

UC Irvine

UC Irvine Previously Published Works

Title

Editorial

Permalink

<https://escholarship.org/uc/item/7sc2s096>

Journal

Contemporary Nurse, 42(2)

ISSN

1037-6178

Authors

Carter, Bernie
Jackson, Debra
Hayter, Mark
[et al.](#)

Publication Date

2012-10-01

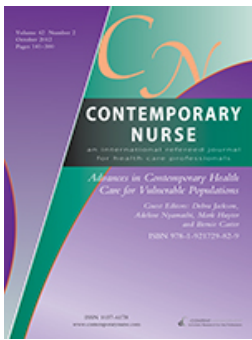
DOI

10.1080/10376178.2012.11002658

Copyright Information

This work is made available under the terms of a Creative Commons Attribution License, available at <https://creativecommons.org/licenses/by/4.0/>

Peer reviewed



Contemporary Nurse

ISSN: 1037-6178 (Print) 1839-3535 (Online) Journal homepage: <http://www.tandfonline.com/loi/rcnj20>

Editorial

Bernie Carter, Debra Jackson, Mark Hayter & Adeline Nyamathi

To cite this article: Bernie Carter, Debra Jackson, Mark Hayter & Adeline Nyamathi (2012) Editorial, Contemporary Nurse, 42:2, 298-300, DOI: [10.1080/10376178.2012.11002658](https://doi.org/10.1080/10376178.2012.11002658)

To link to this article: <http://dx.doi.org/10.1080/10376178.2012.11002658>



Published online: 17 Dec 2014.



Submit your article to this journal [↗](#)



Article views: 13



View related articles [↗](#)

EDITORIAL

Children out of place: Vulnerability and risk in the countryside?

BERNIE CARTER, DEBRA JACKSON*, MARK HAYTER†, AND ADELINE NYAMATHI[‡]

School of Health, University of Central Lancashire, Preston, Lancashire, UK; *Faculty of Nursing, University of Technology, Sydney, NSW, Australia; †University of Sheffield, Sheffield, UK; ‡School of Nursing, University of California, Los Angeles, CA, USA

The child cycles up the lane towards me. She's clearly not going anywhere fast and she seems to enjoy being out and about on one of the first warm and sunny days of spring. She's dressed in pink, has a small rucksack on her back and a somewhat determined air about her. She takes in the group of cyclists chatting at the side of the road but makes no contact with us and cycles past us. I'm out with two male friends, all keen cyclists and we have paused in our ride to chat for a moment. We watch the child cycle past us and continue along the lane. My friends continue to chat and I realise I have become distracted by the small figure disappearing into the distance. I am startled by the fact I'm worried. She seems awfully young to be out on her own. When I mention this to my friends, they are somewhat puzzled by my concern. I try to convince myself that all is well but I find myself running through a mental checklist; a checklist I didn't even know was available until I called upon it. She had looked and seemed fine, no signs of distress or concern; she was in her own world and apparently enjoying it. As my friends continue to chat, I start to think about how many unaccompanied children I have seen out on their bikes in this part of the countryside. I can't remember any. I certainly can't remember the last time I saw a girl this young on her own, with or without a bike. My guess is that she's around nine years old but she could be a little older.

As we get ready to resume our ride, my friends reassure me that she's fine but I can't shake off my concern. I remain both worried and somewhat annoyed that my 'danger radar' has been set off by something so innocuous. I'm uncertain what I should do; I'm uncertain if there is a need for me to do anything. Before a decision needs to be made, the child comes back into view, cycling back towards where we are standing. As she approaches she slows down and, after some hesitation, turns left. I'm neither assured nor reassured by her return (and departure). We set

off in the opposite direction but as I cycle away, I can't stop myself from turning my head to check for her presence. Unable to shake my sense of concern but equally unable to identify what is concerning me, I change direction and pedal after her until, about a mile down the road, she disappears into a house. My worries subside and I resume my own ride.

As I cycled home, I reflected on the episode and my reactions to it. Seeing a child out on a bike on a sunny day should be an ordinary sight and not one which prompts a level of alarm. She was a competent cyclist, taking note of what very little traffic was around and apparently enjoying herself. Meanwhile I was running disaster – 'what if ...' scenarios through my head. 'What if she is lost/running away/about to be abducted ...?' My friends acknowledged but did not share my concerns.

The scenario above occurred in a quiet part of rural England and there were many elements that either consciously or subconsciously contributed to triggering a sense of alarm. The child's age and gender provided some basic context. The physical absence of a parent or other adult providing scrutiny compounded that initial level of alarm. The apparent geographical isolation – no houses were in sight – and the rarity of seeing a child out on their own, added a frisson to my concern. The scenario was not extraordinary, yet it was sufficiently out of the ordinary to make it seem like she was, in some intangible way, 'out of place'.

Nurses and other healthcare professionals working with children in research and practice espouse and embed children's rights views and perspectives (Carter, 2009; Carter, 2011; Mattsson, Forsner, & Arman, 2011; Pelander & Leino-Kilpi, 2004) into their work. We practice in such a way that we respect and honour their abilities to be competent decision makers and we acknowledge their active agency and citizenship (Carter, 2009; Pelander & Leino-Kilpi,

2004). Beliefs which underpin our practice are focused on supporting resilience, promoting confidence, self-esteem and well-being. So why should the sight of a young girl happily meandering down a quiet country lane on her bicycle create such an unshakeable sense of concern? There was nothing vulnerable about the child herself; she was contained, calm and in control. Yet, our thinking about children in the UK and elsewhere is affected by societal discourses which persistently frame children as being at risk, vulnerable and in need of protection and monitoring by adults. In many countries in the world, children are routinely exposed to shocking risks, such as forced conscription that put their everyday lives in danger (Betancourt, Agnew-Blais, Gilman, Williams, & Ellis, 2010); the risks these children are exposed to deserve our attention and action. However, this paper focuses on the insidious consequences of a society which is so risk averse that it over protects children.

Gill (2007) proposes that the consequence of a risk averse society is an endemic loss of confidence in children's ability to look after themselves, leaving them less able to grapple with the world around them. As Scott, Jackson, and Backett-Milburn (1998, p. 690) note, risk anxiety is a 'constant and pervasive feature of everyday consciousness'. This endemic sense that risk is 'out there' has resulted in well meaning adults and parents attempting to remove risk from situations and/or remove children from situations that might be risky. Parental perceived risk about factors such as road safety, stranger danger, incivility, potential victimisation (Carver, Timperio, Hesketh, & Crawford, 2012) and racism (O'Brien, Jones, Sloan, & Rustin, 2000) has been shown to be influential in terms of encouraging or even allowing children and adolescents, particularly girls, to engage in outdoor independent physical activity. The literature shows that boys achieve greater degrees of independence at younger ages than girls because of parental concerns about safety and risk (Carver et al., 2012; O'Brien et al., 2000). O'Brien et al. (2000) highlight the roles of both gender and culture in influencing parental willingness to allow independent outdoor time, by showing that only 37% of older Asian girls were permitted to engage in independent outdoor play, compared with 92% of Asian boys from the same community. They further noted the importance of religion as a factor in independent outdoor play, and observed that 'the dominance of boys in local public spaces, made

it hard for Muslim Asian girls to move around their neighbourhood' (O'Brien et al., 2000, p. 268).

This perceived risk about the personal safety of children inevitably results in stifling opportunities. Children, particularly girls have to learn, explore, develop skills and independence, and investigate their environment. Furthermore, there is also some evidence that children themselves can develop a fear of being on the street alone (O'Brien et al., 2000), perhaps picking up on the fear of the adults around them. Work by O'Brien et al. (2000) suggests that inner London children were twice as likely to feel their streets were unsafe, as were children in the outer suburbs. There is increasing concern that this climate of fear has quite serious physical and social effects associated with reduced physical activity and increasing concerns about child and adolescent obesity (Jackson, Mannix, Faga, & McDonald, 2005).

There has been a recognition in recent years that many children in UK, USA and beyond have minimal contact with the natural world and are suffering from what is described, in a deliberately provocative way, as 'nature deficit disorder'. Louv's (2008) book *Last Child in the Woods* is a critique of the over-zealous approach to risk management which deprives children of opportunities to be 'in nature'. The notion of 'nature deficit disorder' may be a beguiling concept but it is clear from research such as that carried out on behalf of natural England that places such as woodlands, countryside and heaths do not figure within children's favourite places to play; the majority preferring to play indoors. The increasing turn to indoor play means that the short and long term benefits can be accrued from time spent in the natural world are not gained for the child or society. These benefits include cognitive, affective, interpersonal and social impacts, and physical and behavioural impacts (Dillon et al., 2005). Furthermore, time spent outdoors is associated with physical activity levels in children and adolescents, and thus an important health issue because of the attendant risk to health that is associated with reduced physical activity (Carver et al., 2012; Jackson et al., 2005).

A similar process is described by Foucault (1981) in relation to the concerns about the development of sexuality within the process of child and adolescent development. Foucault (1981) argues that as adults and as a society, we feel the need to take control and fear the consequences of losing control; this creates

tensions between necessary levels of 'surveillance' and the temptation to *over protect*. Referred to by Foucault (1981, p. 245) as the 'pedagogization of sexuality', this is a process by which adults feel vested with social responsibility to police and protect children as they develop as sexual beings. It may well be that this notion is now fully extending beyond this particular area of concern to wider generalised fears of the 'worldly dangers' (both real and imaginary) and the need to police children even more. But, it could also be the manifestation of the need to be in control; we perhaps fear (and even envy) the very ability of young people to deny risk and maybe recognise the waning of that ability in ourselves.

The need to reconsider the risk aversiveness which is now embedded in the way that children grow up in contemporary western society does not mean that adults should be indifferent to risk. Children do have vulnerabilities and do need a degree of protection. If adults abdicate their responsibility toward children then there is the real danger that some children will be harmed and there will be tragedies such as 'Baby P' (Jackson & Carter, 2009). However, it has been suggested that there has been a reduction in the independent use of public space for British children since the 1970's (O'Brien et al., 2000), and we are now seeing the various negative effects of this (Carver et al., 2012; Jackson et al., 2005). Society needs a measured approach and as Scott et al. (1998) note risk assessment is a balance between risks and over protection.

Returning to the child on the bicycle, the 'what if' scenarios triggered by her presence were contextualised and informed by the discourse of *potential* risk rather than actual danger. The notion that 'fear galvanises attention, ... [and] narrows your frame of reference and your concerns' (Anon, 2011, p. 424) would seem to hold true here.

As I reflected later, rather than the child being 'out of place' in the countryside around her home, I was the one 'out of place', less familiar with the setting; someone just passing through.

In terms of risk, the 'spookiest' person in the landscape was probably me as I cycled after the child in my attempt to monitor her and keep her safe.

REFERENCES

- Anon. (2011). Why parents should stop overprotecting kids and let them play. An interview with Hara Estroff
- Marano and Lenore Skenazy. *American Journal of Play*, 3, 423–442.
- Betancourt, T. S., Agnew-Blais, J., Gilman, S. E., Williams, D. R., & Ellis, B. H. (2010). Past horrors, present struggles: The role of stigma in the association between war experiences and psychosocial adjustment among former child soldiers in Sierra Leone. *Social Science & Medicine*, 70, 17–26.
- Carter, B. (2009). Tick box for child? The ethical positioning of children as vulnerable, researchers as Barbarians and reviewers as overly cautious. *International Journal of Nursing Studies*, 46, 858–864.
- Carter, B. (2011). Researching children and young people: Exploring the ethical territory. In G. Brykczynska & J. Simons (Eds.), *Ethical and philosophical aspects of nursing children*. Oxford, England: Wiley-Blackwell.
- Carver, A., Timperio, A. F., Hesketh, K. D., & Crawford, D. A. (2012). How does perceived risk mediate associations between perceived safety and parental restriction of adolescents' physical activity in their neighborhood? *International Journal of Behavioral Nutrition and Physical Activity*, 9, 57.
- Dillon, J., Morris, M., O'Donnell, L., Reid, A., Rickinson, M., & Scott, W. (2005). *Engaging and learning with the outdoors – The final report of the outdoor classroom in a rural context action research project*. Berkshire, England: National Foundation for Educational Research.
- Foucault, M. (1981). *The history of sexuality; volume 1: An introduction*. Harmondsworth, England: Penguin.
- Gill, T. (2007). *No fear: Growing up in a risk-averse society*. London, England: Calouste Gulbenkian Foundation.
- Jackson, D., & Carter, B. (2009). Fear, failure, outrage and grief: The dissonance between public outrage and individual action? *Journal of Child Health Care*, 13, 4–6.
- Jackson, D., Mannix, J., Faga, P., & McDonald, G. (2005). Overweight and obese children: Mothers' strategies. *Journal of Advanced Nursing*, 52, 6–13.
- Louv, R. (2008). *Last child in the woods: Saving our children from nature deficit disorder*. Chapel Hill, NC: Algonquin Books of Chapel Hill.
- Mattsson, J. Y., Forsner, M., & Arman, M. (2011). Uncovering pain in critically ill non-verbal children: Nurses' clinical experiences in the paediatric intensive care unit. *Journal of Child Health Care*, 15, 187–198.
- O'Brien, M., Jones, D., Sloan, D., & Rustin, M. (2000). Children's independent spatial mobility in the urban public realm. *Childhood: A Global Journal of Child Research*, 7, 257–277.
- Pelander, T., & Leino-Kilpi, H. (2004). Quality in pediatric nursing care: Children's expectations. *Issues in Comprehensive Pediatric Nursing*, 27, 139–151.
- Scott, S., Jackson, S., & Backett-Milburn, K. (1998). Swings and roundabouts: Risk anxiety and the everyday worlds of children. *Sociology*, 32, 689–705.