All about... Pikler

How Emmi Pikler’s approach to care-giving for the under-threes can be incorporated into modern best practice at settings and at home. By Dorothy Marlen

Dr Emmi Pikler (1902-1984), paediatrician and scientist, developed an exemplary approach to provision for children under three. ‘[Her] vision of a healthy infant,’ writes her daughter Anne Tardos, ‘was an active, competent and peaceful infant, who lives in peace with himself and his environment.’ And so Pikler’s approach to caring for the very young integrates two primary aspects of early development: supportive, attentive and affection-based relationships; and self-initiated, natural progression of motor development without adult interference.

The Pikler approach and the EYFS have much in common. They share many of the same principles and recognise the importance of attachment, the key person approach and physical development. However, the EYFS provides only a framework to work within, a checklist of practice and suggestions about how to improve it. The value of the Pikler approach is that it offers all types of early years setting a single, dependable method of judging and delivering consistent, high-quality provision for children up to three years old.

Adopting the approach does not require expensive resources. What it does require is a commitment to learn new ways of being with children and a shift to a truly child-centred model, with carefully designed environments and routines and sensitive and skilled care-giving.

Early influences
Pikler studied to be a doctor in Vienna in the 1920s. There, she was influenced by Professor Clemens von Pirquet’s respectful approach to children, and the freedom that paediatric surgeon Hans Salzer afforded children to move and play in hospital, resulting in less distress for the children and better recovery rates.

The natural progression of motor development – Pikler’s own extraordinary discovery – came from her exceptional observational abilities. She intuited that a child’s motor development could unfold naturally, and without direct adult interference, if a child was given the time, freedom and support of a dependable adult to engage in self-initiated movement. However, this was often disrupted by well-intentioned parents who taught their children how to sit, stand and walk before they could actually do so.

With this insight, Pikler and her husband did not interfere in their first child’s motor development from birth, allowing them to witness what happens naturally when a child is allowed to experience full self-initiated movement and play.

She advocated an approach to parenting based on her insights in a private practice in Budapest in the 1930s. She visited her 100-plus families weekly, not just when a child was ill. She guided the parents and required their full participation, resulting in the children being less ill than normal, and well known for their physical and emotional health.

Pikler’s nursery
When post-war Budapest faced a crisis of abandoned children, Pikler opened a residential nursery for some 30 under-threes to demonstrate that her approach could be effective at an institutional level. Opened in 1946, the nursery became affectionately known as Lóczy, after the street it is on.

Its team of highly experienced and specially trained professionals monitored each child on a daily, weekly and longer basis, and there was ongoing dialogue between
Over the nursery’s 65-year history, caregivers and professionals amassed a huge body of evidence – detailed observations, photos, videos and scientifically based studies – that confirmed the efficacy of the approach and caused its reputation to spread.

Among the evidence is a longitudinal study of former Lóczy children, funded by the World Health Organization (Falk and Pikler 1988). It found that the children had become adults with no signs of institutionalisation and had fond memories of their time at the nursery.

Writing in 2010, Tardos concluded, ‘Emmi Pikler proved that it is possible to avoid the harm of institutionalisation, by putting aside the traditional care-giving practices and applying what she had learned from her experiences with families.’

Pikler herself carried out rigorous scientific enquiries into natural gross motor development in infants – probably the only ones of their kind in the world. She collaborated with other innovators, among them Charlotte Selver and Elfriede Hengstenberg, who pioneered somatic movement.

Lóczy greatly influenced the work of well-renowned French psychologists Geneviève Appell and Dr Myriam David, who had collaborated with John Bowlby on the study of neglected children in the 1950s.

Since the 1980s, the Pikler Institute has provided training in Hungary and beyond and a now provides a full pedagogue training. An alternative training is offered by the European Pikler Verbandt. Many countries have their own associations, including the UK, and there is global awakening to the importance of the approach.

Pikler died in 1984 and Anna Tardos now directs the Pikler-Lóczy Association, Hungary (recently renamed). Lóczy closed its door as a residential nursery in 2011. However, the building now houses a daycare centre, along with parent and child groups and the international training.

**PRINCIPLES**

David and Appell formulated four principles that underpin the Pikler approach (2001). As Appell notes, ‘These four principles are of equal importance and it is because they are simultaneously and consistently respected that this educational approach has value. If any were to be neglected, it would jeopardise the experience the child is being offered.’

**Independent activity**

Pikler was unequivocal that, ‘If we give children enough space and possibilities for free movement, they will move nimbly, simply, confidently and naturally.’

On Pikler’s enormous contribution to our understanding of child development, David and Appell write, ‘The importance of this freely initiated movement was Pikler’s great discovery, along with the role which these initiatives play in every moment of the life of the young child, in every activity, including the moments of intimacy with the adult.’

The importance of early self-
initiated movement and play to learning is increasingly recognised and understood. In *A Moving Child is a Learning Child*, Cheryl McCarthy and Gill Connell write, 'The body is the brain’s first teacher. And the lesson plan is movement.'

We are also beginning to understand that early movement lies at the very core of an infant’s perception of themselves. There is a famous paper by Tardos and David (1999) that explores how movement participates in the formation of body image, constitutes the foundations of the individual, and brings out the individual and the subjective.

**Links to the EYFS Physical Development:** ‘Moving and handling’, ‘Health and self-care’.

**A special, favoured, effective relationship**

The relationship between carer and child is at the heart of the Pikler approach, as Pikler believed that, ‘The relationship is all. It is a matter of life to the child.’ So, in the training of her staff, explains Tardos (2010), Pikler created a culture of ways to touch, to pay attention to him, to pick the infant up, and to hold him in the arms, how to respond to his signals. The end result of this approach is the creation of a psychological space that optimises the infant’s development in whatever context he is growing up.

From the beginning of the nursery in 1946, children were allocated what we now call a key person, who developed a secure relationship with allocated children. This continues to be the practice in all Pikler care settings, including the daycare centre currently in the old Lóczy premises.

Uniquely, the times of bodily care of a young child – nappy changing, clothes changing, bathing and meals – are recognised as the most important for developing a warm, respectful and authentic relationship between child and parent/carer.

- The quality of the one-to-one care times determine the level of security and trust the child will develop with the adult, and will influence the quality of the child’s self-confidence, borne out in their self-initiated movement and play.
- The carer establishes direct contact with the child through kind gesture, speech and full presence. There is a willingness to adjust to the child’s signals and needs, and nothing is carried out without telling the child first and waiting for their response.
- The times of care are carried out in a quiet space without interference.

**PIKLER TRAINING**

The Pikler-Lóczy Association in Hungary offers training in English to pedagogue level, approved by the European Pikler Verbandt. Two courses are now available in the UK, organised by the Pikler UK Association. Go to www.pikler.co.uk for more information.

The Holistic Baby and Child Care Level 3 (CACHE) Diploma, offered through Emerson College, Sussex, integrates Steiner early childhood studies, an introduction to the Pikler approach and the EYFS. See www.emerson.org.uk/holistic-baby-and-child-care.

The Pikler approach is now included in some undergraduate and post-graduate early years courses in the UK.

- The care routines are organised and ‘choreographed’ so that the child can trust the same order and sequence of the care, even with a substitute carer.

What has been developed as highly successful key person practice over 60 years at Lóczy can be applied to the various care activities in many different kinds of care setting. It makes clear what is necessary for consistent and high-quality ‘key person’ practice (Elfer P., 2011).


**Fostering a child’s awareness of self and environment**

This principle relates to the different ways in which the carer can positively facilitate children’s self-awareness, confidence and competence in relation to themselves and their environment, through the carer’s dual role of attentive and respectful care and non-interference in motor development. Aspects of this include:

- Slowing down care times so that the child has the opportunity to participate in and process the one-to-one times with the carer.
- Encouraging co-operation, and dialogue, about what is happening during the times of care, about the child’s body, environment, the care process and materials.
- Orientating the child securely through the day, through strong predictable practices and routines.
- Giving the child time to self-initiate their play and learning and not interfering.
- Using keen observation and reflection to understand each child as individual with their own likes, dislikes and needs and using these reflections to facilitate the child’s learning, security and happiness.
- Role-modelling calmness,
The Early Years Nursery, Kidlington, Oxfordshire

Nursery owner Christine Wilkinson has had a long interest in the Pikler approach, is now beginning to take Pikler courses in London and Budapest and is starting to apply the approach at her nursery, which opened a year ago.

‘The Pikler approach is most commonly associated with respectful care routines, but we are using its principles to raise the quality of our whole provision and strengthen the relationship between caregiver, child and parents, which lies at the heart of our practice.

‘Helpfully, there are some great and critical overlaps between the Pikler approach and the EYFS. Both recognise the uniqueness of the child, the importance of a supportive adult-child relationship, and the need for an environment that enables the child to be engaged, motivated and with the time to think (so linking to the Characteristics of Effective Learning). Both are founded on effective observations of the child and self-reflective practice, though what stands out in the Pikler approach is a deep trust in the child to develop, learn and master skills at their own pace.

‘The pace of our nursery is, therefore, slow, gentle and rhythmical, reflecting the child’s psychobiology, while the environment allows for the natural unfolding of the child’s motor skills. Adult-child interactions are respectful and based on the understanding that children are capable of engaging in partnership with the adult from birth. We observe from a place of respect rather than a place of worry that the child may not succeed or needs “propping up” to quicken their development.

‘The approach has encouraged us to know ourselves and to reflect. Through careful observation of ourselves, we refine our thoughts and how we are with children – and we are not afraid to ask the hard questions. It takes courage to achieve this level of reflection, but with it comes a deepening awareness of our role, a renewed respect for the child as a strong and willing learner and higher quality practice overall.’

CASE STUDY: THE EARLY YEARS NURSERY, OXFORDSHIRE

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Good health

Promoting and maintaining good health in young children in care is crucial. Good, freshly cooked food, ample and peaceful sleep times, strong, predictable routines, calm, uncluttered environments, as well as the other three principles, ensure that young children are given the best care.

Links to the EYFS All Prime areas, in particular PD, Health and Self Care.

APPLYING THE PRINCIPLES

The Pikler approach works best when it is embraced in all its aspects in a setting. This is a slow process, as it takes time to fully understand the principles and train staff in new ways. While there are many Pikler settings across Europe, there are as yet no ‘fully functioning’ Pikler nurseries in the UK, though some are starting to embrace the culture (see case studies).

Carer knowledge/attitudes

Carers should be highly trained in the details of motor development and play, the choreography of gentle and respectful care, the art of observation and how to manage groups of children – particularly where there is conflict. (There are fewer conflicts in Pikler settings as children are generally content and active.) Each child should be treated as an individual and is observed on an ongoing basis so they are well-known and understood. Dialogue with colleagues about each child’s needs is essential, as are self-development and reflection.

The play environment

● Select simple open-ended ‘toys’ that are appropriate for the child’s stage of fine motor development. For example, a handkerchief.

● Introduce equipment such as low platforms, climbing triangles and steps as the child progresses in their gross motor development.

● Avoid equipment that might encourage the child’s passivity and compromise their natural motor development, such as baby gyms, Bumbo seats, baby walkers and bouncers.

● Provide separate play areas for babies and toddlers as their needs are very different.

● Go with what the child can do because each child will develop in their own time.

The adult role

It is the child’s relationship with the adult that gives the capacity to the child to play independently with contentment and focus.

It is the child’s capacities for independent play that allow the carer...
to use their time to give one-to-one attention to each child in turn, while the rest of the children are happily engaged.

Caring and known adults should:
- have a thorough understanding of motor development and so not put a child into any position until they can do it themselves, including turning onto the tummy, sitting or standing up, or walking
- observe more and interfere less, while developing a tacit respect for the child's own process, struggles and achievements
- allow each child the time to experience the full range of motor development
- always be in the vicinity of the play but intervene only when absolutely necessary
- acknowledge children's feelings and provide comfort when needed
- model kindness, gentleness and firmness
- resolve any conflicts between children in a non-judgemental way – though a calm environment highly attuned to the children's needs lessens the likelihood of disagreements.

Bodily care
Care routines should reflect the authentic relationship between adult and care-giver.

Nappy changing
View this as a prime time to build an authentic reciprocal relationship with each child.
- The adult needs to be fully ‘present’ to the child.
- Develop a ‘choreography’ with the child to ensure that the process is respectful and dependable in every respect.
- Allow the child time to express their own interests and competence while the task is undertaken.
- Use special Pikler changing tables, which facilitate free movement and the child's participation.

Mealtimes
Feed babies and infants individually on the carer’s lap.
- Be very respectful of how much the child wants to eat. Never give the child even one spoon or sip more than he would like to have.
- Introduce child-sized tables and chairs when the child can sit independently. First, attend to the child one-on-one, then, as the child becomes competent at eating, seat two and then more children round a table together.
- Ensure the care is calm and unhurried and a pleasure for the child.
- Carefully chosen bowls, cups and cutlery are used.
- Don’t confuse mealtimes with play times.

Sleep time
This is a strong, dependable routine
- The child is carefully settled in the child's room for the first few weeks to help settle the child. The child is carefully observed at every stage to ensure that they are not stressed or overwhelmed.
- The child’s participation.
- Respect.

PIKLER EVENTS

‘The Pikler Approach: Its relevance for our work with children and parents in the UK today’
is the theme of Pikler UK Association Annual Conference on Saturday 1 April at Mycenae House in Greenwich, London. The speakers are Ute Strub and Sonia Kluss, and the fee is £40 for members and £45 for non-members. More information is at www.pikler.co.uk and tickets are available from piklerconference17.eventbrite.co.uk.

Introductory workshops on the Pikler approach
Mycenae House, Greenwich, London
- 17 May 2017: The Pikler approach to working with young children
- October 2017: Relationship-based care
- January 2018: Natural movement and play.
See www.pikler.co.uk or email dorothy@dorothymarlen.net.

Nursery World conference
Dorothy Marlen will lead a session on Pikler at Nursery World’s conference, ‘Play and Learning: A global perspective’, in London on 28 June. Keynote speakers will be Professor Carmen Dalli from New Zealand, who will explain the highly acclaimed Te Whariki curriculum; and Dr David Whitebread on ‘Learning from Abroad: Starting points’.

MORE INFORMATION
  - www.pikler.co.uk
  - www.thepiklercollection.weebly.com
  - www.pikler.hu/en/english-courses
  - www.emerson.org.uk/holistic-baby-and-child-care

CONCLUSION
In Authentic Relationships in Group Care for Infants and Toddlers (2005), Petrie and Owen make a strong case for introducing Pikler/Resources for Infant Educators (RIE) training in the UK; however, their book did not have the impact on policy that was hoped for. Today, the EYFS makes clear what is required for healthy development in the first three years. With the EYFS in place, there is even more of a strong case for a unified training approach in the practical details of care. I hope that this article has inspired readers to find out more.

As Tardos reminds us, ‘The concepts of recognition, free activity, and quality of care, are not new to us today, but the way Emmi Pikler taught us to apply them in the everyday practice, in different concrete situations, is still very valuable.’

Dorothy Marlen is a freelance early childhood trainer and consultant, trained in the Pikler approach. She is co-founder and chair of the Pikler UK Association, course leader for the Level 3 Holistic Baby and Child Care Diploma and runs ‘A Gentle Beginning’ support groups for parents in York. See www.dorothymarlen.net

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