

# Respect, care, wisdom

The Pikler approach to early care and education is not well-known in the UK, but it has much to offer, and may well challenge our expectation of the capabilities of children younger than three-years-old.



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**T**HIS ARTICLE provides an introduction to the continuing relevance of the approach to care for children up to three-years-old that was developed at the Pikler Institute in Budapest. The Pikler approach is little known or practised in the UK to date, although it has influenced childcare in a number of European countries, in the USA and, more recently, New Zealand and the Pacific rim. So why is it so little known here? One reason could be that, for over 50 years, the Pikler Institute was known for its exemplary care of children – from birth to three-years-old – in an orphanage setting, an unpopular option, this side of the former Iron Curtain.

In the UK, government policy toward education and care of young children has had a different bias than other European countries. Petrie and Owen (2005), in a book called *Authentic Relationships in Group Care for Infants and Toddlers*, argued that in the UK, policy is biased towards providing services to aid working parents, and parents with problems, rather than providing valuable services for children. Their aim was to bring the Pikler/RIE (Resources of Infant Educators) principles to the attention of those involved in providing group care in the UK. Unfortunately, it has not had the hoped for influence on policy making.

The RIE approach to childcare is better known. Resources for Infant Educators [www.rie.org] was founded by Magda Gerber, who had known Emmi Pikler in Budapest, both as the family paediatrician and, later, as a colleague. Gerber took what she had learnt to the USA and proved that the Pikler approach could be used in children's hospitals, with autistic children, parenting support and daycare centres. There are now several popular parenting books available in the UK that have their 'origins' in this USA 'stream'.

There is other evidence that the Pikler approach is held in high esteem internationally. In 2010, the newsletter for the World Association for Infant Mental Health dedicated a whole issue to the Piklerian approach. Acclaimed director, Bernard Martino, has produced two films about the Pikler Institute.

I was the first person from the UK to train at the Pikler Institute in 2008. Since then, I have hosted Pikler training courses in the UK and co-founded the Pikler UK Association, which was launched this summer. The association's website [www.pikler.co.uk], lists membership, courses and consultancy and will feature books and DVDs. To be asked to write this article is happy evidence that the work of Emmi Pikler

and the Pikler Institute is beginning to gain its rightful recognition in the UK.

## Who was Dr Emmi Pikler and what did she discover?

Pikler (1902-1984) trained as a doctor in Vienna in the early 1920s at a time when many new ideas were flourishing – think Freud. Pikler studied under two pioneering paediatricians – Pirquet, who focused on supporting children's healthy development through nutrition, rather than medication, and Slazer, who insisted on respectful relationships with his young patients. In 1931, her first daughter was born. The family moved to Trieste and it was here that she made an extraordinary discovery.

Observing very young children and their carers on the beaches, Pikler saw how children were routinely encouraged to sit, stand and walk before they were able to do these things of their own accord. These are, of course, culturally accepted child rearing practices, even today, but Pikler saw beyond these and concluded that it must be much healthier for a child to learn these critical abilities out of their own initiative, in their own time. So she, and her husband, took the unprecedented step of allowing their daughter the freedom to develop her motor skills at her own pace, absolutely without their interference.

As parents, they also applied the principles of creating a trusting and cooperative relationship with their daughter, which Pikler had learnt in her medical training. The result was that they experienced the inherent wisdom and capabilities of their child, first-hand, in its fullness. In 1932, the family moved back to Budapest and Dr Pikler, as a family paediatrician, put into practice what she had learnt with her daughter. She became very well known as an excellent paediatrician, promoting guidance that provided optimal healthy physical and psychological development. Anna Tardos, director of the Pikler Institute writes: 'Her vision of a healthy infant was an active, competent and peaceful infant, who lives in peace with himself and his environment.'

After World War Two, Pikler started an orphanage in Budapest, based on the principles she had developed with the families in her care. She set out to prove that it was possible for children in an institutionalized setting to thrive both physically and psychologically if the carers worked with the same nurturing and respectful principles that had proved successful with her families.



*Pikler's work challenges our accepted culture-bound habits and expectations of infants and toddlers*

Observational records and longitudinal studies carried out over many years at the institute show beyond doubt that Pikler's approach was successful. The children, who generally had to leave the institute by the age of three, were cheerful, resilient and active. They went on to develop good attachments with their adoptive parents and had successful adult relationships.

The Institute's reputation spread and training programmes were developed. Other countries began to promote the approach – notably Dr Myriam David and Genevieve Appell in France, the Steiner movement in Germany, along with Madga Gerber in the USA.

Emmi Pikler died in 1984 and Anna Tardos, her daughter, is now director of the Institute. The orphanage closed in 2011 but the Institute offers daycare to children from 18-months to three-years-old, runs parent and child groups, and offers training courses every summer that attract students from all over the world (Signal Newsletter, 2010).

## What principles underpin the Pikler approach?

### Complete freedom of movement:

Pikler discovered that an infant facilitates its own motor development and exploration through play if given the freedom to do so. However, in order for the full 'unfolding' of self-initiated motor development

and play to take place the child should not be placed on its front, before it does so itself; not sat up, before it does it itself; not held in an upright position or 'walked' before the child finds it himself... thus allowing each milestone to be reached by the infant's own initiative and efforts.

No equipment that encourages the child's passivity or pre-mature movement is used. Instead, carefully designed clambering equipment and simple, developmentally appropriate, play objects naturally encourage each child's abilities and initiative in their own time. The experience of observing agile and confident 'Pikler' children, moving and playing, fundamentally changes our image and understanding of the very young child. Pikler's discovery is surprising and radical – for it challenges our accepted culture-bound habits and expectations of infants and toddlers.

Over 50 years of research at the Institute – and elsewhere – has proven that children, if not sat up prematurely, naturally come into crawling before sitting. If a child is artificially placed in a sitting position, they may not find their way to crawling. Just this one simple adult interference might be behind some of the various complications that can unfold if a child does not go fully through the natural progression of motor development. Goddard Blythe's work on retained reflexes is relevant here.



### The importance of tactful and respectful care in the relationship of the infant and the adult:

Relationships, as we know, are what the infant needs and looks for from the beginning. What Pikler discovered, however, was that the times when the child's physical needs are being attended to (nappy changing, feeding, bathing, dressing) are the most important times to slow down and develop relationship and cooperative care. There is a 'choreography of care' that can be taught and that provides a warm and respectful dialogue of gesture, speech and attention, guaranteeing attachment and joyful cooperation.

Pikler developed a 'culture' of ways to pick up the child, to hold him, to care for him, to recognise and respond to his signals. The approach creates a psychological space that optimizes the infant's development, in whatever context he is growing up. These concepts are not new to us today, but the Pikler approach uniquely shows us how, in all the details, to put the principle of respectful care into practice in a wide variety of situations. This level of care creates happy confident children, which is the basis from which a child will happily explore and play out of their own self-initiative. The carer's work is become more fulfilling and less exhausting – Anna Tardos describes it as a 'positive spiral' of reciprocal relationship.

### The relevance of the Pikler approach to children in the UK

In 2005, Petrie and Owen made a strong case for introducing the Pikler/RIE principles into UK daycare. They argued that services in the UK failed to support carers or to provide optimal development opportunities for our youngest and most vulnerable children, being primarily aimed at structures and organisations, rather than supporting our understanding of young children. In other countries, the Piklerian principles of respectful care and self-initiated movement have been successfully adapted by parents, daycare workers and residential workers in very diverse settings. Its relevance and worth is without question.

In the UK, the Pikler approach to the care of children from birth to three relates to the foundation stage because it fully promotes the development of children who are calm, active and have confidence in the mental, physical and social realms. With regard to the main areas of development, the Pikler approach to respectful nurturing togetherness allows the child to continually learn about the meaning of relationships, how to care for themselves and others, to learn sociable behaviours and to naturally develop a strong healthy

picture of themselves and how they are seen (Personal, social and emotional development).

The safe, stimulating and age appropriate 'prepared environment' that the Pikler approach provides, ensures children have the necessary props and equipment to explore, discover, create and experiment with, achieving the skills listed in the *Early Years Foundation Stage* (EYFS), in a natural, holistic way. With the environments created by the Pikler practitioner, the children will experience freedom of movement to explore their bodies (physical), spatial dimensions, collecting and sorting (maths), gravity, balance and the properties of objects (understanding of the world) appropriate for a child younger than three.

However, there are differences in expectations. One Pikler pedagogue working in a UK nursery told me that, because the EYFS gives great attention to the child's age and stage of development this can, unfortunately, provoke concern if milestones are not met by a certain time. The result can be that a child is labelled too quickly as developmentally slow or as having special educational needs.

Over 50 years of observations at the institute prove there is a wide variation in the timing of normal development and that faster is not better. The EYFS criteria can cause the adult to have unrealistic expectations for the child. As mentioned, the almost universal expectation that a child sits up before they crawl, and will need help and assistance in gross motor development, is contrary to natural development and the pleasure a child experiences when allowed self-initiated movement and play.

## Conclusion

The Pikler approach challenges and enlightens our understanding of both the natural capabilities of very young children, and the care conditions that help the very youngest and most vulnerable children thrive on all levels. As Petrie and Owen (ibid) concluded in their excellent book, 'if, to borrow the government's phrase, we are truly concerned to ensure that "Every Child Matters" then the potential for developing this work in the UK should be explored'. Sue Owen told me that her wish is to see more information and training on the approach supported by the government. Hopefully, this article is a helpful step in that direction. **eye**

## Useful resources

- Pikler trainings are offered in the UK through the Pikler UK Association website: [www.dorothymarlen.net](http://www.dorothymarlen.net); [www.emerson.org.uk/holistic-baby-and-child-care](http://www.emerson.org.uk/holistic-baby-and-child-care); [www.pikler.co.uk](http://www.pikler.co.uk)
- The Pikler Institute, Lóczy Lajos u H-1022 Budapest Hungary – [pikler@pikler.hu](mailto:pikler@pikler.hu)

## References

- The Signal Newsletter of the World Association for Infant Mental Health* 18 (3-4) July-December 2010
- Petrie S, Owen S (Eds) (2005) *Authentic Relationships in Group Care for Infants and Toddlers – Resources for Infant Educators (RIE) Principles into Practice*. Jessica Kingsley Publishers: London

## Key points

- The Pikler approach to early care and education began in Budapest, Hungary, in the 1930s
- Pikler trained as a paediatrician and, with her husband, raised their daughter with the freedom to develop motor skills at her own pace, without interference