general gestures.

Key person one reinforced the idea that the two could be used together and the shift to using symbolic signing felt a natural development to what was already being used with the older children in the nursery:

I find them quite easy to use alongside spoken words because they are very, very similar to everyday gestures anyway and I think that the children find them similar as well. Although baby signing is fairly new in the nursery, it only

extends the normal signing (Makaton) we would use with children that were having difficulty in developing their speech patterns. So for me it's just using signing at an earlier stage.

However, gesturing and symbolic gesturing was differentiated by key person two when asked to clarify if there were any benefits to symbolic gesturing:

I think the difference between everyday gestures is that I use them all the time, such as when I am waving my arms about. This is ok, but when I use symbolic gesturing I feel it makes me more consistent and therefore understood better than just waving about. Other key persons and infants are also much more inclined to copy you if you're doing a symbolic gesture that looks like something rather simply waving your arms about, which doesn't mean anything to anyone apart from me and how I am expressing myself.

Garcia (2005) promotes the use of a standard sign language such as ASL or BSL whereas Acredolo and Goodwyn (1992) advocated parents and infants to make up their own signs. The key to the success of symbolic gesturing was that if the same signs were consistently used to interpret meaning when signing to the infant, then more success was likely and the infants were inclined to reciprocate more often (Jarvis, 2008).

Symbolic gesturing in this study was modelled on a programme, although some signs were flexible in their use and agreed together as a nursery team. For key person one, symbolic gesturing was helpful in maintaining parity with each key person and provided the infants with shared meanings and thinking:

It's helpful to have the symbolic gesturing DVD programme as a support scheme because then everyone is using the same gestures. It also makes the staff more expressive using the same gestures and provides more meaning to them to share with each other. If you are using your own gestures or they are made up some key persons' are more flamboyant than others and they only have personal meaning. This can be confusing for the children. If we are doing the same gestures the children can pick it up and copy each other. I have observed that. So it is helpful to have a set of gestures that are the same and all the staff uses them.

Symbolic gesturing was therefore valuable in supporting interactions, as discussed in theme two. Similarly, in theme one key person two also discussed how she managed her expressive behaviour. Using symbolic gesturing enabled those less experienced and possibly more inhibited practitioners, such as key person one, with little expressive language to use their body language rather than rely upon verbal

communication. From a Winnicottian perspective, indirect communication is pleasurable and involves different techniques. The mother communicates what the infant is wanting through a gesture, although she already knows what the infant needs before the need is expressed by gesture (Berk, 1989). This is the challenge for the key person who is less experienced in 'knowing' what the need was, and decoding the indirect communication of the infant in their care before and, in some cases, even after the infant has made attempts to gesture their needs (McNeil, Alibali and Evans, 2000). Using symbolic gesturing helped each participant in their role as key person to recognise what was being communicated through the consistent approach used in the nursery. As key person three previously commented upon in theme one, the less experienced and immature staff were not always recognising the needs that the infants were expressing because of their own inhibitions. This resulted in them either not gesturing at all or being overtly flamboyant in their gestures. In theme two, key person one and two drew upon how their own experiences of symbolic gesturing had altered their understandings and recognition of their own feelings in meeting the needs of the infants in their care. What is germane here is the communication of feeling and attitude, whether verbalised or not between key person and infant. Therefore, symbolic gesturing as a uniformed way to interact and was especially useful an aid for those who were more self-conscious and less experienced in being emotionally responsive to the infants in their care as key person two reflects on someone new to the nursery:

You have to be very clear when using symbolic gesturing. You tend to use the same signs and statements frequently to express yourself and I am noticing this with a new trainee when she's saying stop or please ... it is a lot more concise than it would have been previously. She would in the past have been waffling on to the infants verbally and gesturing, but without external meaning.

Having understood the shared meanings of symbolic gesturing, the emotional responsiveness and communication of feeling, as well as the closer relationships and empathy between the infant and carer began to emerge and develop as key person two says:

I find myself much more expressive, with facial expressions in particular, but the children are a lot more expressive, they are showing much more variety of emotions and applying them sort of to suit what they're saying so it's quite like, look! They are guiding you with their hands and guiding you with their eyes and their facial expressions.

The infants in key person two's care were therefore becoming in-tune with each other and creating a mindscape where they are becoming adept at interpreting each other's signals and therefore developing a richer, more intimate, relationship (Smith, Blades and Cowie, 2005).

This theme explored the differences between gesturing and symbolic gesturing. The responses which brought this theme together were important in gaining an understanding of how symbolic gesturing was being implemented in a nursery environment to enhance the emotional relationship between key person and infant. Although some of the responses had already been explored within the previous themes, theme four was central to the research questions regarding whether symbolic gesturing rather than gesturing more generally was a valuable approach to enhance the key person-infant emotional relationship. In conclusion symbolic gesturing was considered an approach that could successfully enhance the relationship between key person and infant because it was more specific and consistent in terms of meaning. However it was also evident it complemented naturally occurring gestures and when used together alongside speech created supported and developed an understanding of infants' emotional needs.

4.6 Theme 5: Potential barriers to symbolic gesturing

A potential barrier to the use of symbolic gesturing could be the way it was implemented during the twelve week period. As key person one expressed, this was a significant feature to the success of symbolic gesturing at this nursery.

Had it been more structured I would have felt quite trapped...once I start something I can't get out of it and can't pull back, I begin to feel out of depth and don't want to do it.

The informality of the programme and training involved for key persons to use symbolic gesturing was therefore significant and impacted upon the success of its use, as each participant suggests:

I would definitely encourage other settings away from formal training and I would encourage them to look at other resources such as the ones we would use because I think that was such a lovely way to introduce it. A sense of

failure was not there and it allowed staff to experiment with it in their own time to learn based on the children responses (key person two).

We were able to implement it at our leisure because practitioners were not formally trained. There wasn't a fear of failure to use signs, and we felt comfortable introducing it very slowly. The children weren't under pressure to use the signs at all (key person one).

Because it was something initiated by us it was something that just slipped into practice – because it wasn't as structured it kind of slipped in; things were quite subtle – if there had been formal training it would have been different, I think we would have been recording it more (key person two).

All the comments drew on the emotional aspects of doing something new and the feelings associated with this as a professional. They talked of 'fear of failure' and 'pressure', 'formality' 'training' and there was a sense that these were areas they had previously experienced and found challenging in their role. This was highlighted by key person one and two who were more recently trained than key person three. As discussed in theme one, the responsibilities of staff therefore in these positions were considerable and having autonomy but also support to develop symbolic gesturing was part of its success.

This was supported by key person three's comments, who also considered the way symbolic gesturing was implemented would impact on its success. Although key person three had more experience in her position of seniority and accountability, she did see the value of formal training for newer staff, recognising the challenges of the role:

I think there is a need for extra training for staff working with babies, including symbolic gesturing. The babies and toddlers in the baby room would have different needs and it is not fair to expect inexperienced level 3 nursery practitioners to know exactly what to do in every given situation.

This highlighted her concern around key persons of a certain level and the expectations that were inherent in their role. Key person two reflected on the successful way symbolic gesturing was implemented at the end of the twelve weeks however she also spoke about the reservations she had at the beginning:

Initially, I wasn't sure and felt apprehensive about symbolic gesturing because of the mixed messages possibly impinging on language and how to begin implementing it. However, once I had seen the emotional relationships develop, through our approach, then I really did think it was beneficial.

Although key person two illustrates the success of using the symbolic gesturing as an approach to enhancing the relationship, she also draws upon the initial concerns she had, as stated by key person three, about the lack of experience and understanding of approaching infants when using symbolic gesturing.

Key person three, the most senior person in the nursery recognised the challenges and barriers faced by not only her but key persons in general, when approaching their role as a professional. She highlighted when they were experiencing staffing issues and having to manage more than their usual workload symbolic gesturing was seen as an extra or separate from the essentials in a care setting:

Time constraints are an issue with the key person's professional role. I think sometimes if there is a shortage of staff and people are off sick then the staff are rushing and therefore they don't take the time to do the baby signing.

This highlighted the tension between the emotional aspects of caring for the infants versus their other duties and responsibilities of a professional key person as discussed in theme one. The key person's professional role and ensuring they establish and maintain intimate relationships with the infants in their care was challenging and even though symbolic gesturing paved some way to alleviating this challenge, tensions continued to exist (Roberts, 2002). Symbolic gesturing was viewed as harder to sustain when the nursery was short-staffed and during difficult and pressured times, according to key person three and was also illustrated in the observations of busy times discussed earlier. There were therefore limited opportunities at certain times to actually stop and listen to the needs of the infant on a one-to-one level during this time.

This was highlighted by an observation where an infant got distressed with key person one:

The environment in which the observation took place seemed a little strained and the infant was getting distressed. The key person made comments to try and warm to the infant and justify why he was crying through explanations to another adult present ('maybe he's tired?') although she was obviously concerned about the crying and moaning because she kept looking back and putting her arm around him. The infant responded to key person gestures of comfort (no symbolic gestures used). However because there were a small number of infants (4 others) in the care of the key person the interaction of the one infant was intermittent and it felt this was a time when some one-to-one time would have been ideal. The other infants were coming to and from the physical space between the key person and infant.

This episode illustrates how the key person was trying to maintain control of the distressed infant by verbally explaining what was happening and justifying the reason for the crying but was obviously becoming distressed herself. Although it can't be assumed symbolic gesturing would have made a significant difference there were reflections about how it made key person two feel in her subsequent interview responses about dealing with difficult situations:

It's far more personal and just brings that feeling with it to engage with the infants, during times of pressure and when we are getting a message across.

This highlighted the tension between the emotional aspects of caring for the infants versus their duties of responsibilities as a professional as discussed in theme one. The key person professional role and ensuring they establish and maintain intimate relationships with the infants in their care was challenging and even though symbolic gesturing paved some way to alleviating this challenge tensions continue to exist. The theme outlined the potential barriers that may impinge on symbolic gesturing being successful and the participants' perspectives about why it had been successful.

4.7 Concluding Thoughts

4.7.1 The themes

The concluding thoughts reflect and draw together some aspects of the previous themes and include additional reflections each participant revealed about symbolic gesturing.

The initial interview responses prior to symbolic gesturing were somewhat superficial when they considered the emotional relationship between themselves and the infants in their care. They had made references to the importance of care and learning but in a generalised sense. Generally, day-care may offer assurances of safety and the meeting of physical needs, but this is quite separate from providing the individual psychological states and emotional holding environment that occurs in the intimacy of a consistent one-to-one relationship (Wadell, 2002). In theme one this

was particularly evident in the responses given during the initial interviews. The role of the professional was either considered in abstract ways or as a set of objectives to be achieved. However, when probed further, there were some revelations concerning the emotional relationship between key person and infants and this was highlighted toward the latter end of theme one and explored in more depth within theme two. Symbolic gesturing seemed to have enabled more reflection on the emotional aspect of their role. Theme two exposed the participants' thinking around the emotional interactions that occurred between themselves as a key person and the infants in their care as a result of using symbolic gesturing. The theme drew upon both the initial and post-interviews as a way to explore any shifts in perceptions on the emotional engagement with the infants when they had implemented symbolic gesturing. In the post-interviews, each participant drew upon opportunities they had when feeding, playing, signing, and conversing, including symbolic gesturing to improve the relationships with the infants. In theme three, the emotional engagement was further explored with attention paid intimacy and attachment within the relationship. Having a close relationship where each of the key person's emotional and observational capacities provided a kind of tuning in with the infant and emotional closeness appeared to have been achieved (Berk, 1989; Schaffer, 1996; Wadell, 2002). This was evident in the post-interviews when the key persons considered the use of symbolic gesturing and were able to articulate the richness of the emotional relationships they had developed through its use, as well as how the infants had responded to it. Key persons also considered that symbolic gesturing had affected their relationships with other key persons by creating more intimate relationships. They reflected upon their experiences and how it had resulted in a positive whole team approach. Key person one responded about the enjoyment of symbolic gesturing whilst key person two highlighted how the relaxed approach to the introduction of symbolic gesturing had contributed to its development. How empathy and responsiveness when using symbolic gesturing improved significantly between the staff which then led to their practices being further embedded with the infants in their care was captured by these thoughts. As a result the emotional relationship and attachment between key person and infant was enhanced. The reflections also provided an alternative lens to view how symbolic gesturing was received between the staff and how a non-threatening way of intervention enabled each participant to share their experiences and become the student again - in

essence the child again - empathising with the infants when developing something new. Theme four highlighted the significance of how each participant viewed this sharing experience through a consistent approach of gesturing. They continued to value gesturing of all forms, but revealed symbolic gesturing was unique in allowing the key person to be more expressive and specific in their approach when interacting with infants. They discussed how it had supported alternative ways in approaching infants and becoming emotionally in-tune without relying on spoken language. Each participant also discussed how symbolic gesturing had developed their self-awareness and the messages they portrayed during interactions with infants. Symbolic gesturing was viewed as harder to include when short-staffed and during difficult or pressured times. There are therefore limited opportunities at times to actually stop and listen to the needs of the infant on a one-to-one level.

The themes provided the biographical accounts of the participants in their role as key person when using symbolic gesturing in a day nursery across a twelve week period. The themes drew specifically on the emotional relationships with the infants and how symbolic gesturing was regarded as a useful approach to enhance these relationships. This included how symbolic gesturing could be implemented; its value in supporting the emotional relationship and attachments alongside recognition of the barriers that could inhibit the successful implementation of symbolic gesturing.

CHAPTER 5: CONCLUSION AND RECOMMENDATIONS

5.1 Introduction

This chapter draws together the evidence on symbolic gesturing obtained from the qualitative analysis and discussion of the data.

It offers a number of conclusions for each of the two research questions. The chapter then considers the implications of these findings for theory and practice, with reference to how symbolic gesturing was used. It then outlines the limitations of the study and suggests a number of ways the research could be developed further.

5.2 Findings of the research

During the interviews, each participant reflected how symbolic gesturing enhanced their emotional relationships with infants when working as a key person. They were able to describe their experiences and attitudes to show how symbolic gesturing, through gradual integration became part of their professional repertoire and improved their interactions with the infants in their care. The observations carried out by the researcher mirrored this in part, although they also recognised, at times, that individualised attention with each infant was challenging in group care and opportunities to symbolically gesture were sometimes missed. Each participant felt the infants were responding more to their symbolic gestures and looking for the signs alongside any verbal communication. As a result they became more engaged with the infants and were getting to know the infants at a deeper emotional level in comparison to previous practice. This facilitated the development of a more collaborative relationship between key person and infant where they were more in tune with each other, thus strengthening the emotional bonds of attachment.

5.3 The conclusions drawn from the findings and how have they helped to answer the research questions

In relation to the first question posed, the research set out to examine whether the use of symbolic gesturing facilitates a key person's ability to reflect on their professional role when considering emotional interactions with the infants in nursery. The research drew upon the participants' perspectives in their role as key person, who all worked in the same nursery setting. The research findings concluded that each of the participants articulated what constituted their professional role from an emotional perspective when working with infants in more detail after using symbolic gesturing. In the post-interviews they discussed how symbolic gesturing had provided the opportunity to reflect on the emotional interactions with the infants in their care. In theme one, the participants drew upon their professional role and the challenges they faced in their position as key person in maintaining a professional role, as well as emotionally investing in the relationship with the infants they care for. Key person three highlighted that, although, knowledge of attachment was evident, experience of ways to develop attachment were lacking with the less experienced staff. This was also reflected in comments from key person two about the way she modelled symbolic gesturing both for infants and other staff, and how it improved her own interactional style. Key person one also felt confident that symbolic gesturing could be valuable as an approach to enhance emotional relationships in the setting she was working in because she believed the staff already possessed the motivation and desire to support the infants in their care. She did, however, recognise this could potentially be unique to the staff at the nursery and new people, albeit at the nursery or elsewhere, may not have the same appreciation or understanding of babies. As an approach she also reflected upon the way symbolic gesturing was informally introduced being instrumental to its success in developing emotional interactions. Having the autonomy of trial and error in carrying out symbolic gesturing whilst maintaining a professional role, was explored and as key person two stated, it marked a change in her emotional interactions and developed a more personable approach rather than being procedural and just giving instructions. She felt that as a result of symbolic gesturing, her confidence and that of the infants was improving, and as a result they were taking more risks in the openness of their personal feelings. However, key person three did draw upon the challenges key persons faced when being confronted with an infant's feelings and emotions and how this affected their own emotional state and responses toward them as a professional.

This was an area discussed in the literature review and discussion when considering the professional and emotional labour of the key person's role in looking after infants. It recognised the complexities of the emotional investment whilst maintaining a professional identity as key person three reflected when she discussed the interactions between key person and infant.

Considering research question two about whether symbolic gesturing was a valuable approach to enhance the key person/infant emotional relationship and therefore improve attachment, key person two discussed how symbolic gesturing was enabling her to be more in tune with the infants. She also discussed how subtle signs were more effective than her more usual flamboyant gestures. Key person two also considered how the infants felt when being directly spoken and signed to in making them feel wanted and cared for, therefore increasing the level of attachment. It was something that perhaps hadn't been employed previously and therefore focusing on the emotional relationship and how the infant became more aware of the one-to-one relationship was significant as a result of symbolic gesturing.

Key person three drew more generally upon the way symbolic gesturing has been used as a way for key persons to develop their relationships. She discussed that symbolic gesturing is most effective when used systematically and correctly because it slows the key person's interaction down and allows for more touch and eye contact to be made.

In conclusion, all three participants had reported a number of benefits as a result of symbolic gesturing. They reflected upon their role as a professional and how symbolic gesturing had impacted upon their emotional relationships with the infants in their care. This was highlighted in their reflections regarding their professional role and what it entailed, and how they could actively pursue symbolic gesturing within this role in creating more emotional and personal relationships. The way symbolic gesturing was introduced and managed by the each participant was significant and gave them autonomy in their professional role. As a valuable approach to enhance emotional relationships, being in tune and becoming more personally involved with the infants was increasingly evident within the post-interviews. All three considered that symbolic gesturing could enhance attachment and promote one-to-one relationships. Therefore, symbolic gesturing would appear to facilitate the development of richer and more meaningful relationships between key person and

infant. The research is unique because it considers whether symbolic gesturing could be a valuable approach to enhance the key person/infant emotional relationship and if using symbolic gesturing facilitates the key person's ability to reflect upon their professional carer role with the infants in nursery.

This study has explored how symbolic gesturing could enhance the emotional relationship between key person and infants (Goodson and Sikes, 2001; Goodley et al, 2004). Research on emotional attachment has been studied extensively from a primary carer perspective (Bowlby, 2005) and in recent years the emergence of secondary attachments has been investigated particularly with infants attending childcare facilities outside the home (Goldschmeid, 2005; Elfer, 2006). This study explored the key person's perspective using symbolic gesturing and its influence on their professional role in the current climate with regard to their key person role in day nursery within the EYFS (2008) framework and how attachments are currently perceived (Bremner, 1994).

5.4 Limitations of the research

The research was initially piloted, using a questionnaire and this was beneficial in gaining the views of a number of key persons, across a range of geographical locations and settings, about of symbolic gesturing. However the final research may have been more beneficial if more than three voices had been used. An area particularly challenging was enabling each participant the opportunity to articulate and open up in their reflections and thinking around emotional relationship and attachment from a professional perspective. Perhaps more voices would have provided further insight. The length of study was considered valuable in gaining a sense of each key person's perspective at the beginning of the study and then three months later after using symbolic gesturing. The comparisons were evident although a further interview at the end of six and then twelve months could have enhanced the study further still.

Including another setting as a comparison may have been valuable. Another nursery that had implemented symbolic gesturing would have provided some insights into its effects in a different setting. However, when approaching settings there were few

nurseries using symbolic gesturing and many had an outside professional entering the setting to hold a session, signifying the different models of implementation used. It was felt the procedure and skills in carrying out interviews was known. However on reflection as a novice researcher, the mode of delivery of the questions, particularly with the initial interviews hadn't been fully realised and may have led to less extensive answers on the part of the participants. Furthermore as a lecturer at a college and specialising in early years it was felt the dual role of researcher/lecturer had an impact on responses, as respondents were quite apprehensive, particularly in the initial interviews. However the responses in the post interviews were much improved and more extensive.

5.5 Implications for theory and practice

This research suggests that symbolic gesturing is a valid and practical approach for supporting the emotional relationships between key person and infant in care alongside providing an opportunity for the key person to reflect on their professional role when considering emotional interactions. In this study symbolic gesturing was confirmed as an approach that could be used successfully and this was consistent with the literature (Acredolo and Goodwyn, 1985, 1993; Vallotton and Ayoub, 2009). The key person approach in the literature review discussed the key person's role situated in the EYFS (2008) and the emotional investment needed for it to be successful. It discussed attachment in the nursery environment and how the practitioners provided a secure base with consideration of symbolic gesturing as a valuable approach in enhancing attachments (Read, 2010). These challenges were mirrored in the discussion about the complexities of the key person role in how they look after the infants and their role as educator rather than carer. This included spending time carrying out procedural duties and less time spent on building quality relationships (Dryden, 2005; Elfer, Goldschmied and Sellek, 2003). This individualised, quality time, however, was crucial if attachments were to be formed (Bowlby, 1997; Holmes, 2001; Winnicott, 1964). Therefore implications for theory are exploring the way symbolic gesturing supports emotional interactions and attachment, with those who are in paid employment as professional carers (Hochschild, 2003). This was an area felt to be significant to the research and one

discussed around the emotional labour of the key person and how they manage their caring role through surface and deep acting (Theodosius, 2008). The discussion concluded that symbolically gesturing had enabled each participant to become reflective and thoughtful in the way they communicated and this may help to reduce emotional labour. They had to stop and consciously manipulate their movements and the way they expressed themselves to the non-verbal infants. As a result they were beginning to get more feedback for the infants in terms of verbal and body language and thus became more responsive themselves in the way they interacted with the infants. This was consistent with the increased emotional responsiveness, as a result of symbolic gesturing, found in previous studies (Vallotton, 2008).

In the post-interviews, when discussing symbolic gesturing, the participants' considered there were potential benefits and they were able to reflect on how the relationship had developed and how they had become more observant and responsive to the needs of the individual. They also reflected upon the opportunities they had to use symbolic gesturing and that the approach began to be filtered into their everyday repertoire rather than existing as an additional part of practice that is compartmentalised to a specific time of day. Although there were concerns that symbolic gesturing may impinge upon language development, there was no evidence for this and symbolic gesturing was viewed as being beneficial to those needing more interactional input, as well as ways to enhance communication in alleviating frustration and being understood (Jones, 2010). In this study, natural gesturing alongside symbolic gesturing was discussed in clarifying differences when gesturing, with natural gesturing being considered as a normal developmental process for infants (Pizer, 2004). In the discussion advantages to framing the naturally occurring gestures already used giving them a consistent meaning was considered valuable (Pine, Knott and Fletcher, 2010).

5.6 Further Research

The findings presented in this thesis suggest that further research is called for. It is possible to identify a number of future studies which could enhance the existing literature and contribute to understanding the benefits of symbolic gesturing that could inform policy and professional practice. In the initial analysis, two themes were

considered relevant to the current study, although they were integrated into the final themes as a result of them being somewhat repetitious and less relevant in content to the research questions. These themes were:

- Collaboration and co-operation between staff
- Formal and informal training of approaches

These are areas for potential further research. Each of the participant responses regarding forms of training best suited to their practice could be explored further. The autonomy and shared experience of practice and delivering a programme/approach was significant to how it was received. This was evident in the analysis when key person two discussed how she would have felt apprehensive and quite negative if she had been told to do symbolic gesturing rather than taking the initiative herself and sharing ways to implement it. Further research about different modes of training to enhance practice would be an area to develop.

Collaboration and co-operation between key persons was also highlighted in the analysis and could be researched further. The participants' discussed how the approach to implementation and training of symbolic gesturing allowed it be integrated and shared successfully providing a climate of shared practice and relationship building among staff. This is an area of interest when considering communities of practice and how they could be developed in an early years setting (Wenger, 1993).

In terms of the research design, a longitudinal study would have perhaps been more beneficial in collating a range of data and the use of media, such as filming, could have provided more objective data rather than heavily relying upon the key person's conceptions of their journey using symbolic gesturing. A longitudinal study using multiple modes of data collection could be useful to provide greater insights into the emotional relationship between key person and infant when using symbolic gesturing.

5.7 Concluding Remarks

Prior to the research, there was some cautiousness on the part of the nursery staff about symbolic gesturing and how it would be received by the infants and if it would

interfere with their speech development. However, once immersed in the study and evaluating the research this was unsubstantiated. The research findings present a positive, affirming and non-constraining perspective on the potential uses of symbolic gesturing. These findings support the works of Bowlby with regard to attachment and how a successful emotional relationship between carer and infant is crucial for healthy development. Emotional interactions in creating such attachments have been examined through the works of key theorists such as Trevarthen and more recently Elfer's work about the key person caring for infants in nursery settings. Adcredolo and Goodwyn and Vallotton's studies on symbolic gesturing and its effects on infant development were also valuable in their contributions. In this study drawing on the studies of emotional interactions in creating attachments, has been considered an approach worthy of investigation, particularly from a key person's perspective. Early years and the role of the key person in nursery are currently being transformed with the increasing professionalism of the key person to maintain a good level of quality care for infants. At the same time developments in neuroscience have highlighted the emotional advantages of having close key relationships between infant and carer, whilst simultaneously an increasing demand for infants to attend nursery has been evident (Layard and Dunn, 2005) Therefore the key person is expected to professionally manage their role, which includes maintaining a standard of care and procedural duties, as well as emotionally investing in relationships with infants. Whilst this is considered reasonable in the field of childcare, this study has highlighted the complexities of the professional role. It has evaluated how symbolic gesturing can be employed as an approach to enhance the emotional relationship and enable the key person to reflect on their emotional responsibilities alongside their more practical professional responsibilities. The research presented here may therefore help to inform theory and practice about the value of symbolic gesturing in enhancing emotional relationships within day nursery settings.

LIST OF REFERENCES

Abbott, L. and Moylett, H. (2003) *Working with under threes responding to children's need*. Berkshire: OUP.

Acredolo, L. and Goodwyn, S. (1985) Symbolic Gesturing in language development: a case study. *Human Development*. 28, 40-49.

Acredolo, L. and Goodwyn, S. (1988) Symbolic gesturing in normal infants. *Child Development*. 59, 450-466.

Acredolo, L. Goodwyn, S. (1992) *Baby signs: How to talk to your baby before they can talk*. Chicago: Contemporary books.

Acredolo, L. and Goodwyn, S. (1996) *Baby signs*. London: Butler and Tanner.

Alderson, P. (2004) In Fraser, S; Lewis, V., Ding, S., Kellet, M. and Robinson, C. (2008) eds. *Doing research with children and young people*. London: Jessica Kingsley.

Ainsworth, M., Blehar, C., Waters, E. and Wahl, S. (1978) *Patterns of attachment*. Hillsdale, NJ: Erlbaum.

Anning, A. and Edwards, A. (2006) *Promoting children's learning from birth to five*. OUP: Berkshire.

Atkinson, D. and Walmsly, J. (1999) *The life story interview*. London: Sage.

Bannister, P. (2003) *Qualitative methods in psychology*. Maidenhead: OUP.

Barnes, P. (1995) *Personal, social and emotional development of children*. Milton Keynes: Blackwell Publishing.

Barnhardt, L. (2006) *Development of sign language for young children*. MA: University Wisconsin-Stout, Menomonie. Online at, www2.uwstout.edu/content/lib/thesis/2006/2006barnhartl.pdf (accessed, 10/09/2009).

Basit, T. (2010) *Conducting research in educational context*. London: Continuum.

Bates, E. (1976) *Language and context*. Orlando, FL: Academic Press.

Baxter, P. and Jack, S. (2008) Qualitative Case Study Methodology: Study Design and Implementation for Novice Researchers. *The Qualitative Report*. 13,4 544-559. Online at, www.nova.edu/ssss/QR/QR13-4/baxter.pdf (accessed, 04/2010).

Baydar, N. and Brooks-Gunn, J. (1991) Effects of maternal employment and childcare arrangements in infancy's on preschoolers cognitive and behavioural outcomes. *Development Psychology*, 27, 932-935.

Bell, J. and Opie, C. (2002) *Learning from research*. Buckingham: OUP.

Belsky, J., Burchinal, M., McCartney, K., Vandell, D., Clarke-Stewart, K. and Owen, M. (2007) Are There Long Term Effects of Early Child Care? *Child Development*. 78, 2, 681-701.

Belsky, J. and Rovine, M. (1988) Nonmaternal care in the first year of life and the security of infant attachment. *Child Development*, 59, 157-167.

Berk, L. (1989) *Child Development*. London: Allyn and Bacon.

Bonvillian, J., Orlansky, M. and Novack, L. (1983) Developmental milestones: Sign language acquisition and motor development. *Child Development*, 54, 1435-1445.

Bowlby, J. (1997) *Attachment and loss*. London: Pimlico.

Bowlby, J. (1990) *Childcare and the growth of love*. London: Penguin.

Bowlby, J. (1997) *Attachment*. London: Pimlico.

Bowlby, J. (2005) *A secure base*. London: Routledge.

Boyatzis, R. (1998) *Transforming qualitative information; thematic analysis and code development*. Thousand Oaks, CA: Sage.

Boyatzis, C. and Watson, M. (1993) Pre-school children symbolic representation of objects through gesture. *Child development*. 64, 729-735. Online at, www.jstor.org/stable/1131214 (accessed 12/2009)

Brailey, B. (1989) *Visions of infancy*. Cambridge: Polity Press.

Braun, V. and Clark, V. (2006) in Basit, T. (2010) ed. *Conducting research in an educational context*. London: Continuum.

Brazelton, T. (1990) *The earliest relationship*. USA: Perueus Books.

Bremner, G. (1994) *Infancy*. Oxford: Blackwell.

Brereton, A. (2008) A sign language use and the appreciation of diversity in hearing classrooms. *Early Years Journal*, 28, 3, 311-324.

Bretherton, I. and Bleeghly, M. (1982) Talking about internal states: the acquisition of an explicit theory of mind, *Development psychology*, 18, 906-921.

Briant, M. (2000) *The sign and sign playkit*. Carisbad, CA: Hayhouse.

Brooks-Gunn, J., Sidle-Fuligni, A. and Berlin, L. (eds.) (2003) *Early Child Development in the 21st Century: Profiles of current research initiatives*. New York: Teachers College Press.

Bruner, J. (1983) *Childs talk; learning to use language*. Oxford: University Press.

Chamberlayne, P., Bornat, J. and Wengrat, T. (2000) *Ethics in qualitative research*. London: Sage.

Charmaz, K. (2006) *Constructing grounded theory*. London: Sage Publications.

Clandinin, J. and Connelly, M. (2000) *Narrative inquiry*. San Fransisco, CA: Jossey-Bass.

Clarke, A., Kjorholt, A. and Moss, P. (2005) *Beyond Listening: Children's perspectives on early years' services*. Bristol: The Policy Press.

Clarke, A. and Moss, P. (2001) *Listening to young children: the mosaic approach*. Norfolk: National Childrens Bureau.

Clasien, J. (2008) *Children's attachment relationships with day care caregivers: associations with positive caregiving and the child's temperament*. Oxford: Blackwell Publishing.

Cohen, I., Manion, I. and Morrison, K. (2006) *Research methods in education*. London: Routledge Falmer.

Cooper, T and Roth, I. (2003) *Challenging psychological issues*. OUP: Milton Keynes.

Cresswell, J. (1994) *Research design: qualitative and quantitative approaches*. Thousand Oaks, CA: Sage.

Daniels, M. (1996) Seeing language: The effect over time of sign language on vocabulary development in early childhood education. *Child Study Journal*, 26, 193-208.

Daniels, M. (2004) Happy Hands: The Effect of ASL on Hearing Children's Literacy. *Reading, Research, and Instruction*, 44,1, 86-100.

Daniels, M. (2001) *Dancing with words*. London: Bergin and Garvey.

Daniels, M. (1994) The Effects of Sign Language on Hearing Children's Language Development. *Communication Education*, October, 43,4, 291.

David, T., Goouch, K., Powell, S. and Abbott, L. (2003) *What can we learn from attachment research birth to three matters, a review of the literature*. Nottingham: HMSO.

Davis, M. and Wallbridge, D. (1991) *Boundary and Space: an introduction to the work of Dr Winnicott*. London: Karnac Books.

Degtardi, S. and Davis, B. (2008) Understanding infants: Characteristics of early childhood practitioners' interpretations of infants and their behaviours. *Early Years* 28, 3,221-234.

Denscombe, M. (2003) *The good research guide*. Maidenhead: OUP.

Denzin, N. (1984) *On understanding emotion*. San Francisco: CA: Jossey-Bass.

Denzin, N. (1989) *Interpretive Biography*. London: Sage.

Denzin, N. (2001) *Interpretive Interactionism*, London: Sage.

Denzin, N. and Lincoln, Y. (2002) *Qualitative Inquiry reader*. London:Sage.

Denzin, N. and Lincoln, Y. (2008a) (ed) *Handbook of qualitative research*. Thousand Oaks, CA: Sage.

Denzin, N. and Lincoln, Y. (2008b) *Collecting and Interpreting Qualitative materials*. London: Sage.

Denzin, N. and Lincoln, Y. (2008c) *The landscape of qualitative research*. London: Sage.

The Department for Children Schools and Families (DCSF) (2008a) *Statutory framework for the early years foundation stage, revised edition*. Nottingham : DCSF Publications.

Department for Children Schools and Families (DCSF) (2008b) *Practice Guidance for the early years foundation stage revised ed*, Nottingham: DCSF Publications.

Department for Education and Skills (DFES). (2003) *Birth to three matters framework*. Nottingham: DCSF Publications.

DiCarlo, C., Stricklin, S. and Banajee M. (2001) Effects of Manual Signing on Communicative Verbalizations by Toddlers With and Without Disabilities in Inclusive Classrooms. *The Journal of the Association for Persons with Severe Handicaps*, 26,2, 120-6.

Doherty-Sneddon, G. (2008) The great signing debate. *The British Psychology Society*. 21, 4, 300-3005.

Dowling, M. (2005) *Young Children's Personal Social and Emotional Development*. 2nd ed. London: Sage.

Dryden, L., Forbes.? and Pound, P. (2005) *Essential early years*. London: Hodder Arnold.

Dunn, J. (1993) *Young children's close relationships*. London: Sage.

Edington, M. (2004) *The foundation stage teacher in action*. London: Paul Chapman.

Edmunds, M and Kuprinski, D. (2006) The issues: using sign language and finger spelling to facilitate early literacy skills, online at,
<http://www.pbs.org/teachersource/prek2/issues> (accessed 07/06/09).

Edwards, C., Gandini, L. and Forman, G. (1998) *The hundred languages of children*. London: Ablex.

Elfer, P., Goldschmeid, E. and Sellek, D. (2003) *Key persons in the nursery: building relationships for quality provisions*. London: David Fulton.

Elfer, P. (1996) Building Intimacy in Relationships with young children in nurseries, *Early Years*, 16,2, 30-34.

Elfer, P. (2006) Exploring children's' expressions of attachments in nursery. *European Early Childhood Education*, 14, 281-95.

Elfer, P. (2007) What are nurseries for? *Early Childhood Research*, 5,2, 169-88.

Ellison, G. (1982) Hand to hand: The joy of signing among hearing children. *Young Children*, 37(4) 53-58. Online at,
<https://portfolio.du.edu/portfolio/getportfoliofile?uid=77890> (accessed 09/2010)

Erben, M. (1998) *Biography and Education*. London: Falmer Press.

Erikson, E. (1963) *Childhood and society*. New York; Norton.

Felix, S. (2009) Sing and Sign, online at, singandsign.com (accessed 09/2009).

Early Years Foundation Stage (EYFS) (2008) Framework for the early years foundation stage, revised edition. Nottingham: DCSF Publications.

Finlay, L. and Gough, B. (2003) *Reflexivity: a practical guide for researchers in health and social sciences*. Oxford: Blackwell.

Garber, P. (1998) Knowledge conveyed in gesture not tied to the hands. *Child Development*, 69,1, 78-84.

Garcia, J. (2005) *Baby signing*. London: Match Media Publishing Ltd.

Gellner, E. (1993) *The psychoanalytical movement*. London: Fontana.

Gerber, M. (2003) *Caring for babies with respect*. LA, California: Resources for Infant Educators.

Gerdhardt, S. (2004) *Why Love Matters*. London: Routledge.

Glaser, B. and Strauss, A. (1999) *Discovery of Grounded theory, strategies for qualitative research*. London: Auldin Transaction.

Goffman, E. (1959) *Forms of talk*. Philadelphia: Pennsylvannia Press.

Goldschmeid, E. and Jackson, S. (1994) *People under three*. London: Routledge.

Goldin-Meadow, S. and Singer, M. (2003) From Children's Hands to Adults' Ears: Gesture's Role in the Learning Process. *Developmental Psychology*, 39,3, 509–520.

Goldin-Meadow, S. (2003) *The Resilience of Language: What Gesture Creation in Deaf Children Can Tell Us About How All Children Learn Language*. NY: Psychology Press.

Goldin-Meadow, S., Goodrich, W., Sauer, E. and Iverson, J. (2007) Young children use their hands to tell their mothers what to say. *Developmental Science*, 10,6, 778–785.

Goldschmied, E. and Jackson, S. (1994) *People under three*. London: Routledge.

Goleman, D. (1995) *Emotional intelligence, working with emotional intelligence*. London: Bloomsbury.

Goodley, G., Lawthorn, R., Clough, P. and Moore, M. (2004) *Researching life stories*.London: Routledge Falmer.

Goodson, I. and Sikes, P. (2001) *Life history research in educational settings*, Buckinghamshire: OUP.

Goodwyn, S., Acredolo, L. and Brown, C. (2000) Impact of symbolic gesturing on early language development. *Journal of Nonverbal Behavior*, 24, 81-103.

Goodwyn, S. and Acredolo, L. (1993) Symbolic gesture versus word: Is there a modality advantage for onset of symbol use? *Child Development*, 64, 688-701.

Goouch, K. and Powell, S. (2010) *The Baby Room Project*. UK: Esmée Fairbairn Foundation.

Goouch, K. and Powell, P. (2010) Who Cares? *Nursery World*. 02/09. 22-23. (accessed: 09/2010).

Gopnik, A., Meltzoff, A. and Kuhl, P. (2001) *The scientist in the crib: what early learning tells about the mind*. New York: Harper Collins.

Green, S. (2006) *Helping children to be skilful communicators*. London: David Fulton Publishers.

Harlow, H. and Zimmerman, R. (1959) Affection responses in the infant monkey, *Science*, 130, 421-432. Online at, www.personalityresearch.org/papers/pendry.html (accessed 04/2011).

Harry, B., Sturges, K. and. Klinger, J. (2005) Mapping the Process: An Exemplar of Process and Challenge in Grounded Theory Analysis. *Educational Researcher* 34,2, 3-13.

Hochschild, A. (2003) *The managed heart*. LA: University of California Press.

Holmes, K. and Holmes, D. (1980) Signed and spoken language development in a hearing child of hearing parents. *Sign Language Studies*, 28, 239-254.

Holmes, J. (1993) *John Bowlby and attachment theory*. London: Routledge.

Holmes, J. (2001) *The search for the secure base*. London: Routledge.

Hopkins, J. (1988) Facilitating the development of intimacy between nurses and infants in day nurseries. *Early Child Development and Care*, 33, 99-111.

Howlett, N., Kirk, E. and Pine, K. (2010) Does 'Wanting the Best' Create More Stress? The Link between Baby Sign classes and maternal anxiety. *Infant and Child Development*, DOI: 10.1002/icd.705.

Jarvis, J. (2008) *Baby signing-teach yourself* London: Hodder Education.

Jarvis, M. (2001) *Angles on psychology*. Cheltenham: Nelson Thornes.

Johnston, J., Durieux-Smith, A. and Bloom, K. (2005) Teaching gestural signs to infants to advance child development: A review of the evidence. *First language*, 25, 235.

Jones, M. (2010) Sign Posting. *Nursery World*, accessed, 28/07/2010.

Kelly, S., Manning, S. and Rodak, S. (2008) Gesture gives a hand to language and learning perspectives from cognitive neuroscience. *Language and Linguistics Compass* 2,4, 569–588.

Kelly, S. and Church, R. (1998) A comparison between children's and adults' ability to detect conceptual information conveyed through representational gestures. *Child Development*, 69, 85-93.

Kirk, E., Pine, K. and Ryder, N. (2011) I hear what you say but I see what you mean: The role of gestures in children's pragmatic comprehension. *Language and Cognitive Processes*, 26,(2),149-170.

Klein, M. (1924) cited in Berk, L. (1989) *Child Development*. London: Allyn and Bacon.

Lamb, M., Thompson, R., Gardner, W., Charnov, E. and Estes, D. (1984). Security of infantile attachment as assessed in the "strange situation": Its study and biological interpretation. *The Behavioral and Brain Sciences*, 7, 127-171.

Layard, R. and Dunn, J. (2005) A Good Childhood: Searching for Values in a Competitive Age. London: Penguin.

Leach, P. (1997) Attachment: facing the professional demands of today's research findings. *Journal of Child Psychotherapy*, 23,1. 5-23

<http://www.Learn2sign.co.uk>, (accessed 10/09/2010).

Legere, L. (2008) Baby signs – Caregiver perceptions of their use and benefits to children. MA: Louisiana State University. 12-14, online at, etd.lsu.edu/cgi-bin/ETD-browse all (accessed 08/11/2009).

Lincoln, Y. and Guba, E. (1985). *Naturalistic inquiry*. Beverly Hills, CA: Sage Publications.

Lindon, J. (1998) *Understanding child development*. London: Thomson learning.

Macleod-Brudenell, I. and Kay, J. (2008) *Advanced early years*. Heinmann: London.

Manning-Morton, J. and Thorp, M. (2003) *Key times for play; the first three years*. Maidenhead: OUP.

Marcus, L. (2010) Positive signs. *Nursery world*. (accessed, 14/01/2010)

Marshall, C. (2007) Continuing the baby sign debate. *Bulletin of the Royal College of Speech and Language Therapists*. 663,13.

Maslow, A. (1968) *Toward a Psychology of Being*. NY: Wiley.

McNeil, N., Alibali, M. and Evans, J. (2000) The role of gesture in children's' comprehension of spoken language: Now they need it now they don't. *Journal of Nonverbal Behaviour*, 24,2, 1-21.

Mead, M. (1962) cited in Berk, L. (1989) *Child Development*. London: Allyn and Bacon.

Meier, R. and Newport, E. (1990) Out of the hands of babes: on a possible sign advantage in language acquisition. *Language Journal*. 6, 1-23.

Meil, D. (2002) *Mapping psychology 1*. Milton Keynes: OUP.

Meil, D. and Dallos, R. (2005) *Social interaction and personal relationships*, Milton Keynes: OUP.

Meil, D., Phoenix, A. and Thomas, K. (2002) *Mapping Psychology 2*. Milton Keynes: OUP.

Melhuish, C., Mooney, A., Martin, S. and Lloyd, E. (1990) Types of childcare at 18 months – differences in interactional experience. *Journal of Child Psychology and Psychiatry*, 31, 849-59.

Messinger, D. and Fogel, A. (1998) Give and Take: The development of conventional infant gestures. *Merill Falmer Quarterly*, 44, 566-590.

Miller, L. (1999) *Closely observed infants*. London: Duckworth.

Miller, L., Cable, C. and Devereux, J. (2005) *Developing early years practice*. London: David Fulton.

Mishler, E (1986) *Research Interviewing: Context and Narrative*. Massachusetts: Harvard University Press.

Mooney, C. (2010) *Theories of attachment*. St Paul: Redleaf Press.

Moyles, J., Cable, C. and Devereux, J. (2001) *Developing early years practice*. London: David Fulton.

Murray, L. and Andrews, L. (2000) *The social baby*. London: CP Publishing.

Namy, L. and Waxman, S. (1998) Words and gestures: Infants' interpretations of different forms of symbolic reference. *Child Development*, 69, 295-308.

Newman, I. and Benz, C. (1998) *Qualitative to quantitative research methodology*, USA Southern Illinois: University Press.

Nutbrown, C. and Page, J. (2008) *Working with babies and children from birth to three*. London: Sage.

Nutbrown, C. (2011) *Key concepts in early childhood education and care*, London: Sage.

Ofsted (2001) Guidance to the National Standards: Full Daycare. DFES. September 2001.

Ochs, E. and Schieffelin, B. (1984) Language acquisition and socialization: Three developmental stories and their implications.

Online at

www.stanford.edu/Ochs_Schieffelin_1989_reading_notes_Schnoe. (accessed 01/2011)

O'Leary, Z. (2004) *The essential guide to doing research*. London: Sage.

Oxford Dictionary of English (2010) OUP. Oxford.

Patton, M. (2002) *Qualitative research and evaluation methods*. London: Sage.

Pine, K., Lufkin, N. and Messer, D. (2004) More gestures than answers: Children learning about balance. *Developmental Psychology*. 40, 6, 1059-1067.

Pine, K., Knott, T. and Fletcher, B. (2010) Teaching concept-salient gestures to children leads to learning gains. *Enfance*, 03, 355-368.

Pizer, G. (2004) Baby signing as language socialization: the use of visual gestural signs with hearing infants. Proceedings of the eleventh annual symposium about language and society. *Texas Linguistic Forum*, 47, 165-171.

Pizer, G., Walters, K. and Meier, P. (2007) Bringing up baby with baby signs: Language ideologies and socialisations in hearing families. *Sign Language Studies*, 7, 4, 143-159.

Powell, S. (2009) *Not allowed to kiss the babies: complexities and contradictions in baby room policies and practice*. Canterbury University Article: European Meeting of OMEP, University of Chester.

Prevatte, J. (2005) Effects of American sign language on hearing children's pre-literacy skills as an early education intervention model. 1-17 online at, sproutingnewbeginnings.com/Documents/ASL%20Literature%20Review.pdf. (accessed, 1/05/2010).

Pugh, G. and Duffy, B. (2006) *Contemporary Issues in the early years*. London: Sage.

Punch, M. (1994) cited in Denzin, N. and Lincoln, Y. (2008) *Handbook of qualitative research*, Thousand Oaks, CA: Sage.

Read, V. (2010) *Developing attachments in early years settings*. London: Routledge.

Reid, S. (1997) *Developments in infant observation*, London: Routledge.

Rinaldi, C. (2006) *In dialogue with Reggio Emilia: listening research and learning*, Abington: Routledge.

Roberts, R. (2002) *Self esteem and early learnin.*, London: Paul Chapman Publishing.

Roberts, B. (2002) *Biographical research*. Buckingham: OUP.

Rowe, M. and Goldin-Meadow S. (2008) Early gesture *selectively* predicts later language learning. *Developmental Science*, 12,1,182–187.

Schaffer, R. (1985) *Mothering: the developing child*. London: Fontana Press.

Schaffer, R. (1996) *Social development*. London: Blackwell.

Schon,D. (1987) *Educating the reflective practitioner*. San Francisco, CA: Jossey-Bass.

Siraj-Blatchford, I. and Clarke, P. (2000) *Supporting identity, diversity and language in the early years*. Milton Keynes: OUP.

Smith, P., Cowie, H. and Blades, M. (2005) *Understanding children's development*, London: Blackwell Publishing.

Steiner, C. (1999) *Achieving emotional literacy*. London: Bloomsbury.

Stokoe, W. (1965) cited in Brereton, A. (2008) A sign language use and the appreciation of diversity in hearing classrooms. *Early Years Journal*, 28,3, 311-324.

Strauss, A. and Corbin, J. (1990) *Basics of qualitative research: Grounded theory procedures and techniques*. Newbury Park, CA: Sage Publications, Inc.

Taggart, G. (2011) Don't we care? The ethics and emotional labour of early years professionalism. *Early Years*, 31,1, 85-95.

Theodosius, C. (2008) *Emotional Labour in healthcare, the unmanaged heart of nursing*. London: Routledge.

Thornton, L. and Brunton, P. (2009) Building firm foundations issue. *Early Years Update*. 65, 2-3.

Trevarthen, C. (2001) Intrinsic motives for companionship in understanding; their origin development and their significance for mental health. *Infant Mental Health Journal*, 22, 95-131.

Vallotton, C. (2005) Effects of symbolic gestures as a caregiving tool: Children's social and language development and mothers' perceptions and behavior. *Dissertation Abstract International*, 65 (9) 487.

Vallotton, C. (2008a) Signs of emotion: What can preverbal children "say" about internal states? *Infant Mental Health Journal*, 29, 234-258.

Vallotton, C. (2008b) Infants take self-regulation into their own hands. *Zero To Three*, 29, 29-34.

Vallotton, C. (2009) Do infants influence their quality of care? Infants' communicative gestures predict caregivers' responsiveness. *Infant Behavior and Development*, 32, 351-365.

Vallotton, C. and Ayoub, C. (2009) Symbols build communication and thought: The role of gestures and words in the development of engagement skills and social-emotional concepts during toddlerhood. *Social Development*, 19, 601-626.

Vallotton, C. (2010) Opening our minds to the baby's mind: How "listening" to infant signs complements and extends our knowledge of infants and their development. *Infant Mental Health Journal*, 32, 1-20.

Wadell, M. (2002) *Inside Lives: Psychoanalysis and the Growth of the Personality* London: Karnac Books.

Wenger, E. (1998) *Communities of Practice*. Cambridge: University Press.

Werner, H. and Kaplan, B. (1963) *Symbol formation*. Oxford: Wiley.

Wetherell, M., Taylor, S. and Yates, S. (2001) *Discourse as data*. Milton Keynes: OUP.

Whitehead, M. (2007) *Developing language and literacy with young children*. London: Paul Chapman Publishing.

Wilcock, L. (2007) *Practical pre-school; The EYFS in practice*. London: Step Forward Publications.

Winnicott, D. (1964) *The child the family and outside world*. London: Penguin.

Winnicott, D. (1986) *Home is where we start from*. London: Penguin.

Yin, R. (2009) *Case Study Research*. London: Sage.

