



Code of Ethics Handbook for Early Childhood Professionals

An Essential Companion for Daily Practice



AECES

ASSOCIATION FOR EARLY CHILDHOOD EDUCATORS (SINGAPORE)

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An essential companion for daily practice

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Content

1. Foreword
2. Introduction
 - Purpose of this Handbook
 - What an Ethical Dilemma is Not
 - What then is an Ethical Dilemma?
3. Code of Ethics
 - Preamble
 - Core Values
 - Professional Responsibilities & Obligations
 - i) Children
 - ii) Families
 - iii) Community
 - iv) The Profession
 - v) Employer
4. Case Scenarios
 - Scenario 1: The Biting Case
 - Scenario 2: Special Diet
 - Scenario 3: To Nap or Not to Nap
 - Scenario 4: Separation Anxiety
 - Scenario 5: Cup or Bottle
 - Scenario 6: Photo-taking and Video-recording
 - Scenario 7: To Inform or Not to Inform
5. Scenarios for Discussion
 - Scenario 8: Wearing the Crown
 - Scenario 9: Conflicting Roles
 - Scenario 10: A Global Classroom
 - Scenario 11: Child's Irregular Attendance
 - Scenario 12: Research and Children's Well-Being
6. Conclusion
7. Endnotes
8. References
9. Annexes
 - Annex A: About AECES, ECDA AND ESU
 - Annex B: Brief History of Early Childhood Development in Singapore
 - Annex C: Evolution of Code of Ethics Document

Foreword

As the early childhood sector in Singapore crosses another milestone with the establishment of the Early Childhood Development Agency (ECDA) in 2013, this Handbook is revised in consultation with ECDA and Education Services Union (ESU). We would like to register our heartfelt thanks to ECDA for working with us and supporting this revised version of AECES Code of Ethics. To ESU, we value your feedback and have incorporated several of your suggestions in this publication. To our colleagues at AECES, Mrs Loh Hui Meng, Ms Therese Tan and Ms Ivy Kok, and the representative from ECDA, Mrs Yeo Chin Nam, the hours put into this undertaking will contribute much to the profession. To Mrs Geeta Velu and Mrs Loh Hui Meng who wrote the first edition of the Handbook, thank you for giving us a firm foundation to work on for this revision and to the Lee Foundation for its unflinching financial support. We would also like to acknowledge the reference we made to the current Codes of Ethics of the National Education of Young Children (NAEYC), The British Association for Early Childhood Education and the Early Childhood Australia (ECA).

Finally to our members and practitioners, the beeline for the AECES booth at the “The Early Childhood Conference and Carnival 2015” ECDA Conference 2015 demonstrated the interest and commitment to our Code of Ethics. Six hundred and thirteen survey forms were completed on the spot, in support of the Core Values, and another 206 completed online, bringing the total to 819! Never before have we received such overwhelming returns on surveys.

This speaks of the high regard practitioners have for the AECES Code of Ethics. It signals that we have evolved from “learning to teach”, which emphasises the technical aspects of teaching to “becoming a teacher”, which “involves coming to experience self in relation to others” (Goodfellow and Sumsion, 2003, p. 60). The time has come when we rally around shared values and standards of practice to build a fraternity of early childhood professionals in the service of children, families and the community. In doing so, we will have gained recognition as professionals who make a difference!

Christine Chen (Ed.D, PBM)

President

Association for Early Childhood Educators (Singapore)

Introduction

The hallmark of any profession is the incorporation of a set of standards by which its members abide. This updated Code of Ethics remains an aspirational document and the pride of our profession. In tandem with globalization, the emphasis on 21st Century Skills and current research findings, it complements the Nurturing Early Learners (NEL 2013, MOE), the Early Year Development Framework (EYDF, 2012 MSF) and the Skills Framework for the Early Childhood Care & Education (2015).

Purpose of this Handbook

The Code of Ethics Handbook acts as a companion for early childhood educators and practitioners who may have to grapple with commonly faced yet at times complicated issues. It provides case studies demonstrating how the Code of Ethics can be applied to a diverse range of contexts that early childhood educators encounter every day in their work with children, families, community, the profession and employer. The Handbook guides professionals as they deliberate on the ongoing question: *“What might an ethical early childhood educator do in this situation?”*

As early childhood educators, we have a responsibility to maintain the highest standards of professionalism in our work, while acting in the best interest and well-being of children and their families. Educators and leaders of the profession are constantly making decisions that affect young children revolving around family values, home culture and language, individual development and programme policies. When making such decisions, educators need to act with professional integrity, due diligence, respect and competence. This Handbook sets out to educate, inspire and empower early educators and leaders in critical thinking and in exploring ways to resolve ethical dilemmas.

What an Ethical Dilemma is Not

Ethics involves a deliberation about the ‘right’ and ‘wrong’ choices one makes. The first step is to determine if the problem or issue faced involves an ethical responsibility/obligation or an ethical dilemma. As educators, we are constantly making various decisions about routines, schedules, diverse needs, quality programmes, and trying to balance these with family expectations about meals, nap time, curriculum etc. However, many of the situations educators face may not revolve around ethical dilemmas. Most of our decisions are made based on our ethical responsibilities and obligations relating to children, families, community, the profession and employer. An ethical responsibility/obligation has straight forward solutions. For instance, when a parent requests the educator to allow her child who has a fever of 38.3C to attend class as usual or when a parent asks for another parent’s address, it is the responsibility/obligation of the educator to deny these requests. In such cases, the educator is acting based on her ethical responsibility/obligation as an early childhood educator and not resolving an ethical dilemma.

What then is an Ethical Dilemma?

Sometimes a situation will not lend itself to a clear decision or obvious solution, and educators are faced with two ethical responsibilities/obligations that are in conflict. This is referred to as an ethical dilemma. According to Feeney et al.(2010), *“In a dilemma the good of one group or individual to whom you owe professional allegiance is in conflict with the good of another group or individual to whom you also have professional responsibility.”* (p. 446)

As such, the Code of Ethics guides educators in circumstances where ethical responsibilities/obligations are in conflict. For instance, when a professionally qualified and well liked colleague treats the children in her care harshly; this presents a conflict between the welfare of the child and our relationship with the colleague. In yet another case, a parent warns the Principal of the school that a group of parents will withdraw their children if she does not take action to ensure that the parent of a child who has been biting withdraws the child. In this case the Principal is dealing with a conflict between group needs versus individual needs.

When working with the above such cases, it can be difficult to arrive at a good resolution. The challenge is in deciding which core values or obligations should be honoured as sometimes the conflicting values and obligations can be reasonable and justifiable. Therefore the Code of Ethics states that the overarching principle is, **“We ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care. If there is reasonable cause to suspect neglect or child abuse, we are obligated to report to the relevant authorities (1)”** and this takes precedence over all other responsibilities and obligations.

It is our hope that this Handbook will act as our companion for daily practice and it is recommended that we attempt to resolve the ethical issues in the scenarios with a colleague or group of educators first. While working with the scenarios presented, the following questions may help in guiding our thinking:

- What should / would I do if I were faced with such a situation?
- To whom am I obligated?
- Are there conflicting values?
- What core values and responsibilities/obligations in the Code can assist me in making an informed and justifiable decision?
- What actions should/would I take to resolve the situation in an ethical manner?

When there is no simple right or wrong answer, we must ask ourselves if we have acted appropriately, in good faith and in the best interest of the individuals involved, or, if we have resolved the problem using practices and behaviour acceptable to the profession. We can make an ethical decision with greater conviction when and only if we are clear about our obligations towards children, families, community, the profession and employer.

The scenarios presented in the following pages discuss ethical responsibilities /obligations related to particular sections of the Code of Ethics, which is in the Annex. The Code addresses educators’ responsibilities/obligations to children, families, community, the profession and colleagues.

PART ONE: CODE OF ETHICS

The AECES Code of Ethics is a reference to help clarify our thinking and prioritise our responsibilities. Presented in three sections, it is built upon the Preamble: *the reason for a Code of Ethics*; Core Values: *principles about what we ought to do and how we need to behave in the best interest of young children* and Professional Responsibilities and Obligations: *defining practices towards Children, Families, Community, The Profession and Employer*.

Section 1. Preamble

Singapore acceded to the United Nations Convention on the Rights of the Child in 1995. This is the most comprehensive statement on children's rights and forms the foundation for developing policies and making sound decisions about children's well-being. Against this backdrop, the Code has evolved, as a set of standards for the responsible behaviour of all personnel involved, both directly and indirectly, in the provision of early childhood services for children between birth and eight years of age. The Association recognises that in countries where a Code of Ethics is in place, it is subscribed to by educators working in a variety of settings, including centre and home based care, tertiary institutions, as well as employers, management bodies and governing authorities who regulate and monitor services.

This Code acts as a living document that guides our professional behaviour and builds an early childhood fraternity. It marks our respect for young children, families, the community, the profession and ourselves. As members of the early childhood profession, we are proud to live the values and principles we endorse and make it visible in our daily relationships with all stake holders, including children. This will enable us to develop competence, confidence, resilience, passion and a sense of mission in the field of early childhood education.

Section 2. Core Values

The standards of ethical behaviour in early childhood development are based on the commitment to core values that aspire to be in harmony with Singapore's nation building endeavour. *We embrace these values in the best interest of the child as we recognise that the early years in the child's life is unique and valuable in its own right.* As such, we commit ourselves to:

- I Being **responsible** in giving every child the best possible start and a happy childhood.
- II **Caring** with a heart and demonstrating sound knowledge of child development.
- III **Respecting** the bond between child and family within the contexts of culture, community and society.
- IV Working with **integrity** to gain trust and support of the child, family and community.

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- V Fostering **resilience** with a strong support system in the face of challenges.
- VI Building positive relationships to promote **harmony** in a multi-racial society based on mutual trust and respect regardless of age, socio-economic status, ability, gender, race, language or religion.

Section 3. Professional Responsibilities & Obligations

This section defines Early Childhood Development (ECD) practices towards Children, Families, Community, The Profession and Employer. Our professional responsibilities and obligations are:

1. Children

We ensure the psychological safety², intellectual safety³, physical health and safety⁴ of each child whilst in our care. If there is reasonable cause to suspect neglect or child abuse^{4a}, we are obligated to report to the relevant authorities.

- 1.1 We value and respect⁵ each child within the diversity⁶ of their family, culture, community, and society.
- 1.2 We recognise that each child is unique and has the right to express his/her ideas, thoughts, and opinions.
- 1.3 We support the right for **all** children to play and learn in an inclusive⁷ early childhood environment.
- 1.4 We promote each child's self-esteem and encourage the active participation of **all** children regardless of ability.
- 1.5 We promote the joy of learning by engaging the child in an intellectually stimulating⁸ and socially satisfying programme⁹ and environment.
- 1.6 We demonstrate sound knowledge¹⁰ of early childhood development in our daily practice.

2. Families¹¹

We collaborate with families as our partners¹² to ensure the well-being and holistic¹³ development of children.

- 2.1 We recognize that families are situated in a particular culture¹⁴ with their own unique values and beliefs.
- 2.2 We recognize that families are the primary¹⁵ influence in a child's early years, and therefore support¹⁶ each family as a unit.
- 2.3 We share information¹⁷, knowledge and understanding of the child, learning from these to engage all stakeholders in decision-making.
- 2.4 We respect the family's right to privacy and maintain confidentiality.

3. Community¹⁸

We collaborate with agencies and other professionals¹⁹ in the best interests of the child.

- 3.1 We recognize, accept and value diversity among members of the community.
- 3.2 We contribute towards raising awareness²⁰ of the importance of quality early childhood development for children in all settings.
- 3.3 We support national initiatives and policies²¹ that promote the well-being of young children and their families.

4. The Profession

We support and collaborate with colleagues, employers, board of management, interns, researchers and other professionals²² in the provision of quality care and education for each child.

We abide by the laws and regulations of the country.

- 4.1 We are truthful in presenting professional qualifications²³, experience and affiliations²⁴.
- 4.2 We promote a climate of openness and transparency²⁵ in the work place to speak and act in the best interest of the child.
- 4.3 We address concerns about a person's professional integrity, behaviour or conduct to that person in the first instance.
- 4.4 We participate in the development, implementation, review and evaluation of curriculum that address the stated care and educational principles of the programme.
- 4.5 We share professional knowledge, experience and practices with the early childhood fraternity²⁶.
- 4.6 We foster positive self-esteem at the workplace, help colleagues and staff develop professionally.
- 4.7 We keep abreast of the current trends and the needs of the field.
- 4.8 We engage in research without compromising the right to informed consent by parents, children's fatigue, privacy, interests and representing the research findings accurately and objectively.

5 Employer

We support the profession in providing the highest quality of service

- 5.1 We comply with the employment laws and abide by the standards and policies governing fair employment practices.
- 5.2 We uphold the integrity and reputation of the profession to ensure the protection and best interest of the child and educator.
- 5.3 In addressing employment conflicts or workplace issues we comply with the laws and address them through appropriate procedures and channels. We believe that all stakeholders should endeavour to find an amicable resolution to the issues.

When one of the important values or professional obligations contradicts another, it is our obligation to “... *ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care,* “(1). This obligation has precedence over all other items in the Code.

PART TWO: CASE SCENARIOS

Scenario 1: The Biting Case

Ms Charmaine noticed Mabel, two-and-a-half year old, crying softly. When she asked Mabel why she was crying, the child pulled up her sleeve to show the bite marks on her arms. The marks were visible and that area appeared bruised. Mabel said that it was Jacky who bit her. The teacher attended to both of them and the class resumed. A few hours later, the children moved from the classroom into the music room and there was another biting incident. Jacky bit Mabel again, this time on the hand. The teacher applied a cold pack to the bruise and spoke to Jacky. Just before dismissal time, Jacky bit Mabel again but this time on the face.

At class dismissal time, Ms Charmaine informed Mabel's mother, Mrs. Hong, about the three biting incidents. Mrs Hong was very upset and showed her daughter's bite marks to the other parents who were waiting to take their children home. The parents were sympathetic towards Mrs Hong. With tears in her eyes, she warned the teacher, "My husband is going to be very angry."

Ms Charmaine contacted the Principal who was on leave that day. The Principal visited Mabel and Mrs.Hong at their home. While Mrs Hong appreciated the visit, she was not appeased. She reminded the Principal, "My husband is furious. He's asked me to take photos and he wants a meeting."

The next day at the meeting, Mr. Hong told the Principal, "The centre has to be a safe place. With a biter in the classroom, we parents do not feel that our children are safe. These bite marks are gruesome. (He showed the photos of his child's injuries). Look at the teeth marks.... Vicious! We had a parents' discussion yesterday and the other parents are worried about their own children. Either you tell the biter to leave, or we will withdraw our children from the centre. Other parents are also upset. They have been calling my wife. How can our children be safe and secure in this classroom with the biter being there?"

1.1 What are the conflicting responsibilities and obligations?

The Principal of the centre needs to examine her responsibilities and obligations to Jacky, Mabel, Mr and Mrs Hong and the other children and their parents. Does the Principal ask the child to leave so as to regain the trust of the remaining parents and families of the children in the class and keep the enrolment, or, does she stand by her principles and respect all children in the classroom? The Principal is faced with a dilemma.

Biting amongst toddlers is not uncommon, and not surprisingly, parents get very upset when they learn that their child is the “victim” of a biting incident. However, when parents demand the removal of the child who bites, the centre has to balance the conflicting needs and rights of each child, including that of the child who bites, and be clear about its ethical responsibility in ensuring the safety and well-being of all children.

1.2 What do we know about biting at this age?

Toddlers lack the emotional maturity and the language skills to control their impulses and articulate their needs and frustrations. Biting becomes a powerful way to communicate a need and exert control over others and the environment (Albrecht and Miller, 2001). They are also often curious to see what reaction it brings and may not appreciate that it causes hurt. If the environment is not developmentally appropriate for toddlers because it places inappropriate demands on them, toddlers may react by biting (Crisalli, 2008). This could include the frustration of not having sufficient adult attention and interaction because the group size is too big, or if their routine is too regimented, or if they are kept confined in too small a space. Other possible triggers are hunger, teething, a stressful event at home, a change of routine, interference from a peer, and having to wait during times of transition. There are many possible causes, that when a toddler reacts by biting, the behaviour needs to be carefully observed and analysed.

1.3 Thinking about our values, responsibilities and obligations

The Code states that *“We ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care...(1).”* Mabel’s safety from harm is of utmost importance. The centre has an obligation to provide a safe environment for all children.

Even though Mabel has been a “victim” in this situation, we cannot ignore Jacky’s needs as her behaviour may be a cry for help. We need to respect the developmental stage of the individual child. Jacky may have bitten for any of a number of reasons and it would not be right for the centre to ignore this and dismiss Jacky. From an educator’s perspective, the centre has an ethical responsibility/obligation to respect and promote the well-being of all children in its care, including the child who bites. The possible cause of Jacky’s behaviour should be analysed and, if necessary, measures taken to sensitively guide her towards greater self-control and more socially appropriate behaviour. Some changes in the environment may also need to be considered.

“We demonstrate sound knowledge¹⁰ of early childhood development in our daily practice (1.6).” Educators have the responsibility to minimise frustrations among children. It is possible that the teacher may not be equipped with the necessary skills to set up an appropriate toddler environment with routines that are realistic for the toddler age group, or to prevent or manage a biting incident.

1.4 What might an early childhood professional do in this situation?

The Principal needs to work with Ms Charmaine to observe the child more closely to understand the possible cause or causes of the child's biting and then plan and adopt preventive strategies.

The Principal should also arrange for a conference with Jacky's parents and approach them with an understanding of toddler development. She needs to explain some of the reasons why toddlers bite and find out if any recent changes in the home could have triggered this behaviour. Mr & Mrs Hong should not be made to feel a sense of guilt but helped to understand or appreciate their empathy for the pain the victim has gone through. She should inform them that the centre has a guidance plan in mind and that they have the child's best interests at heart. Ms Charmaine should work in partnership with the parents to address the behaviour or concerns so that the home and centre work together on appropriate strategies. This will also help Jacky to develop a positive self-image.

However, if, with strategies in place, the biting persists, then it probably indicates that Jacky is not ready for group care as she may not be able to interact with other children in the group without constant adult supervision. Jacky may need to stay at home for a while. During this time the parents could organise play dates starting with one child and increasing to two or three children. The centre should continue with the home visits thereafter to ensure that the link with the centre is still maintained and assure parents that Jacky is still part of the centre. Once Jacky is ready for group care, she can be eased back into the centre setting.

The Principal should also arrange for a conference with Mr and Mrs Hong, empathising with their concern over the biting and fear for Mabel's physical and emotional safety. The Principal should explain toddler development and share with them the plan to look into factors that may have contributed to the incident, such as the environment, schedule and grouping. Mr and Mrs Hong should be reassured that the situation will be closely monitored by the Principal and the teacher with the aim of preventing the biting behaviour before it occurs. Mr and Mrs Hong would be updated on the implementation of the strategies. In taking the above steps, the Principal is upholding her responsibilities and obligations to families. *"We share information, knowledge and understanding of the child, learning from these to engage all stakeholders in decision-making (2.3)."*

In supporting Ms Charmaine, the Principal might want to have a more experienced educator guide her in working with the toddlers in the classroom. *"We share professional knowledge, experience and practices with the early childhood fraternity especially by way of mentoring. (4.5)."*

In addition, the centre can use its centre handbook and information leaflets to explain why children at particular stages of development bite and how it can be managed. When parents understand that their child's actions are common at the toddler stage, they may be more understanding of and less reactive to the situation. Concerned parents may also learn how to guide their child's behaviour more appropriately.

Through sharing professional knowledge with Mr and Mrs Hong and Jacky's parents, the centre is "*Creating a support system to ensure our **resilience** in the face of challenges (Core Value V)*". They are also promoting communication and collaboration by working as partners with families in ways that enhance each child's development and affirm that each child is unique and valuable in his/her own right.

1.5 Implications

Situations like the biting incident may not become such major issues if the centre has a staff manual or comprehensive induction programme which provides guidance for the appropriate management of children's behaviour. In the event that the child has to stay at home, consideration must be given to the centre's enrolment policy as well as fee and subsidy issues. Being equipped with these necessary skills, there may be fewer of such incidents. The centre could consider adding such a policy in their Parents' Handbook. It is important that parents and centre work toward forging an alliance by building positive relationships with all parents/families so that they support the centre's efforts in meeting children's well-being and addressing challenging issues.

Scenario 2: Special Diet

Three year old Joshua has just recovered from a bout of chicken pox. His mother, Mrs Sandra, asked the Principal and the class teacher, Ms Lin, not to give her child any chicken for two weeks. The Principal said it would be difficult to accede to her request as the school meals often contain some chicken ingredients such as chicken stock. Mrs. Sandra agreed to make arrangements for home cooked food to be brought to the school.

Though the mother was cooperative, Ms Lin felt that the food prepared from home was not nutritious. Ms Lin brought up her concern about the nutritional value of the food not meeting the nutritional needs of the child to the Principal's attention. When the Principal spoke to the parent, Mrs. Sandra was indifferent about the matter.

2.1 What are the conflicting responsibilities and obligations?

In this situation, the teacher must weigh her responsibilities and obligations to the child and give due respect to the mother's cultural beliefs. The centre is responsible for providing a balanced and nutritious diet for Joshua so that his physical needs are met. However, the parent's wishes need to be taken into account. The dilemma lies in balancing the centre's responsibility and obligation with the parent's cultural beliefs and practices.

2.2 Thinking about our values, responsibilities and obligations

When a parent and an educator both act in the best interests of the child, the child benefits, but when their perspectives differ, it is in the child's interest that *"We share information, knowledge and understanding of the child learning from these to engage all stakeholders in decision-making (2.3)."* Ms Lin has to take into consideration the parent's home practices and/or culture as *"We recognize that families are situated in a particular culture with their own unique values and beliefs (2.1)."* In this case, the parent's cultural practices do not match the centre's understanding of children's nutritional needs. The differences in perspectives and understanding pose a dilemma to both the Principal and Ms Lin. Ms Lin is aware that a growing child needs proper nutrition but highlighting this to Mrs. Sandra might offend her beliefs and challenge her home practices. However, Ms Lin also has an ethical responsibility to share her professional knowledge with Mrs. Sandra as to the possible alternative foods if the child is not able to eat chicken for two weeks.

2.3 What might an early childhood professional do in this situation?

Ms Lin could tactfully share with Mrs. Sandra the need for a balanced diet for a growing child especially as the child is recuperating. The centre could explore and discuss with Mrs. Sandra foods that would be suitable substitutes (e.g. fish and tofu instead of chicken) and plan a menu with the mother.

While Ms Lin and the Principal may not share the same belief as the parent that it is unwholesome to eat chicken after a bout of chicken pox, they are obliged to respect the parent's beliefs and requests. Ms Lin and/or the Principal could discuss with Mrs Sandra healthy, nutritious alternatives to chicken that would provide a balanced meal for the child. To demonstrate respect for a parent's cultural beliefs, the centre has to be willing to accommodate these requests. *"We recognize that families are situated in a particular culture¹⁴ with their own unique values and beliefs (2.1),"* and when the food brought in is deemed to be of lower nutritional value, the centre is obliged to suggest food that is more appropriate for a growing child *"We share information, knowledge and understanding of the child, learning from these to engage all stakeholders in decision-making (2.3)."* Ms Lin could also offer to help the parent in practical ways like warming up the food brought from home. When educators demonstrate their commitment to cultural sensitivity through respectful communication with families, families would more likely demonstrate a readiness to accommodate mutual differences for the benefit of the child.

2.4 Implications

This situation could have been avoided had the centre informed all parents of its policy of ensuring and providing a balanced diet for growth and development of children in their care. The centre could also provide examples of what a balanced diet looks like. The centre will need to include in their staff training and planning sessions, an understanding of diversity in its community and the role of staff in appreciating and accommodating various cultural practices.

Scenario 3: To Nap or Not to Nap

It is part of the routine in a child care centre for children to take a nap in the afternoon. Jason, who is four years old, falls asleep as soon as his head touches the pillow.

Jason's mother, Mrs Ang has requested that Jason be allowed to forego the nap in the afternoon so that he can sleep by 9.00 pm. She insists that when Jason does not have a nap, for example, at the weekend when he is not in the centre, he sleeps by 9.00 pm. However, during the week, when Jason has a nap, he tends to get sleepy only at 11.00 pm. Mrs Ang said that she has difficulty waking him up in the morning to go to the centre and she herself is still tired every morning because she does not get enough rest.

Mrs Ang explained that when Jason sleeps at 9.00 pm, she then does her household chores. If Jason were to sleep earlier, she would be able to get her work done earlier, go to bed earlier and be able to function more effectively at work. She insists that Jason should be excused from naptime. Should Ms Ching, the class teacher, accede to Mrs Ang's request?

3.1 What are the conflicting responsibilities and obligations?

In this situation, the educator has responsibilities and obligations to the mother, while she also has responsibilities to provide the best possible care and education for the child, to protect his health and safety.

3.2 Thinking about our values, responsibilities and obligations

Ms Ching knows that most children at this age benefit from short rest times or naps. This is especially when a youngster like Jason has a busy morning of activities. She has the responsibility to provide an environment that promotes healthy development. *"We ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care (1)."* Although she knows that Jason needs his rest, Ms Ching is obliged to respect and consider the mother's request. *"We recognize that families are the primary influence in a child's early years, and therefore support each family as a unit (2.2)."* Ms Ching has to balance what she believes about Jason's need to have a nap while at the same time be responsive to the mother's request. *"We collaborate with families as our partners to ensure the well-being and holistic development of children (2)."* Mrs Ang's ability to cope would therefore have an impact on Jason's well-being. In attempting to resolve the ethical dilemma, Ms Ching has to weigh and balance conflicting obligations.

3.3 What might an early childhood professional do in this situation?

Ms Ching needs to work out a viable plan with Jason's mother that would take into consideration Jason's needs, the mother's needs, and the child care centre's needs to reach an arrangement for the good of all parties. *"We demonstrate sound knowledge¹⁰ of early childhood development in our daily practice (1.6)."*

Ms Ching could suggest to Jason's mother some quiet activities like drawing or reading for Jason to do before taking a nap. In this way, Jason is eased into a shortened nap time. In addition, Ms Ching can inform Mrs Ang that she will observe Jason and monitor his behaviour during this time. If Jason does not show evidence of fatigue or a drop in his immunity, his nap time could then be gradually adjusted and reduced. *"We ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care (1)."*

Ms Ching should observe Jason's level of participation over a few weeks and suggest that Mrs Ang give her feedback on Jason's behaviour when he reaches home and his sleep patterns. *"We share information, knowledge and understanding of the child, learning from these to engage all stakeholders in decision-making (2.3)."*

Ms Ching could also share her professional knowledge on child development with Mrs Ang, such as involving Jason in a bed time routine like reading a story. This makes for an easy and calm transition to bed and helps foster Jason's perception of his room or bed as a place of comfort and security.

Both Mrs Ang and Ms Ching would need to mutually agree that if Jason's well-being is not affected by the change of routine, then he has demonstrated that he no longer needs a nap in the afternoon. However, if Jason displays tiredness or is unable to function well in the afternoon programme, Mrs Ang and Ms Ching will have to discuss the matter and make an informed decision that would ensure the well-being of Jason. *"We collaborate with families as our partners to ensure the well-being and holistic development of children" (2).*

However, if Ms Ching strongly believes that Jason's well-being and concentration is dependent on his taking a nap, then Ms Ching, as a professional early childhood educator, should take a stand and insist that it is her ethical responsibility to provide for what is best for Jason whilst he is in her care. In such a situation, the parent may decide to keep the child in the programme or find an alternative programme for him. This should not force Ms Ching to change her mind as she is obliged to speak in the best interests of the child. By doing so, Ms Ching honours the Core Values in *"Being responsible to give every child the best possible start and a happy childhood (Core Value I)"* and *"Caring with a heart and demonstrating sound knowledge of child development (Core Value II)."*

3.4 Implications

Arriving at an ethical decision in response to ethical dilemmas entails close observation and tracking of changes in behaviour both on the part of the educator as well as the child's parents. It also requires a close working relationship between parents and educators in sharing observations made by all parties before arriving at a decision that would be in the best interests of the child.

Scenario 4: Separation Anxiety

Ms Janet has just graduated with a professional teaching diploma. She has been placed in charge of the toddler class, with an assistant to help her. The centre's practice is to allow the toddlers to settle down in their own time on the assumption that they will eventually adapt to the new environment. However, parents are allowed to stay no more than three days. After one week, Hakim was still crying after being dropped off in the morning. Ms Janet carried Hakim and comforted him. The Principal, Mrs. Ling, saw Ms Janet struggling with other toddlers who also wanted her attention. She then asked Ms Janet to put the crying child down and let him settle down on his own. "Let him cry and after two days he will stop crying." Ms Janet felt disillusioned and disturbed by conflicting messages. Her training had taught her the need to be responsive to children's social-emotional needs, about attachment and separation anxiety, but she felt the centre was asking her to do otherwise.

4.1 What are the conflicting responsibilities and obligations?

Ms Janet faces a difficult situation because the Principal, Mrs Ling suggests practices that contradict what she has learnt about settling young children. Ms Janet has an obligation to comply with the Mrs Ling's instructions, but this is in conflict with her professional beliefs. She also struggles with meeting one child's needs and the needs of other children under her care.

4.2 Thinking about our values, responsibilities and obligations

The centre appears to adopt a flexible approach to settling children down as the policy allows for toddlers to settle in their own time, and this suggests that it recognises toddlers' individual needs. However, the implementation of the policy does not follow what constitutes appropriate practice.

As Ms Janet examines her responsibilities and obligations towards the new toddler, she must first resolve the conflicting responsibilities and obligations. Although she believes that she has to comfort the crying child and appreciates the Principal's point of view, she finds that the practice contradicts with what she has been taught. Thus, Ms Janet faces two ethical dilemmas, which is balancing the needs of the individual child against the needs of the group and the contradiction between what she has been taught and what the Principal wants.

Our core values state "*Caring with a heart and demonstrating sound knowledge of child development (Core Value II)*" and this confirms Ms Janet's resolve to settle the upset toddler. She also notes her ethical responsibilities to children, "*We demonstrate sound knowledge of early childhood development in our daily practice (1.6)*." It means that she has an obligation to balance the needs and provide positive experiences for all children under her care.

4.3 What might an early childhood professional do in this situation?

Ms Janet would need to resolve her two ethical dilemmas through skilful management rather than having to make a choice between adhering to the Principal's instruction or following her own professional beliefs. She is certain that effective settling is about children developing a sense of security in a safe, comfortable and caring environment. She sees an urgent need to collaborate with her assistant and identify strategies that will allow her to settle new children while providing a learning environment that will engage all the young children in the group in exploratory experiences as "*We promote the joy for learning by engaging the child in an intellectually stimulating and socially satisfying programme and environment (1.5)*."

She could work with Hakim's mother a drop-off routine, e.g. leaving after she has read two stories to him and subsequently, leaving after one story. While this is taking place, Ms Janet and her assistant could engage the other toddlers in sensorial experiences that would interest Hakim as well. At the same time, Ms Janet should discuss her strategies with her Principal.

4.4 Implications

When one's personal and professional values are in conflict with those of the centre, the teacher should first seek to work out possible solutions to resolve the conflict. When no form of agreement is reached that could result in a change of policy or practice, the early childhood professional should not bear the conflict and carry on working with the children as it would not be in his/her best interest nor the children's. The educator will only flourish in an early childhood setting where his/her professional values are aligned with that of the centre.

Scenario 5: Cup or Bottle

A group of three year olds were getting ready for their afternoon nap. It was routine for the children to take out their milk powder for Ms June, the class teacher, to have her make the milk for them.

Ms June prepared Rachna's milk in a pink cup and she drank from it. Jia Wei took out her milk bottle and sat there waiting for hers. While making her milk, Ms June asked: "Jia Wei, can you drink your milk from the cup instead of the milk bottle today?" Jia Wei shook her head, refusing. Ms June tried to coax her, "You want to try? See, Rachna is so clever, she can drink from a cup. Only babies drink from a bottle." Jia Wei shook her head again and started to cry. Ms June raised her voice and said: "You stop crying now" but Jia Wei continued to cry. "Why are you crying like that, as if your parents died?" Jia Wei cried even louder holding on to her bottle tightly. Ms June said: "Okay, stop crying and you can drink from the milk bottle today but from tomorrow, you have to drink your milk from a cup like a big girl". She stopped crying and slowly nodded her head. She took her milk bottle from Ms June, lay on her mattress and drank her milk.

The next day, Ms June said: "Jia Wei, remember you promised me yesterday that you would drink your milk from the cup?" She nodded her head and sat on the chair to drink her milk from the cup. From that day onwards, Jia Wei drank milk from the cup. Every day before naptime, she would whisper to Ms Chandra, the assistant teacher, "I don't like to drink milk from the cup, but I am scared Ms June will scold me." She appeared unhappy and did not drink as much milk as she would have from her bottle. Ms Chandra was affected by Ms June's behaviour towards Jia Wei and some of the other children in the class. Ms Chandra approached Ms June in a respectful manner to broach her concern but Ms June became defensive and told her, "I am trained and you are in training. I have seen situations like these and they have worked through this method. You cannot apply everything you learn. We cannot over protect these children."

5.1. What are the conflicting responsibilities and obligations?

In this situation Ms Chandra is trying to balance the best interest of Jia Wei and her relationship with her colleague. Ms Chandra finds herself in a difficult situation because Ms June is her senior but she does not agree with the way she is treating and responding to Jia Wei and some of the other children.

5.2 Thinking about our values, responsibilities and obligations

A typically developing three year old should be drinking from a cup and not from a milk bottle. Ms June appears to be aware of the appropriate developmental practices of three year olds, like drinking from a cup, but she has applied this to all three year olds and not taken individual differences into account.

Although Jia Wei is physically capable of drinking from the cup, she is still emotionally attached to the bottle and the comfort and security it offers. Ms. June wants Jia Wei to be weaned off the bottle and learn to drink from a cup. She is aware that children who use a bottle can fall asleep with it and this can eventually lead to tooth decay. In her frustration, Ms. June tried coaxing Jia Wei but when the child did not respond according to her expectations, she resorted to using shame and coercion tactics to get Jia Wei to change her habit. Ms June's goal to wean the child from the bottle to a cup could be in the best interest of the child, but the manner in which she dealt with the situation was harsh and unethical; thus she failed to *"...ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care (1)."*

Although Ms. June demonstrates knowledge of child development, she had used inappropriate methods, forgetting that each child's rate of readiness is unique and may not correspond exactly to developmental milestones as espoused by research. *"Caring with a heart and demonstrating sound knowledge of child development (Core Value II)."*

Ms Chandra was uneasy at how Ms June insisted that Jia Wei drink from the cup. Ms June's quick rebuttal when Ms. Chandra raised her concern about the manner in which she responded to the child was perhaps because she saw her comments as disrespectful and a criticism. She reacted by putting Ms Chandra down.

5.3 What might an early childhood professional do in this situation?

Ms June needs to pay due regard to the child's feelings. She was intimidating Jia Wei into complying with her demands by using inappropriate language, making comparisons between children and using her authority to get the child to comply. *"We value and respect each child within the diversity of their family, culture, community and society (1.1),"* Ms June needs to work with the family to gradually wean the child off the bottle. The child may be receiving conflicting messages about drinking from a bottle at home and in the centre.

With regard to relationships with and obligations to colleagues, the Code states, *"We promote a climate of openness and transparency in the work place to speak and act in the best interest of the child (4.2)"* and *"We support and collaborate with colleagues, employers, board of management, interns, researchers and other professionals²² in the provision of quality care and education for each child (4)."* This puts Ms Chandra in a difficult position. There is a conflict in her belief about what is best for Jia Wei and what she believes will sustain her relationship with her colleague. She realises that her first responsibility lies in protecting Jia Wei; the teacher needs to be the voice for the children when they are vulnerable and unable to speak for themselves. Then she needs to communicate this to Ms June as *"We address concerns about a person's professional integrity, behaviour or conduct to that person in the first instance (4.3)."* and in so doing, *"We promote a climate of openness and transparency in the work place to speak and act in the best interest of the child (4.2)."*

Although Ms Chandra was a bystander in this situation, her interpretation of the Code as to how an educator should behave does not allow her to condone Ms June's handling of the situation. Ms Chandra would need to persist in reaching a collegial solution. She must demonstrate care and sensitivity and show respect for personal dignity when expressing her opinion and attempting to resolve the matter collegially, as stated in our core values, "*We address concerns about a person's professional integrity, behaviour or conduct to that person in the first instance (4.3).*" If a collegial solution is not reached, Ms Chandra has the responsibility and obligation to report Ms June's unprofessional behaviour to the Principal.

5.4 Implications

Children in our care should be respected and valued by all adults in the centre. So, even if the adult is an assistant educator or an in service educator, she/he is obliged to report the matter to the Principal if she/he witnesses a trained educator, , behaving unethically.

Scenario 6: Photo-Taking and Video Recording

Jasmine is into her second week at kindergarten. She is enjoying her time in her K1 class. Her parents came with her into the class one morning to have an idea of what makes Jasmine so enthusiastic about coming to kindergarten. Ms Sim, the class teacher, welcomed the parents' visit and encouraged their interest in Jasmine's experiences in the kindergarten. As Jasmine plays with her friends, her father whips out his hand phone and starts to take pictures of Jasmine at play. He takes a few shots of Jasmine posing with her classmates as well. Upon witnessing this, Ms Sim approached Jasmine's parents reminding them of the centre's policy of no photo-taking unless permission is given by the principal. The parents apologised and put away the phone. A few days later Mrs Wong, appearing very upset, approached Ms Sim because she had found photos of her daughter posing with Jasmine in class in the Facebook account of Jasmine's mother whom she had befriended.

6.1 What are the conflicting responsibilities and obligations?

The educator has a responsibility to safeguard the children's health, safety and general well-being of all children. Ms. Sim has to work on collaborating with families for the best outcomes of each child. Welcoming Jasmine's parents to class to see what their daughter is learning helps the family understand the centre's curricular goals and strengthen family engagement in the centre's programme over time.

While Jasmine's parents may like to capture happy moments of their daughter at play, the educator also has a responsibility to other families to ensure that their privacy and confidentiality are protected.

6.2 Thinking about our values, responsibilities and obligations

Ms Sim understands clearly that the vulnerability of children means that they depend on caring adults to protect them. *“We ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care (1).”* The centre’s policy on photo-taking would have been made known to parents upon their child’s enrolment. However, the successful implementation of such a policy relies on the co-operation of parents to understand the basis and rationale of refraining from freely taking photos that include other children.

It is a delicate balance to protect children’s vulnerability and yet support families wanting to build memories of their child’s early childhood experiences. However, families need to co-operate & support centre’s staff in protecting the interests and welfare of their children. This means, *“We support the profession in providing the highest quality of service (5)”*. In upholding this obligation, we set parents’ hearts and minds at ease because *“We respect the family’s right to privacy and maintain confidentiality (2.4).”*

6.3 What might an early childhood professional do in this situation?

Jasmine’s father may have unintentionally breached the centre’s policy of “No photography/no videotaping”. Jasmine’s mother may not have any malicious intent in posting the photos of her child and friends on her Facebook. But her action had upset Mrs. Wong, the mother of Jasmine’s friend. Ms. Sim should empathize with Mrs. Wong and offer to speak to Jasmine’s mother in an attempt to mediate between the two ladies. Ms. Sim and her Principal could take this opportunity to impress upon the parents of the risks of posting photos on social media and the reason for the centre’s “No photography/no videotaping” policy.

6.4 Implications

In an age of digital media and social networking, educators and families need to understand that the open nature of social media could present unimaginable ethical issues. A policy of “No photo taking” should extend to “No video taking” as well, as images once uploaded could go viral and the impact could have implications. In addition, educators need to be knowledgeable of Singapore’s laws on the use of personal data (Personal Data Protection Act 2012 <http://pdpc.gov.sg>).

How do we balance the harmful effects and benefits, reducing the one and increasing the possibility of the other? Erring on the side of caution is therefore advised.

Scenario 7: To inform or Not to Inform

As the weather had been very wet on Friday, the children could not go to the outdoor playground and were therefore ushered into the multi-purpose room. Teacher Sylvia noticed that little Ling Feng looked a bit listless. When she swept her hand over the girl's forehead, it felt a little warm. One of Ling Feng's peers was sent home early in the morning for suspected case of HFMD. Teacher Sylvia was in two minds whether to inform Ling Feng's mother, someone that the centre staff wanted to have as little contact with as possible. Teacher Sylvia consulted the Principal, Mrs Lee, who instructed the teachers not to raise the issue of HFMD with Ling Feng's mother for fear she would hold the centre responsible. This centre had previously dealt with the unpleasantness of parents creating a ruckus over a small matter. Mrs Lee reasoned that with the weekend coming up, if indeed Ling Feng was showing more of the symptoms, her mother would not think that her daughter contracted it from the preschool.

On Monday, Ling Feng's mother indeed called the centre to inform them that her daughter was suspected to have HFMD.

7.1 What are the conflicting responsibilities and obligations?

The educator has to ensure that the children's health, safety and general well-being are at the forefront of her practice. It is also her responsibility to work in partnership with parents and keep them informed in good times. In this situation, not only is Ling Feng's health and safety in question, so is that of the other children. Teacher Sylvia is faced with the dilemma to uphold her duty to the children and their families as well as comply with her Principal's instruction to withhold vital information that could endanger the health of the children. Although she has the duty to support and cooperate with the Principal and colleagues, she also has an obligation to work with them to provide the highest quality services that work in the best interest of the children.

Aside from upholding the same obligations as the teacher, the Principal has a higher responsibility in ensuring the health and safety of all children under her charge. But to do so could mean subjecting herself and her staff to what she perceives would bring undue attention again and thus adversely affect the reputation and future enrolment of the centre.

7.2 Thinking about our values, responsibilities and obligations

Before all other responsibilities and obligations, Teacher Sylvia and the Principal are responsible for keeping the children safe and in good health. *“We ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care (1).”* This would mean following the due processes when Teacher Sylvia suspects that the child may be unwell. As there is a suspected case of HFMD, there is a need to be more vigilant than usual to minimise the risk and spread to the other children. Having the child’s temperature taken is necessary and guidelines are in place that require the child to be isolated from the group, kept under watch in the sick bay and a phone call made to immediately inform the child’s parent or guardian. Similarly, taking precautionary actions, such as cleaning areas and materials that Ling Feng had come into contact with to minimize the risks to the other children is also necessary. In so doing, *“We collaborate with families as our partners to ensure the well-being and holistic development of children (2).”* Teacher Sylvia’s duty to follow these processes also upholds our obligation to the community because *“We support national initiatives and policies that promote the well-being of young children and their families (3.3).”* If such processes in place at a centre are not followed through accordingly, the child’s health and safety and those of the other children are put at risk.

In the event that the Principal stands by her decision not to inform Ling Feng’s mother, Teacher Sylvia would have to remind the Principal of the centre’s responsibilities in this situation. *“We uphold the reputation of the profession to ensure the protection and best interest of the child and educator (5.2).”* In giving this advice she ensures that, *“We address concerns about a person’s professional integrity, behavior or conduct to that person in the first instance (4.3)”* and *“We foster positive self-esteem at the workplace, help colleagues and staff develop professionally (4.6).”*

Should the Principal stay firm in her decision, Teacher Sylvia may have to bring the matter to the attention of the Management Committee or Headquarters. If all these avenues have been looked into with no ethical stand taken, then Teacher Sylvia has no other recourse but to report any licensing or policy infractions (Child Care Centres Act, Chapter 37A, 2012) to the relevant authorities. This action maintains our responsibilities and obligations to the children because, *“If there is reasonable cause to suspect neglect or child abuse, we are obligated to report to the relevant authority (1).”* In so doing, Teacher Sylvia also upholds her obligation to the community, *“We support national initiatives and policies that promote the well-being of young children and their families (3.3)”* and the profession *“We abide by the laws and regulations of the country (4).”*

7.3 What might an early childhood professional do in this situation?

Teacher Sylvia will have to discuss her concerns confidentially and respectfully with the Principal and share her concerns about how the matter is being handled and the implications. Taking this initiative upholds Teacher Sylvia's responsibilities to the profession, "*We address concerns about a person's professional integrity, behavior or conduct to that person in the first instance (4.3).*" Similarly, her action ensures that "*We promote a climate of openness and transparency in the work place to speak and act in the best interest of the child (4.2).*" In raising her concerns with the Principal, Teacher Sylvia is upholding her responsibilities to her Management, "*We uphold the reputation of the profession to ensure the protection and best interest of the child (5.2).*"

If talking to the Principal or Management Committee/Headquarters did not remedy the situation, Teacher Sylvia has first and foremost a moral obligation to honor her ethical responsibilities to the children, "*We ensure the psychological safety, intellectual safety, physical health and safety of each child whilst in our care. If there is reasonable cause to suspect neglect or child abuse, we are obligated to report to the relevant authority (1).*" If children's health and safety are endangered, the Code provides clear and strong direction that the teacher must report the problem. To not do so would mean that the child is left in a perilous situation. In addition, the health and safety of all adults and children in the centre will be put at risk because of inaction.

7.4 Implications

It will be of great value in such a situation for all ECD professionals to learn more about standard operating procedures (SOP) on handling such illnesses. The centre must be familiar with and understand the Ministry of Health and ECDA's SOP on how to manage such incidents. This knowledge will provide the clarity for the course of action. If in doubt, call ECDA hotline @67359213.

SCENARIOS FOR CONSIDERATION

Review the following scenarios. Use the questions to guide your reflections on the Code of Ethics as you address and resolve the issues presented in each scenario.

1. What are the conflicting responsibilities and obligations brought about by this situation?
2. What are our values, responsibilities and obligations?
3. What should an early childhood professionals do in this situation?
4. What are the implications on professional practices stemming from this situation?

Scenario 8: Wearing the Crown

(This incident took place in a K1 classroom)

Pei Yee and Jason threw Toby's artwork on the floor when he would not lend them the crayon they wanted. Toby got upset and started to cry loudly. Apparently this type of behaviour had been happening for several weeks. Ms Mary, the class teacher, talked to Toby and asked him how he would like to resolve the situation. Toby said, "Let them wear a crown with "I am a bully." written on it. (Giving children a crown to wear for a day when they were well-behaved was one of the ways Ms Mary rewarded good behaviour in class.) Ms Mary thought for a moment, and then supplied the tape, paper and marker for Toby to make the crowns. Pei Yee and Jason reluctantly put the crowns on their heads and went off to have lunch.

Scenario 9: Conflicting Roles

Six year old Tse Han attends the same school where his mother, Mrs Tan, works as a teacher. Ms Wong is Tse Han's class teacher. On one occasion, when Tse Han was playing in the playground, he went down the slide face down instead of legs down. Ms Wong reminded Tse Han to come down the slide legs first but he ignored her and continued to slide face down. Mrs Tan, who was also in the playground at that time, rushed to the scene, smacked her son's bottom and raised her voice at him saying, "This should teach you never to come down the slide face down". The children in the classroom witnessed the incident.

Scenario 10: A Global Classroom

You have been teaching for several years and noticed that increasingly there are more children from multi-cultural, multi-lingual families. You speak English and Mandarin and you have used both languages in your classroom—for conversing with children and other adults, for labelling the bookshelves, etc. You have some Vietnamese and Indonesian children who do not speak English in your group. You have asked their parents to teach you some words in their home language so that you can help the children with routines and in their play—words such as "bathroom", "outside", "inside" and "lunch". You realise that the child's home language is an important bridge to the new environment. Several parents whose home language is not English are concerned that their children will not learn English if you keep speaking their home language in the classroom. The Vietnamese families do not want their children speaking Vietnamese in the classroom. They want you to have "English lessons" for the toddlers and pre-schoolers.

Scenario 11: Child's Irregular Attendance

Five year old Su lives with her father and his partner. Her mother is currently serving a prison term. Most days, it is her maternal grandmother who walks her to and from kindergarten when she stays with her. When she is unable to do so, and Su's dad forgets to send her or pick her up from the kindergarten, she is left waiting, not really sure whom she will be going home with or which house she would be returning to. Su's class teacher feels sorry for her and whenever she comes to the centre, she would try and get her to do more work which she resents. The Principal does not want to get involved with Su's family affairs and she maintains a distance from them.

Scenario 12: Research and Children's Well-being

ABC centre is one of the most sought after kindergartens around. It attracts visitors from around the world as a kindergarten that has its focus on innovation and creativity. ABC centre is often asked to participate in early childhood research. ABC centre is also a favourite with tertiary institutions who send their students there for regular practicum attachment and classroom observations.

This morning 5-year old Samantha is looking a little teary and appeared uncooperative when the research assistant asked her to complete a 45-piece puzzle within a minute for children in the experimental group. Should Samantha be encouraged to give it another try as she is almost near completion just before the buzzer went off?

The scenarios illustrate how difficult or challenging situations can be addressed. The situations are challenging because they involve competing beliefs, responsibilities and obligations about what is best practice for children. When analysing the scenarios from an ethical perspective, one needs to consider a range of possibilities rather than the obvious and immediate. We may be tempted to take the easier route to resolve situations, but in order to act in the best interest of the child and all stakeholders, it is necessary to examine all possibilities.

Conclusion

We hope that this Handbook will generate discussions amongst colleagues and raise questions for personal reflection; thus developing skills in ethical decision-making. For instance, in some scenarios, there may be more than one good resolution for a challenging situation. In such cases, it is good to discuss and reflect on ethical issues with colleagues in order to arrive at the most appropriate resolution that is respectful to all individuals involved. When faced with complex ethical dilemmas, especially when it involves cultural differences and family beliefs, it is important that we acknowledge that these differences exist. They need to be discussed with the view of keeping in mind the best interests of the child. But, when *“competing views are based on strongly held value differences especially those relating to culture, solutions might not easily be found and the educator may need to agree to disagree”* (Feeney, Moravick, Nolt & Christensen, 2010, p25).

We also sometimes come across situations where colleagues have differing values resulting in conflicting viewpoints and approaches. Personal values cannot always guide professional behaviour because the opinion of what is right is diverse among professionals. On the other hand, professional values are based on standard ethical behaviour and embrace shared values of the profession. So when we strive to do the right thing for children, we must work with knowledge, skills, respect, ethical values and integrity. What is right for children should be based on principles and thoughtful reasoning through systematic application of professional ethics. That is why the Code is of paramount importance because it acts as a moral compass, one that embodies our professional values, obligations and responsibilities and gives clear guidance on how educators ought to respond and behave in their daily work. The Code connects and unifies early childhood educators to speak with one voice about our professional commitments to children, families, community, profession and employer.

ENDNOTES

¹**We** – Denotes everyone involved in the care and education of young children, for example: teachers, educators, support staff, supervisors, principals, management, teacher educators.

²**Psychological safety (1)** – To be responsive to and cause no emotional harm to any child so that each child feels safe and secure.

³**Intellectual safety (1)** – To be responsive to and cause no intellectual harm to the development of each child’s thoughts, ideas and feelings and allow them to express themselves openly in a supportive environment.

⁴**Physical health and safety (1)** – To cause no physical harm or injury to any child and ensure a safe and healthy environment.

^{4a} **Child abuse (1)** – All forms of physical or mental violence, injury or abuse, neglect or negligent treatment, maltreatment, or exploitation, including sexual abuse. Article 19, The UN Convention on the Rights of the Child

⁵**Respect (1.1)** – To take a personal interest in each child and pay due regard to the child’s feelings.

⁶**Diversity (1.1)** – To be aware of and understand the differences in family backgrounds, values and practices.

⁷**Inclusive (1.3)** – To plan and implement programmes that focus on the needs, abilities and interests of children with disabilities, developmental delays and special abilities alongside typically developing peers in regular mainstream classes.

⁸**Intellectually stimulating (1.5)** – To provide a purposeful environment in which each child is challenged, supported and provided with opportunities to succeed and value learning.

⁹**Socially satisfying programme (1.5)** – To encourage children to develop positive relationships and friendships through work and play.

¹⁰**Sound knowledge (1.6)** – To engage in informed early childhood practices.

¹¹**Families (2)** – Singapore does not recognize, legally or socially, family forms that are not based on a legal marriage. Families include dual parent families, single parent families, foster and blended families, extended families and estranged families.

¹²**Partners (2)** – Implies no sense of superiority on the part of early childhood educators but a recognition that both the family and the early childhood educator have a complementary role to play.

¹³Holistic (2) – Refers to the all-round development of the child: physical, intellectual, social, emotional, moral and creative development, without undue emphasis or pressure to concentrate on any specific area.

¹⁴Culture (2.1) – Refers to differences within a group like age, beliefs, education and to differences between ethnic groups like religious practices, dress codes, diet. It is the responsibility of educators to develop understanding and knowledge of a family's cultural values and beliefs and not impose their own.

¹⁵Primary (2.2) – Of chief importance as well as being the first or earliest, in terms of influence on children.

¹⁶Support (2.2) – To provide professional information and assistance as necessary, but not to take over the role of parent.

¹⁷Share information (2.3) – Implies trust and that confidentially will not be breached. Information allows each party to have a more complete picture of the child's development so that timely and informed decisions can be made, for example about seeking specialist help, changing diet, accessing early intervention.

¹⁸Community (3) – In the Singapore context, this refers to different ethnic, social and economic groups sharing common core values and aspirations.

¹⁹Agencies and other professionals (3) – includes government and non-government organizations whose specialist knowledge will contribute to the well-being of children.

²⁰Contribute towards raising awareness (3.2) – Through various forms, mediums and appropriate occasions, for example: research, public education, training, continuing education, forums, workshops, seminars and conferences.

²¹National initiatives and policies (3.3) – For example, the Child Care Act, Good Practices Handbook, licensing assessment and the New Curriculum Framework.

²²Other professionals (4) – Denote anyone whose work is related to the interests and well-being of the child, for example: therapists, counsellors, social workers, medical staff.

²³Professional qualification (4.1) – Refers to preparation specifically for working with young children and families to meet their developmental and learning needs.

²⁴Affiliations (4.1) – Refer to personal relationships and professional membership.

²⁵Climate of openness and transparency (4.2) – Implies honest and truthful discussion and communication to ensure smooth relationships.

²⁶Early childhood fraternity (4.5) – Refers to all who acknowledge and support common values and goals.

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ANNEX A

Association for Early Childhood Educators (AECES)

The Association for Early Childhood Educators, Singapore (AECES) was inaugurated in 1999 with the merger of the Pre-School Teacher's Association of Singapore (PSTA-1975) and the Association for Child Care Educators (ACCE – 1990). The aim of this merger was to enable the Association to work effectively towards its mission of promoting quality programmes for young children and their families by providing continuous professional development for early childhood educators.

However, over the years, AECES as a professional body has been nurturing professional learning communities, growing the fraternity and acting as an agent of change to transform the image of early childhood educators. Today, locally and internationally, AECES is an invaluable resource as it has nurtured many early childhood professionals who now act as resource persons for the community. It fosters a caring community built on respect, resourcefulness, responsibility and integrity. It engages in community development through collaborating with various government agencies and community partners to enhance the well-being of all children and families.

Early Childhood Development Agency (ECDA)

ECDA is the regulatory and developmental authority for the Early Childhood Development (ECD) Sector that oversees the key aspects of children's development under the age of 7 years old. Formed in April 2013, ECDA is jointly overseen by Ministry of Education (MOE) and Ministry of Social and Family Development (MSF), and is hosted under MSF.

ECDA believes that all children deserve quality early childhood experiences, and collaborates with stakeholders and professional agencies to bring affordable and quality ECD Services to every Singapore child. Educators who have direct contacts with children hold the key to the delivery of quality services. They can make a significant difference to the children's learning experience and foundation for future learning. Learn more about how ECDA can support you at **www.ecda.gov.sg**

Education Services Union (ESU)

ESU represents employees working in private education institutions, universities, international schools, pre-schools, and freelance educators. Its current membership stands at over 22,000 members. ESU aims to grow its community and advance the interests of working people in the private education industry. For more information, please visit www.facebook.com/esu.sg or call 6872 1148

ANNEX B

Brief History of Early Childhood Development (ECD) in Singapore from 1940s

ECD has come a very long way since the few privately and community operated kindergartens and child care centres from the volatile 1940s and 1950s of Colonialism, Japanese Occupation and Self-governance. The community and educators then, trained and not so trained, rose to build and serve ECD unreservedly.

Urgent national priorities right up to the 1970s had been the establishment and consolidation of formal Education at Primary, Secondary, Post Secondary and Tertiary levels. However, since the late 1970s and through the 1990s, ECD related researches and reviews, experimentation and policies, tweaks and changes were undertaken. The government's foci were on defining outcomes, designing curriculum and improving quality within a very diverse privately owned and community operated sector supported by increasing government leadership and funding to provide accessible and affordable quality ECD services.

By 1999, there was a Pre-School framework on which current initiatives rest. From the early 2000s, the desired pre-school student outcomes was released, Early Years and Kindergarten Development Frameworks, other curricular resources, standards for teacher training and qualifications as well as guides and regulation for centre operation were established. In 2013, the Early Childhood Development Agency (ECDA), a regulatory and developmental authority overseen by both MOE and MSF, was set up.

ECDA builds on existing foundation uplifting the sector through a myriad of initiatives in professional recognition and development courses, career pathways, public outreach, infrastructure upgrading and a slew of financial support. It actively partners all stakeholders to achieve better leverage, too.

Now the sector has about 500 kindergartens, 1200 childcare centres, 120,000 children and more than 17000 educators. ECD is the final piece in the jigsaw puzzle of Education in Singapore. Much has been done and there is so much more potential for further growth and innovation to give our young a good start. Together, we are creating the future history of ECD now.

ANNEX C

Evolution of Code of Ethics Document

THE FUTURE BECKONS...

- 2015** A revision Code of Ethics Handbook
- 2010** Launch of “*Code of Ethics Handbook: An essential companion for daily practice*” at the NP-AECES Early Childhood Conference: Voices for Children by Senior Parliamentary Secretary Masagos Zulkifli.
- 2009** Survey by AECES Executive Committee confirmed a strong need for the application of ethics in daily practice.
- 2006** Minor revisions made based on feedback from the early childhood community.
- 2004** Launch of “Code of Ethics: A Living Document – Guidelines for professional responsibilities in early childhood education” during the MCYS-AECES Child Care Seminar.
- 2003** 1st Draft of Framework of the core values and obligations was formulated.
- 2000** A Code of Ethics Committee was set up to garner feedback and engage members, practitioners from the field, and leaders in the early childhood field, concerned & interested parties. Through dialogue & discussion professional values & obligations that characterise guiding principles were surfaced.
- 1999** AECES mooted the idea of a Code of ethics for the profession in 1999 and at the First MCD Child Care seminar.
- 1990s** A growing sense of need for professional standards in the development and training of early childhood practitioners that would unify early childhood educators under one set of guidelines.

Educator's Notes:



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