

Research on Instructors at Indoor Play Facility

University of Tsukuba TOKUDA Katsumi
University of Tsukuba MIZUNO Tomomi

I . Introduction

Indoor play facility allows children to play regardless of the weather and they often have personnel to ensure safety and support in playing. Therefore, the popularity of indoor play facility is increasing worldwide, not only in Japan, and the number of facilities are increasing. Especially in Japan, many indoor play facilities were built in the area where playing outside was restricted after the Great Eastern Japan Earthquake, so children can play there safely and comfortably. With such background, researches on the effect and safety of indoor play facilities are often done recently (Mizuno and Tokuda, 2016, Tokuda and Mizuno, 2016, 2017a, b, 2018) . We conduct field research on indoor play facilities in over 75 countries and areas in the world including all prefectures in Japan. In the research, we summarized how parents and children are involved and how they are conversing.

When we categorized the facilities, there are facilities which have play instructors and facilities which does not. In the facility where instructors are present, the instructors play with the children but it is not one-on-one, so parents often play with their child. Also, the parents improve their skills to play with their child by observing the instructors play with their child.

As a general rule, AEON Fantasy Co., Ltd. (hereinafter referred as Company A), who has the most indoor playing facilities in and outside of Japan, employs people with a teaching certificate for kindergarten or as a nursery teacher as instructors (play leader: hereinafter referred as PL). However, from the perspective of utilizing in-house personnel and training as well as career education for the staff, they developed the in-house Kids Garden Play Leader Certificate System so that they can train people as PL even when they do not have the teaching certificate. Also, in the in-house certificate system, they have 16 hours of training on 11 items, (1. Attitude as a PL, 2. Developmental characteristics of children, 3. Sanitation in the facility, 4. Corresponding to accidents and injuries, 5. Knowledge about infectious diseases, 6. How to interact with children, 7. How to interact with children who require consideration, 8. How to make a fun environment, 9. Plays that children under 3 enjoy, 10. Reading picture books and picture-story show, 11. How to interact with parents), have 3 day practical training (15 hours) at the facility and get approved as PL after they pass the final test.

In the PL training, Company A includes practical training by the specialists of pediatric clinical psychology to handle the basic consultations from the parents

appropriately. This is a practice that follow the operation policy of not only to lead the children, but also to get close to the parents' worries and support them (Tokuda and Mizuno, 2017b). The specific content is indicated below, and they have role-play training where one is a parent and one is a PL.

The content of consultation training was how to praise or scold the child, cannot play with other children, wetting the bed, baby talk, stuttering, dominant hand, how to handle rebellious age, being particular about toys, thumb sucking, blinking (tic), being particular, nervous about being away, fighting over toys, cannot lend toys, cannot say hello, say bad things to the neighbors and visitors, jealousy toward their younger sibling, touching their genitals, biting their friend, lying, using dirty words like "stupid" and "poop", small appetite and unbalanced diet, showing TV and video, letting them use smartphones, toilet training, pooping in their underwear, hating sand, dirt, and water, often talks to themselves, asking "why" and "how come" for everything, get fussy when parents are busy, attitude of a parent when the other is scolding the child, taking lessons (piano, swimming, English, Kumon, ballet, painting, and gymnastics), being shy, rebellious, panics when being scolded, always asking the instruction from the mother, vomits when they smell food, not liking the father or men, ripping off the legs of insects, not calm, refuse to draw or color, grandparents give them snack behind the parents' back, mother-in-law complains about the mother's childrearing when they visit, the father does not love on their child, how to raise the child without a father due to divorce (or death), and concerned about developmental disabilities. Furthermore, Company A has not only the training on psychological and educational content indicated above, but also has training on children's diseases and injury by university instructors (nurses) who specialize in pediatric health.

There have been many researches done on the job satisfactions of kindergarten and nursery teachers, but research on people working on this type of facility is non-existent. In this research, we will report the results of questionnaire survey on the instructors (PL) at Company A's facility about job satisfaction and issues to be improved. Also, this paper the summaries of what PLs were consulted by the parents and it refers to the training at Company A. Furthermore discuss what kind of training should be added in the future.

II . Method

(1) Subject

We asked 440 people who work as play leaders at the 54 Kids Garden operated by Company A in Japan to cooperate in the questionnaire survey and 325 responses were collected (74% collection rate).

(2) Procedure

The questionnaire was distributed through the department of Company A who supervise Kid Garden and they were collected per branch. The research was done in February 2019.

(3) Questioned Items

The questionnaire was composed of 32 items, age, sex, years of experience dealing with children, "whether they like playing with children in the facility" (5 level psychological scale, the same for the following), "whether they are fulfilling the role as an instructor", "whether they are worried about children getting injured in the facility", "whether they are good at interacting with the parents", "whether they are good at handling consultations from the parents" as well as rating items on handling children with the tendency of developmental disabilities and relationship with their supervisor and co-workers and free-writing for the rating items. In addition, there was a question on "what kind of consultation they have received from the parents" in free-writing. This survey was conducted after obtaining the approval of the Ethics Committee of the University of Tsukuba Faculty of Medicine (approval number: 1103).

III. Results and Discussion

- (1) The age of the respondents was 38% in their 20s, 31% in their 30s, 20% in their 40s, and 11% in their 50s. 97% were females and 3% were males. 41% had their own children, 23% had experience working at kindergarten, and 48 at nursery school. 41 people became PL from the in-house certificate system (13% of the whole).
- (2) Table 1 shows the results of PL's experience based on the question. 310 people wrote down the length of experience, so it was the subject of statistic processing. 77 people had less than 1 year of experience as PL, 157 had longer than 1 year and less than 6 years, and 76 people had over 6 years.
- (3) For the question that asked, "whether they like playing with the children" in 5 level rating scale, the average was 4.6. When we focus on the years of experience, people who have less than 1 year of experience tend to like playing with children than people with more than 6 years of experience.
- (4) The job of PL is not only to lead the children, but also go into wide range of work such as supporting parents, reception such as processing application to join and collecting admission, cleaning, and event preparation. For the question that asked, "whether they are fulfilling their role", people who have less than 1 year of experience responded "I am worried about whether I am fulfilling my role" than any other group. It does not mean that people with a lot of experience are not worried about it. It is mainly due to not being confident in dealing with children with the tendency of developmental disabilities and feeling that they are not good at reception and handling complaints. Working at kindergarten and nursery school is not suited for segmentation so it is a job that has a wide range of work, but PL has more work that are handled at the office of kindergartens such as accounting and reception, so their worries are significant.

Many PL felt that they are not good at handling complaints from the parents but when we asked the specifics of the complaints, more than half of them were about

reception work. This was followed by children's injury and troubles between children. There are parents who have good relationship with PLs, but there are parents who complain strongly about involvement with children and reception work. As a whole, the degree that PL feels "they are not good at dealing with parents" is not high, but we verified from the response in free-writing that when PLs have received strong complaints, they tend to withdraw from dealing with parents.

- (6) They were not so bewildered about behaviors displayed by children who have the tendency of developmental disabilities such as hyperactive, being particular, not being able to follow direction. However, PLs with more experience are more troubled about the behavior such as "hit other children" often displayed by children with the tendency of developmental disabilities and "cannot understand the direction". These behaviors cause trouble among children. Indoor play facility where parents watch their children the whole time, there are complaints from parents especially when they were "victimized" such as being hit and cut in line.
- (7) For the relationship with the boss or co-worker, they tend not to be troubled.
- (8) Table 2 indicates the number of consultations from the parents and its content. "Delay in language development" was most consulted with 63 cases, followed by "Delay in mental development" with 43 cases. They are almost the same content and the difference is whether they mainly talk about not being able to speak well or slow or inaccurate behavior. The training at Company A deals with behaviors displayed by children with developmental disabilities more and deals less with the children with mental disabilities including delay in speech (single mental disability). At indoor play facilities, they cannot give instruction to the children periodically or continuously so it is only given when they come in. In the future, it needs to be covered in the training how to deal with the children who are suspected to have delay in mental development come in.
- (9) In indoor play facilities, children who are about the same age are often playing at the same time. For parents, it is an opportunity to compare their child to other children. Therefore, they notice that their children cannot do what other children can, and they get worried and consult PLs. "Delay in start walking" (29 cases), "growth of their child (they are small)" and "Delay in crawling" (12 cases for both) are examples of the consultations. It is necessary to practice so that they can tell the parents the growth of children has individual difference and being able to do certain things early does not mean that it is good.
- (10) Company A's Kids Garden has a menu where PLs lead a group play. Some parents are worried that their child did not join the play and consult to the PL. "Their child cannot play with other children", "they are shy about new people and new places" (23 cases for both), and "their child hit other children" (14 cases) are examples of the consultations.

- (11) There are many consultations about the tendency of developmental disabilities for children. Recently, mass media often features the topic of developmental disabilities, and many parents are worried that "their child has the tendency of developmental disabilities." "Having a concern that their child has developmental disabilities" (25 cases), "their child cannot play with other children" (23 cases), "unbalanced diet" (16 cases), "their child hit other children" (14 cases), "their child is not calm" (12 cases) are examples of the consultations. Company A includes children with the tendency of developmental disabilities not only in the training for PL, but also in the training for store managers.
- (12) Some of the consultations indicate that people come there to ask PL what they are worried about or what they want to know. "Baby food" (25 cases), "having a concern about after they start kindergarten or nursery school" (23 cases), "toilet training and not using diapers" (22 cases), "unbalanced diet" (16 cases), and "problems with child's sleep" (10 cases) are some examples of the consultation. For these concerns, parents often researched on their own for certain degree and ask PLs to verify. So, they are looking for a solid response. For this matter, it is difficult to say that Company A provides sufficient training so it is an issue to be solved in the future.
- (13) They have sufficient training for "children's sickness" (4 cases), and "children's allergy" (3 cases) so they are responding to the consultation appropriately. However, this type of questions is often asked to physicians and teachers at kindergarten or nursery school so only few consulted PLs.

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