
“We Don’t Allow Children to Climb Trees”

How a Focus on Safety Affects Norwegian Children’s Play in Early-Childhood Education and Care Settings



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The authors point out a basic contradiction: On one hand, we want to keep children as safe as possible; On the other, they suggest, learning to take risks is a normal part of childhood and child development. In Norway, research has shown that early-childhood education and care (ECEC) practitioners have, in the past, taken a permissive approach to children’s risk taking. In this article, the authors surveys ECEC managers to explore how the increasing focus on safety in Norwegian society affects ECEC programs. They find the previously more relaxed attitudes regarding risky play among children to be changing in such settings. They describe restrictions recently introduced into everyday program activities, and they discuss the implications both for ECEC pedagogy and for children’s play, learning, and development. **Key words:** early-childhood education and care (ECEC); play and safety; play in Norwegian preschools; risk taking and play

Introduction

APPARENTLY CULTURE INFLUENCES how care givers and adults deal with children’s risk taking in play (Little and Wyver 2008; Guldberg 2009; Little, Sandseter, and Wyver 2012; Sandseter, Wyver, and Little 2012; Wyver et al. 2010; Wyver et al. 2012). According to Guldberg (2009, 60), “The Norwegians have a special love for outdoor pursuits and are reluctant to restrict children’s freedom to roam outdoors—without adults watching them—to the same extent that other nations do.” Similarly, New and colleagues (2005) note that Norwegian, Swedish, Danish and, to some extent, Italian preschool teachers have fewer worries about

children’s risk taking than do American preschool teachers. Studies indicate that Norwegian early-childhood education and care (ECEC) practitioners view risky play positively compared to practitioners in other Western countries such as Australia (Little, Sandseter, and Wyver 2012; Sandseter, Wyver, and Little 2012; Wyver et al. 2010; Wyver et al. 2012). Norwegians acknowledge the importance of physically active play for children’s overall development, they allow risk taking in children’s play, and they have a relaxed attitude toward children and risk (Sandseter 2010b, 2012, 2013). One reason for this more relaxed attitude toward risky play may be that the Norwegian Kindergarten Act (NMER 2005) and the framework for kindergarten (NMER 2006/2011) emphasize children’s opportunities for play, exploration, meaningful experiences, and activities in safe yet challenging environments.

Nonetheless, these attitudes and the practices they encourage could be threatened by Western society’s growing concerns about safety and by the debate about children’s risk taking in play and the extent to which adults should regulate it. Most of the time, play does occur under some adult supervision, which means that adults frequently decide what children are allowed to do and where they are allowed to go (Kytta 2004)—and this is also true in early-childhood and care settings. In this sense, adults simultaneously contribute to child safety and represent the biggest constraint on a child’s exposure to the risks and challenges that ultimately benefit their development (see e.g., Ball 2002; Furedi 2001; Gill 2007; Hughes and Sturrock 2006; Brussoni et al. 2012).

Children’s Positive Experiences of Risk Taking

Objectively, risky play provides positive experiences for a child. Importantly, risky situations offer the potential rewards of intense exhilaration (Cook 1993; Cook, Peterson, and DiLillo 1999). According to Sutton-Smith (1997), children’s play provides an optimal experience of arousal, excitement, fun, merriment, joy, and lightheartedness, allowing children to actualize their potential through voluntary, intrinsically motivated activities. Similarly, Apter (2001) describes play as an activity driven by the search for fun and immediate enjoyment. Stephenson (2003) finds the joy of mastering new and challenging tasks, often at the edge of control, both a driving force and a rewarding experience when children engage in risky play. Coster and Gleeve (2008), investigate risk taking in play, discovering that risky play offered children fun, enjoyment, excitement, thrills, pride, a sense

of achievement, and self-esteem. The children they studied clearly described that simultaneously experiencing fun and fear was exciting.

In an earlier study to determine why preschool children, from their own perspective, engaged in risky play, Sandseter (2010a, 2010b) interviewed twenty-three children from four to five years old about their risky play in preschool. The study showed that children engaged in risky play primarily for the pleasant emotions aroused by mastering risks they did not think they would dare to attempt. The children had several arousal-increasing strategies they used in their play, such as intentionally increasing the height and speed at which they played, acting rashly during such play, taking ever greater risks, and balancing on the edge of fear.

Sandseter (2010a) concluded that the ambiguity of children's experiences in risky play is central to their motivation for engaging in it. Risk taking in play involves both fear and excitement, and children explore in their play the ambiguity between the two (Cook 1993; Aldis 1975; Cook, Peterson, and DiLillo 1999; Stephenson 2003; Coster and Gleeve 2008; Sandseter 2010b).

Risk Taking and Learning How to Handle Risks

Other benefits that derive from children's engagement in risky play are the lessons for life that they unconsciously learn while they practice handling risks. Risky play, as several researchers suggest, helps children enhance their ability to master peril. Aldis (1975) notes that much of children's play involves fear and young children seek the thrills involved in such activities as swinging and jumping from high places. Driven by curiosity and a need for excitement, children approach the world around them through play. Rehearsing real-life, risky situations, they discover what is safe and what is not (Apter 2007; Smith 1998; Adams 2001; Sutton-Smith 1997; Gill 2007). Theoretically, this means that children gain a more realistic notion of the objective risk in the situation (Adams 2001); in other words, the subjectively perceived risk in the situation approaches the objective risk (Teigen 2001; Boyesen 1997). Similarly, Boyesen (1997) states that for a child to master a risky situation he or she needs to approach the situation and thereby increase the risk. Additionally, Ball (2002) and Stutz (1999) emphasize the importance of letting children develop a sound sense of risk by taking risks in play. Aldis (1975) shows how children seek out thrills gradually in encounters with progressive risks that allow them to master comfortably the challenges involved.

Support for these theories can be found in a German study that shows a reduction in injury rates after an intervention to promote coordination in children in kindergarten (Kambas et al. 2004), and in an ongoing Belgian study that finds the implementation of risky play in a child group leads to increased risk-assessment skills (Bertrands and Lavrysen 2014).

There are even indications (Sandseter and Kennair 2011) that risky play has an antiphobic effect on the fears and phobias (such as fear of heights, fear of water, and separation anxiety), which appear naturally at a developmentally relevant age to keep the child safe, alert, and careful when addressing potentially dangerous situations (Poulton and Menzies 2002a, 2002b). Sandseter and Kennair suggest that the antiphobic effect of children’s risk taking in play results from exposure to typical anxiety-eliciting stimuli and contexts in combination with positive emotions (thrills, excitement, and fearful joy) in relatively safe situations. The children learn to handle risk and gain a more realistic risk perception, which in turn makes them less anxious of the stimuli and prevents them from developing more anxiety.

The Possibility for Injuries

Risky play can lead to injury, in which case the positive emotions children experience in risky play might instead be replaced by fear or anxiety about getting hurt (Cook 1993; Cook, Peterson, and DiLillo 1999). Because of the risk of injuries to children during play, formal risk-managing strategies have emerged in several countries. These include steps taken to regulate the physical features of children’s playgrounds such as reducing the height from which a child might fall, softening playground surfaces on which a child might land, and rounding off the sharp edges of playground equipment and making sure it is stable. Playground designers have attempted to eliminate the likelihood of a child being trapped, pinched, crushed, or struck (DSB 1996; Ball 2002, 2004; Little 2006; Mowat et al. 1998; Chalmers 2003). However, the statistics on playground injuries from several countries show that the most serious of them— those that result in death or permanent disability—are rare (Chalmers 2003; Bienefeld, Pickett, and Carr 1996; Ball 2002; Chalmers et al. 1996; Phelan et al. 2001). In the United Kingdom (UK), one fatal injury occurs every three or four years (Ball 2002). Most playground injuries are bruises, contusions, concussions, and fractures, which result from falls from or collisions with swings, slides, climbing frames, or other

equipment (Bienefeld, Pickett, and Carr 1996; Ball 2002; Illingworth et al. 1975; Mack, Hudson, and Thompson 1997; Phelan et al. 2001; Sawyers 1994; Swartz 1992) and from bicycling (Chalmers et al. 1996; Peterson et al. 1994).

Research indicates that a lack of supervision plays a key role in such childhood injuries (Rosen and Peterson 1990; Taylor and Morris 1996; Morrongiello 2005; Morrongiello et al. 2006). Studies have shown that children who attend child-care centers (institutions where adult supervision is typically rigorous), experience fewer injuries than children who spend their days at home (Schwebel, Brezaussek, and Belsky 2006). The most common injuries in ECEC are minor injuries natural for active children, such as scrapes, small cuts, bruises, and minor fractures (Briss et al. 1994; Leland, Garrard, and Smith 1993; Schwebel et al. 2006; Cummings et al. 1996; Elardo, Solomons, and Snider 1987; Alkon et al. 1999). Similarly, a recent mapping of injuries in Norwegian ECEC settings during 2012 shows very low numbers. The study reports a ratio of 0.1 injuries per child per year, 98 percent of them minor injuries not requiring follow-up from a doctor or dentist (Sandseter et al. 2013). We assume the low number of incidents results from the more intense adult supervision found in ECEC institutions (Sandseter 2010b), an assumption supported by studies that have found a lack of adult supervision one of the primary risk factors for injuries to children during play (Morrongiello 2005; Morrongiello et al. 2006).

Focus on Safety

Although there seem to be few severe injuries in Norwegian ECEC programs, signs in Norwegian society indicate that there is a growing focus on injury prevention and child safety even in these supervised settings. In this article, we explore how Norwegian ECEC practitioners handle the increasing safety focus in Norwegian society and how it influences their practice in the ECEC setting. In short, how does Norwegian society's focus on safety influence play and activities in its ECEC settings?

Method

Our data derives from a survey we conducted on injuries and injury prevention in Norwegian ECEC settings during 2012 (Sandseter et al. 2013). The Norwegian

Ministry of Education funded our work, and Norwegian Social Science Data Services approved its ethical standards. We used a questionnaire to gather details on injuries based on the gender and age of the children involved as well as by the nature and severity of the injuries. We sought to find how the ECEC settings worked to prevent injury, including asking about health and safety routines and the training offered in life saving. We also asked whether a focus on safety in society in general influenced play and activities in the ECEC setting.

Procedure and Sample

We distributed our questionnaire (QuestBack) about child injuries and procedures preventing them by e-mail to the managers of every ECEC setting (N=6,469) in Norway. Managers from 2,105 settings completed the questionnaire, a response rate of 32 percent. Our sample matched the geographical distribution of Norwegian preschools throughout the country, the number of private and municipal programs, the proportion of male to female employees, and the number of children and their gender and age. The responding ECEC programs may have better established safeguards for and more vigilant attitudes toward preventing injuries than others, but because we aim merely to describe and analyze the answers of the study’s 879 responses to our open-ended question, we did not test how representative our sample was, nor did we consider it vital to do so.

Analysis

The use of open-ended questions, then, raises some methodical issues, such as the need for extensive coding, the possibility of a lower response rate than might be expected, an overreliance on the rhetorical skills of the respondents, an inability to clarify the respondents interpretations of the questions, and the lack of framework for forming a coherent response (Schuman 1966; Reja et al. 2003; Geer 1988). Nevertheless, qualitative text data offer broad insight into information concerning a given topic. This broadness provides respondents with an opportunity to give detailed information in their own words, which allows for rich and diverse descriptions of their experiences (Jackson and Trochim 2002). In our study, we read the text of each response thoroughly and coded them thematically. We then categorized these codes into broader clusters by theme.

The process involved constant comparisons with previously categorical descriptions (Zhang and Wildemuth 2005) to achieve an accurate interpretation and categorization. Although the questions concerned how a society's focus on safety affects play in any ECEC setting, many respondents described the measures they used to prevent injuries in their ECEC program. We asked them to describe the limitations on physically active play, including not only during normal outdoor play on site but also during field trips away from the institution. (We also asked what measures they took to prevent injuries, including staff training in injury prevention, the development of institutional routines that address child safety, and playground inspection and risk assessments. But we do not directly address actions for preventing injuries in this article.)

We began with a total of twenty factors that limited children's physically active play then consolidated them into six subcategories: (1) play and activities, (2) outdoor space, (3) water, (4) field trips, (5) weather and seasonal conditions, and (6) other limitations in physically active play. After we had analyzed the descriptions and created these categories, two independent researchers reviewed every answer once more within each category to ensure we had been consistent in our coding. The length of the written responses varied from a few words to almost two hundred words. Some of the richer responses described multiple aspects of restrictions and limitations and were therefore divided and coded into several of the categories. On average, the text of each response was placed in 1.3 categories, ranging from one category to four.

Results

A total of 879 respondents answered the open-ended question about how society's focus on safety affects activities in an ECEC setting. Figure 1 illustrates the distribution of these responses in the main categories. Among the responding ECEC managers, 248 (28 percent) described limitations in children's possibilities for physically active play, and 329 managers (37 percent) reported the measures they used to prevent injuries. A total of 87 managers (10 percent) described both the limitations and measures they had established, while 215 managers (25 percent) described other perspectives or actions that did not fit into the focus of this paper.

Since our scope for this article covers only the limitations placed on play, we excluded answers that reported measures to prevent injuries, such as playground

Category	N	Percentage
Both limitations and measures	87	10%
Limitations	248	28%
Measures to prevent injuries and accidents	329	37%
Not relevant	211	25%
Total	875	100%

Figure 1. Distribution of the open-ended answers for main categories.

inspection, first-aid education among staff, risk analysis, or installing soft surfaces. Instead, we examine here the responses from the 335 managers (38 percent of the total) who described limitations in children’s possibilities for physically active play (see figure 2). “Restrictions in play and activities” constitutes the largest category, with 188 managers describing the different ways they restricted children from play that could result in injury. Under the category “limitations in the outdoor space,” 83 managers describe how the space is designed, the play features they allow within that space, and how they allow the children to use the play space. Forty-nine managers mentioned the category “restrictions related to water,” and the two categories with the fewest counts were “limitations in field trips” (29) and “restrictions due to weather and seasonal conditions” (25). In addition, 57 managers describe more general and nonspecific limitations in children’s possibilities for physically active play.

Restrictions in play and activities	188
Limitations in the outdoor space	83
Restrictions related to water	49
Limitations in field trips	29
Restrictions due to weather and seasonal conditions	25
Other limitations in physical active play	57

Figure 2. Frequencies of the categories describing limitations due to safety concerns.

Restrictions in Play and Activities

Restrictions in play and activities are described by a total of 188 managers, and the category includes a range of activities. We found the most commonly restricted play to be climbing: 126 managers described how adults in the ECEC settings try to safeguard the children when climbing. In some institutions, they even prohibit climbing outright. In the following segments, we present sample comments from respondents identified by number.

493: Fear of accidents from falling leads to no organizing or permission for climbing.

811: We don't allow children to climb trees.

217: Tree climbing is one example. Several parents were concerned that their children could climb our apple trees. After a chat with the local authority, we were advised to prohibit climbing; this was an activity for the children to do outside the institution with their parents. Today, children are not allowed to climb these trees.

Although some managers do not allow climbing in their institution, most have a less drastic approach. They restrict the height of the climbing, insist on adult supervision, dictate the nature of the climbing surface, require a child to demonstrate competence in climbing, or call for a risk assessment of the activity.

367: Climbing in trees is accepted but only up to a certain height and always with adult supervision.

737: We are more careful in regard to climbing trees with rocks below, where you can fall down and hurt yourself.

Other activities limited by safety concerns include sledding, balancing, biking, ice skating, and rough-and-tumble play. Fear of injuries is the leading reason the institutions give for restricting children's play.

676: As a result of worries among parents, balancing on the fence that surrounds the institution is not allowed unless there is deep snow underneath.

584: Bicycling in hilly terrain is not allowed due to the danger of hitting other children and crashing into the wall. Playing with rope is

avoided because of the danger of strangulation.

Restricting children’s play may be related to worries by both managers and staffs about injuries or it may be related to external pressure. Several managers describe outside forces in society that pressure the institution to restrict physically active play—local authorities, playground inspectors, the media, and parents. The most frequently noted of these outsiders are parents, with forty-eight managers referring to pressure from parents as a reason to restrain children’s play (especially physically active play) in an ECEC setting.

Limitations in the Outdoor Space

The eighty-three responses about limitations in the outdoor space mostly described playground equipment. Otherwise, limitations or changes in the outdoor space often related to playground inspection and playground regulations.

145: With laws and regulation, we are guarded in every possible way. This restricts children. We have, for instance, been forced to remove a rope swing and a climbing net in the forest because of the surface. We can’t even hang a simple hammock between two trees!

426: We had to remove the swing due to rules regarding the safety zone. A play hut was removed because of the danger of pinches and the lack of a shock absorbing surface.

Managers also described their reluctance to purchase challenging equipment for fear playground inspectors may not approve it. Limitations in institutions’ outdoor space also involve challenges to integrating natural elements (such as trees) and nonstandard playground equipment. Some managers also described complications and difficulties related to self-made play environments and playground safety

459: New rules on playground equipment define what is allowed in the institution’s outdoor space. More creative equipment voluntarily built by parents, an old boat and ropes between trees, had to be removed.

191: All outdoor activities must be approved. We have limited possibilities for building nature playgrounds with natural climbing and

play equipment.

ECEC programs sometimes removed trees from an institution's outdoor space in the name of playground safety to reduce children's opportunities for climbing.

376: The local authority has in reality removed all trees. Children are not allowed to climb. The major focus on injuries makes parents anxious and afraid of what type of activities their children are involved in, i.e., walking on slippery surfaces. We still do this, among other things, to teach children to handle different surfaces, but we have to consider this carefully and explain a lot to the parents.

787: We have cut down the trees to avoid accidents due to falling.

698: We have removed two trees that were used by children to climb in the outdoor space and replaced them with a play apparatus.

Some programs replaced trees with playground equipment. Other managers cite financial problems—according to one, there were no replacements of removed trees or playground equipment, leading to a poorer play environment. In general, managers indicated that they find playground regulations and inspections useful to a point. In many cases, the managers described orders from playground inspectors that they considered to be too focused on danger and neglectful of children's need for physical challenges and risky play in an institution's outdoor space.

Restrictions Related to Water

Forty-nine managers noted limitations in the recreational use of water in their institutions. They wrote that they avoid lakes, sea shores, or swimming pools, and they often referred to a lack of the necessary life-saving training among the staff.

392: We never go on field trips near water because this requires the staff to be trained in life saving in the water.

The need to control and supervise children when they visit sites with dangerous areas, such as those related to water, leads to a higher demand for the

presence of adults. Managers noted an insufficient adult-child ratio to ensure safety on field trips as a reason for avoiding sites with watery features.

215: We are more seldom on field trips in forests and by the sea shore due to reduced staffing and the “fear” of not being able to supervise children’s activities.

Although managers mentioned this problem mostly in relation to field trips to the sea and to various lakes, some of them described such limitations at an institution’s outdoor space.

115: The younger children can’t be on the playground when large puddles have formed.

544: The safety focus limits children’s physical activity. As an ECEC institution, we have become more afraid to let children climb, play in nature, jump in puddles, and so on.

Some managers from institutions located near lakes or the sea expressed a wish to use these shores more but said they avoided them because of safety concerns.

Limitations in Field Trips

Twenty-nine managers reported they took fewer field trips because of the focus on safety. The reasons managers gave for their institutions avoiding field trips included safety regulations and safety routines regarding staff-child ratio, staff training, and difficulties in securing safe transportation.

88: Limitations in field trips because parents don’t allow their children to travel on public transportation without safety seats for children.

628: More difficult to go on field trips: the transportation of children in private cars is prohibited. . . .

The managers said that, in previous years, they had used private cars to travel on field trips but that such transport was no longer allowed. This, along with parents’ resistance to public transportation, led some institutions to take

fewer field trips. The demands for specific routines and risk assessments for field trips, according to some managers, were reasons they went on field trips less frequently now than in previous years.

Restrictions Due to Weather and Seasonal Conditions

Twenty-five managers described restrictions related to weather and seasonal conditions. Some of them noted that the institution avoided outdoor activities or field trips in particular weather conditions.

811: We stay inside when the outdoor area is slippery.

However, the limitations in this category mostly related to the equipment or activities allowed under some conditions:

462: Sledding under icy conditions is prohibited.

215: Playground equipment is more often closed because of the requirement of a shock-absorbing surface (frost, ice, etc. make the surface harder).

Some managers said their programs placed limitations on play in outdoor spaces under some surface conditions, while others said their institutions closed down parts of the outdoor space or removed equipment during the winter.

Other Limitations in Physically Active Play

The category of other limitations in physically active play holds fifty-seven more unspecific descriptions. Many of these responses focus on difficulties in providing children with sufficient challenges for motor development.

131: There are fewer challenges for children today. I experience more concerned parents. The younger children get frustrated over being stopped in “dangerous” play. I’m afraid that this safety focus makes it more unsafe for children. They become less competent in mastering “difficult” obstacles.

433: The media focus in today’s society, where you risk being on the

front page of both national and local newspapers if something happens, results in a heightened focus on safety. This limits children’s physical activity for fear of something happening, such as tree climbing, what playground equipment we allow, bicycling, etc.

61: Children may need more physical challenges, but because of high safety demands we have some activities that we can’t allow (unfortunately). The safety hysteria has resulted in a lack of physical challenges for children. They need to be able to handle challenging situations, such as tree and rock climbing, etc.

Some of the managers noted a change in recent years. Many activities that were once allowed are now prohibited. Safety concerns and risk assessment seem to be key in deciding which activities the institutions offered children.

469: Over time, ten to twenty years, we have allowed less and less challenging physical active play in terms of challenging play apparatus, trees, and climbing walls.

517: Today, safety has, to a larger extent, become the deciding factor for selecting and arranging activities. In principle, this is both positive and necessary, but the adults’ attitude to this, and the fear of something happening, can limit children’s physical activity and natural exploration.

53: Children are under constant supervision in a fenced outdoor space. They are allowed little compared to our childhood. The transition from preschool, where they are under continuous supervision, to school, where they are, to a large extent, on their own, can be demanding.

Many managers express concerns over this development and to the extent safety concerns and measures affect both the possibilities for physically active play and everyday life in the institution.

54: Children are more infrequently provided with opportunities to experience exciting “risky” play, such as play in heights, with tools—such as ropes, knives, sticks—and play in dangerous places. A higher focus on safety causes adults in the institution and parents to provide children with insufficient challenges. It’s different today from what it was twenty years ago.

Although many managers resist this loss of risky play to safety concerns and argue for the importance of risky play in the ECEC institution, a considerable number of them describe specific limitations and restrictions resulting from pressure by outside actors and from the fear of injuries.

Discussion

Our findings mainly indicate that Norway's once less risk-averse approach to children's risk taking (Guldberg 2009; Little, Sandseter, and Wyver 2012; New, Mardell, and Robinson 2005) may be changing. The pressure to make children's safety the main focus of play activities seems to be growing in Norwegian ECEC settings. And, as our study shows, many restrictions on and limitations to children's play and activities are now common.

Indeed, we see that it is common for the ECEC staff to meet the pressure of the focus on safety by restricting several types of children's play. As Sandseter (2007) found in her study about the perceptions of both children and ECEC staff concerning children's risky play, each regard play involving heights to be possibly harmful, and the most common response to increasing worries about safety is some restriction on climbing. In this study we found a total prohibition of climbing in some ECEC settings, especially in trees. We also found limitations based on the situation or the features in the play environment—supervision by staff, the height allowed to climb, or the quality of the playground's surface. These findings differ from the less risk-averse attitude Sandseter (2012, 2013) documented among Norwegian ECEC staff in previous studies. A study comparing Norwegian and Australian ECEC practitioners in 2009 and 2010 (Little, Sandseter, and Wyver 2012) found that Norwegian practitioners were much more permissive than their Australian counterparts and allowed—and even initiated—climbing with the children. The results in our study here imply that many Norwegian practitioners have recently become similar to their Australian counterparts and now worry more about children climbing and play involving heights. Similarly, activities involving high speed and rough-and-tumble play, which Sandseter (2007, 2012) had previously found Norwegian ECEC staff viewed as risky but healthy activities, are now restricted or prohibited in some of the ECEC settings in this study. Even though the studies mentioned are based on data from different settings, Norwegian ECEC settings are in fact all very similar and the Kindergarten Act (NMER 2005) and the Framework Plan for the

Content and Tasks of Kindergartens (NMER 2006/2011) applies to all settings.

The results in this study also show that many ECEC settings modify or change their outdoor play environment to prevent children from taking risks in their play. The examples provided by the ECEC managers in this study include both the actual removal of playground equipment, such as swings and climbing nets, and the removal of natural features, such as trees, as well as the decision not to buy challenging new playground equipment that may be too risky in the opinions of playground inspectors. This situation contrasts with earlier reports from Norwegian ECEC practitioners that showed they strongly emphasized children play environments affording a variety of challenges and risky play and argued strongly for the importance of risky play to the healthy development of children (Sandseter 2012; Little, Sandseter, and Wyver 2012). Even though managers worry about the changing focus, this study indicates a movement toward a more risk-averse attitude in Norwegian society. We assume that this rise in more cautious play is not a result of the different settings in each of the different studies.

Another reason we believe that Norwegian ECEC practitioners have become more focused on safety and that this focus influences their practice in the ECEC setting involves results that show how they limit play and activities near water, even puddles on the playground; how they limit field trips because the transportation options are no longer considered safe enough; and how they limit play and activities due to weather conditions, including staying indoors when the outdoor area is slippery or prohibiting sledding on icy surfaces in winter. Once again, this is in contrast to the handling of risk Norwegian ECEC expressed in earlier studies (Little, Sandseter, and Wyver 2012; Sandseter 2007, 2012, 2013). The results of this study show a much greater focus on safety and a more restrictive play practice similar to those we find in many other Western countries (Furedi 2001; Gill 2007; Guldborg 2009; Ball 2002, 2004; Little 2006; Brussoni et al. 2012).

Nevertheless, the answers from the ECEC managers who participated in this study indicate some resistance from ECEC staff toward these changes. We recognize a positive attitude towards children’s risky play (Sandseter 2012, 2013) when managers express frustration over safety pressure from parents, local authorities, the media, and playground inspectors. The practitioners in this study feel that things have changed over the last ten to twenty years, that play environments have therefore become less stimulating and challenging, and that both practitioners and children are frustrated by not having optimal play

opportunities and healthy developmental conditions for children. It appears that the outside pressures to create a greater focus on safety and to restrict risky practices mark play environments in several other Western countries, such as Australia (Little, Sandseter, and Wyver 2012; Little 2010), England (Gill 2007; Guldberg 2009; Ball 2002; Furedi 2001), Canada and the United States (Brussoni et al. 2012; New, Mardell, and Robinson 2005; Smith 1998), now pressure Norwegian play to become more risk averse.

Although this study did not collect data that might directly explain the reasons for this increased focus on safety, it does indicate that a fear of injuries is the main concern: As in other countries, regulations and laws embodied by the people who enforce them (Ball 2002, 2004; Mowat et al. 1998; Little 2006; Chalmers 2003), such as local authorities and playground inspectors, as well as parents' worries (Furedi 2001; Gill 2007; Little, Wyver, and Gibson 2011), have an impact on the kind of play offered to children.

From a wider perspective, this change affects the possibilities for children's play, development, and learning. The exhilarating and positive experiences of engaging in thrilling and risky forms of play (Cook 1993; Cook, Peterson, and DiLillo 1999; Coster and Gleeve 2008; Smith 1998; Stephenson 2003; Aldis 1975; Sandseter 2010b) are limited for children we prohibit from climbing, sledding and sliding, playing in and near water, and playing in generally less challenging environments. These restrictions constitute a loss of an important experience that children seek in their play (Sandseter 2010b), and they also eliminate the opportunity for children to enhance their own risk-mastery skills and learn how to handle situations of risk (Apter 2007; Smith 1998; Adams 2001; Sutton-Smith 1997; Gill 2007). From an injury-prevention perspective, this development seems contradictory because preventing children from approaching risky situations, learning how to handle them (Boyesen 1997), and thereby developing a sound sense of risk (Ball 2002; Stutz 1999; Bertrands and Lavrysen 2014), may well lead to a higher injury occurrence among children at play precisely because they have missed out on this important risk-mastery learning (Kambas et al. 2004; Boyesen 1997; Bertrands and Lavrysen 2014). Following Sandseter and Kennair's (2011) hypothesis about risky play having an antiphobic effect, one may also assume that this development may lead to a higher number of anxiety disorders.

Overall, the results in this study show an increasing focus on safety and an increase in restricting children's risky play, even in a country such as Norway that has been regarded as one of the least risk averse in terms children's play (Guldberg 2009; New, Mardell, and Robinson 2005; Wyver et al. 2010; Wyver

et al. 2012). The irony is that this is also happening in ECEC settings, in which few serious injuries occur (Briss et al. 1994; Leland, Garrard, and Smith 1993; Schwebel, Brezausek, and Belsky 2006; Cummings et al. 1996; Elardo, Solomons, and Snider 1987; Alkon et al. 1999) and in which the supervision of children’s play is extensive and, therefore, reduces the risk of injuries (Rosen and Peterson 1990; Taylor and Morris 1996; Morrongiello 2005; Morrongiello et al. 2006).

To resist this trend, ECEC staff, ECEC owners, politicians, parents, and other care takers need to inform themselves about how restricting children’s risky play and exploration affects children’s health, well-being, development, and learning. Safety regulations and standards must incorporate the importance of risk in children’s play. The concept of risk-benefit assessment, which has been introduced in the UK recently (Ball, Gill, and Spiegel 2013), could be an effective way of balancing both risks and benefits in children’s play and play environments. In the field of ECEC, it is especially important that staff and parents discuss this issue and develop a common and helpful attitude toward children’s play and exploration, thus providing optimal development and learning with reasonable risks.

Limitations and Future Directions

Elements of this study require further discussion. First, we received a low response rate calculated from the total number of ECEC settings in Norway. As noted, this may mean that the ECEC managers who decided to answer the questionnaire were not representative of all ECEC managers in Norway. Nevertheless, an examination of the participating ECEC settings showed that they cover the distribution of demographics of Norwegian ECEC settings as a whole. Another worry about the sample was that not all the participating managers responded to the open-ended question, and we may assume that those responding were more interested in the theme of the question than those who did not answer. Nonetheless, we have aimed to conduct a qualitative study and have analyzed and presented the results wishing more to indicate areas for further discussion rather than to make grand generalizations.

A qualitative analysis also requires caution in drawing conclusions. The process of coding and categorizing textual material relies on the researchers who conduct the analysis. Other studies may have used other codes and categories. In this study, two independent researchers completed the coding process and

also discussed the codes and categories.

Our results argue for a balance between children's safety in play and their need for stimulating and challenging play to optimize development and learning. Having a sensible focus on safety and preventing child injuries are important, but the question is how much we should restrict children's play in doing so. The participants in this study worry that the focus on safety has gone too far, resulting in a lack of physical challenges for children. They also believe the focus on safety has a negative effect on children's risk-managing competence, and they are frustrated that the pressure to make play safe limits the play they can provide children in ECEC settings. Despite a low injury rate (Sandseter et al. 2013), activities that were normal a few years ago among Norwegian children are now restricted or even prohibited in some ECEC settings, as outside actors such as authorities, playground inspectors, and parents now have a stronger influence on the pedagogical work in ECEC at the expense of the professional early-childhood teachers. It thus seems that Norway, once held up as an example of less restrictive attitudes in encouraging challenging play, has joined the disturbing Australian, American, and UK trend toward overcautiousness, trepidation, and fearfulness in adult attitudes toward children's play.

This study highlights the need for more effective strategies in balancing children's safety, on one hand, and their need for and right to challenging and risky play, on the other. This is an important issue for ECEC staff, ECEC owners and politicians, parents, and other caretakers.

REFERENCES

- Adams, John. 2001. *Risk*.
- Aldis, Owen. 1975. *Play Fighting*.
- Alkon, Abbey, Janice L. Genevro, Jeanne M. Tschann, Pamela Kaiser, David R. Ragland, and W. Thomas Boyce. 1999. "The Epidemiology of Injuries in 4 Child Care Centers." *Archives of Pediatrics & Adolescent Medicine* 153:1248–54.
- Apter, Michael J., ed. 2001. *Motivational Styles in Everyday Life: A Guide to Reversal Theory*.
- . 2007. *Danger: Our Quest for Excitement*.
- Ball, David J. 2002. *Playgrounds - Risks, Benefits, and Choices*. Health and Safety Executive (HSE) contract research report 426/2002.
- . 2004. "Policy Issues and Risk-Benefit Trade-Offs of 'Safer Surfacing' for Children's Playgrounds." *Accident Analysis & Prevention* 36:661–70.
- Ball, David, Tim Gill, and Bernard Spiegel. 2013. *Play Safety Forum Risk-Benefit Assessment Form*.

- Bertrands, Els, and Ann Lavrysen. 2014. “Riski’: Facilitating Risk Perception and Competence in Young Children.” Paper presented at The 24th EECERA Conference, “US, THEM, & ME: Universal, Targeted, or Individuated Early Childhood Programs,” Crete, Greece, September 7–10, 2014.
- Bienefeld, Monica, William Pickett, and Pamela A. Carr. 1996. “A Descriptive Study of Childhood Injuries in Kingston, Ontario, Using Data from a Computerized Injury Surveillance System.” *Chronic Diseases in Canada* 17: 21–27.
- Boyesen, Marit. 1997. “Den truende tryggheten.” PhD diss., Norwegian University of Science and Technology.
- Briss, Peter A., Jeffery J. Sacks, Marcie-jo Kresnow, Joann O’Neil, and David G. Addiss. 1994. “A Nationwide Study of the Risk of Injury Associated with Day Care Center Attendance.” *Pediatrics* 93:364–68.
- Brussoni, Mariana, Lise L. Olsen, Ian Pike, and David A. Sleet. 2012. “Risky Play and Children’s Safety: Balancing Priorities for Optimal Child Development.” *International Journal of Environmental Research and Public Health* 9:3134–48.
- Chalmers, David. 2003. “Playground Equipment Safety Standards.” *Safekids News* 21:4.
- Chalmers, David J., Stephen W. Marshall, John D. Langley, M. Jean Evans, Cheryl R. Brunton, Anne-Maree Kelly, and Alison F. Pickering. 1996. “Height and Surfacing as Risk Factors for Injury in Falls from Playground Equipment: A Case-Control Study.” *Injury Prevention* 2:98–104.
- Cook, Scott, Lizette Peterson, and David DiLillo. 1999. “Fear and Exhilaration in Response to Risk: An Extension of a Model of Injury Risk in a Real-World Context.” *Behavior Therapy* 30:5–15.
- Cook, Scott C. 1993. *The Perception of Physical Risk by Children and the Fear/Exhilaration Response*.
- Coster, Denise, and Josie Gleeve. 2008. “Give Us a Go! Children and Young People’s Views on Play and Risk-Taking.” <http://www.playday.org.uk/playday-campaigns/previous-campaigns/2008-give-us-a-go/playday-2008-research.aspx>.
- Cummings, Peter, Frederick P. Rivara, Janice Boase, and Jean K. MacDonald. 1996. “Injuries and their Relation to Potential Hazards in Child Day Care.” *Injury Prevention* 2:105–108.
- DSB. 1996. FOR 1996-07-19 nr 703: Forskrift om sikkerhet ved lekeplussutstyr [Regulation for safety of playground equipment]. Norwegian Directorate for Civil Protection and Emergency Planning: <http://www.lovdato.no/cgi-wift/ldles?doc=/sf/sf/sf-19960719-0703.html>.
- Elardo, Richard, Hope C. Solomons, and Bill C. Snider. 1987. “An Analysis of Accidents at a Day Care Center.” *American Journal of Orthopsychiatry* 57:60–65. doi: 10.1111/j.1939-0025.1987.tb03509.x.
- Furedi, Frank. 2001. *Paranoid Parenting: Abandon Your Anxieties and Be a Good Parent*.
- Geer, John G. 1988. “What Do Open-Ended Questions Measure?” *Public Opinion Quarterly* 52:365–67. doi: 10.1086/269113.
- Gill, Tim. 2007. *No Fear: Growing Up in a Risk Averse Society*.
- Guldberg, Helene. 2009. *Reclaiming Childhood: Freedom and Play in an Age of Fear*.

- Hughes, Bob, and Gordon Sturrock. 2006. *Playtypes: Speculations and Possibilities*.
- Illingworth, Cynthia, Patricia Brennan, Ann Jay, Fadhila Al-Rawi, and Mary Collick. 1975. "200 Injuries Caused by Playground Equipment." *British Medical Journal* 4:332–34.
- Jackson, Kristin M., and William M. K. Trochim. 2002. "Concept Mapping as an Alternative Approach for the Analysis of Open-Ended Survey Responses." *Organizational Research Methods* 5:307–36. doi: 10.1177/109442802237114.
- Kambas, Antonios, Panos Antoniou, G. Xanthi, Roderich Heikenfeld, Kyriakos Taxildaris, and Georgios Godolias. 2004. "Accident Prevention through Development of Coordination in Kindergarten Children." *Deutsche Zeitschrift Fur Sportmedizin* 55:44–47.
- Kyttä, Marketta. 2004. "The Extent of Children's Independent Mobility and the Number of Actualized Affordances as Criteria for Child-Friendly Environments." *Journal of Environmental Psychology* 24:179–98.
- Leland, Nancy Lee, Judith Garrard, and Diane Klein Smith. 1993. "Injuries to Preschool-Age Children in Day-Care Centers: A Retrospective Record Review." *American Journal of Diseases of Children* 147:826–31.
- Little, Helen. 2006. "Children's Risk-Taking Behaviour: Implications for Early Childhood Policy and Practice." *International Journal of Early Years Education* 14:141–54.
- . 2010. "Young Children's Physical Risk-Taking Behaviour during Outdoor Play: The Influence of Individual, Social, and Environmental Factors." PhD diss., Macquarie University, Sydney.
- Little, Helen, Ellen Beate Hansen Sandseter, and Shirley Wyver. 2012. "Early Childhood Teachers' Beliefs about Children's Risky Play in Australia and Norway." *Contemporary Issues in Early Childhood* 13:300–316.
- Little, Helen, and Shirley Wyver. 2008. "Outdoor Play: Does Avoiding the Risks Reduce the Benefits?" *Australian Journal of Early Childhood* 33:33–40.
- Little, Helen, Shirley Wyver, and Frances Gibson. 2011. "The Influence of Play Context and Adult Attitudes on Young Children's Physical Risk-Taking during Outdoor Play." *European Early Childhood Education Research Journal* 19:113–31.
- Mack, Mick. G., Susan Hudson, and Donna Thompson. 1997. "A Descriptive Analysis of Children's Playground Injuries in the United States 1990-4." *Injury Prevention* 3:100–103.
- Morrongiello, Barbara A. 2005. "Caregiver Supervision and Child Injury Risk: I. Issues in Defining and Measuring Supervision; II. Findings and Directions for Future Research." *Journal of Pediatric Psychology* 30:536–52.
- Morrongiello, Barbara A., Michael Corbett, Meghan McCourt, and Natalie Johnston. 2006. "Understanding Unintentional Injury Risk in Young Children II: The Contribution of Caregiver Supervision, Child Attributes, and Parent Attributes." *Journal of Pediatric Psychology* 31:540–51.
- Mowat, David L., Feng Wang, William Pickett, and Robert J. Brison. 1998. "A Case-Control Study of Risk Factors for Playground Injuries among Children in Kingston and Area." *Injury Prevention* 4:39–43.

- New, Rebecca S., Ben Mardell, and David Robinson. 2005. “Early Childhood Education as Risky Business: Going Beyond What’s ‘Safe’ to Discovering What is Possible.” *Early Childhood Research & Practice* 7. <http://ecrp.uiuc.edu/v7n2/index.html>.
- NMER. 2005. *Act No. 64 of June 2005 Relating to Kindergartens (The Kindergarten Act)* https://www.regjeringen.no/globalassets/upload/kd/vedlegg/barnehager/engelsk/act_no_64_of_june_2005_web.pdf.
- NMER. 2011. *Framework Plan for the Content and Tasks of Kindergartens*. http://www.udir.no/globalassets/upload/barnehage/rammeplan/framework_plan_for_the_content_and_tasks_of_kindergartens_2011_rammeplan_engelsk.pdf.
- Peterson, Lizette, Ralph Gillies, Scott C. Cook, Brenda Schick, and Tyece Little. 1994. “Developmental Patterns of Expected Consequences for Simulated Bicycle Injury Events.” *Health Psychology* 13:218–23.
- Phelan, Kieran J., Jane Khoury, Heidi J. Kalkwarf, and Bruce P. Lamphear. 2001. “Trends and Patterns of Playground Injuries in United States Children and Adolescents.” *Ambulatory Pediatrics* 1:227–33.
- Poulton, Richie, and Ross G. Menzies. 2002a. “Fears Born and Bred: Toward a More Inclusive Theory of Fear Acquisition.” *Behaviour Research and Therapy* 40:197–208.
- . 2002b. “Non-Associative Fear Acquisition: A Review of the Evidence from Retrospective and Longitudinal Research.” *Behaviour Research and Therapy* 40:127–49.
- Reja, Urša, Katja Lozar Manfreda, Valentina Hlebec, and Vasja Vehovar. 2003. “Open-Ended vs. Close-Ended Questions in Web Questionnaires.” *Developments in Applied Statistics* 19:159–77.
- Rosen, Beth N., and Lizette Peterson. 1990. “Gender Differences in Children’s Outdoor Play Injuries: A Review and an Integration.” *Clinical Psychology Review* 10:187–205.
- Sacks, Jeffrey J. 1993. “In Rates We Trust.” *American Journal of Diseases of Children* 147:813. doi: 10.1001/archpedi.1993.02160320015004.
- Sandseter, Ellen Beate Hansen. 2007. “Categorizing Risky Play: How Can We Identify Risk-Taking in Children’s Play?” *European Early Childhood Education Research Journal* 15:237–52.
- . 2010a. “‘It Tickles in My Tummy!’: Understanding Children’s Risk-Taking in Play through Reversal Theory.” *Journal of Early Childhood Research* 8:67–88.
- . 2010b. “Scaryfunny: A Qualitative Study of Risky Play among Preschool Children.” PhD diss., Norwegian University of Science and Technology, Trondheim, Norway.
- . 2012. “Restrictive Safety or Unsafe Freedom? Norwegian ECEC Practitioners’ Perceptions and Practices Concerning Children’s Risky Play.” *Childcare in Practice* 18:83–101.
- . 2014. “Early Childhood Education and Care Practitioners’ Perceptions of Children’s Risky Play; Examining the Influence of Personality and Gender.” *Early Child Development and Care* 184:434–49.
- Sandseter, Ellen Beate Hansen, and Leif Edward Ottesen Kennair. 2011. “Children’s Risky Play from an Evolutionary Perspective: The Anti-Phobic Effects of Thrilling Experiences.” *Evolutionary Psychology* 9:257–84.

- Sandseter, Ellen Beate Hansen, Ole Johan Sando, Ingar Pareliussen, and Camilla Kalvatn Egset. 2013. *Kartlegging av hendelser og ulykker som medfører skade på barn i barnehage [Mapping of Accidents That Result in Injuries on Children in Early Childhood Education and Care Settings.]* <http://www.cpsc.gov/PageFiles/104163/PlaygroundSafety.pdf>.
- Sandseter, Ellen Beate Hansen, Shirley Wyver, and Helen Little. 2012. "Does Theory and Pedagogy Have an Impact on Provisions for Outdoor Learning? A Comparison of Approaches in Australia and Norway." *Journal of Adventure Education and Outdoor Learning* 12:167–82.
- Sawyers, Janet K. 1994. "The Preschool Playground: Developing Skills through Outdoor Play." *Journal of Physical Education, Recreation & Dance* 65:31–33.
- Schuman, Howard. 1966. "The Random Probe: A Technique for Evaluating the Validity of Closed Questions." *American Sociological Review* 31:218–22.
- Schwebel, David C., Carl M. Brezaussek, and Jay Belsky. 2006. "Does Time Spent in Child Care Influence Risk for Unintentional Injury?" *Journal of Pediatric Psychology* 31:184–93.
- Smith, Stephen J. 1998. *Risk and Our Pedagogical Relation to Children: On the Playground and Beyond*.
- Stephenson, Alison. 2003. "Physical Risk-Taking: Dangerous or Endangered?" *Early Years* 23:35–43.
- Stutz, Elizabeth. 1999. "Rethinking Concepts of Safety and the Playground: The Playground as a Place in Which Children May Learn Skills for Life and Managing Hazards." In *Playground Safety 1999 Conference Proceedings*, edited by Monty L. Christiansen.
- Sutton-Smith, Brian. 1997. *The Ambiguity of Play*.
- Swartz, Martha K. 1992. "Playground Safety." *Journal of Pediatric Health Care* 6:161–62.
- Taylor, Satomi Izumi, and Vivian Gunn Morris. 1996. "Outdoor Play in Early Childhood Education Settings: Is it Safe and Healthy for Children?" *Early Childhood Education Journal* 23:153–58.
- Teigen, Karl Halvor. 2001. "Hvordan bedømmes risiko og sjanser i hverdagen?" In *På den usikre siden: Risiko som forestilling, atferd og rettesnor*, edited by Dag S. Thelle, Gunnar Breivik, Vidar Enebakk, John-Arne Skolbekken, and Karl Halvor Teigen, 73–132.
- Wyver, Shirley, Paul Tranter, Ellen Beate Hansen Sandseter, Geraldine Naughton, Helen Little, Anita Bundy, Jo Ragen, and Lina Engelen. 2012. "Places to Play Outdoors: Sedentary and Safe or Active and Risky?" In *Children and Childhoods 1. Perspectives, Places and Practices*, edited by Peter Whiteman and Katey De Gioia, 85–107.
- Wyver, Shirley, Paul Tranter, Geraldine Naughton, Helen Little, Ellen Beate Hansen Sandseter, and Anita Bundy. 2010. "Ten Ways to Restrict Children's Freedom to Play: The Problem of Surplus Safety." *Contemporary Issues in Early Childhood* 11:263–77.
- Zhang, Yan, and Barbara M. Wildemuth. 2009. "Qualitative Analysis of Content." In *Applications of Social Research Methods to Questions in Information and Library Science*, edited by Barbara M. Wildemuth, 308–19.