

## **Pilot Project Research Report:**

## Kids Collab Physical Development and Wellbeing School Programme

September 2024

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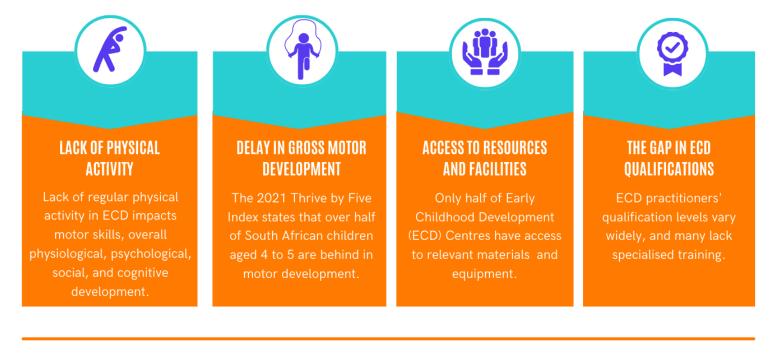
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## KIDS COLL&B activating bodies and space

## **PHYSICAL DEVELOPMENT & WELLBEING PROGRAMME**

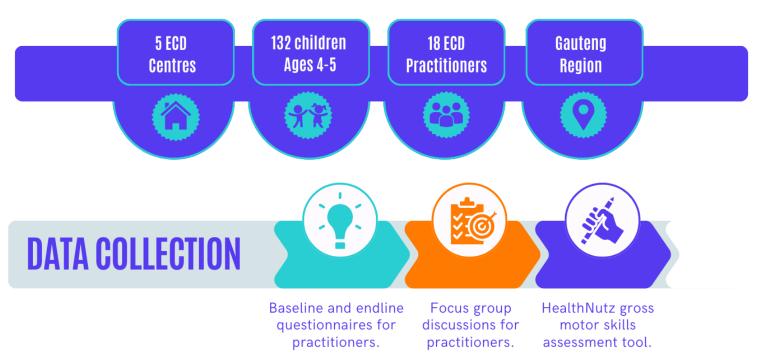
**Executive Summary** 

# THE PROBLEM



# THE PILOT

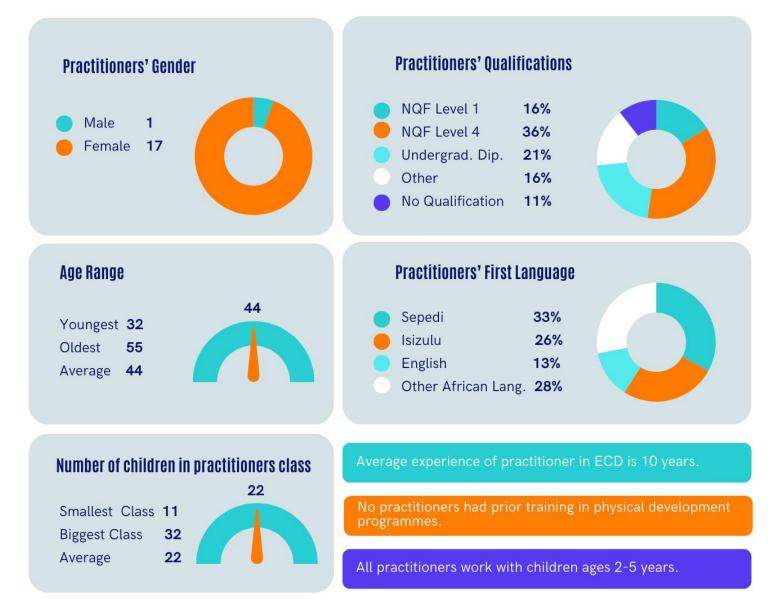
The Kids Collab Physical Development and Wellbeing Programme pilot, in collaboration with the Gauteng Department of Education (GDE), aimed to equip ECD practitioners with the skills to integrate physical activity (PA) and social-emotional learning (SEL) into daily routines. The primary goal was to enhance children's gross motor skills while supporting their social, cognitive, and emotional growth.



## KIDS COLLAB activating bodies and space



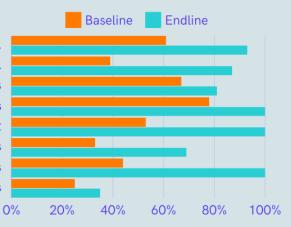
# **PARTICIPANTS**



# **SUCCESSES**

## **Practitioner's Increased Confidence**

Introducing 2–5-Min. Movement Act. Introducing Breathing and Calming Act. Teaching New Movement Skills Assessing Movement Skills Teaching Fun Games Involving Movement Identifying Common Errors Assisting Children with Common Mistakes Introducing Neurodiverse adaptions





On average practitioners confidence increased by 31% in introducing movement activities and breathing exercises, teaching new movement skills, assessing movement skills, identifying and correcting movement errors, and working with neurodiverse children.

## Practitioners feel supported by their ECD Centre



% of Practioners who feel supported by their centre to include SEL and PA in the school day.

## Improved Engagement in PA and SEL Activities

**1**34%**1**17%

Increase in daily engagement in unstructured play.



Increase in daily engagement in breathing activities. Increase in daily engagement in structured play.

34%

Increase in daily engagement in short movement sessions.





of practitioners believe PA is just as important as reading, writing, and numeracy.

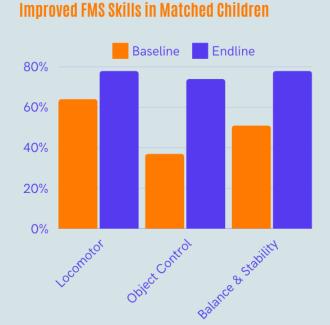


of practitioners believe PA can positively impact school performance. of practitioners believe SEL is just as important as reading, writing, and numeracy.



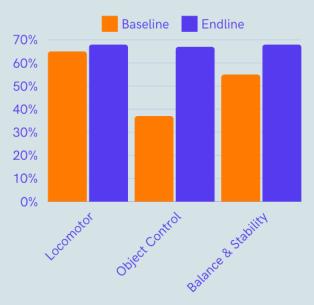
of practitioners believe PA can positively impact school performance.

## **SUCCESSES**



The matched group refers to 39 out of the 132 children, aged 4-5, were assessed at both baseline and endline to evaluate the pilot project's impact on their motor skills.

## Improved FMS Skills in Overall Group of Children



The overall group refers to the 132 children, aged 4-5, who were assessed at baseline and the 132 children, aged 4-5 assessed at endline.

## High Programme Satisfaction



All 16 practitioners who participated in the endline focus group session rated the programme between 8 and 10 out of 10. "We want to continue this programme; it gives us new knowledge and helps us with our teaching. We've seen real improvement..."



"The children are more relaxed after they do the physical activities, and we can see how much they benefit from the breathing and balancing exercises."

"We believe that these activities help a lot with some of the classroom skills."

## **Improved Holistic Development**



Academic Skills: Crossing the midline activities helped improve the childrens' reading and writing.



Creativity and Play: Children showed creativity by inventing new ways to play.



Teamwork and Communication: Teamwork activities enhanced social interaction and communication.



Active Learning and Engagement: Play-based learning was more engaging than passive methods, leading to higher participation levels.



Social Behaviour: Improved classroom behaviour with increased attention and better rulefollowing.



# **CHALLENGES FACED**

Scheduling conflicts hindered the integration of Kids Collab activities into daily routines.

English training materials were challenging for some practitioners, as it wasn't their first language.

Weather, space, and equipment shortages limited activity execution.

Some practitioners faced physical limitations, making it challenging for them to demonstrate activities.

Project team presence during M&E

may have hindered open feedback

inconsistencies in sample size.

Delays in the pilot caused

from participants.

Practitioners have limited knowledge and confidence on the topic of neurodiversity.

Practitioners had limited access to WhatsApp, hindering the full use of the support platform.

# **MOVING FORWARD**

**A** 

Assign a "Kids Collab Champion" at each ECD centre.



Expand content on neurodiversity, including identification and support strategies.





Supply more equipment like balls, skipping ropes, and balance beams, with a focus on durable materials.



Provide further support in the form of additional training, videos, and age specific adaptations via WhatsApp.



Translate handbooks and questionnaires into local languages to reduce language barriers and to improve understanding.

## Acronyms

ECD	Early Childhood Development
ECDC	Early Childhood Development Centres
DBE	Department of Basic Education
DSD	Department of Social Development
FMS	Fundamental Movement Skills
GDE	Gauteng Department of Education
MOU	Memorandum of Understanding
NCF	National Curriculum Framework
PA	Physical Activity
SEL	Social and Emotional Learning

## Introduction

Early childhood is a crucial period for a child's overall development, laying the foundation for future learning success (Department of Social Development, 2015; Smit et al., 2021). In South Africa, this period typically encompasses children from birth to age five, until they enter formal schooling in Grade RR or R (Department of Basic Education, 2009). During these formative years, various aspects of a child's development—cognitive, emotional, social, physical, and moral—are deeply interconnected and significantly influenced (Department of Basic Education, 2009; Department of Social Development, 2015; Lu & Montague, 2016). Among these areas, the development of motor skills is particularly critical. The timely attainment of gross motor milestones, such as crawling, walking, and running, enables children to interact with and learn from their environment, forming a vital part of their physical and cognitive growth (Gerber, Wilks, & Erdie-Lalena, 2010). These milestones are the building blocks for developing balance, coordination, speed, and strength (Goodway, Ozmun, & Gallahue, 2019; Hulteen et al., 2018). Moreover, regular Physical Activity (PA) during early childhood not only enhances motor skill development but also contributes positively to physiological, psychological, social, and cognitive domains (Brouwer, Stolk, & Corpeleijn, 2019; Carson et al., 2017).

Despite South Africa's 24-hour movement guidelines (Draper et al., 2020) for children from birth to five years studies indicate low levels of PA among children in Early Childhood Development Centres (ECDC) (Martniuk & Tucker, 2014), with children aged 3-6 often spending up to 70% of their preschool day sitting (Reilly & Tremblay, 2021). Additionally, the 2021 Thrive by Five Index reported that more than half of South African children aged four to five are below par in their motor development (Giese et al., 2022). These patterns can lead to significant health issues like obesity, diabetes, and cardiovascular diseases later in life, underscoring the importance of promoting active lifestyles in early childhood.

ECDCs and their practitioners play a critical role in fostering young children's growth, development, and future success. The Department of Basic Education (DBE) has assumed responsibility for ECDCs from the Department of Social Development (DSD), a transition aimed at aligning with global trends where early learning is led and coordinated by national ministries of education. This shift underscores the importance of early learning and the need for enhanced educational support and resources for Early Childhood Development (ECD) practitioners (ECDFunctionShift 2021). However, significant disparities in resources and opportunities for PA exist in South African ECDCs. Only about half of the centres have access to materials typically used for movement activities, and many lack adequate outdoor play areas and equipment (Department of Basic Education, 2022). Additionally, the qualification levels of ECD practitioners vary widely, with many lacking specialised training (Smit et al., 2021). This highlights the need for targeted interventions and professional development to enhance the effectiveness of ECDCs in promoting early childhood development.

### **Overview of the Kids Collab Physical Development and Wellbeing Programme**

In response to these challenges, Kids Collab developed a Physical Development and Wellbeing Programme with a core focus on empowering practitioners to integrate PA and Social and Emotional Learning (SEL)<sup>1</sup> into a typical early year's education school structure. The programme provides practitioners with the necessary training, knowledge, and resources to stimulate children's physical development and well-being while aligning with the South African National Curriculum Framework (NCF).

<sup>&</sup>lt;sup>1</sup> Incorporating social and emotional learning (SEL) in early childhood development centres is crucial as it equips children with essential skills for managing emotions, developing empathy, and fostering positive social interactions. Early exposure to SEL enhances self-regulation, resilience, and overall well-being, laying a strong foundation for future academic and personal success (Jones et al, 2017).

The Kids Collab Programme is designed to equip practitioners with practical tools and ongoing support. The programme focuses on the following key areas:

- Gross Motor Development: Helping practitioners understand and introduce Fundamental Movement Skills (FMS) and SEL through engaging in age-appropriate games and activities.
- Brain Breaks: Assisting practitioners to incorporate short 2–5-minute activities that help energise, calm, and focus children.
- Breathing and Mindfulness: Supporting practitioners to introduce SEL strategies that promote calming techniques and self-regulation.
- Inclusivity: Providing inclusivity handbooks designed to support children who may be neurodiverse.<sup>2</sup>

As part of the Kids Collab Programme, schools are provided with the following resources:

- Kids Collab handbooks with activities focused on gross motor development, mindfulness and brain breaks.
- Inclusivity handbooks which provide step-by-step picture instructions for children with neurodiversity or learning difficulties.
- An equipment bag with the following items:
  - 20 hula hoops
  - 10 large balls
  - 56 small cones
  - 24 bean bags
  - 100 small balls
  - 1 agility ladder
  - 20 sports tags
  - 8 hurdles
  - 2 ropes
  - 1 parachute
  - 1 equipment bag
  - 1 box of chalk

The programme includes a comprehensive 3–4-hour interactive training session specifically designed for practitioners working with children aged 2-5 years. During the training, the Kids Collab instructor showcases the available equipment and classroom resources, to explain how these tools fit into the programme and how they can be utilised across various activities. The training covers the correct techniques for performing each FMS, tailored to different age groups, and effective teaching strategies and adaptations based on the age group, including how to progress as children develop. Additionally, practitioners learn how to identify common errors and use the provided tools to address and correct these issues.

In addition, a detailed review of both handbooks, a general handbook and an inclusivity handbook, is provided. The handbooks include age-appropriate activities and exercises to enhance gross motor development, as well as strategies for incorporating brain breaks and mindfulness practices into a school day. All the activities are based on the NCF outcomes and include age-specific variations. An overview of the inclusivity handbook focuses on how it can be used to implement activities and its considerations for neurodiverse children. As part of the training session practitioners are encouraged to actively participate in the demonstrated activities which allows them to have a hands-on experience

<sup>&</sup>lt;sup>2</sup> The term "neurodivergent" refers to individuals whose neurological development and functioning deviate from what is considered typical or "neurotypical." This concept suggests that variations in brain functioning are natural and normal and can sometimes lead to unique strengths and abilities. Neurodivergent individuals may have conditions such as autism, ADHD, dyslexia, and others, which influence how they think, learn, and interact with the world (Verywell Mind. (n.d.)).

with the programme. The training concludes with a question-and-answer session. In addition, the practitioner's contact information is obtained to establish WhatsApp support groups, ensuring that Kids Collab can provide ongoing assistance and communication throughout programme implementation.

WhatsApp support groups are set up once training is completed with each ECDC having its own group and all the trained practitioners added. Each week, the group receives a programme reminder with an example of an activity from the handbook that they can complete during the week. Kids Collab encourages practitioners to send feedback and share images or videos of their children engaging in the activities. These WhatsApp groups also ensure practitioners can seek guidance, share experiences, and regularly access resources. This model aims to foster practitioners' autonomy and confidence in integrating PA and SEL into their existing curricula.

The objective is for the training and resources to empower and enable practitioners to confidently integrate PA and SEL strategies into their respective ECDCs. This, in turn, will positively impact children by engaging them in activities that promote both physical and socio-emotional development. The goal is not only to build essential motor skills in children but also to cultivate crucial social and emotional competencies necessary for lifelong learning and well-being.

## Piloting the Kids Collab Physical Development and Wellbeing Programme

To evaluate the viability of the Kids Collab Physical Development and Wellbeing Programme, a pilot programme was implemented between October 2023 and May 2024. Kids Collab partnered with the Gauteng Department of Education (GDE) to pilot this programme in five low-resourced ECDCs in the Gauteng region. The primary aims of the pilot were as follows:

- 1) Enhance Practitioners' Confidence in Delivering PA and SEL Practices to boost ECD practitioners' confidence in incorporating PA and SEL into their daily routines.
- 2) Encourage Continuous Engagement in PA and SEL Activities to see ECD practitioners consistently engage in activities focused on PA and SEL, integrating these practices into their daily teaching methods.
- 3) Integrate PA and SEL into the GDE's ECD Programme to embed PA and SEL activities as fundamental components of the GDE's Early Childhood Development programme, ensuring a holistic approach to child development.
- 4) Improve Practitioners' Attitudes and Awareness to enhance practitioners' attitudes towards and awareness of the importance of PA and SEL, fostering a positive outlook on the benefits of these practices for children's development.
- 5) Improve Children's Gross Motor Development and Fundamental Movement Skills to enhance children's gross motor development and fundamental movement skills through consistent exposure to and participation in PA and SEL activities, contributing to their overall physical and emotional well-being.

The pilot sought to determine whether the Kids Collab programme could be effectively used as a resource by practitioners once they were trained. Specifically, it aimed to boost practitioners' ability to integrate PA and SEL practices throughout the school day and to assess whether the programme would improve children's FMS through increased exposure.

The GDE selected five ECDCs in the Gauteng urban townships of Zandspruit, Cosmo City, and Diepsloot. These centres are all in low socio-economic areas, providing a valuable sample to understand how the Kids Collab Programme can operate in resource-scarce environments. The GDE

was instrumental in selecting and facilitating access to the centres at the start of the pilot, as well as in communicating important information to the ECDCs.

Eighteen practitioners across the five centres participated in the Kids Collab training, with 3-4 practitioners taking part from each centre. The training sessions were conducted on-site at each centre on separate days, scheduled in the afternoons after the children had gone home. Each session lasted 3-4 hours, providing an in-depth, interactive experience for the practitioners.

In addition to this training, each ECDC received four Kids Collab Activity Handbooks, four Kids Collab Inclusivity Handbooks, and one equipment bag with all the resources required to carry out the programme. The intention was to provide each practitioner with their own handbooks and for the equipment bag to be shared among the practitioners at each ECDC.

The trained practitioners were expected to carry out daily and weekly Kids Collab activities as part of the programme. These activities were designed to be seamlessly integrated into the daily schedule of each ECDC, promoting physical and social-emotional development among the children.

WhatsApp groups were established for each ECDC to support practitioners in implementing the Kids Collab programme and to gauge engagement in the Kids Collab activities. Each week, Kids Collab would send out a reminder to practitioners that included an "Activity of the Week," featuring an activity sheet with instructions and images. These activities, extracted from the handbooks provided to the practitioners, were shared via WhatsApp to ensure quick, easy access and to offer encouragement. These groups also allowed Kids Collab to monitor practitioner participation by tracking responses to activity reminders, which could be indicated through text or emoji reactions. Additionally, practitioners were encouraged to share photos and videos of their children engaging in the programme, providing valuable visual feedback.

The WhatsApp groups also served as a direct communication channel with educators, eliminating the need to coordinate through the GDE for scheduling site visits and other logistical matters. This direct line of communication ensured timely and efficient interactions. Furthermore, the groups provided a platform for practitioners to ask questions and seek clarification on activities, facilitating continuous support and guidance from the Kids Collab team.

Two site visits were conducted per centre by Kids Collab, both mid-pilot and at the endline, to provide support where needed and to monitor and evaluate the programme.

## Methodology

To assess the effectiveness and scalability of the Kids Collab Programme, pre- and post-evaluations were conducted using both quantitative and qualitative methodologies. This included baseline and endline questionnaires administered to practitioners, baseline and endline assessments of gross motor skills in learners as well as mid- and endline focus group discussions with practitioners. Additionally, the WhatsApp groups were used to track engagement and feedback from the practitioners throughout the pilot.

The following data was collected:

#### **Baseline / Endline Questionnaires**

The baseline and endline questionnaires were designed to assess and understand the interactions, attitudes, confidence, behaviours, and barriers faced by practitioners in implementing PA and SEL strategies during the school day. The baseline assessment was carried out by a Kids Collab healthcare

practitioner, whereas the endline questionnaire was administered by an external facilitator. The involvement of an external facilitator was intended to encourage ECD practitioners to be more open and provide honest feedback about their experiences and perceptions.

Baseline questionnaires were administered in October 2023 before pilot implementation and endline questionnaires were administered in June 2024 after the pilot project was concluded. All practitioners at the five ECDCs who had children aged 2-5 years under their care were asked to complete the questionnaires, resulting in 18 participants for the baseline and 16 participants for the endline. The same ECD practitioners participated in both the baseline and endline assessments, except for two who were not present at the endline assessment as they were attending another training course at that time.

### **Focus Group discussions**

Five focus group discussions, one at each site, were conducted in English at both the midline and endline stages of the study. The focus group discussions gathered feedback from the practitioners regarding:

- User-friendliness of the programme;
- Uptake and usage of the programme;
- Practitioner's experiences and feedback; and
- Setbacks and stumbling blocks faced.

The discussions included a total of 18 participating ECD practitioners at the midline and 16 practitioners at the endline across the five centres. The participants were consistent across both stages, except for the two individuals who were not present for the endline focus group. The midline focus group was facilitated by an internal Kids Collab healthcare professional, while an external facilitator led the endline focus groups. The use of an external facilitator at the endline stage aimed to create a comfortable environment for practitioners, encouraging them to openly share their thoughts about the programme.

#### **Gross Motor Skills Assessment**

The gross motor skills assessment test used was based on the Healthnutz<sup>3</sup> assessment tool, validated for assessing gross motor functions in children aged 3-10. The assessment consisted of twelve tests conducted in a group format using an obstacle course layout, designed to minimise anxiety and create a fun and engaging environment for the children. The primary objective of this assessment was to evaluate the children's gross motor skills in the areas of locomotion, object control, and balance abilities. This assessment aimed not only to provide insights into the children's motor skill development relative to their age but also to assess the impact of the Kids Collab Programme on enhancing these skills. A key focus was also to identify potential areas for improvement, helping to inform future programme modifications and enhancements.

The Kids Collab programme focuses on children aged 2-5 years; however, the Gross Motor testing specifically targeted children aged 4-5 years in this pilot, in alignment with GDE requirements, to ensure the programme assessed school readiness. In total, 121 children were assessed on their gross motor skills at baseline, and at endline 132 children were assessed. Of these, only 39 children participated in both assessments. This discrepancy posed a limitation to the study, as the pilot programme was initially intended to start in August and run through December, with the same children assessed at baseline and endline. However, due to delays in securing the signed Memorandum of Understanding (MOU) between Kids Collab and the GDE, the programme

<sup>&</sup>lt;sup>3</sup> Healthnutz is an observational testing tool used to record the Physical Activity in Children. It has been adapted from an existing tool called TGMD-2. The TGMD-2 is a proven highly reliable and appropriate assessment tool for assessing gross motor skill development of children aged 3-10 years old.

commenced in October 2023, resulting in the endline assessment being conducted in June of 2024. This timing meant that the majority of the children initially assessed had left their respective ECDC by the time the endline evaluation took place.

## **Findings**

## Participant background information

Of the 18 participants in the pilot, most (17) were female. Practitioners held diverse qualifications: 17% held an NQF Level 1 qualification, 38% attained NQF Level 4, 22% had an undergraduate diploma, 17% had other qualifications, (including NQF Level 5 certifications), and 11% reported that they had no formal qualification.

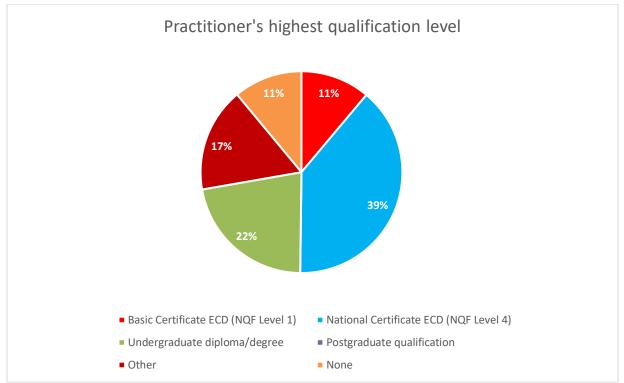


Figure 1 ECD Practitioner Qualifications (n=18)

The average age of practitioners was 44, with the youngest being 32 and the oldest 55. On average, they had ten years of experience working in ECDCs, with the longest-serving practitioner having 30 years of experience. Their first languages varied, with Sepedi being the most common (33%), followed by isiZulu (26%), English (13%), IsiXhosa, Tshivenda, Sesotho, and Setswana (7% each). In addition, 73% of practitioners spoke English as a second language, while 20% spoke Setswana and 7% Zulu. Notably, none of the practitioners had previously received any formal training in physical development programmes, making this their first exposure to such a structured approach.

Practitioners managed class sizes ranging from 11 to 32 children, with an average of 22 children per class. The children under their care were aged 2 to 5 years, with eight practitioners specifically educating the 4–5-year age group.

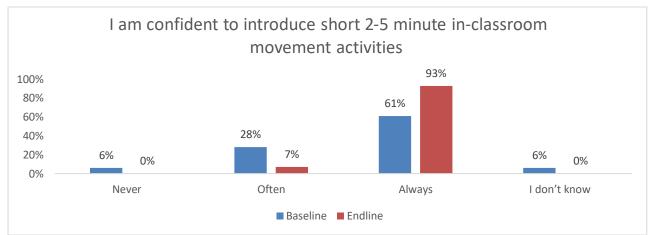
As highlighted above, 121 children were assessed on their gross motor skills at baseline, and 132 children were assessed at endline. Of these, only 39 children participated in both assessments. All

assessed children were 4-5 years of age, based on GDE requirements to assess children who were preparing for school readiness.

## Enhancing practitioners' confidence in delivering PA and SEL practices

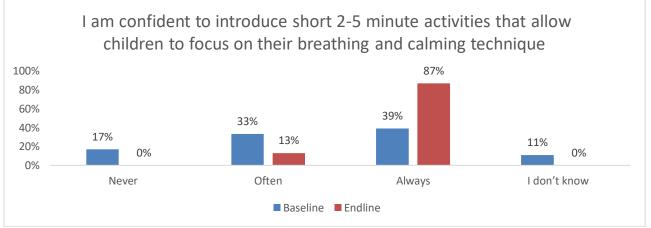
A key aim of the pilot was to boost ECD practitioners' confidence in incorporating PA and SEL into their daily routines. Thus, a large focus of the questionnaires was on whether there were any reported changes in practitioners' confidence at baseline compared to endline.

Practitioners were asked to rate their confidence in implementing several activities related to PA and SEL. The results show that practitioners' confidence in introducing 2–5-minute movement activities improved, with 61% always feeling confident at baseline compared to 93% at the endline.



*Figure 2 Confidence in introducing movement activities (n=18 baseline and n=16 endline)* 

Similarly, in terms of introducing breathing activities, only 39% of practitioners always felt confident at baseline, which improved to 87% at the endline.



*Figure 3 Confidence in introducing breathing and calming activities (n=18 baseline and n=16 endline)* 

When looking at PA and confidence around FMS, practitioners' confidence also changed. At baseline, 67% of practitioners believed they were always confident in teaching a new movement skill, compared to 81% at endline. Their confidence in assessing movement skills also improved, with 78% of practitioners always feeling confident at baseline, rising to 100% at the endline.

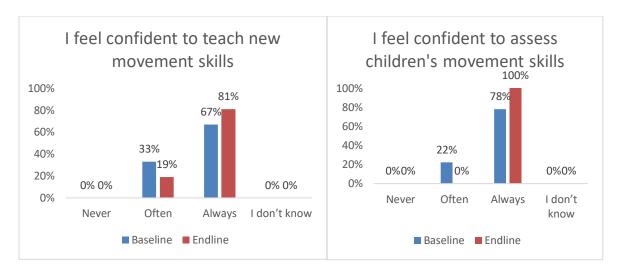


Figure 4 Confidence in teaching new movement skills (n=18 baseline and n=16 endline)

Figure 5 Confidence in assessing children's movement skills (n=18 baseline and n=16 endline)

Practitioner's confidence to teach a new fun game that focuses on movement (object control, balance, and locomotor skills), also increased from 53% of practitioners always feeling confident at baseline to 100% at the endline.

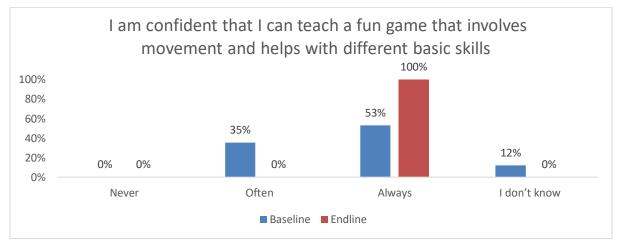
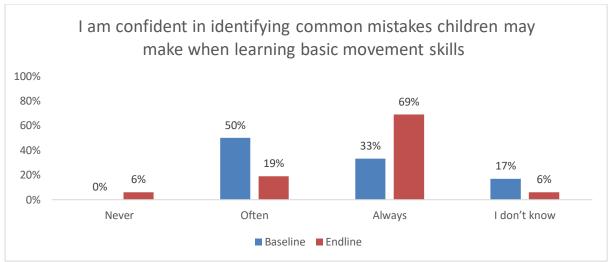


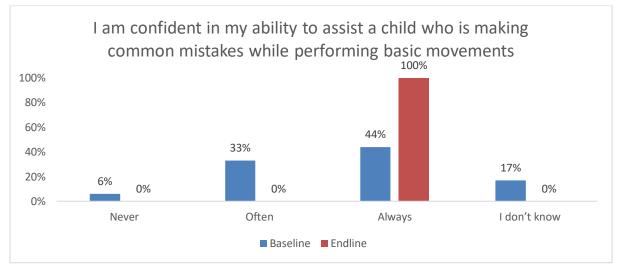
Figure 6 Confidence in teaching a fun game that involves movement and helps with different basic skills (n=18 baseline and n=16 endline)

Although there was an increase in confidence among practitioners, one area that could benefit from additional focus is practitioners' ability to identify common errors. At baseline, only 33% of practitioners always felt confident in identifying common errors, which increased to 69% at the endline.



*Figure 7 Confidence identifying common mistakes (n=18 baseline and n=16 endline)* 

A positive finding is that once common errors are identified, all participating practitioners reported that they feel confident in their ability to assist a child in correcting mistakes in gross motor skills, with only 44% of practitioners always feeling confident at baseline to 100% of the practitioners feeling confident at endline.



*Figure 8 Confidence in assisting children who are making common mistakes (n=18 baseline and n=16 endline)* 

With regards to introducing SEL and PA activities for neurodiverse children, whilst there was an increase in confidence levels, it is evident that practitioners still lack confidence in this area. At baseline, only 22% of practitioners were always confident in introducing breathing activities and brain breaks for neurodiverse children, with this figure increasing to just 38% at endline.

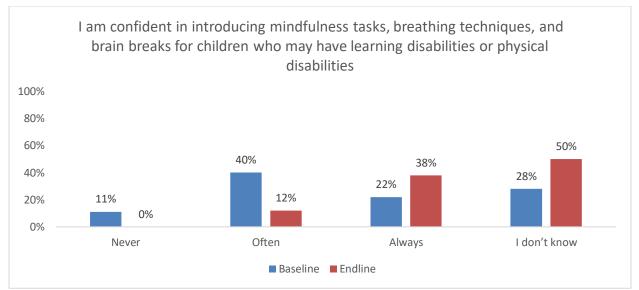


Figure 9 Confidence in introducing mindfulness tasks, breathing techniques, and brain breaks for children who may have learning disabilities or physical disabilities (n=18 baseline and n=16 endline)

Similarly, 28% of practitioners were always confident in introducing PA to neurodiverse children at baseline, rising marginally to 31% at endline. However, 50% of practitioners reported being uncertain about their confidence to introduce PA and SEL practices to neurodiverse children, an increase from the baseline where only 28% of practitioners expressed similar uncertainty. This shift may reflect gaps in their knowledge on the topic of neurodiversity.

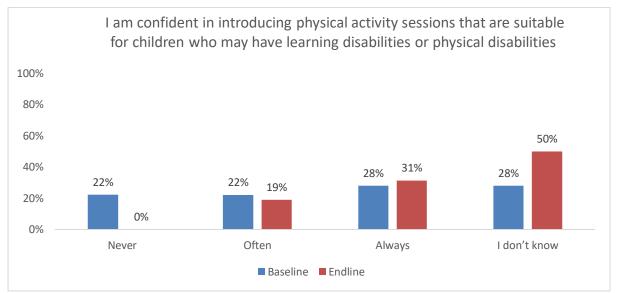


Figure 10 Confidence in introducing physical activity sessions suitable for children who may have learning disabilities or physical disabilities (n=18 baseline and n=16 endline)

This gap in knowledge was also reflected in the focus group sessions, where practitioners mentioned that they had not identified any neurodiverse children in their classes. However, during both gross motor assessments (pre and post pilot), the Kids Collab healthcare professional observed several children displaying signs of neurodiversity. When the healthcare professional asked one practitioner about a child who could be identified as neurodiverse, she remarked, "Shame, his brain is just tired, he must sit down," while another practitioner suggested not including one of the children in the gross motor testing because "he just doesn't understand." These remarks emphasise the gap in knowledge among practitioners regarding neurodiversity.

These findings indicate that while there has been a slight improvement in confidence levels on the topic of neurodiversity, there remains a significant need for additional training and resources to support practitioners in identifying neurodiverse children as well as confidently implementing SEL and PA activities for neurodiverse children.

## **Engagement in PA and SEL Activities**

A key aim of the pilot was to assess whether ECD practitioners consistently engage in activities focused on PA and SEL and integrate these practices into their daily teaching methods. The research thus considered whether the frequency of introducing PA and SEL activities into the school day increased after practitioners received training and resources

Self-reported data from the baseline and endline questionnaires revealed an increase in the frequency of both structured and unstructured active play (see Figures 11 and 12 below). At endline, 56% of practitioners reported introducing unstructured play once or twice a day, compared to only 22% at baseline. Similarly, 50% of practitioners reported incorporating structured active play at least once a day at endline, up from 33% at baseline.

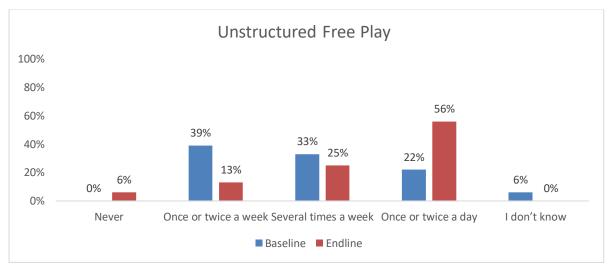


Figure 11 Frequency of introducing unstructured free play (n=18 baseline and n=16 endline)

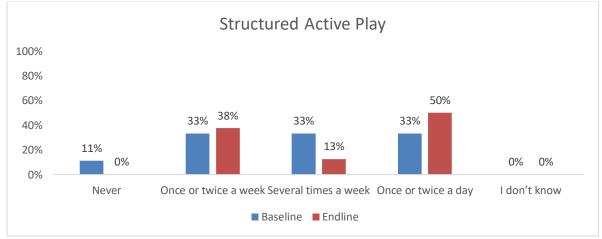
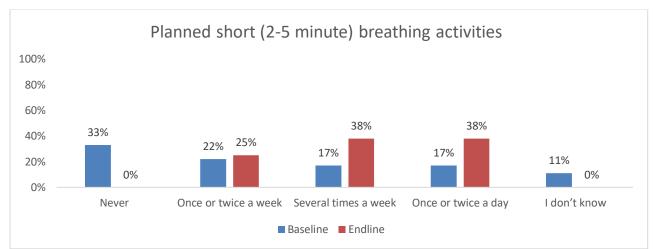


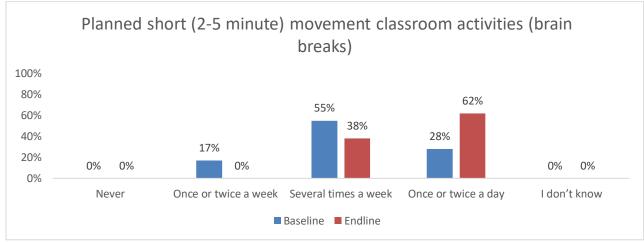
Figure 12 Frequency of introducing structured active play (n=18 baseline and n=16 endline)

The questionnaires also considered the frequency of introducing specific activities: breathing activities and short movement activities (also referred to as brain breaks). The findings from the questionnaires also reveal an increase in these activities: at endline, 38% of practitioners reported introducing

breathing activities several times a week, compared to 17% at baseline. Additionally, 38% of practitioners introduced breathing activities once or twice a day at endline, up from 17% at baseline. It is also important to note that no practitioners reported never introducing breathing activities since starting the programme, an improvement from the 33% of practitioners at baseline who said they never implemented breathing activities. (see Figure 13 below)



*Figure 13 Frequency of introducing breathing activities (n=18 baseline and n=16 endline)* 



With regards to short movement activities, at endline, 62% of practitioners reported incorporating these sessions once or twice a day, compared to 28% at baseline (see figure 14).

Figure 14 Frequency of introducing short movement activities (n=18 baseline and n=16 endline)

Two Practitioners at two ECDCs shared - via the WhatsApp support group- images and videos of children engaging in structured play and breathing exercises.

The baseline and endline questionnaires included questions on whether practitioners have sufficient activities and programmes to include SEL activities into the school day. At baseline, 50% of practitioners believed they had sufficient SEL activities, and this increased to 63% after the introduction of the Kids Collab Programme (see figure 15).

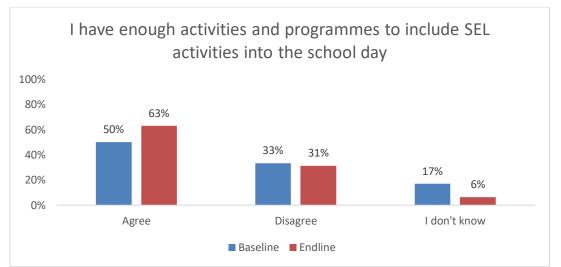
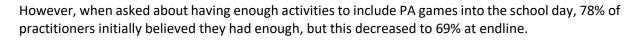
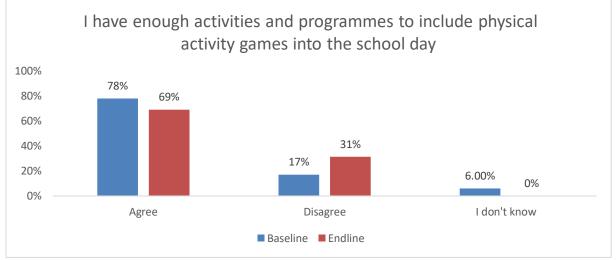


Figure 15 Adequacy of activities and programmes for including SEL activities during the school day (n=18 baseline and n=16 endline)





*Figure 16 Adequacy of activities and programmes for including physical activity during the school day (n=18 baseline and n=16 endline)* 

This decline could be attributed to practitioners recognising a need for more diverse activities after implementing the programme. One practitioner in the focus groups expressed, "We love the activities and wish we could have more." This sentiment was echoed by practitioners at two other ECDCs, with practitioners requesting additional training to learn more games and activities.

During focus group discussions, practitioners highlighted challenges in adapting activities for different age groups, emphasising the need for more guidance on tailoring activities appropriately. They suggested that WhatsApp activity reminders could be more effective if they included specific activities for each age group rather than general activities that require adaptation. Although the handbooks focus on various age groups and provide adaptations for different difficulty levels, enhancing this aspect in training sessions could better equip practitioners to adapt games themselves according to the type of activities they are doing.

## Integrating PA and SEL into the daily ECD programme

Four out of the five ECDCs reported incorporating Kids Collab activities on a daily basis. Practitioners at two ECDCs emphasised that the programme has become a structured part of their daily routine, with 45 minutes allocated each day to the Kids Collab activities. One of these centres also organised a PA outing at a nearby field every two weeks, allowing children to engage in a full hour of physical activities using the programme's resources. Practitioners noted that this approach helped manage space and resources more effectively, ensuring that all children could fully participate in the programme's activities.

Another ECDC included the programme in their daily morning routine, while another integrated it into their outdoor play sessions. However, some minor challenges were reported; for instance, one ECDC occasionally struggled to conduct the programme outdoors when it was hot and opted to do certain activities indoors instead.

One out of the five ECDCs reported that they didn't always manage to include the Kids Collab activities daily. While they "sometimes" included them in their morning session, they faced frequent disruptions from visitors, which prevented them from consistently introducing the activities.

During focus group sessions, it was noted that none of the practitioners reported using the Kids Collab activities regularly as short interventions between their usual lessons. This presents an opportunity for future training to emphasise how practitioners can integrate Kids Collab activities more effectively throughout the school day. While the majority of ECDCs incorporate Kids Collab activities daily, there is room for improvement in helping practitioners better schedule these sessions and seamlessly integrate them into their regular school routines.

The graphs below demonstrate that the majority of the practitioners believe they have enough time to include both SEL and PA activities in the school day. At endline, 81% of practitioners reported having sufficient time for PA activities, while 88% felt they had enough time to incorporate SEL activities.

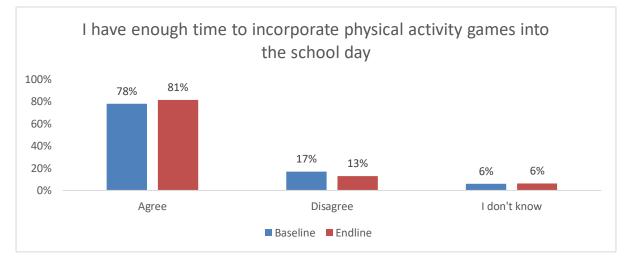


Figure 17 Availability of time for integrating physical activity games during the school day (n=18 baseline and n=16 endline)

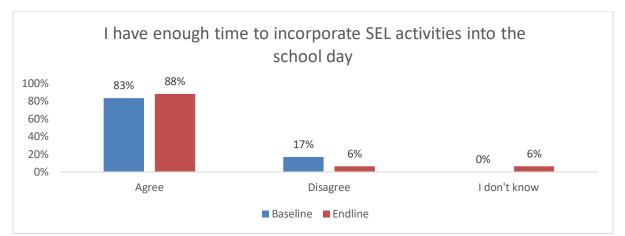


Figure 18 Availability of time for integrating SEL activities during the school day (n=18 baseline and n=16 endline)

The baseline and endline questionnaire findings also reveal that practitioners feel supported by the ECDCs in integrating SEL and PA into the school day, with 100% of practitioners feeling supported at the endline.

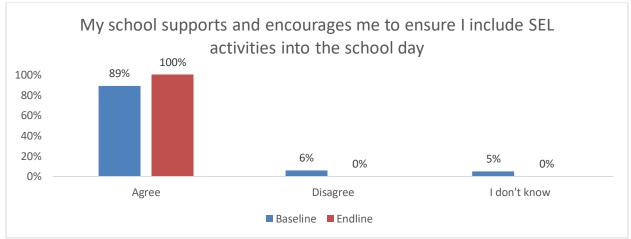


Figure 19 Support and encouragement from the school to include SEL activities in the school day (n=18 baseline and n=16 endline)

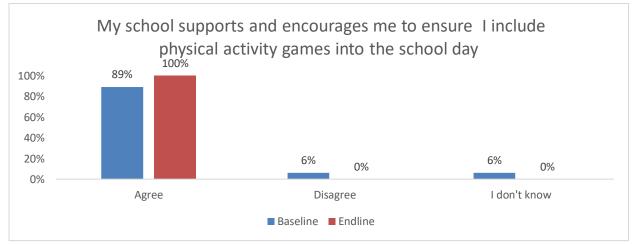
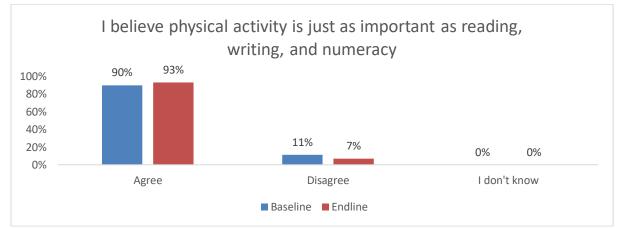


Figure 20 Support and encouragement from the school to include physical activities in the school day (n=18 baseline and n=16 endline)

These are important findings as when practitioners feel supported and encouraged by their ECDC, they are more likely to introduce the programme regularly.

## **Practitioners' Attitudes and Awareness**

The pilot aimed to understand whether the programme enhanced practitioners' attitudes towards and awareness of the importance of PA and SEL. Data around the attitudes towards PA and SEL improved slightly over the course of the pilot. Practitioners held a strong belief that PA and SEL are as essential as reading, writing, and numeracy. This belief was reflected in the baseline data, where 90% of practitioners considered PA to be crucial, increasing slightly to 93% at endline.



*Figure 21 Attitude on the importance of physical activity compared to reading, writing, and numeracy (n=18 baseline and n=16 endline)* 

In terms of SEL, 82% of practitioners acknowledged its importance at baseline, which rose by 12% to 94% at endline.

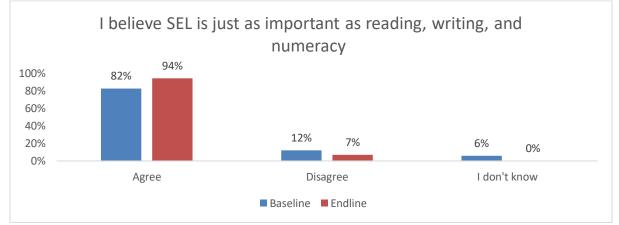


Figure 22 Attitude on the importance of SEL compared to reading, writing, and numeracy (n=18 baseline and n=16 endline)

One practitioner captured this sentiment in a focus group discussion, stating,

"At our school, we believe physical activity is just as important as feeding the children."

This strong belief is further supported by data showing that 100% of practitioners, at both baseline and endline, believe PA can enhance children's school performance.

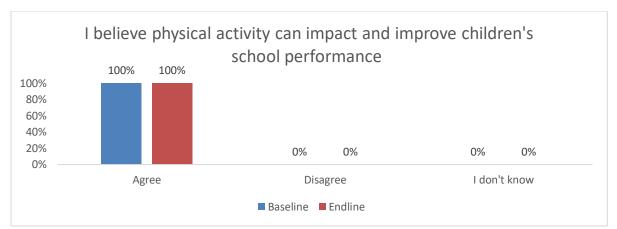


Figure 23 Beliefs around the impact physical activities have on school performance (n=18 baseline and n=16 endline)

Additionally, 88% of practitioners at endline believed that brain breaks, and breathing exercises can improve school performance, marking a 5% increase from the baseline questionnaire.

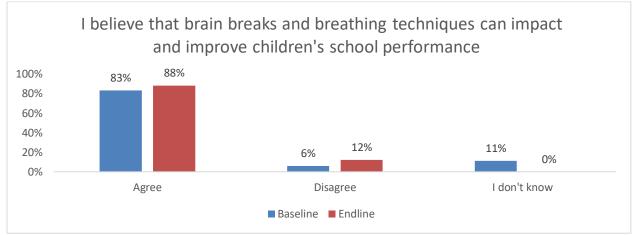


Figure 24 Beliefs around the impact breathing techniques and short movement activities have on school performance (n=18 baseline and n=16 endline)

The above findings show an improvement in practitioners' awareness and attitudes towards the importance of PA and SEL, with increased recognition of their significance in child development and school performance. Practitioners emphasised that PA is as vital as academic skills, and many saw brain breaks and breathing exercises as beneficial for enhancing children's learning.

### Resources

The pilot also sought to gather feedback on the usefulness of the resources (handbooks outlining various activities and the equipment) provided. Data from the focus groups revealed that all practitioners found the handbooks valuable, particularly for planning and implementing lessons. Practitioners at four out of the five ECDCs reported using both Kids Collab handbooks, with practitioners at one ECDC mentioning that they did not use the inclusivity handbook when implementing the programme, as they found the general activity handbook provided enough of an explanation.

Practitioners appreciated the easy-to-follow instructions and the helpful images in the inclusivity handbooks, particularly in demonstrating steps. However, the inclusivity handbook was primarily used

for visual guidance rather than for supporting neurodiverse children. This may be due to practitioners' limited understanding of neurodiversity and how to identify neurodiverse children. This has highlighted the need for future trainings to place more focus on neurodiversity and inclusivity, ensuring that practitioners are better equipped to support all children effectively.

Kids Collab provided one equipment bag per centre, to accommodate a large class of up to 35 children for a session. Figure 25 below demonstrates that at baseline, 67% of practitioners believed they had enough equipment to incorporate PA games, but this decreased to 25% at endline.

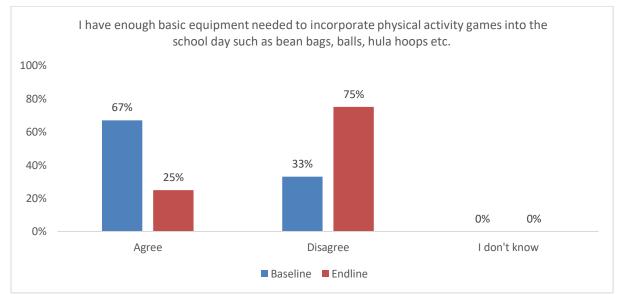


Figure 25 Beliefs around having enough basic equipment to incorporate physical activity games into the school day (n=18 baseline and n=16 endline)

During the baseline assessments it was observed that none of the ECDCs had dedicated sport equipment bags; they only had outdoor equipment used for free play. Additionally, none of the ECDCs had structured PA sessions, and thus there was no specific requirement for equipment at that time. Thus, it is possible that practitioners initially did not perceive a need for these resources, and only became aware of and identified this need after implementation of the programme.

Feedback during the focus group discussions revealed that practitioners appreciated the equipment provided however, they did request some additional resources: more balls (both big and small), beanbags, skipping ropes, hula hoops, hurdles, and balance beams. One ECDC faced a challenge of insufficient resources when more than one class wished to conduct the programme sessions simultaneously. They addressed this by staggering activity timings across classes to ensure equitable access to resources.

Another challenge was that the balls provided broke easily, necessitating more durable ones, with practitioners suggesting replacing the plastic balls with netball or soccer balls. It was also noted by two ECDCs that the coloured beanbags were particularly successful for their educational value in teaching colours, while practitioners at another ECDC also expressed a desire for more music to be added to the games, noting that children respond well to music.

## **Training and support**

The training provided as part of the Kids Collab Programme was well-received by all practitioners, who found it both helpful and sufficient for implementing the programme. For example, one practitioner noted the impact of the training on her teaching approach:

#### "We had always taught the kids to run incorrectly, and with the training, we had to change how we were teaching it, this has helped us."

Feedback from practitioners across all ECDCs indicated an interest in more frequent training sessions, either quarterly or monthly to enhance their understanding of FMS, overcome challenges associated with introducing some of the programme's activities, and learn new games and techniques. One practitioner requested scheduling training sessions outside of school hours to minimize disruptions to classroom activities.

The WhatsApp communication platform was established primarily to share information and send activity reminders to practitioners. One practitioner noted that her ECDC would often use the WhatsApp group reminders and associated activities more than the handbooks because they were easy to access. However, practitioners exhibited low responsiveness on the platform, with only a minority sharing videos and images. Focus group discussions revealed that this was likely due to limited internet connectivity and data access.

## Changes in children's gross motor development and fundamental movement skills

The focus of the Kids Collab programme is to ultimately enhance children's gross motor development and FMS through consistent exposure to and participation in PA and SEL activities, contributing to their overall physical and emotional well-being. Thus, the pilot focused on assessing the gross motor development of children aged 4-5 years at the five chosen ECDCs to note whether there was any change in gross motor development and FMS. The gross motor assessment sessions, which lasted three hours each, involved assessing groups of ten children at a time until all participants were evaluated. Practitioners who worked with these children were present during testing to help overcome any language barriers, ensuring that all instructions were clearly understood. For the purpose of this report, this group is referred to as the "matched group". This limited overlap was due to the pilot project spanning different academic years, with many children having left the ECDC by the time the endline assessment took place, and new children being tested instead. Despite this turnover, all children in the endline assessment had participated in the Kids Collab programme since January 2024.

The gross motor assessment involved children navigating an obstacle course, completing each activity sequentially as a group. This included assessing the children's running, galloping, horizontal jumping, star jumping, over-arm throwing, underarm throwing, kicking, catching, bouncing, one-leg balance, heel-to-toe walking, and hopping abilities.

During the baseline assessments, it was observed that the children generally demonstrated stronger proficiency in FMS that did not require specialised equipment, such as running, galloping, and jumping. In contrast, their skills in activities requiring coordination or equipment, such as underarm throwing, ball bouncing, heel-to-toe walking, and star jumping, were notably weaker. This disparity may be due to prior limited access to equipment or insufficient exposure to relevant activities.

The matched group of 39 children showed an overall increase in their fundamental movement abilities at endline. These children came from five different centres: 16 from one centre, 8 from another, 12 from a third, and two and one child from the remaining centres, respectively. The matched group findings were consistent with the results observed in the assessments of the remaining children involved in the study. This alignment suggests that the improvements seen in the matched group are indicative of broader trends within the larger group of participating children.

#### Locomotor skills

The assessment results indicated that the matched group's locomotor skills improved from 64% at baseline to 78% at endline. This finding aligns with the observation that locomotor skills, such as running, galloping, horizontal jumping, and star jumping, were generally strong due to their incorporation in everyday activities. These skills can be acquired and refined without specialised equipment or extensive instruction, allowing for natural development. This is evident in the increased performance in locomotor activities, where a minor improvement of 2% in running was observed. More significant improvements were seen in galloping (21%), horizontal jumping (13%), and star jumping (36%). The relatively small gains in certain locomotor skills are likely due to the children's prior exposure to these activities before the introduction of the Kids Collab programme. In contrast, the significant improvement in star jumping suggests that the structured practice and repeated exposure provided by the programme likely enhanced the children's coordination and rhythm. Initially, many children struggled to synchronise the movements required for star jumping, but by the endline assessment, they demonstrated a much better grasp of the skill.

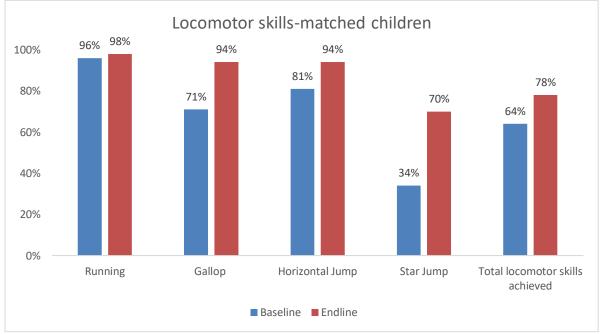


Figure 26 Matched children's locomotor skills (n=39)

The above findings are consistent with the findings from the larger group's locomotive skills: the results for all the children results showed a modest 3% improvement, with average scores increasing from 65% (n=128) at baseline to 68% (n=132) in the endline assessment. The children's abilities in running, galloping, and horizontal jumping were generally good in both assessments, with improvements of 3%, 21%, and 9% respectively. The most significant improvement in locomotive abilities was seen in the star jumps test, where children improved by 22%. However, despite this improvement, star jumps remain an area needing additional focus, with only 61% (n=132) of children able to perform this skill after the programme. To support continued development in this area, there is a need for more activities that focus specifically on rhythm and coordination.

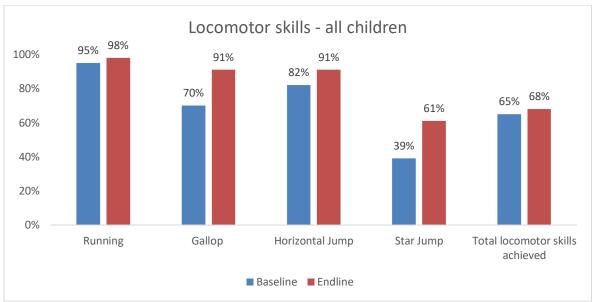


Figure 27 All children's locomotor skills (n=132)

### **Object control skills**

In terms of object control skills which require more specialised equipment and instruction, the matched group's baseline assessment revealed that only 37% of children met the required standards at baseline. However, this increased to 74% by the endline. At baseline, children experienced difficulty with underarm throwing and bouncing a ball, with only 18% able to perform the former and 13% the latter at baseline. By the endline assessment, there was a marked improvement, with 87% of children able to execute an underarm throw and 58% able to bounce a ball. A practitioner commented on this progress during the endline assessment, commenting on the children's object control development:

"It's amazing to see how much the children have improved; they really struggled with this last time you were here. I am so proud of them."

Additionally, overarm throwing skills improved by 18%, kicking abilities by 29%, and catching by 20% from baseline to endline.

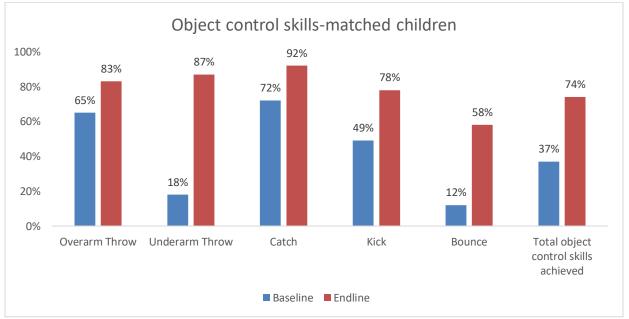


Figure 28 Matched children's object control skills (n=39)

The larger group of children also showed improvement in their object control skills, consistent with the progress observed in the matched group. In the baseline assessment, only 37% of children (n=128) met their object control milestones, whereas this figure rose to 67% (n=132) in the endline assessment. The underarm throw demonstrated the largest improvement within this category, with an overall enhancement of 57%, consistent with findings from the matched group, which also saw notable improvements in this area. This overall progress in object control skills may be attributed to the children's increased exposure to new skills introduced during the programme.

While there was an improvement in bouncing, it remained lower than other object control skills. The improvement in bouncing increased from 14% in the baseline assessment to 40% in the endline, indicating a 26% overall improvement. Proficiency in ball bouncing remained lower, possibly due to limited focus on this skill within the programme's activities. It was also noted during training sessions in three centres that educators struggled with teaching the concept of ball bouncing effectively, highlighting an area for further emphasis in future training sessions and activity enhancements to increase exposure to this skill.

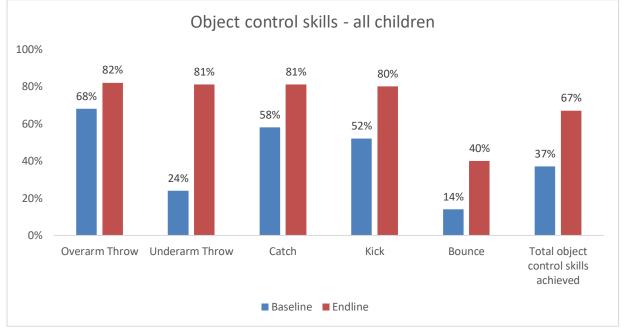


Figure 29 All children's object control skills (n=132)

### **Balance and stability**

When looking at the findings of the sample group there was an overall improvement in balance and stability over the course of the pilot, with 78% of children achieving their balance milestones in the endline assessment, compared to 51% in the baseline. For balance and stability, the children were assessed on their ability to perform a one-leg stork stand on both their dominant and non-dominant legs, heel-to-toe walking in a straight line both forwards and backwards and hopping on both legs. The sample group's improvement was seen in heel-to-toe walking, where the children's ability improved by 56% between baseline and endline, suggesting a greater understanding and familiarity with the task. The stork stand balance improved by 24%, and hopping abilities increased by 26%, with an improvement in the children's ability to hop on their non-dominant leg, which was a challenge at baseline.

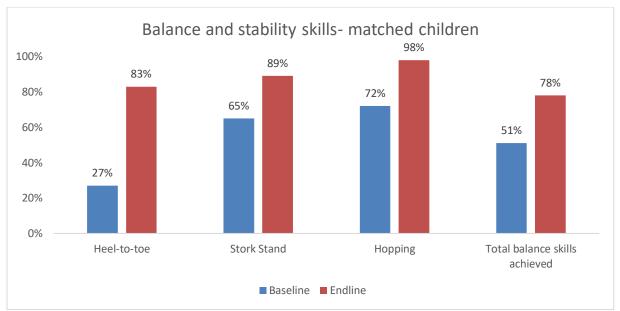


Figure 30 Matched children's balance and stability skills (n=39)

When looking at the findings of the overall group there was a similar improvement over the course of the pilot, with 68% of children (n=128) achieving their balance milestones in the endline assessment, compared to 55% (n=132) in the baseline. The stork stand balance showed a modest improvement, with only an 8% increase, suggesting that the children had already developed static balance skills prior to the programme. The heel-to-toe balance assessment revealed a notable 42% improvement among the children, though observations indicated that this skill still poses challenges and requires additional focus within the programme. The children's hopping abilities remained relatively consistent, with a 9% improvement from baseline to endline, while the matched group experienced a larger increase of 26%.

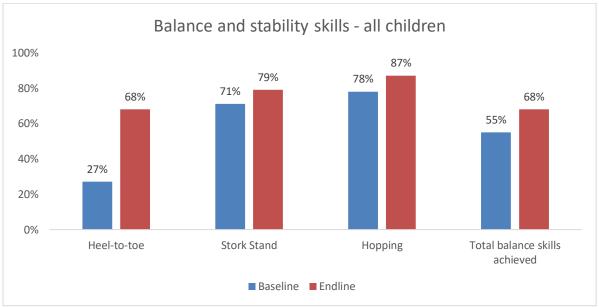


Figure 31 All children's balance and stability skills (n=132)

While these improvements in the children's FMS are promising, it is important to consider other contributing factors, such as the natural progression and growth that occur as children age and the impact of environmental influences such as increased physical activity outside of school, improved nutrition and greater parental involvement. Despite these variables, focus group discussions with practitioners provided valuable insights into the programme's impact, as noted in the section below.

### **Additional improvements**

All practitioners who participated in the endline focus group mentioned that the children benefitted holistically from the Kids Collab programme noting that children have benefitted not only physically, but socially and behaviourally as well. At endline, practitioners were asked to rate the programme out of 10 to gauge their overall satisfaction and enjoyment of the programme. All 16 practitioners who participated in the endline focus group session rated the programme between 8 and 10 out of 10.

This section outlines some examples provided by practitioners on additional skills which the children developed during the implementation of the Kids Collab programme. Some have been intentionally built into the programme, but others are unintended positive outcomes reported as a result of the programme activities.

Practitioners reported substantial improvements in **hand-eye coordination**, particularly through ballrelated activities, which practitioners mentioned were among the children's favourites. One practitioner noted,

"The children really love the games that involve balls; they would do them [the games] every day if it were up to them."

Practitioners appreciated the structured physical activities, particularly those focusing on **crossing the midline**, which they believed enhanced the children's academic abilities. Practitioners admitted that prior to the programme they did not understand the relationship of a child being able to cross the midline and its effect on certain academic skills such as reading and writing. As one practitioner remarked,

"We believe that these activities help a lot with some of the classroom skills."

Practitioners also felt that the activities encouraged **creativity and imagination**, with children not just following instructions but also inventing new ways to play and engage with the materials. Furthermore, practitioners noted that they observed increased engagement and **communication** among children.

This enthusiasm was mirrored in the children's engagement, as practitioners observed that the programme's emphasis on play, rather than passive learning, was more engaging and beneficial. As one practitioner stated,

"The children learn through play; it's better than sitting at a table—they just want to move."

Practitioners highlighted that participation levels of the children are much higher during the Kids Collab activities compared to the normal school tasks as the children are focusing more on play and enjoyment,

"all our children love to play, we can see how they enjoy".

This was emphasised by another practitioner who stated,

"We love the fact that they [the children] can learn without being aware they are learning."

Practitioners commented on the noticeable improvements in the **children's behaviour** once they started implementing Kids Collab activities. They observed that since the children's engagement in the programme, they tend to have increased attention in the classroom and better ability to follow instructions and rules. Related to this, a practitioner noted that the structured nature of some of the games has taught children to **follow rules** and **take turns** as part of their involvement in the activities. The programme also served as a valuable tool for behavioural management, with physical activities sometimes used as rewards for good conduct, for example:

"we would use the Kids Collab activities to get our children through their school activities on some days... we would say, if you finish this work we can play after with Kids Collab". Practitioners noted that the children would often encourage one another in the games especially when **working in team**:

"our children cheer a lot for each other to help them win".

Activities designed for brain breaks, breathing exercises, balancing, and counting during jumping were also well-received and deemed helpful. Practitioners noted that the activities promote engagement within the classroom environment. One practitioner mentioned,

"The children are more relaxed after they do the physical activities, and we can see how much they benefit from the breathing and balancing exercises."

Practitioners also highlighted the **social benefits** of the programme, remarking on improvements in the children's social skills.

"We don't often have activities that encourage the children to work together but with Kids Collab, the children work in partners or groups... our very shy children have even started to play more with others".

In addition to this, some educators noted that quieter children became more willing to participate and express themselves, indicating a boost in confidence due to the programme. Yet another practitioner noted

"some children don't like to share but now with these games, they see they have to share to play together".

Thus, the overall feedback from practitioners regarding the children's development was overwhelmingly positive.

"We want to continue this programme; it gives us new knowledge and helps us with our teaching. We've seen real improvement in the children's balance and ball skills."

"The children learn through play; it's better than sitting at a table—they just want to move."

These comment highlights how the Kids Collab Programme complements and enriches the existing school curriculum, promoting active and engaged learning through movement and play.

### Challenges faced in implementing the Kids Collab Programme

Several challenges emerged during the implementation of the Kids Collab Programme, which influenced both the execution and evaluation of the pilot.

A notable challenge related to the use of the English language in training and handbooks, as well as in the baseline and endline questionnaires. The handbooks and training materials were developed exclusively in English, and five Practitioners had limited English proficiency. The use of English in the questionnaires also likely hindered their understanding of the questions. This issue was highlighted by practitioners during the endline questionnaire, who reported struggling with the comprehension of some questions.

The timing of the pilot also presented challenges. The pilot began later than planned, which, coupled with assessments spanning across two academic years, resulted in a limited sample size for consistent gross motor assessments. Specifically, only 39 children were assessed at both baseline and endline stages, while the ideal scenario would have involved assessing all 132 children participating in the study at both points. The delayed start and fragmented assessment periods thus limited the ability to track changes comprehensively and may have affected the robustness of the findings.

Another challenge related to the provision of feedback via WhatsApp. Educators faced difficulties in consistently accessing and providing feedback, as well as sending videos and images related to the

programme. While this did not directly impact the ability to implement the programme, it limited Kids Collab's capacity to track engagement and monitor feedback effectively. The lack of consistent data hindered the ability to provide targeted support and made it challenging to gauge the full extent of the programme's impact.

The presence of GDE members at the baseline visit may have influenced the data collection process. Practitioners may have felt hesitant to openly share their views or provide honest feedback with GDE representatives present. In addition, there was no external evaluation facilitators at the baseline, and this was deemed important at endline to eliminate bias.

Another challenge faced during the implementation of the Kids Collab Programme was practitioners' difficulty in effectively demonstrating activities due to their personal physical limitations. Many practitioners reported that their own physical conditions, such as age and weight, hindered their ability to perform certain exercises and movements required by the programme. This limitation impacted their capacity to engage fully with the children and model the activities accurately.

A key challenge in the pilot was the practitioners' limited confidence and understanding of working with neurodiverse children. While there was a slight increase in confidence levels in introducing SEL and PA activities for these children, many practitioners were uncertain about their ability to do so effectively. Additionally, focus group discussions revealed that practitioners often did not recognise neurodiverse children in their classrooms, despite clear signs observed by healthcare professionals. This highlights a significant gap in knowledge and training, emphasising the need for further support to better equip practitioners in addressing the needs of neurodiverse children.

During implementation, adverse weather and limited indoor space at times restricted practitioners' ability to carry out activities effectively. A shortage of equipment meant that only one class could participate at a time, limiting the opportunity for all practitioners to engage simultaneously. Additionally, fitting structured Kids Collab activities into schedules alongside free play proved difficult, reducing the overall time available for programme implementation. Addressing these challenges is essential for optimising the programme's effectiveness and ensuring consistent integration into daily routines.

### Suggested improvements

Based on the findings and the feedback from the mid-pilot and endline focus groups, several improvements are proposed to enhance the effectiveness of the Kids Collab Programme.

#### Champions to motivate and organise activities

Practitioners suggested appointing a "Kids Collab Champion" at each ECD centre to lead and coordinate the programme. This role has been successfully adopted at one centre, where the principal manages weekly meetings to plan activities and address challenges. Additionally, organising interschool sports competitions was recommended to maintain engagement and provide children with opportunities for social interaction with peers from other ECDCs.

#### Content areas that need refinement

Content areas identified for refinement include the need for additional activities that target specific skills where children still demonstrate gaps in proficiency. There is a particular need for activities that focus on developing skills such as bouncing, rhythm and coordination (for example, star jumping), and dynamic balance (such as heel-to-toe walking). Tailoring activities to address these specific developmental areas will support children in achieving more balanced skill growth.

Additionally, there is a substantial need for more content related to neurodiversity. This should encompass detailed information on identifying common signs of neurodiversity and strategies for effectively supporting neurodiverse children within the framework of PA and SEL. Enhancing this content will enable practitioners to better recognise and meet the diverse needs of all children, fostering a more inclusive and effective implementation of the programme.

#### Training areas that need refinement

To enhance the effectiveness of the Kids Collab programme, several training areas need refinement. One key area is **further training on neurodiversity**. Practitioners require a deeper understanding of neurodiversity, including how to identify and support neurodiverse children within their classrooms. This focus will help practitioners create a more inclusive environment and ensure that all children can participate fully in the program.

Practitioners would benefit from more **guidance on how to tailor activities** to the varying developmental stages of children, ensuring that each child can engage meaningfully in the programme regardless of their age or skill level. Additionally, training should emphasize **how to adapt activities to various constraints** such as space limitations, weather conditions, and other challenges that may arise in different environments.

There is also a need to **address specific skills that some practitioners struggle with** themselves, such as bouncing a ball. Providing additional support and practical strategies to help practitioners build proficiency in these areas will enhance their confidence and effectiveness in delivering the program. Furthermore, training should offer guidance on **how to integrate Kids Collab activities into the daily school schedule**, helping practitioners balance these activities with their other teaching responsibilities more efficiently.

Finally, practitioners need further training on **identifying and correcting common errors** in FMS. By strengthening their ability to detect and address these errors, practitioners can better support children's physical development. By refining these training areas, the Kids Collab programme can continue to make a significant impact on both practitioners and children in ECDCs, fostering a more comprehensive and effective approach to early childhood development.

#### Additional equipment

There was a call to expand the equipment to include additional balls, skipping ropes, balance beams, and stilts, as well as to acquire more durable items, particularly balls. This would allow multiple classes to participate in the Kids Collab Programme simultaneously, facilitate a wider variety of games, and support independent play.

#### Supplementary support

It was agreed that while the initial training provided a solid foundation, supplementary support throughout the year would be highly beneficial. To enhance the ongoing effectiveness of the Kids Collab programme, it is recommended to implement additional training sessions either monthly or quarterly. These supplementary sessions could serve as refresher courses, offer advanced workshops on integrating PA and SEL into daily routines, and provide new activities and games to keep the programme engaging and dynamic.

To minimise disruption to the school day, it is advisable that these additional training sessions be scheduled outside of regular school hours. This approach will ensure that practitioners can fully participate without impacting their teaching schedules.

In addition to these training sessions, there is a need for more focused support on age-specific activity adaptations. To address this, it is suggested that relevant information and resources be shared via WhatsApp as part of the weekly reminders. This method will allow practitioners to receive timely updates and practical tips on adapting activities for different age groups, further enhancing their ability to implement the programme effectively.

Practitioners also highlighted that video demonstrations would be particularly beneficial, as they would assist children in following the activities when practitioners are unable to demonstrate them effectively due to personal physical limitations. This approach would ensure that children can still engage with the programme and understand the activities clearly.

These improvements aim to refine and expand the Kids Collab Programme, ensuring it effectively meets the needs of ECDCs, practitioners, and children, and continues to support early childhood development.

#### Translation and language support

Translating handbooks into local languages and providing video demonstrations were recommended to overcome language barriers and enhance practitioners' understanding of activities. With regards to the monitoring and evaluation, it was noted that translating the questionnaires into the practitioners' home languages would aid in better understanding and reduce the risk of misinterpretation or misunderstanding of the questions. This would help ensure more accurate and meaningful responses, ultimately improving the quality of the feedback and the effectiveness of the programme.

## Conclusion

The Kids Collab Physical Development and Wellbeing Programme pilot achieved its primary aim: to enhance practitioners' ability to integrate PA and SEL into their daily routines, resulting in the improvement of children's gross motor skills as well as social, cognitive, and emotional development. The programme has equipped practitioners with the tools and confidence needed to incorporate these critical components into early childhood education. Through comprehensive training and ongoing support, practitioners reported increased engagement and effective implementation of PA and SEL strategies. Observations and assessments indicated positive outcomes in children's motor skills development, validating the programme's impact.

Given these positive outcomes, scaling the Kids Collab Physical Development and Wellbeing Programme can provide widespread upskilling for practitioners in ECDCs, ensuring they have the resources and training necessary to effectively integrate PA and SEL into their educational practices. Expanding the programme on a larger scale would make it an accessible solution for ECDCs nationwide, promoting consistent and impactful development practices across low-resourced sectors.

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