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The aftermath of the pilot-project: A comprehensive analysis of the implementation of the
new Playgroups for Inclusion/"Grupos Aprender, Brincar, Crescer"

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by

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A comprehensive analysis of the implementation of the new *Playgroups for Inclusion*

Abstract

Playgroups are a non-formal educational response for children under pre-school age and their caregivers to attend together, play and socialize. The playgroup model has been present in several countries, recently taking its first steps in Portugal with the pilot-project *Playgroups for Inclusion* (or “Grupos Aprender, Brincar, Crescer”, GABC). After its encouraging results, the goal has been to disseminate this service.

This dissertation aimed at a comprehensive analysis of these new playgroups, focusing on its quality, similarly to the monitoring process carried out during the pilot. Two GABCs were invited to take part in this comprehensive analysis. Interviews with playgroup facilitators (N=4) and with participating caregivers (N=10) provided an insight on their expectations, experiences and perceptions of playgroup implementation and participation. Complementarily, GABC sessions were videotaped in order to assess its process quality with an observational tool – the Playgroups Environment Rating Scale (PERS; Alexandre et al., 2016), developed by the pilot-project monitoring team for the purpose of evaluating quality in a non-formal educational setting with such particular characteristics as the playgroups.

Overall results showed a positive perception about playgroups by all parts involved, with caregivers describing improvements in their well-being, higher levels of social support and connectedness to others and the development of several skills in their children. Facilitators report a deep commitment to participant families, having their needs and preferences as a priority. Quality assessment with PERS revealed an above average overall process quality, in corroboration to the information gathered from the interviews.

This dissertation mirrors the family- and child-centered nature of this project, where the primary concerns are play activities and socialization. These results add to the body of evidence supporting the potential of playgroups as a non-formal educational response for the yearly years.

Keywords: playgroups, early education, quality, monitoring.

PsycInfo Scientific domains: 2956 Childrearing & Child Care; 3373 Community & Social Services.

Resumo

Os *playgroups* são uma resposta educativa não-formal para a primeira infância, para crianças e os seus cuidadores frequentarem em conjunto com o propósito de atividades de socialização e brincadeira. O modelo dos *playgroups* tem vindo a estar presente em diversos países, dando os seus primeiros passos recentemente em Portugal com o projeto-piloto *Playgroups for Inclusion* (ou “Grupos Aprender, Brincar, Crescer”, GABC). Depois dos promissores resultados, o objetivo é o de disseminar este serviço.

A presente dissertação pretendeu conduzir uma análise compreensiva da implementação destes novos *playgroups*, com especial foco na sua qualidade, à semelhança do processo de monitorização conduzido no piloto. Dois GABCs foram convidados a participar nesta análise compreensiva. Entrevistas com as monitoras (N=4) e com cuidadores participantes (N=10) proporcionaram a compreensão das suas expectativas, experiências e perceções relativas à implementação e participação num *playgroup*. Adicionalmente, sessões de cada GABC foram filmadas de forma a permitir a avaliação da sua qualidade de processo com uma ferramenta de observação – a Playgroups Environment Rating Scale (PERS, Alexandre et al., 2016).

Os resultados desta recolha de dados refletem uma perceção positiva acerca dos *playgroups* por todas as partes envolvidas, com os cuidadores descrevendo melhorias no seu bem-estar, maiores níveis de suporte social e relação com outros, e o desenvolvimento de competências várias nas suas crianças. As monitoras relataram um elevado nível de compromisso para com as famílias participantes, tendo as suas necessidades e preferências como uma prioridade. A avaliação da qualidade processual com a PERS demonstrou uma qualidade de processo geral acima da média, corroborando a informação recolhida nas entrevistas.

Esta dissertação espelha a natureza centrada na família e na criança deste projeto, onde as principais preocupações são as atividades de brincadeira e socialização. Estes resultados contribuem para o corpo de literatura que apoia o potencial dos *playgroups* enquanto respostas educativas não-formais para a primeira infância.

Palavras-chave: *playgroups*, educação, qualidade, monitorização.

Classificação: 2956 Educação infantil & Cuidados infantis; 3373 Comunidade & Serviços Sociais

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A comprehensive analysis of the implementation of the new *Playgroups for Inclusion*

Introduction

The first years of a child's life are proven to be the cornerstone of their global development, not only when it comes to motricity, speech acquisition and behavioral skills, but also regarding their emotional and social development and adjustment in the most varied contexts (McCain, Mustard, & Shanker, 2007). Children's well-being relies on strong and healthy attachment relationships and age-appropriate stimulation, which in turn are prompt to occur in the context of complex and dynamic social interactions between the child and his/her significant others (Oke, Stanley, & Theobald, 2007) and at their closest, most familiar and safe environments. It is, thus, consensual in the literature the utmost importance of providing a safe, stimulating, positive and protecting environment, where healthy nurturing relationships thrive (Walker et al., 2011).

In their early years, children's main developmental contexts are their family and, should they attend one, an early childhood education and care (ECEC) facility. This makes primary caregivers, as well as teachers and peers, the source of a child's most significant and predominant interactions. It is within these meaningful and positive interactions that most developmental milestones and skills acquisitions occur, thus highlighting its importance for children's learning and development.

However, this safe and nurturing environment is not available in every household and may be of particular importance for children whose families face several risk factors (Duncan, Yeung, Brooks-Gunn, & Smith, 1998). In 2011, 28,6% of Portuguese children were at risk of poverty or social exclusion and in 2010 child material deprivation rates were of 27,5% in Portugal (Comité Português para a UNICEF, 2013). Due to an unstable economic and/or professional situation (with the latter being the most likely variable to affect risk of poverty), the lack of economic and material resources, or a situation of social exclusion, a portion of parents of infants and toddlers cannot provide them the previously described environment (Comité Português para a UNICEF, 2013) – whether it is at home or in enrolling their children in a center- or family-based ECEC setting –, thus missing the opportunity for their children to develop to their fullest. Missing this window may result in poorer performances in the child's later life, whether it is regarding school achievement, social adaptation and behavior with peers and significant others, or emotional regulation and adjustment (Duncan et al., 1998).

In the past few decades in western societies there has been a tendency for parents to focus more on their professional development, with women's labor market participation

growing exponentially; the Portuguese example is one of the most prominent in Europe, with over 60% of children living with both working parents and with 76% of mothers of children under three years old working (Barros et al., 2016). This results in a growing need for education and care alternatives for infants and toddlers, and governments have become aware of the necessity to extend ECEC coverage for children before compulsory school-age (e.g., Leseman & Slot, 2014; Myers, 2004; OECD, 2018). On the other hand, this expansion in terms of coverage is seen as a way of ensuring equity for all children, leveling their chances and opportunities for appropriate education and development. Those efforts have been sought out all across Europe in the latest years, and coverage rates in Portugal have grown from 12,65% in 1996 to 42,6% in 2013 for children under the age of three (Barros et al., 2016; Barros & Aguiar, 2010); the recent establishment by the Portuguese government of universal access to preschool for all 4- and 5-year-olds resulted in current attendance rates of 93% for 4-year-olds and 98% for 5-year-olds (Cadima, Aguiar, & Barata, 2018). Research shows that attending an ECEC setting may support cognitive and language development (Burchinal et al., 2000), especially in high quality settings¹ (Gormley, Gayer, Phillips, & Dawson, 2005); attendance of pre-primary education also seems to improve school readiness (Wong, Cook, Barnett, & Jung, 2008) and long-term school achievement (OECD, 2014). However, despite efforts on expanding coverage of ECEC services, early childhood education is still not considered part of the formal Portuguese educational system, with only the two years immediately preceding primary schooling being worthy of main investment, which leaves a whole in the provision of high quality and quantity of educational responses for the first years of children's lives (Taguma, Litjens, & Makowiecki, 2012).

This rise on the coverage of ECEC settings does not mean however that they are of universal or public access. In Portugal, enrolment rates are estimated to be 25% to 30% lower among children from disadvantaged backgrounds, when compared to those from advantaged families (OECD, 2014). This lack of quality education and care options, especially for those who have difficulty accessing the formal system, is of the utmost concern in the described portion of the population where children live in risk of poverty or without the necessary material, economic or affective resources needed to promote their fully healthy development (Walker et al., 2011).

¹ Educational quality can be understood in terms of structural features (with aspects such as group size, child-teacher ratio, or teacher training) and process quality (regarding daily routines and interactions between children and adults). The concept of educational quality will be addressed in detail further down this dissertation.

A comprehensive analysis of the implementation of the new *Playgroups for Inclusion*

Non-formal educational programs have been emerging as a response to the formal ECEC service gap, especially for disadvantaged families. One model of alternative early education service that has been being established in several countries for the past few decades is *playgroups*: local group gatherings for young children and their caregivers to come together for the purpose of play and social activities, promoting the development and learning of both child and adult (Dadich & Spooner, 2008). As will be further explored, similarly to formal educational services, these sorts of community provisions must also ensure they deliver a high quality service for children and caregivers (Ramsden, 1997); this is an aspect not thoroughly explored in the literature, despite the long history of implementation of these educational programs. A pilot-project conducted in Portugal, entitled *Playgroups for Inclusion* (or Grupos Aprender, Brincar, Crescer) aimed at implementing the playgroup model throughout the country while monitoring its quality and evaluating its impacts, and obtaining interesting results on both areas of research, as will further be addressed. This dissertation aimed at locating two playgroups being currently implemented in the greater Lisbon area, and inviting them take part in a comprehensive analysis that would rely on their own perceptions and experiences as playgroup participants, as well as on the careful observation of playgroup sessions, focusing on its activities and routines, the group climate and the interactions between children and adults, i.e., the overall playgroup process quality, following what has been done in the pilot-project.

This dissertation follows a structure of four chapters. Chapter I concerns the theoretical framing on early years education and on social non-formal educational settings, with particular focus on the playgroup methodology and on its history of implementation in Portugal; Chapter II addresses methods, including sample, instruments, and data collection and data analysis procedures; Chapter III presents the results from interviews with facilitators and caregivers, as well as from the quality assessment with a quality observation tool (PERS); finally, Chapter IV concerns the discussion, future recommendations for research and practice, and limitations to this dissertation.

A comprehensive analysis of the implementation of the new *Playgroups for Inclusion*

Chapter I – Theoretical Framework

Why non-formal educational social responses matter

Considering the concerns described in the Introduction section, the question seems to be, thus, what alternatives could be available in order to fulfill the gap on the coverage of ECEC provision? Could different early childhood education programs complement other contexts of child development, such as family and community – in a systemic perspective – in order to positively impact child learning and development? And if so, would the quality of these provisions matter (Myers, 2004)?

Research seems to answer affirmatively, with benefits not only for children but also for families and communities. Studies also reinforce the belief that the effects of a high-quality educational program on young children's development seems to be larger for children from disadvantaged backgrounds, suggesting that quality in ECEC may act as a buffer to risk factors possibly present in other contexts (Burchinal et al., 2000; Myers, 2004). ECEC has been shown to be one of the most cost-effective strategies to fight the negative effects of poverty on child development, as well as one of the strongest weapons to break the cycle of poverty (Leseman & Slot, 2014).

The literature also points out to the fact that programs which combine education and care for infants and toddlers with parental education seem to have a larger positive impact than those focused solely on children or on parents (Myers, 2004). This comes as a reminder of the importance of supporting families as a complement of providing ECEC access to their children, especially in situations of risk and/or disadvantage. The accumulation of risk factors (such as poverty, social exclusion, low education levels, or exposure to violence) may be lessened by a strong social support network, which can and should be provided through several community services (Leseman & Slot, 2014). Supporting parents seems to be one of the most effective ways of improving overall child well-being (Rochford, Doherty, & Owens, 2014), especially through improvements on the quality and quantity of dyadic interactions (Deutscher, Fewell, & Gross, 2006). Also importantly, parental groups seem to promote social cohesion and support networks that reduce parental stress and feelings of loneliness, hence contributing to a better family environment and to the strengthening of the community, able to be sustained in a longer term (Hanna, Edgecombe, Jackson, & Newman, 2002). Prevention and early intervention programs that focus on the first years of a child's life, support their learning and development, while also supporting parents, and engage the community and make use of its resources seem to be a well conceived formula for the

protection of families and the promotion of their positive development (Rochford et al., 2014).

Although they are the ones who benefit the most from the experience of joining any type of community service, either for them or their children, disadvantaged families are also usually the ones who are less likely to seek and/or enroll in this type of service (Barlow, Kirkpatrick, Stewart-Brown, & Davis, 2005; Cortis, Katz, & Patulny, n.d.). Not only do children from vulnerable families attend less educational and developmental programs (Hancock et al., 2012), but also these parents participate far less in any sort of local initiatives or programs, avoiding contact with services in general (McLean et al., 2017). These are the so called *hard to reach* or *out of reach families*: those who, in light of their disadvantaged life circumstances, accumulation of risk factors, situation of social exclusion or lack of several resources face greater difficulties in knowing and engaging in several community services and initiatives, making them a priority target for parent and child educational programs (Barlow et al., 2005). Considering the findings that claim these vulnerable families are the ones who benefit the most and on who the impact of educational programs is more significant, it must be ensured that programs succeed in attracting, enrolling and engaging both parents and children, while also bearing in mind the utmost importance of delivering a quality service, with positive interactions between children, caregivers and technicians, with adequate educational content and an overall positive climate. One way to ensure a high quality standard is to monitor the quality of the early education service in which families take part.

Quality in Early Childhood Education and Care (ECEC)

There is some international consensus on what is considered to be necessary to promote young children's adequate development, as well as on what outcomes societies seek to achieve on children and what are the educational means to achieve them (Tietze, Cryer, Bairrão, Palacios, & Wetzel, 1996). The characteristics of early childhood education and care facilities that affect children's development are what constitute its quality. Quality in ECEC is most commonly defined in terms of its structural and process characteristics, which are thought to influence child development and learning (NICHD, 2002). This "structure and process" view helps policy makers define quality standards that may guide educational practices at a broader, more standardized level; however, despite these central and common dimensions of quality that research and policy attempt to establish, and that allow some level of agreement on how to define and assess quality, it must be taken into account a certain degree of variation and diversity among different social, economic and cultural contexts

(Myers, 2004). Some tools have been developed for quality assessment in formal early childhood education and care settings, such as ECERS (Early Childhood Environment Rating Scale; Harms & Clifford, 1980), ECERS-R (Early Childhood Environment Rating Scale – Revised; Harms, Clifford & Cryer, 1998) or ITERS-R (Infant/Toddler Environment Rating Scale; Harms, Cryer & Clifford, 2006), as well as the CLASS (Pianta, La Paro, & Hamre, 2008) or the Leavers' scales of involvement (Leavers, 1993, 1994).

Structural indicators are the more distal, quantitative and easily measurable characteristics of ECEC, and thus more regulable; it includes aspects such as group size, child-adult ratio, teacher's education or physical characteristics of the setting. More importantly, these indicators are thought to be pre-conditions for process quality, working as frameworks for the interactions and activities children experience in their daily routines (Barros et al., 2016; Slot, Leseman, Verhagen, & Mulder, 2015; Taguma et al., 2012). Structural aspects are also the most common indicators used to inform policy makers and to fix quality standards at a larger scale (OECD, n.d.).

On the other hand, process indicators refer to children's daily direct experiences, such as the frequency and type of interactions with caregivers and peers, the type of activities they carry, or the materials with which they interact (Barros et al., 2016). They are the overall way of interacting with and approaching children, and of providing them with activities that promote skill acquisitions and learning; high process quality should include characteristics such as adult-child affectionate and responsive interactions, with high levels of guidance and verbal stimulation, and affectionate overall group climate, with positive social interactions between children and where opportunities to learn and develop thrive (Leseman & Slot, 2014). Process aspects are seen as proximal determinants of child development (Slot et al., 2015) and are of particular importance for quality in ECEC (Litjens, 2014), since research points out to process quality, particularly caregiver-child interactions, as privileged means for child development and learning (Barros et al., 2016).

Of great interest in the literature has been the relationship between structural indicators, process indicators and child outcomes. Since structure is seen as a more distal aspect of child development, and process a more proximal one, several studies have been highlighting the mediation path through which structural characteristics influence child development (especially social and cognitive skills), i.e., through process aspects (NICHD, 2002). Even though current available findings are still moderate and mixed, studies seem to present some evidence that supports this mediation path, where the strong direct effect of process quality on child development and skills is preceded by a (less strong) indirect effect

of structural quality on child outcomes, through process indicators (NICHD, 2002; Slot et al., 2015; Slot, Bleses, Justice, Markussen-Brown, & Højen, 2018).

Quality in non-formal educational settings

Similarly to formal educational settings, non-formal educational responses must also guarantee they deliver a quality service, serving children and families with high-quality content within positive interactions that stimulate children and provide a safe, nurturing environment for both them and their caregivers (French, 2005). These previously described programs must act not only as educational settings but mostly take advantage of their privileged closeness to families and communities, working alongside them, strengthening them and promoting the acquisition of parental, social and personal skills, as well as the development of social networks and social support in their communities. One way to help the achievement of these ambitious goals, and similarly to a context of formal education, is to guarantee the programs are delivered with the highest possible quality, within positive interactions and adequate resources (Nyland, Nyland, Gao, Ng, & Zeng, 2016).

In an attempt to answer to these concerns, one type of social and educational response started to gain popularity amongst several countries in the past few decades: a group gathering, where caregivers would come with their young children and spend some time socializing with other adults with infants, while engaging in activities that stimulated their learning and socialization. These are the so called playgroups: a local, community-based group that brings together preschool-aged children and their parents or carers for the purpose of play and social activities (Dadich & Spooner, 2008). Playgroups as a model of early intervention in education have been well established in terms of its implementation, but studied to a lesser extent when it comes to why the program seems to work and under what concrete circumstances (Jackson, 2011, 2013). In other words, few playgroups been examined in terms of their quality (Barata, Alexandre, de Sousa, Leitão, & Russo, 2016; Ramsden, 1997) due, in part, to an absence of the appropriate methods for quality assessment in a non-formal ECEC provision with such particular characteristics as the playgroups. Some examples of research (e.g.: French, 2005; Johnston & Sullivan, 2004) attempted to scratch the surface on educational quality in playgroup settings, relying mostly on stakeholders' feedback or, when resorting to observation tools, applying those designed for formal early childhood education and care settings (Cunningham, Walsh, Dunn, Mitchell, & McAlister, 2004).

Considering that *quality matters* also for non-formal educational programs, as well as the relevance of fulfilling this research gap, a pilot-project conducted in Portugal between

2015 and 2017 (Barata et al., 2016) aimed at designing, implementing and evaluating several playgroups throughout the country, studying not only their impact on participating families but also monitoring their quality based on feedback from the participants and on the observation of playgroup sessions. The research team developed a quality observation tool – the Playgroup Environment Rating Scale (PERS; Alexandre et al., 2016) – specifically for playgroup contexts, that allowed to assess process quality in terms of space and materials, activities and routines, diversity, group climate and interactions between participants. Although still currently under study, the observational tool developed during this pilot investigation aims at serving the purpose of fulfilling a gap in the literature regarding the evaluation of quality in non-formal educational provisions for the early years, in particular for this playgroup working model, proving to be an ambitious pioneer research project in this area.

The present work will now attempt to further detail what is this playgroup model of early education and to what extent it impacts children, caregivers and local communities, as well as what constituted the pilot-project carried out in Portugal previously briefly described.

Playgroups: an alternative educational social provision

What are playgroups?

To more explicitly define the playgroup working model, the Australian Commonwealth Government describes playgroups as “regular, informal gatherings for parents and caregivers of children under school age” that “provide opportunities for children’s social, emotional, physical and intellectual development while also providing opportunities for parents and caregivers to establish social and support networks to encourage and assist them in their valuable parenting role” (Department of Family and Community Services and Indigenous Affairs, 2006, cited in Dadich & Spooner, 2008; p. 95). These gatherings happen on a weekly basis, in local community settings (like libraries, schools, or other public venues), with the aim of promoting the child’s healthy development and learning, through socialization and educational play activities, while also providing the caregivers the opportunity for parental and personal skills acquisition; also, playgroups have the ability to connect the parents or caregivers with each other in a way that promotes the development of safe and strong social networks, hence strengthening the local community.

The playgroup movement is the result of an increasing awareness on the value of play in children’s development (Gregory, Harman-Smith, Sincovich, Wilson, & Brinkman, 2016; Whyte, Daly, Bujia, & Smyth, n.d.), and it has been growing from being perceived as a tool to

fill in a service gap (i.e., the shortage in pre-school services) to the understanding of playgroups' potential to enhance social capital, strengthen communities, and educate parents to better support their child's development, in particular through the facilitation of play (McLean et al., 2017). Play activities have proven to be a key mechanism through which children interact with and learn about the world around them, contributing to their "growth, development, socialization, communication and creativity" (Fabrizi, Ito, & Winston, 2016; p. 1), and it is fundamental for children's development, as recognized by the United Nations Convention for the Rights of the Child (1989); play is also associated with the development of language and literacy, sociability and mathematical ability (Santer & Griffiths, 2007). In their review on supported playgroups, Commerford and Robinson (2016) sum up the theoretical underpinnings to this educational model: aside from (1) the importance of play in child development, as mentioned, playgroups are also based on (2) an ecological approach of human development, with different systems of the child and family's lives interacting directly with the individual as well as between them, influencing their growth; and also on the concept of (3) the group as a source of social support, through the connection of different caregivers who may share the same similar life moments, ultimately influencing young children's well-being and development (Commerford & Robinson, 2016).

Thus, guided by a child-centered approach, playgroups provide stimulating and challenging opportunities for children, while ensuring they feel "happy, relaxed and at home in the environment" (Whyte et al., n.d.; p. 8), with the ultimate goal of providing learning through play.

Even though literature often depicts playgroups as generally being broken down into two main types of arrangement, it should be taken into consideration that this strict distinction serves mainly for the purpose of clarity, and that each existing model of playgroup arrangement can be placed along a continuum of interventive facilitation, with each model having its own way of operating, its own goals and outcomes, which may be more or less similar between each other (Dadich & Spooner, 2008). With that said, there can be found mainly two types of playgroups: those that are self-managed (also called community playgroups) and those that are supported, i.e., that are lead by a facilitator that is usually a trained early childhood educator (known as facilitated or supported playgroups; Commerford & Robinson, 2016). In some countries like Australia or Ireland, where playgroups have played an important role as a response in the early childhood landscape for decades, they may be inserted in a nation- or state-wide playgroups network, benefiting from the occasional supervision and advice of higher, more specialized instances (Commerford & Robinson,

2016; Gregory et al., 2016). In their work on the origins and rationale of different types of centers for parents and young children together in different countries, Hoshi-Watanabe, Musatti, Rayna, and Vandebroek (2015) reflect on how this educational model gained recent popularity and spread out around the world (namely in Belgium, Italy, France and Japan), despite having more or less similar theoretical and methodological approaches. Although not under the “playgroup” designation, these mostly European models of educational centers for dyads to attend together aim at supporting families and answer to insufficient child-care provision, and to needs of socialization, parental support and community connectedness (Hoshi-Watanabe et al., 2015).

For the purpose of this dissertation emphasis will be given to supported playgroups, as this is the model closer to what has been done so far in Portugal. It’s important to note, however, that some other similar initiatives have been taking place sporadically across the country for the past few years² and, although not sharing the playgroup name, they share some aspects related to their purposes and methodologies. The playgroups presently under study and that constitute the sample of this investigation, as well as the ones implemented and studied extensively during the pilot-project, are inspired by both the European model of playgroups (such as the ones in Italy or Belgium, previously described) and the Anglo-Saxon model (as in Australia or Ireland), as will further be detailed.

Thus, supported (or facilitated) playgroups are initiated by a third party (frequently a governmental or not-for-profit organization) and conducted, managed and facilitated by a paid facilitator, usually and preferably with expertise in early childhood education and care. Supported playgroups “have a dual focus on supporting the development and wellbeing of both children and their parents, together” and “aim to support families and children with particular needs and vulnerabilities” (Commerford & Robinson, 2016 p. 42). Supported playgroups can therefore be directed towards families in socioeconomic disadvantage, families with children with special needs or some type of physical or cognitive impairment (Chen, Hanline, & Friedman, 1989), immigrant families from culturally diverse backgrounds that may experience some type of social exclusion (Warr, Mann, Forbes, & Turner, 2013), communities of migrant families, such as in China (Nyland et al., 2016) or families of young parents. Regardless of aiming at any specific group, supported playgroups are always

² <https://a-par.org>

http://www.ludotempo.pt/brincar_de_rua

welcoming to all types of families, ensuring a safe, positive, nurturing environment for both children and their caregivers.

The playgroup model seems, thus, to be a social response that contributes for the general well-being of both individuals and the community, providing a complex and yet sustainable service for the positive development of all participants. The particular benefits associated with its different levels of intervention are now further explained.

Benefits of playgroup attendance

Despite their child-centered nature, playgroups are tools that produce positive change not only to the child but also at the family and community levels (Oke et al., 2007). There are few studies aiming at understanding how effective playgroups are at achieving their goals. However, the limited evidence base currently at disposal seems to shed light on positive changes for all participants, adding up to the body of literature that advocates for the benefits of playgroup participation for all (Hancock, Cunningham, Lawrence, Zarb, & Zubrick, 2015).

Benefits for children

Besides providing fun and enjoyment, play activities are proven to be linked to language and literacy development, while also encouraging learning and exploration on infants and toddlers, pushing them to interact not only with the material environment but also with others, whether it is peers or other adults. This establishment of early relationships helps children understand how others think, feel and behave, as well as how they should emotionally respond to social situations. It helps building social and personal skills, like self-confidence, alongside emotional regulation and cognitive development (Oke et al., 2007).

One research project by Cunningham, Walsh, Dunn, Mitchell and McAlister (2004) attempted to assess three and four year old children's perceptions about the playgroups they attended, demonstrating young children can also provide valuable insight on their experiences if given a voice to do so. However, most of the literature on the effects of playgroup participation on children relies upon caregiver's reports of changes they perceived in their child thanks to their playgroup enrolment. For instance, Oke, Stanley & Theobald (2007) interviewed a sample of Australian caregivers from several different cultural backgrounds who said their children "enjoyed attending and benefited from the opportunities for socialization and interaction with other children", which could be seen from an improvement on children's sharing capacity and routine familiarization (Oke et al., 2007; p. 13). This

relational improvement on children, reported by their caregivers, was also found by Commerford & Robinson's (2016) literature review, where a number of studies highlights positive changes on social skills such as getting along with other children and learning to share. Parents also seem to share the belief that playgroups are a privileged source of new learning opportunities, with their children becoming more confident and more engaged in play over time (ARTD Consultants, 2008); speech development (ARTD Consultants, 2008; DEECD, 2012) and the learning of new behaviors (ARTD Consultants, 2008) are also pointed out as notable improvements. These enhanced social skills are also reflected on child-parent interactions, as noted by Vandell (1979), since toddlers who participated in playgroups became more responsive to their parents and engaged in more reciprocal interactions, when compared to toddlers under homecare, suggesting a facilitative effect of playgroup experience on their social skills (Vandell, 1979).

Playgroup participation is also associated with children's school readiness, since they provide a first contact with educational routines, with other children and with other adults of reference, as well as cognitive and linguistic development. Thus, toddlers who attend playgroups experience a smoother transition to school environment, reducing the stress and anxiety associated with the beginning of this new life cycle (Knaus & Warren, 2015; Mclean & Schaper, 2011).

An important study by Hancock et al. (2012) with a sample of Australian children provides key evidence that continued playgroup participation is associated with significantly improved child outcomes at age 4-5 on learning competence and social and emotional functioning, and that this impact is of greater significance for children from disadvantaged families. This may be so, according to the authors, due to the lack of resources that children from lower socioeconomic status have at their disposal on a daily basis at home, which means they would be the ones who would benefit the most from attending playgroups (Hancock et al., 2012). If so, this would mean that the improvement on developmental outcomes for children who attend playgroups on a continued basis (in comparison to those who do not) would be even more evident among children from lower socioeconomic status.

Johnston & Sullivan's (2004) evaluation of supported playgroups' implementation and outcomes in an Australian community also found that the participation of at risk families in this service resulted in vulnerable children being less likely to be exposed to abuse and neglect, and in their life chances and environments improvement due to this early intervention strategy (Johnston & Sullivan, 2004). These findings highlight the importance of the benefits not only for children but also for their caregivers, since this improvement on the quality of the

home environment is a reflex of the process of parental education and support carried out during playgroup sessions.

Benefits for adults

As stated previously, it is more difficult to care for a child when the carer faces a condition of social exclusion and multiple risk factors; this means that improving such life conditions would be key to a healthier development for the child. Playgroups play a major role to the caregivers personally, as they have been found to improve significantly their well-being, psychological health and social and emotional support networks (Berthelsen, Williams, Abad, Vogel, & Nicholson, 2012), not only by providing them with the skills necessary to succeed in their parenting role but mainly by connecting them to other parents with whom they may empathize, share experiences and form strong bonds over time (e.g.: Hancock et al., 2015; Jackson, 2011).

Several studies on the impact of playgroups rely on participant caregivers' reports of what they perceive as being the positive outcomes of their experience. Parents very often offer a description of their positive social experience, reporting the development of new relationships – even friendships – with other parents (Hancock et al., 2015) and of different types of support (Jackson, 2011), while also recognizing the importance of learning new information and skills on caring for their young children (Berthelsen et al., 2012). This acquisition of parenting skills brought them higher levels of confidence, seen through an increase on initiating and joining activities with their children, socializing with other parents (not only at the playgroup but also outside of it, showing the development of friendship bonds) and by applying at home what they learn in playgroup setting (AIFS, 2011).

On their report of playgroup functioning seen through the eyes of participating parents, Berthelsen et al. (2012) aimed at understanding what caregivers perceived as being the biggest benefits of their playgroup participation, for both them and their children, as well as what they thought were the main downsides and difficulties faced during this experience. Participants reported that playgroup participation helped them to understand child development, to learn new ways to play with and to teach their young children, to find out about other services available and, most of all, to meet and talk with other parents. The authors also report an increase on parental well-being, through a decrease of depression episodes and an improvement of overall health after participating in playgroups. More importantly perhaps, this report found that families who attend more regularly to playgroup sessions reported more benefits from this participation than those who attended less often,

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while also displaying higher levels of engagement in the activities and higher levels of satisfaction (Berthelsen et al., 2012). Attendance and engagement in playgroup sessions are thus key elements for the achievement of positive outcomes for both parents and children (Jackson, 2013).

Playgroups are a privileged site for parental education, particularly through the enhancement of parents' awareness of their young children's learning and development through play (McLean et al., 2017). Learning about their toddler's needs and understanding their development, while also realizing they have the tools necessary to succeed in this task, provides parents with a sense of empowerment, contributing to greater self-esteem and self-confidence, and overall well-being (Jackson, 2011). On the other hand, this opportunity to grow out of a possible social exclusion situation by facilitating caregiver's community connectedness – to both people and services – contributes positively on an individual level (on the well-being of the adult), on a familiar level (by improving the quality of family relationships and providing them with a more solid social network) and at a community level (contributing to the increase of social capital on a stronger, healthier community; Oke et al., 2007).

Benefits for the community

Playgroups have also displayed – although to a lesser extent, as this is the least studied aspect of playgroup impact – to have effects on the community in which they take place. Caregivers who attend playgroups tend to develop an easier and more positive relationship with other formal and informal local services, while also taking more interest and engaging more in other community initiatives (Berthelsen et al., 2012; Jackson, 2011). Regarding migrant and socially and culturally excluded families, playgroups have also shown to have a “bridging role” in linking these families and local service systems, due to a work model that considers and respects their needs and concerns (Warr et al., 2013), while also promoting social inclusion by being affordable and of universal access, providing acceptance of diversity and equal opportunities for all children (Whyte et al., n.d.). The development of relationships between adults participating in a playgroup greatly contributes to the enhancement of social support and the development of social networks, which ultimately contribute to strengthen the local community and develop its social capital (Dadich & Spooner, 2008). Playgroups as a vehicle to enhance communities' social capital is one of the most mentioned benefits of playgroup implementation at a local level (Gibson, Harman, & Guilfoyle, 2015; Mulcahy, Parry, & Glover, 2010), as well as the increased collaboration and networking between

different local early childhood services as a consequence of playgroup implementation on the community (AIFS, 2011).

It is important to keep in mind that, although these previously described benefits are relevant and encouraging on their own, they remain relevant only if aspects such as attendance, dosage or engagement are taken into consideration, i.e., if the families effectively attend the playgroup and engage in the activities within a quality setting (Zaslow et al., 2011). Matters of quality have been addressed previously, but particular aspects such as dosage (which concerns the amount or timing of participation in a given setting, such as ECEC or a playgroup; Zaslow et al., 2011) and engagement (the level of involvement in activities as well as the level of social participation of parents; Berthelsen et al., 2012) were also accounted for and reflected upon, not only in the pilot-project about to be described but also in the present dissertation, as will further be addressed.

***Playgroups for Inclusion* or “Grupos Aprender, Brincar, Crescer”: a pilot-project in Portugal³**

In some countries like Australia, England or Ireland, playgroups are already seen as a well-established education and care option in itself, working for several decades now and relying on a strong national network for guidance, implementation and monitoring (Oke et al., 2007; Ramsden, 1997). Despite its long implementation history in other countries, the playgroup model is still not a common response for families in Portugal, although there can be found some examples of similar initiatives acknowledging the importance of such a provision (as previously stated).

The first movement took place between 2015 and 2017 with a pilot-project of national reach, carried out by a national consortium which included the Directorate General of Education (DGE), the Bissaya Barreto Foundation (FBB), the Calouste Gulbenkian Foundation (FCG), the High Commission for Migration (ACM), the University of Coimbra and ISCTE – University Institute of Lisbon, counting with the support of the European Union (EU). The project “Playgroups for Inclusion” – or in Portuguese “Grupos Aprender, Brincar, Crescer” (or GABC, which may translate to “Groups to Learn, Play and Grow”) – aimed at implementing playgroups in five districts in Portugal (namely Aveiro, Coimbra, Lisboa, Porto

³ For a detailed report on the pilot-project please see Barata, Alexandre, de Sousa, Leitão and Russo (2016).

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and Setúbal) throughout a 10 month period, for children from birth to four years of age who did not attend any formal educational facility, together with their main caregivers.

The national consortium aimed at designing, implementing, evaluating and disseminating this innovative educational program for ECEC, pioneer on the early years education and care landscape. This was also the first international randomized controlled trial (RCT) of a playgroups-only program, with an experimental group of families and a control group; the control group benefited from a 3-month intervention in the later stage of the project. The experimental evaluation revealed promising results regarding children's language and cognitive development, their social and behavioral skills, as well as caregivers' goals, values and aspirations, and their personal well-being (Barata et al., 2016).

Besides the study of program impact, the consortium institutions also carried out a study of program implementation, with special focus on aspects related to its *quality*. The implementation study aimed to attribute with a higher level of certainty the observed outcomes in participants to aspects related to implementation variables, as well as to “have a broader comprehensive analysis” of the program implementation from different stakeholders' perspectives (Barata et al., 2016, p. 127). The data collection procedures covered key areas to the implementation of community programs such as – but not only – matters of dosage, responsiveness or quality of implementation, with a diverse methodology that encompassed documentary analysis, focus groups, individual interviews, questionnaires, and session recordings. As described in the previous section, it was of particular importance to monitor and guarantee high levels of playgroup quality, participants' attendance (related to dosage), as well as caregivers' engagement in the playgroup; these features result on a proper program implementation and improve the chances of more significant impacts on the participating families (Barata et al., 2016; Zaslow et al., 2011).

As said, emphasis was given to matters of quality of the playgroups, regarding the following aspects: space and materials, activities and routines, contact with diversity, and climate and interactions. To better assess these relational and interactional aspects of quality, it was developed an observation tool – the Playgroup Environment Rating Scale (PERS). The PERS (Alexandre et al., 2016) is an observation tool developed during the GABC pilot-project by its monitoring team, and is born from the need for a specific instrument that would assess indicators of quality in a playgroup context – which is, in several aspects, fundamentally different from the process quality one would expect in a formal educational setting. As stated previously, in most environmental quality assessment studies conducted in playgroups researchers make use of observational tools such as the ECERS/ECERS-R

(Harms & Clifford, 1980; Harms, Clifford & Cryer, 1998) or the QLI (Quality Learning Instrument; Walsh, 2000), specific for formal center-based ECEC provisions. This gap is often pointed out in the literature, and motivated the monitoring research team from the pilot-project to develop this observational instrument (mostly inspired by the ITERS–R and on Leavers’ engagement and involvement scales), that conveys aspects such as interactions between participants, activities, routines and overall climate of the playgroup⁴. PERS was conceived to facilitate the observation of playgroup implementation and the understanding of what is a day in the experience of participating families at a playgroup. This scale is still, as previously mentioned, under study for validation; however, during the pilot-project it was subject to interrater agreement and the researcher who intends to apply this observation tool has to undertake a training process, as was the case for this dissertation and as will be further explained.

The results of the “Grupos Aprender, Brincar, Crescer” project regarding the studies of impact and implementation, made public in 2017, are encouraging and constitute an incentive to the dissemination of this model of educational response for the early years in Portugal. It is now up to the local communities to implement the GABC model and put it to its families’ service. The national consortium of the pilot-project still tries to monitor and assist the new playgroups that are arising at a local level, by supporting them and ensuring they remain truthful to the theoretical principles that guided the playgroup philosophy defended during the pilot-project.

Several community institutions embraced this challenge and were able to implement their own GABC in different local communities. The present dissertation aimed at locating (in the greater Lisbon area) those working playgroups – that were directly inspired by the pilot-project and that thus followed its foundational principles – and inviting them to take part in a quality monitoring process, with caregivers and facilitators as primary sources of information. This search resulted in the contact with two playgroups (also referred to as GABC) that had been running for several months, thus showing a solid – although brief – implementation history in their communities. It must be taken into consideration however that, despite being inspired by the pilot-project, these playgroups currently being implemented have been adjusted to local families and their specific needs, which makes them differ from the ones from the pilot-project in some characteristics; for instance, they allow several children from

⁴ Details regarding PERS will be addressed in the Method section of this dissertation.

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one same caregiver to attend, while also not imposing an age limit or the condition of not attending any formal educational setting. This results in adult participants frequently attending with more than one child, often over pre-primary school age and that may be enrolled in other educational services. Because they are not an organized network managed by the same stakeholders, the present GABCs reached by this study do not also benefit from the oversight of a supervisor or the guidance of a structured large-scale provision that ensures standardized policies and practices for the different local GABCs.

Due to the promising results obtained from the *Playgroups for Inclusion* pilot-project, and because playgroups play such a large role in the early years' landscape in several countries, it becomes necessary to carry this comprehensive analysis on their current implementation in order to pave the way for a deeper level of understanding on playgroup functioning in the Portuguese scenery, as well as to document the sustainability of the project itself.

Importance of monitoring implementation

For all of the expressed above, these playgroups currently taking their first steps are worthy of a closer look to their implementation and to what several stakeholders experience from them. Such is possible through a monitoring process that keeps up with the different steps of program implementation and considers several viewpoints when it comes to how this program works, why and for whom.

Monitoring program implementation is one key path to ensure program goals are met, and that eventual resulting impacts are in fact due to an adequate and effective program delivery and implementation (Durlak & DuPre, 2008). This monitoring process becomes more necessary when programs are disseminated and replicated in the communities (i.e., “in the real world”), since the maintenance of a high quality level is one of the main challenges to program effectiveness (Dusenbury, Brannigan, Hansen, Walsh, & Falco, 2005). There are inherent aspects to implementation which must be followed to ensure program efficacy, including (but not only) fidelity, adaptation, dosage and quality (Durlak & DuPre, 2008); these aspects were thoroughly monitored during the pilot-project implementation, and shall also be addressed in this dissertation, although not with the same level of detail (as will further be explained), hence this dissertation constituting a comprehensive analysis of playgroup implementation rather than an exhaustive monitoring process. Monitoring processes usually imply returning the assessment to the several program stakeholders, in order to promote improvements and adaptations, which was not the case for this dissertation; thus, it

lacks this participatory component which would allow for eventual changes and alterations to program delivery, making this a comprehensive analysis more than a true monitoring process.

This comprehensive analysis is thus pertinent to better ensure these playgroups were delivered with high levels of quality, while also allowing for a deep understanding of the experience of facilitators and caregivers regarding this particular project; their insights may be valuable to the comprehension of how and why playgroups seem to work for parents, children and communities.

Objectives

Considering the exposed so far, this dissertation aimed at locating two playgroups being currently implemented in the greater Lisbon area, and inviting them take part in a quality monitoring process that would rely on the perceptions and experiences as playgroup participants, as well as on the careful observation of playgroup sessions, focusing on its overall quality.

It is important to remember that illegible playgroups had to be running for over a month and/or had some stability of implementation (according to its facilitators); facilitators also had to have specific GABC training (granted by the national consortium) and an agreed commitment to follow the pilot-project foundational principles on playgroup implementation. These criteria served the purpose of ensuring these playgroups and the monitoring procedures were somewhat similar to what was conducted during the pilot-project.

Thus, specific goals were:

- To obtain facilitators' expectations and current experience from playgroup implementation, including aspects regarding session, activities, participants and perceived impacts;
- To obtain caregivers' expectations and current experience from playgroup participation, including aspects regarding session, activities, and perceived benefits for both them and their children;
- To observe and assess overall playgroup process quality, particularly regarding space and materials, activities and routines, diversity and inclusion, and climate and interactions.

Chapter II – Method

Sample

The study relied on the participation of two running playgroups (or GABC) both with two facilitators and 10 signed-up participating families (with a total of four facilitators, 20 caregivers and 22 children). All four facilitators were female and with a bachelor or masters degree, although in different areas – namely social education (N=1), psychology (N=1) and child education (N=2). Regarding the participating families, the average caregivers' age was of 38 years old, with 19 of the attending caregivers being female, and with the vast majority (85%) being the mother of the participating child (with the exception of one grandfather and two babysitters); children's average age was of 34 months old, with 14 being female. Families from GABC 1 were self-referred, while those from GABC 2 were referred by social services as participants, as will further be detailed.

The quantitative details regarding participants' characteristics rely mainly on data collected and supplied by the playgroup facilitators, while qualitative information was also grasped during the interviews with caregivers conducted by the author of this dissertation, whenever freely mentioned, allowing a deeper understanding of family characteristics (such as current professional situation, professional areas of expertise, educational level, family situation). Because the two playgroups collected different sociodemographic information about their participants, they will now be described separately⁵.

GABC1

GABC 1 counts on 10 caregivers and 10 children currently participating, having been running for eight months at the time of the data collection process. The details of the collected information on participants are rather scarce, only covering participants' age, sex and relationship between caregiver and attending child. Thus, the caregiver's average age is of 41 years old (ranging between 35 and 65 years old), being mostly female (N=9) and mothers of the participating child (N=7), with the exception of two babysitters and one grandfather, who is also the only male caregiver attending the playgroup; children's average age is of 21 months old (with the youngest being eight months old and the oldest 35), with six being male. During the interviewing process however, it was possible to understand that most caregivers had completed at least high school or higher, with several parents having a bachelors or

⁵ No objective data on the economic status of the participating families was collected.

masters degree. Several attending mothers also reported to be unemployed, with families being of one working parent. This GABC was located at a middle to upper class neighborhood, and had one 1h30min session per week.

GABC2

GABC 2 counts on 10 caregivers and 12 children currently participating, having been running for four months at the time of the data collection process. Caregivers' average age is of 43 years old (ranging between 25 and 43 years old), with all being female and mothers of the participating children; children's average age is of 45 months old (with the youngest being 19 months old and the oldest 100), with 10 being female. Contrarily to the enrollment conditions in the pilot-project, this GABC allowed for the participation of caregivers with more than one child, as well as of older children (above pre-school age) that aren't enrolled in formal educational settings due to a recent immigration situation, which explains the higher child age average. Also differently from the pilot, it allows the participation of several older siblings of the attending children (who already attend school) on school-break periods, not counting as formal participants. From the 10 participating caregivers only one was born in Portugal, which results in a great diversity of cultures and languages spoken between participants, all showing different stories and experiences of immigration. Again, details of their specific situations and personal stories were gathered during the interviewing process, whenever freely mentioned by the caregivers; this allowed knowing caregivers were original from countries such as Romania, Brazil, Angola, Cape Verde or Guinea Conakry. Because this GABC's facilitators collected more detailed information about their participants, it is possible to state that eight of the caregivers are unemployed and the remaining two hold precarious jobs, having mostly low educational levels⁶: one has the 1st cycle (4th grade), one has the 2nd cycle (6th grade), six have the 3rd cycle (9th grade) and another has a higher level of education (similar to high school), completed in her home country. Most families also count with the support of social services, with eight being recipient of *Rendimento Social de Inserção (RSI)*⁷ and followed by social assistants from *Santa Casa da Misericórdia* for being considered at-risk families; another family is being followed by an *Equipa Local de Intervenção Precoce (ELI)*⁸, due to particular child's developmental issues; only one family does not benefit from any these services. Regarding the children, two are diagnosed with

⁶ Levels presented according to the Portuguese schooling system.

⁷ <http://www.seg-social.pt/rendimento-social-de-insercao>

⁸ <https://www.dgs.pt/sistema-nacional-de-intervencao-precoce-na-infancia.aspx>

special needs, with other two still going through a diagnostic and assessment process. This GABC was located at a middle to lower class neighborhood and had two 2h sessions per week. Table 2.1 summarizes the available sociodemographic data on all participants from both GABCs.

Table 2.1: *Sociodemographic data on participants from both GABCs (NA stands for information that is “Not Available”).*

Variables	GABC 1	N	GABC 2	N
Total of caregiver participants	10		10	
Mean caregivers’ age (in years)	41		43	
Caregivers’ sex	Female	9	Female	10
	Mother	7		
Caregiver who attends playgroup	Babysitter	2	Mother	10
	Grandfather	1		
			1 st cycle	1
Caregivers’ educational level	NA		2 nd cycle	1
			3 rd cycle	6
			High School	1
Professional situation	NA		Unemployed	8
			Employed	2
Total of child participants	10		12	
Mean children’s age (in months)	21		45	
Children’s sex	Male	6	Female	10
Social services beneficiary	NA		RSI	8
			ELI	1
Special Educational Needs	NA		Diagnosed	2
			In assessment	2

Instruments

Semi-structured interviews

Interviews conducted with facilitators and with caregivers followed a semi-structured script and were recorded as audio files. The scripts followed those from the pilot-project, having a similar structure and covering similar main areas of information. For the facilitators, interviews covered aspects such as the history of conception and implementation of that particular playgroup, specific training for playgroup conduction, initial expectations towards the project, planning and implementation of sessions’ structure and activities, aspects related to space and materials, overall assessment of the experience so far (both in terms of positive aspects and of challenges and difficulties faced), the different relationships existent with and between participants – specially regarding participants’ involvement in the activities –, overall group climate and future expectations, all of those aspects approached considering their evolvement since the beginning of playgroup implementation (for the full script, see Appendix B.1).

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For the caregivers, interviews approached a general assessment of the playgroup, including the overall climate, the activities carried out, the space and materials available, positive and negative aspects about the playgroup, relationships between all participants, and matters of frequency of attendance to the sessions, as well as aspects related to learning and well-being, both of the child and the adult, such as what skills have been learned, what they enjoy the most, and what has changed in their lives so far as a result of playgroup participation (for the full script, see Appendix B.2).

PERS – Playgroup Environment Rating Scale

The Playgroups Environment Rating Scale (Alexandre et al., 2016) is an observational tool, developed during the *Playgroups for Inclusion* pilot-project for the purpose of assessing process quality of the specific non-formal educational model that are playgroups. PERS is organized in four subscales: *Space and Materials*, *Activities and Routines*, *Contact with Diversity*, and *Climate and Interactions*. Each subscale is then broken down to several items (17 in total; e.g.: “Peer interaction”), which in turn contain multiple indicators (e.g.: “Peer interaction exists during a large part of the session (children are close to each other, there is eye contact between them”); indicators are then coded as being present if observed, or absent if not, allowing each item to progress in terms of score from 1 to 7, being 1 *Inadequate Quality* and 7 *Excellent Quality*. Some items, such as those referring to the role of the supervisor, are able to be scored as *Non Applicable* (NA), which was the case in the playgroups assessed in the present work since, as mentioned, the supervisor was not an existing figure in these playgroup models. The playgroup sessions are videotaped and two observation cycles are scored: the first 20 minutes of the session, followed by a break on observation of another 20 minutes, and the second cycle of the following 20 minutes after the break. Additional information to complement the observed cycles was obtained from the facilitators, both from the conducted interviews and from a characterization document filled by the facilitators (for a full view of subscales and items, see Appendix C).

Data collection procedures

Data collection procedures followed the ones carried by the pilot-project, and every step took place with previous training. The use of PERS involved a total of nine hours of in-classroom training with the monitoring team from the pilot-project, assessing videotaped sessions of different stages of several original playgroups participating in the pilot-project; the scores were then compared to the original scores from the monitoring team, obtaining an 82%

overall match. Also for the purpose of training, a third playgroup that was at the time taking its first steps (thus not qualifying as a sample for this study), also taking place in greater Lisbon, was contacted in order to collaborate as a *data collection training playgroup*. It was possible for the author of this dissertation to conduct interviews with the two facilitators and two caregivers of this GABC, in order to better understand the script and the interviewing process. Most importantly, it allowed practicing the use of PERS on site, since a full session was also videotaped and scored with this instrument.

The two GABCs constituting the sample of this dissertation were contacted previously, through the facilitators, with the purpose of inviting them to take part in this monitoring process. Once all the objectives and procedures were detailed, the facilitators consulted the participating families on their will to contribute to this study. Once the families verbally agreed, the informed consents were sent to the facilitators, who then delivered them to the caregivers and later recollected them; facilitators also signed and informed consent of their own.

Regarding the video recording of one session, a date was established with each GABC that would suit the families and would not be a constraint to the activities the group had planned for that day; the recordings lasted for the entire session. From GABC 1 five caregivers and five children were present in the video-recorded session, and from GABC 2 the recording counted with three caregivers and six children.

Interviews with all four facilitators took place at their worksite, after a playgroup session, and lasted between 30 minutes and one hour. Interviews with caregivers from GABC 1 took place in a public park (with the families arranging the place and time), allowing for each caregiver to be interviewed in turns while others looked after their child, with a total of five caregivers being interviewed; interviews with caregivers from GABC 2 took place during a playgroup session, with each caregiver taking turns to be interviewed in a separate room, being five caregivers interviewed in total. All interviews with caregivers lasted around 10 to 30 minutes.

Data analysis procedures

A qualitative analysis of data from both sets of interviews was conducted. A methodological decision was made to conduct different types of analysis, as follows: (1) interviews with the facilitators were subjected to a thematic analysis (Braun & Clarke, 2006), given the small number of interviewed facilitators (N=4), which allowed to gather the maximum information possible from the data while focusing on the themes emerging from

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them; (2) because interviews with caregivers were in larger number (N=10), a content analysis was chosen as a more fit analytical approach for this set of collected data (Vala, 2003), allowing to see the frequency of mentions of a given category of information.

For both analysis, all transcribed interviews were fully read and all register units were noted; it was considered a register unit all phrases or sentences with a relevant semantic content. Two coding systems (one for interviews with facilitators and another for interviews with caregivers) based on topics or themes addressed in the interviews were then developed, organized in categories and subcategories for the thematic analysis and on dimensions, categories and subcategories for the content analysis, and all register units were attributed to a given category or subcategory to which it made reference. These categories were mixed, i.e., were both *a priori* (or theory driven, considering the existing literature on playgroups and the experience from the pilot-project) and *a posteriori* (or data driven) (Fereday & Muir-Cochran, 2006; Vala, 2003). Data was then analyzed following the established categories for the facilitators' thematic analysis, while for the caregivers' content analysis data was described in terms of the number of caregivers in each GABC who had mentioned a given subcategory. In order to ensure validity of data analysis, all this process was discussed with the supervisor of this dissertation (Noble & Smith, 2015).

Regarding the videotaped sessions and the use of PERS as an observational measure of playgroup quality, the recordings were scored with the instrument thus allowing for quantification on the different evaluated process quality dimensions.

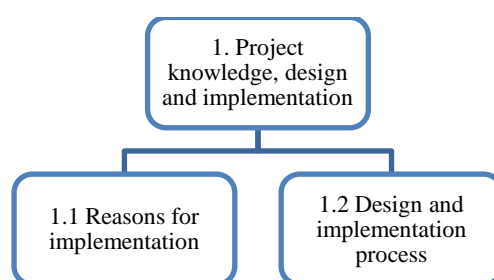
Chapter III – Results

Interviews

Interviews with the facilitators

Thematic analysis on the facilitators' interviews resulted in a total of 666 register units, distributed between 12 categories and subsequent subcategories, which will now be further detailed.

Figure 3.1 – Category 1 “Project knowledge, design and implementation”



1.1 Reasons for implementation

As for the reasons why these professionals felt the need to implement such a project, facilitators mentioned the will to work with both children and families together, since they felt working with children alone was not enough to support their development and the promotion of protective factors and early detection and prevention of risk factors they wished to carry out in local communities (*“The perspective (...) was really having an intervention in the parenting area, and in the detection of situations of potential risk.”* Facilitator #1). Thus, this methodology seemed to answer to specific needs related to child and family protection that the facilitators felt were present in these sites.

The facilitators described getting in touch with the playgroup specific methodology through the pilot-project conducted in Portugal, although at its different stages. Some were familiar with the project during its implementation, due to professional-related reasons, and were also present at the official results presentation session; others read about it on national news when the pilot results came out. All four, however, accepted the challenge of implementing the GABC methodology locally, getting in touch with the national consortium which implemented the pilot and benefiting from its initial guidance and counseling.

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1.2 Design and implementation process

According to the facilitators, conceiving and implementing each one of these two GABCs happened at different paces and through different mechanisms. In GABC 1, the process was considered to be somewhat fast and of easy pursuit, since the facilitators took advantage of their professional positions of technicians at the city council in order to arrange the necessary permissions and support for project implementation; as facilitator #2 states: “*It was very simple because we didn’t have the need to make big partnerships*”. There was no need for the establishment of complex coalitions with other services; the location was also promptly chosen (a room in a multipurpose community center) and the proper advertisement (flyers, outdoors, social media posts) was spread out in order to let local families know how and where to sign-up. Once gathered ten signed-up families the GABC was able to start, having the whole process taken up to six months.

In GABC 2 the conception up until the beginning of implementation was considered to be a longer and tougher process. The facilitators had no affiliation to any company or local service, having taken the idea of the playgroup methodology and the will to implement it in a community in need and searched for possible sponsorships and partnerships. After presenting the methodology in several communities, one embraced the challenge and agreed to provide not only the space but also the participating families, as a partnership was established with a social service that helped at risk families. Once settled the location and defined all the proper partnerships, the referred families were invited to take part in the playgroup, signing up only if they wished to; ten families signed-up and have been attending ever since. This process took up to around one year.

Before initiating the playgroup sessions both GABCs conducted a *Zero Session*, with the aim of introducing the project to the participating families and allowing them to meet each other, their needs and expectations towards the enrollment in the playgroup.

Figure 3.2 – Category 2 “Specific GABC training”



2.1 Training content

Once the facilitators expressed to the national consortium (promoter of the pilot-project) their intent to develop a local GABC, they were given specific training in order to allow them to better plan and conduct a playgroup. This training had different lengths for the two pairs of facilitators, and reportedly addressed aspects such as the philosophy, objectives and main methodologies privileged in a playgroup, what type of activities could be carried out, the most common materials used and how to better manage them, an example of a typical session routine, as well as what difficulties should be expected and how to overcome them, what type of changes in behavior and in relationships were expected to happen in the different participants, and the different dynamics facilitators could face when conducting a playgroup.

2.2 Utility and suitability

The facilitators considered the specific training useful, especially due to the contact with other professionals with experience in the conduction of this particular methodology, since the training was conducted by facilitators and supervisors from the pilot-project. They valued the fact that it was possible to get in touch with real stories of experienced facilitators. However, they also felt that the training could have been more intensive and prepare them better. As one facilitator expressed: *“there were only two [training sessions], and if we hadn't had already been in a working context with families and children maybe it wouldn't have been enough”* (Facilitator #4).

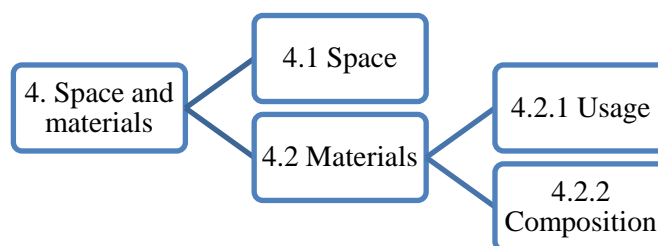
Figure 3.3 – Category 3 “Initial expectations”

3. Initial expectations

Generally, facilitators considered the reality of implementation met their initial expectations. However, some were felt as not being met, both negatively and positively. Regarding children, the initial expectations about their general development were high and did not completely meet reality, as a faster and more significant development was expected (*“I personally felt the impact could be much larger for the children”*, Facilitator #4), although not specifying in which developmental areas in particular. With caregivers, however, expectations were even surpassed regarding attendance and involvement in the sessions and activities (*“I think it is surpassing [expectations] (...) also in the sense of involvement”*, Facilitator #1), being this a reality reported by facilitators from both GABCs. The same goes

for the involvement of the facilitators themselves, which has been felt as being much deeper than initially expected. Facilitators in GABC 1 (with a longer period of implementation) also mentioned they expected the project to be over in a couple of months but the parental involvement has kept it running, thus also surpassing their expectations.

Figure 3.4 – Category 4 “Space and materials”



4.1 Space

Both pairs of facilitators consider the space where the playgroup occurs to be very pleasant and safe for children, being suited for the type of activities they carry. In GABC 1 the room (a multipurpose gymnastics room) is shared with other projects that take place in the community center, being adjusted for young children with gymnastics mattresses and other supplies. In GABC 2, the available room is for the exclusive usage of the playgroup, with all the materials stored inside; they also benefit from an open courtyard and a vegetable garden the group can use however they see fit.

4.2 Materials

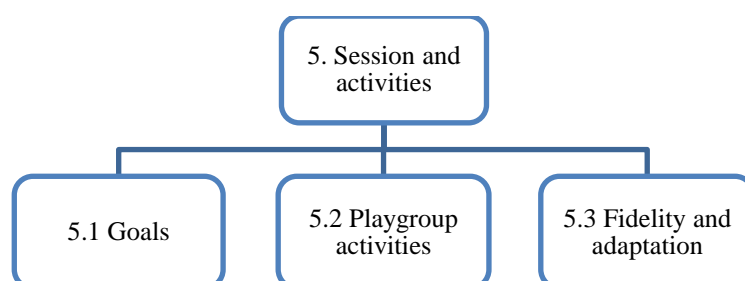
4.2.1 Usage

Both GABC reported a high rotativity of the different toys and materials, avoiding its repetition from one session to another. It was also a common practice the supplies being at the reach of children and caregivers, which provided them the possibility to choose freely with what materials to engage, especially during free play time. The availability of materials specifically for babies was also a concern in both sites (the “treasure basket” was particularly appreciated), ensuring the diversity and age-appropriateness of the resources available. Facilitators also highlighted the pedagogical and dynamic usage of the different materials considering the participants’ specific characteristics and needs (mostly their age and developmental stage); for instance, using toys and dolls for a more creative and dynamic story time, or to enhance language development and vocabulary acquisition.

4.2.2 Composition

Both playgroups benefited from materials landed by the national consortium of the pilot-project, which ensured the available resources are the same used in the pilot playgroups. However, that did not prevent the facilitators from acquiring and using other equipments they felt were more suited for their participants' particular needs, as well as for certain specific activities they carried. Both sites also mentioned a few shared categories of materials, namely everyday supplies (such as pots, pans...), wear-out materials (like plastic bottles, cardboard pipes and boxes, egg boxes, different types of bottle caps), ludic and pedagogical materials, physical and motor expression equipments, sensory stimulation materials and first approach to reading and writing supplies, such as building blocks (in different sizes), dolls in animal and human shapes (for pretend play), pretend kitchen equipment, different age-appropriate books, puzzles, balls, hula hoops, skipping ropes, etc.; the "treasure basket", whether with all-metal or all-wood materials, was also a preferred choice for baby participants. Since GABC 2 benefited from an outdoor space, their materials also included small plastic swimming pools, tricycles and bikes for children.

Figure 3.5 – Category 5 “Session and activities”



5.1 Goals

These goals refer to what the facilitators aim to achieve with the developed activities and with the overall group participation, since some of the mentioned objectives are achievable through interactions between participants, and not only through the engagement in a particular activity. According to the interviews, the two playgroups shared some common goals regarding children, such as promoting sensorial exploration or developing their attention and focus skills in calmer activities (for example, storytelling), while also mentioning not being concerned with more academic competencies. Regarding relationships, facilitators had their goals established in terms of increasing interactions between all participants and

improving a sense of belonging and group cohesion through the stimulation of socialization between children, caregivers and dyads. GABC 2 mentioned as particular goals cultural valorization, since they felt the mothers with immigrant backgrounds manifested low self-esteem and feelings of stigma; they also pursued the lessening of conflicts between children and the encouragement of conflict management skills on caregivers that they hope would sort effects in their home environment.

5.2 Playgroup activities

Activities mentioned during interviews with all four facilitators included free play, interactive storytelling, traditional games, sensorial exploration activities (with materials such as sand, flour, dough, paint), motor stimulation exercises, musical activities and outdoor activities (for instance, exploring a local garden together). GABC 1 also had had activities led by some caregivers, based on their expertise or hobbies such as a yoga class for the caregivers, a baby massage class, or an arts and crafts class; GABC 2 also often explored the vegetable garden at their disposal, planting vegetables and flowers and nourishing them.

Regarding outdoor activities, both playgroups visited nearby gardens or parks, organizing picnics and structured activities outside (for example, GABC 1 once planned a session at the local park to look for bugs and insects with a magnifying glass, as an “environmental exploration”). GABC 2’s facilitators expressed this as being an implementation flaw at their playgroup, due to the outdoor space already available at their GABC site. Although they conducted one session at a local park, they felt like the caregivers did not feel comfortable in leaving the playgroup’s closed location and did not enjoy the session with their children; the fact that they have to their availability a wide outdoor space with walls around it makes it more difficult, as described by the facilitators, to encourage activities outside that space.

5.3 Fidelity and adaptation

Both GABC seemed to share the overall session structure, most likely due to the training in the pilot-project model of playgroup functioning, which provided an also similar structure. Thus, facilitators mentioned the session usually began with a moment for free play, for the participants to gradually arrive and get more comfortable on the site; next there was a moment for storytelling, which tried to incorporate movement and expression in order to provide a more dynamic and involving reading activity; the story was usually followed by a more structured activity (that was usually, but not always, related to the theme explored in the

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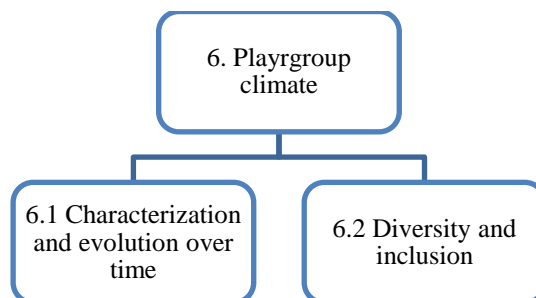
story), consisting in exploratory and sensorial activities, involving materials such as paint, dough, sand, flour, water, glitter, among others, for the children to explore together with the caregivers, under the facilitators' guidance and supervision. GABC 1 tried to have more musical moments, having a "good morning" song in the beginning of the session (after free play), a "tidy-up song" to signal the end of free play and the transition to another activity, and a "goodbye song" for after the structured activity; all participants sang together, usually with musical instruments manufactured by the participants in the beginning of the project.

Regarding how each session is thought out and planned by the facilitators, i.e., their planning process, one common aspect was frequently mentioned: the constant concern for the activities to answer to the real needs and interests of the participants (*"Always in a very flexible way. (...) We try somehow to incorporate things they like to do."* Facilitator #3). This was ensured by carefully listening and observing both children and parents, in order to keep up with what were their favorite activities and themes to explore, as well as what were their main concerns and difficulties, and how could they be addressed in a playgroup activity context. Both pairs of facilitators also mentioned to be currently easy to plan for a session, since part of it was already established (namely free play moments and story time); what changed from session to session was mostly the structured activity, which was altered considering aspects such as the type of activities most suited for the children's developmental stage, the participants' interests and favorite activities, and the concerns and difficulties caregivers brought to the playgroup. For instance, in GABC 2 there was a planned activity involving "magical toothbrushes and special toothpastes", with all participants brushing their teeth together in the playgroup, because children's oral hygiene has been a concern expressed by caregivers as something they have difficulty promoting at home.

However, both GABCs did not evolve without change and adaptation through time. All four facilitators described an initial lack of organization and an almost "chaotic" session development (*"In the beginning I felt... it's chaos!"*, Facilitator #3), although for some that was expected to happen, since the session planning was not very strict or specific. Therefore, in the beginning of playgroup implementation there was an intention of not planning the first sessions in detail, in order to sense what were the activities and arrangements their particular group of participants was more comfortable with. From there, sessions started to gain a somewhat standardized shape, until the group came to a "formula" (as one facilitator puts it) that suited their needs and interests. Currently, the facilitators describe the sessions as being well structured and defined only to a certain extent, since some adjustments are made regularly (in terms of order and duration of the activities, for example). GABC 1 is considered

to be at a developmental stage where the different moments of activities and the transitions between them occur smoothly and without the need for either strict planning or constant specific adjustments, contrarily to GABC 2 where instructions need to be given when transiting between activities.

Figure 3.6 – Category 6 “Playgroup climate”



6.1 Characterization and evolution over time

Facilitators describe the overall group climate as being stress-free, pleasant, with trustful relationships and positive interactions, with a sense of general well-being in the participants. Both groups seemed to already be comfortable enough to welcome “outsiders”, whether it is new participants to the playgroup, other technicians or other visitors, such as researchers or journalists (as was the case in GABC 1).

From the interviews, facilitators from both groups mentioned to have started off with the participants somewhat held back and hesitant, as was expected facing a strange and new group experience; they also felt high levels of social desirability in the way caregivers talked and behaved, especially when it came to the behavior and skills of their children. Engagement in activities and in interactions with other participants was lower, with caregivers being more distant either physically and socially, even when playing with the child. Although this was perceived regarding both adults and children, the latter adjusted more easily to the playgroup and got more engaged sooner. Facilitators reported, however, that this environment eventually faded, with the participants now displaying higher levels of relaxation, involvement and engagement. It was also mentioned frequently the group’s increased autonomy in both groups, although more deeply in GABC 1.

6.2 Diversity and inclusion

As previously described, GABC 2 embraced several different cultural backgrounds and different nationalities within its participants; for that reason, it is the one where cultural

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diversity stands out the most. The sharing of cultural elements, such as gastronomy, music, life stories, or even vocabulary (by translating some terms to different languages) was often encouraged by the facilitators, with the aim of “*valuing the culture, valuing what they know, valuing what they are*” (Facilitator #3). Regarding GABC 1, and considering the sociodemographic characteristics of its participants, diversity was not a mentioned subject during interviews by the facilitators, whether culturally or in other aspects (such as gender or age).

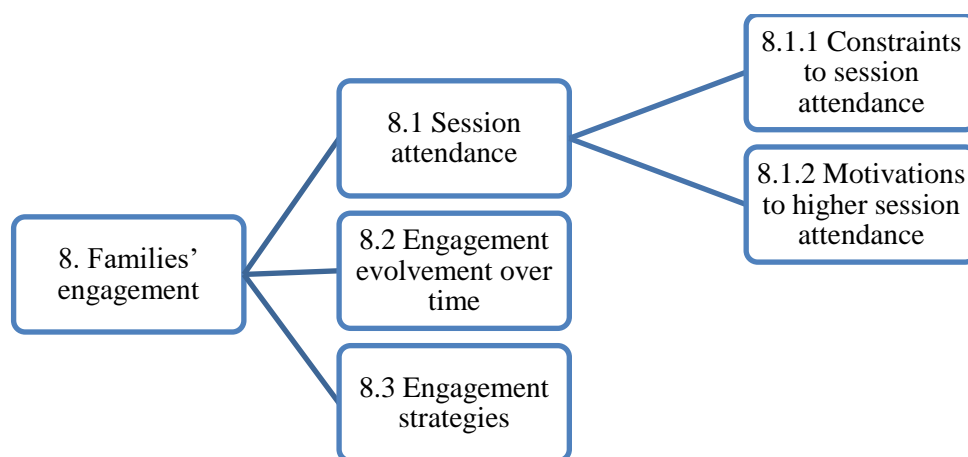
Figure 3.7 – Category 7 “Community engagement”

7. Community engagement

All four facilitators described a close professional relationship with the different technicians from the entities they partnered up with in order for the playgroup to run (for example, from the city council or Santa Casa da Misericórdia), and described it as being a very positive and fruitful collaboration between different professionals. The opportunity for sharing and support with other colleagues not directly connected to the GABC appears to be very valuable for the facilitators. Regarding the collaboration of other entities in playgroup sessions (whether by visiting the GABC or by the GABC visiting other services), GABC 1 reported having had guest specialists with knowledge in childhood matters (such as infant health) to conduct an activity; GABC 2 reported having more difficulties in connecting with other community services (such as organizing a trip to the local library, for example), due to a lack of understanding and openness from those services towards the playgroup.

On the other hand, facilitators as a vehicle to connect families to other formal services or as mediators between those services and families have also been pointed out. For instance, the referral of a caregiver to psychological support services when the facilitators felt it was the case for, or the articulation with professional trainings the caregivers were attending (by negotiating and mediating conflicts with the employability office). Another important mentioned aspect was when this support came not from the facilitators but from caregivers towards each other; for example, non-Portuguese speaking mothers, having obvious communication difficulties with formal services, benefited from the help of other caregivers who offered to assist them with documentation, phone calls or other necessary procedures.

Figure 3.8 – Category 8 “Families’ engagement”



8.1 Session attendance

8.1.1 Constraints to session attendance

Physical distance and weather conditions have been pointed out as the most common reasons for absence in the sessions, the two often going hand in hand. If the families feel like the weather is too cold, too hot or raining too much and they have to get to the playgroup by feet, especially with very young children, they may hesitate to attend and choose to stay home. In GABC 2, due to the families’ conditions of lower socioeconomic status, facilitators feel the fact that caregivers have several obligations towards other formal services poses a big constraint to their attendance; when caregivers are formally summoned to the employability office, the immigrations’ office, social security’s office, among others, their presence is mandatory, which means they are forced to be absent from the playgroup. Facilitators in GABC 1, on the other hand, feel like the longevity of the group has led to some caregivers not feeling the need to attend it as much as in the beginning, being this perceived as the natural path for their participants. Both playgroups have faced sessions with only one family present or without participants, but those were rare situations and attributed mostly to bad weather, thus not being a reason for the facilitators’ concern.

8.1.2 Motivations to higher session attendance

All four facilitators feel like families keep attending because they enjoy doing so, and show progressively higher levels of commitment and involvement both in the sessions and in the group as a unit. The professionals perceive families’ attendance in the long-run as a sign of enjoyment and well-being, since the participants have no obligation whatsoever to attend; as one facilitator stated: *“if they feel good with it, it’s because it has been having positive*

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impacts in their lives and they wish to continue with it, otherwise they wouldn't" (Facilitator #4).

8.2 Engagement evolution over time

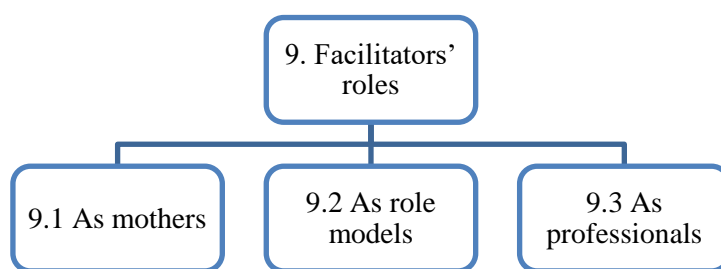
Both pairs of facilitators described a progressive increase in commitment and involvement in the activities and in the relationships with other participants (both with the facilitators and with other caregivers), felt either in each session, as the session progresses and participants feel more comfortable in it, and during the whole project implementation. Once again, this involvement is much more contained for adults than for children, since the latter are much quicker to engage with others and to get involved in the activities (*"They arrive held back. The kids are comfortable very soon, but the parents... they sit a bit to the side, and then, very subtly... or they come or we push them (...). And they are starting to understand, they are starting to be able to be here, and they make a big effort to actually be present"*, Facilitator #4).

8.3 Engagement strategies

Facilitators have an important role in the encouragement of participants' involvement in the activities and in the life of the group, developing their own strategies to promote so. When the caregivers appear to be somewhat hesitant in participating, sitting a bit more to the side and not assisting their child, facilitators reported insisting on their involvement mostly through playing with them, teasing them in an informal way and using their children to appeal to their participation (for example, by saying "do you think mom wants to help you take care of that doll?", or "I can't believe dad will not get his hands on this paint! We should go there and paint him!"). When children are the ones less comfortable with engaging in a given activity, facilitators try to get them to experiment at least for a little while; if they still do not wish to carry with it, it is important for the group leaders to ensure there is an alternative for children who do not want to take part in the main task. In GABC 1 facilitators encourage caregivers to conduct sessions or activities of their choice, pushing them to share with others their skills and interests and to be group leaders themselves. GABC 2 uses as a strategy the cooperation in session tasks and the increase on the responsibility of caregivers to look after the playgroup, to help with its daily management and to contribute to the activities with whatever they think may be of interest (such as bringing food from their home country to share with the other participants).

The four facilitators described as being important for them that the caregivers feel valued and that their opinions and views were listened to and taken into consideration. Thus, both playgroups take a democratic approach to decision making with issues regarding the whole group, consulting both caregivers and children in all aspects possible. Participants are the main source of information regarding the type of activities carried out, the topics they would like to see approached in the sessions and the needs they would wish to see addressed; this does not mean facilitators always collect this information in a formal or even openly vocal way, but by also reading the signs and observing carefully the participants (*“For now we just listen, we watch, and incorporate what they tell us in our planning”* Facilitator #3). Caregivers are also consulted for structural aspects, such as the days and hours the sessions should take place (especially in the beginning of the GABCs), or when, where and how to conduct outdoor sessions, even by distributing tasks and organizing the whole group.

Figure 3.9 – Category 9 “Facilitators’ roles”



9.1 Facilitators as mothers

Family and motherhood were mentioned by all four facilitators as aspects that brought them and the playgroup participants closer and made it easier, in a sense, to play the role of facilitators. The experience of motherhood was an important facilitative factor for these professionals, as they felt they could also share some of the perspectives, needs and concerns with the participating caregivers. In GABC 2, the facilitators’ children had inclusively attended some sessions, which contributed to the sense of them being a part of the group and being “real people”, just as much as the participating families.

9.2 Facilitators as role models

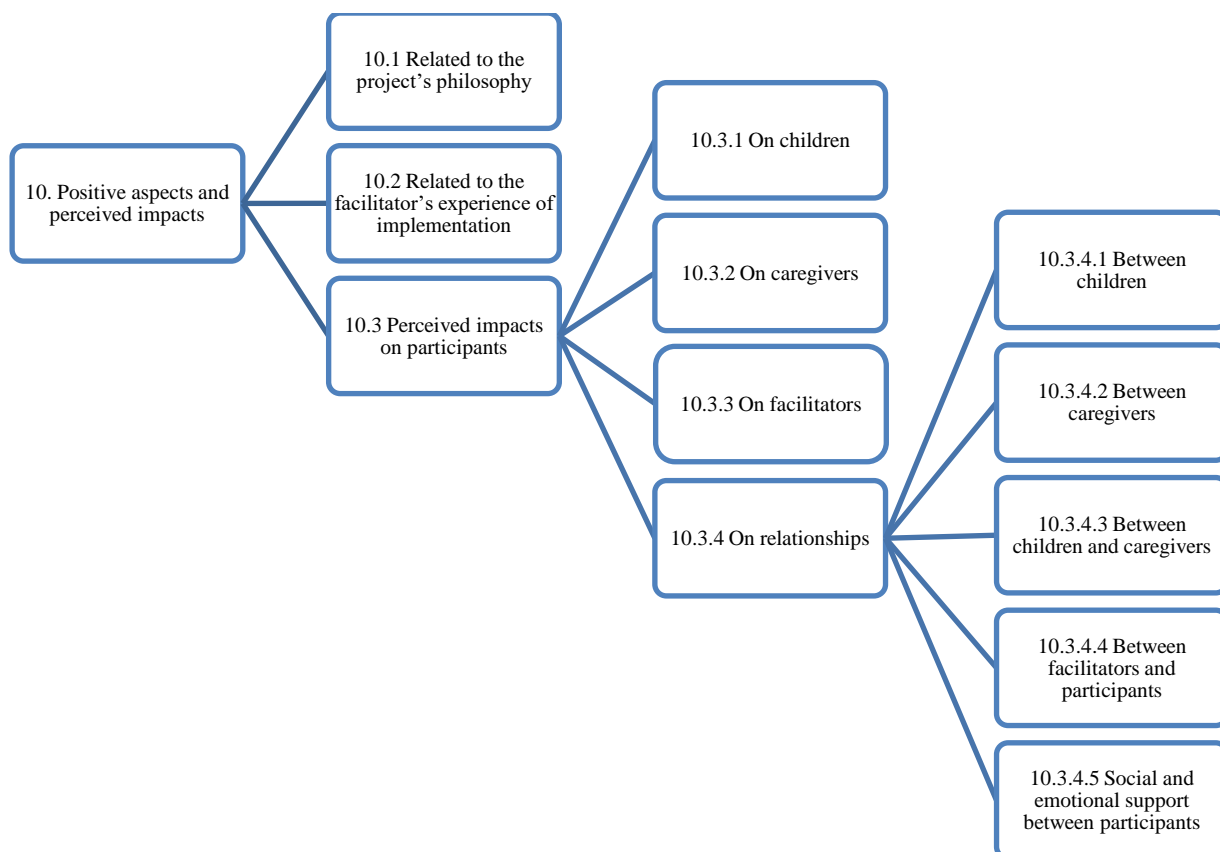
The modeling of behavior and educational practices was a responsibility felt by the facilitators, which they endured bearing in mind how important it was for them to be the leading example for the caregivers on how to behave and act not only with the children but

also in the engagement in activities; as stated by facilitator #4, “*We don’t do anything to them that we wouldn’t do to ourselves*”. Modeling was a strategy used to increase involvement, but it was also important for introducing to parents how to facilitate children’s play, how to be authoritarian without being aggressive (which was one of the facilitators’ main concerns regarding parental behavior), and how to stimulate their child. Modeling was also important regarding facilitator’s involvement, since they also shared personal stories and experiences but with the intention of making an example out of their personal practices.

9.3 Facilitators as professionals

Despite the personal involvement, facilitators were still aware of their role as professionals and technicians who were implementing this project in an interventional perspective. They felt the need to balance the professional attitude with the informality of their role as facilitators, maintaining an emotional distance but still being warm and affectionate. Facilitators also described a sense of contributing to the group not only as professionals but also at a personal level, with who they were as people.

Figure 3.10 – Category 10 “Positive aspects and perceived impacts”



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10.1 Related to the project's philosophy

Facilitators considered that the playgroups' specific and unique methodology carried particularly positive aspects in itself, such as the suitability of this service for families as a whole (not just for the child or the parent) and the positive relational impacts the project has on all participants, including the facilitators themselves; relationships and socialization was one of the most valued aspects of GABC attendance and one of the primary goals for all interviewed facilitators. They also mentioned as beneficial the broadening of social networks for more isolated families, and the fact that playgroups act as a first introduction to an educational routine for children, being an important transitional tool to formal schooling. As one facilitator stated, the positive aspects of the project end up "*being a snowball... but a snowball that roles in the right direction*" (Facilitator #4).

10.2 Related to the facilitator's experience of playgroup implementation

From their experience at their own playgroups, facilitators point out once again the relational aspects as the most positive and remarkable ones in their multiple shapes, such as the socializing impact between members of the same family and between families themselves, the establishment of friendship and support bonds between participants and the development of neighborhood connections, strengthening the local community. Socialization and friendship between children was also mentioned, with one facilitator pointing out to the fact that participating children with different ages and at different developmental stages was a positive factor, since they interacted in a different way than they would if the whole group had the same age (as is the case in formal educational settings). Informational support was also part of the positive experience on implementing a playgroup, since caregivers share with each other and with the facilitators their main doubts and concerns, not only related to the child but also about themselves and their family; caregivers and facilitators exchange information and advice regarding professional life, health, social services, educational services, or even struggles faced at home with their child (for example, about their sleep or eating routine). All facilitators reported feeling a sense of gratitude and valorization from the caregivers towards their work, and a deep appreciation for the project and their positive impacts on each family; as facilitator #3 expressed, "*We can see that (...) we're here and that this makes sense to them*".

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10.3 Perceived impacts on the participants

10.3.1 On caregivers

Facilitators report a significant increase on caregiver's involvement in the activities and a greater commitment to the project. Through time, adults also appear to be more relaxed and at ease, as well as more open to different experiences and engaged in the playgroup. Facilitator #3 stated that *"There have been moments here when I doubted who was enjoying more, if the children or if the adults."*

10.3.2 On children

According to the facilitators, children appear to experience a significant overall development and skills acquisition due to playgroup attendance, with special focus on language development, behavior and emotional management, and their engagement in the group's routine. However, as one facilitator mentioned, these developmental achievements would be even more significant in pre-school due to a higher dosage, being a slow process due to an only once or twice per week attendance at the playgroup. This relates to what was stated in Category 3 regarding initial expectations on child development. GABC 2, due to its particular cases, also mentions as relevant the acquisition of the Portuguese language in children with an immigrant background and different mother tongues, as well as the promotion and increase of reading skills on older children.

10.3.3 On facilitators

Regarding the effects the GABC has had on themselves so far, facilitators mention a higher personal involvement than they initially expected, as stated by facilitator #1 *"This isn't a service just for children, this is a service for everyone. Even for us"*. They also mention a deep learning process due to the experience of working with parents and children together, as well as to work with such a diverse group, with inherently different characteristics (especially regarding the array of different cultural backgrounds present in GABC 2).

10.3.4 On relationships between participants

10.3.4.1 Between children

Relationships between participating children appear to have evolved to friendship bonds, with more frequent and more significant interactions even between the youngest children. Increases on the abilities to play together and to share were the most frequent relational milestones mentioned.

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10.3.4.2 Between caregivers

According to the facilitators, participating caregivers have also developed through time relations of trust, proximity, friendship and support between them, with mostly affective and positive interactions (*“This relationship part is the one where (...) we see that it really makes sense for them [caregivers] to be here. For the friendships between them.”* Facilitator #4). The maintenance of these relationships even outside the GABC space is the most significant illustration of improved relations between adults, with caregivers meeting outside the playgroup or making arrangements about non-playgroup related issues.

10.3.4.3 Between children and caregivers

A strengthening of dyadic relationships is also perceived by the facilitators, especially when it comes to caregivers sharing activities and actively playing together with their children. Adults also increased interactions with children other than their own, playing with them, praising them and looking after all children (not just their own).

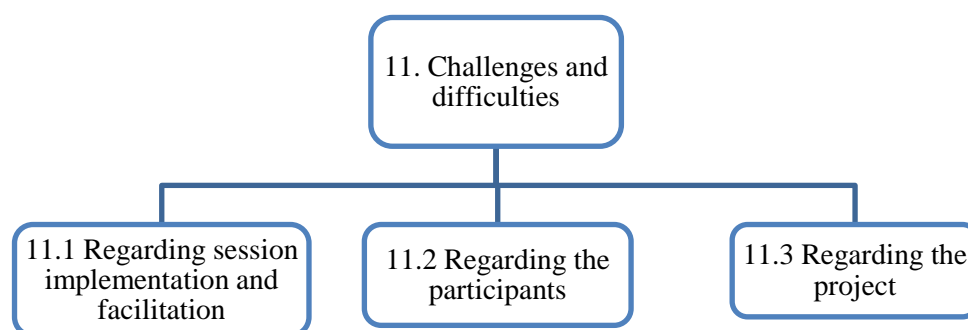
10.3.4.4 Between the facilitators and participants

Facilitators also report on their personal involvement, highlighting the informality of their professional duties in a playgroup context. The professionals describe their relationship with participants as having evolved to an informal relation of trust, support and sharing, alongside their role as technicians.

10.3.4.5 Social and emotional support between participants

Social and emotional support seems to be an important relational aspect that thrives in playgroup context, particularly through the development of neighborhood networks and of friendship relationships. According to the facilitators, caregivers seem to value some “adults only” time during playgroup session to talk and relax with each other, sharing stories, trivialities or personal concerns about themselves, their children or their families. Participants seem to find at the playgroup the support they need in order to fill a gap in emotional and social support at home or in their closest relational circles.

Figure 3.11 – Category 11 “Challenges and difficulties”



11.1 Regarding session implementation and facilitation

This playgroup format was new not only to the families but also to the facilitators themselves (“*In the beginning we too were a bit of amateurs at this*”, Facilitator #1): in the beginning of implementation, it was a challenge to learn how to work with adults and children together, with different ages, developmental stages, interests and needs, and all facilitators mentioned having to take the time to all participants – themselves included – adjust to one another and to this model of functioning; this group management, especially in terms of wills, emotions, needs and daily moods posed an initial struggle for the group leaders. All facilitators also point out to the constant need to adjust and adapt the sessions and activities until they find the right path for everybody, one that works and pleases all participants’ needs and tastes; this search is never-ending, but it was much more evident and challenging in the first stages of playgroup implementation.

Currently, two facilitators mentioned it to be a difficulty the mediation of parental practices and the conflicts of if they should correct a caregiver about his/her behavior towards the child, especially regarding moments of authority; it was also felt as conflicting whether they should intervene as authorities in conflict or misconduct situations or if they should let the caregivers solve it as they saw fit. Another issue related to session implementation regarded the management of the materials and of free play time, since they found hard to balance freedom of choice in materials and toys with some order during free play; facilitators felt this moment often got very confusing and unorganized, but they also did not want to restrain children and parents during their play moments.

11.2 Regarding the participants

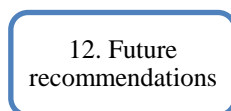
The initial period of implementation was described in both playgroups as being the most challenging in several aspects, since attendance rates were manifestly lower and families engaged far less in the sessions and in the activities, particularly caregivers. This initial resistance took a few sessions to fade, and demanded more investment from the facilitators.

Participating families also seemed to pose some difficulties in themselves, with caregivers being pointed out by the facilitators as the most challenging participants in terms of the management of their parental practices, their engagement in the activities, their motivations, needs, moods and overall satisfaction with the project (*“It’s more difficult to manage the adults than the children”*, Facilitator #4). Facilitators in GABC 2 described aspects such as cultural characteristics as being challenging because they require constant learning and adjustment from facilitators, as well as to adapt activities considering families’ cultural backgrounds (for instance, roma families found slightly uncomfortable activities at the swimming pool). Matters of language also caused some difficulties, since some caregivers and children did not have enough knowledge of the Portuguese language, adding some communication issues to this bag of challenges.

11.3 Regarding the project

Despite the overall admiration for the playgroup methodology and intervention model, one facilitator pointed out a severe difficulty they face at their GABC when it comes to relating to other community services: the GABC project and the playgroup methodology have no credibility and visibility in the community (*“There isn’t this openness, the project still doesn’t have this visibility”*, Facilitator #3). This means other services do not know what this group is or what it does, they do not attribute them any credit or value and, consequently, are very hesitant in associating with them. According to this facilitator, this aspect has been a challenge when it comes to articulation and cooperation between services for the well-being of participating families, and the national consortium which implemented the playgroup pilot-project could work on the advertisement and education of the general population and of social services in particular about what playgroups are.

Figure 3.12 – Category 12 “Future recommendations”



When asked about what they felt they could have done differently since the beginning of the GABC, facilitators mentioned they wish they had been more active and creative in the way they encouraged caregivers' engagement from the start. They also expressed their wish for more playgroups to exist, so this service could be closer to families and their communities. The provision of a more intensive and more specialized training was also mentioned, since they feel this is a highly particular model of working which demands highly qualified staff in playgroup's methodology. Also regarding training, facilitators mentioned as important for the group to be of diverse professional backgrounds, providing a multidisciplinary team, with facilitators from educational areas teaming up with others from psychology, social work or sociology.

Interviews with the caregivers

Content analysis of the interviews with the 10 caregivers resulted in a total of 565 register units distributed between eight categories and subsequent subcategories. Results are presented in terms of the number of caregivers who mentioned a given subcategory during their interviews.

Table 3.1 – Dimension 1 “Project participation”

Category	Subcategory	GABC 1	N	GABC 2	N
1.1 Knowledge of GABC's existence	Publicity (outdoors, flyers...)	“I saw the flyer (...) and I signed up”	1		
	Attending other parental groups	“I tried similar groups before”	1		
	Participation in the pilot-project	“I found out there was a pilot-project (...) and, at the time, I signed up”	1		
	Recommendation by other social workers			”the doctor [from social services] went there and told me to come to the activities (...), and I started coming.”	3
1.2 Motivation to project participation	Benefits for adults	“It was more for me as a mother, to break the daily routine a little.”	1		
	Benefits for children	“the group is a very good environment for the children”	1	“I have to bring the little one here to come and adapt to other children, to play and stuff”	2
	Alternative to formal schooling			“Since there is no kindergarten, I think the child must be with others too”	3
	Prevention of developmental problems			“I like to do this activity because F. [older daughter] was a different child [more problematic], and I don't want the same thing to happen to her [younger daughter].”	1

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Participating families from GABC 1 were self-proposed, in the sense that they got to know about the project through advertisement (online, on flyers, outdoors) and decided to enroll (N=1); families from GABC 2, although also participating totally voluntarily, got to know about the project's existence through social protection services who advised them to enroll (N=3). From GABC 1, one caregiver had already attended other parent groups (N=1) and another one had been a participating family in the *Playgroups for Inclusion* pilot-project (N=1).

Regarding what motivated them to adhere to the project, most caregivers gave child-related reasons such as being good for the development of social, emotional and educational skills (N=3), especially considering the lack of school attendance (N=3).

Table 3.2 – Dimension 2 “Overall assessment and perceived impacts”

Category	Subcategory	GABC 1	N	GABC 2	N
2.1 Overall assessment and positive aspects	Regarding the project	“I think these groups are really important, for this space for mothers and families to exist is really important.”	4	“For me, everything that happens there it is all very, very good.”	5
	Regarding children	“children can be at ease, there is no kind of anomaly or danger”	4	“I like it because my daughter here can adapt herself. (...) because she plays with other children, adapts to other things, and learns a lot of things too.”	4
	Regarding caregivers	“It ends up being a very important space for mothers because we don't always have friends at the same life stage as us and that understand what we're going through.”	3	“Sometimes you're getting upset, you have a lot of family problems, and you come here to distract yourself, to play, to have a different time.”	3
2.2 Negative aspects and/or main challenges	Coordination with other parents who do not take part in the GABC (other caregiver attends)	“moms that don't attend the group (...) maybe don't understand [some situations experienced at the GABC].”	2		
	Play management	“it's hard to manage the group (...) [because] we have some big age differences.”	1		
	Integration of participants who joined the project later	“people that enrolled halfway and aren't still in the same synergy, in the same wavelength”	1		
	Behavior of some caregivers towards children			“Sometimes, when other people don't know how to talk to children (...). In the beginning it upset me a little”	1
2.3.1 Impacts on caregivers	Knowledge and skills	“[I learned] this book thing (...) which is something we could do at home.”	3	“And it makes me really happy because I'm learning a lot of things with them that I didn't have the opportunity to learn before.”	4
	Well-being	“It was a moment when I was there and I could relax a little and talk to other adults.”	4	“I'm really enjoying it, and it made me good because I only thought about bad things. I thought about killing my head, I thought a lot of things. So it has been really good for me.”	3

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2.3.2 Impacts on children	Skills development (social, communication, play)	“She learned basically everything she knows so far.”	2	“Oh she learns everything, to paint, to do some activities... to draw, to play outside.”	5
	Contact with other adults and children	“M. has a bit more sociability.”	3	“M. got used to more people. (...) Now she knows kids too, she knows how to play with kids.”	1
	Adjustment to an educational routine	“Above all, it’s a routine. It’s a routine that he has.”	2	“Since they’re not studying now (...) it will be good when they enter school.”	1
	Openness to other sensory elements (e.g.: paint)	“At home, when we touch paint he picks the brush and paints his hand. (...) In the beginning he didn’t like it, but now he goes for it.”	2		
	Adjustment to Portuguese language and culture			“[they learn] something very important, which is the accent.”	1
	Well-being			“It’s a very big difference. (...) She’s a whole different girl. More joyful.”	4
2.3.3 Impacts on relationships	Between children	“She already knows the other children and gets along with them very well”	3	“She learned to be with the other kids, and she likes sharing toys with them.”	3
	Between caregivers	“the friendship I have with the other mothers is a friendship developed there.”	3	“The good thing is that we make friends. Right? We get to know other mothers, we talk...”	4
	Between children and caregivers	“The relationship there is different, because people are present and look after each other’s children.”	3	“I come to play with my daughter, I don’t care about other stuff.”	3
	Between facilitators and participants	“they develop this empathy [between facilitators and children]”	2	“They’re trying to help us (...) with friendship, sympathy.”	5
2.3.4 Impacts at the family level and/or home environment	Play activities learned at the GABC and performed at home	“I began to sing more songs. (...) That thing of taking books and turning them into activities, that was important for me.”	2	“We adapt things, we build little houses... with those toilet paper rolls, I didn’t know we could do these types of things.”	5
	Caregivers play more with their children			“Even that was good for me, because I didn’t play with them a lot. But now I do.”	2
	Better time management			“It allows me to organize myself, to do my things while they’re resting.”	1

The project assessment was remarkably positive, with caregivers giving very encouraging feedback overall (N=7), and highlighting aspects of session structure such as flexibility and guidance (N=3), the perception of children enjoying participating (N=3), the enhancement of community bonds (N=3) and the notion of GABC being a valuable service for all families (N=3). Caregivers also pointed out positive aspects specifically for children (such as allowing contact with other people, N=3; promoting skills acquisition, N=6; or being a safe space for them, N=3), as well as specifically for adults (like being a source of support, N=2; sharing parental experiences with other caregivers, N=3; or providing relaxing moments of leisure, N=3). A few negative aspects or challenges faced at the playgroup also arose, mostly related to the articulation with other caregivers (for various reasons; N=4).

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Regarding impacts felt due to project participation, caregivers reported noticing changes in themselves mostly regarding different skills acquisitions (N=7), such as parenting related or playing skills; as well as regarding their well-being (N=7), increasing their self-esteem and improving their life overall. Impacts on children were also noticed, such as being more receptive to other adults and children (N=4), improving several skills (social, emotional, communicational, play-related; N=7), or increasing their overall well-being (N=4), among others. Differences on relationships between all participants during project implementation were also mentioned, either between children (N=6), between caregivers (N=7), between children and caregivers (both their own and others, N=6) and between the facilitators and all participants equally (N=7). Attending the playgroup also affected the home environment and had impacts at the family level, namely through the acquisition of playing habits with their children (N=2), or learning activities at the GABC and reproducing them at home (N=7).

Table 3.3 – Dimension 3 “Space and materials”

Category	Subcategory	GABC 1	N	GABC 2	N
3.1.1 Space characteristics	Adequate lightening, airing and comfort	“it has windows, it’s aired, there’s good lightening”	2	“It’s wonderful. Yes, it has enough space, they can play, run around.”	3
	Specific space for babies	“there was always an area for the little ones.”	2		
	Adequate accessibilities	“it has an elevator”	2		
	Adapted in order to be safer for children	“we found a solution, because the room had no door”	2		
	Public gardens nearby	“there are public parks around, if we want to go”	1		
	With outdoor space (with a courtyard and vegetable garden)				“We also go to the garden (...). They love to be outside”
3.1.2 Space assessment	Small but adequate to the number of participants per session	“when there are several children there, it becomes a bit small”	1	“If they had bigger, it would be better. (...) It’s little but we can manage.”	2
	Closed and unprotected	“it could be more protected”	1	“it’s a little too closed”	1
	Fun and pleasant	“It is super peaceful, (...) I think it works pretty well.”	3	“The space is fun.”	2
	Perception of setting as temporary	“it’s always a temporary thing”	1		
	Availability of the space as na asset	“To be able to have that space, for me that’s fantastic.”	1		
	Appreciation of the outdoor space and vegetable garden				“It has a very beautiful garden.”
3.2. Materials	Composition	“they have the... exploration chest, or discoveries chest” “from flour to paint, to... shaving cream” “she holds on to a book, to the dolls”	4	“They were washing the babies [dolls], they were playing here in the room, with board games, with dolls” “I made a cake out of toilet paper rolls” “She would spend the whole day at the pool if she could.”	5
	Usage	“She likes to have all the toys spread out like that.” “she likes to share her toys.”	4	“I can teach a lot of things to my baby at home, (...) I also have toys, but it’s different.”	2

Regarding space description, caregivers in both GABCs perceived it as being comfortable, with proper lightening and airing (N=5). GABC 1 had good accesses (N=1), baby-specific areas (N=2), nearby public gardens (N=1) and was adapted to be more child-friendly (N=2). GABC 2 had a wide outdoor space (similar to a courtyard), with a vegetable garden for participants to use (N=2). Some participants in both GABCs found their rooms to be sometimes small when all families attended the session (N=3), but being mostly fun and pleasant (N=5). Overall, caregivers considered it to be a privilege to have such a good space available for the project (N=3).

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Regarding materials, caregivers mentioned elements such as those for sensorial exploration (N=3), for physical stimulation (N=3), wear-out materials (N=2) and building, painting and pretend-play materials, dolls, books or musical instruments (N=9). Their usage considered pedagogical intent by the facilitators (N=2), encouraging children to share (N=2) and giving free access to all materials and toys, mostly during free play (N=3).

Table 3.4 – Dimension 4 “Session and activities”

Category	Subcategory	GABC 1	N	GABC 2	N
4.1 Session structure	<i>Zero Session</i>	“there was an initial meeting to get to know each other”	1		
	Free play – interactive story time – structured activity – free play	“There is a moment when they explore freely (...), there’s always story time, and from that story they develop other activities”	2		
	“Good morning”, “tidy up” and “goodbye” songs	“the “tidy up” songs (...), he sings the “good morning” song.”	1		
4.2.1 Conducted activities	Outdoor activities	“We went to the park to do... an environment exploration”	3	“we once had a picnic.”	1
	Sensory exploration and motor stimulation	“between paint, foam, materials... nature stuff, sensory stuff...”	5	“the other day we were making play dough”	1
	Storytelling	“there’s the stories”	3	“And the stories, we have story time”	2
	Free play	“We play with lego, (...) with the parachute, they play with... several things, a lot of things really.”	3	“Hum toys, to play with everything.”	3
	Musical moments	“the instruments, when there’s music”	2		
	Parent & baby classes	“yoga class for moms”; “baby massage”	3		
	Use of vegetable garden (to plant, water, take care)			“We do the farm, we plant... the vegetable garden, yes.”	2
4.2.2 Favorite activities	For caregivers	“I like a bit of everything” “I like (...) sensory stuff.” “I really like free play, I think that’s the main thing.” “I love reading time”	5	“I like everything” “I don’t remember all of them, but it’s a lot of activities so far”	4
	For children	“M. likes everything, (...) She likes to put the toys all spread out.” “all those kinds of activities that are sensorial and of not totally free but guided exploration”	4	“It’s to be on the floor, because that [toys] is all spread across the floor.” “What she wants the most is to have space to run outside”	5
4.2.3 Least favorite activities	Less physically active activities (e.g.: storytelling)	“she doesn’t like to just listen, or she’s not interested in it.”	2	“when it’s story time, she doesn’t care about it (...), she doesn’t find anything interesting in just talking stuff.”	2

Session structure in GABC 1 loosely followed a “free play, story time, structured activity, free play” routine (N=2). Caregivers in GABC 2 made no mention of session structure or routine, although referring often to similar activities as in GABC 1.

Performed activities seemed, thus, similar in both GABC and included outdoor activities (N=4), sensorial exploration (N=6), storytelling (N=5) and free play (N=6); GABC

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1 also mentioned musical moments (N=2) and mother and baby classes (such as yoga, massages; N=3), while GABC 2 mentioned planting and looking after the vegetable garden (N=2).

Although caregivers enjoyed most activities (N=7) and its diversity (N=3), caregivers in GABC 1 highlighted moments such as sensorial and motor stimulation (N=3) and free play (N=3), as well as the balance between freedom of exploration and structure in the facilitation of the activities (N=3). On the other hand, according to their caregivers, children seemed to particularly appreciate free play (N=5) and arts and crafts (painting, building, sensing; N=3). All caregivers in GABC 2 strongly mentioned outdoor play as a favorite for children (N=5). It was consensual in both playgroups that story time was the least preferred part of the session for children (N=4).

Table 3.5 – Dimension 5 “Group climate”

Category	Subcategory	GABC 1	N	GABC 2	N
5.1 Evolution over time	Greater closeness between participants who enrolled in the same period	“I feel it [closeness] more with people that are there from the beginning, but that’s normal.”	1		
	Group dynamics evolved to the maintenance of relationships outside session time	“People have the will and the availability to come together [outside the GABC] and they can do that by now.”	2		
	Initial behavior of some caregivers was unpleasant to others			“That [other caregiver’s behavior] is what made me be upset in the beginning (...) but now it’s getting better.”	1
5.2 Group climate characteristics	Positive, nice, relaxed, of sharing and sympathy between all	“Super relaxed, you can be there really at ease, (...) I feel like there is this sharing vibe, and that it’s not a formal thing”	3	“Oh it’s nice. It’s pleasant. It’s wonderful. (...) Everybody is calm, and cool”.	5
	Appreciation of all participants	“it really is the extension of a family... a healthy one!”	2	“I like the ladies [facilitators], they are very nice. The friends too, everybody is nice.”	2
	Occasional conflicts between children perceived as normal			“it’s just those small misunderstandings between children”	2
5.3 Diversity and inclusion	Diversity and valuing of cultures and nationalities (encouragement of dialogue and sharing)			“It’s a mixture of races too, right? Because it’s not just me. It’s a mix... and that’s good (...) Since there are several [nationalities] you get to learn a little. It’s interesting.”	5
	Only male and senior participant feels included and valued	“I learned to deal with young people”; “since I’m older than everybody else (...). And I’m the only man there”	1		

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Overall group climate was described as positive, pleasant, relaxed, casual and of sharing between all participants (N=8), with caregivers describing a sense of appreciation for all children, parents and facilitators (N=4). In both playgroups it evolved over time to a more solid relationship, with participants better understanding and getting to know each other; GABC 1 evolved to a stage where playgroup relationships are kept even outside session time (N=2).

GABC 2 was characterized by a greater cultural diversity, with caregivers describing how the presence of several different nationalities and cultural backgrounds resulted in a richer and more culturally open environment, where activities and dialogues that highlighted and valued this diversity were encouraged (N=4). Despite GABC 1 being more culturally homogeneous, its only male and older participant (a grandfather) highlighted how he felt appreciated and valued, while also enjoying the company of younger mothers and learning from them (N=1).

Table 3.6 – Dimension 6 “Relationship with facilitators and evaluation of their work”

Category	Subcategory	GABC 1	N	GABC 2	N
6.1 Professional skills	Child-related	“They are very understanding with (...) children who may be a little grumpier that day or that don’t feel like participating so much.”	1	“I like the way they stimulate the child”	4
	Caregiver-related	“I know that, if I have any question, whether about motherhood, or about materials, or something else... there is someone there.”	1	“That also makes me feel good, because I can see they are showing the mother this is how she’s supposed to do”	3
	Session management and facilitation	“They do a fantastic job. You can tell there is preparation, there is logic behind it.”	2	“The ladies are preparing everything with a lot of calmness, a lot of love... with everything.”	1
6.2 Personal qualities	Overall appreciation for their personal qualities and values	“they are very human people, very understanding”	2	“They are good people, spectacular even, they’re people... They are kind, (...) I really like to be with them.”	5

Caregivers manifested their appreciation and positive relationship with all facilitators. They valued their child-related skills (N=5), such as being patient, caring and challenging; their adult-related skills (N=4), especially when it comes to encouragement and inclusiveness in activity participation and to behavior modeling; and their organizational skills (N=3) in the facilitation and conduction of sessions and activities. Facilitators’ personal qualities were also deeply appreciated (N=7), with values such as empathy, sympathy, positive attitude and good relationship with all participants being the most valued.

Table 3.7 – Dimension 7 “Participants’ engagement”

Category	Subcategory	GABC 1	N	GABC 2	N
7.1 Attendance	Obstacles to attendance	“It may happen like that, someone may be sick, or the parent has too much work to do and can’t make it that day”	2	“It’s just that I have other things to do, and the bad weather, raining and stuff... but other times I’m sick, or the child is sick.”	5
	Motivations for attendance	“Mostly, people have the will to attend and participate.”	1	“Only if I have a reason [to not attend], otherwise I’m happy to come here.”	3
7.2 Engagement in the activities	Engagement in play with children	“Here (...) I feel like people want to intervene, (...) I feel like parents are engaged [in play].”	2	“Sometimes I also come and sit on the floor. I like to play with them.”	1
	Caregivers facilitate some activities	“R. [caregiver] had a yoga class for moms... on Carnival I suggested we made some masks with the kids.”	2		
	Helping with daily session tasks			“I like to help them”	2
7.3 Participation in decision-making processes	Caregivers make suggestions and participate in choosing the activities	“everybody participates even in choosing what activities to do, there is a great collaboration between everyone.”	3		

Regarding the families’ frequency of session attendance (which directly relates to dosage issues), most caregivers pointed at health issues as the main reason that caused them to not attend sessions (N=6), particularly considering children this young tend to have health related constraints very often. In GABC 2 other reasons for absence arose, such as the weather (N=3), distance between home and GABC setting (given that most caregivers have to dislocate on foot with their toddlers; N=2), or even due to their presence being required by other services during playgroup session time (N=2). However, caregivers highlight they keep attending the sessions because they enjoy participating (N=4); they also value the project as a service for families, that impacts them positively and answers to their particular needs (N=2).

Regarding caregivers’ engagement in the activities, adult participants in both GABC’s reported high levels of adult involvement in playing with their children (N=3). In GABC 1 caregivers also conducted some activities themselves, mostly related to their area of expertise (N=2); in GABC 2 caregivers value more the fact that they have the initiative to help with small tasks during session facilitation (N=2). Caregivers from GABC 1 reported how they contributed to choosing what activities to do and how their opinions and suggestions were valued and taken into consideration (N=3).

Table 3.8 – Dimension 8 “Suggestions and future recommendations”

Category	Subcategory	GABC 1	N	GABC 2	N
8. Suggestions and future recommendations	Better coordination between caregivers	“another [important] thing that we discussed (...) is the parents getting to know each other.”	1		
	More GABCs available in the communities	“it would be important that other playgroups existed. (...) May this serve as an example for other settings and people to do the same.”	1		
	More outdoor activities			“We could have other outdoor activities with the kids”	1
	More participating families			“The only thing missing is more people coming with their children.”	1

Some participants expressed improvement suggestions such as carrying outside activities more often (N=1) or a greater articulation between all caregivers (knowing each other better; N=1), mediated by the facilitators, in order for the playgroup to run more smoothly. It were also expressed wishes of more GABC available in more local communities (N=1), and of more families attending the service (N=1).

Playgroups Environment Rating Scale (PERS)⁹

Overall playgroup quality was assessed with PERS (Alexandre et al., 2016), an environment observational tool developed specifically for playgroup assessment during the GABC pilot-project by its monitoring team. As such, the same scale was used in this dissertation as a measure of process quality in each of the two participating playgroups. As previously described, PERS counts with four subscales broken down to a total of 17 items, which can rate quality levels with 1 (inadequate), 2 and 3 (minimal), 4 and 5 (good), 6 and 7 (excellent); the higher the score, the better the level of quality. This analysis follows the rationale behind the analysis done for the pilot-project.

Considering all four subscales and the PERS global score for both playgroups analyzed together, averages range between 3,5 and 6, which implies a global score of 4,91 (Figure 3.13). Such rates indicate that the two GABC were scoring above average on their quality, being qualified as of good overall quality. Particularly, subscale “Space and Materials” scored the highest, with an average of 6; this is due to not only the quality of the available spaces for the playgroups to take place, which fill all requirements in terms of safety and adequacy, but also to “space arrangement”, which also scored highly and which refers to what the facilitators make of the space and how they manage it in order to take the most

⁹ All four subscales and corresponding items can be consulted in Appendix C.

advantage of the facilities as possible; only the item referring to “equipments and materials” did not score on excellent levels of quality mostly due to the materials visible during the video recording and how they were used and managed; this does not mean the GABC did not have more suited materials, only that they weren’t available during the observation periods.

“Activities and routines” obtained an average score of 5,33, being qualified as of very good quality; the item concerning “overall routine” scored as excellent on three out of four observed cycles, which reflects on the regular sessions structure and the different moments present each session, as well as how facilitators manage the session and its different moments and activities while also considering the participants’ inputs; the “free play” item scored also highly mostly due to the conduction of well managed and stimulating moments of free play videotaped in some cycles.

“Contact with diversity” was the subscale with the lowest average score, reaching a quality level of 3,5. Contact with diversity encompassed items regarding diversity in dialogs and practices, and diversity of materials; this minimal to good score on quality regarding diversity is a reflection of the lack of evident references to this subject, whether by verbally addressing it or by being reflected in the materials available, although there was not a sense of prejudice or undervalorization of others on the overall group climate. Again, this score comes as a reminder that the videotaped session and scored cycles are a mere sample of what really happens on the everyday experience of the group, grasping only a limited amount of evidence; for instance, there may be some materials at the playgroup that reflect diversity (such as multiracial dolls) that weren’t present in the recorded session, thus not being able to contribute as an indicator of quality in this subscale. This limitation shall be discussed further ahead.

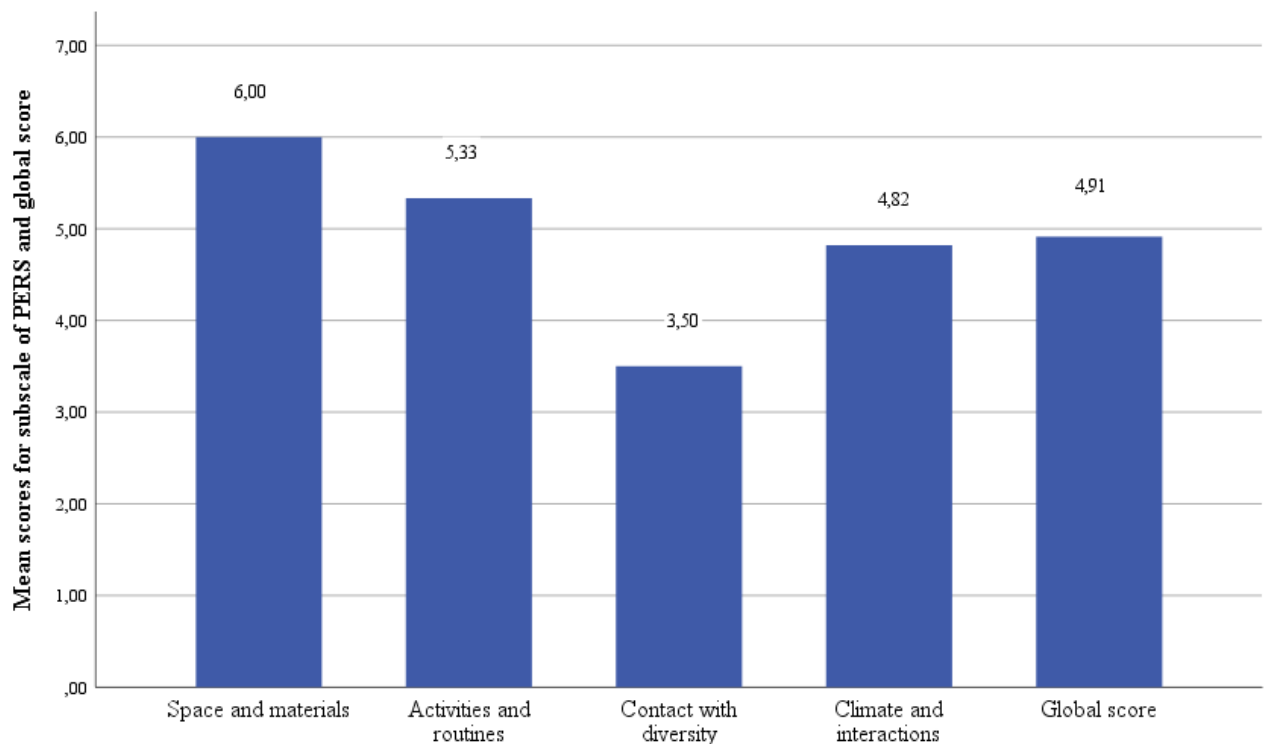
Finally, “Climate and Interactions” is the subscale that concerns overall group climate and the particular interactions and relations between specific sets of participants, scoring an average of 4,82¹⁰. Such value reflects the positive group climate observed on both GABC, reaching a very good quality level and interactions based on positive attention, sharing, trust, relaxation and general positive emotions, expressed both verbally and through body language. Caregivers appeared to get along with each other and value the company of adult peers, while encouraging children to play together and mediating the way they interacted with each other (particularly assisting baby participants); caregivers also interacted positively not only with

¹⁰ The items referring to interactions with the supervisor were scored as *NA (Not Applicable)*, since this was a figure present in the pilot-project but not in these new GABCs.

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their own child but also with children of other caregivers, reflecting on the trustful and relaxing described environment. Facilitators played a particular key role on this positive climate, sharing their attention by all participants, stimulating and getting along with all caregivers and all children equally.

Figure 3.13: *PERS* mean scores for each subscale and global score.



Chapter IV – Discussion

Playgroups have been acting as a non-formal educational model for young children for the past few decades in several countries, assuming different shapes and sizes (Hoshi-Watanabe et al., 2015); not only do they promote children’s social and emotional development, cognition and skills, but they also impact on parental behavior and well-being, as well as on the increase of social capital and support networks in the communities, as summarized by Williams et al. (2018) in their review.

After a successful and promising playgroup pilot-project implementation in Portugal over two years (Barata et al., 2016), a few local initiatives began to sprung with the aim of implementing playgroups in their communities to serve local families with young children. Two of those playgroups (or GABC, “Grupos Aprender, Brincar, Crescer”) taking place in the greater Lisbon area took part in the currently discussed comprehensive analysis on their implementation which – similarly to the one carried out in the pilot-project – encompassed semi-structured interviews with group facilitators and with participating caregivers, as well as the assessment of video-taped sessions with an observational measure (the PERS – Playgroups Environment Rating Scale; Alexandre et al., 2016) for the purpose of playgroup quality observation and evaluation.

This comprehensive analysis carried an evaluation under similar framework elements as those defined by the pilot-project monitoring team (Barata et al., 2016, p. 139), such as the session objectives and planning, changes to management of the playgroup, caregivers’ engagement, and general attitude towards the playgroup (i.e., overall satisfaction and perception of benefits); in the present dissertation, these elements were addressed in the interviews with both the facilitators and the caregivers. Also a part of these framework elements were quality dimensions measured with PERS (space and materials, activities and routines, contact with diversity and climate and interactions). The assessment of family attendance, contrarily to what was done in the pilot, did not recur to a formal record of presences and absences by session (since those data were not available and/or provided), but this aspect was addressed during the interviews with both the facilitators and the caregivers.

The thematic analysis of facilitators’ interviews showed to what extent the pilot-project experience influenced their practice, since it was through it these professionals first got a deep understanding of what playgroups were and what constituted their true philosophical and methodological foundations. Due to the *Playgroups for Inclusion* project

and the specific training the national consortium provided to the interviewed facilitators, their practice in terms of session structure, activities and management strategies also appear to mimic what was common practice in the pilot GABCs (reported results from the pilot-project show how similar the described activities and routines are between the pilot GABCs and the ones being studied in this dissertation; Barata et al., 2016, p. 153/154); the literature review on playgroups by Williams et al. (2018) also found similar activities conducted in several other playgroups, which may be due to similar educational and developmental goals for both children and parents defined by the facilitators. Facilitators' training is an important aspect of playgroup quality and success, especially if playgroup-specific training is provided and opportunities for regular capacity-building and further training are promoted (AIFS, 2011).

Two main concerns became evident when interviewing these professionals: firstly, they shared a deep concern for the participating families in terms of what were their real needs, concerns and preferences for all matters related to the group, ensuring at all times they felt valued and that their voices and opinions were heard and taken into account; children and caregivers were the main information and feedback source from the beginning of implementation. The same concern was expressed by the facilitators from the pilot-project, describing an "*attentive posture*" as a strategy to meet families' interests and needs (Barata et al., 2016, p. 155), which showcases how important it is in these playgroups that families feel valued and feel like they are the reason why this intervention takes place. This adaptability of each GABC to the specificities of their attending families stands as one of the primary reasons for such high levels of adherence and engagement reported by the stakeholders from the currently monitored playgroups. Matters of adaptability and fidelity shall be addressed further ahead in this discussion.

Secondly, it was also expressed in both playgroups the importance of relationships between all participants, since facilitators had as main goals the increase in the quality and quantity of interactions; this was also the area where they reported more significant impacts, leaving for second plan more academic or developmental concerns in terms of skills acquisition for both children and caregivers. During the pilot-project, "overall socialization processes" were also what over 50% of facilitators and supervisors expected to be more significant about the playgroups (Barata et al., 2016, p. 151). These impacts, as seen through the eyes of the facilitators, were observed in all participants although more unexpectedly in caregivers. Social, emotional and cognitive developments were reported in children, but facilitators expected them to occur to some extent; caregivers however displayed much higher levels of well-being, close relationships with each other, commitment to the group and even

changes to their parental practices than what was expected, being this the most remarkable change according to the group leaders. The increase of social support and social networks, mostly through more meaningful relationships between caregivers, was another mentioned notable aspect, which is also reported in the playgroup literature (Hancock et al., 2015; Jackson, 2011) as being one of the most desirable and attained goals of playgroup implementation, seen not only through friendship and neighborhood bonds but also regarding relationships with several community services.

The difficulties and challenges faced by the group leaders were also those shared with facilitators interviewed in other countries (Johnston & Sullivan, 2004; Oke et al., 2007), such as those related to project implementation and to participants themselves; however, matters of project visibility and believability in the community posed a great challenge as well, and could be overcome with greater public awareness regarding what playgroups are, how they work and why they should be taken into account in the early years educational landscape for all families locally (Johnston & Sullivan, 2004). Overall GABC assessment by the playgroup facilitators was otherwise rather positive, showcasing how this is a relevant educational service that truly fits families' needs and serves a purpose in each community (Berthelsen et al., 2012).

Regarding the content analysis on the caregivers' interviews, results show that benefits for children are caregivers' main motivation for playgroup attendance and the reason why they feel this project is so important, which is similar to what was found in the *Playgroups for Inclusion* pilot-project in terms of the caregivers' main expectations about the project and the reasons why they enrolled (Barata et al., 2016, p. 149 and 151), as well as in playgroup experiences elsewhere (Berthelsen et al., 2012; Johnston & Sullivan, 2004). However, when it comes to reflecting on how attending the GABC affected their lives, caregivers quickly point out benefits for themselves. Impacts in terms of quality and quantity of play activities stand out, with children "knowing how to play better" but with caregivers also playing more with their children than they used to, and learning new play activities they later reproduce at home, hence corroborating the importance of play in children and family lives as a result of playgroup participation. Also remarkably, a high number of caregivers reported improvements in their personal well-being – some quite impressively, to the extent of reducing suicidal thoughts due to a great social and emotional support at the GABC.

Similarly to facilitators, adult participants also highlight the relational benefits of playgroup attendance, reporting the development of friendship bonds for their children and

themselves, and building neighborhood connections and a sense of community, which again highlights playgroups' potential to increase community social capital (Gibson et al., 2015). Positive and close relationships with the facilitators also reflect why caregivers value them both as professionals and as individuals, and this ability to connect with the families contributed to increase participants' attendance, engagement and commitment to the project, supporting the documented critical role of facilitators on the value participants place on playgroup participation and on the benefits resulting from such participation (Jackson, 2013). This positive climate appeared to be important for caregivers and contributed to why they valued this space so much; the cultural and ethnic diversity at GABC 2 was highly valued and seen as an opportunity for learning, instead of being perceived as a reason for divide between participants; playgroups have been mentioned as a means for cultural inclusion and diversity valorization (Oke et al., 2007; Warr et al., 2013).

The overall satisfaction with these GABCs manifested by both facilitators and caregivers, especially regarding the perception of a positive general group climate, is an important aspect to higher levels of attendance and engagement from the participants, which ultimately impacts how the participants perceive benefits of playgroup participation in their family; this positive correlation was found in the pilot-project results (Barata et al., 2016, p. 159).

Matters of attendance, highly valued and deeply monitored during the pilot-project, did not rise as a concern in the present playgroups. The reasons for eventual absences were similar to what is usually pointed out by parents in other research (Berthelsen et al., 2012; Oke et al., 2007), regarding mostly external structural aspects such as the weather or transportation. Although a quantitative tracking of presences is not available (as previously stated) low rates of attendance were not mentioned by the facilitators as a reality at their GABC. This is a very important aspect, since higher levels of attendance imply higher levels of dosage, which is directly related to more significant impacts for the participants (Berthelsen et al., 2012; Zaslow et al., 2011); this is an aspect worthy of future investigation in Portuguese playgroups.

Results from quality assessment with PERS display an above average score for overall quality (with the global score being of 4,91, in a seven point scale); if considered the fact that, during the pilot-project (Barata et al., 2016), quality scores improved significantly over time in three out of four subscales and on global score, this result constitutes in itself an encouragement to the pursue of playgroup implementation.

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Results to all subscales of PERS corroborate, to some extent, what was described by facilitators and caregivers as being their experience as GABC participants. For instance, the high score on “Space and materials”, qualified as of “excellent” quality, reveals not only the quality and adequateness of the room or of the available toys, but also how the facilitators managed them and the intentionality behind its usage, which was also mentioned as one daily concern by the facilitators and one of the most valued aspects of playgroup management by caregivers.

“Activities and routines” also scored above average, qualified as above “good” quality, reflecting how well the different activities were managed and how the routines considered participants’ needs and preferences, which again highlights how this was a central concern for the facilitators, as expressed during the interviews.

“Contact with diversity” scored the lowest of all subscales (3,5, which classifies as “minimal” quality). It is important to reflect on why it was so: firstly, due to an obvious limitation regarding observation tools of data collection, the researcher can only score what is seen during the recorded/observed moments; with PERS this means that only 40 minutes of a two-hour session are scored and, although this stands as a limitation for all subscales equally, if the subscale concerns indicators related to the presence or absence of certain materials (such as those displaying diversity) and those are not available during the observed cycles, higher levels of quality cannot be scored; the same goes for explicit dialogs about diversity, which is another indicator of quality according to this subscale. Thus, this minimal score on diversity may be due to an open and inclusive environment felt only implicitly and by the lack of negative references towards diversity, and higher scores would require more explicit references. Secondly, as a consequence of the previous point, future research on PERS must reflect on the demanded quality by this particular subscale; specific indicators may be too “demanding” and reflect an unrealistic playgroup daily experience regarding diversity and inclusion; if facilitators at a playgroup choose not to make available during free play interracial dolls or do not address directly matters of cultural backgrounds (or others, such as gender or age diversity) does not mean such should translate a “minimal” level of quality. Thirdly, this score of 3,5, manifestly lower than on other subscales, may also relate to different realities between the two GABCs regarding matters of diversity; as previously described, GABC 1 had a much more homogenous pool of participants (in several aspects), which could contribute to a lesser need to address questions of diversity and inclusion during their sessions, while GABC 2 showed the opposite, with both facilitators and caregivers

mentioning during interviews how they tried to promote different cultural traditions, languages or gastronomy at their playgroup.

Finally, subscale “Climate and interactions” also scored as being of “good” quality, which goes in the same direction as what was expressed during interviews regarding group climate. Good relationships between all participants, with minimal levels of conflict or discomfort, in a relaxed, welcoming and safe environment are what caregivers value the most, especially when describing how relationships between adults and between children evolved to stages of friendship and to sources of social and emotional support.

These results from PERS are important for its study process, currently at place, and are a good indicator of its value since the scale allowed to gather data in parallel to participants’ insights through interviews.

Aspects such as space and materials stand as an important indicator of quality in a playgroup (French, 2005), as well as a pre-condition for process quality (NICHD, 2002). Interactions and relationships are, however, the most highlighted aspect of process quality and the one which most directly impacts children’s development and learning (French, 2005; Slot et al., 2018). This relational component was, as stated previously, widely mentioned by both facilitators and caregivers interviewed in this dissertation, and this quality indicator was corroborated by results from PERS on indicators regarding interactions between different sets of participants, thus reflecting a rather important aspect of process quality in a playgroup context.

As previously stated, the fact these two present GABCs followed the foundational principals and methodologies from the pilot-project playgroups, sharing even activities, routines and educational practices (mostly due to the training the facilitators had from the national consortium responsible for the pilot-project) stands as an advantage in the sense of having somewhat standardized implementation processes and methods, thus granting some degree of fidelity necessary to project efficacy (Fixsen, Naoom, Blase, Friedman, & Wallace, 2005). However, community interventions must also benefit from their privileged closeness to families in order to adapt implementation practices to what are the participants’ main needs. For instance, the interviewed facilitators largely described how they were attentive to participants’ feedback and how they had as priority the needs and preferences of caregivers and children in order to better adjust the playgroup to the specificities of their participants. However, they also pointed out how some of their initial expectations had not been met, especially in terms of developmental achievements; if so, what could have been altered in

order to grant those achievements were met? Could the facilitators have found a better adjustment between fidelity and adaptation in order to better meet families' needs as well as facilitators' goals for them? The question of fidelity *versus* adaptation is one of the primary concerns regarding project implementation, being well documented in the literature (Castro, Barrera, & Martinez, 2004); defining a logical model in order to minimize false expectations and to guarantee the eventual adjustments made to the implementation are not merely intuitive may be an important suggestion for future playgroup practitioners (Carvalhosa, Domingos, & Sequeira, 2010; Fixsen et al., 2005). One way to monitor quality of implementation gradually and during program delivery itself is by defining a Theory of Change, such as what was done during the pilot-project. Such tool allows for a "systematic and cumulative study of the links between activities, outcomes and contexts" of the program (Connell & Kubisch, 1998; p. 2), facilitating the constant monitoring of the delivery of a program, ensuring its quality and improving the degree of certainty about how and why program outcomes occur.

It is also of the utmost importance the establishment of community coalitions between different local entities and institutions for the success and efficacy of a project (Cassell et al., 2005; Ornelas & Moniz, 2007). The fact these types of interventions such as the playgroups address needs and problems in a systemic perspective, concerning different contexts and members of one same community, calls for the participation and cooperation of several local services, working for the benefit of their community and developing a support and protection network much needed for protective factors to thrive. Playgroups who work and share resources with other local services also appear to function better, to captivate more their participants and to have better future prospects in terms of continuity (AIFS, 2011; Johnston & Sullivan, 2004). Thus, a coalition relationship between several local organizations, characterized by cooperation, considering local diversity, making use of community resources and that focuses on effective preventive results and on empowering its community stands as a privileged mechanism for successful project implementation (Ornelas & Moniz, 2007). This is an aspect not particularly pursued by these present GABCs, as recognized by the facilitators (although due to different reasons), and stands as an important improvement worthy of reflection for future GABC implementation.

Due to their nature and diversity of specific methodologies, philosophies, practices and groups of participants, playgroups are inherently difficult to evaluate (Commerford & Robinson, 2016). Nonetheless, a few recommendations regarding playgroup research must be addressed. Although harder to achieve from a methodological point of view, there is still a big

gap in the literature regarding children's self-report on playgroup participation (Cunningham et al., 2004). It would be of substantial interest to obtain their insight on the perceived benefits but also limitations of playgroup participation and functioning. Another gap in playgroup research concerns the community benefits resulting from these services (Mcshane, Cook, Sinclair, Keam, & Fry, 2016), since it also poses a methodological challenge. Both these areas are worth further investigation and stand as a challenge for future reference. Although the most common methodological approach in playgroup research is qualitative designs, more experimental approaches (such as the one carried out in the *Playgroups for Inclusion* pilot-project) are necessary for a broader and deeper understanding on this methodology (Williams et al., 2018).

This dissertation highlights several aspects which had not arise during the pilot-project or that mirrored a different experience regarding playgroup implementation, such as the one related to attendance rates, as was already described. By following and monitoring the implementation of playgroups in their real context, free from the previously mentioned restrictions naturally imposed by an experimental investigation (as was the *Playgroups for Inclusion* pilot-project), this dissertation provides an insight of how this educational model could truly be implemented nation-wide by several local stakeholders working together for the benefit of their families and communities, getting closer to their needs and struggles than what was able to be done during the pilot-project. Due to this privileged opportunity, these current GABCs allowed for a deeper insight not only to the caregivers' experience but also to the facilitators' – their roles at the playgroup, the benefits for themselves and their personal motivations for such deep involvement in this initiative; such aspects did not rise this expressively during the pilot-project monitoring.

Limitations

This dissertation also presents some limitations. Firstly, the reduced sample of only two GABCs consequently provided a reduced number of participants, both facilitators and caregivers; this was due, however, to the scarce available GABCs in the greater Lisbon area which were under the conditions to take part in the present comprehensive analysis. Hopes are that sooner than later other playgroups will be developing their activities in Portugal, and more families can contribute to other eventual researches in the playgroup field.

A second limitation regards the lack of some essential data for a thorough monitoring process, such as quantitative information on attendance. Since data collection procedures took

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place when playgroups were already being implemented for some months, and facilitators did not keep track and/or provided a record of presences or absences per session, this information could not be inserted in the context of this dissertation. This has impacts, as previously explained, on possible inferences regarding how attendance affects dosage and outcomes on all participants.

Thirdly, for a more accurate comprehension of playgroup implementation (or any community program) and of the experience of attending these GABCs, implementation ought to be assessed at more than one point in time (ideally, having Time 1 and Time 2 measurements). Again, this was unachievable for the purpose of dissertation due to (1) the two GABCs having different longevities, being at different developmental stages of their implementation; (2) the timing of getting in touch with both projects, defining data collection strategies and getting the agreement of all stakeholders did not allow for such two time measurements to take place during useful time for the writing of this work. This was, nevertheless, the recommended scenario for a higher quality implementation monitoring.

Conclusions

Both caregivers and facilitators seemed to overall assess this project as remarkably positive and relevant for families, meeting their needs and contributing to adult and child development and well-being. This valorization of playgroups as a project and as an educational philosophy makes all parts involved wish there could be more playgroups available in different communities so that more families could benefit from them (e.g.: Berthelsen et al., 2012; Johnston & Sullivan, 2004; Oke et al., 2007)

The potential of playgroups as vehicles for social inclusion is one of the most promising aspects of its implementation in several communities, as has been exemplified throughout this document. GABC 2 evaluated in this dissertation stands as a prime example of such potential, with a diverse array of cultural backgrounds, nationalities, and immigration and integration stories and experiences. From its short implementation time, facilitators and caregivers already highlight some changes in children's acquisition of the Portuguese language and adaptation to the country's culture, much needed prior to their formal school enrollment. Also caregivers benefit from the support on understanding and relating to other services, while also reporting enjoyment and learning from sharing with each other several aspects from their culture, contributing to their self-esteem and sense of personal worth.

The results presented in this dissertation point to the potential of playgroups as a non-formal educational tool for all families, as a complement to formal education in the early years landscape, able to answer to families' and communities' specific needs, constituting a sustainable and inclusive answer. The continuity and growth of playgroups, whether under the GABC model or other types of arrangements, is of the utmost importance in Portuguese communities; further research on education for infants and toddlers, as well as social and educational services both local and national, must serve the needs of all families and communities and playgroups have still an important role to play in this mission.

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Appendices

Appendix A – Informed consents

Appendix A.1 – Facilitators’ informed consent

CONSENTIMENTO INFORMADO MONITORAS

Grupos Aprender Brincar Crescer – o que são?

Os Grupos Aprender, Brincar, Crescer (GABC), foram um projeto piloto levado a cabo por um conjunto de entidades - a Direção Geral de Educação, a Fundação Calouste de Gulbenkian, a Fundação Bissaya Barreto, o Alto Comissariado para as Migrações e duas universidades (ISCTE-IUL e a Universidade de Coimbra). Este projeto foi implementado em cinco concelhos do país e entre 2015 e 2017.

Depois desta experiência piloto, surgem agora os novos Grupos Aprender, Brincar, Crescer, um pouco por todo o país, sendo um deles o grupo que dinamiza. Nesse sentido, é para nós importante compreender de que modo estão a ser implementados e desenvolvidos estes novos Grupos, e qual a opinião de todos os que neles participam, quer cuidadores quer monitores. Para isso será conduzido um pequeno processo de monitorização por parte de Catarina Castro (aluna do ISCTE-IUL), sob orientação de Joana Alexandre, responsável pela monitorização dos projetos piloto. Este trabalho surge da importância de averiguar em que medida estes novos Grupos são uma resposta de qualidade para os cuidadores e as suas crianças.

O que lhe vamos pedir?

Assim, serve o presente consentimento informado para pedir a sua colaboração neste processo de monitorização de qualidade de implementação. A sua colaboração será necessária num breve momento de entrevista, com a duração de cerca de 30min, a qual se pretende que seja gravada em áudio. Adicionalmente, é pedida autorização para que seja efetuada a gravação em vídeo de uma sessão completa do GABC, à semelhança do que foi feito no projeto piloto; estas observações das sessões têm como objetivo compreender o funcionamento dos Grupos.

A todas as gravações em vídeo e áudio apenas terão acesso os membros da equipa de investigação, com o fim último de analisar o funcionamento dos GABC. As gravações destinam-se a recolher dados de uma forma mais detalhada, sendo depois destruídas após a sua transcrição/análise. Todos os dados recolhidos no decorrer deste processo de monitorização são estritamente confidenciais. A vossa participação é também totalmente voluntária, sendo que podem desistir da mesma a qualquer momento do processo de investigação, mesmo tendo assinado concordar em participar.

Pedimos que, caso consinta em participar em ambos os momentos de recolha dados, assine o segmento abaixo. Note que, ao assinar, consente participar nos diversos momentos, permitindo também as gravações em áudio e vídeo supracitadas.

Eu, _____, enquanto monitora do GABC a decorrer no/a _____, declaro que tive conhecimento dos objetivos e procedimentos do estudo de monitorização dos Grupos Aprender, Brincar, Crescer e que desejo participar nas fases do processo referidas no presente documento (e que incluem registo de dados em formato áudio e vídeo).

Assinatura:

Data/...../.....

Appendix A.2 – Caregivers’ informed consent

CONSENTIMENTO INFORMADO CUIDADORES

O que são os GBC?

O projeto piloto Grupos Aprender, Brincar, Crescer (GABC), levado a cabo por um consórcio nacional composto pela Direção Geral de Educação, pela Fundação Calouste de Gulbenkian, pela Fundação Bissaya Barreto, pelo Alto Comissariado para as Migrações e por duas universidades (o ISCTE-IUL e a Universidade de Coimbra) terminou em 2017. Durante a sua implementação, foi feita a sua monitorização e no final avaliados os seus impactos.

Após esta experiência, novos Grupos GABC estão agora a surgir um pouco por todo o país. Nesse sentido, torna-se relevante para o Consórcio supracitado compreender de que modo estão a ser implementados e desenvolvidos estes novos Grupos, e qual a opinião e a experiência daqueles que neles participam. Esta monitorização está a cargo de Joana Alexandre (ISCTE-IUL), responsável pela monitorização do estudo piloto que, em colaboração com Catarina Castro (aluna do Mestrado de Psicologia Comunitária e Proteção de Crianças e Jovens em Risco no ISCTE-IUL), estará a fazer esse levantamento, e cuja dissertação de mestrado contará com parte dos resultados obtidos com esta recolha, à semelhança do que aconteceu com dados do estudo piloto.

O que lhe vamos pedir?

Face ao exposto, gostaríamos, assim, de contar com a sua participação neste processo. Em concreto, pretende-se requerer a colaboração dos participantes em momentos de entrevista individual (quer com as monitoras, quer com os cuidadores). Mediante autorização prévia, as entrevistas serão gravadas. O seu registo áudio será usado exclusivamente pela equipa do ISCTE-IUL. Adicionalmente, ser-lhe-á pedida autorização para que se faça uma gravação em vídeo de uma sessão completa. A filmagem de uma sessão visa permitir a observação da qualidade processual do Grupo, em especial no que diz respeito às interações entre os participantes e ao clima geral do grupo.

A todas as gravações em vídeo e áudio apenas terão acesso os membros da equipa de investigação dos GABC, isto é, apenas membros do ISCTE-IUL. As gravações destinam-se a recolher dados de uma forma mais detalhada sendo depois destruídas após a sua transcrição e/ou análise.

Todos os dados recolhidos são estritamente confidenciais. A participação das famílias é também totalmente voluntária, sendo que podem desistir da mesma a qualquer momento do processo de investigação, mesmo tendo assinado concordar em participar.

É de salientar que estas recolhas de dados não pretendem ser uma avaliação de impacto, no sentido em que o objetivo principal não é o de calcular mudanças nas famílias em virtude da sua participação no Grupo. Tem, antes, uma finalidade de monitorização, de cariz informativo para as entidades que compõem o

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consórcio promotor do projeto-piloto, e que pretende analisar de forma compreensiva, sob a percepção dos participantes, de que modo este projeto está a ser experienciado e vivido por eles, e de que forma percebem essa mesma experiência.

AUTORIZAÇÃO DO REPRESENTANTE LEGAL

Eu, _____,
mãe/pai/outro cuidador (circule o adequado), enquanto representante legal da criança
_____ declaro que tive conhecimento dos objetivos e
procedimentos do estudo de monitorização dos Grupos Aprender, Brincar, Crescer e que desejo participar,
autorizando a filmagem da criança a meu cargo.

Assinatura:

Data/...../.....

Appendix B – Interviews scripts

Appendix B.1 – Individual interview script for facilitators

Agradeço desde já ter aceitado participar na pesquisa que estamos a desenvolver. O meu nome é (...) e encontro-me a conduzir esta entrevista porque se pretende perceber, no seguimento do projeto piloto dos Grupos Aprender, Brincar, Crescer, de que forma estes novos grupos que começam a surgir estão a ser implementados, e qual é o ponto de vista dos participantes acerca dos mesmos. Portanto, pretendemos perceber quais as suas expectativas e opiniões acerca dos grupos e do seu papel neles. A sua ajuda é muito importante para se compreender a implementação dos novos Grupos Aprende, Brincar, Crescer.

Esta entrevista será gravada em formato de áudio para que não percamos nenhum contributo seu, ma toda a informação será tratada de forma confidencial. Pergunto, assim, se me dá autorização para gravar e tomar notas, sabendo que toda a informação será usada exclusivamente para fins científicos.

1. Para começar, conte-nos o que a levou a interessar-se em dinamizar os GABC?
2. Como foi esse processo de conceção e implementação do projeto? [Teve alguma relação com o projeto piloto?]
3. Tiveram alguma formação específica para a dinamização dos GABC? [se sim, em que consistiu? Como a classificam?]
4. O decorrer do GABC tem ido ao encontro das vossas expectativas iniciais?
5. Que avaliação faz até ao momento? [O que tem sido mais positivo? E o que tem corrido menos bem?]
6. Quais têm sido os aspetos/momentos mais desafiantes? E os que proporcionam maior satisfação?
7. Como são planeadas as sessões? O planeamento é feito tendo por base algum tipo de objetivo?
8. Que tipo de atividades/experiências de aprendizagem são proporcionadas às crianças e aos adultos? Mudaram ao longo do tempo ou são semelhantes desde o começo do grupo? [perceber se há mudanças e a que se devem, i.e., se vai de encontro às necessidades das famílias ou se há outros critérios]
9. E que estratégias mais usam para promover o envolvimento das crianças e dos cuidadores?
10. Como descreve o envolvimento/participação das famílias? Tem sido diferente ao longo do tempo?
11. Na sua opinião, como descreve o ambiente que se vive no vosso GABC? [quer atualmente quer ao longo dos meses de duração]
12. Relativamente ao espaço onde decorre o vosso GABC, considera-o adequado? [como organizam o espaço?] E os materiais de que dispõem?
13. Se pudesse voltar ao início do projeto, faria algo de modo diferente? [se sim, o quê e porquê?]

Chegamos ao fim da nossa entrevista. Há alguma questão que me queira colocar? Muito obrigada pela sua colaboração.

Appendix B.2 – Individual interview script for caregivers

Agradeço desde já ter aceitado participar na pesquisa que estamos a desenvolver. Como sabe, o meu nome é (...) e encontro-me a conduzir esta conversa consigo porque se pretende perceber, no seguimento do projeto piloto dos Grupos Aprender, Brincar, Crescer, de que forma estes novos grupos que começam a surgir estão a ser implementados. Portanto, pretendemos perceber como está a ser a sua experiência no Grupo, e qual é o seu ponto de vista, enquanto participante, acerca do mesmo. A sua ajuda é muito importante para se compreender a implementação dos novos Grupos Aprende, Brincar, Crescer.

Esta conversa será gravada em formato de áudio para que não percamos nenhum contributo seu, mas toda a informação será tratada de forma confidencial. Pergunto, assim, se me dá autorização para gravar e tomar notas, sabendo que toda a informação será usada exclusivamente para fins científicos.

A. AVALIAÇÃO DO GABC

1. De uma forma geral, o que está a achar do GABC?
2. Que tipo de atividades têm feito? Quais as que mais gosta? E quais as que não têm corrido tão bem? Porquê?
3. O que acha que já aprendeu aqui [apenas o cuidador]? E a sua criança, o que acha que já aprendeu?
4. Na sua opinião, como é o ambiente que se vive no vosso grupo?
5. Acha que a vossa participação no Grupo tem trazido algum tipo mudanças? (Se sim, quais? A que níveis? Em quem?)
6. O que acha que o grupo tem de mais positivo? E de menos positivo?
7. O que acha do espaço onde acontece o grupo?
8. O que gostaria que fosse diferente no grupo?
9. Com que frequência costuma vir ao Grupo?
10. Há algumas famílias que venham mais raramente? Se sim, o que acha que podia ser feito para que viessem mais vezes?

B. CRIANÇA & BRINCADEIRA

11. O que tem achado da participação da sua criança?
12. Nota algo de diferente nela?
13. Quais são as brincadeiras preferidas dela aqui no grupo?
14. E em casa, quais são? Já eram as mesmas antes de participarem no grupo?
15. Costumam brincar juntas em casa? Se sim, o que fazem?
16. Levam algumas atividades aprendidas no grupo para casa? Se sim, quais?

C. BEM ESTAR DO ADULTO

17. Como se sente aqui no grupo?
18. Mudou algo na sua vida ou no seu dia a dia desde que participa no grupo?
19. Que qualidades suas acha que podem ser uma mais-valia para o Grupo?
20. Como avalia a sua vida, de um modo geral?

Appendix C – PERS summary of subscales and items

Subscales	Items	
Space and materials	1. Physical space	
	2. Space organization	
	3. Equipment/materials	
Activities and routines	4. General routine	
	5. Session characteristics	
	6. Free play	
Contact with diversity	7. Diversity of dialogs and practices	
	8. Diversity of materials	
	9. Overall climate	
Climate and interactions	10. Interaction between children	
	11. Interaction between facilitators and children	a) Sensitivity and autonomy
		b) Stimulation
	12. Interaction between facilitators and caregivers	a) Cooperation and closeness
		b) Trust
	13. Interaction between caregivers and their own children	a) Sensitivity and autonomy
		b) Stimulation
	14. Interaction between caregivers and other children	
	15. Interaction between caregivers	
	16. Interaction between supervisor and caregivers	
17. Interaction supervisor and facilitators		

Appendix D – Dimensions and categories of caregivers’ content analysis

Dimension	Category
1. Project participation	1.1 Knowledge of GABC’s existence
	1.2 Motivation to project participation
2. Overall assessment and perceived impacts	2.1 Positive aspects
	2.2 Negative aspects and/or main challenges
	2.3 Perceived impacts
	2.4 At the family level and/or home environment
3. Space and materials	3.1 Space
	3.2 Materials
4. Session and activities	4.1 Overall session structure
	4.2 Activities
5. Group climate	5.1 Evolvement over time
	5.2 Characteristics
	5.3 Diversity and inclusion
6. Relationship with facilitators and evaluation of their work	6.1 Professional skills
	6.2 Personal qualities
7. Participants’ engagement	7.1 Attendance
	7.2 Engagement in the activities
	7.3 Participation in decision-making processes
8. Suggestions and future recommendations	