



NUI Galway  
OÉ Gaillimh

# ACTIVE PLAY FOR 0-3 YEAR OLDS IN GALWAY CITY:

A Summary Report  
and Strategy Toolkit



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March 2021

## **CITATION**

Domegan, C. and Flaherty, T. (2021) "Active Play for 0-3 year olds in Galway City: A summary Report and Strategy Toolkit", Whitaker Institute, NUI Galway, Ireland.

Formative research report: Domegan, C., Flaherty, T. and Anand, M. (2020) "Physical Activity/Active Play for 0-3 year olds in Galway City: Formative Research Findings", Whitaker Institute, NUI Galway, Ireland.

## **KEY WORDS**

Active Play, Physical Activity, 0-3 year olds, Systems Change.

## **ACKNOWLEDGEMENTS**

The authors would like to thank Evelyn Fanning, Caroline Murray, HSE, Health Promotion and Improvement, Galway, Galway City Early Years subcommittee of Galway Children and Young People's Services Committee and all the stakeholders who participated in this research project.

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# BACKGROUND

## National and international research shows that what happens to a child during pregnancy and the first 2 years of life will influence the child's health and wellbeing for their lifetime.

(Williams et al., 2009; Centre for Community Child Health, 2018).

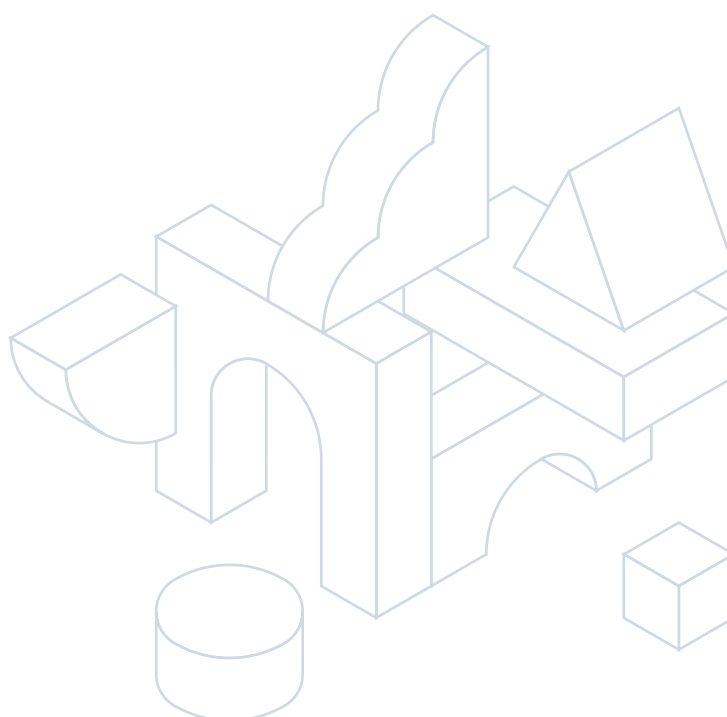
This is a critical developmental stage as it is within early childhood that a child's brain and biological system rapidly develop (Canny et al., 2017). Favourable experiences, which occur during this critical stage, impact positively on the child's development including social, motor, cognitive and linguistic development (Canny et al., 2017; Child Research Network, 2017). Evidence suggests that leading an active lifestyle in early childhood is likely to translate into high activity during adulthood (National Childhood Network, n.d). An active lifestyle during the early years has multiple benefits including development of bones and muscles, movement skills, development of coordination and development of self-confidence (Maternal and Early Years, n.d; HSE, n.d). Importantly, it lays the foundations for the attitudes, skills and behaviours for lifelong improved health and wellbeing (HSE, n.d).

In early childhood, active play is the most appropriate form of physical activity as it helps learning, communication and improves confidence. Active play can be found in almost all types of physical activity including everyday tasks (climbing steps), unstructured tasks (lying and rolling), structured tasks (Incy wincy spider), and active travel like walking (Active Play Every day Booklet, HSE, 2014). In light of the benefits of an active lifestyle in early childhood the World Health Organization published guidelines in 2019 for physical activity for children.

These guidelines suggest that:

- Infants less than 1 year should be physically active several times a day in a variety of ways, particularly through interactive floor-based play; more is better. For those not yet mobile, this includes at least **30 minutes in prone position (tummy time)** spread throughout the day while awake.
- Children 1 and 2 years old should spend at least **180 minutes** in a variety of physical activities at any intensity, including moderate to vigorous intensity physical activity, spread throughout the day; more is better.

In a National context, guidelines on physical activity (HSE, n.d) for Ireland cover children and young people aged 2-18 years and suggest; all children and young people should be active, at a moderate to vigorous level, for at least 60 minutes every day. This should include muscle strengthening, flexibility, and bone-strengthening exercises 3 times a week.



# THE RESEARCH

In response to the recommended guidelines for physical activity, a specific action to 'Develop and deliver evidence-based community Physical Activity programmes and initiatives for Parent and Children aged 0-3' featured in the Galway City Early Years Health and Wellbeing Plan (2016-2020). The Galway City Early Years subcommittee of Galway Children and Young People's Services Committee (CYPSC) formed an active play working group to address this specific action. To contribute to this, a research study was undertaken jointly between the HSE, Health Promotion and Improvement, Galway and the Applied Systems Thinking group in NUI Galway in January 2020. This work aimed to provide an enhanced understanding of the key forces and dynamics at work in relation to active play for 0-3 year olds in Galway city.

The project's overarching goal was to identify evidence-based active play/physical activity strategies covering multiple-levels and multiple stakeholders to increase opportunities for 0-3 year olds active play/physical activity in Galway city. Specific objectives included:

**Objective 1:** Examine literature best practice interventions that meet recommended physical activity guidelines for 0-3 year olds. (For findings pertaining to this objective, see Domegan et al. (2020)).

**Objective 2:** Map current services in relation to physical activity/active play for 0-3 year olds in Galway City.

**Objective 3:** Engage with stakeholders (experts, services, parents) to capture perceptions, experiences, enablers and barriers to children's (0-3 year olds) participation in active play.

**Objective 4:** Establish if there is a perceived problem in Galway City in relation to 0-3 year olds meeting recommended physical activity guidelines.

**Objective 5:** Develop a strategy with specific and achievable actions supporting recommended

physical activity guidelines for 0-3 year olds in Galway City.

This project was grounded in behavioural science and systems thinking. A "system" is a set of elements, for example, people, structures, practices, and roles, interconnected to produce their own pattern of behaviours and outcomes over time. The system investigated was active play for 0-3 year olds in Galway City. The project utilized a social marketing soft-systems methodology, including group model building and collective intelligence (Vennix, 1999). Systems social marketing group modelling is a collaborative and inclusive approach and moves beyond the immediate problem to recognize the underlying patterns, the behavioural and structural dynamics and develop strategic leverage areas for change. In this study, the group modelling approach followed a three-stage research design.

## STAGE 1:

In stage 1, the formative research stage, a systematic literature review was undertaken to understand other successful interventions that targeted increasing physical activity and active play opportunities among 0-3 year olds. This review uncovered relatively few interventions, which specifically aimed to increase or improve physical activity among 0-3 year olds. Generally, the physical activity element was part of a wider objective e.g., obesity prevention or bone formation in premature babies. For more details on the systematic review, see Domegan et al. (2020). This review was supplemented by the collection of primary survey data from key stakeholders, (n = 115) including dissenting voices, who identified and listed their top three barriers and enablers, with clarification statements to active play for 0-3 year olds in Galway city. This data identified all the barriers or inhibitors and drivers or bright spots perceived by stakeholders to affect active play for 0-3 year olds in Galway city.

## STAGE 2:

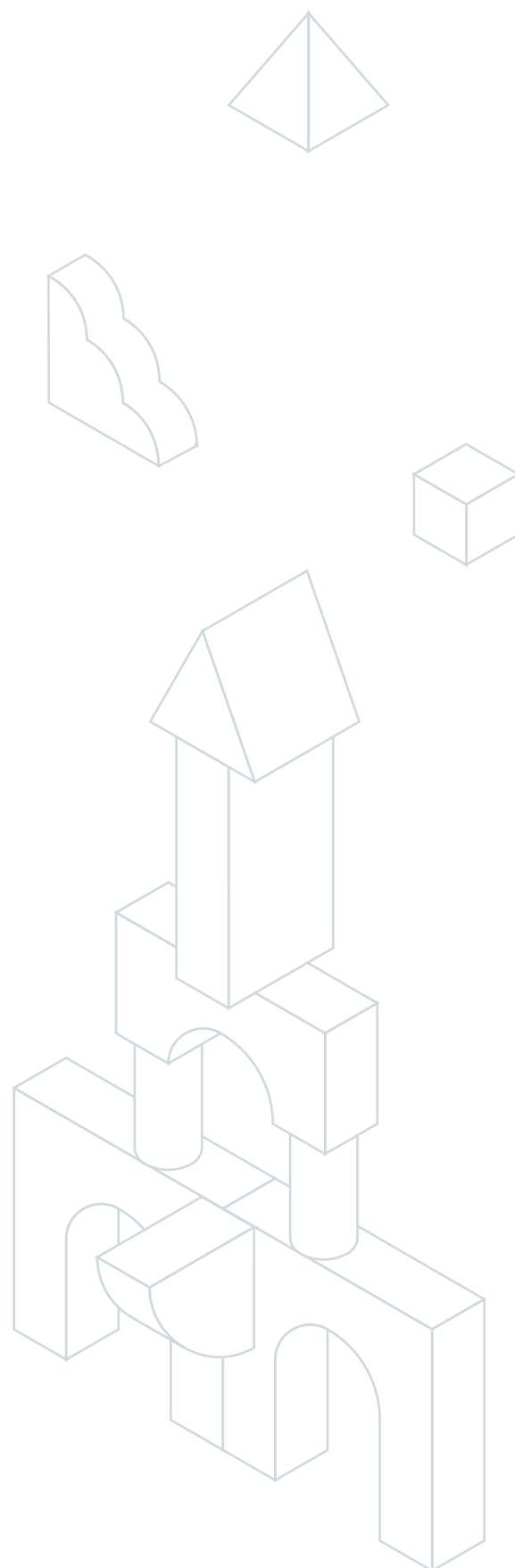
The second stage, an explanatory stage, entailed paired comparisons that generated barrier and driver categories into 40 themes, 22 of which were negative (barriers) and 18 of which were positive (enabling) to active play for 0-3 year olds in Galway city. Causes and effects and the dynamic multi-causal relationships between all these perceived forces were then analysed based on the group modelling (n = 7) [see appendix 2]. The central driving forces and rooted patterns within the system were identified. This resulted in the generation of a multi-causal active play for 0-3 year olds systems map (see Figure 2) which represented the interactions between the structural, behavioural and stakeholder elements that hinder and/or enable active play for 0-3 year olds in Galway city.

## STAGE 3:

The final stage, a triangulation stage, involved key informant interviews with other system stakeholders (n=5) beyond the modelling group to verify the map and ensure it is representative of what is currently taking place in Galway city among 0-3 year olds and active play. This final stage also identified solutions and leverage points across the active play systems map.

## RESEARCH LIMITATION:

The Covid-19 pandemic resulted in many key stakeholders being redeployed to other areas of work. As a result, many stakeholders were unavailable for consultation in the formative research phase and/or available to participate in the in-depth interviews. Consequently, a smaller sample than previously anticipated was achieved.



# FINDINGS

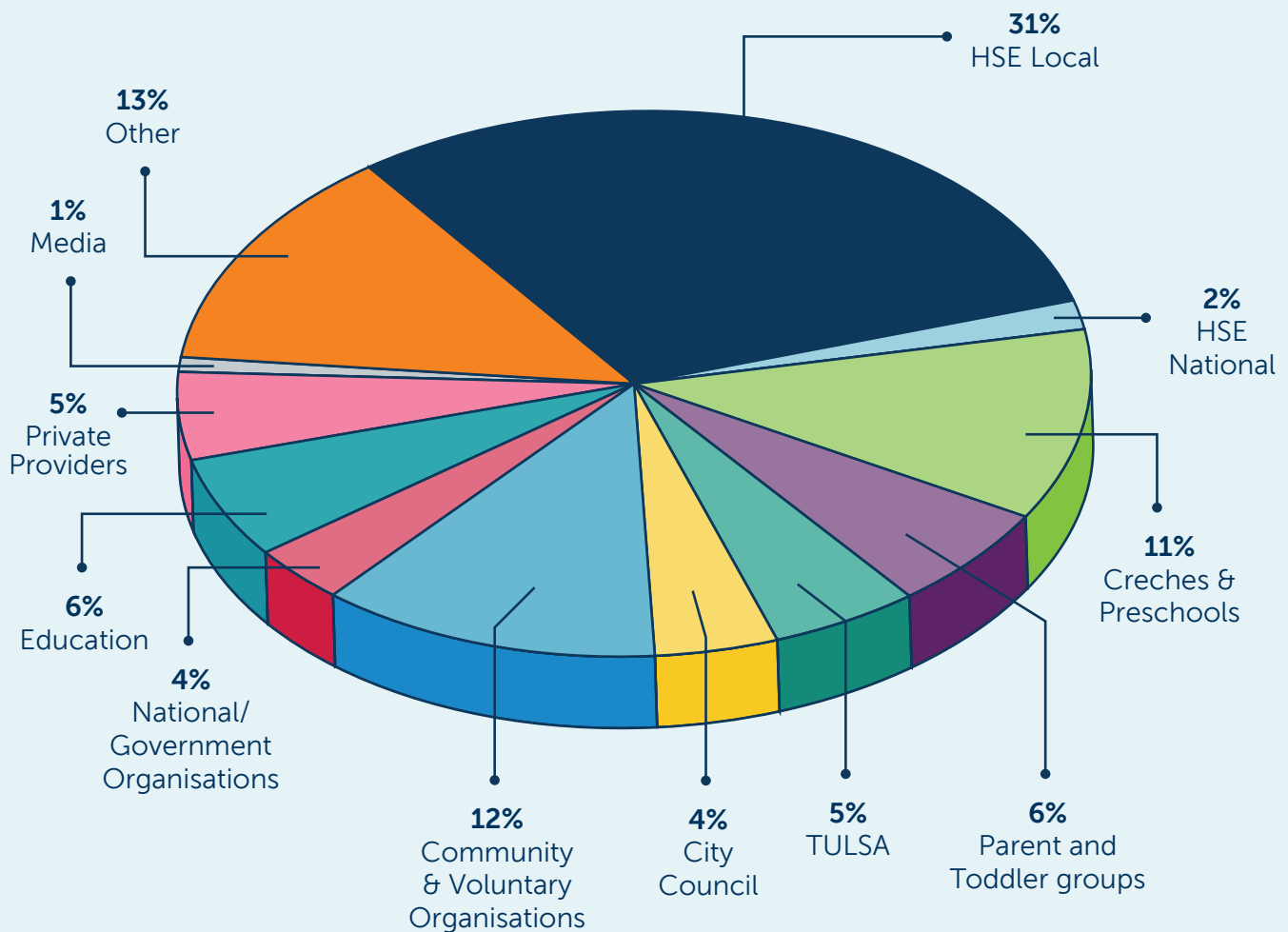
## STAGE 1:

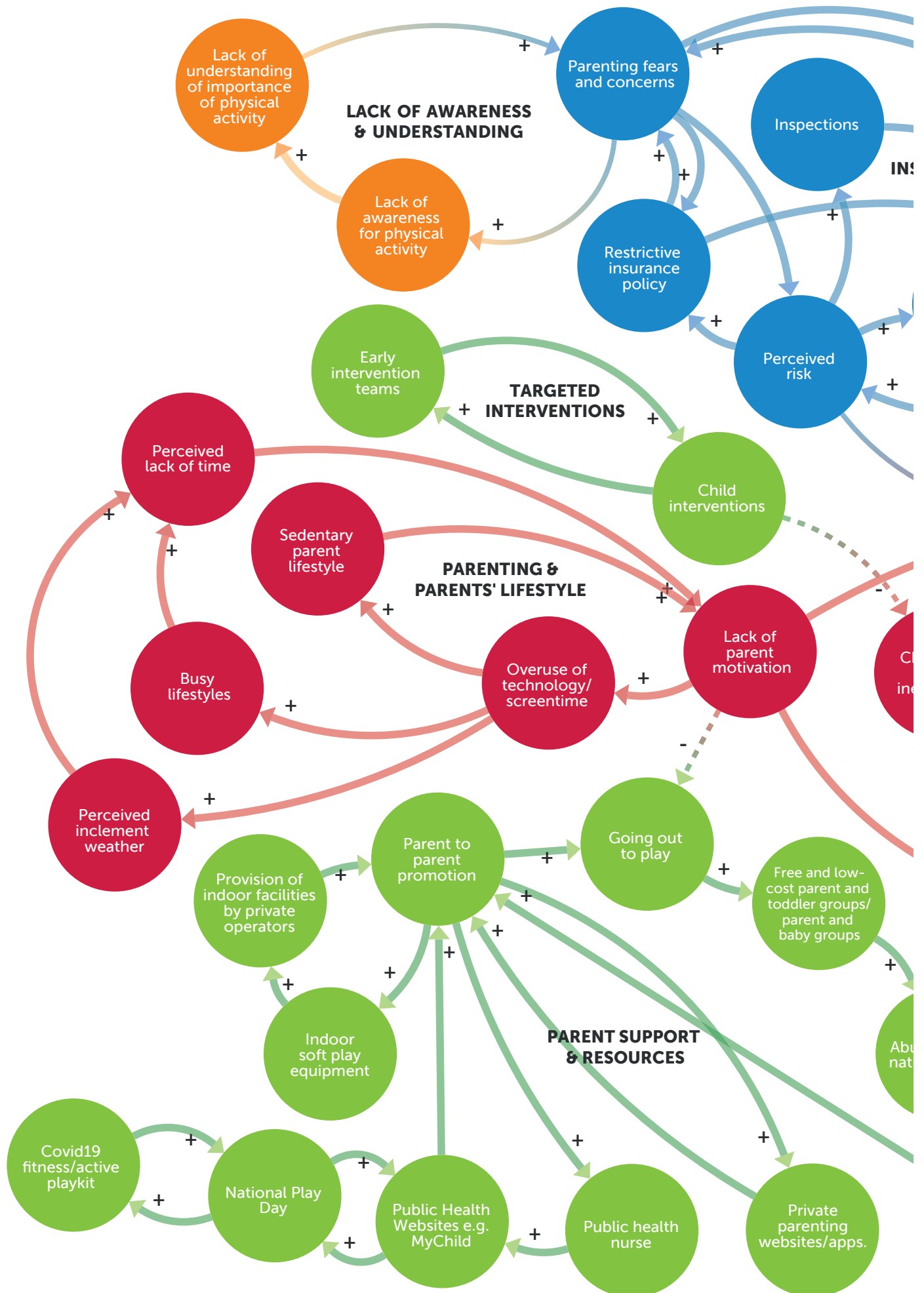
In total, 115 stakeholders participated in the formative survey to identify barriers and enablers. These stakeholders (see Figure 1) included local and national HSE stakeholders, crèches and preschools, parent and toddler groups, child and family agency stakeholders, city council stakeholders, community and voluntary representatives, national organizations, private childcare providers and stakeholders from the education and media sector.

## STAGE 2 AND 3:

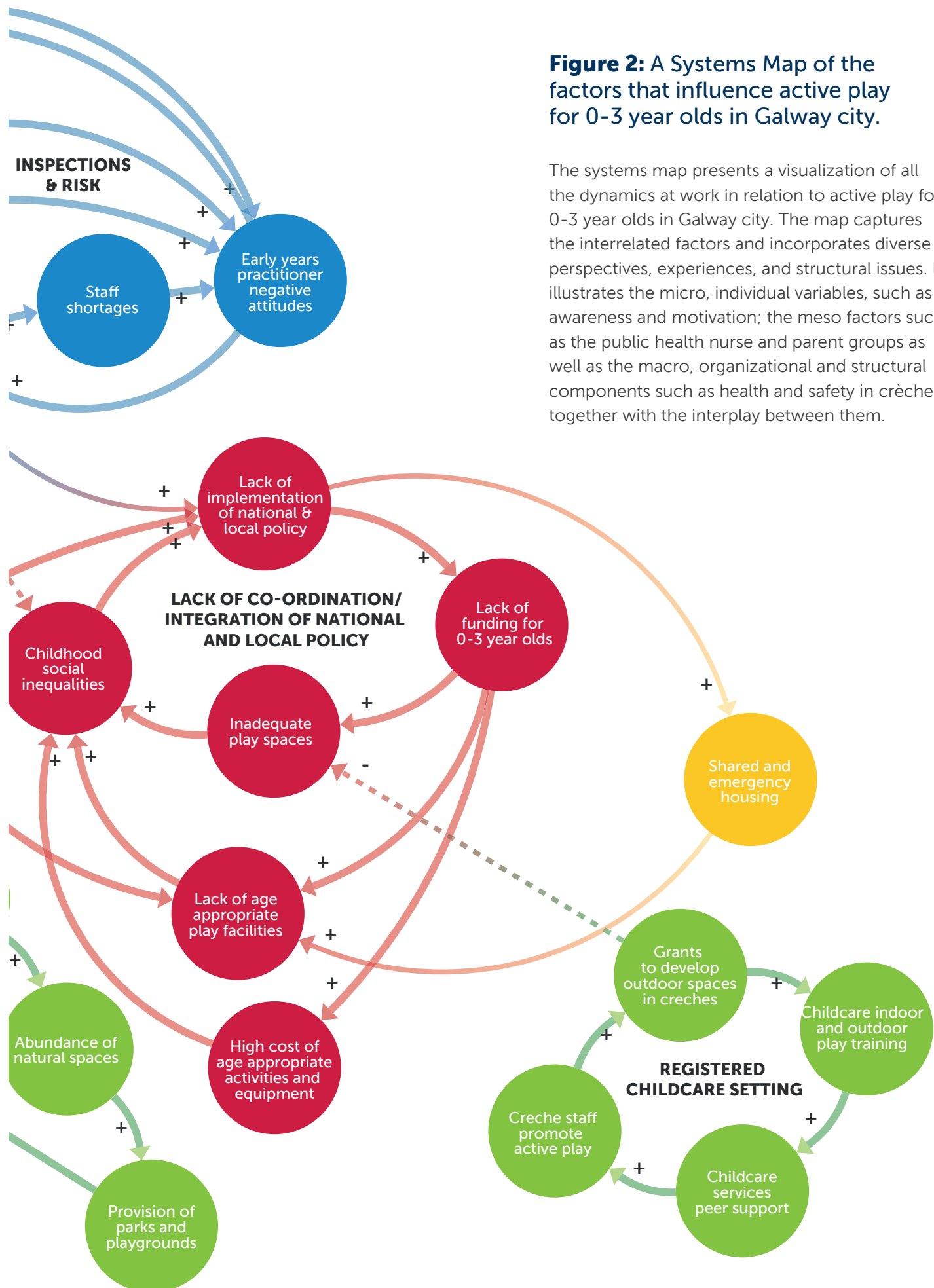
The stakeholders identified 239 barriers to active play and from these, 8 underlying forces and factors which are interconnected. One hundred and twenty-nine solutions were identified to address the barriers and underlying forces. These findings are illustrated in Figure 2.

**Figure 1: Stakeholder representation**









The map identifies “lack of co-ordination/ integration of national and local policy” and “parenting and parents’ lifestyle” as the dominant dynamics that currently undermine or block (act as a barrier to) active play in 0-3 year olds in Galway city. These form negative feedback loops, which are examples of “vicious loops”. The map also identifies “parent support and resources”, “registered childcare setting” and “targeted interventions” as the bright spots or positive patterns (enablers) that facilitate active play for 0-3 year olds in Galway city. These enablers form positive feedback loops, which are examples of “virtuous loops”. An overview of the barriers and enablers can be found in Table 1 below.

## Barriers

**1. Lack of co-ordination/integration of national and local policy<sup>1</sup>:** The lack of co-ordination and integration of national and local policy contributes to a lack of funding for 0-3 year olds. Often the funding focus is on preschool aged children (4–5 year olds) and as a result little funding is provided to develop services/ facilities for 0-3 year olds. The lack of funding is also as a result of individuals, groups and communities not lobbying their politicians as

active play is not seen as a critical issue and more important issues come to the forefront. Limited funding for 0-3 year olds drives:

- inadequate play spaces, due to poor maintenance and access issues.
- lack of age-appropriate play facilities, as many facilities are targeted towards older children.
- the high cost of age-appropriate activities and equipment, some activities such as water babies can be very expensive.

These add to and fuel childhood social inequalities particularly among minority groups as prejudice and bias towards these groups’ results in them finding it difficult to participate and engage in organised active play events or activities.

To address this barrier dynamic, 25 solutions were identified by the stakeholders, including addressing the funding around active play facilities, lobbying policy makers, educating stakeholders and developing/improving initiatives targeting parents and 0-3 year olds (see Table 2).

**Table 1:** Overview of barriers and enablers to active play in 0-3 year olds in Galway city

BARRIERS	ENABLERS
<b>1. Lack of co-ordination/integration of national and local policy</b>	<b>1. Parent’s support and resources</b>
<b>2. Shared and Emergency Housing</b>	<b>2. Registered childcare setting</b>
<b>3. Parenting and Parents Lifestyle</b>	<b>3. Targeted interventions</b>
<b>4. Inspection and Risk</b>	
<b>5. Lack of awareness and understanding</b>	

<sup>1</sup> After this research was carried out, the Irish government launched a strategy, the First Five, focusing on babies and young children.

**Table 2: Potential solutions identified by stakeholders to address the barrier 'lack of co-ordinated/integrated local and national policy.'**

<b>Funding:</b>	<ul style="list-style-type: none"> <li>• More funding needed.</li> <li>• Often pots of money come about through council etc and there is often very little lead time so need to have projects ready.</li> <li>• Government-subsidized access to resources and supports for vulnerable parents and children.</li> <li>• Provide funding for parents to purchase all weather suits to allow their children to play outdoors.</li> </ul>
<b>Policy:</b>	<ul style="list-style-type: none"> <li>• Need a 'champion' to advocate and lobby government on need for policy.</li> <li>• Increased presence of community Gardaí.</li> <li>• City development plan is currently being developed – look at that and see how you can lobby to better support 0-3 year olds.</li> <li>• Lobby for parks and recreation officer in Customs house.</li> <li>• Establish local policy in Galway to build evidence of effect.</li> <li>• Local policy: planning needs to factor in play spaces and make conscious decisions about the requirements for play facilities.</li> <li>• Lobby for free childcare for 0–3 year olds.</li> <li>• Lobby for cross-funding between departments and local authorities.</li> <li>• Intervene in the escalating costs of insurance for indoor play centres so they can stay open and not put up their prices.</li> <li>• Look at planning by design for inclusion – consider all citizens and consider those who might live differently.</li> <li>• Local council need more power/autonomy in decisions and implementation.</li> <li>• Explore inspection of active play for 0-3 year olds in early years settings.</li> </ul>
<b>Education:</b>	<ul style="list-style-type: none"> <li>• Educate the public on being more proactive in the development planning processes; this will help with ensuring there are adequate play spaces and facilities.</li> <li>• Need to educate parents and stakeholders that play is not just about physical development, it is also about emotion and psychological development and the child using their imagination. For example, a play space does not have to be somewhere that has a swing, it can be an area designed that could have interesting rocks or boulders or logs.</li> <li>• There needs to be a balance between awareness /good practice and the practical resources that parents require.</li> </ul>

## Initiatives:

- Use a system like the Planet Youth proposal where each child is given a specific fund to be spent on their active play activities per year, such as €100 per child per year, that can be used for water babies, active play centres, best start club or gymnastics.
- Seek the roll out of the "Leisure card" that Planet Youth is looking at that has been used in Iceland. This would allow parents access to water activities and soft play where there are income restrictions.
- Show parents where all the local areas are for active play - David and Joann Curran used to have a book on family time and in it they listed all the local parks etc you could go with your family, the distance to them and how to access them.
- Increase the number of free indoor spaces for 0-3 year olds in Galway city – for example, in parks have part that is covered so parents can meet and be covered.
- Expand the public health nurse service to allow every family to receive support on active play not just a focus on physical milestones or introduce a service like Family Nurse partnerships or Parents as Teachers.
- Consulting with communities so that appropriate supports are offered and so that local communities "take pride" in the maintenance and use of their resources.

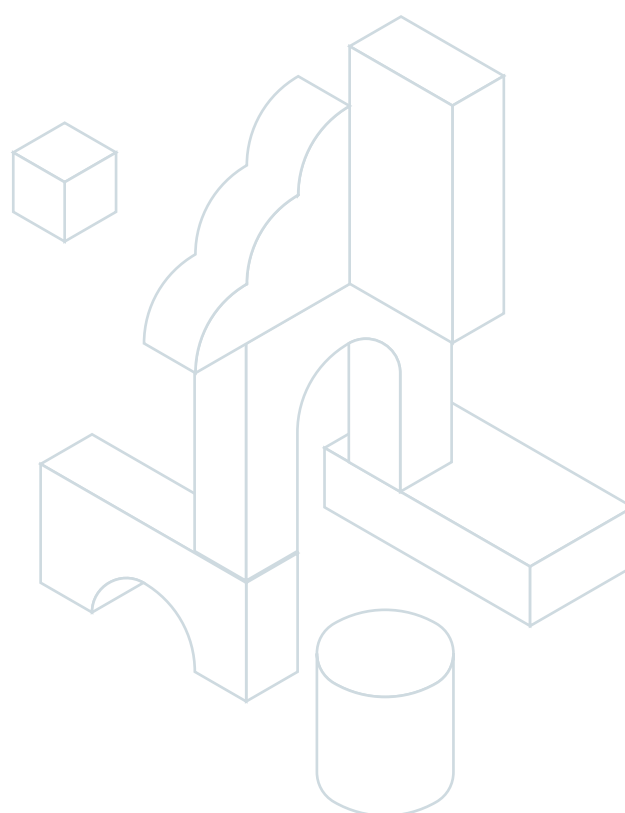
**2. Shared and emergency housing:** Homeless families and those living in unsuitable housing or direct provision do not have the same opportunities to engage in active play. Often, they are confined to a small room where there is little space for physical activity and/or access to outdoor spaces within the shared and emergency housing is not permitted. Eight solutions were identified to address shared and emergency housing. These solutions centred around producing and implementing policy targeted at service providers, educating service providers on the facilities that need to be provided and the importance of active play and providing more initiatives to give parents within shared and emergency accommodation more opportunities to engage in active play (see Table 3).

**3. Parenting and parents' lifestyle:** Parents, parents' lifestyles and parenting are not homogenous but are heterogeneous behaviours; parenting is strongly influenced by the parent's status in life. Parents who are living in poverty or substandard conditions, their ability in relation to active play is negatively impacted by their living conditions. The heterogeneous parenting and lifestyles strongly influence's parents' motivation to want to actively engage in these activities with their 0-3 year old. Parents and children also spend lots of time watching screens indoors. This discourages children spontaneously engaging in active play. Due to the abundance of screens, parents and children sit for long periods, fuelling a sedentary lifestyle. Other parents and families have very busy lives with work and family commitments and have a perception that they do not have the time to spend playing with the child indoors or outdoors. The perceived inclement weather also hinders active play among 0-3 year olds. Parents do not want their child outside in bad weather and/or do not have appropriate clothing for different weather conditions.

**Table 3:** Potential solutions identified by stakeholders to address the barrier 'shared and emergency housing.'

<b>Policy:</b>	<ul style="list-style-type: none"> <li>• Every direct provision centre or emergency housing group centre having a playroom kept clean and hygienic.</li> <li>• Implement policy that parents must be allowed to play with their children inside/ outside emergency accommodation.</li> <li>• Lobby for a time limit on shared or emergency housing.</li> </ul>
<b>Education:</b>	<ul style="list-style-type: none"> <li>• Education and awareness for people living in the community.</li> <li>• Have policies in place around these accommodations, guidelines, and rules that the provider must follow, provide guidance to housing providers on ways to enhance activity for families.</li> <li>• Help housing agencies to overcome safety concerns about physical activity for early years.</li> </ul>
<b>Initiatives:</b>	<ul style="list-style-type: none"> <li>• Targeted interventions including play groups, mother, and baby groups etc.</li> <li>• Consulting with communities so that appropriate supports are offered, training leaders within the community.</li> </ul>

To address parenting and parents' lifestyles, stakeholders generated 18 potential solutions. The solutions focused on policy implementation around the areas of marketing equipment to parents, educating parents on the importance of active play, and targeting initiatives such as weaning workshops and developing initiatives such as Play Cafes (see Table 4).



**Table 4: Potential solutions identified by stakeholders to address the barrier 'parenting and parents' lifestyle.'**

<b>Policy:</b>	<ul style="list-style-type: none"> <li>• Cease the marketing of devices that stop children from moving, such as the bumby.</li> <li>• Prohibiting the sale of swings or baby holding implements that have a screen holder attached to them.</li> <li>• Lobby council to provide funding for the likes of water babies and run them on the weekends so it can be a family activity.</li> </ul>
<b>Education:</b>	<ul style="list-style-type: none"> <li>• Promotional campaign about tummy time for early years.</li> <li>• Promote indoor play activities.</li> <li>• Promote set times to play with children.</li> <li>• Educate on lifestyle and the benefits eating healthy can have on energy levels.</li> <li>• Promote the concept that raingear/appropriate cloths can overcome weather barrier.</li> <li>• Encourage families to get out regardless of inclement weather conditions.</li> <li>• Have more facilities like kids' space as they offer a great service and are very price conscious. It is for children under 7 so parents do not have to worry about their young child being knocked by an older child.</li> </ul>
<b>Initiatives:</b>	<ul style="list-style-type: none"> <li>• Weaning workshops: babies are often weaned once they start being more mobile, could a part of that workshop cover active play even if it is just ten or so minutes on the importance of avoiding screens and allowing movement.</li> <li>• Play Café: The idea of a centre that would focus on community transmission of peer parental support and evidence-based information including promotion of activity for babies and children.</li> <li>• Whatever is ran, there needs to be something in it for the parent also.</li> <li>• Workplace programmes/communication/promotion focused on emphasising the importance of spending time with your child.</li> <li>• Do not have a generic campaign. Get insight into different cohorts of people and their needs, lifestyles etc. For example, look at developing targeted groups. For example, a traveller only baby and toddler group. Sometimes minority groups want to be integrated and want mixed groups but sometimes, initially, it is better to have a traveller only group because their background and living conditions are so different to other parents.</li> <li>• Supports and intervention for managing screen time for the entire family.</li> <li>• Focus on attachment between the parent and baby – similar to the circle of security parenting programme.</li> <li>• Have an informal support group for parents who don't have family or friend support.</li> <li>• Design a campaign, using the media, to raise awareness of the new guidelines on screen time.</li> </ul>

**4. Inspections and risk:** Parents have many fears and concerns around protecting their child and keeping them safe and illness free. Some parents are hesitant to let their child have free movement and explore their environment over fears of falling and being injured. To relieve these fears and concerns, many parents place their children in bouncers, walkers, car seats, prams and ISOFIX type equipment to restrict the child's movement. Due to the marketing and advertising of these products, parents have a perception that they are doing the best for their child and protecting them. Parents' fears and concerns reinforce restrictive insurance policies. Insurance policies are restrictive due to litigation and high insurance costs such as public liability insurance. With restrictive insurance policies and many fears and concerns among parents, this drives a negative attitude among early year's practitioners. This negative attitude is based on the perceived risks involved in engaging with active play among 0-3 year olds. Some practitioners are not willing to let babies and young children

explore active play. This is due to not being able to regulate their risk-taking and finding it easier to supervise 0-3 year olds when they are confined to small spaces and highchairs. The increased perceived risk perpetuates staff shortages, which drives a low staff to child ratio, and as a result active play and activities are not able to take place. Childcare providers are struggling to hire staff and are closing rooms as a result. The increased perceived risk also feeds a system of inspections that are multiagency -different organisations are inspecting different operations with some contradictory in their points on active play. Consequently, there is a negative attitude around inspections and providers remain nervous of active play for 0-3 year olds.

Twenty solutions, relating to inspections and risk, were proposed by the stakeholders, including having clear, policies and procedures in place, reducing perceived risk by educating parents, incentivising, or developing initiatives for childcare providers to engage in active play with 0-3 year olds (see Table 5).

**Table 5: Potential solutions identified by stakeholders to address the barrier 'inspections and risk.'**

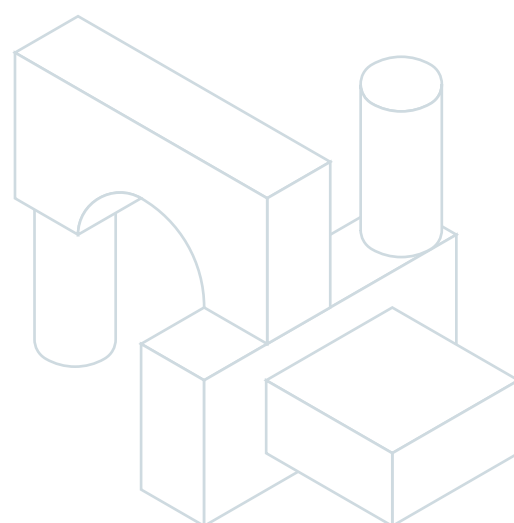
<b>Policy:</b>	<ul style="list-style-type: none"> <li>• Clear, understandable guidelines for childcare providers.</li> <li>• Create a consistent document applicable nationally regarding play, risks, and inspections to eliminate confusion.</li> <li>• Clarity on insurance policies - for childcare providers initially.</li> <li>• Advocate for more staff: child ratio in childcare facilities.</li> <li>• At a national level, there needs to be a change in the childcare model - introduce a public system of early years care and learning and model what is done with primary schools.</li> <li>• Have internships to offset the staff: child ratio.</li> <li>• Implement a single system of auditing and inspections that each creche and childcare provider can work off.</li> <li>• National workforce development plan and consultation currently taking place.</li> <li>• Lobby for more flexible options for childcare.</li> <li>• Regulate childminders.</li> </ul>
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<b>Education:</b>	<ul style="list-style-type: none"> <li>• Education to parents or a media campaign about the dangers of inactivity.</li> <li>• Educate parents on the impact walkers etc are having on their children. Parents need to know that these types of equipment should only be used in moderation.</li> <li>• Show parents how rewarding it is for them if they let their child move freely and develop.</li> </ul>
<b>Initiatives:</b>	<ul style="list-style-type: none"> <li>• Every childcare staff member in their training does a unit on outdoor education and outdoor play.</li> <li>• Consultation with childcare providers to hear their concerns.</li> <li>• Promote parents and childcare providers to work together to promote and teach tummy time.</li> <li>• Leverage registered childcare setting enabler – pump resources into that/drive it and that will offset the negative attitudes of staff.</li> <li>• Reward/recognise childcare staff who engage in active play.</li> <li>• Demonstrate good examples so that others can learn from their example.</li> <li>• Creches often have little booklets that report back to the parents on the child and what they have done/ate that day. This should include a section on active play, and it should be emphasised, so parents know that it is an important part and is part of the care package (e.g., we have to feed your child, make sure they sleep, and get them active).</li> </ul>

#### 5. Lack of awareness and understanding:

Parents are worried about the safety of their child, about their child being hurt, and do not want their child outside. As a consequence of those fears and concerns, there is a reluctance among parents to hear about physical activity and the value of physical activity. These fears and concerns drive a lack of awareness about physical activity. Some parents tend to stay away from sources that talk about the importance of play and movement to a child's development.

To address this barrier dynamic, 26 solutions were identified. These related to stronger policy around areas such as screen time, using existing resources to educate parents, addressing parents' attitude to active play, and utilising the public health nurse in the promotion of active play (see Table 6).





**Table 6: Potential solutions identified by stakeholders to address the barrier 'lack of awareness and understanding.'**

<b>Policy:</b>	<ul style="list-style-type: none"> <li>• Some countries include recommendations to specifically limit the amount of time children spend restrained, or kept inactive, for more than 1 hour at a time.</li> <li>• Stronger advertising standards for 0–3 year olds equipment.</li> <li>• National promotion of flat prams.</li> <li>• Regulation of prams, shapes, and sizes etc.</li> </ul>
<b>Education:</b>	<ul style="list-style-type: none"> <li>• Parental attitude that physical activity is important and part of daily life.</li> <li>• Parental awareness of benefits of physical activity for 0–3 year olds.</li> <li>• Parents knowledge on the importance of physical play, skills experiences for child development, risk management and negotiation.</li> <li>• Use existing resources and increase their reach.</li> <li>• Promotion and education with other stakeholders such as doctors, public health nurse etc.</li> <li>• Use public health nurses to increase awareness and understanding as they engage a lot with parents of children ages 0-3, e.g., an awareness pack on active play, leaflet, active play kit.</li> <li>• Public health nurse promotes parent and baby/toddler groups.</li> <li>• Communicate to parents that the best thing they can do for their children can be done in the home, parenthood has been devalued.</li> <li>• Parental attitude that physical activity is important and part of daily life.</li> <li>• Parental awareness of benefits of physical activity for 0–3 year olds.</li> <li>• Parents knowledge on the importance of physical play, skills experiences for child development, risk management and negotiation.</li> </ul>
<b>Initiatives:</b>	<ul style="list-style-type: none"> <li>• A media campaign including digital media, making the message targeted and impossible to miss.</li> <li>• Parent led initiatives about active play.</li> <li>• A focus on physical activity beyond organised sport; space and opportunity for play.</li> <li>• Implicit active play initiatives.</li> <li>• Parent to parent support and communication.</li> <li>• Acknowledge parent fears at the outset.</li> <li>• The role of Public Health Nurse is underutilised with regard to MECC (Make Every Contact Count).</li> <li>• Targeted intervention and support e.g., for families living in shared or emergency accommodation, families of children with additional needs.</li> <li>• There is a problem focused approach and a more solution focused approach would be in promoting practical information e.g., sleep routines etc.</li> <li>• These one-to-one interventions could then be re-enforced in a group setting.</li> <li>• Educate parents that they don't need all the equipment or a huge amount of space.</li> </ul>

## Enablers

**1. Parent supports and resources:** Parents will often ring/text each other to get out and meet up, have fun with the kids and socialise. When parents link up with each other, this increases the opportunity for parents and children to go out to play and be active; offsetting the lack of parent interest or motivation. Parents meeting up and going out to play is facilitated by free/ low-cost parent and toddler/parent and baby groups. Parents meeting up and going out to play is also facilitated by the abundance of natural spaces and parks in Galway city such as the prom in Salthill, woods and beaches. These natural spaces facilitate different organisations and institutions to provide parks and playgrounds where parents can meet up and children can actively play. The need for parents to meet other parents also contributes to the provision of indoor soft play equipment and the provision of indoor facilities by private operators including soft play activity centres like Kids Space in Briarhill. Parent to parent

promotion drives private parenting websites/ app, e.g., Rollercoaster.ie that promote a range of issues including active play. These private parenting websites/apps reinforce parent-to-parent promotion. The public health nurse who talks to parents about tummy time, promotes active play and directs parents to public health websites such as MyChild.ie, Tusla 24/7 website, and offers booklets as part of the National Healthy Childhood programme also drives parent-to-parent promotion. The public health nurse and the public health websites promote events such as the national play day that takes place each year. For the 2020 national play day, a COVID-19 fitness/active play pack was developed.

To make the most of parents supports and resources, nine solutions were recommended centred around funding for equipment and low-cost access to support, utilising the educational websites and resources available and providing safe, accessible areas for parents (see Table 7).

**Table 7: Potential solutions identified by stakeholders to leverage the enabler 'parent supports and resources.'**

<b>Funding:</b>	<ul style="list-style-type: none"> <li>• Offer grants for indoor soft play equipment.</li> <li>• Free or low-cost access to support.</li> </ul>
<b>Education:</b>	<ul style="list-style-type: none"> <li>• Parent to parent promotion.</li> <li>• Public health websites.</li> </ul>
<b>Initiatives:</b>	<ul style="list-style-type: none"> <li>• More playgrounds in open spaces.</li> <li>• Maintain and upkeep the local parks areas that parents use.</li> <li>• Have a drop-in centre with indoor play equipment that is free to use in spaces such as Tusla locations or health centres, that parents can use when it is bad weather.</li> <li>• Having active play structures in play areas in the same way there are exercise equipment structures in park areas such as Ragoon.</li> <li>• Provide safe, accessible places for parents, with anti-social behaviour etc. parents have no safe space to go and meet other parents, get out with their child.</li> </ul>

**2. Registered childcare setting:** There is a bigger focus in the registered childcare setting on the need for appropriate play spaces for 0-3 year olds, with grants available. One significant grant in recent years has been for childcare services to develop their outdoor play areas. When the grants were used and the outdoor spaces developed, this increased the opportunities for childcare indoor and outdoor play training. Such training included the importance of outdoor play; the benefits; how to address barriers such as parents not wanting child to go outside; training on safe use of equipment and meeting regulations. As a result of the training, childcare peer support services

emerge among the different creches and childcare services themselves, all leading to a positive influence on the promotion of active play by childcare providers. The registered childcare setting and grants to develop outdoor spaces contributes to offsetting the inadequate play spaces.

To leverage the bright spot in the system relating to the registered childcare setting, stakeholders identified eight solutions (see Table 8). These focused on policy, funding in the form of grants, educating the childcare providers and developing initiatives such as setting up CPD hours for active play among childcare providers.

**Table 8: Potential solutions identified by stakeholders to leverage the enabler 'registered childcare setting.'**

<b>Policy:</b>	<ul style="list-style-type: none"> <li>• Support with policy implementation.</li> <li>• Inspections seek to see evidence of use of outdoor play facilities.</li> </ul>
<b>Funding:</b>	<ul style="list-style-type: none"> <li>• Grants for improving outdoor play areas.</li> </ul>
<b>Education:</b>	<ul style="list-style-type: none"> <li>• Staff training and education.</li> <li>• Promote the use of grants among non-users.</li> </ul>
<b>Initiatives:</b>	<ul style="list-style-type: none"> <li>• Require childcare centres to have wet weather gear for 0-3 year olds so that they can go outside in all weather conditions.</li> <li>• Set up CPD for active play among childcare providers.</li> <li>• Establish - through Early Years Ireland - subgroup on active play to share ideas, concerns and successes.</li> </ul>

**3. Targeted Interventions:** Early intervention teams, such as public health nurses, paediatric consultants, and neurologists, contribute to community supported child interventions such as teen mother groups. These targeted interventions, either from professionals (early intervention teams) or organisations (child supported interventions), are positive active play supporters and contribute to decrease childhood inequalities.

To strengthen the work of targeted interventions fifteen solutions were proposed focusing on promotion of these groups to parents and initiatives such as providing easier and quicker access to these teams (see Table 9).

**Table 9: Potential solutions identified by stakeholders to leverage the enabler 'targeted interventions.'**

<b>Education:</b>	<ul style="list-style-type: none"> <li>Promote these groups on social media and local radio stations - targeted campaigns.</li> <li>Educate parents on the benefits of engaging with the family support services. Many people see it as a negative, but this service is only there to support the parents.</li> </ul>
<b>Initiatives:</b>	<ul style="list-style-type: none"> <li>Reduce waiting times and improve response times.</li> <li>All Family Support workers be trained in supporting families to increase the activity of babies and decrease screen time.</li> <li>Ensure supports are located within the community and easily accessible.</li> <li>Child protection assessments ask about how many hours of screen time babies and children have per day.</li> <li>Are other groups necessary - working with migrant families perhaps and assessing their needs?</li> <li>Dedicated support staff and training leaders within the community.</li> <li>Ensure the developmental significance of active play is also communicated through non-targeted interventions.</li> <li>Work with the disability sector to promote such groups/set them up.</li> <li>Where targeted interventions take place, it was felt that it is important not to focus on one approach or model.</li> <li>There needs to be flexibility in relation to programme types as one size does not fit all. In certain situations, there needs to be consideration given in relation to the diversity of the population and the people relaying the messages.</li> <li>Offer more free or subsidised initiatives like baby massage.</li> <li>Develop initiatives like the Networking mothers' group or community groups. For example, in Westside, depending on what month the baby is born the parent is allocated to a group where the parents and children can meet up.</li> <li>Develop initiatives like the community mothers – in deprived areas and experienced mother within the community is put in touch with a younger mother. The older mother provides guidance and support to the young mother.</li> </ul>

# RECOMMENDATIONS FOR A SOCIAL MARKETING BEHAVIOURAL CHANGE STRATEGY FOR ACTIVE PLAY AMONG 0-3 YEAR OLDS IN GALWAY CITY

The systems map of the factors that influence active play for 0-3 year olds in Galway city suggests that mobilisation taken in relation to the dominant dynamics (red loops) is more likely to have a stronger impact on the overall system of barriers. Addressing these barriers could have a substantial impact on developing increased active play among 0-3 year olds in Galway City, and could enhance the possibility of successful actions impacting non-dominant barriers (shared and emergency accommodation; inspections and risk; lack of awareness and understanding). In other words, if the CYPSC focuses, first and foremost, on the 'parenting and parent lifestyles' and 'lack of co-ordination/implementation of national and local policy', a ripple effect could be felt through the system, making it somewhat easier to take actions tailored to non-dominant barriers such as 'shared and emergency accommodation'.

It is important to note, however, that this map should not be considered a priority map for action planning, since other issues can also assist in the determination of the what, where, when and how of active play mobilisation. For example, if there is an opportunity to address 'inspections and risk' as a result of the introduction of important legislation pertaining to this barrier, such as insurance policy or inspections, this map would not suggest waiting until 'lack of co-ordination/implementation of national and local policy' mobilisation is undertaken. The map

does suggest, however, that the prospects for successful legislation might be greater if 'lack of co-ordination/implementation of national and local policy' actions could be simultaneously implemented.

The same logic could be used to consider mobilisation of any of the other barrier theme areas. In general, when circumstances and facilitative factors allow, there is likely to be greater 'payoff' in the long run from actions taken to address the dominant dynamics (red loops) on the map. But it is sometimes necessary, because of resource considerations, to start at a different point along the influence structure, i.e., addressing one of the other, non-dominant, barriers. No matter where the CYPSC Early Year subcommittee is able to take initial action, the map can inform the active play strategy about the potential impact of mobilisation actions, as well as barriers that will impact their success.

As noted, stakeholders generated a total of 129 solution in response to barriers and enablers to active play among 0-3 year olds in Galway City. While these options are not to be interpreted as fully designed mobilisation action plans, taken in conjunction with Figure 2 above, these stakeholder options can be very informative and useful for the design of a mobilisation strategy. In addition to these solutions appendix 2 contains a toolkit to provide guidance on developing a strategy which directly target the deep structures

of the active play system. When designing and delivering an active play mobilisation strategy, utilising the toolkit, 5 guiding principles should be reflected on:

**1. Prioritise the dominant dynamics:** The overarching aim of the active play strategy should be to directly target the deep structure, the dominant dynamics, of the active play map; 'lack of co-ordination/integration of national and local policy' and 'parenting and parents' lifestyle'. Addressing these behavioural dynamics requires significant efforts, however, these represent a coherent set of leverage points, that if engaged, have the greatest potential to create positive change and shift the system towards higher active play rates among 0-3 year olds.

**2. Diversity matters:** A 'one size fits all approach' i.e., population perspective would not generate the desired impact to address the systems dominant dynamics. The strategy should include multiple interventions, targeting multiple-levels and multiple stakeholders as indicated by the proposed solutions. Consider:

- What are the different stakeholders' needs, lifestyle, and priorities? For instance, parents who are living in poverty or substandard conditions, their ability in relation to active play is negatively impacted by their living conditions. What do you need to consider when targeting them? Would an overall general health message integrating active play be most beneficial?
- What are the optimal channels to reach the multiple stakeholders? Not all channels will be accessible for all stakeholders or appropriate. For example, internet and social media access may be an issue for some minority groups. Is literacy an issue? If so, consider messages using visuals and clear text.

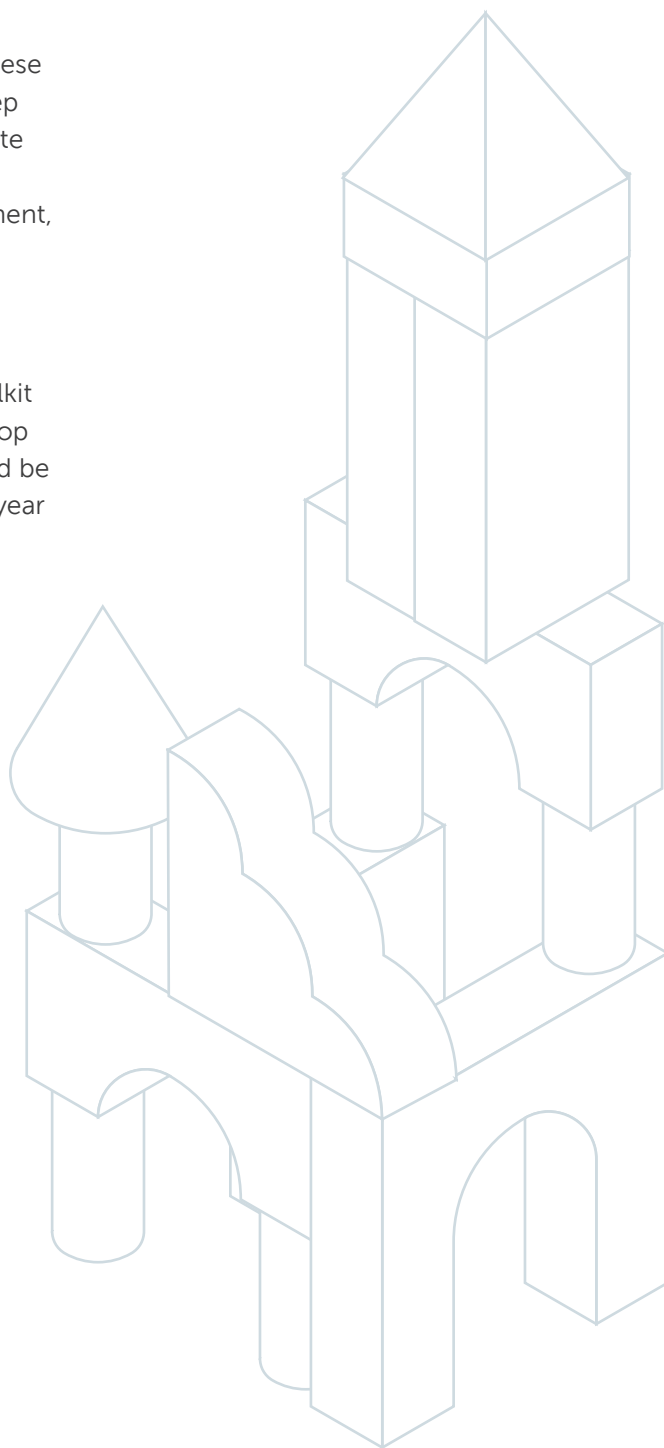
- How are the different communication channels interacted with? Is radio and newspapers used to keep up to date on current affairs? What is the profile of those who listen to the radio, read newspapers? Are leaflets and booklets useful? Who interacts with them and why?
- If online, what are the channels used for? For example, Facebook is generally used to connect people, share stories, photos and videos. Could a Facebook support group be beneficial to the strategy? In comparison, Twitter is used to share real-time information, trending news and ideas. Posts on this platform are restricted to 280 characters; what message can be communicated within these limitations?

**3. Select and connect:** The strategy should consider which groups can be targeted from the outset and what the priorities are. Groups which should be targeted include:

- Galway City Council; local and national media; childcare providers, community, private and registered childminders; parent and toddler/baby groups; early intervention teams; child intervention teams such as teen parent groups; Public Health Nurses; organisations working within shared and emergency accommodation, such as Galway Simon Community, Threshold; private operators of indoor active play facilities; organisations working with minority groups such as Galway Traveller Movement, Galway City Partnership, Croi na Gaillimhe; networks of parents, first time parents, parents with more than one child, parents of children with disabilities, parents within minority groups, including travellers, asylum seekers. These groups can be further broken down depending on the child's age e.g., 0-3 months, 3-6 months etc.

- 4. Work collaboratively:** Strategic and operational partnerships should be a fundamental element of the active play strategy. Many communities, organisations and agencies have similar goals around active play. Cultivate co-operative and collaborative partnerships to alter the status quo.
- 5. Enhance bright spots:** Targeted interventions, parent supports, and resources and registered childcare setting represent bright spots where positive change is already happening, and new behavioural patterns are emerging. These have the potential to directly affect the deep structure of the current system and generate positive domino and spill over effects. The strategy should consider how best to augment, amplify, and leverage these bright spots to create new dynamics.

An active play mobilisation strategy that aligns with the stakeholders' options, utilises the toolkit and reflects on the guiding principles to develop a strategy, is more likely to receive support and be effective in increasing active play among 0-3 year olds in Galway City.



# CONCLUSION

This project's overarching goal was to identify evidence-based active play/physical activity strategies covering multiple-levels and multiple stakeholders to increase opportunities for 0-3 year olds active play/physical activity in Galway city. It utilized a highly collaborative and participatory systems approach.

This project established the perceived problem in Galway city in relation to 0-3 year olds meeting the recommended physical activity guidelines, through the identification of a number of vicious loops, which form negative feedback loops. These vicious loops stem from a lack of co-ordination/ integration of national and local policy and parenting and parent's lifestyle. These dominant dynamics are deeply entrenched and undermine or block active play in 0-3-year-olds in Galway city.

Various stakeholders, with on the ground, knowledge, and experience of active play for 0-3 year olds, identified current services in relation to physical activity/active play for 0-3 year olds in Galway City. Collectively, these stakeholders developed solutions, and leverage points to address the systems dominant dynamics. These solutions should be the starting point in the development of the active play strategy and should be considered when utilizing the toolkits. In addressing these behaviours and structures greater opportunities exist to create positive change.

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# APPENDICES:

## APPENDIX 1: GROUP MODELLING GROUP.

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**Morgan Mee**, Co-ordinator, Galway Children and Young People's Services Committee, Tusla Child and Family Agency.

**Helena Vyras**, Parent.

**Joan McDonnell**, Senior Physiotherapist, HSE.

**Dr Christine Domeagn**, Whitaker Institute, National University of Ireland, Galway.

**Tina Flaherty**, Whitaker Institute, National University of Ireland, Galway.

## APPENDIX 2: A SOCIAL MARKETING TOOLKIT FOR ACTIVE PLAY AMONG 0–3 YEAR OLDS IN GALWAY CITY.

The purpose of this toolkit is to provide guidance on developing a strategy which directly target the deep structures of the active play system; lack of co-ordination/integration of national and local policy and parenting and parents' lifestyle.

### *Tool 1: Who to target?*

Use this tool to consider what groups can be targeted immediately, within 3 months, within 6 months.

Priority	Target Group
Target now?	Target Group A:
	Target Group B:
	Target Group C:
	Target Group D:
Target in 3 months	Target Group A:
	Target Group B:
	Target Group C:
	Target Group D:
Target in 6 months	Target Group A:
	Target Group B:
	Target Group C:
	Target Group D:

**Tool 2: What do you know about the target groups?**

Use this tool to focus your thinking on your target groups.

Target Group X	
What is their behaviour relating to active play?	
What are their needs, lifestyle, motivations, priorities?	
How is active play of benefit to them?	
What are the costs associated? (consider time, monetary costs etc.)	
How ready are they to change their behaviour?	
Are they: <ul style="list-style-type: none"> <li>• Viable</li> <li>• Accessible</li> <li>• Responsive</li> </ul>	

**Tool 3: What Behavioural objectives do you want each target group to achieve?**

Use this tool to set behavioural objectives for each of the identified target groups.

Target Group X	
<p>Is the objective to:</p> <ul style="list-style-type: none"> <li>• Modify</li> <li>• Adopt</li> <li>• Avoid</li> </ul>	
<p>What is the primary objective for this target group?</p>	
<p>What are the secondary objectives for this target group?</p>	
<p>Are the objectives:</p> <ul style="list-style-type: none"> <li>• Specific</li> <li>• Measurable</li> <li>• Achievable</li> <li>• Relevant</li> <li>• Time-based</li> </ul>	

#### **Tool 4: How will you reach the target group?**

Use this tool to consider how to reach the target groups.

Target Group X	
Where is the target group located?	
Are there services/groups the target group can engage with?	
Where are the services/ groups the target group can engage with?	

#### **Tool 5: Who can help?**

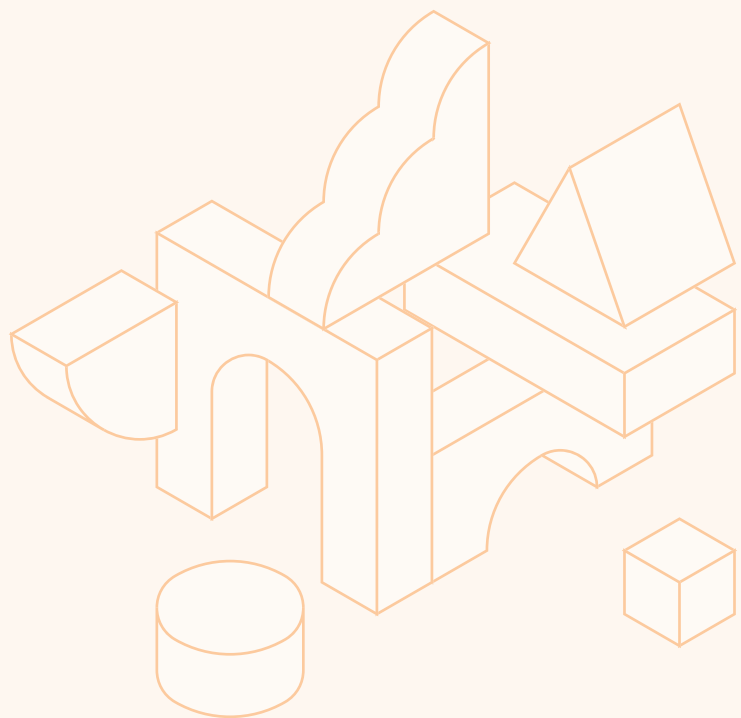
Use this tool to list potential stakeholders to partner with.

Partner	
	1.
	2.
	3.
	4.
	6.
	7.
	8.
	9.
	10.

**Tool 6: How will the partnerships be of benefit?**

Use this tool to consider how the potential partners would be of benefit to you.

Partner	Relationship Strategic or Operational	Benefit you will receive from the partnership	Benefit the potential partner will receive



### Tool 7: What tools of engagement do we have?

Use this tool to consider how you will engage with the target audience and what impact you want to achieve.

Target group	Tools of Engagement	Impact
<b>Policy and decision makers</b> e.g., Galway City Council, local politicians, housing and planning authorities.	e.g., face to face contacts, Galway City Development Plan....	e.g., raise awareness, get support
<b>Childcare providers</b> <ul style="list-style-type: none"> <li>- Community</li> <li>- Private</li> <li>- Registered childminders</li> </ul>	e.g., workshops and training, conferences	e.g., raise awareness, get support, skills development, empowerment,
<b>Parents</b> e.g., First time parents (child aged 0-3 months), First time parents (child aged 3-6 months).		
<b>Community groups</b> e.g., teen mother groups, other and baby/toddler groups.		
<b>Private operators of active play facilities.</b>		
<b>Etc.....</b>		

**Tool 8: What do we want to communicate and where?**

Use this tool to develop your communication strategy.

Channel	Target group				
	First time parents	Parents with more than one child	Parents of children with disabilities	Parents within minority groups	Etc .....
Facebook	Message 1: e.g. "Did you know babies need daily opportunities to move freely on their tummies. For more information on tummy time see xxx". Message 2: Message 3:	Message 1: Message 2: Message 3:	Message 1: Message 2: Message 3:	Message 1: Message 2: Message 3:	Message 1: Message 2: Message 3:
Twitter	Message 1: Message 2: Message 3:				
Instagram					
LinkedIn					
Website					
Video					
Online advertising					
Radio					
Newspaper					
Leaflets					
Training					
Etc. ....					

**Tool 9: What individual and collective impact did your strategy achieve?**

Use this tool to evaluate your strategy and consider its impact at an individual and collective level.

Dimension	What?
Individual or isolated impact	
Collective impact	





**Tool 10: What individual and collective impact did your strategy achieve?**

Consider the 'vicious loops' in the system and use this tool to monitor changes (i.e., change in the +/- dynamic loops). Adapt over time, use trial and error to see what works and doesn't. Learn from each initiative and activity.

Active Play Strategy Assessment	
What impact, if at all, did your strategy make?	
What worked well/was most effective?	
Who was your strategy most effective on? Why?	
What impact or ripple effect did your strategy have on other elements of the system?	



## APPENDIX 3: THE BEST TIMES TO POST ON SOCIAL MEDIA.

Social Media Platform	Category	Optimal time	Best day	Worst day
	General	Wednesday, 11 a.m. and 1–2 p.m. <i>Most consistent engagement:</i> Tuesday through Thursday, 8 a.m.–3 p.m.	Wednesday	Sunday
	Media	Tuesday, Wednesday and Thursday at 5 p.m., Friday from 8–9 a.m.	Wednesday	Sunday
	Education	Wednesday at 9 a.m. and Saturday at 5 p.m.	Wednesday	Sunday
	Non profits	Wednesday and Friday at 8–9 a.m.	Wednesday	Saturday and Sunday
	Healthcare	Wednesday from 10 a.m.–noon	Wednesday	Saturday and Sunday
	Recreation	Tuesday at 2 p.m., Wednesday at 1 p.m. and Friday at 11 a.m.	Wednesday	Sunday
	General	Wednesday at 11 a.m. and Friday from 10 a.m.–11 a.m. <i>Most consistent engagement:</i> Monday through Friday, 9 a.m.–4 p.m.	Wednesday	Sunday
	Media	Friday at 9 a.m.	Friday	Saturday and Sunday
	Education	Friday at 10 a.m.	Friday	Sunday
	Non profits	Tuesday from 1–3 p.m. and Wednesday at 2 p.m.	Wednesday	Sunday
	Healthcare	Tuesday at 8 a.m.	Tuesday	Saturday and Sunday
	Recreation	Wednesday and Thursday at 1 p.m.	Wednesday	Sunday
	General	Wednesday and Friday at 9 a.m. <i>Most consistent engagement:</i> Monday through Friday, 8 a.m.–4 p.m.	Wednesday and Friday	Saturday
	Media	Wednesday at 9 a.m. and Thursday at 9 a.m. and 8 p.m.	Thursday and Friday	Saturday
	Education	Saturday, 5–6 p.m.	Saturday	Sunday
	Non profits	Wednesday at 7 a.m.	Wednesday	Sunday
	Healthcare	Wednesday from 8 a.m.–2 p.m.	Wednesday	Sunday
	Recreation	Friday at 9 a.m.	Friday	Saturday and Sunday
	General	Wednesday from 8–10 a.m. and noon, Thursday at 9 a.m. and 1–2 p.m., and Friday at 9 a.m. <i>Most consistent engagement:</i> Tuesday through Friday, 8 a.m.–2 p.m.	Wednesday and Thursday	Sunday

Source: Arens (2020)

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This research was carried out with the Applied Systems Thinking cluster within the Whitaker Institute at NUI Galway. Combining research and knowledge from business, management, marketing, economics, public policy and the social sciences, the Applied Systems Thinking cluster research pressing societal problems, like obesity, antibiotic resistance, public transport, active play and sustainable marine resources. The cluster looks for community and collective initiatives that bring positive social change. It combines policy insight, stakeholder engagement and private sector expertise to develop innovative policy solutions, improved governance systems, and the capacity of the public to influence those who make decisions affecting their lives and well-being. If you would like more information on the Applied Systems Thinking cluster and their work visit

<http://whitakerinstitute.ie/research-cluster/applied-systems-thinking/>



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