A Mindful Approach to Childhood Anxiety

by

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Abstract

This project examines the effects of reduced access to unstructured and unsupervised play on children’s mental health. Childhood used to be considered a time in which children learned through exploration and play; however, today many Canadian children live a very different reality. With heightened parental and academic expectations along with fewer opportunities for free play, children are experiencing anxiety and other forms of mental illness in unprecedented numbers. Children are not being afforded the time to learn the skills needed to take control in their own lives and the effects are showing in the rise of mental illness in childhood. This project looks at the current research behind this trend. The practical portion of the paper focuses on the role of schools in the fight against the childhood anxiety epidemic and discusses the use of mindfulness meditation with a class of 22 kindergarten students in an effort to alleviate some of the anxious behaviours displayed at school.
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Chapter 1

Introduction

Background

During my own childhood, I worried about school, homework, sleepovers, friends, dance class – you name it, it was a cause for my concern. I was told by my family that I was a “worry wart”, but it was only as an adult that I learned that I suffered from childhood anxiety. It turns out that I was not alone. According to the Mental Health Commission of Canada (2013a), in 2011 there were 6.7 million Canadians living with mental illness and approximately 1.04 million were children and youth aged 9 to 19 years. This equates to one in four young people experiencing some form of anxiety or depression (p. 7). The life of a child should be carefree: a world rich in play and learning. Unfortunately, children in Canada are experiencing mental health disorders at unprecedented rates. Some anxiety in life is, of course, normal; however, debilitating anxiety affects normal daily functioning, disrupts sleep and can have profound negative effects in the life of the sufferer. When a child is affected, the results can be difficult to witness.

With such high rates of childhood mental health problems, it would follow that as an educator of young children the effects of heightened anxiety would be seen in my kindergarten classroom, and they are. The MHCC (2013a) report, Making the Case for Investing in Mental Health in Canada, looks at children and youth age 9-19 struggling with anxiety and mood disorders; however, the effects of heightened anxiety among younger children of five and six years of age are apparent in my own kindergarten classroom. Every new school year while getting to know my students, I become increasingly aware of children exhibiting anxious behaviours. I often start out the year with thoughts of how to support these children. Anxious children may demonstrate an inability to regulate emotions; they may have nervous tics or complain of physical ailments
such as stomach- or headaches; and often they have difficulty separating from family members in the morning (Ontario Ministry of Education, 2013). During the school day when these children are asked to do “work”, of which they are more than capable, there are often tears because they feel that they cannot do it. In North America’s fast-paced, convenience-driven society, our youngest citizens are experiencing a world that is creating mental angst rather than mental ease (Gray, 2014).

Professional Motivations and Relevance

In my career as a kindergarten teacher, I often have conversations with parents about the anxious behaviours their child is exhibiting in the classroom. When students arrive at school unable to regulate their emotions and calm themselves down, they spend much of the morning in a heightened emotional state and then learning can be difficult. Because of what I have noticed in my classroom, I have been interested to find out why young children are increasingly experiencing mental health problems such as anxiety and how the school system can best support them. Working with young children, I would see them make great strides in their social and physical development by playfully interacting with their environment. I understood that play was important, but I had never, until recently, given any thought to the role of play in children's emotional well-being. The research into the decline in play and the seemingly correlated rise in anxiety in young children is a new area. The work of biological and evolutionary play researcher Dr. Peter Gray (2014; 2013; 2011; 2010), points to a play deficit in childhood being at the root of the rise in childhood mental disorders that are so common in modern-day society. Although no clinical studies have been conducted to look at the correlation between play and anxiety, Gray’s findings are notable. Since children are missing out on opportunities to play they are not learning
essential life skills and as such this play deficiency is being manifested in mental health disorders.

The over-scheduling of children’s free time has become the norm in our society. It is not uncommon for young children to participate in an after-school activity every night of the week. Activities, such as swimming, karate, dance, music, skating, Brownies or Beavers, soccer, T-ball, language classes to name a few, may well be worthwhile pursuits; however, enrolment in daily extra-curricular activities may be proving too much for children. Adults understand the need for downtime in their own lives during which they are free to take part in self-selected activities to decompress after a busy day. It seems that as a society we are not affording this same downtime to our children. Exposing children to many new experiences is a wonderful way to develop their own interests. Unfortunately, modern childhood is one of résumé-building; heightened expectations at earlier ages (Gray, 2013; Hewes, n.d.; Whitebread et al, 2012; Whitebread, 2013); and the lack of unstructured, unsupervised play (Gray, 2014; Wedge, 2011; Clements, 2004). If this is how children are experiencing their world it is no wonder that childhood mental health issues are on the rise. Steps need to be taken to alleviate some of the pressure our children are feeling. Parents and educators need to be cognizant of children's developmental need for self-selected free playtime.

Statement of the Problem

Mental health disorders are multi-layered and as such there are many factors that are contributing to the rise in young children’s feelings of anxiety. One such factor is the decline in opportunities for play (Elkind, 2007; Gray, 2013). The quantity and quality of children’s free playtime has certainly changed in recent years. Looking back at my own childhood, my happiest memories are around the freedom to play. I remember the many carefree hours spent with my
siblings and friends. We lived in a rural setting without access to formal play structures or trampolines. Instead, we came up with our own imaginative play scenarios to pass the time. Little did I know that this free play, away from the watchful eye of adults, was the time in which I was learning to take control in my own life through the acquisition of essential life skills such as social skills, empathy, creativity, problem-solving, innovation and risk-taking (Gray, 2014). To my friends and me our games were purely a source of joyful fun.

Today’s youngsters live a different reality. Gray (2013) states that the “rates of stress-related mental disorders have skyrocketed over the past fifty years” (p. 14) and goes on to say that “the increases are so great, for both anxiety and depression, that approximately 85 percent of young people today have [mental health questionnaire] scores greater than the average for the same age group in the 1950s” (p. 14). The mental health crisis cannot be ignored any longer. It is time to look at the reasons for the mental health breakdown among young people in our society and what parents and educators can do to alter the present trajectory. According to the MHCC (2013a), "children and youth who experience a mental illness are at a much higher risk of experiencing a mental illness as adults" (p.11). Early intervention with anxious children may be key in helping them to successfully manage the disorder and to lead a life where they are in control of their anxiety rather than the disorder controlling them. In the long run, this may save Canada billions of health care dollars (Anderssen, 2015).

The prevalence of anxiety in adolescents and young adults has been well documented in academic literature which will be reviewed in Chapter Two; however, there has been much less research conducted looking at the manifestation of anxiety in children under nine years of age. Mental health issues among young children are more difficult to assess because some behaviours may be developmentally appropriate rather than a disorder needing a diagnosis. However, if
educators are to be well-equipped to deal with the anxious behaviours entering preschools and kindergarten classes, then more research needs to be done with this young age group.

Little is known about the far-reaching effects of lack of free play on the mental well-being of young children. Studies have looked at the link between play and Attention-Deficit Hyperactivity Disorder (Barzegary & Zamini, 2011; Panksepp, 2007) as well as between play and inactivity/obesity (Anderson & Butcher, 2006; Burdette & Whitaker, 2005); however, the relation between play and anxiety, specifically the decline in children’s free play opportunities and the rise in anxiety is an emerging area of research. Brown and Webb (2005) found that play helped children from extremely deprived circumstances make significant gains in their social, cognitive and physical development. These findings are positive for the use of play with anxious children who are not completely deprived of play, but rather lacking in the frequency of their play experiences.

**Purpose of the Project**

Given the prevalence of anxiety in early childhood and the growing concern around the lack of play this project will investigate the following questions:

- Is there a correlation between the rise of anxiety in early childhood and the declining opportunities for free play afforded to young children?
- What shifts have occurred in modern childhood resulting in an increase in childhood mental health issues?
- How can educators promote positive mental health for children in the school setting?

The purpose of this project is to highlight the desperate need for further research in the area of early childhood anxiety. I will look at the current research in the field to determine what is
already known about the reasons for the decline in mental health among young children. I will review the literature surrounding the declining opportunities for free play in early childhood and the link between the lack of play and the increase in rates of anxiety. The project will look at the research around successful school-based strategies focused on improving the mental health of young children.

Educators have little control over the parent realm of the home environment and as such, schools, where children spend much of their day, play a pivotal role in the fight to combat the present childhood mental health crisis. “We need to be brave enough to stand up against the continuous clamour for more schooling. Our children do not need more school. They need less school” (Gray, 2014, 15:16). By targeting school-related anxiety-producing factors such as heightened academic expectations at lower grades; school-readiness skills; and opportunities for free play in the early years, schools could begin to affect change in the battle for childhood mental health. Educators are in a position to make a difference, but they need to be provided with effective strategies to do so.

Summary

The importance of play for children’s learning is well-known; however, the mental health consequences of a childhood devoid of play is a new area of research. Given the prevalence of anxiety in early childhood and the growing concern around the lack of free play, the focus in schools needs to be on including free play into the daily schedule. If children are to “develop intrinsic interests and competencies; learn how to make decisions, solve problems, exert self-control, and follow rules; learn to regulate their emotions; make friends and learn to get along with others as equals; and experience joy” (Gray, 2011, p. 443) then they need to be allowed the time in which to practice these skills.
The time has come to make a change in the lives of children in our society. It is completely unacceptable to continue in the same way while children get more and more anxious by the day. If we are to make a difference, educators must take up the challenge of creating the much needed time and space for children’s open-ended play to flourish at school. If we do not make this a priority, we face the unfortunate risk of more of our young children falling victim to debilitating mental illness.

In the chapters that follow I will address the rise in childhood anxiety by looking at the shift in modern childhood from one of play and exploration to a focus on heightened expectations and academic success. Chapter Two will review the current literature around play, childhood anxiety and the societal changes thought to be driving the childhood mental health crisis. The technique of mindfulness will be introduced with a look at the current research understandings around the use of such a strategy with anxious children in a classroom setting. Chapter Three considers how schools might begin to make a difference in alleviating childhood anxiety and promoting positive mental health at school. The practical portion of the project looks at the addition of mindful breathing to the school day in a kindergarten class of 22 students and discusses the potential outcome of such a change. In order to share the results of the project with other interested educators, a PowerPoint presentation (See Appendix C) will be used to disseminate the findings from the current literature as well as introduce some mindful awareness techniques and resources that could be used successfully with children. Chapter 4 is a personal and professional reflection on the Masters of Education journey looking back at my teaching practice and looking forward to the changes I hope to incorporate.
Chapter 2

Literature Review

The following review will present the current literature on the rise in childhood anxiety disorders; the decline in children’s free play opportunities; and the correlation between the two. The following research questions will guide this review:

- Is there a correlation between the rise of anxiety in early childhood and the declining opportunities for free play afforded to young children?
- What shifts have occurred in modern childhood resulting in an increase in childhood mental health issues?
- How can educators promote positive mental health for children in the school setting?

The research into the decline in play and the seemingly correlated rise in anxiety in young children is an emerging area of concern for educators and researchers. There are studies examining the rise of childhood and adolescent anxiety as well as the declining opportunities for children’s unstructured playtime; however, a link between the two has been less documented. Although no clinical studies have yet been conducted looking into the correlation between decline of play and the rise in anxiety, the ever-worsening childhood mental health crisis (MHCC, 2013a) necessitates that the topic be looked at more closely.

Rise of Anxiety in Early Childhood

Before the 1990s, it was believed by the medical community that anxiety rarely impacted children (Rapee, Schniering & Hudson, 2009). Now, however, it is understood that “anxiety disorders comprise the most common disorders of childhood and adolescence and can involve marked impact on a child’s development” (Rapee, Schniering & Hudson, 2009, p. 1). In the
TEDx Talk, *The Decline in Play and the Rise of Mental Disorders*, biological and evolutionary play researcher, Peter Gray (2014) states that “children are more depressed today than they were during the Great Depression [and] they are more anxious today than they were during the Cold War . . .” (11:53). Free from these external threats, children should be faring better than in generations past. As a society, we have access to health care, clean water and fresh food, and citizens are more highly educated than during previous generations and yet, individuals are suffering from serious mental health disorders at alarming rates (MHCC, 2013a). It seems that “today’s child has become the unwilling, unintended victim of overwhelming stress – the stress borne of rapid, bewildering social change and constantly rising expectations” (Elkind, 2001, p. 3).

In an analysis of data gathered from anxiety questionnaires administered to children and college students between 1952 and 1993, Twenge (2000) found an increase in the prevalence of anxiety in both age groups. According to the author, the rate of “anxiety is so high . . . that normal samples of children from the 1980s outscore[d] psychiatric populations from the 1950s” (p. 1018). To account for the rise in anxiety over time, Twenge looked at the three main factors: overall (environmental) threat; economic threat; and social connectedness. The findings showed that among both groups, anxiety scores had risen significantly with the increase being attributed to low social connectedness and high environmental threat rather than economic factors.

If, as Twenge (2000) suggests, “anxiety will decrease when threat decreases and social connectedness increases” (p. 1018) it falls to adults to create the environments in which children can learn and refine their social skills through playing with other children. According to Gray (2014), “from a biological-evolutionary perspective, play is nature’s means of ensuring young mammals including young human beings, acquire the skills that they need to acquire to develop
successfully into adulthood” (3:38). Children need to be permitted the time to explore the world through play to enable them to navigate it as adults. Now more than ever before, children live under the microscope of watchful adults. They attend before- and after-school care; take part in music and dance lessons; and are on sports teams. Their outdoor play tends to involve adult-designed, imagination-limiting playground structures. Gone are the days of being sent out to play with only one expectation – to be home before the streetlights come on (Longley, 2014).

In an analysis of the predictors of childhood anxiety disorders, Wichstrøm, Belsky and Berg-Nielsen (2013) studied two groups of Norwegian preschool children looking at the role of child, parent and peer factors in the development of childhood anxiety. The parents of 1000 four year olds were interviewed and the children’s preschool teachers rated their social abilities. Observations of the child’s level of attachment as well as the parent-child relationship were recorded and the children were reassessed for signs of anxiety two years later. The results showed that future anxiety disorders can be detected among preschool-aged children. Wichstrøm and colleagues (2013) found that “behavior [sic] inhibition, parental anxiety, ADHD, peer victimization and low social skills during the preschool age have unique effects on anxiety disorders in the first grade” (p. 1335). These findings point to the need for preschool and school-based intervention programs targeting the social interactional abilities of young children and the prevention of victimization. The researchers posit that prevention efforts in these areas could reduce the risk of young children developing anxiety disorders. Early detection and treatment of mental health issues in vulnerable children is particularly important in the long-term mental health of individuals (Ontario Ministry of Education, 2013; MHCC, 2013a; Mian et al., 2011).

Even though great strides have been made in reducing the stigma surrounding mental health issues, it still exists (MHCC, 2013b). This is unfortunate because the lack of dialogue can lead to
misinformation about the signs and symptoms of anxiety as well as possible causes of the disorder. To be able to make a difference in the lives of young anxiety sufferers, early intervention is key (Ontario Ministry of Education, 2013; MHCC, 2013a; Mian et al., 2011). An in-depth look at the knowledge that parents and Early Childhood Educators possess regarding mental health issues and the manifestation of symptoms could increase early diagnosis. Leaving anxiety untreated can make life extremely difficult for families and since “childhood anxiety has a moderate to high impact on functioning . . . the largest impact on child anxiety is on family processes” (Rapee, Schniering & Hudson, 2009, p. 312). Families often struggle to deal with the effects caused by a child’s anxiety. Educating parents of young children who are suffering with anxiety could help to alleviate some of the stress placed on the whole family.

**Locus of control.**

Researchers have learned that “anxiety and depression correlate strongly with individuals’ sense of control or lack of control in their lives” (Gray, 2011, p. 449). Adults who feel that they have a role in the direction of their lives are less likely to feel anxious or depressed compared to those who believe that external forces are in control. Rotter (1966) developed the Internal-External Locus of Control Scale which consists of a questionnaire with 23 pairs of statements. In each pair, one statement supports an internal locus of control, or control by the individual, while the other supports the belief that external circumstances are in control. People react differently to events in their lives which Rotter (1966) asserted could be explained by “the degree to which the individual perceives that [a] reward follows from, or is contingent upon, his own behaviour . . . versus the degree to which he feels the reward is controlled by forces outside of himself and may occur independently of his own actions” (p. 1).
Twenge et al. (2004) looked at the changes over time of the locus of control amongst college students as well as children and adolescents. The researchers gathered data from 18,310 American college students who had filled in the Internal-External Locus of Control Scale between 1960 and 2002. Twenge and colleagues found that over this time period, college students believed that their fate was controlled by factors out with their control. In the second part of the study, the researchers were interested to investigate whether this trend towards externality was the same for younger children, and it was. They looked at 6554 elementary and middle school students in Grades four through eight who, between 1971 and 1998, had completed a locus of control scale adapted for young people, the Children’s Nowicki-Strickland Internal-External Control Scale (Nowicki & Strickland, 1973). The study showed that children as young as nine feel that they are not in control of their own lives and that external forces, rather than their own efforts, are in charge (Twenge et al., 2004). By looking at the changes evident in internality/externality over this time period, the researchers noted the wider social trends as an explanation for this shift. They found that “in general, children have been increasingly less protected from the adult world, a situation likely to lead to young people who are more cynical and less idealistic . . . [which points] to greater externality over time” (p. 311).

According to Herman et al. (2009), schools can also have an effect on a student’s feeling of control, or lack thereof, in their own lives. They found that “unpredictable, unsupportive school environments contribute to the emergence of depressogenic conditions including lowered perceptions of control” (p. 437). With children spending many of their waking hours within the confines of the classroom, parents and educators need to ensure that schools are working to ameliorate the current childhood mental health situation rather than exacerbating it as Herman and colleagues suggest. Since locus of control is “usually seen as a way of viewing the world
(rather than strictly a personality trait)” (Twenge et al., 2004, p. 315), it means that with effort it can be altered. If children are to learn to have an internal locus of control and to be more emotionally resilient then they need to be given opportunities in which to play. During childhood, it is through play that a child learns to “solve their own problems, control their own lives, develop their own interests, and become competent in pursuit of their own interests” (Gray, 2010, para. 13). When children are deprived of unstructured, uninterrupted play experiences, the only realm in childhood in which they actually can be in control in their own lives has been removed. Wedge (2011) suggests that the loss of creative play in childhood affects a child’s developing sense of self and that in the U.S. “the lack of opportunity for unstructured creative play is a tragic loss for [the] country’s children and may even be contributing to the astonishingly rapid rise of childhood depression” (para. 7).

**Decline in Play**

There has been a steady decline over the last 50-60 years in the frequency of children’s free playtime. Children in the 21st Century are missing out on this developmentally imperative time due to the increased focus on schooling and structured play, such as sports (Gray, 2014). Gray (2010) hypothesizes that “the generational increases in [external locus of control], extrinsic goals, anxiety, and depression are all caused largely by the decline, over that same period, in opportunities for free play and the increased time and weight given to schooling” (para. 12). Hewes (n.d.) agrees that “the priority given to the early acquisition of academic skills is [a] threat to children’s play [and] this emphasis often constrains and limits the scope of the learning that unfolds naturally in play” (p.1). Academic and parental expectations, standardized testing and the push for curricular outcomes to be covered in earlier grades are behind the loss of playtime at
school and at home. Time once set aside for free play is increasingly swallowed up by pursuits deemed more academically worthy (Hofferth & Sandberg, 2001).

Children’s free time is increasingly being filled up with academics and extra-curricular activities (Brown et al., 2011; Elkind, 2007) and this over-scheduling is beginning to take its toll on children’s mental health (Gray, 2013). Hofferth and Sandberg (2001) looked at the changes in the way American children spent their time between 1981 and 1997. By way of previously completed 24 hour time diaries, the authors were able compare the lives of two cohorts of children: 222 children from 1981 and 2119 children from 1997. The study involved looking at the overall differences in children’s time use as outlined in their diaries as well as the overall demographic changes in society. They noted that between 1981 and 1997 there was an increase in the number of mothers in the workforce and an associated rise in the number of children enrolled in preschool and daycare situations. There was also a rise in divorce and parental education levels. The results of the study found that over the 16 years, due to these societal changes, there was a pattern of increased time spent in structured activities such as school, day care, sports and art activities and a reduction in time spent in unstructured play and passive leisure. Their findings revealed that between 1981 and 1997 children’s free time declined by 12 percent (p. 205) and the amount of time children spent playing declined 16 percent (p. 208). This alarming trend has certainly affected the quantity and quality of children’s play experiences. In a follow up study, Hofferth (2009) explored the changes in children’s participation and in time spent in a variety of activities from 1997 to 2003. Her findings, in keeping with the trend from her previous study, showed a decrease in children’s discretionary time. Time for reading and studying increased whereas participation in sporting activities declined.
In response to what they perceived as a lack of research on the beliefs of children about their own busyness and stress, Brown et al. (2011) looked at the activity patterns of children aged 9-13 to determine how children viewed their free time, extra-curricular activities and stress levels. The children and young adolescents answered ten questions about the type of play in which they participated. The findings suggest that “having more activities, particularly 3 or more, doubled the likelihood that children will say they are stressed by all they do” (p. 577). When given the choice of one extra-curricular activity, 45 percent of the children chose to hang out or play with friends. Children love to play and when given the opportunity to do so with friends they are not only happy, but learning as well (Gray, 2013). “From a biological-evolutionary perspective, play is nature’s means of ensuring young mammals including young human beings, acquire the skills that they need to acquire to develop successfully into adulthood” (Gray, 2014, 3:38) and as such children need to be permitted the time to explore the world through play to learn how to navigate it as adults.

**Heightened expectations.**

One factor contributing to the rise in anxiety and the decline in play opportunities is the elevated academic expectations placed on young children (Cheung, 2015; Elkind 2007). There has been a shift in the way childhood is viewed by society. It has become a period of résumé-building rather than a time dedicated to play and exploration (Gray, 2013). Learning through play in the early years is becoming a highly contested topic in the mainstream media (Boesveld, 2013; Cheung, 2015; Kohnmay, 2015). The role of kindergarten used to be to expose children to school in a playful way in preparation for the academic expectations of Grade One. Now, however, the pressure on children to succeed, even in kindergarten, is intense and they are being prepared for kindergarten and preschools (Cheung, 2015).
Anxiety is becoming common in the youngest learners entering the school system each year. Many parents are more determined than ever to have their child stand out by preparing them in advance for the competition of formal schooling (Cheung, 2015). There has been a push for children to know their ABCs and 123s before kindergarten entry (Boesveld, 2013). The kindergarten curriculum has not changed in response to full day kindergarten; however, with more hours at school, the end-of-kindergarten expectations have become more similar to outcomes historically seen in Grade One (Bassok & Rorem, 2014). There is strong parental pressure for kindergarten teachers to have students reading and writing by the end of the year. Certainly these academic expectations vary among schools, but parent-teacher conferences are often spent answering parents’ questions about how the teacher plans to challenge their four year old who is already reading and doing math equations. In his article Whitebread (2013) discusses the early age at which a child begins formal instruction in reading and the “. . . clear link with increased indicators of stress and mental health problems” (para. 4). He notes that by middle school there is no difference in the abilities of children who started reading instruction at either age five or age seven (para. 6). Similarly, Hirsh-Pasek (1991) found that children who attended an academic preschool were at no academic advantage later in their schooling compared to those who attended a play-based preschool. In fact, the most obvious difference between the two groups was that those children who had been in the academically-focused early learning environment lacked creativity; were at higher risk for test anxiety; and had a negative view of school. The traditional schooling and those well-intentioned individuals involved in it seem to be placing undue stress on young learners in the name of education and high academic expectations all the while jeopardizing their mental health.
Australian researchers, O’Gorman and Ailwood (2012), investigated parents’ views of play in the early years, specifically during the Preparatory (Prep) Year (year before Grade One). It was found that the parents held differing opinions of what constitutes play and its value in the early learning environment. The authors suggest that this is due in part to the “problematic nature of defining play and identifying [play’s] value as a vehicle for learning.” (p. 268). The majority of parents participating in the study believed that the Prep Year was a better choice for their children than a play-based preschool because of the reduction of play. The parents felt that “play is useful for social development, but not for ‘real learning’ that prepares children for the future . . . [and] that it would be ‘crazy’ to provide play in Prep when children are at an age when they are sponges” (p. 271).

The idea of the young child as a learning sponge is addressed in the book *The Power of Play* written by David Elkind. Elkind (2007) writes that there are three misunderstandings about the way in which children learn which he names as theories of learning and instruction (p.91). Elkind suggests that those who subscribe to the little sponge theory (p. 95) of children’s learning believe that children learn in the same way in which adults process new information. Brain research shows that brain growth in young children is rapid and proponents of this think that during this period, we should “throw as much [information] as we can at them” (p.97). Unfortunately, in many educational centres, this understanding of learning is what drives early childhood curriculum and instruction. As in the Australian study (O’Gorman & Ailwood, 2012) previously mentioned, the idea that children are little sponges also affects the beliefs and actions of parents who have high academic expectations for their young children. Such parents are of the understanding that play-based programs are a waste of academic time because of their “focus on
‘playing, painting, singing and dancing’ at the expense of ‘structure’ and academic learning” (p. 271).

In Hong Kong, it is becoming common for parents to enrol their children in preparatory classes for nursery (preschool) interviews because the competition is fierce to secure a place at a nursery or kindergarten in Hong Kong (Cheung, 2015). Young children are expected to amaze interviewers with their knowledge, behaviour, verbal skills, eye contact and manners. Parents pay vast sums of money for interview prep classes for infants as young as eight months (Cheung, 2015). Early childhood educators (ECE) in Hong Kong are concerned that children are being pushed to perform. Cheung (2015) identified one such ECE who said that she “worries that early education has become too commercial and too demanding . . . [because] that’s not how children learn” (para. 30).

In response to the “growing impression among practitioners, researchers and the media that in the past two decades preschool and kindergarten classrooms have rapidly become more academically-oriented” (Bassok & Rorem, 2014, p. 4), researchers tracked changes in public school kindergartens between 1998 and 2006. To assess these changes, four key components were used: “teacher’s beliefs about school readiness and kindergarten learning; time allocated to core subjects; curricular coverage; and assessment practices” (p. 1). The authors used this information to compare elements of kindergarten classrooms in 2006 to those in grade one classrooms in 1998. They found significant changes in all areas studied, notably that kindergarten teachers in 2006 have heightened expectations, such as letter and number knowledge, for children starting kindergarten.

Bassok and Rorem (2014) clearly show the “academicization in kindergarten” (p. 20) making these findings valuable for current preschool and kindergarten educators. Changes to these
learning environments may have been subtle over time, but when contrasted with previous pedagogical practices, the changes become obvious. Elkind (2001) coined the term “hurrying” to describe the process of children increasingly being pushed by parents and educational institutions to learn more academic content at younger ages. He states that “the more hurrying demands are made on a child, the more likely it will be that the child will be overstressed” (p. 165). If children are not given an outlet, in the form of free play, for this stress then they face the risk of developing mental health issues as a result (Gray, 2013).

Along with biological factors, Rapee, Schniering and Hudson (2009) suggest that a child’s immediate environment can play a role in the manifestation of anxiety symptoms. In twin studies it was found that “a considerable influence in the development of anxiety comes from environmental factors” (p. 315). At school, children face an unfamiliar world. Never before have they found themselves in a class with 21 other children (in British Columbia) and only one adult. Ladd, Herald and Kochel (2006) found that:

Because the adult to peer ratio is often smaller in kindergarten classrooms than it is in family and preschool environments, interactions with peers become more common than those with adults and competition for adult attention increases . . . the result is that, in kindergarten, children are under greater pressure to succeed among equals. They must succeed at forming relationships with agemates while also competing with peers for resources and recognition. (p. 118)

These young children are spending their school days in a crowded and stressful environment where the pressure is on for them to push themselves forward to be noticed.
Many kindergarten students may be academically successful, but when it comes to social competence they falter (Webster-Stratton & Reid, 2004). Since “mounting evidence suggests that executive functions (EFs) and self-regulation . . . play critical roles in forecasting children’s long-term outcomes, success in school, and in their social-emotional competence above and beyond IQ” (Schonert-Reichl et al., 2011, p. 4) parents and teachers need to be well-versed in social and emotional learning and how it is the foundation of success at school and beyond. Raver (2002) found that “young children’s emotional adjustment matters. Children who are emotionally well-adjusted have a significantly greater chance of early school success while children who experience serious emotional difficulty face grave risks of early school difficulty” (p. 3). Increasingly, young children are not learning social and emotional competence at home because of the lack of time devoted to self-initiated play (Gray, 2013). Without this free play, the task falls to educators to teach young students a repertoire of self-help tools to draw upon when anxious or fearful (Webster-Stratton & Reid, 2004).

**Play deprivation.**

As a result of political unrest, there have been cases where children have been completely deprived of play. The work of Brown and Webb (2005) looks at the play development of children aged 1 to 10 years who had been abandoned at a Romanian orphanage. The authors studied the effects of daily play on the 16 children who, up until the researchers’ arrival, had spent their time tied in cribs with little human interaction. At the time of contact, the children were malnourished and had failed to reach developmental milestones. The original intention of the project was to alleviate some of the suffering experienced by the orphans, but with only the introduction of a daily play program to lives of the children there were dramatic social, physical and cognitive changes. According to Brown and Webb (2005) the children “no longer sat
rocking, staring vacantly into space. Instead they had become fully engaged active human beings” (pp. 139-140). The work of Brown and Webb sheds light on the importance of and need for play in children’s social and emotional development and the tragic reality of an early life devoid of it.

**Elimination of play at school.**

Wenner (2009) suggests that there are three main reasons why children have a need for play “1. Childhood play is crucial for social emotional and cognitive development; 2. Imaginative and rambunctious ‘free play’, as opposed to games or structured activities, is the most essential type; 3. Kids and animals that do not play when they are young may grow into anxious, socially maladjusted adults” (p. 24). For many children, recess is the only time in the day when they have an opportunity to interact freely with peers (Jambor, 1994). Unfortunately, with the push for school accountability, schools are under pressure to have students perform well on standardized tests. As a result many children have been experiencing a shift away from recess in favour of time being used for academic subjects such as reading, writing and math (Adams, 2011; Elkind, 2007; Gray, 2013; Jambor, 1994; Jarrett et al, 2009; Patte, 2010); however, this line of thinking is misguided. According to Adams (2011), “no research supports the notion that test scores go up by keeping children in the classroom longer, but there is plenty of evidence that recess benefits children in cognitive, social-emotional, and physical ways” (para. 20). This is echoed by Jarrett and colleagues (2009) who noted that no research showed that children did better on tests by staying indoors all day; however, the benefits of recess to children’s overall development were clear. Not only does the elimination of recess contribute to the childhood obesity issue (Anderson & Butcher, 2006), children are expected to sit and learn for extended periods of time putting them at an increased risk of being diagnosed with Attention Deficit Hyperactivity
Disorder (Gray, 2013; Patte, 2010). Jambor (1994) points out that children need time during the school day to play in order to “actively confront, interpret, and learn from meaningful social experiences” (para. 13). Like Gray (2013), Jambor (1994) sees play as an educational experience in which children learn to compromise and negotiate in order for the play to continue. Such skills cannot be explicitly taught to children; rather they are learned through direct experiences with social play situations. The removal of recess from the school day results in less time for children to participate in free play. This play deficit creates a world in which children have no time to practice the all important life skills which aid in healthy social-emotional development (Gray 2014, 2013).

**Safety and play.**

Gray (2011) draws attention to the fact that children’s development benefits when they play unsupervised; however, with safety concerns and legal ramifications as they are, schools have become safety conscious. During the school day, children often lack the opportunity to take part in unstructured free play and children’s playtime is watched very closely by recess supervisors. As soon as a child is involved in “unsafe” behaviour or touches another in a play move that is deemed inappropriate the game is ended as an adult arrives on the scene. As the research shows, children’s play opportunities are rapidly declining (Clements, 2004; Hofferth, 2009; Hofferth & Sandberg, 2001) so children are not playing enough outside of school. If their play in school is closely monitored, children have no realm in which to learn the essential life skills that free play teaches (Gray, 2013). In an interview in the American Journal of Play, author and journalist, Hara Estroff Marano, states that “the decline in play . . . coincides with an increase in parents’ monitoring, directing and managing their children” (Marano, 2011, p. 435).
Children’s safety has become the top priority in modern parenting so much so that we are creating risk-averse children (Elkind, 2007; Gray, 2013; Marano, 2004). There is a “continuous rise in adults’ belief that unsupervised play is dangerous” (Gray, 2013, p.10). In a multinational survey (Family, Kids, & Youth, 2010) children’s development and play were examined. Through web-based interviews, parents and children in 25 countries were questioned. One area of interest to the researchers was that of safety and risk-aversion. According to the report, “children’s freedom is curtailed by an overprotective and anxious view of children’s safety” (p. 9). Of the parents surveyed, 49 percent answered that they are concerned that their children are in danger of being abducted by child predators.

Fortunately, child abductions by strangers are rare in Canada (Schwartz, 2013); however, it may not seem that way. When the unthinkable does happen, the media coverage instils fear into all parents. Australian journalist, Griffin Longley (2014), states that “modern parents are marinated in fear” (5:34). It is this fear and overall “parental angst [that] leads to the overprotection, overscheduling and overprogramming of contemporary children” (Elkind, 2007, p. 64) all of which obstruct children’s opportunities for self-initiated free play. Wrapping children in cotton wool and removing all of life’s obstacles from their path may make parents feel good, yet is it creating a “nation of wimps” (Marano, 2004, p. 61). Overprotective parents want the best for their children and believe they are helping them to succeed in life; however, Marano (2004) disagrees. She argues that:

Taking all the discomfort, disappointment and even play out of the development, especially while increasing pressure for success, turns out to be misguided by just about 180 degrees. With few challenges all their own, kids are unable to forge their creative adaptations to the
normal vicissitudes of life. That not only makes them risk-averse, it makes them psychologically fragile, riddled with anxiety. (p.61)

Clements (2004) looked at the status of outdoor play and found that there has been a shift in the childhood experience today compared to a generation ago. In this study, Clements surveyed 830 mothers to discern the similarities and differences between their own outdoor play memories and the present play activities of their children. Based on the results, children today spend much less time involved in outdoor play experiences than did their mothers as children. Clements (2004) noted that “play is often considered by parents and educators to be the most natural part of childhood; [however, her] survey conclusions help to validate the perception that children today do not play as often as children did in the past” (p. 72). This suggests that parents know that their children should be playing, but due in part to safety concerns and busy home lives there is no time given to free play. According to the ParticipACTION Report Card on Physical Activity for Children and Youth (2015):

We may be so focused on trying to intervene in our children’s lifestyles to make sure they’re healthy, safe and happy, that we are having the opposite effect. We call this the protection paradox. We overprotect kids to keep them safe, but keeping them close and keeping them indoors may set them up to be less resilient and more like to develop chronic diseases in the long run. (p. 3)

Marano (2004) agrees with this finding saying “unequivocally that what creates anxious children is parents hovering and protecting them from stressful experiences” (p. 66).

Positive Mental Health at School
Gray (2013) asks the question: “How did we come to the conclusion that the best way to educate students is to force them into a setting where they are bored, unhappy, and anxious?” (p. 19). Educators have little control over the parental realm of the home environment and as such schools play a pivotal role in the mental health of students. Although there is a lack of research into the signs, symptoms, causes of anxiety in young children under the age of nine, the research with older children is clear: if children are to be mentally healthy, they need to be given opportunities to play (Gray, 2013; Elkind, 2007).

Children are lacking in unstructured, unsupervised, imaginary play (Gray 2014); however, in their work with Romanian orphans, Brown and Webb (2005) found that even a structured and supervised play environment can have profound positive effects. There are some obvious differences between children raised in typical North American environments and the young children who became part of the play work program in Romania; however, frequent access to structured and supervised play opportunities may yield better results than no access at all. If as, Elkind (2007) states, “all children use play therapeutically as a way of dealing with stress” (p. 113), educators, hoping to make difference, must take up the challenge of creating the much needed time and space for children’s open-ended play to flourish. If this is does not become a priority, more of our young children face the unfortunate risk of falling victim to debilitating mental illness. Further research on children suffering from anxiety would be beneficial to identify the type of play best suited to anxious children as well as the amount of time required in order to see positive results. With concerns around the safety of unsupervised children, it may be difficult for educators to embrace the idea of allowing their students complete free reign; still, within their own classrooms, teachers could endeavour to find out whether increased playtime during the school day actually makes a difference in the lives of young anxiety sufferers.
In light of the research, the focus in schools should be to include free play into the daily school schedule. If children are to “develop intrinsic interests and competencies; learn how to make decisions, solve problems, exert self-control, and follow rules; learn to regulate their emotions; make friends and learn to get along with others as equals; and experience joy” (Gray, 2011, p. 443) then they need to be allowed the time in which to practice these skills. In British Columbia, teachers are mandated to include 30 minutes of Daily Physical Activity (DPA) in their schedules (BC Ministry of Education, 2011). This is a start to getting children to be more active; however, DPA guidelines suggest that this time be used for endurance, strength and flexibility activities (BC Ministry of Education, 2011). The 30-minute time slot could be the perfect opportunity in which to allow children to initiate their own play.

**Mindfulness training in early childhood.**

Although introducing more play into the school day would be a positive change for all children, especially those who are suffering from anxiety, it may not always be feasible due to school schedules, space or weather. It becomes imperative, then, that children are taught practical strategies to better manage their stress and to cope with their daily reality. Research shows that Mindfulness is one such strategy being used in classrooms with positive results (MindUP, 2011).

Mindfulness has recently become a buzz word in education (Hornich-Lisciandro, 2013; Lunau, 2015; Zelazo & Lyons, 2010, 2011), but “diverse contemplative traditions have long held that regular mindfulness practice increases awareness of one’s internal and external experience and promotes reflection, self-regulation and caring for others” (Jennings, 2010, para. 4) all of which support learning. Kabat-Zinn (1994), one of the first to use mindfulness to address issues associated with anxiety and depression, describes it as “paying attention in a particular way: on
purpose, in the present moment, and non-judgmentally” (p. 4). The key to mindfulness is developing an ability to focus on the breath and the present moment rather than dwelling in the past or planning for the future. By encouraging practitioners to pay attention, mindfulness “has the potential to decrease stress, decrease depression, and increase health and happiness” (Hawn as cited in Suttie, 2007, p. 31).

Measuring the efficacy of such an intervention has proven difficult. Until recently, the results were purely experiential with researchers relying on the self-rated changes of participants’ behaviour or mood. Now the neuroplasticity of the brain can also be observed. In a study conducted by Hölzel and colleagues (2011), MRI results showed structural changes in the brains of participants after completing an eight-week Mindfulness-Based Stress Reduction (MBSR) course comprising of weekly meetings and daily meditation practice. The brain changes observed were in areas responsible for anxiety and stress; learning and memory; self-awareness; compassion; and introspection (McGreevey, 2011, para. 5-6).

Mindfulness has been used successfully in the treatment of adults with anxiety or depression (Kabat-Zinn, 1994; Hölzel 2011); however, “there is a growing need to examine systematically whether mindfulness training also has beneficial effects during childhood” (Zelazo & Lyons, 2011, p. 62). Lee et al. (2008) looked at the effects of Mindfulness-Based Cognitive Therapy (MBCT) on children’s anxiety and found that by focusing on the present “children who tended toward depressive or anxious thinking learned to make a conscious choice to redirect their attention . . . back to the present moment” (p. 21) and thereby alleviated some of their negative emotions. Brown et al. (2011) suggest that “children and parents may benefit from instruction in stress management and coping” (p. 579) and mindfulness may be just the tool to help in this area.
Making mindfulness accessible to children takes a little creativity; however, Zelazo and Lyons (2012) suggest using props to encourage mindful awareness when working with children. Placing a stuffed toy on a child’s stomach to “see” the breath or listening to a chime and indicating when they can no longer hear it are “exercises [that] provide an opportunity to emphasize easily overlooked aspects of [children’s] experience” (p. 157). Greenland (2010) in the book *The Mindful Child* describes how, after finding few child-appropriate resources, she adapted mindfulness techniques from her own personal practice for use with children. By teaching at various kids’ clubs and schools, she fine-tuned her breath awareness techniques for young children. She claims that most young people are “well able to practice mindfulness awareness when they receive clear and concrete instruction . . . [and] this is especially true when the practices are fun, and the kids begin to see for themselves how mindfulness can help them navigate even the most challenging real-life situations” (p. 9).

One program in which mindfulness training has been adapted for use with school-age children is *The MindUP Curriculum* (2011) in which teachers lead their students in daily breathing exercises as well as mindful listening, seeing and eating activities. Zelazo and Lyons (2011) state “emerging research suggests that age-appropriate mindfulness exercises are feasible for use with young children, even during the preschool period, and that such exercises may foster the healthy development of self-regulation” (p. 63). By giving young children the tools they need to be able to create some peace in their hectic lives, they are also learning to self-regulate.

**Benefit of mindfulness to educators.**

Elkind (2001) draws the reader’s attention to the idea of mindfulness at the end of his book *The Hurried Child.* Although he does not use the word mindfulness, Elkind describes a state close to mindful awareness. He observes that:
much of human stress and misery comes from dwelling in the past on what might have been, or in the future, on what will be. In fact, there is nothing to do about the past, and the future is problematic. We have control only over the present, and this is where we need to direct our energies . . . [children] can learn from parental action. If we concentrate on the here and now, without worrying about yesterday or tomorrow, our children will do likewise. (pp. 219-220)

Although this statement is directed to parents, educators also benefit from being in the present moment (Singh et al., 2013). With the busyness of the school day, a teacher’s awareness is not always focused on their students, but rather on a multitude of other tasks requiring their attention such as parent meetings and curriculum planning. It is, however, in the best interest of the students to have a teacher who is fully present. “For teachers [practising mindfulness] . . . in the midst of the craziness that is a classroom, we remain aware of what’s going on inside our own minds and bodies, which can help us rein in our knee-jerk angry reactions to a situation and instead choose a kinder and more compassionate response” (Zakrezewski, 2013, para. 10).

The benefits of mindfulness training for children are many (Greenland, 2010; Semple et al., 2005; Suttie, 2007), but the benefit to the teachers has been less documented (Zakrzewski, 2013). Singh et al. (2013) looked at the effects of mindfulness training on teachers, as well as how the teacher’s practice affected their students’ “maladaptive behaviors [sic], compliance with teacher requests, and social interaction with their peers” (p. 215). The researchers found that even though the children were not participating in the mindful awareness techniques, there were positive changes in the interactions between teacher and student. The teachers noted that their responses to students’ maladaptive behaviours changes and their classroom management techniques shifted from frustration and reaction to being able “to be with the child’s misbehaviors [sic]” (p. 225). The three teacher participants each felt that “training in mindfulness mediation
was not to enable them to better manage the children, but to produce changes in themselves that invariably affected those they interacted with on a daily basis, including but not limited to the children in their classroom” (p. 226).

Flook et al. (2013) studied the effects of mindfulness practice on teachers’ “stress, burnout and teaching efficacy” (p. 182). The teachers in this pilot study who received the mindfulness intervention reported more self-compassion and a decrease in psychological issues such as anxiety, depression and job burnout. It was also noted that when practising mindfulness the teachers were observed to be more effective in the classroom in management and in the support of their students. This study found that when teachers practise mindfulness, “students’ misbehaviour [sic] and other stressors become like water off a duck’s back, allowing them to stay focused on what teachers really want to do: teach” (Zakrzewski, para. 7, 2013).

Conclusion

It is clear from the research that some children in our society are struggling with their mental health. To continue with traditional approaches to education while children are becoming increasingly anxious is unacceptable. By fostering opportunities for unstructured and unsupervised play along with practical strategies, such as mindfulness, for coping with stress, parents and teachers alike can “witness a full renewal of children’s capacities for self-control and desire to learn and an end to the epidemic of anxiety, depression, and feelings of helplessness that plague so many youth today” (Gray, 2013, p. 235). Students need to gain the tools they require to navigate this busy world (Gray, 2013). Children are craving some calm in their lives and mindfulness training in early childhood may be a fairly quick and inexpensive way to offer it to them (Suttie, 2007). Although the use of mindfulness training with young children is a relatively new area and further research is needed, the findings are in support of such training. The 1.04
million children in Canada living with mental illness (MHCC, 2013a) deserve to be given a way in which to help alleviate some of the symptoms of their disorders. Schools could be the perfect place to encourage mindfulness in children, but to make it a priority, educators would need to receive comprehensive training to be able to incorporate it into their teaching. The positive difference mindfulness can make in the lives of students struggling with mental illness as well as their teachers may make the effort worthwhile.
Chapter 3

Research and Professional Practice

The new school year started out like any other: slightly chaotic, but tinged with excitement. As the new kindergarten cohort sat in front of me, it quickly became apparent that the new students entrusted to my care were the most complex group of children I had taught. Over my six years of teaching kindergarten, I have noticed an increase in the number of children coming to school displaying anxious behaviours. According to the Ontario Ministry of Education (2013), in the document, *Supporting Minds: An Educator’s Guide to Promoting Students’ Mental Health and Well-being*:

Anxiety may manifest itself as perfectionism, avoidance, procrastination, feelings of being overwhelmed, worries about time limits or changes in routine, and physical aches and pains such as headaches or stomach-aches...[and] students who have anxiety problems may become easily frustrated or have difficulty completing their work. Or they may simply refuse to do the work for fear of failure or may avoid particular tasks. (p. 29)

In this group, there were students who exhibited many of these behaviours: three children had difficulty separating from their parents in the mornings and cried as soon as they were left; one child was unable to do anything for himself and cried each time he was asked to complete a task such as opening his backpack or getting his lunch bag; a child had crying tantrums whenever she could not do a task perfectly; another child had frequent bathroom accidents resulting from a fear of asking to go; and yet another worried incessantly about up-coming events in the daily schedule such as library and music where he would not be in the classroom. I realized early on that I would need to change the way I ran the class if the children, and I, were to make it through the
first week, let alone the whole year. This particular group would require some intensive social and emotional focus.

As the literature review in Chapter Two outlines, children’s lives are becoming more complicated (Elkind, 2001). Young people are expected to excel at school while also taking part in extra curricular activities. With reduced time afforded to unstructured play, children are having difficulty coping, which often presents as a form of mental illness (Gray, 2013). Early intervention is key to making a difference in the long-term mental health of individuals (Ontario Ministry of Education, 2013; MHCC, 2013a; Mian et al., 2011) and from my work with young children I know that it is time to make a change. As a kindergarten teacher I can see, firsthand, that the school system is fueling the play-deprivation fire. Of course, it is not possible to overhaul an entire system; however, teachers can begin to make positive changes in the mental health of their own students. The expectations placed on children by educators play a role in the stress levels of school-age children and it is up to individual teachers to decide whether that role will be positive or negative. Although educators cannot dictate what takes place outside of the school time, during the academic year, they are in the perfect situation to make a difference in their students’ mental and emotional health.

In light of my research, I changed my own classroom practice. I increased the amount of play afforded to my kindergarten students by offering an additional 40 minutes of unstructured play during the school day. In an effort to provide unsupervised play opportunities to my students I try to remain on the periphery of the children's play as much as possible during these times. The increase of play during the school day has been a good addition to encourage my students to learn to “make friends, overcome their fears, solve their own problems, and generally take control of their own lives” (Gray, 2013, p. 5); however, the anxious children in my classroom further
motivated me to find classroom-based strategies upon which they can draw in times of high pressure and stress.

**Change in Practice – Mindful Breathing**

With one in four young people experiencing some form of mental illness (MHCC, 2013a), it is clear that early childhood educators will be in contact with children suffering from such disorders. Through early intervention, teachers can hope to reach all young learners in their class, not only those presently suffering from mental health issues. In my own teaching practice, in response to my students’ anxious behaviours, I was interested to find a practical classroom-based approach to reduce student anxiety. Mindfulness is one technique that has been found to be of benefit to adults and children everyday life (Hooker & Fodor, 2008).

When I began the mindfulness practice with my class it was not an entirely new concept to me. I had been introduced to this form of meditation as a way to help me find calm in my own life, but I had not thought about using it with my students for the fear of backlash from administrators and parents. Even though “many mindfulness-based trainings have roots in Buddhist teachings, they are secular practices and do not identify as a religion and can be practiced by all people regardless of religion” (Tilahun & Vezzuto, 2014, p. 3). When I attended a MindUP (2011) workshop I realized that the use of meditation in a public school classroom was a possibility. MindUP “is a comprehensive, classroom-tested, evidence-based curriculum . . . that foster[s] social and emotional awareness, enhance[s] psychological well-being, and promote[s] academic success” (p. 6). The program enables educators to teach mindful awareness through 15 lessons by bringing students’ attention to their breathing, listening, seeing, tasting and movement. In an effort to save my own sanity with my students, I decided to try incorporating mindful breathing into my daily schedule.
Before embarking on this new journey, I sent a letter to parents explaining what the class would be doing and why. I wanted to ensure that the parents were comfortable hearing from the children that we were meditating in class. Parents were invited to contact me if they had questions or concerns, but I had no complaints. When I first introduced the concept of mindfulness to the students, I asked them how their bodies felt after recess and I acknowledged how difficult it can be to calm down for inside time. I explained that the class was going to participate in a technique that would help them to get ready for classroom time. I front-loaded some general expectations around making a quiet environment that included no talking or bugging others and quiet breathing. There is always the opportunity for children not to take part if they do not wish; however, I did not have a child choose this option.

For the children to buy into the daily doses of mindful breathing, I found it crucial to model exactly what I wanted the children to do. I prefer that the class keep their eyes closed during the session because it allows them a break from visual sensory input, as well as keeping a group of 22 young children focused. I have found that if I open my eyes continuously to check who has their eyes open it can become a game. Although there are times when I suspect there are children who have not closed their eyes, rather than bringing attention to unwanted behaviour I calmly remind the group that our eyes remain closed.

In deciding how long the practice with children should be Saltzman and Goldin (2008) suggest “a general rule of thumb is that children usually can practice one minute per their age in years” (p. 142). In order to have the sitting experience be successful for the students, I chose to make the first few practices short, no more than 30 seconds, and during that time I spoke softly and guided the children in what they were to do. I followed the MindUP Curriculum (2011) suggestions and started each session by having the children close their eyes and I would ring a chime to which the
children listened for as long as they could hear it. When it was no longer audible, they were to keep their eyes closed and start to focus on their breath. When I was first learning mediation, I found this a difficult concept to understand and I imagined that it might be more so for children. When teaching mindfulness to children, Hooker and Fodor (2008) suggest that the exercises are “clear, concrete and descriptive in their instruction” (p. 9). I found it helpful if the children imagined a balloon in their tummies that filled with their inhalation and deflated when they exhaled. This gave the children an image to focus on. I also encouraged them to place their hands on their stomachs so they could actually feel the balloon filling and emptying with their deep breaths. At the end of the session, following MindUP suggestions, I would hit the chime once more and the children listened until they could no longer hear its resonance at which point they could open their eyes.

The children also did mindful breathing while sitting on chairs and lying on their backs on the carpet, both of which proved to be successful alternatives to sitting cross-legged. Rather than having every child do the same mindful breathing position during our future practices, I plan to allow some freedom in choosing what they prefer. As suggested by Zelazo and Lyons (2012) props often help children to see their breath and more fully understand what they are supposed to be doing. The students brought a small stuffed toy from home and during mindful breathing time they lay on the floor with the toy on their stomachs. If the children were breathing correctly, the toys would rise and fall during the exercise giving them something to focus on.

In my class, the students came to enjoy taking part in mindful breathing time. At first there was some silliness, but after some practice the children became more comfortable with the exercise. Like any other classroom activity, when the children knew the expectations around what mindful breathing should look and sound like, they began to organize themselves. I made
up visual schedule cards so I would remember to include it at various times in the day, but, after a while the children were the ones to remind me and, without guidance, they would enter the classroom and prepare themselves in a cross-legged position on the classroom carpet.

I try to ensure that there is sufficient time to debrief after the exercise. Saltzman and Goldin (2008) suggest that the teacher “hear from just some of the children after [the] practice . . . [because] if each child speaks after each practice, the children may get restless and the experience of the practice may be long gone by the time it is the last child’s turn to speak” (p. 142). I encourage the children to share their thoughts on how they feel and what they notice about their bodies after sitting quietly. I make an effort to accept all answers without any judgement as I want the children to feel safe sharing. There can be some silly responses, it is kindergarten after all, but I try to ignore those and acknowledge the children who are taking the exercise seriously.

Outcome

At first, I wasn’t completely convinced of the efficacy of spending a minute or so three times a day sitting in silence. I think I expected an overnight change in student behaviour. I learned that mindfulness is not a quick fix for unruly conduct, but rather an awareness of your own actions and your response to those around you. Over the course of a few weeks with daily mindful breathing sessions, I began to notice positive changes in student behaviours such as impulsivity, self-regulation and the children’s ability to calm down after physical activity. The incorporation of mindful awareness into the teaching day helped the children progress in emotional regulation. I found that as a group the children had a common language and understood when I asked them to take some deep breaths if they were upset. As time passed, the anxious kindergarten students became less worried about school. Although there are a number of factors that could be at play here such as the children settling into the school experience and becoming more comfortable with
their peers and me, I believe that our mindfulness practice contributed to the children’s decreased anxiety levels. There were fewer tears in the morning and during the school day. Our class mindful breathing exercises did not eliminate the tantrums or frustration, but the duration of such episodes was shorter and less intense as the children learned to focus on their breath to calm themselves down.

The practice does take some time to establish especially in the beginning. There were times that in order to get the mindful breathing done I was rushing the children to get to the carpet after recess. This, of course, defeats the purpose of participating in mindfulness in the first place. I need to be mindful to carve out enough time in the day for our practice instead of just checking it off the list of activities needing to be completed.

For me, the most exciting part of mindful breathing time was listening to the children’s stories about times when they had connected to their breath outside of our classroom. When the class discussed mindful breathing the children would tell of how it had calmed them when they felt sad or mad. They had used it at night when they were having trouble falling asleep. They described using it in the car, or on the way to school so they were calm when they arrived to class. To hear that they were incorporating the techniques into their home lives was exhilarating for me and the more we practiced being mindful at school the more easily the technique seemed to transfer to the children’s lives outside of school. Parents also noticed some changes in their children’s conduct and they described how their child, frustrated and crying, would say that they needed to do their special breathing. As teachers, we hope that what we teach is important and relevant to our students. From experience, I know that mindful breathing is a strategy that can be easily practiced at school and has the ability to make a difference in the lives of the young people we teach.

**Future Directions – Creating a Mindful Classroom**
Mindfulness has been shown to help children battling mental health issues such as anxiety (Hooker & Fodor, 2008; Semple et al., 2005). Using mindfulness in schools could be an effective way to reach the 1.04 million (MHCC, 2013a) Canadian children and youth suffering from mental health disorders. Early intervention with anxious or depressed children can positively impact their adult lives (Ontario Ministry of Education, 2013; MHCC, 2013a; Mian et al., 2011).

As demonstrated in Chapter Two, research looking at mental health disorders among young children in the Canadian context is lacking; however, the actual number of Canadian children suffering from these issues is sobering (MHCC, 2013a). If teachers were informed of the magnitude of the childhood mental health crisis, they may be motivated to make a small change with profound effects – the addition of mindfulness to their professional practice. For teachers to feel confident in using mindful-based practices with their students, information and training needs to be made available to them. By encouraging teachers to cultivate their own meditation practice they are able to authentically share the techniques with the children in their class (Rudell Beach, 2014) as a way to alleviate the stress and anxiety increasingly seen in classrooms today (Ontario Ministry of Education, 2013). Professional development describing the childhood mental health crisis as well as the successful use of mindfulness to combat the upward trend of disorders is desperately needed. I propose to create a workshop for teachers to disseminate the current research from Chapter Two on the societal influences on the rise of anxiety in childhood and the use of mindfulness in fighting it.

I am now more motivated than ever to help my students live more mindfully. Adding mindful breathing to my day with the students is, I believe, only one aspect in the creation of a mindful classroom. I will continue with daily breathing times, but I would like to expand my classroom practice to include other areas of mindfulness: listening, seeing, smelling, tasting and movement.
(MindUP, 2011). I also hope to create a quiet, or mindful, area in the classroom with a chime and some sensory materials, such as sand, for the children. The kindergarten room is always a hive of activity and for the children who require a moment to decompress it may be beneficial if they can choose to visit a restful spot to do some mindful breathing.

**Classroom Resources**

My meditation practice with children is in its infancy; however, the pro-social and self-regulatory changes I noticed in my students have prompted me to continue teaching mindfulness in kindergarten. In order to create a mindful classroom, I believe the breath work is at the centre and then teachers can build upon this practice. There are many mindfulness-based strategies and techniques that have been adapted for use with children (Greenland, 2010; Hawn, 2011; Hooker & Fodor, 2008; Nhat Hanh, 2011, 2012; Flor Rotne & Flor Rotne, 2013; Saltzman & Godin, 2008; Snel, 2013 – See Appendix A) that go beyond the breathing exercises and can be used at home or at school.

Starting down a new path of inquiry with students can be a daunting task for some teachers and mindfulness is no exception. To create a mindful classroom, resources are a beneficial starting point as well as having them to consult along the way. For teachers interested in using mindful awareness techniques in their classroom there is now a wealth of resources available to them. There are teacher guides, websites and apps all with the intent of introducing school-age children to mindfulness (See Appendix A). In recent years, there have been a number of mindfulness-based picture books written for children (See Appendix B). Reading a story to a primary class could be the perfect segway into new and mindful dialogue.
Looking Back

My learning over the last two years has led me to question my professional thinking. Being enrolled in a Masters of Education program, I knew that I would gain new knowledge, but I did not realize that I would be required to evaluate how I think and why I think the way I do. Although I have much more to learn, I feel that I am on a new path. I now see my teaching in a renewed way. I have begun to notice, question and reflect upon situations in my teaching that I had never considered as areas needing focus. More often than not, we go about our day without ever giving a thought to what we are doing or why we are doing it. By reflecting and asking questions of ourselves I truly believe that we can challenge our assumptions as educators by shedding light onto our own thinking.

The M.Ed. journey has encouraged me to see my career as an early years educator in a whole new way. During my Bachelor of Education courses I was exposed to theories of education and new teaching methodologies, but at the time, I was too narrow in my focus, being more concerned with planning a Grade Five science unit for my practicum than stepping back to understand and appreciate any deeper learning taking place. As a result of the Master of Education program, I have experienced a shift in my thinking. I now have theoretical knowledge on which to base my classroom pedagogy. I have been encouraged to question my thinking and integrate new ideas into my everyday practice in a kindergarten classroom. I have been brave enough to try new ways of teaching because of all that I have learned over the two years. Because of this educational journey, I honestly believe that I am now a much stronger early years educator than before I began.
Looking Forward

In the past, I was very focused on curricular outcomes. Although I am still responsible for the children grasping the outcomes before moving to the next grade level, I have relaxed in my pedagogical approach and I now hope to encourage inquiring minds and thirst for knowledge in my young students. I am learning to let go of the things in education that I cannot change to focus on the areas where I can make a difference. As I move forward, I want to ensure that I use my learning to guide my teaching. As I transition back to the classroom after analyzing educational research and theory, I am committed to making pedagogical changes. I have begun to see myself as more of a facilitator in learning rather than the font of all knowledge at the front of the room. This new view has, undoubtedly, changed how I teach in an early learning environment.

As an early years educator, I have always known that play was important for children, but now I feel I have a much better understanding of the imperative role that play has in the social and emotional development of children. At one time in my classroom, I differentiated between play and work, but I have come to realize that play is work for children. This seemingly small shift in my view of childhood has had a profound effect in my teaching practice. Through my own research for my final project on childhood anxiety, I have learned that heightened expectations in early childhood education have been shown to cause unnecessary stress in the lives of young children (Elkind, 2001; Gray, 2013). I am going to make an effort to push back against the constant clamour for raised expectations and more schooling at younger ages. I plan to advocate for more playful learning in kindergarten.

My learning though this program has opened my eyes to what is happening to children in our society and with my new understanding, I hope that I can alleviate some of the stress that the
children in my care may be experiencing. In working towards a stress-free childhood for my students, I have come to realize that as an educator, all I can do is try. My aim is to try to always use developmentally appropriate pedagogy; to try to include play in the course of the school day; and to try to encourage my students to use skills and strategies to become more mindful in their everyday lives.

**Recommendations**

My hope as I move forward in my learning journey is to share my newfound knowledge with other teachers who are interested in using mindfulness in education to combat the rise in childhood anxiety. For teachers interested in engaging in mindful awareness techniques with their students, but who may not know where to begin, my recommendations are:

1. **Try Meditation**

   Consider cultivating your own meditation practice as a starting point. Rudell Beach (2014) describes it well when she encourages teachers to, “establish [their] own practice. You would have trouble teaching . . . children ballet if you had never danced. To authentically teach mindfulness to . . . children, you need to practice it yourself” (para. 5). Although educators do not need to have first-hand experience with every topic they teach, it certainly helps. By improving their own skills teachers are better able to assist the children in their learning. As noted by Singh et al. (2013), when teachers practice meditation both the teacher and their students benefit. If teachers were to approach their personal practice with an open mind perhaps they would begin to notice the positive changes in themselves, their pedagogy and their students.

2. **Learn with the Students**
A mindful classroom does not have to be created by following a blueprint. There is no right or wrong when trying to introduce mindfulness to students. If the intention exists to make a difference then it can be made possible. Adding five minutes of mindful breathing to the daily schedule may be a manageable change to make. Rather than being the all-knowing instructor, find out what the children are thinking and how they feel and adjust the classroom mindfulness practice accordingly. Take the time to learn with and from your students and follow their lead.

There are many resources available to teachers if you are open to giving mindfulness a go. Consider taking the children for mindful breathing outdoors and to be aware in nature – look closely at flowers, trees or grass; notice the clouds; listen attentively to the noise of the rain; feel the wind. Do all of this as if you are seeing, hearing, feeling and noticing it for the first time.

3. **Allow Time for the Practice to Flourish**

The literature reviewed in Chapter Two shows that mindfulness for children can help them to feel calmer and more prepared to function in their busy lives; however, mindfulness takes time. To actually see the benefits, time must be dedicated to cultivating a thriving practice in the classroom. Zakrzewski (2013) points out that “the changes rendered through a mindfulness practice do not happen overnight, nor do they last without continuous practice” (para. 16). It may seem unimaginable in the busy school day to set aside time for mindfulness meditation with students. To reap the rewards, there is a requirement on the part of the teacher to commit to continuing the practice. In the beginning of the school year, this, for me, was the most difficult part of the practice: the commitment to keep going. There are already so many distractions from curricular content that I was not sure that I could include another. Then I changed my thinking: if I was to make a difference in the lives of my young students, mindfulness needed to be a
priority in the classroom. The positive results, in my opinion, spoke volumes for the need to keep the breathing practice going.

**Final Thoughts**

Each student in my class deserves to have a teacher who helps them to be the best learner they can be. It is only through self-reflection that one can begin to see areas where changes ought to be made. My teaching cannot be reformed overnight, but I am taking steps to incorporate all that I learned in the M.Ed. program. By working to provide an environment where deeper learning and understanding are the goals; where questioning and reasoning are encouraged; where collaborative learning and flexible thinking are the norm; and where the modelling of mindfulness is a daily occurrence, I will have succeeded in improving my teaching practice. Through the M.Ed. program, I have been fortunate to have been given the opportunity to re-consider not only my teaching, but also my thinking, and I believe I have become better at both.
References


Gray, P. (2014). The Decline in Play and the Rise of Mental Disorder [Video file]. Retrieved from https://m.youtube.com/watch?list=PLsRNoUx8w3rM2TODKnCz0JulWS9pvBvum&v=Bg-GEzM7iTk


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Appendix A: Professional Resources for a Creating a Mindful Classroom

Title: Everybody Present: Mindfulness in Education

Author: Nikolaj Flor Rotne & Didde Flor Rotne

Introduces a mindful approach to education that focuses on a combination of personal and social change through mindfulness and gratitude. Meditation techniques are outlined along with tips on how best to practice them with children to reduce stress. A valuable resource for educators thinking about creating a mindful classroom.

Title: The Mindful Child: How to Help your Kid Manage Stress and Become Happier, Kinder, and More Compassionate

Author: Susan Kaiser Greenland

Greenland is the cofounder of the Inner Kids Foundation that helps children develop their self-awareness. This book outlines the new ABCs: Attention, Balance and Compassion which the author states are crucial in healthy social and emotional development. Through simple activities, parents and educators are given the tools to teach mindfulness to children and teens.
Title: Planting Seeds: Practicing Mindfulness with Children

Author: Thich Nhat Hanh

This book presents an overview of mindful awareness techniques for children. It is full of hands-on activities for caregivers to help children focus and concentrate; decrease stress and anxiety; improve impulse control; increase self-awareness; and develop empathy and understanding. The accompanying CD includes songs and guided meditations.

Title: A Handful of Quiet: Happiness in Four Pebbles

Author: Thich Nhat Hanh

Nhat Hanh developed the four-pebble technique as a hands-on way for children to understand the practice of mindfulness meditation. Each of the four pebbles represents a different image in nature: a flower, a mountain, calm water and space. The book details how parents and educators can use these images to promote a calm state of mind.
Title: The MindUP Curriculum

Author: The Hawn Foundation

Developed for use in the classroom setting, the MindUP Curriculum explains how educators can create a mindful classroom. The practice of mindful breathing is at the core of the 15 lessons focused on teaching children how to become more present and mindful in their lives both in and out of school.

Title: 10 Mindful Minutes: Giving our children – and ourselves – the social and emotional skills to reduce stress and anxiety for healthier, happier lives

Author: Goldie Hawn

A practical guide for introducing mindfulness to children. Through reflections and anecdotes, Hawn gives educators and parents ideas for teaching gratitude, kindness and optimism to children. The book describes the scientific findings of using positive psychology to live a more mindful life.
Title: Sitting Still like a Frog: Mindfulness Exercises for Kids (and Their Parents)

Author: Eline Snel

Snell introduces mindfulness practices to parents and educators for use with children. Adults can give children the tools to “get out of their heads” to be able to handle difficult feelings, calm down, pay attention, fall asleep and become more patient by focusing on their breath. This book comes with a CD of guided mediations for children.
Appendix B: Mindfulness-Based Picture Books

**Title:** Mindful Monkey, Happy Panda  
**Author:** Lauren Alderfer

Monkey’s friend Panda is always happy and peaceful. Monkey wants to know his secret, which Panda explains is being mindful in the present moment.

**Title:** What Does it Mean to be Present?  
**Author:** Rana DiOrio

A beautifully illustrated book describing how to be present through listening, feeling, stillness and gratitude.

**Title:** Peaceful Piggy Meditation  
**Author:** Kerry Lee MacLean

When their lives get busy and chaotic, the Peaceful Piggies learn to slow down, breathe and be calm.
**Title: Moody Cow Meditates**

**Author:** Kerry Lee MacLean

Moody Cow is having one of those days where everything goes wrong. Grandfather shows him how his mind looks with all the angry thoughts. By focusing on his breath, Moody Cow learns how to be less moody.

**Title: No Ordinary Apple**

**Author:** Sara Marlowe

Elliot learns how to slow down and appreciate the colour, texture, smell and taste of an apple in this story about eating mindfully.

**Title: Meditation is an Open Sky**

**Author:** Whitney Stewart

Written in kid-friendly language, the ten meditation exercises teach children how to go from ‘wobbly’ to calm by focusing on their breath.
Appendix C:  PowerPoint Presentation for Educators

Introduction

In this PowerPoint Professional presentation, I aim to share with other educators the research findings on the rise in anxiety in young children as well as the outcomes of a mindfulness-based classroom practice. From my conversations with colleagues at my own school, I know there is an interest that exists around the rise in anxiety in early childhood and what teachers might do to make a difference. Through this presentation, I hope to support teachers in alleviating the anxiety symptoms of the young learners in their classes. My goal would be to see mindfulness techniques used across the grade levels allowing children to build upon the skills they learn in kindergarten as they progress through the grades. Although my presentation is a dissemination of the research findings, my aim would be that the format would allow for some audience discussion rather than purely a lecture-style presentation. There are a total of 20 slides and the presentation is broken down into three main sections: The Problem – Anxiety in Early Childhood; A Solution - Mindfulness; and Recommendations for Educators.

The Problem – Anxiety in Early Childhood

In this first section (Slides 3-7), I begin the with the following quote (Slide 3): “Children are more depressed today than they were during the Great Depression [and] they are more anxious today than they were during the Cold War . . .” (Gray, 2014, 11:53). My aim here is to help participants begin to understand that although many facets of our lives are thought to be easier and more convenient, children are suffering from mental illness like never before. In order for teachers to understand the motivation behind trying for a new classroom approach, I would share my own classroom experience of dealing with various anxious behaviours. I give my personal
and professional background and how my interest for this topic was peaked (Slide 4). The participants will then have a chance to discuss what they have noticed in their own classrooms and share their thoughts with the group. The statistics will be presented from the Mental Health Commission of Canada (2013) to show that in 2011, 1.04 million Canadian children and youth aged 9 to 19 years were living with mental illness (Slide 5) and as such most educators will be faced with anxious behaviours presenting in their own classroom. The Ontario Ministry of Education’s (2013) document Supporting Minds: An educator’s guide to promoting students’ mental health and well-being, gives a comprehensive list of the many of the anxious behaviours often seen in a classroom setting (Slide 6). In this first section, the main themes of the literature review will be discussed, specifically the rise of anxiety in young children; the decline in access to play opportunities; heightened academic expectations at home and at school; the elimination of play at school; parental and educator worries around safety in play; as well as the correlation between the lack of play and the rise in anxiety (Slide 7).

A Solution - Mindfulness

The second section comprises of five slides (Slide 8-12). The following quote introduces part two of the presentation (Slide 8): “Emerging research suggests that age-appropriate mindfulness exercises are feasible for use with young children, even during the preschool period, and that such exercises may foster the healthy development of self-regulation” (Zelazo & Lyons, 2011, p. 63). Educators play a pivotal role in alleviating anxious behaviours, but they need to be given the tools with which to do it (Slide 9). Slide 10 introduces mindfulness as a possible school-based solution the childhood anxiety epidemic. If children can regulate their emotions by focusing on the present moment they learn to be calm and be better able to pay attention. At this time, the research finding on mindfulness and its successful use in the classroom setting will be discussed
as well as the core practice of being mindful: mindful breathing. For participants to fully understand the idea of using the breath to focus on the present moment, a short film clip, *Just Breathe*, (Bayer-Salzman & Salzman, 2015) will be shown (Slide 11). The video shows young children describing the physiological changes they experience when they feel angry or sad. They go on to explain what happens to their minds and bodies when they take part in mindful breathing. It is a wonderful visual introduction to mindfulness and its effectiveness with children. After watching the children in the film focusing on their breath, it is the participants’ turn (Slide 12). I will lead them in a short mindfulness meditation practice wherein I will invite them to close their eyes, listen to the chime and focus on their breath. I will verbally guide them as to what they need to do. Once complete, participants will be encouraged to share their thoughts and feelings on the practice and whether they feel it may be something they would try with their students. At this time, variations on the sitting practice will be introduced along with props that have been shown to be useful in teaching mindful breathing to children.

**Recommendations for Educators**

Section three includes eight slides (Slides 13-20) sharing how to begin to create a mindful classroom. This section begins with the quote (Slide 13): “If we know [mindfulness] has the potential to decrease stress, decrease depression, and increase health and happiness – like the research on adults shows – wouldn’t it be selfish to withhold it from children?” (Hawn, as cited in Suttie, 2007, p. 31), by sharing this thought I hope to incite teachers to make a small change to incorporate mindfulness in their classrooms. I outline three key steps for educators to follow if they are interested in giving mindful breathing a go (Slide 14): 1) Try meditation – it is often easier to teach a new topic if you have had some personal experience with it. Consider cultivating your own practice before introducing mindfulness to the children. 2) Learn alongside
the students – never feel that you need to be the mindfulness expert. Follow your students’ lead and learn with them. 3) Allow time for the classroom practice to flourish – mindfulness takes time and the benefits do not occur overnight. Keep practicing and notice what transpires.

Educators who do decided to try mindfulness with their class may begin to see that (Slide 15) “Students’ misbehaviour [sic] and other stressors become like water off a duck’s back, allowing them to stay focused on what teachers really want to do: teach” (Zakrzewski, para. 7, 2013). At the end of this section, I will introduce six mindfulness-based professional resources to help guide interested educators in their classroom practice (Slide 16). There are also six mindfulness-based picture books recommended for shared reading with children (Slide 17). Participants will be asked if they have any questions or comments they would like to share with the group (Slide 18). Slides 19 and 20 contain the resource list for this PowerPoint presentation.

PowerPoint Slides

Slide 1

Slide 2

Overview
- Problem
- Professional experience
- Key research findings
- Solution
- Mindfulness
- Recommendations
- Three steps to a mindful classroom
- Mindfulness-based resources
**Slide 3**

**Problem**

“Children are more depressed today than they were during the Great Depression and they are more anxious today than they were during the Cold War ...”

(Gray, 2014, 11:53)

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**Slide 4**

**My Professional Experience**

- My classroom experience
- Anxious behaviours at school
- Discussion

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**Slide 5**

**Anxiety in Children**

- In 2011, 1.04 million Canadian children and youth aged 9 to 19 years were living with mental illness which equates to one in four young people.

(MHCC, 2013)

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**Slide 6**

**Anxiety in the Classroom**

Anxious students may:

- Have frequent absences from school
- Refuse to join or participate in social activities
- Exhibit panic by crying or freezing tantrums and/or clingy behaviour
- Worry constantly before an event or activity
- Often spend time alone
- Be easily frustrated
- Be extremely quiet or shy
- Fear new situations
- Struggle to separate from family members
- Demonstrate nervous behaviours (e.g. tears, tics, bathroom accidents)
- Have difficulty regulating their emotions in an age-appropriate way
- Complain of physical ailments such as stomach or headaches
- Be hesitant to try new things

(Ontario Ministry of Education, 2013, p. 30)

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**Slide 7**

**Key Findings**

- Literature Review - Findings
  - Rise of anxiety
  - Decline in play
  - Heightened academic expectations
  - Elimination of play at school
  - Safety and play
  - Correlation between lack of play and anxiety

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**Slide 8**

**Solution**

“Emerging research suggests that age-appropriate mindfulness exercises are feasible for use with young children, even during the preschool period, and that such exercises may foster the healthy development of self-regulation.”

(Zelazo and Lyons, 2011, p. 63)
What Can Educators Do?

- Schools play a pivotal role in the mental health of students
- Teachers only have control over their own classrooms and not that of the home environment
- Educators are in a position to make a difference, but they need to be provided with effective strategies to do so
- Mindfulness is one such strategy.

What is Mindfulness?

- “Paying attention in a particular way: on purpose, in the present moment, and non-judgmentally” (Kabat-Zinn, 1994, p. 4)
- Research findings
- Successful classroom use
- Core practice – breathing

What is Mindful Breathing?

Mindful Breathing in the Classroom

- Practice together
- Variations to be used with young children

Three Steps to a Mindful Classroom

1. Try meditation
2. Learn with the students
3. Allow time for the practice to flourish

“if we know (mindfulness) has the potential to decrease stress, decrease depression, and increase health and happiness – like the research on adults shows – wouldn’t it be selfish to withhold it from children?”

(Hawn, as cited in Suttie, 2007, p. 31)
Benefit of Mindfulness to Educators

“Students’ misbehaviour [sic] and other stressors become like water off a duck’s back, allowing them to stay focused on what teachers really want to do: teach” (Zakrzewski, para. 7, 2013).

Mindfulness-Based Teacher Resources

Mindfulness-Based Picture Books

Questions or Comments?

References

• Gray, P. (2014). The Decline in Play and the Rise of Mental Disorder. Retrieved from https://m.youtube.com/watch?list=PLsRNoUx8w3rM2TODKnCz0JulWS9pvBvum&v=Bg-GEzM7iTk