



THE ART OF LISTENING TO BABIES

A Creative Consultation with
Glasgow City Council
Research Report

THE ART OF LISTENING TO BABIES



**A partnership between Glasgow City Council,
Starcatchers, The Royal Conservatoire of Scotland
and Queen Margaret University.**

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EXECUTIVE SUMMARY

Background: The Art of Listening to Babies project was a partnership between Starcatchers, Glasgow City Council (GCC), Queen Margaret University, and the Royal Conservatoire of Scotland. The research explores the experiences of very young children (0–2 years) in Early Learning and Childcare (ELC) settings across Glasgow, with the aim of informing future planning and service delivery. GCC is one of six early adopter areas in Scotland trialing new childcare models for children from 9 months old. As part of this pilot, GCC’s Early Years Team identified a need to better understand the experiences of babies and toddlers in ELC. In collaboration with Starcatchers, in-service training was delivered across 26 nurseries, and eight weekly creative consultation sessions were facilitated by Starcatchers artists in six of these settings.

Aim and Research Questions: Led by Queen Margaret University and the Royal Conservatoire of Scotland, the research aimed to understand how funded ELC settings meet the needs, interests, and voices of very young children, and how adults support their right to be heard. The study addressed two key questions:

1. How are the needs, interests, and voices of very young children being supported in everyday experiences in funded ELC?
2. How do the experiences and perspectives of very young children impact more strategically on the planning and delivery of care (short, medium and long term)?

Participants and Methods: The study involved 87 participants, including babies and practitioners from GCC nurseries and Starcatchers artists. A broadly qualitative approach was used, drawing on observations of creative practice, interviews and focus groups with practitioners, and interviews with Starcatchers artists and the project facilitator. An anonymous survey was also distributed to practitioners from the 20 nurseries that received Starcatchers training but did not take part in the creative consultations.

Findings: Analysis from the creative consultation settings identified four key themes in how babies were being listened to: attunement to babies’ “wee cues”; cultivating a listening ethos; recognising babies’ richness as humans and learners; and navigating barriers through creative problem-solving. Survey findings supported and expanded on these themes. Practitioners also highlighted challenges including staffing pressures, administrative demands, a tendency for resources to flow to older children, and the importance of appropriate indoor and outdoor environments. Overall, the findings suggest that babies’ voices meaningfully shape planning within nursery settings, where practitioners play a central role in interpreting and advocating for babies’ perspectives. However, despite this local influence, practitioners felt babies’ voices have limited visibility or impact at council level.

Impact on Practice: While this report is not a formal evaluation of the project, practitioners reported that The Art of Listening to Babies was valuable professional learning and had prompted new ideas or refreshed existing routines around their practice. This was true for those who had received only the in-service days as well as those involved in the creative consultations. The Art of Listening to Babies was highlighted as particularly helpful for practitioners new to working with babies or supporting older children with communication needs.

Conclusion: The findings highlight an opportunity to deepen consideration of how babies' voices are sought and given influence across all levels of ELC decision-making. Strong evidence of effective practice within GCC nurseries provides a solid foundation for developing clearer, more direct pathways between nursery-level insights and council-level planning, ensuring that babies' voices remain visible throughout the process.

Recommendations:

- Explore opportunities for direct and transparent avenues for babies' voices to be heard in the strategic, long-term planning within nurseries and within the council more broadly.
- Consider the efficacy and appropriateness of using Voice of the Baby approach with older children (in nursery) with communication needs (ASN / Children with English as second language).
- Develop ways for practitioners across GCC nursery settings to create a community of practice where consultation, discussion, debate and sharing of best practice can be facilitated.
- Consider the equity of funding opportunities available for babies and the professional learning of practitioners working with them, and the equity of focus (in relation to other age groups within nursery).
- Ensure high quality provision both in the numbers of practitioners and, crucially, their preparedness within the early years profession.



INTRODUCTION

This project explored the experiences of very young children (0-2 years) in early learning and childcare (ELC) settings within Glasgow City Council, to inform the planning and delivery of services.

Young children in Scotland are currently entitled to 1140 hours of funded early learning and childcare when they turn three years old, or in some cases, at age two if their families meet certain eligibility requirements [1]. There is potential for further expansion of funded childcare. Glasgow City Council is one of six early adopter communities in Scotland where innovative models of childcare from 9 months old are being piloted[2]. As part of the pilot work, the Early Years Team at the Council identified a need to better understand the experiences of children aged 0-2 years old within early learning and childcare settings. The Art of Listening to Babies project explores how the needs, interests, and voices of babies are being supported in settings and how their experiences and perspectives impact the planning and delivery of care.

The Art of Listening to Babies builds on previous work by Starcatchers. Since 2022, Starcatchers, along with researchers Dr Rachel Drury (Royal Conservatoire of Scotland) and Dr Cara Blaisdell (Queen Margaret University) have been pioneering new research to examine how the arts can be used to support babies and young children (0-3) in the realisation of their right to be heard under Article 12 of the United Nations Convention on the Rights of the Child (UNCRC). With babies and young children being a group whose right to be heard is often overlooked, Starcatchers is working to ensure that they are included in participation and consultation activities that take place at home, in community contexts and within ELC settings.

Starcatchers' Voice of the Baby: A Reflective Guide for the Arts and accompanying In Practice resources have support professionals across sectors to use an arts-based approach when working with babies. Starcatchers has been embedding this methodology across the organisation and is developing expertise in working alongside other professionals to both deepen understanding and elicit the views of babies and young children. The Voice of the Baby: A Reflective Guide for the Arts has been used in two consultation projects: Love Letham in Letham, Perth with WeAll Scotland, and a project with families in Moray and the East End of Glasgow to reflect on the experience of lockdown to feed into the Scottish Covid-19 Inquiry. The Reflective Guide has proven to be an effective tool to ensure that the voices, needs and interests of babies and young children are heard and included. In The Art of Listening to Babies, Starcatchers have also built on a pilot project which tested and refined a Planning and Reflection workbook for use by early years practitioners themselves.

[1] Scottish Government, 'Funded Early Learning and Childcare for 3 to 5 Year Olds'; Scottish Government, 'Funded Early Learning and Childcare for 2 Year Olds'.

[2] Scottish Government, Equality, Opportunity, Community: Our Programme for Government; Scottish Government, 'School Age Childcare'.

The Art of Listening to Babies had two strands. This report focuses on the research strand, undertaken by researchers from the Royal Conservatoire of Scotland and Queen Margaret University. The research explored how babies' voices were being heard in everyday experiences of ELC, and how babies' experiences and perspectives impact strategically on planning. It included observations of artistic practice, an interview with the artists, interviews and a focus group with early years practitioners, and a survey with early years practitioners.

The other strand consisted of creative consultations with babies in six early years settings, conducted by Starcatchers-affiliated artists and a facilitator. A full report on the creative consultations is available at www.starcatchers.org.uk.

Aims, Objectives and Research Questions

The principal aim of the research strand was to explore how funded Early Learning and Childcare (ELC) settings are meeting the needs, interests and voices of very young children (0-2s) and to explore the role of adults in supporting their right to be heard. In achieving this aim, we set out the following research questions and objectives:

Research questions:

1. How are the needs, interests, and voices of very young children being supported in everyday experiences in funded ELC?
2. How do the experiences and perspectives of very young children impact more strategically on the planning and delivery of care (short, medium and long term)?

Objectives:

- (a) Examine how adults support the needs, interests, and voices of very young children in ELC settings.
- (b) Assess the impact of young children's experiences and perspectives on the planning and delivery of care.
- (c) Develop practical recommendations for ensuring young children's voices are meaningfully included in ELC practice and policy.

PARTNERSHIP ROLES

Glasgow City Council

Glasgow City Council Early Learning and Childcare (ELC) provision is substantial, consisting of 110 council-run nurseries, alongside 345 private and voluntary childcare providers throughout the city[3]. The Art of Listening to Babies project involved 26 council-run nurseries. Six out of the 26 nurseries were chosen by GCC to take part in the creative consultations led by Starcatchers artists between April 2025 and January 2026. During the same time period, practitioners[4] from all 26 nurseries were invited to participate in several in-service knowledge exchange sessions led by Starcatchers, to support their independent arts-based consultations with babies in their care.

Starcatchers

Starcatchers was commissioned by GCC to engage in creative consultations across six of its nursery settings. The creative consultations consisted of eight weekly creative arts sessions that lasted approximately 1 hour each. These sessions were led by two Starcatchers artists and supported by a facilitator whose role was to take notes and observe what was being learned from the babies in the session. There was at least one session in every setting where a guest artist joined the core team. In addition to these sessions, Starcatchers delivered three in-service knowledge exchange sessions for the wider GCC Early Learning and Childcare settings, consisting of one full-day, and two half-day sessions.

The Royal Conservatoire of Scotland and Queen Margaret University

Building on their previous work with Starcatchers on the Voice of the Baby project, Dr Rachel Drury and Dr Caralyn Blaisdell undertook research alongside the creative consultations, interrogating key questions regarding how babies' views are being heard and how those views impact on planning at short, medium, and long-term levels.

[3] Glasgow City Council, 'Early Learning and Childcare'.

[4] Job titles and roles in ELC organisational structures vary widely between and within local authority areas in Scotland. In this report we use the term 'practitioner' rather than try to capture the specific job title of each participant.

DEMOGRAPHICS OF THE SIX SETTINGS HOSTING CREATIVE CONSULTATIONS

Demographic information for the six nurseries receiving the creative arts sessions was provided by GCC for context. There is a total of 501 children across the six nurseries with totals in each individual nursery ranging between 60 and 110 children (mean total of 84 children per nursery). A total of 171 practitioners work across the nurseries with a range of between 19 and 34 practitioners at each (mean total of 29 per nursery).

The Scottish Index of Multiple Deprivation (SIMD) 2020 is the Scottish Government's official tool for identifying concentrations of deprivation in Scotland, combining seven different domains (aspects) of deprivation: income; employment; health; education, skills and training; geographic access to services; crime; and housing. These domains are measured using a number of indicators to form ranks for each domain. Data zones are ranked from 1 being most deprived to 6,976 being least deprived. These are then ranked in quintiles to give SIMD 1-5 ranges with 1 being most deprived and 5 being least deprived[5].

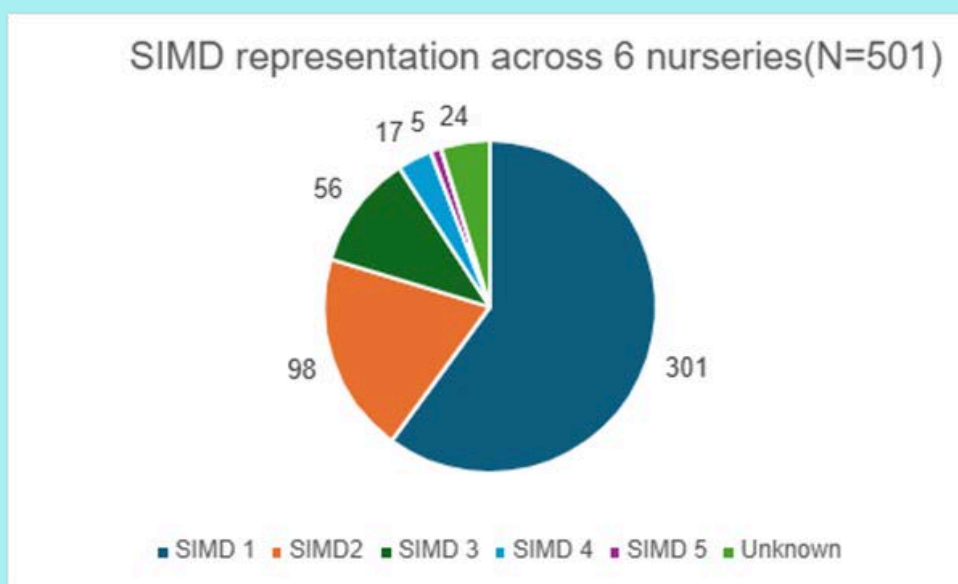


Table 1: SIMD representation across 6 nurseries

The majority of children (N=301 / 60.1%) across the six nurseries live in SIMD 1 areas of Glasgow which are areas among the 20% most deprived data zones in Scotland. A total of 98 (19.6%) live in SIMD 2 areas, and 56 (11.2%) in SIMD 3.

There were 17 different ethnicities reported across the 6 nurseries (see Table 2) with 53% of the children (N= 266) identified as being 'White Scottish'. The ethnicity of 18.2% of children (N=92) was either 'not known' or 'not disclosed'. The third largest grouping was 'Asian - Pakistani / British / Scottish' representing 6.2% of children (N=31).

[5] Scottish Government, 'Scottish Index of Multiple Deprivation'.

Ethnicity	TOTAL	%
African - African / British / Scottish	12	2.40%
African - Other	9	1.80%
Asian - Bangladeshi / British / Scottish	5	1.00%
Asian - Indian / British / Scottish	18	3.59%
Asian - Pakistani / British / Scottish	31	6.19%
Asian - Chinese / British / Scottish	1	0.20%
Asian - Other	7	1.40%
Caribbean or Black - Caribbean / British / Scottish	4	0.80%
Caribbean or Black - Other	1	0.20%
Mixed or multiple ethnic groups	5	1.00%
Not Disclosed	4	0.80%
Not known	88	17.56%
Other - Arab	8	1.60%
Other - Other	14	2.79%
White - Irish	1	0.20%
White - Other	11	2.20%
White - Other British	15	2.99%
White - Polish	1	0.20%
White - Scottish	266	53.09%
TOTAL	501	100.00%

Table 2: Overview of ethnicities recorded across the 6 nurseries receiving creative arts sessions.

METHODS

The research methodology for this study uses a qualitative approach which focuses on understanding meaning, experience, and social realities from the perspectives of the people involved. Whilst we have used some data collection methods that can be expressed through quantitative means, the use of content analysis allows us to look beyond the numbers to interpret meaning and understand the narratives behind them.

Participants

A total of 87 participants were involved in the study. The participants were drawn from the following groups:

- Starcatchers artists and facilitator (N=4)
- Babies from six GCC nurseries involved in the creative consultations (N=38)
- Practitioners from six GCC nurseries involved in the creative consultation (N=24)
- GCC ELC practitioners from across 20 other settings who attended the in-service training but were not involved in the creative consultations (N=21)

See Table 3 for a breakdown of these numbers across the different data collection points.

Data collection and analysis

Data collection methods included:

1. Observations, using a shared observation framework, of the creative consultations in six GCC nurseries
2. Semi-structured (individual / group) interview with:
 - a. ELC practitioners from GCC nurseries involved in the creative consultations
 - b. Starcatchers artists and facilitator
3. Focus group with practitioners from across the six GCC nurseries involved in the creative consultations
4. Online survey for GCC ELC practitioners in the other 20 settings who attended the in-service training but were not involved in the creative consultations



Reflexive Thematic Analysis (RTA)[6] was used to analyse the qualitative data gathered through observations, interviews and the focus group. Reflexive Thematic Analysis involves the researchers thoroughly familiarising themselves with the data, generating themes, identifying patterns of meaning, and bringing information together into an analytical narrative. Through this analysis, four themes were generated in regard to how practitioners and artists were listening to babies:

1. “That wee bond you have”: Being attuned to babies’ cues
2. “Is it OK if I wipe your nose just now?”: Creating a listening ethos in the setting
3. “It’s you working with what their interests are”: Babies’ richness as humans and learners
4. “You think, if you got it right in the baby room ...”: Barriers and creative problem solving

The survey consisted of both closed- and open-ended questions with the aim of providing both a snapshot of the wider context, in addition to gathering more nuanced information about personal opinions and experiences of the respondents. Content Analysis[7] was therefore chosen to analyse these results, which enabled a dual-purpose approach supporting both qualitative interpretation and quantitative measurement. Within this approach, Conceptual Analysis was used to explore frequency of terms or ideas, and Qualitative Content Analysis was used to understand the broader narratives. When reporting percentages, we have taken the decision to report these to 1 decimal point.

AI tools were used to assist with report writing, in the form of text compression and minor editing.

[6] Braun and Clarke, Thematic Analysis.
[7] Krippendorff, Content Analysis.

Data collection method (and analysis)	Venue	Participants	Number of participants
Observations (RTA)	6x GCC Nursery settings	Babies	38
		ELC practitioners	22
		Starcatchers artists and facilitator	4
Semi-structured (individual / group) interview (RTA)	6x GCC Nursery settings	ELC practitioners	20
		Starcatchers artists and facilitator	3
Focus Group (RTA)	In-service training day (Jan 2026)	ELC practitioners from across the 6 GCC Nursery settings involved in creative consultations	12
Survey (Content Analysis)	Online	GCC ELC practitioners who attended the in-service sessions but were not involved in the creative consultations	21

Table 3: Overview of participants and data collection and analysis methods

Ethical considerations

Ethical approval for this study was granted by the Ethics Committee of the Division of Psychology, Sociology and Education at Queen Margaret University on 17th March 2025, and by Glasgow City Council on 16th April 2025. Further information about the specifics of this application is available upon request.

In addition to the standard ethical considerations inherent in this research, the right of babies and families to choose whether to participate in this study was of paramount importance and, therefore, only research activity that supported that right was carried out. Informed consent (opt-int) was sought from Starcatchers artists and facilitator, early years practitioners, and parents and caregivers of the children involved ahead of any data gathering activity. Furthermore, we also looked for assent from the babies we worked with.

At the core of this research is the premise that the views and voice of the baby are respected. As such, the researchers were sensitive to the responses of babies within the observation sessions and should the researchers' presence cause any negative responses from the children, appropriate action was taken. Examples of this might be the researcher interacting with, or ceasing interaction with a child, moving away from a child, or changing their position in the space.

FINDINGS

The findings of our research are presented in the following sections. Direct quotes from participants have been edited for clarity through the removal of filler words and digressions, without altering the substantive content.

Findings from qualitative research

This section presents the findings from the qualitative research undertaken at the six settings that hosted artists for creative consultations. This included: observations of creative practice, interviews with practitioners (group/individual), a group interview with the artists, and a focus group with practitioners from all six settings.

About the practitioners

Interviews with practitioners were semi-structured and conversational. Therefore, each interview was different, and we did not always get an exact picture of practitioners' length of time working in early years or their route into the profession. However, the below broad picture can be sketched from the data.

Length of time working in early years	N=15 (out of 24)	%
Less than a year	0	0%
1-5 years	4	26.70%
6-10 years	3	20.00%
11-15 years	3	20.00%
16-20 years	0	0%
21-25 years	0	0%
Over 26 years	5	33.30%
TOTAL	15	100%

Table 4: Length of time working in early years

Routes into the profession
Moved through a range of posts, with different qualifications along the way
Modern Apprenticeship
Career change via HNC or SVQs
Graduate Apprenticeship
From school to HNC straight into practice
NC to HNC to BA Childhood Practice
Nursery Nurse certificate

Table 5: Routes into the profession

As Tables 4 and 5 illustrate, the practitioners we interviewed from the six settings represented a diverse range of journeys into the profession. The majority of practitioners we interviewed were very experienced, with more than 6 years in the profession. We did not systematically collect information about job titles and roles, and organisational structures tend to vary between ELC settings. However, many participants were in a leadership role, such as a room lead or team leader, with a handful in setting-level leadership roles such as depute head.

ABOUT THE WAYS PRACTITIONERS LISTEN TO BABIES



These findings are organised into four themes. Each theme describes a different aspect of how babies were being heard in their early learning and childcare setting and how their voices impacted on planning at short, medium and long-term levels.

“That wee bond you have”: Being attuned to babies’ cues



When asked how they listened to babies in their professional practice, every practitioner we interviewed shared rich and detailed examples. Listening to babies was seen as a core element of their practice. Being ‘tuned in’ was essential:

“A lot of them when they come in, they don’t have many words, but you can just tell with their wee cues if they’re getting tired, something like, they like to rub their ear, or they’ll have certain wee things you find that they do and you know ‘well, they’re ready to go to sleep or they’re getting hungry or...you can kind of listen to them that way although they can’t actually speak their words.”

(Interview, Practitioner 4)

Other practitioners described other ways that babies communicated:

“It’s just listening to them, taking their cues [...] so just responding to the facial expressions and gestures, and for the young ones, crying—when they look at you, if they just want picked up, they just want cuddles or whether they want to be fed.”

(Interview, Practitioner 10)

Some practitioners highlighted how babies often use a combination of words, gestures, and other ways of communicating:

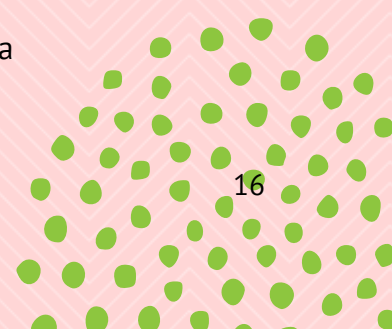
“We do a lot of listening. Gestures and single words, even the babies are talking, a lot of the babies. They know what they want.”

(Interview, Practitioner 13)

“Some of them don’t have language, but they’ve got sounds, which is their language. So for instance, this morning one of them was playing with an egg. And when she was making noises, I was making her noise, and saying egg after it so that she knew that I was validating what she was saying, and holding, and showing me.”

(Interview, Practitioner 8)

These examples illustrate that practitioners were tuned into babies’ cues in a holistic way, including babies’ words if they had them, their sounds, their emotional expressions and their expressions through play.



Practitioners also described the bond they felt with babies, and how well they got to know them, as part of their listening practice:

“Yeah, [babies communicate] in different ways like pointing, babbling, and even just that wee bond that you have [...] it’s really important to have because then they become close to you and you realise their routine and stuff as well, without them talking and you just realise what they’re like as a wee person.”

(Interview, Practitioner 2)

“We do focused observations, planned experiences, our spontaneous [interactions], so everybody, people actually know them inside out and actually know what they’re going to do before they’re actually going to do it!”

(Interview, Practitioner 13)

“Like some of the children in here, we spend more time with them maybe than their parents do at home, like Monday to Friday the majority of the day. So yes, it’s just picking up on their cues. We know the children really, really well inside out.”

(Interview, Practitioner 5)

While the artists did not know the children as well as the practitioners did, they also tuned into babies’ cues during the creative consultation sessions.

“Creative Practitioner B offered a provocation of tapping a cooking spoon in a metal bowl—it made a ‘bong’ sound like a bell. Several children were watching and looking from a distance, with interest. Eventually Child 14 came directly over and they had a long extended play encounter where she was fetching different pretend food items and feeding them to him.

Meanwhile, Child 9, who practitioners said is new-ish to Scotland and has perhaps arrived in quite difficult circumstances, was also very interested in this play but mainly watched and took part from afar, pushing items toward Creative Practitioner B and watching what he did, but not going close to him or making many facial expressions.”

(Observation, Nursery O).

Artists also talked about the bonds they formed through creative arts, even in the short time they were in each nursery:

“[The arts] allow different qualities of engagement, conversation, relation through and with objects, so that provides an ability to be able to have a conversation with [child], for example. We had a parallel experience through the focus of a drum. So we didn’t have to be talking to each other, but we were having an exchange and an engagement. Through the purposes of something she was interested in, we could have that parallel engagement with it together, both being interested in it.”

(Group interview, Creative Practitioner A)

In summary, practitioners described listening to babies as a core element of their practice, emphasising being tuned in to babies' cues—whether sounds, gestures, facial expressions, play, or the “wee things” that signal hunger, tiredness, or interest. They listened in a holistic way grounded in close bonds and knowing babies “inside out.” Artists, though less familiar with the children, also tuned into babies' cues, particularly through shared engagements with objects and materials.

“Is it OK if I wipe your nose just now?”: Creating a listening ethos in the setting

In addition to tuning into babies' cues, and creating bonds with them, practitioners described a range of ways they listened to babies throughout everyday life, which we have described as creating a listening ethos in the settings. For example, practitioners spoke in depth about responsive planning, which is discussed in the following theme. The need for flexibility in care routines was a common example. One practitioner described this in terms of babies having a right to know what is going on:

“So even things as simple as going to clean their nose, that you're going and saying “Is it OK if I wipe your nose just now?” as opposed to coming at them and they don't know what's going on [...] It's making sure that they have the opportunity that if they're just not quite ready, cause they're in the middle of something then we're kind of taking that on board and making sure their needs are met.”

(Interview, Practitioner 1)

Other practitioners described a similar approach, using nappy changing, meals, and sleep routines as an example.

“[When changing nappies] I can come back to them, I can try different techniques, and some of them work, some of them don't, and it changes every single day. But that's ok. Like I said, they're still human, and they've still got that wee thought process, they're still figuring out the world.”

(Interview, Practitioner 3)

“So we'll put the [choices of 2 meal options] out with a fork and say ‘what would you like’ and they pick whatever they would like to take, so it's just making sure their voice is always heard and you're giving them that option and independence to go ‘I'm making this choice today.’”

(Interview, Practitioner 5)

“Practitioner 23: Yeah, I think that was a big thing for us as well. Ours used to have that that routine of lunch - nap, but we looked really closely at the baby room to see that wasn't really working because [they're] individual children. So, we try and follow the parents' routine as much as possible so ...

Practitioner 20: Rather than a set sleep time, it's...the children, if they need it then they get it

Practitioner 13: Rolling sleeps – that's what we do. But even that, well, we started a while back, but if you've got some sleeping, you've only got one room.”

(Focus group)

These examples illustrate that practitioners were often searching for ways to be flexible and listen to babies under constrained circumstances, such as only having two choices of lunch provided centrally to the nursery or only having one room in which to accommodate babies' rolling sleeps.

Practitioners also described the importance of relationships with parents, families, other professionals, and each other as reflective practitioners.

"We have a child in the nursery just now. And her mum's told us, every time she's tired she sucks her thumb and she pulls on her ear. So we know she's tired, like that's her tell-tale, like her mum's told us that."

(Interview, Practitioner 10)

"So as soon as we have a child, a new child starting [...] we have 'What Matters to Me' which the parent will take away and that will tell us things like a sleeping pattern, if they have a comforter or a dummy, anyone in their family, the things they celebrate like Christmas or birthdays, depending on what they do."

(Interview, Practitioner 16)

"It's quite important to collaborate with your health visitor and speech and language because they'll be able to say well this is just the kind of stage [of development], and then we can put the things into practice."

(Interview, Practitioner 8)

"We're really good at sharing practice with each other as well, like 'oh do you know what, we tried that and they absolutely loved it' [...] I think staff communication is just as important as communicating with the babies."

(Interview, Practitioner 12)

These examples illustrate that relationships with other adults supported a listening ethos by helping practitioners learn about babies in their care and understand them better.

In summary, practitioners described a listening ethos created in their settings not only by tuning into babies' cues, but also by building flexibility into everyday routines, such as nappy changing, meals, and sleeping. They did so within significant constraints. Practitioners also highlighted how strong relationships with parents, families, other professionals, and each other supported this ethos by helping them learn more about babies' lives.

“It’s you working with what their interests are”: Babies’ richness as humans and learners

Underpinning all the examples we heard from practitioners about listening to babies was a strong view of babies’ richness as humans and learners despite their young age. For example, practitioners spoke about listening to babies in terms of noticing their interests and experimenting with responsive planning.

“If this baby seemed to be interested in always going to those soft materials, maybe I provide more soft materials or [for the materials] to run a different way just because I see they really like that. If they’ve not had something for the first time, I’d be the one to set up a new experience, like sometimes we cut up limes and lemons and mint leaves and put them into the kitchen area, and the children just go over and explore. Those kind of new experiences, I would put them out to see ‘do they like this? Are they interested?’ That kind of thing. So, it’s a mixture of everything. Sometimes it’s from the children, depending on what they’re interested in, sometimes it’s about me as an adult introducing new things to them.”

(Interview, Practitioner 10)

Another practitioner, who has worked in early learning and childcare for over 20 years, described how planning has evolved:

“It used to be you planned an experience, and you took that experience in, and the children came to you. Now it’s you working with what their interests are and what they enjoy, and then you plan that experience, so it’s basically them telling you what they want to do in their time in nursery.” (Interview, Practitioner 17)

The artists, similarly, spoke about noticing and experimenting when making their own plans for creative consultation sessions:

“It’s more about...being exploratory. When our focus is exploratory and it’s about how things can go, might go, we’re sort of like, offering types of surprises when we’re doing things.” (Creative Practitioner B)

“I think it fits back into a ‘doing things together’ element, we’re genuinely working it out between everybody, it is being co-created, the point of what we’re trying to do is being constructed by everyone in the room.” (Creative Practitioner D)

However, practitioners were very clear that the richness of babies was under-recognised in early learning and childcare at council-level compared to older ‘young’ children:

“Practitioner 20: Yeah, because there's no recognition for the work that's involved and what those babies get for under 3s, it's always 3-5s – on the wider scale, obviously, the staff and management know the importance of under 3s, but it's not recognised until they're in 3-5s.

Practitioner 13: I wonder where that's come from, all those years ago, 'cos it's always been the 3-5s.

Practitioner 23: Yeah, it's the funding, isn't it. It's the funding for training has always covered staff for 3-5s ...”

(Focus Group)

“I think it'd be amazing if they put more funding, more resources and more time for the babies [...] there's never enough funding for the babies, and over all these years, I've said – they laugh at me – I've said for years and years and years, why do they not start at the babies? And then build up and build up. And they will, because if you get the foundation, and you put on the specific care and proper staffing, they will thrive.” (Interview, Practitioner 13)

There had been some changes to this, with Nurturing My Potential[8] published in 2024 being seen as a helpful document focused on babies, bringing together guidance from a range of sources:

“Practitioner 8: I think that new document that they've brought out as well, the ‘Nurture My Potential’. It's been really, really good for the under 3s as well because it's more clear. You had the different documents you were trying to work through, but this document seems to put everything into one, so it's much easier to use and follow.

Practitioner 1: Yeah, you've got your ‘young babies’ and ‘babies’, which helps 'cos before you were looking at [other documents] it and it doesn't fit into some of your children, so that's much better, isn't it?”

(Focus Group)

Despite positivity about Nurturing My Potential, practitioners across the board struggled to think of examples where babies' voices were influencing beyond the nursery itself and being fed into council-level planning at short, medium or long-term levels.

In summary, practitioners held a strong view of babies as rich, capable human beings and learners, which underpinned their responsive planning. Artists shared this exploratory, co-created approach. However, practitioners did not feel that babies' voices were heard beyond the nursery, remaining largely absent from higher-level recognition and strategic planning.

[8] Nurturing My Potential is a good practice framework developed internally within Glasgow City Council, to support practitioners working with babies and toddlers in their first 1000 days.

“You think, if you got it right in the baby room ...”: Barriers and creative problem solving

Various challenges in listening to babies were highlighted by practitioners, often alongside suggestions for problem solving. One of the main barriers perceived by practitioners was staffing issues. The tightness of staffing was seen as problematic in relation to staff sickness, annual leave, or when multiple babies in the room were unsettled at the same time. Inconsistent staffing was also seen to be detrimental to the babies due to the time it takes for them to build secure relationships.

“Practitioner 1: See when you’re short-staffed, when you’re having to reduce your service, it’s always the baby room it impacts first, isn’t it.

[crosstalk of many practitioners giving agreement].”

(Focus Group)

Supporting babies with additional support needs was another issue raised in relation to staffing as they often required more time:

“One of our wee ones, kind of almost needs a 1 to 1 but we don’t have a support for learning worker to give them 1 to 1.”

(Interview, Practitioner 5)

Practitioners also reported pressures on their time due to the amount of paperwork and documentation of children’s experiences. They felt this was getting in the way of being able to interact meaningfully with the babies:

“Time. And that’s something we don’t have because there’re so many forms to be filled in ... But have you taken a picture of you doing your job so that you can upload it, and so you can tick a box?”

(Interview, Practitioner 22)

“You feel like you’re constantly needing to be like: ‘so what’s that here? And what colour is that?’... you’re trying to get some evidence for all the learning that they do so that you can show mum and dad.”

(Interview, Practitioner 4)

The challenge of working around ‘imposed routines’ during the day was also raised by practitioners. Lunch arriving at set times was seen as particularly problematic as this did not always align with when the babies were ready for it.

“The one issue with the sleeping is if they miss their lunch. Because a hot lunch is only provided in the nursery at a certain time and we can’t reheat the lunches, so it would only be a cold option.”

(Focus Group, Practitioner 23)

Navigating babies' routines also fed into navigating staffing routines: although practitioners were all highly flexible around the babies' needs, this was often the determining factor of when they could take their own breaks.

Practitioners also cited a range of ways in which space impacted the experience of both practitioners and babies. Practitioners reflected on the need for children to express themselves and explore the world using gross motor movements which small baby rooms, and their outdoor spaces, could not always accommodate.

"There's a wee one just now who's got a trajectory schema. So, he wants to throw. [...] And he gets frustrated when he's not allowed to do that. So, it's then having to try and let them have that outlet, but in a safe manner."

(Interview, Practitioner 5)

Other examples included being housed in old buildings that limited how the baby room could be set up and utilised or having nappy changing facilities up a flight of stairs from the baby room.

Lack of space to afford babies quiet areas and downtime was also a common issue raised. For example, when certain babies were sleeping and others were active in the same space. It was also a consideration for babies who perhaps experienced the space differently from others due to additional support needs and who were more likely to feel a sense of overwhelm in the setting.

"Child 30 then came and sat on my knee for ages as the parachute games were going on. I wondered if she sought me out because I was still (in comparison to the artists who were physically very active in the space today). [...] At the end of the session, she crawled behind the Christmas tree and I wondered if enclosed spaces, slightly apart from what was happening in the rest of the room, gave her a sense of safety and security. I wonder if having physical space is important for her as the distance allows her to feel comfortable with whatever activity is going on and whoever else might be in the room."

(Observation, Nursery R)

Finally, practitioners consistently pointed to a perceived bias in funding and focus towards older children in the nursery, and the tensions between what was seen as important in the curriculum and what they felt was important in the baby room.

"There's so much focus on literacy and numeracy [...] and health and wellbeing and nurture comes at the bottom of the list. Whereas if you flip it on its head, if you deal with the nurture and the health and wellbeing of these kids, and they feel safe, they feel nurtured, then other things are going to develop."

(Interview, Practitioner 22)

"You think, if you got it right in the baby room ..."

(Interview, Practitioner 13)

Despite these constraints and challenges, practitioners were dedicated to listening to the babies in their care. As one practitioner said,

“You just get on with it [...] this is your job so you need to find the time to fit it all in. Kinda think outside the box” (Practitioner 13).

And indeed, throughout our conversations with practitioners, we heard many examples of creative solutions and ways of working to make sure babies’ needs, interests and voices were foregrounded.

In summary, practitioners highlighted a range of challenges in listening to babies, with staffing difficulties emerging as the most pervasive barrier. Alongside this were high administrative demands, limited space, and tensions between foci within the curriculum and the desire across the practitioners to nurture babies’ wellbeing and forge secure relationships. Despite the barriers, practitioners remained creative in how they addressed these issues in their practice.

ABOUT THE IMPACT OF THE CREATIVE CONSULTATIONS

While this research was not a formal evaluation of the project, the creative consultations had a significant impact on both artists’ and practitioners’ approaches to working with babies.

Artists described new ways of working creatively, having learned from babies. They felt a new open-ness to not knowing what the outcome of a creative experience would be, and more confident about putting materials together in new ways, trusting that babies themselves would make connections. Artists also spoke about changed approaches to making creative offers to babies. Instead of trying to connect one-on-one, they learned to create a calm, focused attention on the materials being used (a drum, paint sticks, long sheet of paper, etc) which in turn seemed to invite babies to find their own ways into the experience. Finally, the artists described new confidence that their own creative practice could encompass work with babies, and that they could feed this into the CPD they provided outside of the Art of Listening to Babies project—whereas previously, perhaps they had been unsure whether their creative practice was relevant to people working with that age group.

Practitioners across the board felt that the creative practice they took part in alongside artists was not wildly different from their usual:

“It’s things we already do, we should be doing, or we do do” (Interview, Practitioner 9).

However, working with artists who did things ‘a wee bit differently’ had a significant impact.

There was a strong effect on practitioners' wellbeing and enjoyment of their work, including:

- Being able to step back and observe the babies, rather than being the organisers or documenters of the experiences. This was stated explicitly by at least six practitioners who were interviewed and strongly affirmed during the focus group when it came up again.
- Being able to relax, "take a deep breath" and notice the small moments of babies' experiences.
- The creative experiences reminded them "how good fun it could be" (Interview, Practitioner 6) and allowed them to be a bit freer and sillier. This was reiterated many times by different people, and it was particularly the case for one practitioner who repeatedly described feeling obliged to always be documenting and relating babies' play to learning outcomes of some kind.

The creative consultations also inspired small but significant changes to the pedagogical offerings that practitioners themselves made to babies:

- The creative practice shook things up, enhancing practitioners' own creativity; it was a "wee refresher to get you out of your set ways" (Interview, Practitioner 21),
- In one setting, practitioners were still clearing the room once a week as the artists had, setting up creative experiences for babies. Other practitioners described more subtle ways they were using materials differently, inspired by what the artists did, and that they had used materials in new ways based on a more nuanced observation of babies' interests.
- Multiple practitioners described how they learned to sit back and wait just a bit longer for babies to go somewhere with the experiences—to let babies engage in their own time rather than feel they needed to try to lead them. This directly echoed what artists learned from babies, too.
- In one setting, the UNCRC (Article 12 in particular) had been directly incorporated into planning documents in the baby room to make sure babies' voices were being heard. Other practitioners agreed that they were more explicit about recording babies' voices into their planning documents.

Finally, there was a bit of frustration from one practitioner, who expressed a wish for more time for professional dialogue with the artists about what they were learning from babies, including opportunities to compare interpretations. She also noted that not everyone may feel comfortable with a more open, flexible approach, as this is something artists are trained to do. Taken together, these points highlight the potential value of creating more structured opportunities for shared professional dialogue and learning.

ABOUT THE IMPACT OF BABIES' VOICES

As discussed in the themes above, practitioners gave rich descriptions of their responsive planning with babies, which we interpret as babies' voices having a strong impact in everyday life (short-term planning). That everyday responsiveness also fed into medium-term planning, with practitioners learning from babies about when they might be ready to transition between rooms in the nursery, for example, and planning accordingly. Finally, one practitioner described making a grant application for more suitable furniture for babies, and another described directing some of the setting's existing budget toward a richer outdoor play area for babies. Both examples were based on their observations of babies' play--which we interpret as babies' voices having an impact in the longer term. Both examples also involved support from the leadership at the settings, which practitioners described as being important in terms of babies being recognised and resourced.

In the longer term, another practitioner described how the baby room team, who were experienced with non-verbal communication, helped to train and support people working with older children with additional support needs affecting their communication. Finally, one practitioner described how taking part in *The Art of Listening to Babies* had made her notice that songs, music and rhyme were not being used as much with older children as they were with babies, and she had made plans to remedy this in her setting. We see these as examples of babies' voices having an impact in the longer term. However, as stated previously, it was difficult for any of the practitioners to think of examples when babies' voices may have had an impact on council-level strategic planning.



FINDINGS FROM THE SURVEY

The online survey was designed to gather opinions from Glasgow City Council (GCC) nursery settings who attended the Starcatchers in-service training days, but who did not host any of the Starcatchers creative consultations. The survey was distributed through GCC to 20 of its nurseries and from this, we recorded 21 responses from practitioners over a three-week period between 20th February and 12th March 2026. Due to the anonymous nature of the survey, we did not ask for identifying data for the individual settings, therefore, it is not possible to track how many of the 20 nurseries are represented in the 21 practitioner responses gathered. The opportunity to provide open-ended answers to the questions led to a mix of responses which we will summarise below. When reporting percentages, we have taken the decision to report these to 1 decimal point.

About the practitioners

Participants were asked how long they had worked in Early Years (Chart 1). One respondent (4.8%) reported 1-5 years of service meaning 95.2% of respondents have worked in Early Years for 6 or more years. Interestingly, the timeframes of between 6-10 years and over 26 years were the two most popular lengths of service (each represented 28.6% of the total).

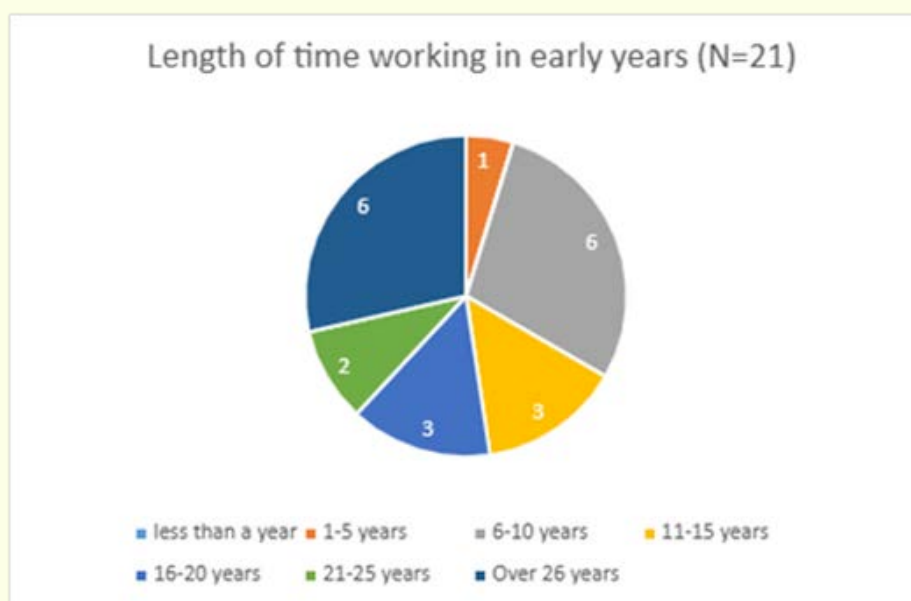
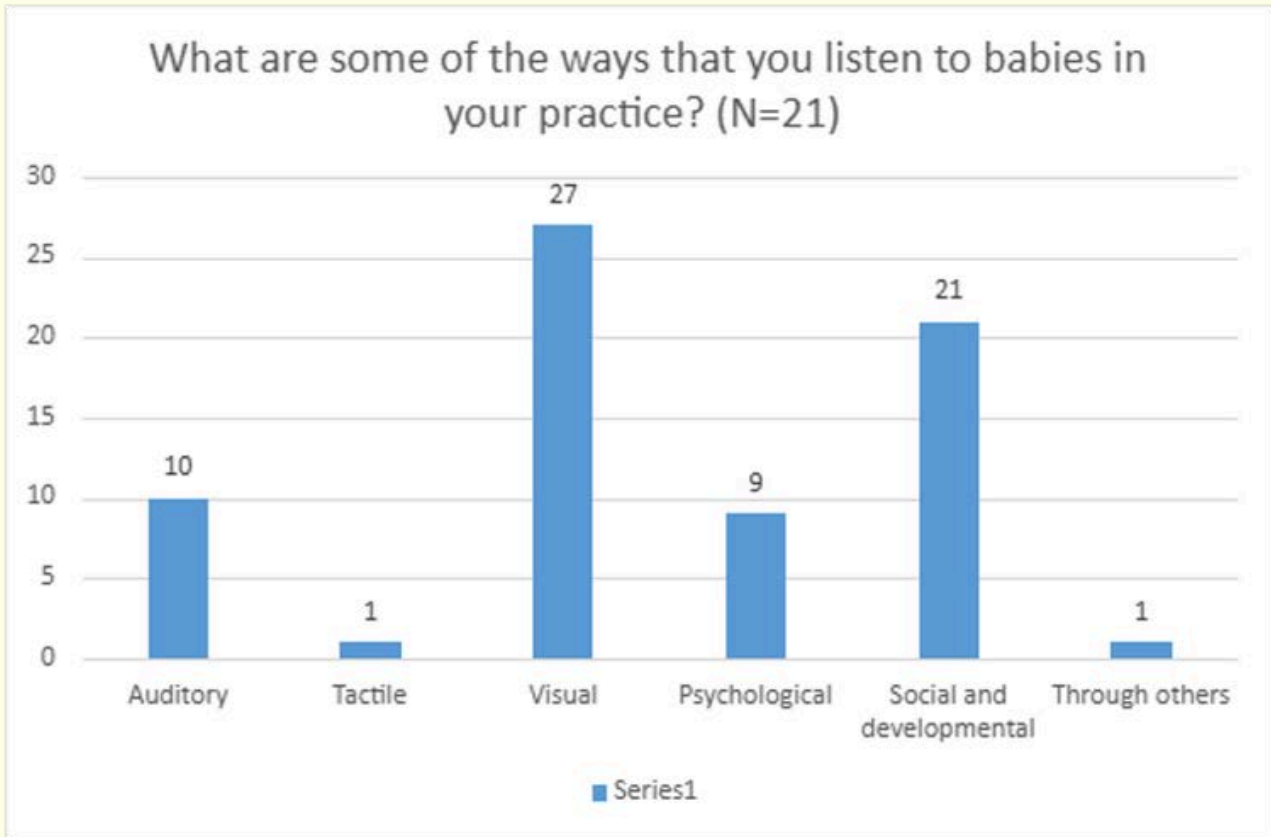


Chart 1: Length of service in ELC

Respondents were asked about their routes into the profession and the majority (N=10 / 47.6%) cited qualifications. Five respondents (23.8%) said they had gone straight from school to college and 3 (14.3%) stated they entered the profession after a career change. Other answers included being inspired by others, feeling drawn to this type of work, and work experience or volunteering as a route in.

About the ways practitioners listen to babies

Respondents reported a plethora of ways in which they listen to babies' voices in their practice. These responses have been coded and placed into categories with the graph below (Graph 1) showing the total number of responses for each.



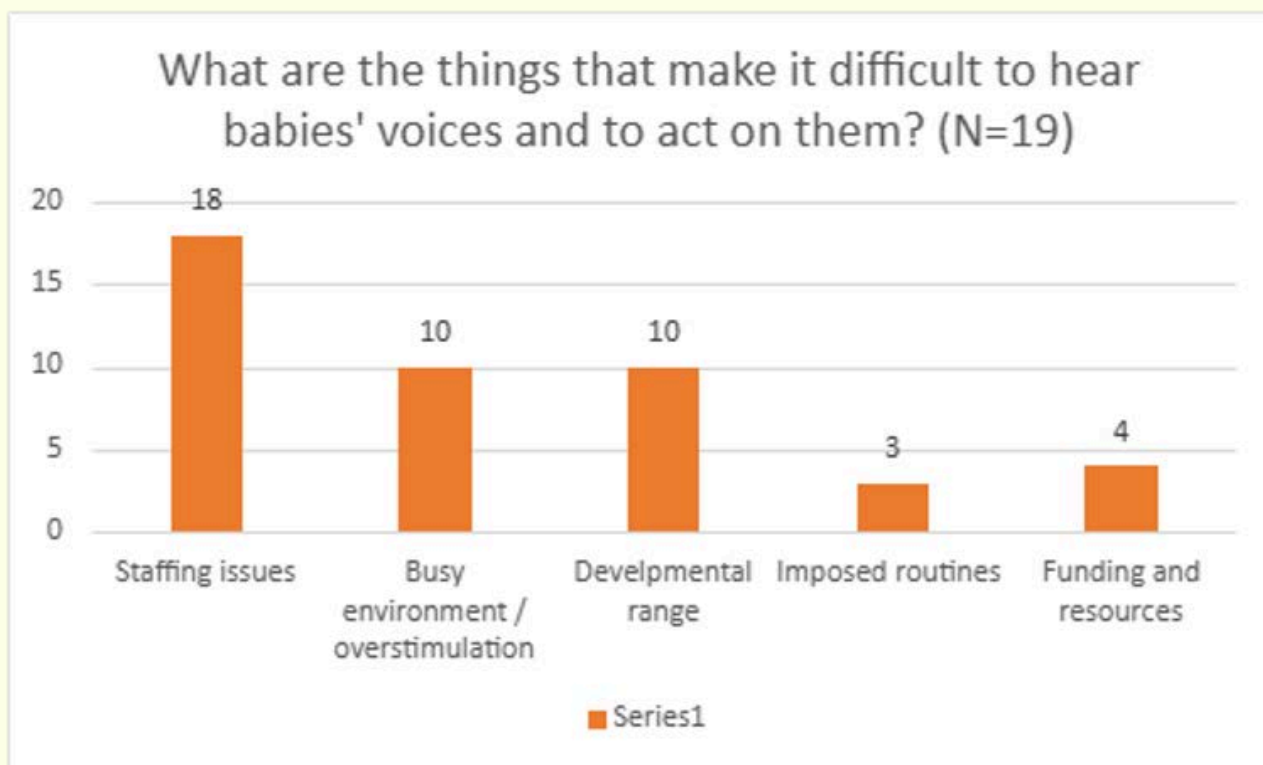
Graph 1: Ways of listening to babies

Examples within each category included:

- Auditory: sound (non-verbal) / vocalisations (including single words) / crying patterns
- Tactile: connections (physical contact such as cuddling)
- Visual: facial expressions / body movements / eye contact / gestures
- Psychological: change in mood / emotions / personality / routines / behaviour
- Social and developmental: following their lead / responses to interactions and mirroring / relationships (and knowledge of child) / interests / repetition / time to respond
- Through others: Parents

Visual cues were the most popular way in which respondents reported listening to babies' voices followed by social cues that were relevant to their developmental age and stage.

When asked about the things that make it difficult to hear babies' voices, and to act on them, respondents spoke about a range of different challenges. These have been coded and the categories are illustrated in Graph 2:



Graph 2: Challenges in hearing babies' voices and acting on them

The main challenge respondents reported was staffing issues. It is worth exploring these responses in slightly more depth as there were a number of different facets related to this. The most commented on aspect of staffing was the staff-children ratio with a third of respondents (33.3%) perceiving the number of children per staff member to be too high.

Examples given in relation to this included there being lots of needs to be met in the room and not always the capacity for practitioners to meet them.

“It can sometimes be difficult to make enough time to hear babies' voices as much as we would like, due to staffing.”

Further to this, respondents reported that time pressures for practitioners (19.0%) were unsustainable and that this often leads to practitioner burnout. Finally, respondents commented on the impact for babies of inconsistency in the staffing team (for example, having a high turnover of temporary staff and cover). It was felt that a strong relationship built over time between babies and practitioners offered the greatest benefit to the babies.

Challenges were also voiced in relation to the busy and, at times, overstimulating environment of a baby room with lots of comings and goings (from practitioners, children and parents) and lots of noise. There was also recognition that although practitioners seem well-versed in the multitude of ways in which babies express themselves, understanding and deciphering exactly the needs and wants of the babies was not always easy as they don't communicate with language yet. The imposed routines, for example, when snacks and lunches arrive, we also seen as a challenge as the timing did not always fit with the babies' routines (for example, some might be sleeping). Finally, lack of funding and resources was also reported as being a challenge.

“Changes in staffing can affect the emotional wellbeing of babies, routines of the day can impact on the amount of time you have.”

About the impact of Starcatchers training

When asked about any changes to practice as a result of having taken part in the Starcatchers training (see Chart 2), 71.4% (N=15) said yes, 19.0% (N=4) said no and 9.5% (N=2) weren't sure. Changes to practice included tuning in more to babies' communication (57.1% / N=12); being more attuned to babies' needs and perspectives (42.9% / N=9); changes in planning and ideas for quality activities (38.1% / N=8) awareness of the space and environment (needing to be less busy) (19.0% / N=4); sharing information with other colleagues (14.3% / N=3) and doing more observations with the babies (14.3% / N=3).

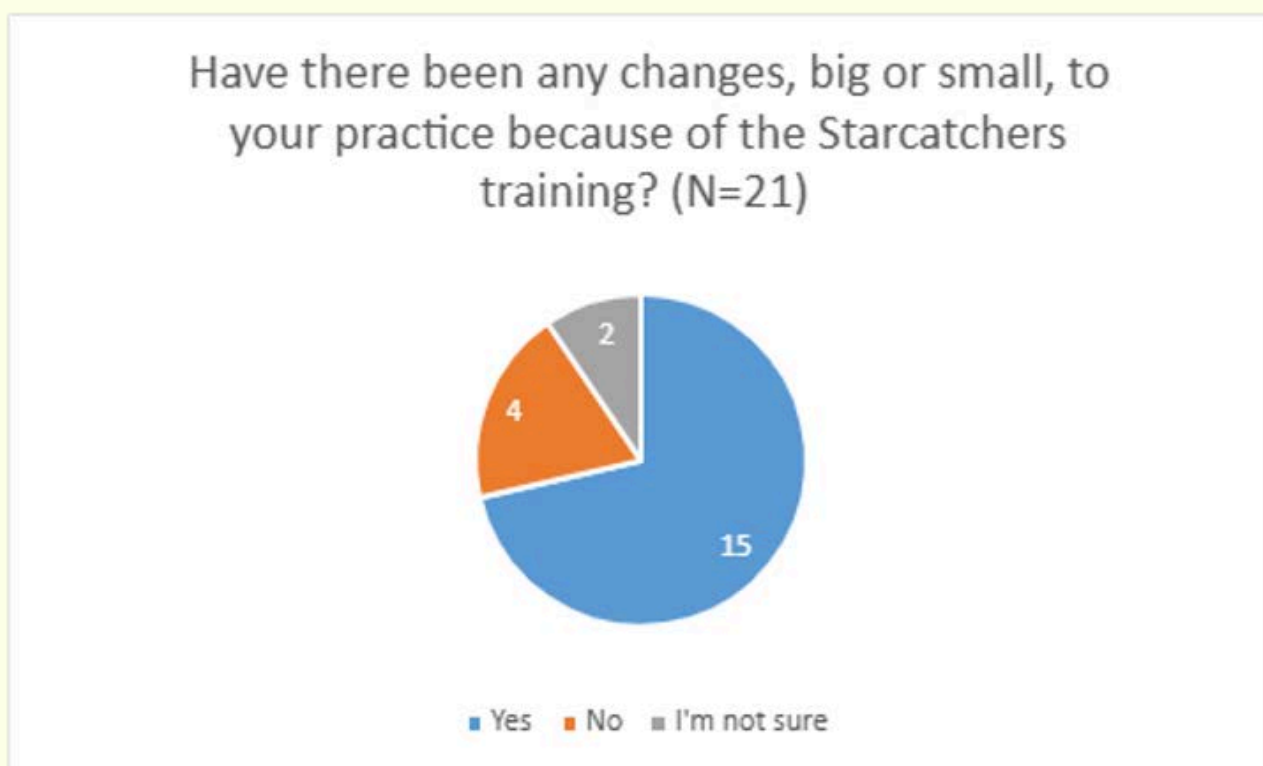


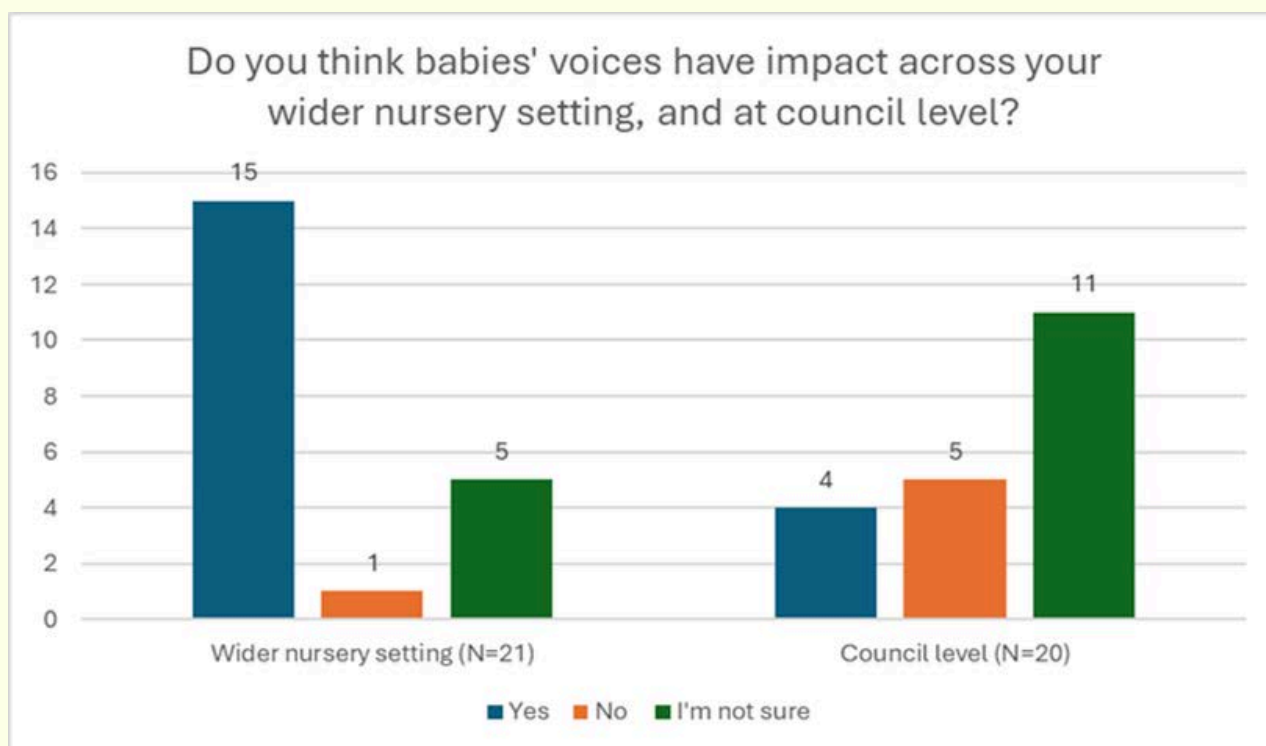
Chart 2: Changes to practice as a result of Starcatchers training

For those who gave the response: 'not sure', the reason given was that they had not had the time to apply the training yet. For the respondents who reported no changes to their practice, this was due to practitioners already doing what was being suggested in the training (19.0% / N=4) and, furthermore, some felt that the scope and focus of the training could be broadened out:

"I feel this training would have been more beneficial to new staff who may not have as much experience and are new to the role or for someone who may have moved from working with older children within the nursery setting. I feel this could have been looked at more broadly, as there are other children who are non-verbal within settings whose voices need captured."

About the impact of babies' voices

We asked the respondents about their perceptions of babies' voices having an impact across their nursery setting (beyond the baby room) and also at council level (see Graph 3). A total of 71.4% stated they do feel that babies' voices have an impact within the setting they work in (beyond the baby room) with only one (4.8%) reporting that they didn't think this was the case. The rest were unsure (23.8% / N=4).



Graph 3: The impact of babies' voices beyond the baby room

The reasons given for the answers told an interesting story. Only 2 respondents answered the question directly with one saying that their voices are heard in relation to planning and procedures and another unsure as to the impact beyond the baby room:

“To some extent I think babies’ voices are listened to across the wider setting, as their identified needs [should be] taken into consideration when making plans and changing procedures.”

“I feel their voice is heard in the playroom but their work or certain things they have achieved is not always displayed out with the nursery.”

Others answered the question in relation to the efficacy of the training package across the rest of the nursery:

“I feel, as I have shared my experience from this training to all staff in my establishment, it has been lovely to use the experiences for other groups of children as all children have different needs and are at different stages of learning.”

“We have rolled the experiences out in both baby room and 2-3 room.”

Finally, others answered the question by reinforcing why they feel it’s important to listen to babies’ voices:

“If children in the baby room are listened to in a nurturing and enriching manner, this helps them achieve, to feel understood, gives them confidence and these skills follow them through to each room and stage of development that they move onto.”

“Babies are learning to express themselves and as they grow and develop and move rooms/stages this enables them to know their voice is heard and their views are listened to by people who care for them.”

When it came to babies’ voices having an impact at council level, the perceptions were very different. Four (19.0%) thought they did, 5 (23.8%) said they didn’t think babies’ voices had an impact, and 11 (52.4%) said they weren’t sure. Two of the respondents who said ‘yes’, cited policy and guidance (such as Nurturing My Potential) as evidence of this.

“Council respond and adjust policies and guidance to meet the needs of babies and ensure they are listened to.”

Those that said 'no' cited the lack of funded places available for babies across the city and the perceived focus to be on older nursery children in relation to funding, resources, and training.

"If the babies voice had an impact at council level there would sufficient staffing, a bigger budget within early years to support the children with resources etc and there would be more baby rooms across Glasgow to support babies."

The perception is that older children are a higher priority than the babies - one respondent gave the provision of lunches as an example:

"There is more of a focus on children [aged 2 and up]. Also, things like snacks and lunches are not accommodated or tailored for young babies especially those who are weaning."

The most popular answer to the question of whether babies' voices had an impact at council level was 'I'm not sure'. Reasons for this were wide-ranging and included those who felt the number of babies needs to increase in order to have greater impact and influence:

"I'm not sure that enough material can be gathered and recorded to make an impact outwith nursery rooms."

Others felt that babies aren't seen as equals to older children and their voices are not considered in the same way:

"I think more people need to be more aware of the voice of the baby."

"I think the importance being able to listen and respond to very young children is often overlooked."

Finally, some respondents said they did not understand the question and 8 (38.1%) did not answer it at all. Similarly, when asked about the ways in which babies' voices could be included in council planning, many respondents answered by reinforcing the importance of services and care for babies, and the need for better provision. Whilst these responses are important, they do not directly answer the question being asked.

There were suggestions of practitioners in the baby rooms, along with parents, becoming better advocates for the babies:

"Staff and parents are the most knowledgeable about the babies that they care for. They are usually aware of their needs and wants and could give information."

Another suggestion was for babies to be seen as distinct voices within a nursery context with different needs from the older children they share their nursery with:

"Council planning could incorporate and differentiate between the voice of the infant and older children taking account of their individual preferences."

The final question in the survey asked: 'What is one change the council could make that would be most beneficial to babies in early learning and childcare settings?'. The most common response to this was around staffing (57.1% / N=12) and included an increase in staffing levels (to help with children-staff ratio), consideration of the workload, and better training opportunities for those working with babies. A larger budget and better resources, including better provision of outdoor spaces for babies, was the next most popular response (42.9% / N=9). Other responses included increased provision for babies and fair access (funded places); more flexibility with imposed routines (particularly around when lunch arrives for the baby room) and better lunch options (in relation to the food on offer); the provision of Starcatchers training for practitioners working with older children with communication needs; and more opportunities to share best practice between nursery practitioners across the council.

Discussion of survey results

Overall, the survey results offer some interesting insights regarding the ways in which babies' voices are listened to and acted upon in GCC nursery settings. The overwhelming majority of practitioners who responded to this survey (95.2%) are experienced with 6 or more years of service in Early Years settings. Over a quarter of these have given over 26 years of service which suggests that this job is a vocation for many. It is not surprising then that practitioners are well-versed in how to listen to babies in their practice and everyday interactions in the baby room and cite a range of ways in which they understand babies to communicate. There is a general understanding of the importance of giving the necessary time to listen to the individuals that are in their care although this is something they find challenging at times, mainly due to staffing pressures – a strong recurring theme throughout the responses. There was often a push towards advocacy for babies underpinned by a feeling that babies are often overlooked. Practitioners pointed towards the importance of seeing babies as a distinct group within a nursery requiring a different kind of specialism than for older children in the same setting. Practitioners seemed not only to be advocating this distinction for themselves, but also for the babies in their care.

When reflecting on their experience of The Art of Listening to Babies, responses suggested it has been beneficial in several ways. Firstly, by giving practitioners the opportunity to reflect on current practices and reframe them slightly (for example, taking time to observe babies and giving them more time to respond); secondly to consider the environment (and infrastructure) and the ways in which that will affect the experience of the babies (for example, creating a less busy environment and using resources differently); and finally, to use the training to advocate for babies and share best practice with other colleagues. Whilst the majority of respondents felt they had benefitted from the training, there were a small number who felt it did not offer them anything beyond what they are already doing. Whilst this may seem like a negative of the experience, it is also very heartening that practice underpinned by participation rights for babies is already being considered and applied by practitioners across settings within GCC.

The responses to the open-ended questions relating to babies' voices having impact seemed either to be poorly understood or difficult to answer which resulted in responses that did not necessarily address the focus of the question. This could be for a number of reasons, firstly that the question was vague or poorly articulated. Another is that the concept of 'impact' or 'influence' of babies' voices beyond the everyday interactions within a baby room is not something that is regularly considered or perhaps asked for. Finally, it may be because these questions came towards the end of the survey and there was perhaps a level of survey fatigue for participants at this point. Irrespective of the reason, the answers, and indeed lack of answers, to the questions around the impact of babies' voices beyond the baby room are interesting in and of themselves.

Despite the questions around impact and influence having been interpreted in different ways, there were some very useful insights from respondents in relation to The Art of Listening to Babies resources being applicable to, and effective for older, children in the nursery, and, more generally, for older children with additional support needs (particularly around communication for non-verbal / non-speaking children). The responses also perhaps point towards a broader need to encourage more in-depth consideration for all involved either directly or indirectly in decisions for Early Years provision of how babies' voices can be sought and have influence above and beyond their individual journeys throughout the rooms in their nursery.

ANSWERING THE RESEARCH QUESTIONS

1. How are the needs, interests, and voices of very young children being supported in everyday experiences in funded ELC?

The needs, interests, and voices of very young children are being heard in their everyday experiences in a variety of ways. Their voices are being heard through close attunement to their complex ways of communicating. This includes being aware of 'visual' communication like facial expressions, body movements, eye contact and gestures. It also involves verbal and vocal communication like sounds, single/few word phrases, and things like crying and laughter. Babies' voices are also being heard through practitioners knowing them well, reading their moods and emotions, and being aware of their preferred routines and accommodating those as far as possible in the ELC setting.

Babies' needs, interests and voices are also being supported by practitioners who follow babies' lead, mirror/extend their interests and communication, and allow babies time to respond in their own ways during interactions. Responsive planning was a near universal approach taken by the practitioners who took part in the research, with babies' interests inspiring the experiences and provocations being offered in the playroom. Babies' responses shaped how the experience developed and future planning in quite fluid ways. Parents, families and other professionals were essential as well, helping practitioners learn about each baby and therefore strengthen the attunement to their voices, needs and interests.

Barriers to babies needs, interests and voices being supported included tight staffing, meaning that practitioners had to navigate daily life in pressurised ways. Other barriers included the pressure of filling in forms including, somewhat ironically, perceived pressure to document babies' learning in tick-box ways, which was described by some practitioners as taking them away from more meaningful in-the-moment support of babies. Routines that were not under control of practitioners, such as the central provision of lunches, could create problems where babies were needing to eat at certain times before the hot food was removed for health and safety reasons, or where the choices were limited. Finally, the ELC spaces for babies were not always fit for purpose, with issues like a lack of space for quiet and downtime, less funding and investment as compared to spaces and budgets for older children, and structural issues like the existing lighting, flooring etc which was not always appropriate for babies. These issues around staffing, heavy administrative responsibilities, centralised meal services and space issues all made it more difficult for practitioners to be attuned and present with babies. However, between our interviews and focus group with practitioners there were many creative solutions and workarounds being shared – demonstrating a fundamental listening ethos held by practitioners.

2.How do the experiences and perspectives of very young children impact more strategically on the planning and delivery of care (short, medium and long term)?

The experiences and perspectives of young children have an impact on the planning and delivery of care in the following ways. In the shorter term, babies' perspectives are informing responsive planning. Their interests, needs and voices inform everyday planning, and in turn their responses and engagement shape the next steps. In most cases this responsive planning is quite fluid and does not involve planning too far ahead, in order to remain relevant and attuned to babies' actual interests. However, that more immediate and fluid attunement to babies' experiences and perspectives does shape strategic planning in other ways. For example, in the medium term, most settings have age-based spaces where children are based. Babies' transition between these spaces are generally informed by their voices and perspectives, in terms of practitioners making professional judgements about appropriate timing and process of transitioning to the new space—and refining those based on babies' response.

There were fewer examples of how babies' experiences and perspectives are shaping strategic planning in the longer term. However, there were some clear examples which we can learn from. First, the example of a funding application being submitted (successfully) for more suitable furniture for the baby room, and second, the general funding at the setting being directed toward babies, to develop the outdoor play area so it was more suitable for them. Both of these examples benefitted from support from the settings' leadership. Second, one setting asked the baby room practitioners to help train practitioners working with older children, in terms of supporting non-verbal communication from older children with additional support needs that affected their spoken language. Another setting is now encouraging more songs and rhymes in the older rooms, as *The Art of Listening to Babies* drew attention to the fact that this creative practice was not happening as naturally with older children.

The above examples demonstrate that babies' experiences and perspectives are influencing planning at short, medium and long-term in the ELC settings. However, it was very difficult for any practitioners to think of examples of how babies' voices are impacting strategic planning at the council level. From our conversations with practitioners, it did not seem like they were generally involved with strategic planning themselves, and this may therefore be echoed in the lack of examples of babies' involvement.

The overall impact of The Art of Listening to Babies on early years practice

This research report is not a formal evaluation of the project. However, taken together, the creative consultations and knowledge exchange sessions during The Art of Listening to Babies have influenced how artists and practitioners work with babies. The project has encouraged a slower, more responsive approach. Artists described gaining a clearer sense of how babies actively shape and contribute to creative encounters through their interpretations of materials and relationships with others in the space. While the artists purposely used loose and open-ended planning from the very beginning, over the course of the project they became even more comfortable letting sessions unfold. They found that focusing quietly on the materials often invited babies to explore in their own way. This helped artists feel more confident that their practice is genuinely inclusive of the youngest children and that they can bring this perspective into the professional learning they offer elsewhere.

Practitioners who participated in the creative consultations said the artists' methods and materials weren't entirely new, but seeing familiar ideas approached differently helped them rethink aspects of their own practice. Many valued the chance to step back and observe or participate in sessions without feeling pressure to organise or document everything. This shift made space for noticing small moments, enjoying their work more, and feeling less tied to routines that had sometimes become automatic. Some practitioners continued specific approaches introduced during the consultations, such as dedicating specific times to clear the playroom and offer creative encounters in the ways artists had. Others described smaller but meaningful ways they were introducing everyday materials in more open-ended or unusual ways. Some practitioners also became more deliberate about incorporating babies' voices directly into planning documents.

Importantly, practitioners who took part in the in-service/knowledge exchange sessions but did not work with artists also reported changes to their practice. Survey responses reported greater attention to babies' communication, adjustments to how they planned in the baby room, a realisation that they often feel too busy in the space and environment, and more attunements and observation in their daily work. Finally, practitioners taking part in the knowledge exchange sessions highlighted the benefits of peer learning and sharing of information, particularly (but not limited to) with newer members of staff or those moving from older rooms.

CONCLUSIONS AND RECOMMENDATIONS

Findings showed that arts-based experiences offered a meaningful way for babies to engage in consultation about their lived experiences in Early Learning and Childcare settings. The practitioners are experienced, dedicated to their work, and passionate about what they do. They are highly tuned into babies' communications and offered a multitude of ways in which babies' voices are listened to and acted on in their baby rooms. Alongside some excellent practice in the baby rooms, practitioners highlighted significant challenges in listening to children including limitations of space (both indoors and outdoors), imposed routines in the day (such as lunch timings and options), and staffing.

Results suggested that babies' voices had direct influence over short-, medium- and long-term planning in their nursery settings with practitioners playing a crucial role in interpreting the voices and advocating for them. Despite the impact in the baby room and wider nursery settings, practitioners felt babies' voices have little impact or influence at council level. There was almost universal agreement that babies' voices were often overlooked, and that the focus and funding is concentrated on older age groups in the nursery. When asked about how babies' voices could be incorporated at council level, very few practitioners were able to point to ways in which this might happen. Interestingly, this aligns with observations from the Lundy Model of Participation [9] which outlines space, voice, audience and influence as key considerations for children's right to be heard. Out of the four areas, 'influence' is the one that is often missing, or more challenging to achieve, in applied practice [10].

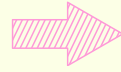
Practitioners felt that the Art of Listening to Babies training was beneficial and, even though it reinforced elements they were already doing, had nevertheless inspired changes to their practice and approach. Practitioners involved in the creative consultation sessions reflected on the affordance of stepping back and observing the ways in which the babies engaged with the artists. Feedback from practitioners suggested this training would be useful for those new to working with babies and also for those working with older children with communication needs. Finally, the findings signal an opportunity to encourage more in-depth consideration for all involved, either directly or indirectly, in decision-making for Early Learning and Childcare of how babies' voices can be sought and have influence. There is rich evidence of the ways in which practitioners are facilitating participation rights of babies in their care. We suggest that this represents a solid foundation on which to build stronger, direct, and more transparent routes between nursery and council level planning and policy making, ensuring that babies' voices are championed and visible throughout this process.

[9] Lundy, "Voice" Is Not Enough: Conceptualising Article 12 of the United Nations Convention on the Rights of the Child'.

[10] Matheson, 'The (in)Visibility of Babies in Children's Rights Policy and Practice'.



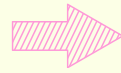
WE OFFER THE FOLLOWING RECOMMENDATIONS BASED ON OUR FINDINGS:



Explore opportunities for direct and transparent avenues for babies' voices to be heard in the strategic, long-term planning within nurseries and within the council more broadly.



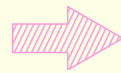
Consider the efficacy and appropriateness of using Voice of the Baby approach with older children (in nursery) with communication needs (ASN / Children with English as second language).



Develop ways for practitioners across GCC nursery settings to create a community of practice where consultation, discussion, debate and sharing of best practice can be facilitated.



Consider the equity of funding opportunities available for babies and the professional learning of practitioners working with them, and the equity of focus (in relation to other age groups within nursery).



Ensure high quality provision both in the numbers of practitioners and, crucially, their preparedness within the early years profession.

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