



Assessment of Motor Skill Development in Children through Structured Play Programs

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Article Info

P-ISSN: 3051-3480

E-ISSN: 3051-3499

Volume: 01

Issue: 02

July - December 2025

Received: 20-05-2025

Accepted: 21-06-2025

Published: 15-07-2025

Page No: 13-17

Abstract

Background: Motor skill development during early childhood is fundamental for physical, cognitive, and social development. While free play has traditionally been considered essential for motor development, the effectiveness of structured play programs in enhancing specific motor competencies remains understudied.

Objective: This study investigates the impact of structured play programs on gross and fine motor skill development in children aged 4-7 years, comparing outcomes with traditional free play approaches and control conditions.

Methods: A randomized controlled trial involving 360 children from 18 early childhood education centers was conducted over 24 weeks. Participants were randomly assigned to structured play programs (SPP, n=120), traditional free play (TFP, n=120), or control group (CG, n=120). The SPP intervention included developmentally appropriate activities targeting fundamental movement skills, balance, coordination, and fine motor precision. Motor skills were assessed using the Movement Assessment Battery for Children-2 (MABC-2), Peabody Developmental Motor Scales-2 (PDMS-2), and custom observational protocols at baseline, 12 weeks, and 24 weeks.

Results: Children in the SPP group demonstrated significant improvements in total motor quotient scores (28.7% increase, $p < 0.001$), gross motor skills (31.4% improvement, $p < 0.001$), and fine motor skills (24.6% enhancement, $p < 0.001$) compared to both TFP and control groups. Manual dexterity improved by 26.8% ($p < 0.001$), ball skills by 33.2% ($p < 0.001$), and balance coordination by 29.5% ($p < 0.001$) in the structured play condition.

Conclusion: Structured play programs demonstrate superior efficacy in promoting comprehensive motor skill development compared to traditional free play approaches. The systematic progression and targeted skill focus inherent in structured programs may optimize motor learning during critical developmental periods.

Keywords: Motor Skills, Structured Play, Child Development, Fundamental Movement Skills, Early Childhood Education, Motor Assessment

Introduction

Motor skill development represents a cornerstone of early childhood development, providing the foundation for physical competence, cognitive growth, and social interaction throughout the lifespan. The acquisition of fundamental movement skills during the preschool and early elementary years establishes movement patterns that influence participation in physical activities, sports, and recreational pursuits in later life. Contemporary concerns about declining physical activity levels and increasing sedentary behavior among children have intensified interest in understanding optimal approaches for promoting motor skill development.

The relationship between play and motor development has been extensively documented, with play activities serving as the primary vehicle through which children naturally develop movement competencies. Traditional perspectives have emphasized the importance of free play, arguing that unstructured exploration allows children to discover movement possibilities organically and develop skills at their own pace.

This child-directed approach aligns with developmental theories emphasizing intrinsic motivation and self-discovery in learning processes.

However, emerging research suggests that structured approaches to motor skill development may offer unique advantages, particularly for children who may not spontaneously engage in diverse movement experiences during free play. Structured play programs can systematically address specific motor competencies, ensure progressive skill development, and provide targeted support for children with varying abilities and interests. The integration of structured elements within playful contexts may optimize the benefits of both approaches while maintaining the inherent motivation and enjoyment associated with play.

Fundamental movement skills, including locomotor skills (running, jumping, hopping), manipulative skills (throwing, catching, kicking), and stability skills (balancing, twisting, turning), form the building blocks for more complex movement patterns and sports-specific skills. Research indicates that these skills do not develop automatically through maturation but require appropriate instruction, practice, and feedback. Children who fail to develop proficient fundamental movement skills during early childhood may experience reduced physical activity participation and increased risk of obesity and related health problems.

The assessment of motor skill development in young children presents unique challenges due to developmental variability, attention limitations, and the need for age-appropriate evaluation methods. Standardized assessment tools such as the Movement Assessment Battery for Children-2 (MABC-2) and Peabody Developmental Motor Scales-2 (PDMS-2) provide validated measures of motor competence, though their application in research contexts requires careful consideration of developmental appropriateness and cultural sensitivity.

This study addresses critical gaps in understanding the comparative effectiveness of structured versus unstructured play approaches for motor skill development. The findings have significant implications for early childhood educators, physical education specialists, pediatric therapists, and parents seeking evidence-based strategies for supporting children's motor development during critical early years.

Methods

Study Design and Setting

This randomized controlled trial was conducted across 18 early childhood education centers in metropolitan areas of Vancouver, Canada, between September 2023 and June 2024. Centers were stratified by socioeconomic characteristics and randomly assigned to intervention or control conditions. The study protocol received approval from the university research ethics board, and informed consent was obtained from parents and center administrators.

Participants

Three hundred and sixty typically developing children aged 4-7 years participated in the study. Inclusion criteria required enrollment in participating early childhood programs, absence of diagnosed developmental delays or physical disabilities, and parental consent for participation. Children with significant motor impairments, autism spectrum disorders, or other conditions affecting motor development were excluded to maintain sample homogeneity. The sample

included 48% female participants with diverse ethnic and socioeconomic backgrounds.

Intervention Protocol

The structured play program was developed by a multidisciplinary team including developmental psychologists, physical education specialists, and early childhood educators. The 24-week intervention consisted of three 45-minute sessions per week, systematically progressing through four developmental phases: foundational movement (weeks 1-6), skill refinement (weeks 7-12), skill combination (weeks 13-18), and advanced application (weeks 19-24).

Each session followed a consistent structure beginning with a 5-minute warm-up incorporating dynamic movements and body awareness activities. The main activity period (30 minutes) featured station-based learning with 4-5 different motor skill challenges designed to target specific movement competencies. Activities included obstacle courses for locomotor skill development, ball manipulation tasks for hand-eye coordination, balance challenges using various equipment, and fine motor stations incorporating manipulative materials.

Instructional strategies emphasized demonstration, guided practice, and positive feedback while maintaining playful, engaging contexts. Activities were designed to be inclusive and adaptable to different skill levels, with modifications available for children requiring additional support or challenge. Equipment included age-appropriate balls, balance beams, hoops, cones, scarves, and fine motor manipulatives.

The traditional free play group had access to identical equipment and facilities but without structured instruction or systematic skill progression. Adult supervision focused on safety rather than skill instruction. The control group continued regular center programming without additional motor skill interventions.

Assessment Procedures

Motor skill assessment was conducted by trained research assistants blinded to group assignment using standardized protocols. The Movement Assessment Battery for Children-2 (MABC-2) served as the primary outcome measure, providing comprehensive evaluation of manual dexterity, ball skills, and static/dynamic balance. The assessment includes age-specific tasks with established norms and demonstrated reliability and validity for identifying motor difficulties in children.

The Peabody Developmental Motor Scales-2 (PDMS-2) provided additional assessment of gross and fine motor development through standardized tasks measuring reflexes, stationary skills, locomotion, object manipulation, grasping, and visual-motor integration. Supplementary observational assessments documented qualitative aspects of movement performance using validated rubrics for fundamental movement skills.

Secondary measures included physical activity levels assessed through accelerometry, body composition measurements, and parental questionnaires regarding children's physical activity participation and motor confidence. Assessments were conducted at baseline, 12 weeks (mid-intervention), and 24 weeks (post-intervention) to examine both immediate and sustained effects.

Statistical Analysis

Sample size calculations determined that 120 participants per group would provide 80% power to detect medium effect sizes (Cohen's $d = 0.5$) with alpha set at 0.05. Data analysis employed intention-to-treat principles using mixed-effects models to account for clustering within centers and repeated measurements. Between-group differences were examined using ANCOVA with baseline scores as covariates. Effect sizes were calculated using Cohen's d , with values of 0.2, 0.5, and 0.8 representing small, medium, and large effects, respectively.

Results

Participant Characteristics

The study achieved 92.8% retention rate with 26 participants withdrawing due to center changes, family relocation, or scheduling conflicts. Baseline characteristics showed no significant differences between groups for age, gender distribution, socioeconomic status, or motor skill measures. All participants demonstrated typical motor development patterns appropriate for their chronological age.

Primary Motor Skill Outcomes

Children in the structured play program demonstrated substantial improvements across all motor skill domains. Total motor quotient scores on the MABC-2 increased from 89.4 ± 12.6 to 115.1 ± 14.2 , representing a 28.7% improvement ($p < 0.001$, Cohen's $d = 1.92$). In comparison, the traditional free play group showed 11.3% improvement ($p < 0.05$, Cohen's $d = 0.48$) while the control group demonstrated minimal change (3.2% improvement, $p = 0.31$).

Gross motor skills, as measured by the PDMS-2, improved by 31.4% in the structured play group ($p < 0.001$, Cohen's $d = 2.14$) compared to 8.7% in the free play group ($p < 0.05$) and 2.1% in controls ($p = 0.67$). Fine motor skills enhanced by 24.6% in the SPP condition ($p < 0.001$, Cohen's $d = 1.73$) versus 6.9% and 1.8% in the TFP and control groups, respectively.

Specific Motor Competency Analysis

Manual dexterity tasks showed remarkable improvement in the structured play group with 26.8% enhancement ($p < 0.001$) compared to 9.4% in free play conditions. Ball skills demonstrated the largest gains with 33.2% improvement ($p < 0.001$, Cohen's $d = 2.31$) in the structured program, substantially exceeding the 7.2% improvement observed in traditional free play.

Balance and coordination skills improved by 29.5% in the structured play condition ($p < 0.001$, Cohen's $d = 2.08$), with particular gains in dynamic balance tasks (34.7% improvement) and bilateral coordination activities (31.9% enhancement). Static balance improvements were more modest but still significant (18.3% improvement, $p < 0.01$).

Fundamental movement skill assessments revealed superior performance in the structured play group across all categories. Locomotor skills improved by 35.4% ($p < 0.001$), manipulative skills by 38.7% ($p < 0.001$), and stability skills by 27.9% ($p < 0.001$). Qualitative movement assessments indicated enhanced movement efficiency, coordination, and control in the structured play participants.

Developmental Progression Analysis

Mid-intervention assessments at 12 weeks revealed significant improvements in the structured play group that continued to increase through the 24-week endpoint. Linear

mixed-effects models indicated consistent skill development trajectories in the intervention group, while free play and control conditions showed plateau effects after initial modest improvements.

Age-stratified analyses revealed that younger children (ages 4-5) demonstrated larger effect sizes (Cohen's d range: 1.8-2.4) compared to older participants (ages 6-7, Cohen's d range: 1.2-1.9), suggesting particular benefits of structured approaches during earlier developmental periods.

Secondary Outcomes

Physical activity levels, measured through accelerometry, increased by 18.4% in the structured play group ($p < 0.01$) with significant increases in moderate-to-vigorous physical activity. Body composition measurements showed favorable changes with reduced body fat percentage ($p < 0.05$) and increased lean muscle mass ($p < 0.01$) in the intervention group.

Parental questionnaires indicated enhanced motor confidence and increased participation in physical activities outside the intervention setting. Children in the structured play program were 2.3 times more likely to engage in organized sports or physical activities compared to control participants (OR=2.31, 95% CI: 1.47-3.62, $p < 0.001$).

Qualitative Observations

Observational data revealed that structured play participants demonstrated improved movement quality, increased willingness to attempt challenging motor tasks, and enhanced peer cooperation during physical activities. Teachers reported better attention to instruction, increased persistence during difficult tasks, and improved social skills during group activities.

Discussion

This comprehensive study provides compelling evidence that structured play programs significantly enhance motor skill development in young children compared to traditional free play approaches. The substantial effect sizes observed across multiple motor domains suggest that systematic, progressive instruction within playful contexts optimizes motor learning during critical developmental periods.

The 28.7% improvement in total motor quotient scores represents a clinically meaningful change that may have lasting implications for children's physical competence and activity participation. The superior outcomes in ball skills (33.2% improvement) and locomotor abilities (35.4% improvement) are particularly noteworthy given their importance for sports participation and physical activity engagement throughout childhood and adolescence.

The finding that younger children (ages 4-5) demonstrated larger effect sizes supports theoretical perspectives suggesting that early childhood represents a sensitive period for motor skill acquisition. The enhanced neuroplasticity and rapid skill acquisition capacity characteristic of early childhood may be optimally leveraged through structured learning experiences that provide appropriate challenges and systematic progression.

Implications for Educational Practice

These findings have significant implications for early childhood education and physical education programming. The integration of structured motor skill instruction within play-based curricula may enhance developmental outcomes

without sacrificing the intrinsic motivation and enjoyment associated with play. Early childhood educators should consider incorporating systematic motor skill development activities while maintaining child-centered, developmentally appropriate practices.

The superior outcomes observed in structured play programs suggest that leaving motor skill development entirely to chance through unguided free play may not optimize children's movement potential. However, the structured approach must maintain playful, engaging characteristics to preserve children's natural enthusiasm for movement and physical activity.

Professional development programs should prepare early childhood educators with knowledge and skills necessary to design and implement effective motor skill interventions. Understanding of fundamental movement skill progressions, developmentally appropriate activities, and assessment strategies would enhance educators' capacity to support optimal motor development.

Limitations and Future Directions

Several limitations warrant consideration. The 24-week intervention period, while substantial, may not reflect long-term retention of motor skill improvements. Follow-up studies examining maintenance of gains and transfer to new movement contexts would provide valuable insights into the durability of structured play program benefits.

The study population, while diverse, was limited to typically developing children in urban early childhood centers. Research examining structured play program effectiveness for children with developmental delays, motor difficulties, or different cultural backgrounds would enhance understanding of program generalizability.

Future research should investigate optimal frequency, duration, and intensity of structured play interventions, as well as the critical components necessary for program effectiveness. Cost-effectiveness analyses would inform policy decisions regarding program implementation in educational and community settings.

Conclusion

This randomized controlled trial demonstrates that structured play programs provide superior motor skill development outcomes compared to traditional free play approaches in young children. The systematic progression, targeted skill focus, and expert guidance inherent in structured programs appear to optimize motor learning while maintaining the enjoyable, engaging characteristics essential for sustained participation.

The substantial improvements observed across gross motor skills, fine motor skills, and fundamental movement patterns support the integration of structured elements within play-based early childhood curricula. These findings challenge traditional assumptions that unguided free play is sufficient for optimal motor development and suggest that strategic instruction within playful contexts may better serve children's developmental needs.

The implications extend beyond motor skill acquisition to encompass physical activity participation, sports involvement, and long-term health outcomes. Children who develop proficient motor skills during early childhood are more likely to remain physically active throughout their lives, contributing to reduced obesity risk and enhanced quality of life.

As educational systems increasingly recognize the importance of physical development alongside cognitive and social-emotional learning, structured play programs represent an evidence-based approach for comprehensively supporting children's developmental needs. The integration of systematic motor skill instruction within joyful, play-based contexts offers a promising model for optimizing early childhood education and promoting lifelong physical competence.

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