Motor, Play and Self-care Skills: An Index of Children’s Pre-indications

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Abstract

The construct of this inquiry had been drawn from the lensing of developmental progression of children in the College of Human Ecology Nursery Development Center. This work sought at presenting an index showing how children perform the basic tasks expected of them in terms of motor, self-care, and play skills using the development checklist. Results showed that the majority were observed to have performed the developmental milestones despite the absence of certain learning materials and facilities. The observances of these milestones significantly indicated that the children could perform the movement tasks that are crucial in their age; they manifested a sense of independence as they could do certain tasks independently, and they were capable of relating to other children especially during play, which is essential for their overall development. Indicatively, a few were not observed to have performed certain tasks. These inobservances may entail difficulties in the aforesaid developmental areas which may hinder the children’s progress and growth in the future if actions will not be taken. The findings all in all were deemed as an important catalog for appropriate actions and as a baseline at tracking the development of the children whilst in the nursery development center.

Introduction

The College of Human Ecology Nursery Development Center has been in the service of child care and development for quite a long time now. In the records of Central Mindanao University Archives, the foundation of the center can be traced back to the early 1980s, a time when home economics education students confronted the necessity of having practical training on child care and the struggle that the working mothers in the university were facing on the unavailability of household help- “making them tagged along with their toddlers to their offices”. These situations then became the basis to propose a child care center in the university on August 02, 1981, a center that would respond to the latter concerns. As stipulated in the said proposal, the center aimed at providing substitute parental care and services of children ages 2 to 4 years old and helps them develop into a well-adjusted being, and providing experiences that will help students accept and value the parental roles and relate their knowledge of development to their development.

From then on, the center has been in constant service to its clientele, making it produced several batches of students time after time, and presently stands as a sustained extension project of the aforesaid department. However, despite its continuing operation, there is no single research study that was ever conducted about its children contrary to child
development centers found abroad like the Bing Nursery School of Stanford University- the center where certain theories of child development were conceptualized like the famous “Bobo Doll Experiment” of Albert Bandura that paved way for the development of Social Learning Theory. Taking into account that the department houses a specialization on home economics education and elementary school teaching, it is undeniable then that it must utilize the center as an arena in advancing the frontier of knowledge in the study and practice of child development aside from being a child-care service provider.

In an age when the pursuit of knowing the truth is becoming rigorous, nursery development center has been a rendezvous of the scholars from different areas of expertise, all endeavors to study a child. Consequently, varied journals of any kind are found elsewhere, almost all tackling literacy, numeracy, learning difficulties, and developmental problems of nursery children; yet little has been accounted on screening the current state of children who are presently enrolled in a nursery development center.

Thus, this premise has inspired this study to be conducted and is hoped to establish a benchmark for further study, adhering to the idea that any scholarly undertakings can never be undertaken without a starting point. This study reports baseline information on the current children's motor, self-care, and play skills. It determined if the children can perform the basic tasks of these mentioned skills, and obtains the possible implications of being able to perform or not perform such tasks.

Tenets of the study
Understanding nursery education
Nursery Education Program (or Early Childhood Development Program in some contexts) pertains to a program that advocates the progressive development of every child in all aspects of life. This development touches the biological, psychological, and emotional changes such as motor skill, sensory processing, self-care and organization, social and cognitive development that occurs in human beings between birth and the end of adolescence, as the individual progresses from dependency to increasing autonomy. It is a continuous process than with a predictable sequence yet having a unique course for every child (Sigelman and Rider, 2014).

Such idea is in line with that of the United Nations Children’s Fund (UNICEF) which recognizes that an early childhood development program is a critical stage that structures the foundation for children’s future well-being and learning, for it is a comprehensive approach to policies and programs for children from birth to 8 years of age and their parents or caregivers that purports to protect the child’s rights to develop its full cognitive, emotional, social and physical potential. Subsequently, failure to invest in this kind of program may result in developmental delay and disability as well as inhibit the optimal development and performance of children throughout their lives (UNICEF, 2015).

The definition of nursery education has evolved throughout its history and development. It went through ages to ages until the emergence of its necessity and significance for nation-building and total human development. Consequently, in our country alone, a republic act was approved by then his Excellency President Benigno Aquino known as the “Republic Act Number 10157 or Kindergarten Education Act”. In this act, the role of kindergarten education (which includes nursery education) for physical, social, intellectual, emotional, skills stimulation and values formation in realizing the Millennium Development Goals on achieving Education for All (EFA) is recognized, therefore making it compulsory for all children before stepping on the ladders of basic education.

The term nursery education coexists with terms like preschool, kindergarten, or pre-primary. But all boils down to one area of scope in accordance to the context of that of United Nations Educational, Scientific and Cultural Organization (UNESCO), such term is then called “Early Childhood Education and Care or ECEC”, and so its academic counterpart is Early Childhood Education for baccalaureate students aspiring to become ECEC professionals. Therefore nursery, kindergarten, preschool all refers to the same thing- Early Childhood Education and Care. At present, the most widely used and accepted definition of Early Childhood Education and Care is that it pertains to “services for children under compulsory school age involving elements of both physical care and education” (Kamerman, 2006).
Understanding motor, self-care, and play skills

On motor skills
The motor (gross and fine), self-care and play skills are three of the dimensions in the study and practice of child care and development. They are treated as separated areas in terms of developmental milestones but they work together in the development of the child for their effects are interconnected with each other.

Gross motor skills refer to the activities that require muscular strength and bodily movements that include eye-hand coordination skills like throwing, catching, and kicking a ball. On the other hand, the fine motor skills refer to the activities that may be done through sitting or a mere standing, such that this type of motor skill deals on movement skills that are done by children that involve a refined use of the small muscles controlling the hand, fingers, and thumb.

Motor development is a gradual progressive change of the kinetic behavior of the individual, caused by the interaction with the environment and the motor task. The basic motor skills as an organized series of basic movements that involve the combination of kinetic models of two or more body parts categorize them as stabilization, traveling, and handling skills. Preschool and elementary age is the appropriate and fundamental time for children to develop basic motor skills (Gallahue, 2002).

It has been reinforced by several scholars the view that an organized motor or movement program promotes motor development in preschool children (Derri et al., 2001). Such that Lupu (2011) posited that the aim of motor programs is the development of basic skills, the activation of imagination and creativity, the strengthening of cognitive skills, and the development of self-esteem and social relations. Through the development of basic skills, coordination is particularly enhanced; this is a very important factor in children's further education.

A study conducted by Hardy et al. (2009) on a sample that consisted of 29 schools in Australia and demonstrated the importance of motor programs for children. Through structured activities directed by the teacher, children improved basic motor skills that could have long-term effects, as they supported the hypothesis that children would participate as adolescents and adults successfully in sports.

On self-care skills
Self-care refers to the everyday tasks undertaken to be ready to participate in life activities (including dressing, eating, cleaning teeth, and more). They are often referred to as the activities of daily living. While these are typically supported by adults in young children, it is expected that children develop independence in these as they mature. Alongside self-care is the organization skill which refers to the ability to establish the tasks that a child needs to do, by when and how. A part of the organization understands the requirements of the task. It is an important skill required to follow daily routines and complete self-care activities.

Self-care (skills to dress and undress, look after oneself, use a toilet, take food independently, bathe, wash, etc.) directly influences a child's self-assessment, it is an important step on the way to their socialization. Self-care skills formation will allow in future solving effectively the problems of children's views and knowledge expansion about surrounding things, sensory upbringing, speech, fine motor skills, and hand-eye coordination development and also the skill to imitate actions and follow verbal instructions, samples, to observe a definite sequence of actions (Akhmetzyanova, 2014).

On play skills
Play skills refer to voluntary engagement in self-motivated activities that are normally associated with pleasure and enjoyment. It associates with social skills as children interact and communicate with other children in the playset.

Accordingly, there are four criteria in fully understanding play- flexibility, positive effect, nonliteral, and intrinsic motivation. Flexibility denotes that play behaviors vary from real ones in form (exaggerated, or truncated) and/or content (one might play at eating with a stick instead of a spoon). Positive affect touches on the idea that people look like they are having fun when they play. Nonliterality refers to the fact that, in play, behaviors lack their usual meaning while paradoxically retaining it. Intrinsic motivation suggests voluntariness in the sense that one engages in the activity by choice for its own sake (Lillard, 2013).
In some contexts, play is the primary mechanism through which children encounter and explore their immediate environment. As such, play becomes a natural way to motivate children to learn about themselves and the world around them. Likewise, the Developmentally Appropriate Practice Guidelines say of play as: “Children of all ages love to play, and it gives them opportunities to develop physical competence and enjoyment of the outdoors, understand and make sense of their world, interact with others, express and control emotions, develop their symbolic and problem-solving abilities, and practice emerging skills”. Play is believed to must always agree with the total life of the child as well as with his environment, and cannot stand in isolation or be divorced from it; play will then be educative, serious, and meaningful. It can be ranged from being unstructured with free choice by children and no/little active adult support to being highly structured with teacher-led instruction and direction (Cutter-Mackenzie et al., 2014).

Methodology:
The study employed the descriptive research design as it reports the basic tasks in motor, self-care, and plays that the children can and cannot perform at the time of the data collection, through percentages in graphical presentations. The data were gathered employing a checklist questionnaire that was answered by the parents of the children. The questionnaire was anchored from the checklist of “Early Childhood Care and Development Council of the Philippines” and “Early Learning and Development Standards for Children” of the United Nations Children’s Fund (UNICEF) which contains a list of tasks categorized according to the developmental areas that are the coverage of the study—motor skills, self-care, and play skills. In the questionnaire, the participants were asked if each of the tasks listed is observable to their children or not. Archival data collection was done to gather information about the center as to how it was designed and started. These data were sourced from the Central Mindanao University Archives Office, the current chairperson of the Department of H. E. Education and Family Life, and the College of Human Ecology Accreditation Center.

In the actual conduct, a discussion about the rationale and the significance of this study to the parents including the nursery teacher was made. Apart from this, the distribution and explanation of the checklist questionnaire were also done to clear up confusing items and parts of the questionnaire. Tables and graphs are used in presenting the data.

Ethical considerations
The data collection and the entirety of the process therein which this study had undertaken involving the children, the parents, and the nursery development center followed the protocol of the research ethics. Information of this inquiry was given first to the parents to decide whether or not they would like to participate at involving their children along with their stipulated rights and the mechanisms to ensure that children’s welfare was of absolute consideration. A session with them was conducted as an avenue for face-to-face dialogue and discussion. Privacy of the identities and confidentiality of the responses was ensured and had been sealed as soon as the inquiry had been completed.

The ethical considerations were anchored from the principles of autonomy, beneficence, justice, and research merit and integrity including the measures of ensuring safety and protection of privacy and confidentiality such that the data collection had been conducted in a safe space. Before the data collection, more importantly, the study had been ensured to have adhered to the ethical doctrines and practices of research orthodoxy.

Results and Discussion:
Children are children. They run whenever their legs are set to. They grasp things that caught their attention and interest. They help themselves when they are able, and simply cry out for help when they cannot. They relate with other children through the language of play. And each of these moments means a lot to them, for these experiences serve as valuable episodes for their growth and development, and three of its developmental areas are motor, self-care, and social skills.

The data from the parents of the 21 children of the center had been used to look into and find initial findings on the motor, self-care, and social skills. In terms of age, the majority of these children were in 4 years old (11) while there were 8 who were 3 years old and 2 who were at age 5; as to the gender, there were 13 who were male while there were 8 who were female; and on the order of the family, there were 6 who were in the first order, 7 who were second, 3 who was third, 3 who were fourth and also 2 who were fifth.
A motor skill is the children’s ability to do movements using their muscles, manifested by bodily movements primarily with the use of arms and legs such as grasping and running. These movements then are further classified as gross and fine motor skills.

Gross motor skills are those which require whole-body movement and which involve the large (core stabilizing) muscles of the body to perform everyday functions, such as standing, walking, running, and sitting upright. It also includes eye-hand coordination skills such as ball skills (throwing, catching, and kicking). The underlying movements of this skill are further sub-categorized into three: locomotor skills, non-locomotor skills, and manipulative skills. Locomotor skills are those that involve going from one place to another like walking, running, climbing, skipping, hopping, creeping, galloping, and dodging; non-locomotor skills are those where the child stays in place like bending, stretching, turning, and swaying; and manipulative skills are those that involve projecting and receiving objects, like throwing, striking, bouncing, catching and dribbling. Children need strong gross motor skills so they can engage in age-appropriate physical activities, and so they can participate in classroom activities that require body control (Corpuz et al., 2010).

Fine motor skills involve the use of the smaller muscle of the hands, such as when doing up buttons, opening lunch boxes, or using pencils or scissors. The efficiency of this skill significantly influences the quality of the task outcome as well as the speed of task performance. Efficient fine motor skills require some independent skills to work together to appropriately manipulate the object or perform the task.

These skills are essential for performing everyday skills like cutting, self-care tasks (e.g. managing clothing fastenings, opening lunch boxes, cleaning teeth), and pencil skills. Without the ability to complete these everyday tasks, a child’s self-esteem can suffer and their academic performance is compromised. They are also unable to develop appropriate independence in life skills (such as getting dressed and feeding themselves).
Gross motor skills of the children

Figure 2: The general view of the gross motor performance of the children.

On the observations of the parents, a majority of the children were observed to have performed the tasks, which meant that they had met the gross motor milestones of their age. By meeting these tasks, they can perform the demanding activities of them at home, school, and most especially at playtime where most of these tasks are being demanded. They can play creative-movement games, throw and catch balls and beanbags, and build and explore obstacle courses (Gober, 2015). Furthermore, they can balance on afoot at a certain duration of time, jump over objects that are reachable to their arms, hop, climb, gallop, and maturely grasp on a writing utensil like the pen (White and Smith, 2002). Their muscles are already established to the extent that it will make them perform rigorous, multiple, and more complex motor tasks, which signifies that they are experiencing dramatic growth in the development of physical skills that also increase their capacity to learn new cognitive skills.

However, few of them were not observed to perform certain tasks. Although there were certain strategies to improve difficulties of these tasks, the inobservances of these activities to these children would imply that they may have poor development of body awareness and movement planning skills, of which this is often manifested by difficulties in using playground equipment; and decreased opportunities for social interaction which means that during playtime, where they deal with other children, they have difficulties in performing several demanding activities like that of action songs with the teacher or relating to other children at the playground, which may lead to having a lack of confidence in social interaction (Bracken, 2000).

In the case of the 4-year olds, the effect leads to having a lack of confidence in movement-based activities that may greatly hinder their interaction with other children, particularly those in their age, when this happens their skills in relating to others will be greatly affected negatively.

Table 1: The children and the gross motor basic tasks.

| Tasks                                      | 3-year olds | 4-year olds | 5-year olds |
|--------------------------------------------|-------------|-------------|-------------|
|                                            | O  %       | N.O  %      | O  %       | N.O  %      | O  %       | N.O  %      |
| A Climbs on the chair or another elevated piece of furniture like a bed without help | 8 100       | 0 0         | 11 100     | 0 0         | 2 100      | 0 0         |
| B Walks backwards                          | 5 62.5      | 3 37.5      | 11 100     | 0 0         | 2 100      | 0 0         |
| C Walks downstairs, two feet on each step, with one handheld | 7 87.5       | 1 12.5       | 7 63.6     | 4 36.4       | 2 100      | 0 0         |
Fine motor skills of the children

Like that of the gross motor, a majority of the children were observed to have performed the tasks, which also means that they have met the fine motor milestones of their age. They enjoy working with a variety of media with which eye-hand coordination is mostly of use like the activities at school (the center) such as drawing and painting by the use of crayons and pencils, or the folding of papers like that of origami and other projects. In performing the tasks, the performance of the 4-year olds and 5-year olds appears to be very natural for them as they get used to it.

For instance at school, because of practices and constant use, they properly print their first name in uppercase letters, the incorrect forming of some letters happens less and less frequently; they comfortably handle small objects, and they begin to tie their shoes. They hold scissors correctly and can cut on a straight or slightly curved line with moderate accuracy. At times, they manipulate beads or other small items by threading them on lace or rope, where the dominant hand holds the bead and the non-dominant hand holds the lace (Abramovitz, 2012).

However, few of the 3-year olds were not observed to have performed the mentioned tasks. These inobservances may mean that these children may have delayed pre-writing skills development, frustration and/or avoidance of pencil-based tasks, poor pencil grasp, and pencil control, poor self-care skills such as eating, and delayed drawing skills. The inobservances among the 4-year olds may imply that these children may have difficulties in holding and manipulating a pencil; difficulties in learning to write a name and other letters of the alphabet; dependence on caregivers for everyday activities such as dressing and frustration and/or avoidance of pencil-based tasks. The 5-year olds may have difficulties demonstrating academic ability on paper and poor handwriting.
Table 2:- The children and the fine motor basic tasks.

| Tasks | 3-year olds | 4-year olds | 5-year olds |
|-------|-------------|-------------|-------------|
|       | O % | N.O % | O % | N.O % | O % | N.O % |
| A     | Uses all five fingers to get food/toys placed on a flat surface | 7 87.5 | 1 12.5 | 11 100 | 0 0 | 2 100 | 0 0 |
| B     | Picks up objects with thumb and index finger | 7 87.5 | 1 12.5 | 11 100 | 0 0 | 2 100 | 0 0 |
| C     | Displays a definite hand preference | 7 87.5 | 1 12.5 | 11 100 | 0 0 | 2 100 | 0 0 |
| D     | Puts small objects in/out of containers | 7 87.5 | 1 12.5 | 11 100 | 0 0 | 2 100 | 0 0 |
| E     | Holds crayon with all the fingers of his hand making a fist (i.e., palmar grasp) | 7 87.5 | 1 12.5 | 11 100 | 0 0 | 2 100 | 0 0 |
| F     | Unscrews the lid of a container or unwraps food | 5 62.5 | 3 37.5 | 11 100 | 0 0 | 2 100 | 0 0 |
| G     | Scribbles spontaneously | 7 87.5 | 1 12.5 | 11 100 | 0 0 | 2 100 | 0 0 |
| H     | Scribbles vertical and horizontal lines | 7 87.5 | 1 12.5 | 11 100 | 0 0 | 2 100 | 0 0 |
| I     | Draws circle purposefully | 7 87.5 | 1 12.5 | 11 100 | 0 0 | 2 100 | 0 0 |

O-Observed; N.O-Not Observed

Self-care skills of the children

Self-care skills are the everyday tasks undertaken to be ready to participate in life activities (including dressing, eating, cleaning teeth, and more.). They are often referred to as the activities of daily living. While these are typically supported by adults in young children, it is expected that children develop independence in these as they mature. These skills are one of the first ways that children develop the ability to plan and sequence task performance, to organize the necessary materials, and to develop the refined physical control required to carry out daily tasks (be they opening lunch boxes, drawing, or standing to pull up pants).

Thus self-care skills act as precursors for many school-related tasks as well as life skills. The term 'self-care' would suggest that these skills are expected to be done independently and in many cases; it becomes inappropriate for others to assist in such tasks. More specifically many kindergartens and schools will need children to be toilet trained before starting at their center. When self-care skills are difficult, this also becomes a limiting factor for many other life experiences. It makes it difficult to have sleep-over with friends or families, to go to school, children may stand out at birthday parties if they are not comfortable eating and toileting independently, they may experience bullying or miss out on other social experiences as a result.

Figure 4:- The general view of the self-care performance of the children.
The majority of the children were observed to have performed the basic self-care tasks that their parents were asked to observe on them. This result means they can carry out more tasks, with ease and a bit of efficiency, on their own, although supervision, encouragement, and follow-up will still be necessary. Consequently, children who are independent with most of these skills often follow established rules and routines; independently initiate a simple routine; understand beginning, middle, and end; and understand others' feelings (White and Smith, 2002).

However, few of them were not observed to have performed certain tasks. Inobservances of these imply that they may have difficulties socializing with peers, delayed play skills, struggle to copy and learn from others due to poor understanding and attention, difficulties following instructions at home, childcare, kindergarten, preschool, difficulties expressing wants and thoughts, difficulty tolerating different textured foods (e.g. picky eater), difficulties maintaining attention, difficulties with toilet training, difficulties with dressing and feeding, and difficulties getting to sleep or sleeping through the night (Kid Sense Child Development, 2018).

### Table 3: The children and the self-care basic tasks.

| Tasks                                                                 | 3-year olds |        | 4-year olds |        | 5-year olds |        |
|-----------------------------------------------------------------------|-------------|--------|-------------|--------|-------------|--------|
|                                                                       | O %         | N.O %  | O %         | N.O %  | O %         | N.O %  |
| Feeds self with finger food (e.g. biscuits, bread) using fingers      | 7 87.5      | 1 12.5 | 10 90.9     | 1 9.1  | 2 100       | 0 0.0  |
| Feeds self, using fingers without spillage                            | 7 87.5      | 1 12.5 | 10 90.9     | 1 9.1  | 2 100       | 0 0.0  |
| Feeds self, using spoon without spillage                              | 7 87.5      | 1 12.5 | 10 90.9     | 1 9.1  | 2 100       | 0 0.0  |
| Gets a drink for self-unassisted                                      | 7 87.5      | 1 12.5 | 10 90.9     | 1 9.1  | 2 100       | 0 0.0  |
| Dresses without assistance except for button and tying                | 7 87.5      | 1 12.5 | 9 81.8      | 2 18.2 | 2 100       | 0 0.0  |
| Goes to the designed place to urine (pee) or move bowels (pooh) and   | 5 62.5      | 3 37.5 | 7 63.6      | 4 36.4 | 2 100       | 0 0.0  |
| never does this in his underpants/wear anymore                       |             |        |             |        |             |        |
| Independently packing items away                                      | 7 87.5      | 1 12.5 | 10 90.9     | 1 9.1  | 2 100       | 0 0.0  |
| Settling to sleep at night                                           | 8 100       | 0 0    | 10 90.9     | 1 9.1  | 1 50         | 1 50   |

O-Observed; N.O-Not Observed

**Play skills of the children**

The majority of the children, particularly the 5-year olds, have met the play and social milestones of their age. This result implies that they tend to get interested in new experiences like cooperating with other children through playing, particularly group playing with simple rules; whenever a certain conflict arises during play, they likely to negotiate solutions; they show empathy to others who seems helpless or needy; and they like to help their parents with simple household tasks, like sweeping the floor. They prefer to play with others and select their friends of which, most of the time, they want to please their friends; they likely to follow the rules during play and explain them to other children.

At times, whenever it is necessary, they show concern for others and express the feelings of being sorry. They have developed enough independence and understanding to enable them to cope away from home for such a length of time. As always, this varies with each child, and some will be more ready than others to be away from their parents and to make relationships with people outside the family. Although most of the time, they will want to play with other children and may form some simple friendships, their important emotional life is still located inside the home. They come in contact with different ideas and ways of behaving at school and also have to fit into a whole new system of rules that might be very different from those at home (White and Smith, 2002).
However, a few of them were not observed to have performed certain tasks. Inobservances of these tasks among these children may imply that the children may have difficulties socializing with peers, struggle to copy and learn from others due to poor understanding and attention, have difficulties expressing wants, needs, thoughts, and ideas, display frustration when manipulating small toys and objects, and lead to poor self-esteem due to difficulties interacting with other children (Kid Sense Child Development, 2018).

**Table 4:** The children and the play and social basic tasks.

| Tasks                                                                 | 3-year olds | 4-year olds | 5-year olds |
|-----------------------------------------------------------------------|-------------|-------------|-------------|
|                                                                      | O   % | N.O %   | O   % | N.O % | O   % | N.O % | O   % | N.O % |
| A Shares toys with others                                             | 5   62.5 | 3  37.5 | 9   81.8 | 2  18.2 | 2   100 | 0   0  | 2   100 | 0   0  |
| B Imitates adult activities (e.g., cooking, washing, etc.), also including themes never personally experienced (e.g. going to space, fairytale, etc.) | 6   75  | 2  25   | 10  90.9 | 1  9.1  | 2   100 | 0   0  | 2   100 | 0   0  |
| C Waits for his turn                                                  | 6   75  | 2  25   | 10  90.9 | 1  9.1  | 2   100 | 0   0  | 2   100 | 0   0  |
| D Playing with 2 or 3 children in a group, including negotiating others during play | 5   62.5 | 3  37.5 | 11  100 | 0   0.0  | 2   100 | 0   0  | 2   100 | 0   0  |
| E Plays organized group games fairly (e.g. does not cheat to win, afraid to get caught doing the wrong) | 5   62.5 | 3  37.5 | 9   81.8 | 2  18.2  | 2   100 | 0   0  | 2   100 | 0   0  |
| F Can talk/express about complex feelings                             | 5   62.5 | 3  37.5 | 10  90.9 | 1  9.1  | 2   100 | 0   0  | 2   100 | 0   0  |

O-Observed; N.O-Not Observed

Play is voluntary engagement in self-motivated activities that are normally associated with pleasure and enjoyment. It is a voluntary engagement in self-motivated activities that are normally associated with pleasure and enjoyment. Play may consist of amusing, pretend or imaginary, constructive, interpersonal (play with others) or intrapersonal
(solitary play) interactions. Play is the way that children learn about the environment, their bodies, and their place in the world around them (Smith, 2009).

**Conclusion:**
The majority of the children in the center could perform the tasks that are crucial in their age despite the unavailability of certain facilities, implying that they could perform physical movements that are demanded of them at home, at school, or during play. Because they could do these movements, consequently they could help themselves on the tasks in which the guidance of a significant other is not necessary. By being able to do these actions, it is easy for them to relate to other children. And because they could relate, their self-esteem is on the track where it could lead to further progress and development. Their development in terms of these skills is with great possibility to be on the right track which promises the parents good progress.

But, in the case of the few who were not observed to have performed the tasks, certain difficulties on the motor, self-care, and play might have been experienced by the children. These difficulties must not be disregarded for it may create hindrances on the children’s progress and development, in which the consequences will be greatly experienced the moment the children enter formal schooling.

**Recommendations:**
Although it is evident that the majorities of the children have indeed met the motor, self-care, and play milestones of their age, the study’s standpoint was that an intervention must be done to the few who have not. This intervention must consider the implications mentioned in the results and discussion, and see to it that the difficulties that these children might have been experienced along shall be comprehensively addressed by the department and the center; otherwise, the prime objectives of the center will be defeated. Perhaps the center should, in any way, enhance the skills of the teacher in designing activities for the children based on the tasks that these few were observed to have not performed, instructional materials intended for these tasks must be used, and the daily activities of the children in the center must also be looked into.

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