Care in Early Learning and Childcare Transitions

MEGAN MCKENZIE

ABSTRACT
There has been a global trend in the expansion of Early Learning and Childcare (ELC) provision meaning more children of younger ages accessing ELC and experiencing the associated transitions than was previously the case. This has occurred within an increasingly Neoliberal context, with a greater focus on measurable educational outcomes, which are often placed as juxta positioned to care, which may prove challenging to define and quantify. These challenges are compounded when considering the often taken for granted nature of care in ELC, rendering it often unspoken and therefore at greater risk of being undermined or deemed a dispensable aspect of the increasingly multifaceted role. Given the above context, it was deemed essential that the concept of care was explicitly and critically explored in relation to the many multiple and multidimensional transitions which occur in ELC. This paper considers the criticality of care as part of ELC transitions by reviewing literature from 2010-present day. Findings suggested the role of ELC has shifted over time, leading to ambiguities and sometimes tensions in expectations between and within stakeholders. This in turn has influenced how care is defined, enacted and valued within ELC, with the overwhelming literature suggesting care is viewed less highly than education, for reasons such as difficulties in quantifying quality of care and the perception that care is innate rather than skilful. Transition practices were considered in relation to previously discussed definitions of care, which led to the identification of how care is enacted during ELC transitions.
INTRODUCTION

There has been an increase globally in the number of children attending Early Learning and Childcare settings (ELC) (Organisation for Economic Cooperation and Development, (OECD), 2017) which parallels the increase of women in the labour market (Ortiz-Ospina, et al., 2018) highlighting the multiple and multidimensional transitions associated with ELC. There has also been an increased recognition of the importance of quality early years provision in terms of better outcomes for children (Bromley, 2009), particularly those from lower socio-economic backgrounds (Scottish Government, 2019) which may have links to the increased standardisation of ELC settings seen throughout the globe (European Commission, 2011). Early Learning and Childcare in this paper is taken to mean a setting which provides education that is mapped to a curriculum and whose provision is regulated by a professional body. This is in keeping with definitions in the field (Campbell-Barr et al., 2010; OECD, 2017). The term ELC in this assignment encapsulates childcare provision globally which meets the above definition, but which otherwise may be known by a different name. For example, “Early Childhood Education and Care” (ECEC), in countries such as Australia (Australian Institute of Health and Welfare, 2020), Sweden (Ministry of Education, Undated) and the US (US Department of Education, 2003).

Despite the increase in provision, OECD (2017) warns this does not necessarily correlate with greater quality of provision, so it is imperative previously taken-for-granted norms are questioned in relation to the newer context (Bassot, 2016; Thompson, 2016). For example, a perhaps unintended consequence of widening subsidised access to provision is that a larger number of younger children will be experiencing multiple and multidimensional transitions associated with ELC (Jovanovic, 2011). Transitions and transition practices, particularly in the early years, are well researched due to the implications on wellbeing and future outcomes (Dockett et al., 2012). However, much of this research is focussed on the transitions associated with the start of formal schooling (see Brooker, 2010; Dunlop, 2002; O’Connor, 2018) involving children of a different developmental stage (Jovanovic, 2011) rather than the transitions of much younger children associated with ELC, who may therefore have differing needs (Van Laere et al., 2018) including physical care needs, such as feeding and toileting (Nolan, 2020). A further unintended consequence may be the increase in standardisation discussed above, which may threaten the place of hard to quantify aspects of ELC, such as care or play.

The main question which will be addressed through this study is:

“How is care enacted during ELC transitions?”

This main question will be supported by sub questions. The role and nature of ELC has evolved throughout time (Nolan, 2020), and the most recent changes to provision may reflect a need to reconsider the purpose once again (Rogers, 2020). With longstanding debates around educare (McShane, 2016), it will be critical to investigate and establish through sub question one:

“What is the role of ELC?”

Historical influences which have shaped ELC will be explored, as well as the often-differing perspectives of the stakeholders involved, which in turn influence ELC priorities. This may account for the often ‘muddied’ understandings around the multifaceted role of ELC.

Just as there are ambiguities associated with the nature of ELC, so too are there contentions around how care is enacted within these settings (Aslanian, 2015; Nolan, 2020) which link to the competing priorities around the multifaceted role of ELC. Despite featuring in the title of ELC, there are often assumptions that care is antithetical to learning (Van Laere et al., 2018), assumptions which are complicated further given the connotations with professionalism associated with learning (Brooker, 2010) which are not afforded to care, which has traditionally been, and arguably continues to be associated with undervalued, underpaid work (Douglas & Gittell, 2012) often synonymous with the female gender role (Taggart, 2011). These debates relate very closely to the questions posed above around the role of ELC and will be addressed through the second sub question:
“How is care defined in ELC?”

A widely accepted definition of care, borne from a Feminist perspective by seminal author on care, Noddings (1992) known as Ethics of Care, which views care as relational and reciprocal will be explored, alongside complementary and contradictory definitions.

The complexities outlined above are perhaps antecedents to the nature of transitions in ELC, which are multifaceted, interactive and complex (Jindal-Snape, 2016), not only for the child but for all others in the child’s ecosystem (Bronfenbrenner, 1992). It will be critical then to explore through sub question three:

“How are transitions supported in ELC?”

METHODS

This research was conducted using a systematic literature review. Guidance from Evidence for Policy and Practice Information and Coordinating Centre (EPPI-Centre) (2007) was used to structure this review. The review was distilled through the lens of the research question:

“How care is enacted during ELC transitions?” and sub questions:

“What is the role of ELC?”

“How is care defined in ELC?”

“How are transitions supported in ELC?”

The following steps (Figure 1) were taken to ensure the review was systematic and objective, as advised by EPPI-Centre (2007).

1) A scoping review was firstly conducted which allowed for familiarity of key terms and synonyms in this area which would inform the inclusion and exclusion criteria as well as the search strategy in the systematic literature review (Aveyard, 2018). The importance of justifying the inclusion and exclusion criteria has been highlighted by EPPI-Centre (2007) and the scoping review would allow for a more informed approach to this. For example, by allowing identification of potential seminal pieces of work which would inform the key dates. Similarly, by exploring the literature in this area more widely initially, familiarity around the differences in terms used across the globe was developed and this was used to inform the synonyms in the search strategy with the intention of capturing as many relevant studies as possible in the strategic search.
2) Inclusion and exclusion criteria were then determined. It was decided that peer-reviewed, discursive and empirical journal articles, books, book chapters and research reports, written in English for reasons of accessibility, would be included in the review, on the basis that peer-reviewed sources would allow for a standard of rigor in the research (Aveyard, 2018). Literature from post 2010 only was selected, as it was recognised relevance can decrease over time (Aveyard, 2018). The inclusion and exclusion criteria were used within three databases: SCOPUS, ASSIA and Google Scholar which hold relevance in the field of education (Table 1).

<table>
<thead>
<tr>
<th>CATEGORY</th>
<th>INCLUSION</th>
<th>EXCLUSION</th>
<th>JUSTIFICATION</th>
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<tbody>
<tr>
<td>Key sources</td>
<td>Discursive and empirical journal articles, books, book chapters, research reports were considered for inclusion</td>
<td>Peer-reviewed journals, books, book chapters, and research reports provided rigour to the literature considered.</td>
<td></td>
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<tr>
<td>Language</td>
<td>English</td>
<td>Language other than English</td>
<td>Accessibility issues.</td>
</tr>
<tr>
<td>Years of publication</td>
<td>2010-present day</td>
<td>Pre 2010</td>
<td>Literature older than ten years was not of primary concern for this study, which used ‘recent’ works.</td>
</tr>
<tr>
<td>Search Engines/journal databases</td>
<td>SCOPUS, ASSIA, Google Scholar</td>
<td></td>
<td>The databases chosen were relevant to the field of education</td>
</tr>
<tr>
<td>Key terms</td>
<td>Early years, pre-school, kindergarten, nursery, day care, playgroup, ethics of care, care, educare, transition</td>
<td>Formal school transitions were not considered</td>
<td>The focus of this study was early years transitions, as such wider transitions out with education or Ethics of Care literature in wider contexts did not inform this work.</td>
</tr>
<tr>
<td>Literature discussing Ethics of Care in an educational context was considered. Literature discussing early years transitions in a pre-school (non-formal education) setting was considered.</td>
<td>Transitions out with the field of education were not considered Ethics of care literature out with early years context was not considered</td>
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3) Informed by the scoping review of literature in this area, the key terms to be used in the search strategy include ‘early years’ and synonyms: ‘pre-school’, ‘kindergarten’, ‘nursery’, ‘day care’, ‘playgroup’; ‘ethics of care’ and synonyms: ‘care’ and ‘educare’ and finally ‘transition’, for which no appropriate synonyms were found. The search strategy includes all possible combinations of these terms, therefore 18 key search terms were used in all identified databases (EPPI-Centre, 2007) (Table 2).

<table>
<thead>
<tr>
<th>KEY SEARCH TERMS</th>
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<tr>
<td>Early years</td>
<td>Pre-school, kindergarten, nursery, day care, playgroup</td>
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<tr>
<td>Ethics of care</td>
<td>Care, educare</td>
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<tr>
<td>Transition</td>
<td>KS1: ‘Transition’ AND ‘ethics of care’ AND ‘Early years’</td>
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<td></td>
<td>KS2: ‘Transition’ AND ‘ethics of care’ AND ‘preschool’</td>
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<tr>
<td></td>
<td>KS4: ‘Transition’ AND ‘ethics of care’ AND ‘nursery’</td>
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<td></td>
<td>KS5: ‘Transition’ AND ‘ethics of care’ AND ‘day care’</td>
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<tr>
<td></td>
<td>KS6: ‘Transition’ AND ‘ethics of care’ AND ‘playgroup’</td>
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(Contd.)
4) The search strategy was then used in three journal databases which were identified as being relevant to the field of education. Using every combination of these three search terms, literature was distilled from 1372 initial hits, to the final 20 used in the review. Literature was distilled firstly by title, reducing the 1372 down to 201, then by abstract reducing the number further to 63 and finally after a full review, where the final 20 pieces of literature to be included in the systematic review was chosen. The process of inclusion and exclusion was recorded at each stage and can be found in the appendices section (Appendices 2, 3 and 4). Literature in the final review was aligned with at least one of the three sub questions and this alignment was recorded (Appendix 4). All literature was screened using the inclusion and exclusion criteria identified which allowed for greater objectivity and transparency (Davies et al., 2012). Where literature was not included, the justification for this was also recorded providing a safeguard against bias (Aveyard, 2018). An example of this recording can be found in Tables 3, 4 and 5 with the full tables available in Appendices 1, 2, 3 and 4 which documents each step of the process for full transparency.

<table>
<thead>
<tr>
<th>KEY SEARCH TERMS</th>
<th>SYNONYMS</th>
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<tr>
<td>KS7: ‘Transition*’ AND ‘care’ AND ‘Early years’</td>
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<td>KS8: ‘Transition*’ AND ‘care’ AND ‘preschool’</td>
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<td>KS10: ‘Transition*’ AND ‘care’ AND ‘nursery’</td>
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<td>KS11: ‘Transition*’ AND ‘care’ AND ‘day care’</td>
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<tr>
<td>KS12: ‘Transition*’ AND ‘care’ AND ‘playgroup’</td>
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<tr>
<td>KS13: ‘Transition*’ AND ‘educare’ AND ‘Early years’</td>
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<tr>
<td>KS14: ‘Transition*’ AND ‘educare’ AND ‘preschool’</td>
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<td>KS15: ‘Transition*’ AND ‘educare’ AND ‘kindergarten’</td>
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<td>KS16: ‘Transition*’ AND ‘educare’ AND ‘nursery’</td>
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<td>KS17: ‘Transition*’ AND ‘educare’ AND ‘day care’</td>
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<tr>
<td>KS18: ‘Transition*’ AND ‘educare’ AND ‘playgroup’</td>
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Table 3: Record of search terms and results.
Once the initial systematic search was completed, a bibliography/reference search was completed which allowed for a review of the first search strategy, following advice that this, so called ‘snowball searching’ strengthens findings which can sometimes be limited when exclusively conducted using database searching (Greenhalgh et al., 2005). The snowball search was conducted by systematically considering the reference list of each of the articles already selected for the study, in turn. As with the systematic search, potential sources were then screened firstly by title, then by abstract, then following full review. The previously established inclusion and exclusion criteria were maintained throughout this process. An extract of the list of additional sources to be considered from the snowball search can be found in Table 6, with the full table found in Appendices 5, 6 and 7. The complete list of literature which was included in this review can be found in Appendix 8.
Literature was then mapped to the questions and analysed by country of origin and type of study, as advised by Aveyard (2018). Despite some studies advocating the application of a weight of evidence (WoE) score to literature (Gough, 2007), others argue this is often not consistently done and advocate against giving a numeric score (Critical Appraisal Skills Programme, 2018). For this reason, while all articles included were critically appraised to ensure a minimum standard, a numeric score was not allocated. There is literature which buttresses this decision, including some which discuss the underappreciated place of case studies in research (Flyvbjerg, 2006), and some which discuss the overly credited position of quantitative studies with large sample sizes in comparison with qualitative studies (Press et al., 2015).

Findings were then written up making use of Thematic Analysis (Braun et al., 2006). A deductive approach was taken, informed by the three sub questions.

Findings were discussed in relation to existing literature.

Finally, conclusions and recommendations were drawn and implications stated.

RESULTS

From a systematic review which identified 20 studies as relevant (Appendix 4), twelve were identified as empirical and eight discursive. Eleven studies were relevant in terms of sub question one, thirteen had relevance in terms of sub question two and only five in terms of sub question three. Some studies held relevance across more than one of the sub questions and were therefore used to inform any sub question deemed relevant (Figure 2).
Of the studies used in this review, seven were from Australia, three each from the UK and USA, two from Belgium and Norway and one each from Denmark, Finland and Sweden. Despite the slightly differing contexts, there were sufficient similarities between contexts that the research was deemed applicable, transferable and comparable, as was often identified by the authors themselves (see De Gioia, 2013).

In addition to the 20 studies identified from the systematic search, 14 studies were deemed relevant following a ‘snowball search’ of the reference lists associated with the literature already selected for review (Appendix 7). Of this literature, nine sources were categorised as empirical, three as discursive and two as grey literature (Figure 3).

Four of the fourteen pieces of literature were conducted based on several countries; three pieces of literature were conducted in relation to the UK, two in relation to the US and two in relation to Norway and one each in relation to Sweden, Australia and New Zealand. In total, 34 pieces of literature were included in this review of literature (Appendix 8), with empirical papers accounting for 21 of these, discursive for 11 and grey literature for the remaining 2 (Figure 4).
Multi-country studies accounted for four of the 34 pieces of literature, Australia accounted for eight, the UK for six, the USA and Norway for five and four respectively, Belgium and Sweden for two each, and Denmark, New Zealand and Finland for one each (Table 7). While all countries were comparable contextually and therefore suitable for consideration in this study, it is worth noting that there is lack of representation of other countries from around the globe. It would be recommended that future studies seek to fill this gap in order that findings include greater representation (Kumari-Campbell, 2020).

<table>
<thead>
<tr>
<th>COUNTRY</th>
<th>NO. OF PAPERS</th>
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<tbody>
<tr>
<td>Australia</td>
<td>8</td>
</tr>
<tr>
<td>Multiple country studies</td>
<td>4</td>
</tr>
<tr>
<td>UK</td>
<td>6</td>
</tr>
<tr>
<td>USA</td>
<td>5</td>
</tr>
<tr>
<td>Norway</td>
<td>4</td>
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<td>Sweden</td>
<td>2</td>
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<tr>
<td>Belgium</td>
<td>2</td>
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<tr>
<td>New Zealand</td>
<td>1</td>
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<tr>
<td>Denmark</td>
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<td>Finland</td>
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After reviewing all the papers, common themes were constructed and explored, utilising Thematic Analysis (Braun et al., 2006). Themes which were constructed in relation to the role of ELC included the role as evolving and contested; the role of ensuring wellbeing; the role of building relationships and the role of education. Themes which were constructed in relation to defining care included: care as natural; care beyond relational; and care as dynamic and changing. Themes which were constructed around how transitions are supported included continuity, developing protective factors, familiarity and belonging and collaboration. Some themes were interrelated and complimentary whereas others appeared conflicting. This will be explored in greater detail below.

**WHAT IS THE ROLE OF ELC?**

**Role as evolving and contested**

The first theme which recurred in several articles (Douglas & Gittell, 2012; Lofgren, 2016; McShane, 2016) was that of the changing role of ELC. Of the papers which discussed the changing role of ELC, there was a spread of articles representing countries across the Western World, including but not limited to: the USA, Norway, UK and Australia, as well as a paper by the Economist Intelligence Unit (2012) which held relevance with 45 countries. The latter described how the primary focus of ELC historically had been that of care, however this was now changing globally to a more education focused provision leading to potential tensions. This was attributed to an increased understanding of the importance of supporting child development, particularly in the early years. Several studies referenced changing policies; both national and international which influenced the changes (Brooker, 2010; McShane, 2016) resulting in a more education focused provision (Jovanovic et al., 2016) and often associated with this, a greater level of bureaucracy (Douglas & Gittell, 2012; Lofgren, 2016).

In line with the above discussion, several studies which were conducted in Norway commented on the notable removal of the term ‘care’ from ELC policy following this shift to a more education focussed provision (Aslanian, 2018, 2020). Similar comments were noted in other countries. For example, in Danish policy, the term ‘education’ was cited 89 times compared with the single time ‘care’ was included (Winther-Lindqvist, 2020). While care remained in the title of other countries’ documentation to varying degrees, several studies did comment on the tensions between care and education because of this shift (Brooker, 2010; Lofgren, 2016) and also on the standardisation of provision (Douglas & Gittell, 2012). When discussing the standardisation of provision, some reported on this neutrally (Jovanovic et al., 2016; McShane, 2016), while others were notably disdainful (Lofgren, 2016). Press et al. (2015) provided balance in their discussion, suggesting that while quantitative data associated with standardisation could be deemed necessary to ensure policy changes are informed by more than political ideals, qualitative data, particularly in a complex field such as ELC cannot be overlooked, as it is often this quantitative data which illustrates the complexities and nuances which cannot be captured in quantifiable data.

In relation to the ever-changing policy context, one study associates the constantly changing ELC environment with the alignment to neoliberal ideals around continuous improvement and standardisation (Rogers, 2020). Rogers (2020) suggests this is problematic in that ELC practitioners may lose sight of what quality ELC provision looks like within their specific context, out with the parameters of prescribed notions of quality. He emphasises the need to actively reject neoliberal ideals which are influencing the ELC sphere, as passivity will only allow neoliberalism to continue influencing the role of ELC in ways which have been described above.

Related to Neoliberal ideals is the role of ELC as an enabler of market engagement. Two studies linked this with the opportunity for greater social mobility (Campbell-Barr et al., 2010; Economist Intelligence Unit, 2012). The remaining studies which did not mention this function of ELC, highlighted in their silence, the many aspects of ELC’s evolving role which may be taken for granted then.

It is clear from the literature examined in this systematic search that the role of ELC is multifaceted and changing, with overwhelming evidence suggesting the changes have resulted in a greater focus on education which in turn is impacting the value placed on care. Therefore,
it may not be surprising to learn that the role of ELC, while evolving is also contested. Several studies highlighted this, with the perception of both practitioners and parents captured within the studies, however notably none exploring the role from the child’s perspective. Of the papers that explored the parent or carers perspective, Brooker (2010) highlighted the view that as parents and carers pay for the service (although this is often subsidised) there was at times an expectation on the part of the parents that the role of ELC was to fulfil a service, which should be led by the consumer (parent). This may again link with Roger’s (2020) warning of the impact of neoliberal ideologies on the ELC setting. Brooker’s (2010) study then highlighted the lack of empathy between each stakeholder in appreciating the others’ position; though admittedly only included a small sample size therefore findings may not be generalisable. Despite this, similar findings were reported in both De Gioia’s (2013) study and Douglas & Gittell’s (2012) paper whereby it was stated that misunderstandings between each stakeholder’s position leads to tensions. De Gioia’s (2013) study also highlighted contention even within those in similar positions; in one setting practitioners considered it their role to fulfil the mothering role in her absence, whereas others clearly rejected this notion stating their role was that of a friend (De Gioia, 2013). This exact tension was constructed in other literature; Van Laere et al. (2018) noted that a parent expressed, ‘A teacher to me is a bit like a mother to the children in the class’, a notion which was rejected by the practitioner in this situation who viewed the role as primarily to educate. One study also recognised that the role of ELC is poorly understood but associated this with the multifaceted role ELC is expected to play (Press et al., 2015).

In addition to expectations of role held by stakeholders causing tensions, at times the roles which ELC are expected to fulfil do not align. For example, Douglas & Gittell (2012) discuss being required to ‘care’ for children and families by embracing ‘person centred’, responsive care, while simultaneously being bound by professional parameters which require a uniform, procedural approach to responses.

The literature examined has identified contentions in expectation around the evolving role of ELC both between different stakeholders, and also within the same groups of stakeholders with added complexities including the need to work within sometimes conflicting policies.

**Role to ensure wellbeing, including care**

This category was wide reaching and included subcategories such as care mentioned explicitly (Douglas & Gittell, 2012; Rogers, 2020), as well as intertwining with other subcategories in which care was implied. For example, building of relationships to provide continuity of care (De Gioia, 2013). Within this subcategory some studies (De Gioia, 2013) identified the need for personalisation of care and continuity of caring practices from the child’s home setting to ELC. For example, sleep times and feeding times which may not necessarily coincide with the setting’s ideal schedule. Notably, Winther-Lindqvist (2020) highlights that practices like routines involving care-giving activities, such as scheduled nappy changes are borne from ensuring a baseline of care, from which responsive, individualised care would be given in addition.

Other studies considered wellbeing from a deficit perspective, viewing it as the practitioner’s role to protect children from harm (Douglas & Gittell, 2012) rather than to support flourishing. Others made links to promotion of healthy development (Jovanovic et al., 2016) or discussed wellbeing in terms of enhanced provision for those with additional support needs (Jovanovic et al., 2016).

The National Quality Standard in Australia considered wellbeing from a holistic perspective, an approach supported by Van Laere et al. (2012), incorporating several elements outlined above including healthy development and care (ACECQA, 2018). Interestingly, this framework separated ‘children’s health and safety’ and ‘relationships with children’ with the former composing mainly of care giving tasks such as effective hygiene practices, and the latter including the likes of ‘warm, responsive and trusting relationships’ which are associated with wellbeing. Rogers (2020) study was the only study to use the term ‘allocare’ to describe the coexisting attachments which develop between primary carers and children and ELC practitioners and children simultaneously, stating that the effects of these attachments were not fully understood, however the importance of these for children was unquestionable.
Some studies provided specific examples of practice which supported wellbeing of children including Jovanovic et al., (2016) who noted observations, teamwork, programming and family liaison as contributing factors and Lofgren (2016) who critically discussed the place of documentation. Winther-Lindqvist (2020) shone light on the complexities associated with providing care and ensuring wellbeing for young children who are not yet verbal. The theme of ensuring wellbeing of children also extended to supporting transitions (European Commission, 2011; Little et al., 2016). When exploring the literature, the wider subcategory of wellbeing was used due to the wide reaching and multifaceted ideas discussed in the literature which in fact signifies the complex and dynamic view of care in ELC.

Role of building relationships

Building relationships with children was commonly cited in literature. Of the studies which discussed relationships with children, many did so in relation to attachments (Jovanovic et al., 2016). Some studies discussed a particular role, known as ‘key worker’ in relation to developing strong and secure attachments (Brooker, 2010). However, others represented this role as void, suggesting practitioners often did not know who their ‘key children’ were and viewed this more as a ‘paper exercise’. Similarly, Press et al. (2015) highlighted the limitations associated with a high rate of staff turnover often experienced in ELC settings when considering the importance of maintaining stable and consistent relationships. Interestingly, this turnover rate was linked to low status and associated conditions and pay in this study; which is one of the motivations behind the changing role and increased standardisation and professionalisation that is contributing to the confusion and ambiguity around the role in what appears to be a symbiotic, perpetual cycle. Similar findings were also reported by Rogers (2020), who included burnout to the contributing factors of high staff turnover.

Relationships with children were again entangled within other key themes, such as in effectively supporting child development and promotion of equity, inclusion and diversity and children’s rights (ACECQA, 2018). Jovanovic et al. (2016) discussed how effective relationships can promote communication with children, both verbal and non-verbal and Press et al. (2015) iterated that relationships and interactions are at the core of all ELC does.

The literature which was examined unanimously defended the importance of relationships in ELC, while highlighting some areas for consideration. Other studies (De Gioia, 2013) discussed the importance of the relationships with parents and carers in enabling a foundation of care and knowledge of the child, from which relationships with children could be built.

The role of developing effective, open and honest relationships with parents was also specifically discussed in the studies. The benefits of this were often linked to other aspects of the ELC role, such as wellbeing of the child (ACECQA, 2018) or indeed in clarifying contention around the role being fulfilled (De Gioia, 2013). Brooker (2010) suggested close communication with parents was most necessary for the youngest children attending the setting whereby key information such as nap time needed to be handed over. This finding was also supported by De Gioia (2013).

Some studies (De Gioia, 2013) distinguished between oral and written communication, citing both parents and practitioners recognised the benefit of oral communication, for example during drop off and pick up times; again feeding into the theme of wellbeing for the child. However, other studies suggested practitioners did not always recognise the value parental relationships could bring in terms of bridging information in terms of caring for the children (Van Laere et al., 2018) and others highlighted the unequal power distributions which occur when defining the means in which families can engage and the purposes for this, with the decisions largely being made without input from the families, coined a ‘democratic deficit’ (Van Laere et al., 2018). The literature has demonstrated once again the importance of relationships in ELC, however also highlighted a need to be aware of potential limitations such as unequal power relations which may influence the relations.

Jovanovic et al. (2016) discussed the role of developing effective interagency relationships and this related with the key theme of promoting wellbeing. This notion was also included in the European Commission (2011). While this was one of very few studies to mention interagency relationships explicitly, other studies noted the key role ELC plays in ‘bridging’ the transition to schooling, implying a professional relationship between ELC settings and school settings.
This highlights the many elements of the ELC role which can be overlooked. Similarly, the importance of building relationships with the wider community is also highlighted. For example, in the Australian Quality framework (ACECQA, 2018).

Role of education

The role of educating the child was also discussed in several studies (McShane, 2016; Van Laere et al., 2018). More formal, standardised learning was explored in Douglas et al., (2012) and Puccioni et al.’s (2020) studies, which both discuss the perceived role of ELC in preparing children for formal schooling. Education was also explored more broadly in other studies. For example, developing through play (Lofgren, 2016), or in the case of De Gioia’s (2013) study, in supporting the learning of English as an additional language to those children who were not native speakers. The European Commission (2011) tasked it ELC’s role to provide the foundations which would allow a child to flourish in future education, society and in the labour market; citing the importance of a provision which meets cognitive, social, emotional and physical needs of children attending. The importance placed on education is buttressed when examining quality frameworks for ELC, such as ACECQA (2018) which dedicates a section to education, covering curriculum, development and documentation. Several studies also highlighted the tensions which exist in a setting which simultaneously hopes to offer education and care (Douglas & Gittell, 2012; Lofgren, 2016) with all studies reporting on this suggesting education has a tendency to overshadow care due to the links with increased professionalisation occurring within the sector. Rogers (2020) notes that the standards against which ELC is judged aligns with a neoliberal discourse, which in fact may alienate those non-prescriptive practices which parents and children associate with positive care. This can be seen in the study by Van Laere et al. (2018) in which practitioners talk of the inconvenience of care giving. For example, changing nappies when attempting to meet educational outcomes. The authors of this study discuss this in terms of mind-body dualism, whereby the there is a separation in the conceptualisation of learning and caring in a way which is synonymous with Cartesian relativism. The literature examined identifies education as part of the role of ELC, while highlighting differences in opinion on what education should entail even within this role.

From the literature included in this study, it has been identified that the role of ELC is changing and contested but includes; building relationships to ensure the wellbeing of the child. According to the literature the role of ELC also involves education, though ideas of what this entails range from supporting development through child-led play, to more formal notions of education which can be tracked and monitored against standards. There are also aspects of the role of ELC which from the literature examined appear to be implicit, such as in enabling parents to return to work.

HOW IS CARE DEFINED IN ELC?

Care as natural

The first way in which care was presented in the literature, was care as a natural phenomenon. For example, Van Laere et al. (2018) discuss the term ‘embodied care’ describing this as a fundamental part of being human. Also appearing to assimilate into this definition is ‘care as a phenomenon’, including qualities such as attentiveness, physical acts of care and the feeling of belonging (Van Laere et al., 2018). Many studies that recognised this enactment of care in the understanding of their participants spoke of this limiting the sector in terms of professional status (Cook et al., 2016; Taggart, 2011). This definition of care was often linked to the female gender role (Taggart, 2014) and often limited to actions associated with meeting physical needs. The undervalued role was sometimes compounded by the differentiation between teachers and teaching aides in some countries (Press et al., 2015). For example, in the aforementioned study, the context of Australia is considered, whereby the highly valued educational element was associated with the role of the teacher, and the ‘care’ elements associated with the lesser-paid teaching aides. Similar findings were apparent in Van Laere et al.’s (2018) study in Belgium, whereby there was separation of caring and education responsibilities also, with teachers responsible for education, in exchange for higher remuneration than the teaching assistants who were largely responsible for the caring roles. Interestingly within this study, there was a tendency for teachers to reject the role of care as part of their professional identity. This is a finding which has not been replicated in ELC settings that do not have the differentiation...
between teachers and teaching aides or assistants. At times the notion of care best suited to this theme was also overlapping with other related concepts such as love (Aslanian, 2015) and maternalism (Nolan, 2020). While there were slight variations in some of the definitions given above, the underlying theme was that care was a natural quality.

Conversely, care was specifically connected to the context of a profession in some theoretical studies (Aslanian, 2015; Duffy et al., 2015; Gouuch et al., 2017; Harwood et al., 2013) and was linked to the work of Noddings (1992). While it was stated that professional care drew upon natural care ideals, there was a separation. Care in this definition was described as relational and featured components such as ‘motivational displacement’ and ‘engrossment’. Interestingly, Douglas & Gittell (2012) discussed professional care in terms of relationships with the wider family as well as for the child attending the setting, however noted the ever-increasing bureaucracy associated with the role of ELC as a barrier to effective practitioner-parent/carer caring relations for these individuals, but also for the children, noting the shift in power relations associated with professionalisation. In addition to this, Douglas & Gittell (2012) noted the explicit or implicit boundaries which were identified by practitioners when discussing care within the profession. For example, not being able to drive a family home. When considering care as relational, Van Laere et al. (2018) discussed the symbiotic relationship which exists between the relationship and care giving, stating that the act of caring can produce a closer relationship, which in turn can allow for a greater tuning into the needs of the parties in the relationship, thus producing better caring interactions. Taggart (2011) also discussed care as professional in his study and likened the professional care present in ELC to that of other caring professions such as nursing, arguing care is a legitimate, important and professional dimension of the role. Common features of the definitions included in the ‘professional care’ then include parameters separating care within the professional context from care out with the job role.

On some occasions, care was not explicitly defined (Taggart, 2011). This links with the discussion above, again implying it is a natural phenomenon with no need to define parameters. In other studies which explored the role of ELC, care – an essential component – was notably missing from the participants’ responses. Lofgren (2016) described this as a ‘noisy silence’ and Löfdahl et al., (2015) described care as ‘invisible’; both suggesting this demonstrated the overlooked and undervalued place of care in ELC.

Care beyond relational
An empirical study conducted by Aslanian (2017) presented care as situational as well as relational and encouraged the recognition of all acts which contribute to a life of flourishing as care. Despite being a small-scale study, this author is established in this specific field and with this in mind the findings hold weight. In a further study, Aslanian (2020) also argues, this definition of care moves away from the connotations of the female gender role, identified in other definitions of care. For example, care as natural, which can be seen as limiting. Though using a different term, Van Laere et al. (2018) describe care in similar terms, including all acts which contribute to wellbeing as care, naming this ‘embodied care’. This definition may be seen to have crossovers with natural care also, as the authors describe embodied care as ‘part of being human’. Certainly, the notion of care embracing wider elements is supported in quality frameworks such as ACECQA (2018) who emphasise the importance of the environment in enabling the child to flourish.

Care as dynamic and changing
In several studies it was recognised that the understanding of care had changed and was continuing to change (Cook et al., 2016); a theme which is also apparent when considering the various definitions of care outlined above. This was generally positioned positively and in alignment with greater recognition of care (Aslanian, 2015). However, Cook et al.’s (2016) study on policy analysis suggested that care which is aligned to quality assurance standards may only be valued more highly as a result of the alignment with traditionally more ‘masculine’ constructs, thus not addressing the crux of the matter. Nolan (2020) also warned that the ever-changing understanding of care internationally poses problems in terms of enacting care in practice, as married to changing conceptualisations is confusion and ambiguity. This notion may be seen to be supported when considering parents and carers expressed a desire to be more greatly involved with ELC with motivations mainly around wishing to learn more about
care practices in ELC (Van Laere et al., 2018). Equally, confusions around how care should be enacted reiterate the contention around this changing concept. For example, in more than one study care was deemed to be ‘like a mother’ (De Gioia, 2013; Van Laere et al., 2018), with variations on this definition ranging to the almost complete rejection of care as part of the educative role (Van Laere et al., 2018).

Several variations of care were constructed from the literature, and within these broad categories, were further variations still. The concept of care as changing was a common theme in the literature and one which has made its presence felt within this section of the literature review. Which acts are or are not deemed care in ELC then will depend on which definition of care is held.

HOW ARE TRANSITIONS SUPPORTED IN ELC?

Continuity

Continuity is a thread which runs throughout the subsequent subcategories as well as being worthy of a subcategory individually. Generally, continuity has been associated with greater stability during transition (Turunen, 2012). However, one study in particular expressed the parents’ desire for continuity of care during transitions (Van Laere et al., 2018). This was also considered to include liaising with other professional services with which the child or family may already be familiar, thus allowing for another dimension of familiarity during a period of transition (Warren et al., 2016).

Continuity of routine was also considered important (ACECQA, 2018), this then links with developing professional relationships with parents and carers who can share home practices which can be adopted in ELC. The issue of continuity can also be seen to relate back to previous discussions on the role of ELC and the definition of care however, as in aiming to provide greater continuity during transitions; practices and pedagogies more commonly associated with school may begin to be adopted in ELC settings in attempts to prepare children for the transition to school (Turunen, 2012). Indeed, this appears to be the focus in some quality guidance documentation, for example: ACECQA (2018). This is justified when considering the conception of transition as ongoing, rather than a one-off event, a notion captured in the works of Puccioni et al., (2020). However, the need to consider transitions out with the dominant ELC-school transition has become apparent, as transitions occur all across and throughout ELC, and not simply from ELC to school. Continuity was a common theme emerging in the literature and was wide reaching in its application.

Developing protective factors

Rogers (2020) study noted that transitions can be eased when ‘protective factors’ are present, which can help mitigate against potential negative effects of transition. One such protective factor is a secure and familiar relationship with a key figure. This allows for stability for both the child and parent, as well as a foundation of knowledge on the part of the practitioner about the child. Building on this, Warren et al. (2016) highlighted the value placed by practitioners on person centred planning, particularly for those who may need enhanced provision. The importance of an individualised approach to transition was also captured in Turunen’s (2012) study, however complications around the views of parents and practitioners were also highlighted, stating benefits are not always appreciated by all parties and that greater communication will be needed to ensure a collegiate approach to make this most effective.

Familiarity and belonging

Orientation events, as discussed in Little et al. (2016) can be seen to support transitions in terms of providing greater familiarity of the space, key adults and routines. The benefits of the child and family establishing familiarity with the setting was further supported as positive practice by practitioners in terms of supporting transitions in other studies (Warren et al., 2016) where the familiarity this provided was linked with a greater sense of trust and feelings of belonging (Turunen, 2012). The importance of this, according to Little et al. (2016) is that it acknowledges transition is an ongoing process, involving the child’s wider ecosystems also.
Jovanovic (2011) noted that some parents and children engaged in a similar routine during the drop off to ELC, involving hanging up bags, or in a goodbye ritual such as waving the parent goodbye. This too can be seen to provide some form of familiarity (Ferretti et al., 2017) and is also encouraged in quality guidance (ACECQA, 2018). The benefits of a predictable routine have also been highlighted in relation to situations with stress (Ferretti et al., 2017) and in this way any stress associated with transitions may be buffered by familiarity of a routine also.

Collaboration

Jovanovic (2011) noted some of the ways in which parent-practitioner relationships were developed involved the informal exchange of information about the child at transition times. Information was usually ‘passed over’ to the person who was going to have the child in their care, from the person who had been with the child. On a similar vein, information sharing before a child started a setting involved the parent or carer and the practitioners being seen as beneficial from the perspective of the practitioners (Warren et al., 2016) with Little et al. (2016) specifying examples of this such as sending information home to parents. This is interesting as this describes the giving of information in a unilateral direction, rather than the sharing of information and may also hint at a power dynamic which is in favour of the practitioners, worth noting. The benefits of a collaborative approach to transitions were also captured by Turunen (2012), who highlighted the benefits in terms of supporting the parents own transitions associated with ELC. The same study highlighted the need to be aware of the power relations which can exist in these interactions, with the status largely considered to be held by the educator. Studies also included the importance of practitioner-parent/carer relationships when supporting the transitions to formal education from ELC, suggesting ELC practitioners can act as a ‘bridge’ (Puccioni et al., 2020). This itself implies a relationship between ELC practitioners and teachers in schools. Collaboration was a common theme and one that included collaboration with the child, family and wider professionals.

DISCUSSION

It could be suggested from the findings above that how care is enacted during ELC transitions is inextricably influenced by, linked to and arguably limited by the roles expected of ELC, as well as how care is defined and understood in ELC and transition practices. All areas have proven to be complex and messy, with overlaps both between and within the subcategories which have been constructed.

The findings suggested that a large aspect of the role of ELC is developing relationships, not only with the child but with their family or carers also. This is relevant then in understanding how care is enacted during ELC transitions, as the practitioners will be expected to support not only the child through transitions, but the child’s family also (Scottish Government, 2019). This creates complexity, as the needs and desires of the child and family may differ, resulting in a conflict emerging for the practitioner who attempts to support the transitions of both, while undoubtedly experiencing transitions of their own, as expressed in Jindal-Snape’s (2012, 2016) Multiple and Multi-dimensional Transitions theory. This notion of conflicting and competing priorities was also discussed in the findings and highlights a need to consider power relations which exist within these competing preferences (Aslanian, 2020). A further layer of complexity is then added when considering the care enacted during these transitions may be perceived differently depending on the understanding of care that is held. The discussion section will consider the different transition practices which were constructed from the literature review, situating these in relation to different understandings of care outlined in the findings and within the context of the wider role of ELC also discussed in the findings in order to gain a full understanding of how care is enacted during ELC transitions. The discussion section will highlight these key points from the findings of the literature review, as well as contextualising these in relation to wider literature, thus allowing implications to be drawn which will answer the main research question: “How is care enacted during ELC transitions?”
CONTINUITY

The idea of continuity in the findings was dynamic, applying to many scenarios and relevant when considering both the role of ELC and the understanding of care was highlighted as ever evolving and therefore not stable. Despite this, findings suggested ELC settings seek to ensure continuity where possible, with care, wellbeing and best practice as motivation (Scottish Government, 2020). However, in seeking to ensure there is continuity, findings highlighted artificial connections may be manufactured, rather than natural connections, arguably limiting care. For example, through the ‘key worker’ role. When considering the view of Aslanian (2017) in the findings section, that care encompasses all acts which contribute to flourishing, perhaps embracing the key worker role can be considered an act of care. However, when considering wider literature such as seminal writer Noddings’s (1992) definition, which requires an explicit expression of need from the cared for in order for an act of care to be legitimate, the exclusion from the child in the decision-making process around their partnership with a key worker is troublesome. This notion can also be buttressed when considering the UNCRC (UNICEF, 1989) which states that children have a right to have a say in matters which affect them. Clearly, the figure who will be the overarching responsibility and key figure during a child’s time in an ELC setting can be deemed a decision which will affect the child, yet usually pairings are decided at management level without child consultation (Jovanovic et al., 2016). This shines a light on the recurring issue of power dynamics then. Interestingly, concerns around unequal power balances were raised in the findings section, however this was in relation to the parents versus practitioners, rather than the children. This may resonate with notions of a ‘noisy silence’ expressed by Lofgren (2016) who reiterated the importance of heeding messages given by omission as well as expressed directly. It may be that the power imbalance between children and adults generally, including both parents and practitioners, is not discussed because it is a taken-for-granted norm (Thompson, 2016).

Added to this, even with the aforementioned concerns notwithstanding was the potential limitation identified in the findings which was that in some cases despite the key worker role being enacted in practice, some practitioners are unaware of their key children (Jovanovic et al., 2016). However, wider literature suggests this may be what is considered enacted professionalism, whereby practitioners recognise they must act within the limitations of the boundaries placed on them, however professional judgement is used to ensure the needs of the children are effectively met in practice (Evans, 2008). For example, in this instance, it may be that practitioners are embracing the natural connections with children rather than being limited by rigid lists of identified individuals; this may be associated with the more ‘natural’ definition of care found in the literature or ‘embodied’ care discussed in the findings. A potential limitation expressed in the findings was that of high staff turnover associated with ELC. When considering this point the role of key worker may actually put children at a disadvantage if they have only a bond with one key person who then leaves this position.

However, when considering care from the perspective of parents who according to the findings desired reassurance about continuity of care, then the key worker role would be considered as meeting an expressed need, by Noddings’s (1992) definition and when considering the role of ELC is to support parents also (Brooker, 2010), care is being enacted by practitioners for parents in response to an expressed need.

When considering the key worker role as motivated by care, yet potentially limited by bureaucratic processes which may be a consequence of the changing role of ELC which was identified in the earlier findings section, it could be argued care is being enacted to an extent by providing continuity through transition, depending on which definition of care is being prescribed to and depending on who the receiver of the care is considered to be.

Continuity of routine was also expressed within the findings as a means of supporting transition and has also been found to be effective in wider literature (O’Connor, 2018). The difficulties of considering both children and their parents as receivers of care however is realised again in this example. Often parents will wish for routines from home to be embraced within ELC, according to the findings. In fulfilling this desire, practitioners will indeed be meeting an expressed need, in according with Noddings’ (1992) definition, however the act of care will not be received by the parent, but by the child, who may be ambivalent to or in fact oppose the acts of care. For example, a young child engrossed in play may not wish for this to be stopped in order that a sleep
schedule is maintained. This again highlights the tensions and contradictions within which ELC practitioners must work. Similarly, questions of power again arise, such as at what age a child can be deemed capable of making an informed decision about their own care (Bjorkman et al., 2013) as well as issues of practicality around a setting which hopes to provide care for several children simultaneously and the realities of a need for some mandatory care check in points throughout the day as a baseline of care, from which individualised responsive care can be supplemented. In alternative conceptions of care, ensuring a child gets adequate rest would be considered an act of care, including definitions of ‘natural care’ or even potentially in Aslanian’s (2015) definition whereby care encompasses all things which lead to flourishing. However, when considering wider literature, it seems within Noddings’s (1992) definition, enforcing a routine of care on a child who has not expressed this as a desire may not be deemed care, even if the practitioner feels this is in the child’s best interest; as Noddings’s (1992) specifically states a need must be expressed, not assumed. As the findings suggest, however, there is a need for routines in ELC due to the many demands placed upon this profession which must not only care for children but ensure educational outcomes are also met. It could possibly be argued that care is enacted by ensuring a baseline of care is given through routine check-ins within the external limitations placed on ELC by some definitions of care therefore.

Continuity in terms of pedagogical approaches were also touched upon in the findings, and indeed this is a commonly cited feature of literature on transitions also (O’Connor, 2018). However, critically the wider literature which tends to feature this is focused on the transition into formal schooling, rather than the transitions to or within ELC. This demonstrates a tension then, as if continuities of pedagogy are considered in terms of ELC aligning with formal schooling, rather than formal schooling employing pedagogies associated with ELC then practices may quickly become not developmentally appropriate (Jovanovic, 2011). While some wider literature now calls for formal schooling to embrace play-based pedagogies which are more commonly aligned with ELC, the findings in this study have shown the perception is that ELC is becoming more educationally focussed (Aslanian, 2020). This debate is embroiled with the multifaceted role of ELC, the need to both care and educate, and buttressed by the consideration of the wider family’s expectations which may not align with the ELC’s approach or the children’s desires. A common theme is emerging when considering the different enactments of continuity in the context of providing care through transitions then and that is difficulties in considering the meaning of care when there are many, conflicting definitions, and these are compounded when considering the child and family are both considered ‘cared-fors’ (Noddings, 1992) within the role of ELC, who themselves may have differing desires as well as differing statuses when considering the power relations which exist. It may be considered that care is enacted if wider definitions of care are applied here then, such as the definition of care which suggests a ‘future-oriented gaze’ of the child (Winther-Lindqvist, 2020); as the practitioners’ actions foreshadow future events in order to minimize distress and maximise flourishing. However, this may be in contrast to Noddings’s (1992) understanding which places the cared for’s desires above an external person’s perceptions on what is best.

DEVELOPING PROTECTIVE FACTORS

The findings suggested that in supporting children to develop protective factors, transitions could be more smooth. This is supported in literature (Luthar, 2006) and can be considered in terms of internal protective factors such as self-esteem and external, such as support networks within ELC. The findings related person-centred planning with this development and again this is supported by wider literature (O’Brien, 2004) as this would allow practitioners to consider what protective factors children already have and which others may be facilitated. For example, consider a child in an ELC setting who will change rooms into an older age group. By allowing time for this transition to occur gradually, for example by letting the child and family visit the ‘new’ room for short times in iterations, the child is afforded the opportunity to become familiar with the setting and begin to develop friendships which can then act as a protective factor when they move rooms permanently. This again relates to the ‘future oriented’ definition of care (Winther-Lindqvist, 2020). By utilising person-centred planning, the child’s preferences can be expressed and used to inform this process, such as which friends they would like to play with or which interests they have that can be incorporated into the new room. Similarly, a main protective factor as identified in literature is that of wider family (Scottish Government,
By ensuring practitioners and the family have an open line of communication, and by providing opportunities for the family to be involved, transitions can also be eased as parties work collaboratively to support the child with their joint knowledge of the child. By embracing person-centred planning, there is value placed on the voice of the child which is in keeping with Noddings’ (1992) definition of care whereby the cared-for should express their needs in order for these to be met and again is supported by the UNCRC (UNICEF, 1989). When considering the wider definition of care, which embraces all things which allows the individual to flourish, then person centred planning certainly aligns. In this way, care is clearly enacted within these transition processes, in keeping with several definitions, by encouraging and embracing the child’s voice to shape the process.

FAMILIARITY AND BELONGING

Closely related to the above, practices which promote familiarity and belonging are seen to be positive in terms of supporting transitions, according to both the findings and wider literature (Miller et al., 2015). This again can be effectively developed when time is taken to make the transition a gradual process, however can also be supported by ensuring the child has a voice in shaping what the transition looks like (Jindal-Snape, 2016). In considering the voice of the child, care is enacted during ELC transitions by allowing for the opportunity for familiarity and belonging to develop over time and by allowing the opportunity to respond directly to an expressed need, in keeping with Noddings’s (1992) definition of care.

COLLABORATION

The findings highlighted the role of collaboration as key, including collaboration with children, families, wider community and other professional agencies. This again is supported in literature with Scottish Government (2020) discussing the importance of collaborating with the child in all aspects of ELC life, particularly during transitions – the links to Noddings’s definition of care have been discussed above. Similarly, the need to collaborate with parents as ‘cared fors’ during transition has been highlighted in terms of supporting them through their own transition as parents of nursery children, as well as being critical in terms of ensuring a joint vision which will minimise potential conflicts. This has been explored further in wider literature. For example, one paper discussed the motivation of the parents of children with English as an Additional language choosing an ELC setting with a different micro and macroculture than their own with the intention of supporting their child to learn English and therefore have greater opportunity of integrating into the English-speaking dominant macro-culture (De Gioia, 2013). However, the paper also highlighted this was not expressed to practitioners, who in aiming to achieve continuity may in fact focus on the use of the child’s home language during transition processes. Thus highlighting the importance of acting on an expressed need, rather than assumed need, in accordance with Noddings’s definition.

When considering the many definitions of care, there are many examples of care within transition practices in ELC both in terms of care for the children and care for their families. However, some definitions of care which have specific parameters, such as Noddings’s (1992) definition, do highlight some potential issues with the care enacted at times. Specifically, the lack of genuine consideration of the cared for’s voice in some transition practices. This is possibly compounded for the child, as the child’s voice may be channelled through the parent or in fact rejected in favour of the parents’ voices. In spite of this, there has been evidence of caring transition practices permeating this discussion, despite complexities associated with such a multifaceted role.

CONCLUSION

A narrative which was constructed was that of tension between education and care (Aslanian, 2015) which can be seen to be associated with the worldview that the mind and body are separate (Descarte, 1641) and which risks impacting the care enacted during transitions. When considering ELC in this way, even the order of the words suggests the greatest importance is on education, with titles around the world featuring ‘education’ before care, such as Scottish Government’s (2020) Early Learning and Childcare; Australia’s Early Childhood Education and Care (Australian Institute of Health and Welfare, 2020); a title shared by the likes of Sweden
According to Thompson (2016) language encapsulates societal beliefs and this common theme in these titles expresses a message. However, when considering ELC from the stance that the mind and body are entwined (Merleau-Ponty, 1945), the separation becomes less important as a holistic approach is required. Despite this, the standardisation and accountability associated with ELC settings may limit the reality of a holistic approach as care cannot be easily quantified and the focus of transitions may therefore begin to lean towards educational outcomes as a marker of success. However, despite the pressures on care due to the changing role of ELC, there are many examples of how care is enacted during ELC transitions both in relation to the child and the family. For example, person centred planning provides authority to the voice of the child in decisions which affect them, aligning with Noddings’s (1992) definition of care; the emphasis on collaboration allows families a sense of belonging in the transition process and provides an open channel of communication whereby their needs can be met, alongside providing information which can be used to further support the care of the child. While there are limitations, it is clear that despite the shrinking recognition for care found in ELC policy documentation globally, care remains central to provision and in supporting transitions within and throughout ELC and should be recognised as such in ways similar to other caring professions such as nursing.

**ADDITIONAL FILES**

The additional files for this article can be found as follows:

- **Appendix 1.** Search terms and results. DOI: https://doi.org/10.5334/ijelt.56.s1
- **Appendix 2.** Review by abstract systematic literature review literature for study. DOI: https://doi.org/10.5334/ijelt.56.s2
- **Appendix 3.** Full review literature for study. DOI: https://doi.org/10.5334/ijelt.56.s3
- **Appendix 4.** Final Literature to be Included in Review. DOI: https://doi.org/10.5334/ijelt.56.s4
- **Appendix 5.** Snowball search potential literature to be included. DOI: https://doi.org/10.5334/ijelt.56.s5
- **Appendix 6.** Snowball search literature following abstract review. DOI: https://doi.org/10.5334/ijelt.56.s6
- **Appendix 7.** Snowball search literature to be included following full review. DOI: https://doi.org/10.5334/ijelt.56.s7
- **Appendix 8.** All literature to be included in review. DOI: https://doi.org/10.5334/ijelt.56.s8

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