

### 1: 10 Tips for Teachers When Working with Parents

*Parents and children are a two-for-one deal: Developing positive relationships with parents is critical to providing the best care possible to their children. But sometimes you already have a relationship with the child's parents—they may be related to you, live in your neighborhood, or be friends or acquaintances.*

Experienced caregivers who work with infants or toddlers often list their relationships with the parents of those babies as both the most difficult and the most rewarding aspect of their work. It is in this relationship that the caregiver can most clearly see the impact of their work on society. While working well with parents is important for all childcare providers, when you work with babies, the issue is different from childcare for older children. Parents of babies require much more direct, face-to-face communication as well as daily written communication. That is not a given in our field, where people may subconsciously choose this work because they are uncomfortable with adults. What makes it even more complex is the emotional issue. So many parents today are very young and live far away from relatives who could otherwise lend support. Childcare people have, in effect, become the extended family for many parents. In that role we are often called upon to give advice and lend support. What Parents Want When parents are interviewed about why they chose a particular childcare situation, they start with the obvious. They want a clean, safe place and first check out programs recommended to them by friends. But always the deciding factor is their perception of the caregiver. The parent sometimes needs to feel nurtured herself. I always feel welcome here. The Natural Tension of the Relationship Although much has been written about the adjustment of babies to childcare, very little attention has been given to how it affects the parents. We are fighting instinct. Some mothers even report visceral distress when they leave their baby in childcare for the first time. It takes a mature, sensitive, and empathetic caregiver to make both the baby and the parent feel comfortable with the arrangement. The parents feel terrible when the baby cries when he or she leaves in the morning, and the caregiver works and works to make the child feel comfortable and happy in the new situation. Finally the day comes when the baby does not cry but reaches eagerly toward the caregiver. The parent still feels terrible. She loves her caregiver more than me. The caregiver must constantly reassure that the parent will always be number one with the child. This can be hard to convince the parent of when the baby cries at the end of the day and does not seem to want to go with the parent. It can help to explain to the parent that what might be happening is what this writer calls The Miss America Syndrome. The contestant in the beauty contest holds herself together with poise, smiling constantly through all the competitions. When the crown is finally placed on her head, she often falls apart and cries. The prize is hers. Likewise with the baby in childcare, he participates with the group all day and seems to be fine — and he is. When the parent shows up — the prize — he feels safe to let down and cry or be cranky. Many babies simply do not like transitions. Point out to the parent that it was the same child who cried in the morning because she did not want the parent to leave. Caregiver as Expert Another kind of problem can arise when people seem to abdicate their role as parents, regarding the caregiver as the all-knowing expert. They expect the caregiver to know all the solutions to any problem that arises with their child. Even the most educated parents, successful and highly effective in their careers, can feel like helpless fools around a new baby or a strong-willed toddler. To them, the caregiver makes it look easy. And caregivers are often secretly pleased when parents ask for advice and happily tell the parent what to do. But this may not be what is best for the parent. The wise caregiver will instead develop a sense of partnership with the parents, becoming the kind of expert that facilitates expertise in others. But I make them decide what to do for their own child. I want to build their own sense of competence and confidence as a parent. Parents come together on a regular basis and decide among themselves what they want to discuss. The caregiver participates as a facilitator, and equal participant, not as a leader. On the Other Hand— Sometimes caregivers wish parents would regard them as more of an expert. A direct but gentle approach might work. Finding something in print that says the same thing you are recommending gives added validity to your point of view. If you have made a mistake, admit it and tell what you will do to resolve it. Work together to find a mutually satisfactory solution. Work also on developing comfortable social relationships with the parents, as adults. The spaghetti suppers, the family

picnics, and other social events in which parents can get to know each other as well as the caregiver in a relaxed, social arena can go a long way toward making people feel relaxed and comfortable with each other. If problems do arise, they will be easier to discuss. Most of all, communicate your pleasure in working with this unique human being.

### 2: How to Care for Infants and Toddlers in Groups – ZERO TO THREE

*Indeed, current practices in many infant/ toddler child care settings actually hinder caregivers, children, and parents from forming and sustaining the deep, responsive, and respectful relationships that are the hallmark of quality.*

January 3, In recent years, full time employment of mothers has become the norm in the United States. Research on the Long-term Impact of Maternal Employment The research on the long-term impact of maternal employment seems to tell a consistent story. In , the National Institute of Child Health and Development initiated a comprehensive longitudinal study in ten centers across the United States to address questions about the relationships between maternal employment, child-care experiences and various outcomes in children. The leaders of this study were among the most respected researchers in the field of developmental psychology, making the conclusions of this research particularly worthy of attention. In a recent review of their findings, they drew the following conclusions: With regard to cognitive difference in the middle and upper middle class sample, the study found that: Mothers who worked full-time tended to use higher-quality substitute childcare and to show higher levels of sensitivity to her child. The researchers speculate that the higher levels of maternal sensitivity seen in employed mothers might have stemmed from their having greater financial security. Early maternal employment was found to be associated with beneficial child outcomes when families were at risk because of either financial challenges or as the result of being single-parent families. In those families, children of working mothers showed higher levels of achievement and lower levels of internalizing behaviors such as anxiety and depression. These benefits are generally explained by a compensatory hypothesis that views work in those families as providing added financial security, lower levels of family stress and enhanced learning opportunities for children who would otherwise be home with a parent who is dealing with the ongoing stress of poverty and child-rearing challenges with little external support. Employment was associated with negative child outcomes, however, when children were from intact, middle class families that were not at risk financially. In those families, early full-time employment relative to mothers who were not working outside the home was associated with later risk for child behavioral difficulties. It should be noted, however, that this increased risk was not the case when mothers worked full-time when their children were toddlers or preschoolers. It appears that working full-time when the child is an infant – a critical period in terms of attachment and emotional and cognitive growth – is more likely to be associated with subsequent difficulties. In summary, the consensus of the empirical studies on the impact of maternal employment finds that child adjustment is tied to a number of relevant variables. In the case of single-parent families, or families otherwise facing poverty, the impact of maternal employment appears to be mostly positive. It is very important to note, however, that these conclusions cannot necessarily be generalized to our community. There are numerous variables that may differ. Similarly, grandparents might be more actively involved in caring for their grandchildren – a factor that is generally associated with improved childcare and improved outcomes. During that critical period, when there is an option, the father should make an effort to be present in as active a parenting role as possible. Similarly, if at all feasible, grandparents should be more actively recruited to take care of their grandchildren when they are infants and both parents are working full-time. This has an added benefit since research has found that actively-involved grandparents serve a crucial role as a protective buffer against the potential harmful influences of parental stress. This recommendation is therefore most relevant for the segment of our community that falls in that category. The finding that full-time mothers are at times at greater risk for depression should not be taken lightly. Infants of parents with depression have been found to have difficulties with self-quieting, lower activity levels and decreased ability to attend. Relative to the children of nondepressed parents, their affect tends to be more negative, as typified by increased likelihood of expressing sadness and anger. Equally important are the studies on the role of chronic stress in parenting. This style of parenting frequently engenders high levels of resistance and at-risk behavior in the adolescent. The implications of this body of research are that high stress levels, and particularly depression in stressed-out parents, can have long term implications on child development. The community needs to take this into account when prioritizing the need to provide young

parents with support. Quality of Substitute Childcare Perhaps the most important lesson of the research is the importance of high-quality childcare for children. The key elements of what matters in substitute care are clearly demonstrated here. Unfortunately, parents in our community are given very little in the way of evidence-based information on how to evaluate a quality program. Data from a recent survey of parents of adolescents in the Orthodox Jewish community did not find any differences in adolescent outcomes for those mothers who reported being at-home mothers as compared with mothers who held other professions. Additional research needs to be done to determine how the various issues addressed in this paper might present differently in the Orthodox Jewish community. It is clear that we need to do a better job of guiding the next generation of parents on how to navigate the challenges of young parenthood. Pelcovitz clarifying his intent in writing this article. To read firsthand accounts of women who successfully balance work and family, check out the Jewish Action article, *Striking a Balance*: Each issue consists of a symposium in which a diverse group of rabbinic and lay leaders share their different perspectives on a given topic. *Psychological Bulletin*, 6 *Journal of Family Psychology*, Accessibility of dominance ideation among individuals with low perceptions of interpersonal power. Adolescent children of newly-Orthodox Jewish parents: Family functioning, parenting, and community integration as correlates of adjustment. Sign up for our Shabbat Shalom e-newsletter, a weekly roundup of inspirational thoughts, insight into current events, divrei torah, relationship advice, recipes and so much more! Shabbat Shalom Weekly email newsletter filled with articles, Divrei Torah, upcoming events and more!

### 3: How to Communicate with Parents – ZERO TO THREE

*Working parents who make family time a priority and are committed to their child's development are just as capable of establishing a healthy bond with their child as non-working parents.*

It can also be a therapeutic component of services to at-risk children, providing a safe and consistent base for protection, prevention, and treatment. Click here to learn more. Unfortunately, although more and more children in this country are moving into group care at younger ages and for longer periods of time, we are missing opportunities to provide quality care. In this article, we will explore six key components of early group experience: We have traditionally viewed the care of children from birth to three as a job done in the home, as part of daily life, for free. We still demand that caregivers get their training on Saturdays or after the work day is over. Unless and until we treat group care of infants and toddlers as a profession and provide funds for training, careful staff selection, and supervision—as well as for worthy wages—we cannot expect to achieve high quality care. This is not the result of evil intent but, rather, a failure to understand the profound differences between a preschooler and an infant. Simply put, a preschooler has already formed a pretty solid sense of identity, with definite likes, dislikes, inclinations and attitudes, but an infant or toddler is forming his or her sense of identity. The process of forming a strong positive identity should occur in a setting that offers security, protection, and intimacy. In order to create and sustain intimacy in group child care, we must address six key components of early group experience.

**Group Size** We create chaos and confusion when we put too many infants or toddlers in one group, even with an appropriate number of adult caregivers. As the number of infants in a group goes up, so do noise level, stimulation, and general confusion. Children look lost and wander aimlessly, not quite knowing what to do. When there are too many children, shared experience and discovery through play are inhibited. In small groups, very young children are able to make connections, form caring relationships, and learn to understand other children. For children crawling and up to 18 months, the group size should be no more than nine, ratios no more than 1: For children 18 months to three years, group size should be no more than 12, ratios, 1: Centers, group homes, and family day care homes with mixed age groupings should never have more than two children under two years of age in a single group. Infants and toddlers with disabilities who do not require special medical support can easily be included in environments with this suggested ratio and group size. Children with disabilities are children first; the care they need is often exactly the same as the care typically developing children need.

**The Environment** The physical environment—indoors and out—can promote or impede intimate, satisfying relationships. When dangerous objects and fragile prized possessions were removed from the area in which infants and toddlers played, caregivers smiled more, encouraged exploration, and gave fewer negative comments to infants and toddlers. The environment affects relationships between children. The amount and arrangement of space and the choice and abundance of play materials can either increase the chances that young children will interact positively with each other or increase the likelihood of biting, toy pulling, and dazed wandering. The environment can encourage or impede flexible, individualized care in a group setting. With easy access to the outdoors, the daily rhythms of infants and toddlers can be accommodated. Infants and toddlers need small amounts of food and drink throughout the day to support their emotional, social, and physical well-being. A child who is thirsty or hungry cannot interact successfully with other children or adults. A small refrigerator and modest equipment for warming food will allow caregivers to feed infants on demand and offer snacks to toddlers frequently. But too often in child care settings, feeding routines accommodate the kitchen rather than the child. Primary caregiving does not mean that one person cares for an infant or toddler exclusively, all of the time—there has to be teaming. Primary caregiving does mean that the infant or toddler has someone special with whom to build an intimate relationship. Primary caregiving assignments are an excellent example of program policy that takes the encouragement of relationships seriously. He was sturdy for one-and-a-half, but short. The noise was jarring, and he looked around for the woman his mother talked to when they came in. But now, just as fast, she was gone. It scared him as much as the other time. This was not a good place to be. He wanted his mother and he wanted to go home. A boy bumped him hard, and Tim fell. He crawled over to that

woman. He sat down and fingered some colored blocks on the floor. A big boy came and grabbed one and stepped on his hand. Tim yelped and cried and looked around. He held his hurt hand in the other and the tears ran down his cheeks. Tim stood just inside the entrance to the playroom. It was very noisy. A boy ran past him and bumped him. Tim lunged for him and pushed him down. The boy cried, and Tim walked over to the blocks. He picked some up, and a bigger boy came and grabbed them. Tim gave them up quickly and then turned and saw a smaller boy who had some. He pulled them away from him. Tim looked at the blocks. They made a very satisfying sound. He picked up several other toys nearby and threw them. Suddenly one of the women was there yelling at him and holding his arm very hard. She waved a finger in his face. He thought about biting it. He wanted his mother. He wanted to go home. He is important to no one here and must fend for himself, as must others. For all, it is a potentially damaging experience. The way it should be Tim and his mother had visited the center twice in the last week. Both Tim and his mother felt comfortable with Mindy. To Tim, today felt much the same, but his mother knew she was going to leave him for several hours and had told him so. Mindy met them at the door, squatted down to speak to Tim, who smiled shyly, remembering her, and then walked with mother and child to the small rocking horse that Tim had so enjoyed the last: A small boy rushed by and bumped Tim quite hard. Mindy caught the little boy and talked quietly to him, introduced him to Tim, and sent him on his way. Tim got on the horse and Mindy sat nearby where a somewhat bigger girl was building with blocks and a boy was working with large puzzle pieces. Mindy attended to all of them in turn as they wanted her attention or help. These were her three, and she always kept a special eye on them. He looked surprised and climbed off the horse. But his mother really seemed to be going to leave him, so he clung closer to Mindy, who cuddled him and talked quietly. Then his mother was gone. It was like everyone in the world was holding their breath at the same time, but Mindy held him and patted him and talked quietly, and then everyone began to breathe again. Tim made a beeline for the block area, but when he got there Wong Chen had corralled all of the red blocks Tim wanted. Tim squatted down and watched Wong Chen. In a minute, Mindy came over and squatted down too, and they both watched him. His mother was working. She would come later. He feels heard and understood. He feels protected, and his primary caregiver helps him negotiate the difficult things with other children. He is learning to cooperate and to pay attention to what other children need and want. There is enough space, there are enough providers, just enough children, and abundant affection for everyone. Switching from one caregiver to another takes its toll. The child has to build trust all over again. When a very young child loses a caregiver, he really loses part of his sense of himself and the way the world operates: Continuity of care or the lack of it in a child care program has important implications for the group experience. A child with a new caregiver has to work hard to get her messages across. The caregiver can only guess at what she wants. There is confusion and stress for both child and caregiver. If a child deals with change by acting out his frustration, this will have an impact on the entire group. With a caregiver who knows him, however, a child can express need less dramatically. The better somebody knows a child, the more subtle the cues are that will inform that person of what it is that the child needs. Continuity of care is important for caregivers and parents as well as for children. Parents often experience tremendous grief when they first place their infants in child care. Trust in the caregiver builds slowly, as they realize that the caregiver is attached to their child, loves their child, and supports the special parent-child bond.

### 4: The Whole Child - For Early Care Providers - Babies Are Children Too

*Children also tend to feel proud that their parents have careers. Depending on their after-school child care setting, middle-years children also have greater exposure to other youngsters and new social experiences, which can contribute to their development.*

**Raising Kids and Running a Household:** As more mothers have entered the U. In economic terms, families with two full-time working parents are better off than other families. But as a new Pew Research Center survey shows, balancing work and family poses challenges for parents. The survey, conducted Sept. In households where the father works full time and the mother works part time or not at all, the distribution of labor when it comes to childcare and housekeeping is less balanced. These moms take on more of the responsibility for parenting tasks and household chores than those who work full time. Mothers in two-parent households, regardless of work status, are more likely to report that they do more on each of the items tested in the survey than fathers are to say their spouse or partner does more. For their part, fathers are generally more likely than mothers to say that these responsibilities are shared about equally. While mothers and fathers offer somewhat different views of the division of labor in their household, there is general agreement about who in their family is more job- or career-focused. Differences in the responses to this question between mothers and fathers in this type of household are modest. These differences hold even when controlling for the fact that college-educated parents are more likely to work full time. There is also a racial gap in these attitudes. White parents are more likely than those who are non-white to say it is difficult for them to balance work and family. For working parents, attitudes toward balancing their job and their family life are highly correlated with their experiences as parents. Three-in-ten say being a parent has made it harder for them to advance at work, and one-in-ten say being a parent has made it easier. These overall numbers mask the disproportionate impact women say being a working parent has on their careers. Mothers are twice as likely as fathers to say being a working parent has made it harder for them to advance in their job or career. And mothers who work part time are just as likely as those who work full time to say being a working mother has made it harder for them to move ahead in their job. For working mothers who have a spouse or partner who is more focused on his job than they are, being a working parent may have more of an impact on career advancement. But for many mothers who work full time, feeling rushed is an almost constant reality. In turn, mothers who do not work outside the home are about twice as likely as those who do to say they never feel rushed. And among those who are married or cohabiting, mothers who work full time are more likely than other moms to say they spend too little time with their partners. At least half in each group say they spend the right amount of time with their partners, while few say they spend too much time. Most parents who are married or living with a partner with whom they share at least one child say that, in their household, the mother does more than the father when it comes to certain tasks related to their children. Half say they and their partner share household chores and responsibilities about equally. The division of labor between mothers and fathers is more even when it comes to disciplining and playing or doing activities with children. In households where both parents work full time, mothers and fathers tend to share some responsibilities more equally. Perhaps not surprisingly, in households where the father is employed full time and the mother is either not employed or is employed part time, childcare responsibilities usually fall to the mother. Perceptions of Division of Labor Vary by Gender Mothers and fathers in two-parent households differ in their perceptions of how they split certain responsibilities. The gap is especially pronounced when it comes to household chores and responsibilities. Fathers, for their part, are more likely to say they and their partners share household chores and responsibilities about equally: In these areas, too, fathers are more likely than mothers to say they and their partners share responsibilities about equally. To varying degrees, these gender differences in perceptions of who does more are evident in two-parent households where both parents work full time as well as in households where the father is employed full time and the mother is employed part time or is not employed. Where there are differences, mothers are more likely to say they do more than fathers are to say that their partner does more, while fathers tend to say responsibilities are shared about equally. Mothers and fathers in these households generally agree

about who is more focused on work. The situation is much different in households where the father works full time and the mother works part time. Among fathers in two-parent households, there is a significant racial gap in terms of how focused they say they are on their job compared with their spouse or partner. While half of working parents say they and their spouses or partners are equally focused on their careers, the same is not true when it comes to compensation. Throughout this report, mentions of Pew Research survey respondents in two-parent households refer to couples who are married or cohabiting and have at least one child under 18 together. Non-white parents include those who are Hispanic or any race other than white.

### 5: The Impact of Working Mothers on Child Development | Everyday Jewish Living | OU Life

*Working with Parents and Infants is aimed at understanding the process of psychosomatic illness, exploring the embodiment of psychosomatic health and illness, and the inseparability of psyche and soma.*

Toddlers and Preschoolers There are times when you will need to talk to parents about your academic concerns regarding their child. Do not attack their child. Instead, communicate politely about the areas of concern. Teachers need to work with parents as a team. It should not be one-sided. By working together, both sides can do their part in helping the child, and come up with ideas, strategies, and plans to implement in hopes of narrowing the concerns, and enabling an environment where the child can reach their full potential. If you are a teacher, then you must have noticed how parents can be at times. However, every teacher must know the ethics of working with parents. Most parents develop a certain level of animosity towards a teacher because of the way she acts with them. Here are some tips for teachers to help them work with parents: Thus you may see them defending their kid in front you. What should you do then? It is true that some children are extremely problematic, and with such parents, the problem gets worse. Yet you need to remain patient and polite while working with parents. However, make sure to inform parents in an encouraging tone about the areas the child needs to work on. Never talk in front of the child It is not good to talk about the kid in front of him. Appreciating the kid in front of his parents would make him pompous. On the other hand, complaining about him can discourage him. Make sure parents know you have the situation under control At times, parents will visit you everyday to ask you about their kid. Try to convince them that you can handle the kid but need your space to do that. Also avoid discussing your lesson plans with parents as they might have their suggestions or recommendations. You are the authority in your classroom, thus your lesson plans are based on what you think would benefit students. Maintain secrecy to the child of your meetings with parents Sometimes parents ask their kids about the teachers while the latter are right there. This gives some children the chance to come up with a number of complaints. You are only human, so your emotions may rule your judgment at times. Ask parents gently yet firmly to meet you without their children present. Without teacher worksheets, you might be thinking of what to discuss without creating complications. Guide parents At times, a child faces trouble in concentrating on studies due to certain family problems. Keep weekly meetings Even if parents are coming to school everyday, avoid discussing things with them. Do that on a weekly basis or call them up whenever necessary. Listen first, talk later A very important tip that is very useful in this case. Never burst in front of parents. Instead, find out what complains they have and counter them. Be motivating Last but not the least, always keep a motivating attitude. More Information On Parent Resources.

### 6: How Working Parents Share Parenting and Household Responsibilities

*It is true that some children are extremely problematic, and with such parents, the problem gets worse. Yet you need to remain patient and polite while working with parents. Focus on the positive attributes of their child.*

In this course, examine childhood mental health principles and learn strategies for working with parents of young children. Take this course as a stand-alone course or apply it to the Supporting Early Social and Emotional Development Credential. Upcoming sessions Spring February 4 to April 8, Register by January Early bird rate if you register by December 15 for spring session only. Registration for Summer June 10 to August 12, opens December 15, Register by June 3. Learning objectives Learn how early childhood mental health research informs work with parents with mental illness, chemical dependency, trauma, cognitive delays, and those who face other adversities. Gain an understanding of attachment patterns and how they affect work with parents. Explore the needs of parents at different stages. Learn how culture and environmental factors impact relationships and childrearing practices. Review self-reflection strategies that will help you identify the needs of individual families. Who should register Professionals working with young children Parents of young children This online course is approved by the Minnesota Center for Professional Development to count toward career lattice steps. What to expect The course is instructor-led with feedback and interactions provided. All activities and assignments for this course are asynchronous and online. Nothing takes place in real time. Activities and assignments include readings, videos, discussion board, recording videos using an online tool called FlipGrid, and reflection papers. You are expected to participate fully and abide by weekly submission due dates for assignments and activities. Knowledge and competency framework areas Child development and learning Promoting social and emotional development Relationships with families Observing, recording, and assessing development Assessing and using information to plan Meet the instructor Angela Klinefelter Angela Klinefelter, M. She currently works as a parent educator and home visitor for the St. She has 20 years of experience working with children and families. Klinefelter has specialized in the area of social-emotional development of young child and the enhancement of parent-child relationships. You will need to rent a video online for one of the module activities. Cancellation Policy Cancellation before Day 1 of the session: No refund will be provided. The course session may be canceled if the minimum number of students is not attained. You will be notified one week in advance. To cancel, send an email to Karen Anderson at [ander@umn.edu](mailto:ander@umn.edu).

### 7: Mentalizing in Practice; Working with Parents & Babies | AFC

*Working Parents And Child Development It is a common challenge that parents face: they must work while at the same time strive to meet the needs of.*

Building positive relationships with parents is critical to provide the best care possible for their children. Parents and children are a two-for-one deal: Developing positive relationships with parents is critical to providing the best care possible to their children. This can be a real benefit since you might already share an open, trusting relationship with the parents. But this familiarity can also raise some challenges when you are caring for their children. Even when your relationship with a parent is warm and positive, sharing the care of a young child often stirs up strong feelings. This may be more of a concern when the caregiver is someone the parent and child both know well—a relative, friend or neighbor. Here are two fairly typical experiences that come up when sharing the care: Sarita got into her car, really angry. When she dropped off her month-old, Malika, that morning, she mentioned to her friend, Angela who cares for Malika, how impossible Malika has been in the mornings. Angela seemed really surprised. She is really cooperative. After calling to her, Aldo finally had to crawl under there and pull her out. Blanca was screaming the whole time. His mother-in-law told him it was just because Blanca has a hard time making changes. But it still was a rotten way to end a long day. Notice how you are feeling. Tuning in to your feelings is very important. But her niece, Tasha, is often late to pick him up and never calls. Adele is really frustrated and angry. When her niece does eventually show up, Adele is very abrupt and annoyed in her tone. The two adults barely communicate. Eduardo glances from one to the other and looks very tense. Recognizing the impact on Eduardo, Adele decides to talk to Tasha about her feelings and to see about making a plan to help Tasha arrive on time, and at least to call to let Adele know she is running late. When Adele takes the approach of partnering with Tasha in solving the problem, versus blaming her, Tasha is open to discussing solutions. Take the example of a child throwing a tantrum when his parent comes to pick him up. This situation can naturally make a parent feel incompetent and embarrassed. Kids learn quickly that the rules and expectations at home and here can be different. He tells me all about how you make sure he is zipped up and how you always check that he has his hat. He talks about you all the time. Developing a plan together with parents on how to handle a child-rearing issue helps you move forward as partners, instead of competitors. For example, if you are trying to teach children not to hit when they are angry, but the parent hits her child to discipline her at home, you can: I really work with the kids on finding other ways to show angry feelings. Ask questions to learn, not to pass judgment: What do you do at home? What do you find works? Would you be open to finding ways to discipline her other than hitting? Look for a place to compromise. Ask the parent if he or she has ideas for next steps. What can the two of you agree on? What can you both work on? One strategy that seems to work here is to have her stomp her feet as hard as she can to get her mad out. Are you comfortable with that? I also tell her that if she needs a break, she can curl up on the couch with her teddy bear. Are these strategies you think you might want to try at home? A relationship is a living thing that grows and changes over time. Communication is the key to making any partnership work.

### 8: [www.enganchecubano.com](http://www.enganchecubano.com) - The Dual Challenge: Meeting the Needs of Parents and Babies

*Infants of parents with depression have been found to have difficulties with self-quieting, lower activity levels and decreased ability to attend. Relative to the children of nondepressed parents, their affect tends to be more negative, as typified by increased likelihood of expressing sadness and anger.*

Web Sites

Infancy is a unique and wondrous time of life. This unit focuses on providing consistent, one-on-one relationships with infants and toddlers in group settings. Quality Relationships Group care for infants requires a commitment to sustain caring relationships with each baby and her family. In infant care settings, it is the quality of relationships that determines the quality of care. It takes time and consistent contact for babies to intimately know and trust caregivers outside the family circle. Crying Babies come into the world ready for relationships. They tell us how they feel and what they need through their expressions, body movements and by cooing, babbling and crying. They cry to tell us that they want or need something to happen - a diaper change, a bottle, a nap, a hug. Each baby has his own personality and style of communication. Routine Care in the Nursery Routine caregiving tasks such as feeding, diaper changing and toilet training provide opportunities for affectionate one-to-one contact with each child. In addition, infants need an atmosphere of peace and tranquility in order to thrive. Too much stimulation, such as bright lights, too many children in a group or constant noise, overwhelms infants. Be sure to hold each baby during bottle-feeding. Sanitizing measures and handwashing are essential before and after feeding, diapering and toileting. Follow strict universal precautions when touching or handling bodily fluids. Babies in group care tend to get sick more often than they would at home. Their immunities to infectious disease are just beginning to build, and they are in close contact with other infants and adults who pass on germs. Infant and toddler teachers must follow stringent health and safety measures. Remember to disinfect toys and surfaces on a daily basis; make sure adults and children wash hands frequently, and establish clear illness policies that keep contagious children and adults away from the nursery. Daily communication is the foundation for a trusting relationship between teachers and family. Effective communication can be maintained through day-to-day contact during arrival and departure times, written notes, telephone calls and scheduled meetings.

Infants with Disabilities Our approach to working with infants with disabilities is essentially the same as with other babies. Our goal is to recognize the abilities and meet the individual needs of every youngster. For children with special needs, this may involve careful supervision of daily routines such as adapting for a child with severe allergies or using a special nipple for a child whose cleft palate is undergoing repair. Always be sure to get correct medical information from knowledgeable specialists and family members. Talking with Infants Babies love to hear language and respond by cooing, babbling and making sounds that gradually resemble adult speech. Throughout the first two years, children are attaching meaning to words and understanding a lot more than they can say. We can also give them new words to expand their language, thus building a richer, more expressive vocabulary in later years. Safe Exploration Young infants need many opportunities to explore their world through the senses of sight, sound, smell and touch. As infants begin to crawl and then walk, they seem to get into everything. With these things in mind, conduct daily room and outdoor area inspections. Conflict Independence, self-assertion and control are central issues for toddlers. Toddlers often insist on having their own way and when a toddler wants something, he typically wants it intensely and immediately. We can help reduce the amount of conflict by looking at our program through the eyes of the child: Are there enough materials and equipment to go around? Does each child have enough time and space to fully explore? Are there many small appropriate opportunities for him to make choices and decisions? Children can be frightened by their own feelings and actions, and they rely on us to remain calm. We can help toddlers work through problems if we remember to stay calm. In simple language, say what the limits are and what will happen if the rules are not followed. Be sure to offer simple opportunities for appropriate choices. It is not uncommon for babies at this stage of development to become distraught and miserable when their parents or caregivers leave the room or apprehensive when a stranger approaches. Here are some suggestions for dealing with separation and stranger anxiety: Try to avoid enrolling a new infant into a group program when she is at the peak of her

anxiety. Arrange for the child to visit before spending the whole day. Encourage the parent to stay until the child feels comfortable. Encourage parents to telephone if they are concerned. Develop a ritual for separation with each family, so the infant comes to understand that separation is a part of each day that is predictable and manageable. Use a special blanket, stuffed animal or other object from home as a "transitional object" to comfort the infant while separated from loved ones. Tell the baby with your words and behavior that you will take good care of him while his family is away or while in the presence of a stranger. Make sure your center is comfortable and comforting for infants, and that there are plenty of interesting activities and materials for the baby to engage in once she has calmed down.

### 9: Information on Raising Healthy Children for Parents with Infants & Toddlers (Ages ) | CDC

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