

## TEACHER'S EXPERIENCES OF TEACHING GROSS MOTOR SKILL FOR CHILDREN WITH OBESITY: A PHENOMENOLOGICAL STUDY

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### Abstract

*Improving gross motor skill in early childhood education is very important. However, few qualitative studies have investigated teachers' experience of teaching gross motor skill with obese children. The purpose of this present study is to explore the early childhood educators' experiences of teaching gross motor skill children with obesity from six kindergartens in the Yogyakarta district. Nine teachers participated in this study. Data were gathered through semi-structured interviews. Data also were qualitatively analyzed using the phenomenological study with the Moustakas model. Four thematic categories emerged: positive perception; flexibility; diverse role, and barriers. Teachers described the feeling when teaching gross motor for obese children, the flexibility of gross motor teaching. Teachers also expressed how the role was used for obese children and having barriers faced by teachers. Implications of these findings are discussed and recommendations are made for future research.*

**Keywords:** *Teacher Experience, Gross Motor Skill, Obese Children*

### INTRODUCTION

The development of children's motor skills is important. Some studies, such as Harriet G William have documented that there is a relationship between the performance of motor skills and physical activities which will have an impact on children's health particularly beneficial to prevent obesity.<sup>1</sup> Draper et al found that children's gross motor development program will have an impact on the cognitive function of children<sup>2</sup>. The other study found a significant relationship to children's language and social interactions<sup>3</sup>, even though the child has vision problems.<sup>4</sup> Therefore, it is important to strengthen children's motor skills during early childhood years.

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<sup>1</sup>Harriet G.W, et al, *Motor Skill Performance and Physical Activity in Preschool Children*, Journal Obesity, 6(6) 2008, p. 1421.

<sup>2</sup>Catherine E.D et al, *Impact of a Community-Based Programme for Motor Development on Gross Motor Skill and Cognitive Function in Preschool from Disadvantaged Setting*, Journal Early Child Development and Care, 18291), 2011, p. 137.

<sup>3</sup>Hayley C. Leonard and Elisabeth L. Hill, *Review: The Impact of Motor Development an Typical and Atypical Social Cognition and Language: A Systematic Review*, Journal Child and Adolescent Mental Health, 19(3), 2014, p. 163.

<sup>4</sup>Pamela S. Haibach et al, *Determinant of Gross Motor Skill Performance in Children with Visual Impairment*, Journal Research in Developmental Disabilities, 35(10), 2014, p. 2577.

Obesity leads to a decline in motor skills across early childhood.<sup>5</sup> The study showed that obesity will reduce children's gross motor skills.<sup>6</sup> To resolve the problem at the level of early childhood education, several programs are held to reduce childhood obesity that can be done by teachers such as diet education<sup>7</sup>, nutrition education<sup>8</sup>, and promotion of the physical activity.<sup>9</sup> This is reinforced by Buss's study, that the teacher is very valuable and has an important influence to identify health-related in child development interventions.<sup>10</sup> However, the other study showed that teachers do not significantly influence children's nutrition and physical activity.<sup>11</sup> Teachers may find it difficult, bored, and teachers have many challenges to deal with early childhood suffering from obesity.

A variety of studies about gross motor skills with obese children have been conducted. However, research concern the teacher is limited. Some qualitative studies about early childhood teacher competence,<sup>12</sup> teacher perception about physical activity,<sup>13</sup> gross motor teaching practice<sup>14</sup> factors that limit and enable preschool-aged children's physical activity,<sup>15</sup> promotion of the physical activity.<sup>16</sup> One study explored the attitude values, knowledge and understanding of parents and carers of preschoolin relation to physical activity.<sup>17</sup> Lacking depth further research in this area. Teachers in early childhood education have an ideal role to provide physical motor activities to obese children. Understanding teacher perspectives is very important for the achievement of practical motor physical activity

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<sup>5</sup>Milena Morano et al, *Gross Motor Skill Performance in a Sample of Overweight and Non Over Weight Preschool Children*, International Journal Pediatric Obesity, 6(2), 2011, p. 42.

<sup>6</sup>Jessica Cheng et al, *Obesity Leads to Decline in Motor Skill across Childhood*, Journal Child: Care, Health and Development, 42(3), 2016, p. 342.

<sup>7</sup>Else M.O, *What are Student Preschool Teacher Learning About Diet in their Education In Norway?*, International Journal of Consumer Studies, 41(1), 2017, p. 28.

<sup>8</sup>Sarah L.B.S, et al, *Nutrition Education Resources in North Carolina-Based Head Start Preschool Program, Administrator and Teacher Perception of Availability and Use*, Journal of Nutrition Education and Behavior, 48(9), 2016, p. 655.

<sup>9</sup> Francisco Mardones et al, *Physical Activity in the Classroom to Prevent Childhood Obesity: a Pilot Study in Santiago, Chile*, Journal of Nutritional Science, 6(21), 2017, p. 1.

<sup>10</sup>Mozhdeh B. Bruss et al, *Teachers as Partners in The Preventions of Childhood Obesity*, International Journal of Education Policy and Leadership, 5(2), 2010, p. 1.

<sup>11</sup>Natale, Ruby A, *Role Modeling as an Early Childhood Obesity Prevention Strategy: Effect of Parent and Teachers on Preschool Children's Healthy Lifestyle Habits*, Journal of Developmental and Behavior Pediatrics, 35(6), 2014, p. 378.

<sup>12</sup> Widodo, *Kompetensi Guru Dalam Pengembangan Ketrampilan Motorik Kasar Anak Usia Dini Berdasarkan Kualifikasi Akademik*, Jurnal Ilmiah Visi PGTK PAUD dan DIKMAS, 12(1), 2017, p. 29-44.

<sup>13</sup> Waode Eti Haryanti and Muhammad Ilham, *A Qualitative Study Teacher's Perceptions of Children's Physical Activity and Learning in Preschool*, Al Izzah: Jurnal Hasil-hasil Penelitian, 14(2), 2019, p. 141-151.

<sup>14</sup> Alfredo Bautista et al, *Gross Motor Teaching in Preschool Education: Where, What, and How Do Singapore Educators Teach*, Infacia Y Aprendizaje, 2019, p. 3-17

<sup>15</sup> Bianca Coleman and Janet E Dymont, *Factors That Limit and Enable Preschool-Aged Children's Physical Activity On Child Care Centre Playgrounds*, Journal of Early Childhood Research, 11(3), 2013, p. 203-221.

<sup>16</sup> Sarah Wilke et al, *Factors Influencing Childcare Workers' Promotion of Physical Activity in Children Aged 0-4 Years: A Qualitative Study*, Early Years, 33 (3), 2013, p. 226-238.

<sup>17</sup> Genevieve M Dwyer et al, *What Do Parents and Preschool Staff Tell us about Young Children's Physical Activity: A Qualitative Study*, International Journal of Behavioral Nutrition and Physical Activity, 5(66), 2008, p. 1-11

programs in the early years setting. To date, there are no qualitative inquiry has focused on the experience of the teacher practice in improving gross motor skills with obese children without other staff perspectives. This investigation portrays teachers' gross motor teaching experiences that focused on obese children at the preschool level. In addition, this research discovers the concerns of teachers about perception, technique, and the problems they encounter during teaching. Consequently, this study discusses information to modify and increase the effectiveness of physical education for obese children at preschool.

## Literature Review

### Teacher's Experience

Experience is a term that is often used in education and is known to be related to learning (education). Experience is also a category that directs to view and analyze classes in a different way from current practice.<sup>18</sup> To understand deeply about the experience, four theories are that are used to guide in exploring one's experience: the experience manifests itself or has a passion (passion) interests, the experience of integrating over space and time, the experience that moving power and experience is a transformation.<sup>19</sup>

In general, teacher experience is an experience that brings to an individual perspective or is subjective from each teacher.<sup>20</sup> A qualitative study of the experiences of Early Childhood teachers will provide the benefits. In addition, these results will have a broad impact on scientific development. Moreover, the theme of this study has great strength and attention. Thus, the benefits to be provided are very valuable for early childhood wellbeing.

### Gross Motor Skill

Gross motor is defined as part of manipulative movements. While the gross motor manipulative movement itself is a movement that gives to certain objects and receives from certain objects. The same meaning as gross motor skills such as locomotor movement, stabilizing movement - explained by Gallahue and Ozmun in a separate chapter.<sup>21</sup> The definition of the gross motor is meant as the movement of the whole body or the main body of the body. This understanding leads to differences in the understanding of the fine motor because the meaning of fine motor is more focused on the coordination of the hands and eyes as well as controlling the arms, hands, and touch.<sup>22</sup> Hurlock also suggested that gross motor is a movement that involves broad body parts in walking, jumping, running, swimming, and so on.<sup>23</sup> However, Berk distinguishes gross motor understanding in infancy. At this time, the

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<sup>18</sup> W. M. Roth and A. Jornet, *Toward Theory of Experience*, Journal Science Education, 98, 2014, p. 106.

<sup>19</sup> W. M. Roth and A. Jornet, *Toward Theory...* p. 106.

<sup>20</sup> May Britt Dugli, et al, *Teacher's Experience and Management Young Children Treated Because of Home Conduct Problem: A Qualitative Study*, Scandinavian Journal of Educational Research, 52(3), 2008, p. 279.

<sup>21</sup> David L. Gallahue and John C. Ozmun, *Understanding Motor Development*, New York: McGraw-Hill, 1998, p. 80.

<sup>22</sup> Thomas J. Berndt, *Child Development*, Dubuque: Brown & Brenchmark Publishers, 1949, p. 181.

<sup>23</sup> Elizabeth B. Hurlock, *Perkembangan Anak*, Jakarta: Erlangga, 1988, p. 150.

gross motor is defined as control of actions that help the baby reach the surrounding environment.<sup>24</sup>

Typically, there are three categories of gross motor: locomotor, non-locomotor or manipulative movements. Furthermore, Papalia stated that the gross motor development of children experienced remarkable progress when the child entered pre-school age.<sup>25</sup> This progress is due to the cerebral cortex will enable the achievement of good coordination between children's desires and what they can do. In addition, this ability is supported by their strong muscles and bones and greater lung capacity.<sup>26</sup>

Gross motor development includes the use of limb functions for activities, such as jumping, running, and climbing. These activities can be carried out by all children except those who have developmental difficulties or developmental delays.<sup>27</sup> Among the factors that influence a child's gross motor development are body size, physical growth, relative strength in body weight and maturity of the nervous system.<sup>28</sup> The condition of obesity experienced by children allows related to the child's motor abilities.<sup>29</sup>

In general, the development of motor coordination mostly occurs at the age of 2 and 3 years, 4 and 5 years old children begin to have good control, but the motor movement is not stable. Therefore, Wood concludes that the nature of most 4-year-old children looks a bit careless, often spilling something and colliding which is not common,<sup>30</sup> because the child's motor movements are stable after turning 6 or 7 years. This development can be proven when children aged 3 and 4 years, children begin to work in improving motor skills. Children also learn about how to balance, run and climb.<sup>31</sup> At the age of 6 years, children have integrated their movements because they have entered the stage where they think cognitively about two or more coordinated movements such as running, throwing and kicking a ball, dancing, spinning sticks and ropes and jumping further.<sup>32</sup>

Based on some of the arguments above, early childhood has the opportunity to develop ideally if development time is put to good use, although gross motor development is influenced by internal and external factors. This influence does not mean deterring the child's motor development, but these factors can be reduced and can maximize the child's

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<sup>24</sup> Laura E. Berk, *Child Development*, London: Pearson Higher Education, 2015, p. 147.

<sup>25</sup> Dianne E Papalia et al, *Human Development; Perkembangan Manusia*, Jakarta: Salemba Humanika, 2009, p. 326-327.

<sup>26</sup> Dianne E Papalia et al, *Human Development; ...* p. 326-327.

<sup>27</sup> Carol and Bredekamp, *Developmentally Appropriate Practice in Early Childhood Programs Serving Children From Birth through Age 8*, Washington D.C: National Association for the Education of Young Children, 2009, p. 116.

<sup>28</sup> Rosalind Charlesworth, *Understanding Child Development*, Boston: Wadsworth, 2014, p. 265.

<sup>29</sup> Nafiseh Khalaj and Saidon Amri, *Master Gross Motor Skill among Preschool Obese Children*, Journal Science, Movement and Health, 13(2), 2013, p. 656.

<sup>30</sup> Carol dan Bredekamp, *Developmentally Appropriate Practice ...*, p. 114.

<sup>31</sup> Carol dan Bredekamp, *Developmentally Appropriate Practice ...*, p. 116.

<sup>32</sup> Rosalind Charlesworth, *Understanding Child Development ...*, p. 265.

environment and potential to be able to improve his gross motor skills. Research on children's gross motor skills is an important factor in influencing programs to be provided in schools, especially to find effective practical efforts to improve gross motor skills in obese children because this explains how the teacher seeks to improve children's gross motor skills and perceive them.

### **Childhood Obesity**

Obesity is a condition of body weight with excessive or abnormal categories of obesity according to health.<sup>33</sup> Some opinions reveal that the definition of obesity is quite difficult for several reasons. However, the operational definition is based on mortality and morbidity, for example, the operational definition expressed by the body mass index (BMI) which measures weight and height. For normal criteria according to BMI, which is between 18.5 kg / m to 24.9 kg / m. The criteria for obesity are more than 30 kg / m, and overweight criteria are between 25.0 kg / m and 29.9 kg / m, and underweight categories are below 18.5 kg / m.<sup>34</sup>

Early childhood who is obese has a different measurement because it is still experiencing growth, development and gender differences in growth patterns. BMI uses epidemiological study methods to measure obesity for children aged 2 years and over. But to measure the category of early childhood obesity (childhood obesity), BMI considers age and distinguishes it from gender.<sup>35</sup> So to define early childhood obesity it is necessary to connect between age and gender.

Early childhood education (ECE) is an environment that affects the condition of childhood obesity. The intervention program for obese children at an Early Childhood Education level is very effective.<sup>36</sup> Specifically, ECE aims to help children choose healthier lives by providing information about health. Therefore schools should be able to increase physical activity every day for at least 30 minutes, improve the nutritional quality of food provided at ECE and provide high-quality health education such as nutrition and exercise for physical abilities.<sup>37</sup>

Many studies reveal about the prevention of childhood obesity. In addition, studies of childhood obesity are also developing, relating to conditions and other aspects, such as children's rights, physical activity, diet, education, economy, and other social aspects. For studies related to education, the study of childhood obesity discusses the role of school,

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<sup>33</sup> World Health Organisation, *Obesity and Overweight*, <http://www.who.int/mediacentre/factsheets/fs311/en/>

<sup>34</sup> V. Gregory Payne and Larry D. Isaacs, *Human Motor Development: A Life Span Approach*, New York: Routledge, 2012, p. 236-237.

<sup>35</sup> Reily JJ, "Descriptive Epidemiology and Health Consequences of Childhood Obesity", *Journal Best Pract Res Clin Endocrinol Metab*, Vol. 19, No. 3, 2005, p. 41.

<sup>36</sup> WHO, *Population-Base Approach to Childhood Obesity Prevention, Switzerland: WHO Document Production Service*, 2012, p. 42.

<sup>37</sup> Leslie Lytle, *Perspectives on Childhood Obesity Prevention: Recommendations from Public Health Research and Practice*, Maryland: John's Hopkins Center, 2007, p. 9.

physical activity, and motor skills. Unfortunately, studies related to the motor skills of obese children have not explained the condition of the teacher that has an important role in the school. Therefore this study will reveal the condition of teachers in the study of gross motor abilities of obese children. The results of this study can be used as a study and led to recommendations for the role of schools in dealing with early childhood obesity regarding the problem of handling obesity children generally, and specifically the gross motor abilities of children.

## METHOD

The research aimed to explore the phenomenological experience of kindergarten teachers of teaching gross motor skills to obese children. A qualitative with the phenomenological approach was used in this study. The type of phenomenology which is applied is transcendental which is developed by Moustakas.<sup>38</sup>

The participants consisted of 9 teachers in this study. They were female teachers. The teachers were selected from 6 kindergartens in the Yogyakarta district. Data of 6 kindergartens selected from my colleague who has done research related to the theme of childhood obesity. The major eligibility criterion for the participant was being kindergarten teachers who have experienced teaching with obese children. Finally, they were required to have at least one year of experience. In addition, the researcher provided participants with a full explanation of the study then all participants were asked to sign informed consent.

Table 1. Background data of participant

Teacher	Gender	Experiences (years)	Kindergartens
P1 Maryuniatun	F	10	TK Darussalam Plus
P2 Atik	F	17	TK Masjid Syuhada
P3 Sulistianingsih	F	20	TK Negeri 2 Yogyakarta
P4 Sri Wahyuni	F	32	TK Negeri 2 Yogyakarta
P5 Umi Khafisah	F	21	TK-KB-TAA Islam Tunas Melati
P6 Ulfiyah	F	32	TK-KB-TAA Islam Tunas Melati
P7 Kanti	F	20	TK Aisyiah
P8 Theresia Sarjilah	F	31	TK Sang Timur
P9 Esti Wilujeng	F	20	TK Sang Timur

Key: F=Female; TK= Taman Kanak-kanak or *Kindergarten*

A semi-structured interview was used. Interview questions were mainly related to the teacher's experience in improving children's obese gross motor skills. The process of the interviews, probes and follow-up questions were added in this study. Specific questions also

<sup>38</sup> Moustakas C, *Phenomenological Research Methods*: Norwich. Jarrold and Sons, Ltd, 1994, p. 81-102.

were added in response to developing topic. Teachers were interviewed individually with separate times and interviewed took approximately one hour and a half. All interviews were digitally recorded to capture the meaning of the experiences and to provide an accurate detailed account of the interview process.

Data were analyzed by the Moustakas model. The steps outline the Moustakas model were followed: (a) Epoche, (b) phenomenological reduction, (c) imaginative variation, (d) synthesis.<sup>39</sup> Upon obtaining an interview transcriptions and using verbatim expressions, the researcher “horizontalized” the data around teacher’s experiences of gross motor skill with obese children. The process initially involved a recording of every expression as having equal value to understanding the experience. Next, i reduced the data by eliminating all expressions that appeared irrelevant or repetitive. I reflected on such universal structural themes, to determine how the teacher’s experience came to be and created a structural description of the experience. The validation technique in this study was such as triangulation and member-checking. Therefore, textural descriptions were shared with participants to check for accuracy and validate the interpreted data. Then, in order to ensure the reliability of the study, the collection and analysis of data followed the procedure as described in the previous data collection and analysis section.

## FINDING

This section presents how kindergarten teachers responded to the interview questions. In responding to the interview, the teachers revealed their experiences in teaching gross motor for children with obesity. Four themes emerged from an analysis of the interview, including (1) positive perception, (2) flexibility, (3) diverse role, and (4) barrier. Each theme is discussed together with the verbatim quote.

Table 2. Result: Themes, Key Concepts and Supporting Quotes

Theme	Key Concept and Supporting Quote
Positive perception	Key Concept
	The teacher felt no difference between obese or not obese children.
	The teacher confident to help children improve gross motor skills
	Teachers understand that children's gross motor skills are different from those of their peer
	Teachers feel pity
	Supporting Quote
“cannot choose a fat or thin children” (P9)	
“because he needs to be trained” (P5)	

<sup>39</sup>Moustakas C, *Phenomenological*,... p. 81-102.

	“we respect the child for his efforts to do” (P5)
	“seeing obese children feel pity” (P7)
Flexibility	Key Consept
	Teachers reduce the targets in gross motor activities of obese children
	Teachers does not dare to force the child
	Flexibility methods
	Supporting Quote
	“just a little, then not finished” (P1)
	“but I don’t force him” (P3)
	“I teach by little” (P8)
Diverse Role	Key Consept
	Assistant
	Motivator
	Educator
	Coach
	Supporting Quote
	“always be at the bottom, so it’s not from far” (P9)
	“teacher must be able to motivate children” (P3)
	“I told him to go down like that” (P1)
	“I later reduce those related to gross motor” (P7)
Barrier	Key Consept
	Child interest
	Resource and curriculum
	Parental involvement
	Lack of knowledge
	Supporting Quote
	“there is a fetter that makes him to be passive” (P2)
	“No, specifically for obesity it is not yet” (P6)
	“mom, don't over restrain the wishes of children” (P8)
	“I want something that might be able to create an activity that motivates children to enjoy moving” (P5)

### Positive perception

All teachers have a positive perception of obese children with gross motor skills. The teacher felt no difference between obese or not obese children. The teacher believes that having love will make the teacher confident to help children improving gross motor skills.



The teacher expressed that they have absolutely no difficulty in increasing the gross motor skill of obese children through activity in school. The teacher stated

*Just happy, just enjoy, the important thing is I can see my ability ... Because it is love, we are taught about love, we cannot choose a fat or thin children. There is motherhood, love exists. Just do it, I'm happy. (P9) If i.... do not feel difficulties, still ordinary. Because the child still wants... unless the child does not wants to. (P3)*

The teacher believes that obese children have good gross motor skills as long as the child is trained through activities that support his gross motor skills. The teacher also believes that the child will experience fundamental changes in gross motor skills especially the curve of the body. The teacher's positive perception is reinforced by the teacher's feelings. The teacher feels happy to teach the gross motor skill of obese children. In addition, the teacher feels pity when seeing the children doing gross motor activities at school, so teachers intend and try to help children when children have difficulties. The teacher stated

*So it's not too late, .... because he needs to be trained. Yesterday, actually if he was encouraged it could still be" (P5) ...funny, adorable, want to laugh, eager goaded to be able to. My feeling is actually when jumping up and down, oh it is really heavy, pity". (P2)*

When children do physical activities, the teacher respects the process and the results of their activities. All teachers understand that children's gross motor skills are different from those of their peers. teachers do not make obesity a reason for not doing physical activity. The teacher states

*... it means not because of obesity, he is somewhat lacking with other friends, it means the same is like that, it can be the same standard of friends. don't miss it once, ... he's also normal. It's just that his obesity is just that. ... the least he does, the least is like that. not because of obesity lazy. so he doesn't want to do it. don't be like that, stay motivated, how do you want to learn like the others, .... even if the results are not good, but we respect the child for his efforts to do something, even if the results are not good, it is already an award, so he wants to want to try, so what we value is the process. (P5)*

High concern is also shared by the teacher when teaching gross motor skills. Teachers feel pity for the gross motor skills of obese children during physical activities. This attitude encourages teachers to help children improve gross motor skills. In addition, teachers also have the patience to teach gross motor skills.

*... seeing obese children feel pity for them if they are too big, I see for myself that obese children if the road is too long, to move for too long, meaning to carry out any*

*activities, they will be short of breath, and cannot stand it. he is too tired or exhausted him. he would throw up, well, like torture. (P7) my feeling, actually when jumping, oh how like it was so heavy, pity, wow it turned out to be different, it means he was stuck as high as than other friends, his movements not as tall as his friends, so I felt, oh dear, how to pity. (P4)*

### **Flexibility**

The teacher's experience of the gross motor skill of obese children is flexible teaching. Teachers' flexible response to obese children due to empathy teachers see the gross motor skill of obese children is low. Children are often unable to continue their activities by asking the teacher. These conditions make teachers reduce the targets in gross motor activities of obese children. The teacher expressed that they feel it is enough if the obese children are willing to do so even though his gross motor activities are not completed and his skill is not perfect. The teacher also does not to force the children to be able to the ability of their friends:

*He joined, but then, just a little, then not finished....., maybe he wants to be like the others because he is tired. Once or twice I told them to come back again. After a long time, it's okay. (P1)*

The teacher believes that flexibility in teaching is a good way. The teacher does not dare to force the child to do the same gross motor activities as his friends, because the teacher feels that forcing obese children to have gross motor skills like his friends will affect his mental health. Other teachers said that a teacher must be able to understand the obesity condition of children who have an impact on gross motor skills. That is a drawback for children. The teacher also believes that the children have skills in other fields. The teacher talked

*When he can do it, why don't I try, but I don't force him, afraid of phobias, I feel bad too, he did not dare, because he was afraid to fall, he did not want to walk in boardwalk.. ....If a child is fat, like that, we must be able to understand. When we measure in jumping he might not be agile, that might be a drawback, its ok, but there are other skills. He can or may not be able to, the only possible drawback in a gross motor like that. (P3)*

The flexibility of gross motor teaching is also applied in practical teachers to improve gross motor skills. The teacher has many flexibility methods that have been done for obese children. For example physical play, activities outside the classroom, specific gross motor activities, the addition of other activities, and gross motor race activities. The teacher states when playing physically.

*I say one for example children playing physical activities. I made him confident .... for example when it comes to playing, playing outside is included in gross motor skills ...*

*like for example gliding, it's a child whose body is big that he has difficulty when sliding, just to ride "bug bug bug" like that. he felt "well what if I fall" so I made the child confident so he wouldn't fall .... I teach by little like for example upon the stairs, from the stairs one to the top two stairs ... it also needs a struggle. (P8)*

The next method used by the teacher to teach gross motor children is obesity by doing activities outside the classroom and specific gross motor activities. For activities outside the classroom is an activity initiated by the teacher in giving special attention to obese children. Children are invited according to the teacher's instructions in outside activities. While specific gross motor activities, teachers only carry out certain activities in gross motor skills such as hanging, climbing, kicking, walking, running, and so on. The teacher expressed

*Playing outside, there are tires, sometimes I tell him, can try jumping or not, ....., but the complicated ones are difficult, he is not so happy, maybe objecting to climbing to move his body up, he does not so possible with the more western body, so objections. (P4) ..... running or blushing or swinging, turning plates, because that's the only toy here. maybe for those who are going up and down, climbing, like that ... walking out on boards, sandboxing, going up and downstairs, which he can afford (P9)... for example if he climbs like that, he doesn't dare to reach the top. Fear of falling and not strong because of his large body. For example, kicking a ball, he just kicks but doesn't want to run. Ever happened. Not perfect either. Because it's like this, just kick it, but he doesn't want to run. (P5) ... if climbing, hang up and swinging he cannot, not that he cannot, because his body is fat, if he is hanging he is not strong. but if he goes up the stairs then slides, he can. which does not require high precision and agility, such as climbing, he cannot, let alone being told to swing, his body is heavy, .... that's all if to run, his child is ok, if he reflects the ball, kicks the ball if he plays the ball for kicked yes indeed he was deft agile, because running like that. (P3)*

The last method used is the teacher provides additional activities to obese children and conducts gross motor contest. This additional activity in the form of physical activity initiated by the teacher to the child to carry out activities outside of gross motor learning in the classroom. Whereas gross motor racing activities are types of activities carried out to increase children's motivation in gross motor activities because according to teachers obese children have low motivation for physical motor activities. Gymnastics activities that become routines have not had a big effect on children. The teacher talked

*I told him to ask for help to go downstairs, so he was not lazy to walk, so he was forced to walk, then, so he finally went down, ....., Later it will take a little longer because of fatigue. (P5) ... the contest of moving the blocks, or moving the flag, or even catches the ball, so he throws and catches, because sports ... like gymnastics are routinely held, but this one, so that means the withdrawal of the muscles so he can be*

*light ... Moving the flag, moving the blocks, then throwing catching the ball, throwing and catching the ball, crawling in the tire, then walking on the footbridge. (P4)*

To improve gross motor skills, the teacher gives an increase gradually physical activities. This method is done based on the interests and desires of children. The teacher does not want the achievement of physical motor activities to be per other friends. By giving little by little, the teacher will also be easier to observe the child's motor development.

*... this week we want to take the assessment of children running while jumping, today choosing children to run, tomorrow their abilities are added, running while jumping like that, now one time when playing, we evaluate, observe the child, the child's jumping movements with his initiative. the third day, for example, we have not got the data yet, we need repetition, with other variations, running while jumping, playing games or something, accidentally. (P2)*

### **Diverse role**

Teachers have a varied role to improve the gross motor skill of obese children. These roles are assisting, motivator, educator, and coach. The role of the guide is done by the teacher when obese children do certain gross motor activities that require teacher assistant. The teacher also motivates children to have the courage to do motor activities because many students feel scared. The teachers expressed:

*Because if he's already climbing this, the teacher must always be at the bottom, so it's not from far. So when he plays outside, it's not a teacher from afar. If he just runs away maybe the teacher is far away. That teacher must be downstairs. (P9) When he cries he feels unable and does not dare, then a teacher must be able to motivate children. So that courage arises to try until he tries..... You can do it, show that you can do it, you are smart, you are great, the teacher does have to talk extra, you have to motivate because early childhood cannot be compared to elementary, middle, high school students, emotionally high and selfishly high. (P3)*

Many teachers expressed that the gross motor activity of obese children is by the school curriculum for non-obese children. The teacher states that there is no physical learning activity specifically for obese children. So the teacher plays a role as an educator to increase gross motor skills of obese children by involving other activities, repetition of gross motor activities, and joining in a contest. One of the teachers said

*Oh no, it's still the same, at the most later when everything is finished, the obese child will be the most we repeat, only him at most twice, the maximum results are usually. Yeah, it's ok, there was a slight change. It's still different from the others.....contest of moving something, get used to it.....I told him to go down like that, so he wouldn't be lazy to walk. (P1)*

Many teachers explained revealed that gross motor activities carried out for obese children must be adjusted to the physical condition and health of the child so that it allows the gross motor activity to be reduced. The teacher also communicates with parents to increase physical activity while at home.

*I usually reduce it. I later reduce those related to gross motor skills. The others run or something, he walks. So it can't be the same as the others, the portion of activities that must drain energy. (P7) I asked, what was the activity at home, how was the child, then her mother told me, at her house she had a lot too, give her activities so that a lot of her activities, swimming pool, I had checked at the health center for consultation. (P1)*

### **Barriers**

Teachers experienced in improving gross motor skills with child obesity through a few barriers. The most barriers to which were child motivation and interest. The teacher stated that motor activities are indeed not interesting. For example, inviting to play related to running. The child chose to sit. This low motivation is influenced by the child's fear and tiredness. Teacher said

*In general, when carrying out gross motor activities, children who are overweight, children have imagined first, I can do anything or not, he compared with his friends. (P8) .... release his laziness, and fear, .... basically an obese child, like there is a fetter that makes him passive, and decided to look instead of doing. (P2) ... he does not want to, .. even though I want to "come on if you try it will work", yes it is the child's will. I guess, quickly tired just carrying his weight (P4)*

Resource and curriculum also become a barrier to the teaching of obese children. Most teachers expressed that there is no specific curriculum or program for obese children. this is influenced by the relatively small number of obese children. The teacher said:

*No, specifically for obesity it is not yet. Because so far it's not too big, it hasn't come to a very specific thought. Yes, it is only the class teachers who may have obesity classes. The class teacher who tried to pay more attention. (P6)*

Parental involvement is also a challenge for teachers. The teacher has felt that parental involvement in regulating nutrition and physical activity at home is still lacking. The teacher communicates to parents so that there is special attention, especially the addition of physical activity at home. The teacher hopes parents take the role of reducing weight and increasing gross motor skills. The teacher states

*Mom, please about food. children should concern their food but don't overdo it. Sometimes I say also for clarita especially, mom, don't over restrain the wishes of children. The child doesn't automatically want to move. Just move a little scared of him. (P8)*

The child's response when the teacher teaches gross motor cause variations in refusal to do activities, so the teacher needs to have the creativity of initiation in handling children's responses and helping children in the gross motor activities. The teacher feels this challenge has become the teacher's job as an educator. The teacher talked

*If he cries, he doesn't want to do it, but even though he is motivated, he doesn't want to, when the child doesn't want to, then we cry like that, that's sulking, how can we seduce a child but not hurt the child and the child can want to do it. (P3)*

The teacher feels like to be creative to be able to design motor physical activities specifically for obese children. For teachers, teaching the gross motor skills of obese children is not easy. Teachers need to have the initiative in dealing with children and provide an interesting activity for obese children. The most common challenge felt by teachers is the lack of knowledge about how to provide activities that are suitable for obese children.

*I want something that might be able to create an activity that motivates children to enjoy moving, the children also feel that moving is not a difficult thing, well maybe give a game that is fun for fat kids, maybe children like that are motivated to move but he is happy, does not feel compelled to move like that, so i can create a game that makes them happy and comfortable when playing it, well, the challenge I want is like that, children may be able to depend on their creative teacher. (P5).*

## **DISCUSSION**

This study investigated improving gross motor skills with obese children in the context of phenomenology, providing experience from the perspective of kindergarten teachers. There specific four emerged from this study: (1) positive perception, (2) flexibility, (3) diverse role, (4) barriers.

One theme that emerged from this study was positive perception. The teacher feels joyful, patient, and motivated by obese children, which is different from other research that mother and teacher perceptions about obesity tend to be negative because obesity is not a serious problem.<sup>40</sup> Our study reveals strong teacher belief to effort improving gross motor skills with daily physical activity inside and outside the classroom. With teachers has a positive perception, these things may have significant implications for obese children

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<sup>40</sup>I. G.A Sri D, et al, "Persepsi Ibu, Guru, dan Tenaga Kesehatan tentang Obesitas pada Anak Taman Kanak-Kanak. *Berita Kesehatan Masyarakat*", Vol. 27, No. 1, 2011, p. 32.

particularly for gross motor skills. Further research should be conducted to quantitatively examine the impact of these perceptions in a large population.

The next significant finding in this research was that the teachers reduce the targets in gross motor activities of obese children. The finding may support the result of previous studies that teachers do not significantly influence children's physical activity.<sup>41</sup> This finding again reinforced the research finding that teachers do not feel intervention should take place at the preschool level.<sup>42</sup> This information could be used for future teacher training, about how to implement and promote physical activity for obese children at the preschool level.

There are many diverse roles that teachers play in improving the gross motor skills of obese children. This finding was approved by another study which suggested that teachers must have the creativity to provide more gross motor experience, including the creativity of a teacher's role such as motivation. The teacher's role as a motivator can provide significant changes to the child.<sup>43</sup> Even teacher perception expressed that movement prepares children for school and life by building children's confidence and social skill.<sup>44</sup>

Commitment to foster creativity in the role of the teacher must be maintained for the gross motor skills of obese children increase. as a recommendation, there should be special teacher involvement to handle the motor physical fields for early childhood and even obese children. Because gross motor development is influenced by physical education that is served by experts in the motor physical field, thus it appears that structured practices and learning related to teacher's physical education are crucial in promoting the development of gross motor skills of children even at the preschool level.<sup>45</sup>

There are barriers in this study that are faced by teachers such as child motivation and response, resources and curriculum. For resources and curriculum, barriers are caused by the relatively small quantity of obese children. On the other hand, the principal may not fully support the efforts to improve gross motor skills in obese children. This was confirmed from a survey of principals' perceptions of the handling of obese children showing a negative attitude.<sup>46</sup>

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<sup>41</sup>Natale, Ruby A, "Role Modeling as an Early Childhood Obesity Prevention Strategy: Effect of Parent and Teachers on Preschool Children's Healthy Lifestyle Habits", *Journal of Developmental and Behavior Pediatrics*, Vol. 35, No. 6, 2014, p. 378.

<sup>42</sup>Jessica D.M, "Preschool Teachers' Perception of Obesity at Ages 3-5 Years", *Dissertation*, Philadelphia: Philadelphia College of Osteopathic Medicine, 2010.

<sup>43</sup>Kristen A. Copeland et al, "Physical Activity in Child Care Centre: Do Teacher Hold The Key To The Playground?", *Journal Health Education Research*, Vol. 27, No. 1, 2011, p. 81.

<sup>44</sup>J.S Gehris, et al, "Teachers' Perception about Children's Movement and Learning in Early Childhood Education Programmes", *Journal Child: Care, Health and Development*, Vol. 41, No. 1, 2014, p. 122.

<sup>45</sup>Anderson G.L, et al, "Physical Education in Kindergarten Promotes Fundamental Motor Skill Development", *Advance in Physical Education*, Vol. 2, No. 1, 2012, p. 17.

<sup>46</sup>James H.P, "Elementary School Principal's Perception of Childhood Obesity", *Journal of School Health*, Vol. 57, No. 9, 1987, p. 367.

The current finding also identified teacher barriers experienced such as child motivation. Factor low motivation likely caused by child weight. This is an additional finding from some previous research findings which are categorized in individual characteristics such as gender, ethnicity, age, physical activity, physical fitness, and play.<sup>47</sup> These findings have an impact on the physical activity of obese children to be done selectively and the teacher is very careful in guarding children's feelings so they do not make negative or dangerous responses. Teachers need to provide physical education although gradually and slowly. Other studies also found several challenges faced by teachers. Finally, the teacher called for meaningful professional development programs.<sup>48</sup>

Limitations of this research are the research methodology, the process of collecting and analyzing data. For research methodology, this study has a small sample because it only involves kindergartens located in the local area in Yogyakarta, not including other levels of early childhood education. Therefore, the results of this study do not attempt to generalize a conclusion but aim to add new scientific treasures to the increase in gross motor skills of obese children identified through teacher experience.

While the limitations of research on data retrieval and data analysis was the participants' responses and the researchers' abilities. At the data collection stage, many participant expressions were deemed inappropriate in the testing and thematization process because the participant's response did not yet represent the purpose of the phenomenon exploration. In addition, many answers do not match the questions. This might be due to the participants' limited memory. Furthermore, the ability to capture the meaning of participant exploration is limited. This limitation is like many felt by qualitative researchers.

## CONCLUSION

### Conclusion

The findings of this study reveal that the teacher's experience of teaching gross motor skills with obese children in kindergarten Yogyakarta is concluded in 4 themes: (1) Positive perception, this theme explains that teachers have positive perceptions of obese children including increasing gross motor skills. The teachers felt no difference between obese or not obese children, the teacher confident to improve children gross motor skills, the teachers understand that children's gross motor skills are low and the teacher felt pity to the children's gross motor skills with obesity. (2) Flexibility, this theme explains the gross motor teaching for flexible obese children. The teacher reduces gross motor activity when the child feels unable to do physical activity. The teachers do not force the child to the same physical activity

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<sup>47</sup>S. Livonen and A.K Saakslanti, "Preschool Childrens' Fundamental Motor Skill: A review Determinants". *Journal Early Child Development and Care*, Vol. 184, No. 7, 2014, p. 1107.

<sup>48</sup>Niki Tsangaridou, "Early Childhood Teachers' Views About Teaching Physical Education: Challenges And Recommendations", *Journal Physical Education and Sport Pedagogy*, Vol. 22, No. 3, 2017, p. 283.



with peers. The teachers have some method to improve gross motor skills such as physical play, outside activity, additional activity, gross motor specific instruction, gradually physical activities, and physical contest. (3) Diverse roles, this theme explains the role of teachers in improving the gross motor skills of obese children. The teacher acts as an assistant, motivator educator, and coach. This role is carried out in every physical activity both inside and outside the classroom. (4) Barriers, this theme explains how the challenges faced by the teacher. Teachers have challenges such as low child interest, resource and curriculum, parental involvement, and the lack of teacher knowledge.

### **Implication**

The implication for the research was the addition of educational service policies that support the fulfillment of the needs of aspects of development and improvement of gross motor skills in obese children such as resources, curriculum, and external partners from health services. Also besides, teacher training programs about how to implement and promote physical activity for obese children at the preschool level. Finally, Future quantitative inquiry should be conducted to determine whether this study is present in a larger population and whether best practice intervention and effective teaching physical education for obese children at the preschool level.

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