



Companion Guide



Minnesota's Knowledge and Competency Framework for Early Childhood Professionals:

Working with Infants and Toddlers

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The companion guide combines key concepts found in the framework with suggestions and examples of what it might look like in an early childhood setting. It is intended to help people working with young children have a beginning understanding of what to do. This Companion Guide does not replace the original framework, but supports it.

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Companion Guide to Minnesota's Knowledge and Competency Framework for Early Childhood Professionals: Working with Infants and Toddlers

This document is a companion guide to the publication *Minnesota's Knowledge and Competency Framework for Early Childhood Professionals: Working with Infants and Toddlers*.

That document can be found on the [Early Learning Resources page on the Minnesota Department of Education website](#).



Why is this companion guide needed?

Minnesota's Knowledge and Competency Framework describes what early childhood educators and providers need to know and do in order to work effectively with young children and their families. The companion guide combines key concepts found in the Framework with suggestions and examples of what the concepts might look like in an infant-toddler setting. It is intended to help people working with young children have a beginning understanding of what to do. This Companion Guide does not replace the original framework but supports it.

For whom is the Companion Guide written?

This guide is for all adults who work with infants and toddlers. The information emphasizes essential, basic skills and competencies. Although other terms are used in the community (teacher, caregiver, provider, etc.), this document uses the term “educator” to refer to this group of professionals. Infant-toddler educators work with children under age 3 in group settings such as family child care programs, child care centers, Early Head Start, school-based programs, and others.

About the organization of this document

The Companion Guide is divided into the same ten areas as the *Knowledge and Competency Framework for Early Childhood Professionals: Working with Infants and Toddlers*:

Cultural Responsibility and Practice has been woven throughout all of the competency areas.

I. Child Development and Learning

II. Developmentally Appropriate Learning Experiences

III. Relationships with Families

IV. Assessment, Evaluation and Individualization

V. Historical and Contemporary Development of Early Childhood Education

VI. Professionalism

VII. Health, Safety and Nutrition

VIII. Application through Clinical Experiences

IX. Trauma Informed Care and Practice

X. Working with Multilingual Children and Families

In 2020, three additional areas were added to the competencies: Cultural Responsibility and Practice, Trauma Informed Care and Practice (Competency IX), and Working with Multilingual Children and Families (Competency X). Two of the additions are identified as separate competency areas. The Cultural Responsibility and Practice theme is woven throughout the document and is present in all the other competency areas to reflect the ways that culture affects all parts of a child's life. Sometimes Cultural Responsibility and Practice is designated as a “key concept;” other times it is reflected by examples in a key concept bullet point. See the *Knowledge and Competency Framework for Early Childhood Professionals: Working with Infants and Toddlers* for more information about levels of competencies.

The ten areas are further divided into what providers should know and do at a very basic level. Some sections list further examples of knowledge and skills expected of providers as they grow and gain experience. Occasionally, you will find additional items that represent a deeper understanding that apply particularly to leaders in the field. The Companion Guide also includes a few “stories from the field” that help illustrate the knowledge and skills needed to provide quality early learning experiences.

At the end of the document is a section titled “Want to learn more?” It contains books, articles and websites that provide helpful additional resource information.

Six things every caregiver should know about infant-toddler care

Together, the following points of knowledge create a foundation that all caregivers can use to increase their knowledge and to build skills with infants and toddlers.

1. Relationships are at the heart of infant-toddler care.

Educators build relationships with children when they get to know each individual child’s likes and dislikes, needs, and personalities. Caregivers create a welcoming place where all children feel they belong and learn to welcome and include one another. When adults treat children with respect, children learn to respect themselves and others. Building relationships with families takes time and planning. In a true partnership, families and caregivers bring equal value to the relationship and respect one another’s beliefs and practices.

2. Birth to 3 represents a period of rapid growth and development that is critical to the foundation of a healthy human being.

Infants and toddlers are both competent and vulnerable. The care children receive during this critical period will have a powerful influence on how they view the world, relate to others, and succeed as learners. Educators have a unique opportunity to make a difference in the lives of very young children and their families. Children who receive nurturing, consistent care are more likely to thrive and become sociable, capable children who get along with others, demonstrate self-control, and love learning. Development can be at risk not only by delay or disability, but also by a number of traumatic or stressful experiences. Nurturing and responsive care and education for children whose development may be at risk can help a child develop resilience and skills needed for success in school and in life.

3. Infants and toddlers develop in the context of their families, cultures, and communities.

Young children learn by observing the important people in their lives. Their families’ home cultures shape children’s understanding of which emotions to express, and how and when to express them, the rate at which they develop motor skills, the way they learn and process new information, and the ways in which they use verbal language, facial expressions, gestures, and silence to communicate. Culturally responsive educators honor children’s cultural identities throughout daily practice, interactions, and routines. Caregivers must make this effort with families from all cultural backgrounds (including their own) because each family expresses their culture in unique ways. Children’s relationships with others impact their development.

4. All children need a rich, engaging environment that is physically and emotionally secure.

Nurturing and responsive care and education helps children develop secure and trusting relationships which support exploration and development. Interesting environments with clear boundaries help children to explore and learn. Engaging environments nurture children of all ability levels as well as those with special needs. Consistent, nurturing routines help children build trust and independence, encourage secure attachments, and support development and learning.

5. Multiple abilities and skills are developing simultaneously in a child's first three years.

Development is the result of the interaction between genes and experiences. Experiences and interactions make a difference in early brain development. Educators make many daily decisions about how and when to talk to children, which experiences to offer, and when children are ready to take a new step in their development. Educators who know what is taking place during this time of change and growth are better equipped to support that growth. Find more information about early brain development at www.zerotothree.org and Harvard's [Center for the Developing Child](#).

6. Knowing ourselves is part of caring for infants and toddlers.

All adults have personal, family, and cultural experiences and knowledge about young children. Educators build on what they already know and believe as they add experience and education. Education, experience, and interactions with families and co-workers may challenge early values and beliefs. Working with young children and their families can also bring up many emotions and reveal previously unrecognized biases. Educators need to reflect on their own feelings, reactions and pay attention to underlying feelings as they decide how to connect old information with new.

The Infant and Toddler Companion Guide to the Knowledge and Competency Framework was adapted and updated by Vicki Hawley in 2022 from the 2010 *Infant-Toddler Companion Guide to the Minnesota Core Competencies* and includes content reflecting the 2020 additions to the Knowledge and Competency Framework.

Content Area I:

Child Development and Learning

Young children's early experiences shape their fast-growing brains. Although young children develop in generally similar ways, each child's individual life experiences (as part of a family, a culture, and a community) can result in very different patterns of learning, behavior, and developmental outcomes.

Key concept: Responsive relationships are at the heart of all infant-toddler development and provide the basis for learning about self, others, and community.

All areas of development depend on the quality and reliability of young children's relationships with parents and caregivers, including educators and adults who work with them.

To provide quality care and education, providers:

- Closely observe individual children in order to get to know them. (How do they want to be held? Comforted? What sounds do they like? What bothers them? Which textures feel good – or not? When they cry, what are they trying to tell you?)
- Respond quickly and consistently to children's cues for attention so that the child knows they can count on familiar adults.
- Participate together in playful activities, sharing interest and affection.
- Demonstrate respect for infants and toddlers by using a calm tone, gentle approach and by letting them know ahead of time what you are doing and why. ("I'm going to pick you up to check your diaper.") Respecting infants helps them learn that they matter and how to respect others.

The Program for Infant-Toddler Care (<https://www.pitc.org/>) describes the **responsive process** as watch/ask/adapt. For example, we notice (watch) that Ana likes to be held so that she can see the other children, but José does not seem to like this position (ask). When they need comforting, we adapt the way we hold each child according to what they need. In this way, we get "in tune" with individual children.

As educators grow in knowledge, skills, and abilities, they:

- Support early brain development by providing experiences and interactions that are stable, warm, and responsive to individual cues.
- Learn to read subtle signs and gestures to demonstrate empathy and respect.
- Acknowledge all children by smiling, talking, or interacting, whether or not they frequently send signals for attention. Some infants make it clear that they want adult attention by crying, talking, or movement; other infants may lie contentedly under a mobile and yet still benefit from adult acknowledgment. A smile, wave, or comment (“Sara, I see you kicking your feet”) lets an infant know, “I see you” and “you matter.”
- Practice “serve and return” as a way to build brain connections and facilitate development. (See the Key Concept on page 7 for a definition.)
- Seek professional development to gain more understanding of brain development and meaningful interactions as the foundation for further development across all domains.

As educators design and lead, they:

- Define examples of interactions that support responsive care and attachment to parents and other adults who work with young children.
- Provide professional development and ongoing support that helps staff understand key developmental concepts and processes (including brain development, attachment) as well as challenges/threats to development.
- Plan and facilitate program-level relationship-based practice to support a sense of belonging for children and families and structure the environment to provide for small groups, primary caregivers, individualized care, and continuity of care.
- Regularly assess, evaluate, or provide feedback on classroom routines and interactions that support responsiveness.
- Offer reflective practice opportunities to consider the role of development and experiences that support and/or interrupt it.

Key concept: Birth to three is a period of rapid growth and change. While development occurs in predictable patterns, infants and toddlers develop at individual rates.

Birth to three is an age of rapid growth across multiple developmental areas, sometimes requiring caregivers to adapt in the moment. For instance, from one day to the next an immobile infant is able to crawl, or a toddler is ready to help pass serving bowls at mealtime. Although infants and toddlers develop in similar ways, each child’s individual genetic makeup and life experiences (as part of a family, culture, and community) can result in very different patterns of learning, behavior, and developmental outcomes.

To provide quality care and education, educators:

- Realize that individual children learn and grow at different rates.
- Know what to expect and when to be concerned about infants and toddlers at different ages and stages.
- Help infants and toddlers adjust to new discoveries and abilities.
- Change the environment so they can use their developing skills.
- Observe and respect what each infant can do. For instance, one infant may crawl at six months and benefit from toys that are placed further away while another infant may be sitting up at the same age and benefit from toys that are reachable. Understanding processes of development allows educators to meet individual needs and add challenges that promote next steps without frustrating the infant.
- Adapt the environment as infants grow (become mobile, increase in motor skills, social interactions, etc.).
- Know each child well enough to notice when they are ready to transition to or away from particular types of play (loud, active, quiet, calm, etc.).
- Adapt the sleeping, eating, and care routines as needed for individual children.

As educators grow in knowledge, skills, and abilities, they:

- Seek continued education about how children typically grow and learn, as well as what to look for when a child is not developing as expected.
- Set learning goals and plan experiences that help each child reach the next step in development. For example, place interesting toys near infants to encourage them to reach for the toy.
- Notice how developmental areas overlap with and affect each other. For example, once a toddler is able to use language to express their needs, emotional frustration or tantrums may decrease.
- Adapt interactions to match children's changing abilities. As an example of adjusting guidance strategies, an educator might see a mobile infant crawling near a younger infant lying on a blanket and redirect the mobile infant by sitting between the two. When an older toddler approaches the infant on the floor, the educator might say, "remember to walk around the blanket" (and then watch closely to be sure the toddler does so.)
- Provide materials and experiences that fit and challenge each child's individual needs, abilities, and interests.
- Uses state learning standards (the Minnesota Early Childhood Indicators of Progress) for planning learning experiences.
- Seek to include children with disabilities in all possible ways in the group, supporting their experience to be as normative as possible.
- Seek information about community resources (referrals) when concerned about development.
- Explain to others what choices they make for individual children and groups and why they make those choices.
- Use observation and documentation to track children's developmental changes and plan experiences accordingly.
- Recognize the role of trauma and stress in development, particularly in regard to a child's behavior and overall development.

As educators design and lead, they:

- Provide resources, training, and reflective practice on temperament traits and how the “goodness of fit” between children and caregivers can support development.
- Use knowledge of each individual child’s temperament and goodness of fit when assigning primary caregivers in center-based care.
- Go beyond relying on learning experiences that have been developed by others and create activities that address an individual child’s needs.
- Are able to share information with others (parents, caregivers) about how development is influenced by biology, family, and culture.
- Support colleagues with information, resources, and referral sources to address concerns about child’s development.

Key concept: To deliver high quality infant-toddler caregiving, adults need to understand and recognize key developmental processes that are rooted in relationships and impact infant brain development: serve and return, executive functioning, and toxic stress.

1. **A process called the “serve and return”** interaction between young children and their parents and caregivers is key to healthy brain development (Shonkoff, 2009). Serve and return uses the image of a tennis or volleyball match and occurs when young children seek interaction through their babbling, gestures, facial expressions, touch, or focusing on an interesting object or event (the “serve”). Adults respond (“the return”) when they share and support the child’s experience or focus of attention. The serve and return interaction helps to create neural connections in the brain that build later cognitive and emotional skills such as self-control and language. See <https://developingchild.harvard.edu/resources/5-steps-for-brain-building-serve-and-return/>
2. **Executive function** means the cognitive skills that help a child focus on, remember, and think about information; filter distractions; and change their attention to something new. The foundation for executive functioning is laid in infancy and is helped by early experiences. “Acquiring the early building blocks of [executive functioning] skills is one of the most important and challenging tasks of the early childhood years. The development of executive function skills begins in infancy and the opportunity to build further on these rudimentary capacities is critical to healthy development through middle childhood, adolescence, and into early adult life” (Center on the Developing Child at Harvard University, 2011).
3. **Toxic stress** is defined as strong, frequent, and/or prolonged hardship without enough adult support (e.g., extreme poverty, neglect, abuse, or severe maternal depression). Toxic stress disrupts brain development. Some experience with manageable stress is important for healthy development, but long-term, uninterrupted, overwhelming stress—that is, toxic stress—without the buffering relationships a child needs can result in damaged, weakened systems and brain structure that can have negative long-term effects (See “Adverse Childhood Experiences” <https://developingchild.harvard.edu/resources/aces-and-toxic-stress-frequently-asked-questions/> Center on the Developing Child at Harvard University, 2010, 2006).

Key concept: Each infant's identity is shaped by family, culture, and community.

To provide quality care and education, educators:

- Listen to individual family's desires for their child's identity development.
- Make sure images of all children's families and their daily lives are represented in the early childhood environment. For example, post photos of family members, pets, or homes, and talk about them during the day.
- Open up conversations between educators and families that lead to understanding.
- Create a community where children notice and care about each other. For instance, comment when children help each other or post photos of children playing side by side or together.

As providers grow in knowledge, skills, and abilities, they:

- Develop deeper understanding of traditions, values, and expectations of the various cultures of the children in the group, especially in terms of child-rearing.
- Talk with families about how they do things at home and use that information to make the child feel welcome and comfortable. For instance, ask about how their child prefers to be held or comforted; find out and offer foods, textures, or favorite stories. If a language other than English is spoken, ask families to teach them words in the home language that are used often during the day so that children will hear a few familiar words.
- Hold a space of "cultural humility" without assuming what families may want or think. Ask questions with honest curiosity when you need to know information that will help you get to know and care for their child.
- Set aside time for conversations with families that lead to shared decision-making.
- When families ask you to adapt a routine to follow their home routines, listen respectfully and adapt when possible. For instance, follow family preferences about snacks; or, if families offer a bottle after their child wakes up from a nap (instead of before), adjust to fit their preferences.

As providers design and lead, they:

- Develop deeper understanding of the various cultures or people groups within your broader geographic community. "Every individual is rooted in culture; culturally relevant . . . programming requires learning accurate information about the cultures of different groups and discarding stereotypes [and] addressing cultural relevance in making curriculum choices and adaptations as a necessary, developmentally appropriate practice." (from *Multicultural Principles for Head Start*, ACF, 2010).
- Explain to others how child development is supported when the environment, routines, and activities that reflect cultural preferences. (For example, some cultures support community and sharing by feeding young children until they are able to use utensils without spilling; other cultures support independence and self-reliance by having children feed themselves from an early age despite spills and messes.)
- Provide a variety of learning opportunities in home language.
- Act as cultural bridge among groups by facilitating respectful conversation and modeling non-judgmental responses with and among families.

Key concept: All areas of development are rooted in culture and vary in and amongst cultures and families.

As an example of how culture weaves through all other elements, consider language learning. Culture influences who speaks to whom and when and how conversations occur. Culture affects which language the infant or toddler is learning, of course, but it also affects how language is learned and used (Pan, Imbens-Bailey, Winner & Snow, 1996).

To provide quality care and education, educators:

- Recognize skills, abilities, and strengths in children that may be cultural in nature, such as when it is acceptable to talk and listen, or how to communicate their needs.
- Notice own use of terminology and how we support or don't support behaviors in diverse children across developmental domains. Ask for feedback from mentors when we are unsure about terminology.

As educators grow in knowledge, skills, and abilities, they:

- Recognize images of culture in the early childhood environment, noticing (and addressing) when groups are represented or under-represented.
- Choose images that counter stereotypes and reflect similarities and differences within every group and between groups. (Derman-Sparks and Olsen-Edwards, 2020)
- Choose books and other materials that reflect all children's cultures, languages, socio-economic statuses, and family structures.
- Support discussion and conversation about children's and families' attributes, showing empathy and caring for all children. (Derman-Sparks and Olsen-Edwards, 2020)
- Respectfully encourage the abilities and skills children display that may be different in cultural practices, such as verbal skills, interdependence, eye contact (whether it is respectful or disrespectful), ways of greeting others, or being acknowledged by an adult before speaking.
- Ask families questions about what and how they teach their child about aspects of their identity and what terms are used at home to describe those identities. (Derman-Sparks and Olsen-Edwards, 2020)
- Observe, listen carefully, and document what you see in children's play and hear families talking about; follow their cues when choosing activities, managing routines, and discussing community events and issues.

As educators design and lead, they:

- Co-create environments with coworkers, families, and community members to ensure appropriate representation of children and family members in environment and program expectations.
- Advocate for professional development for early care and education professionals related to culturally based expectations, an asset-based approach, promotion of culturally based skills and abilities, and anti-bias education.
- Invite or host family events where families and early childhood professionals have opportunities to share information to learn about interests, traditions, and cultures.



Stories from the field:

Annie, an infant teacher in rural Minnesota, had been caring for 9-month-old Kali for two weeks. One day at pick-up time, Kali's mom, Melissa, said she was worried because Kali wasn't crawling like the other children her age. Annie asked Melissa to describe what she and Kali did during a typical evening together. Melissa's eyes shone as she shared that the first thing she does when they get home is to put Kali in the stroller and go for a walk through the park. After their outdoor time, they come home, and Melissa makes supper while Kali sits near her in her highchair. After supper they spend time rocking and reading stories before bath and bedtime. Annie listened carefully, and then supported Melissa on her nurturing care and the importance of her consistent daily routines. "You are building a strong attachment between the two of you." Annie then asked Melissa if there were times when they could play together while Kali is on her tummy. During the resulting discussion about the opportunities for play and floor time, Annie shared how tummy time was one way to strengthen Kali's upper body as she pushes up and reaches out for toys.

Strategies:

Seeks to understand routines, listens first.

Supports strengths, affirms consistent routines, relationship.

Asks first (about routines). Shares opportunity for building core body strength during their time together in play in the context of finding out about family routines.

Content Area II: Developmentally Appropriate Learning Experiences

All children need a rich, engaging environment that is physically and emotionally secure.

Key concept: Children need physically and emotionally safe and healthy environments in order to explore, experiment and learn.

Learning environments may look very different from one another and include homes, classrooms, yards, playgrounds, neighborhoods, and the larger community.

To provide quality care and education, educators:

- Promote a welcoming, safe, cozy, warm environment. Display pictures of the children and their families and place them and toys at the child's eye level.
- Recognize that repeated positive experiences help infants develop good “brain architecture.” (Center for the Developing Child, Harvard, <https://developingchild.harvard.edu/science/key-concepts/brain-architecture/>)
- Build a positive relationship with each child, responding to infants whether or not they are seeking attention.
- Accept and appreciate each child's growing ability to do more on their own by giving them the time, space, and materials they need to practice and accomplish new tasks.
- Use child-sized furnishings that are comfortable and toys and materials that promote growth and learning, some of which are familiar and look like those found in the children's homes.
- Change the environment as needed for children with disabilities or special health care needs.

As educators grow in knowledge, skills, and abilities, they:

- Understand that it takes time and practice to figure out what a child needs to feel emotionally safe. Responsiveness comes from repeatedly observing the child, attempting to read their cues, adapting behavior, and then reading the cues again. Not every caregiving act will be in tune since responsiveness includes trial and error.
- Set up spaces that send positive messages to children: I belong here, I am safe, and there is room to explore and discover. For instance, toddlers find their picture when they arrive (put it on a magnet board, in a cup, etc.); pictures on cubbies; art and photos posted of their experiences in the environment; use calming touches and affection; invite toddlers to help (put napkins in the trash, sweep with child-sized broom, wipe tables) alongside adults.
- Design and adapt environments to support experiences across all developmental areas so that children are both comfortable and appropriately challenged physically, cognitively, and socially.
- Use routines (feeding, changing diapers, napping) as teaching opportunities for conversation/language, social/emotional connections, and fine and large motor skills.

- Offer choices in materials that challenge children’s skills without frustrating children.
- Ensure there is plenty of space for children to explore materials. Support play by offering the least amount of help needed to keep it going (“scaffolding” instead of “rescuing”).
- Use furniture and gates to define spaces, for example, to protect infants playing on the floor or to keep building blocks from being knocked down.
- Persevere in finding ways to meet needs of children with disabilities so that they are an integral part of the group.

As educators design and lead, they

- Examine the environment and determine ways to improve workflow, space available and access to materials.
- Ensure the environment is culturally and linguistically responsive.
- Write policies and job descriptions for teaching staff so that “primary care” and “continuity of care” are practiced in their agency or center to the highest possible degree.

What is “primary care?”

Primary care offers regular and consistent care from one familiar adult and gives infants and toddlers the opportunity to build deeper relationships with an adult who can support their individual interests, abilities, and needs. In a primary care system, each child is assigned to one special infant/toddler care teacher who is principally responsible for that child’s care throughout the childcare day. Primary care works best when infant/toddler care teachers team up and support each other and provide a back-up base for security for each other’s primary care children. Primary care does not mean exclusive care. It means, however, that all parties know who has primary responsibility for each child. For further information, visit the resources library at the Program for Infant-Toddler Care at www.pitc.org.

Key concept: Children learn trust and feel secure when they have predictable routines that meet their needs for activity, interaction, food and sleep.

To provide quality care and education, educators:

- Provide predictable daily routines that meet the needs of children to eat, rest, move and play both indoors and outdoors. Children gain confidence when they know what happens next.
- Adapt the sleep, eating, and care routines as needed for individual children.
- Let children know before picking them up or moving them (“Here, let me wipe your nose” - communicating intentions - is a way to show respect and help the infant know what will happen next.)
- Talk, sing, and offer toys to children as they change diapers, feed, and put infants and toddlers to sleep.

As educators grow in knowledge, skills, and abilities, they:

- Adjust the routine and schedule to best meet the needs of individual children as they grow.
- Support predictable and consistent daily routines (example, hellos/goodbyes, diapering, napping, feeding) by:
 - posting a daily picture schedule that helps children and families to know what to expect. (Given the infant's age, a picture schedule is recommended.)
 - adapting to the individual needs of children and their families.
 - using routines as one-on-one opportunities to build closer relationships.
- Look for opportunities to support peer connections during routines. For example, turn children's chairs toward each other during mealtime.
- Include times during the day, when children play alone, in small groups and as a large group.
- Provide "unhurried time" and attention, using quiet and calm actions to match the child's pace. (Christie, 2018)

As educators design and lead, they:

- Reflect on and continually adapt the schedule and routines to support children.
- Recognize and explain to families and others the importance of talking with children, sharing activities together and engaging children in play.

PROMOTING COGNITIVE DEVELOPMENT: COMMUNICATION

Key concept: Infants and toddlers are born communicators who learn about language through important relationships, routines, and back-and-forth interactions.

To provide quality care and education, educators:

- Respond to infants' cries, coos, gestures, and facial expressions to let them know they care and want to communicate with them.
- Talk to infants and toddlers to support the development of speech, self-esteem, and an understanding of how we use words to communicate our needs, wants, and feelings.
- Watch and pay attention to when children need quiet and when they need interaction with others.
- Notice a non-verbal child's gaze and share in activities as they demonstrate interest. (In infant development, this is known as "joint attention" and is a key practice in responsive caregiving. For example, when the adult sees a young infant looking at a toy, respond by talking about the toy and/or helping the infant get the toy.)
- Respond to an infant's awareness of cause and effect. For example, comment when a baby kicks the rattle with his feet and looks startled ("Your feet made that rattle move!") or exclaim, "Oh, you pushed the button and it popped up!" when the baby plays with a pop-up toy.

- Use routines as opportunities for language interaction. For example, diapering is a rich 1:1 opportunity to get to know each other, use language, and learn new concepts. Educators can name body parts and play games. Talking with and encouraging the child's participation during routines supports feelings of competence and facilitates language development.
- Respond to infants' communication attempts by imitating, responding to, expanding on, and providing language (Adult: "ba-ba-ba, you see your bottle?" – pause – "Oh, you're telling me you want your bottle? Here it is!")
- Read books and tell stories. Use the books as an opportunity for conversation and connection.
- Talk about what the child is doing by describing the child's action. "You're putting that block in your mouth."
- Provide play opportunities and materials that encourage conversations. For example, use props such as play telephones or a pretend microphone (recognize that the choice of props depends on what is familiar to children from their home or the learning setting); older toddlers are beginning to play pretend with objects and use more words, so offer dress up materials, (even simple capes or scarves), kitchen utensils and tools, or set up a pretend store with labels on the boxes. (Again, consider what would be familiar to children in their own communities).

To think about: Communication

Communication includes both verbal and nonverbal messages. Newborn infants see best at a distance of about 8 to 15 inches, which is about the distance your face will be when feeding, holding, or playing with them. Babies find human faces to be one of the most interesting things to look at, so facial expressions play a key role in communication. Babies hear sounds, such as their mother's voice and heartbeat, before they are born. Newborns are especially fascinated with the human voice. They know and prefer their parents' voices. They are capable of hearing all speech sounds of all languages. If they do not hear a lot of language from the very beginning of their lives, the brain areas for the perception of speech do not develop normally. Babbling usually begins about 6 months of age. Its absence beyond this age may indicate a developmental problem.

As educators grow in knowledge, skills, and abilities, they:

- Talk to children, describing what the educator is doing ("self-talk") or what the child is doing ("parallel talk") as educators feed them, change them, and help them go to sleep. For example, "I'm picking you up now and putting you down on the diaper table. I'm going to take off your diaper." Or "You're kicking your little feet and smiling—are you happy to see your friends?"
- Sing songs and play with language, using rhymes and gestures, repeating them many times to help babies learn language.
- Give names to objects and actions. If a child is looking intently at something such as a wooden spoon, label the object by saying, "That's a wooden spoon." Point out the names of objects ("diaper," "bowl," "water") as the two of you are using them. Identify actions as they happen.

As educators design and lead, they:

- Know who to ask (such as a parent or speech and language therapist) to provide an environment that encourages language development for all children, including those with language delays and other special needs.

Key concept: Between 16 and 36 months, children’s ability to say words (expressive language) moves from one or two words to full sentences. This developmental period is sometimes called the “language explosion.”

To provide quality care and education, educators:

- Make language a part of playtime. Even a simple game such as peek-a-boo demonstrates the link between language and social interaction.
- Expect and accept mistakes—children are still learning. For example, if a child says, “I want nanas,” the adult models (instead of correcting) by saying, “Oh, you want bananas.”
- Ask questions. Older toddlers begin to respond to open-ended questions like, “What do you want to have for lunch today?” or “What did you play at grandma’s house yesterday?”
- Tell stories that use new and descriptive words and relate the new words to something familiar. “On this page (of the book) they are walking through the prairie. A prairie is like when there is a lot of long grass. You know how grandma has a big yard? If she did not mow her grass it would start to look like a prairie.”
- Play games, sing songs, and read books that include imitation and patterns.

As educators grow in knowledge, skills, and abilities, they:

- Encourage conversations during snack or mealtimes, play time, arrival and departure and all other routines of the day.
- Notice communication attempts and provide words for children who are not yet verbal. For instance, say, “Oh, are you telling me you want the tambourine?” as the infant reaches toward the instrument.
- Use looks and gestures to communicate. For instance, look at and point to an object when you want a young child to focus. This helps children learn to direct their attention. (Galinsky, 2018)
- Encourage child to ask questions, wonder what will happen and solve problems.
- Help children talk to one another, including opportunities for children to engage in home language conversations.
- Encourage children who are learning more than one language to feel confident as they try to communicate using a new language.

Stories from the field:

Alona, a family child care provider, supports language during routines (arrival and greeting) when 13-month-old Sasha arrives at the door with her father. Alona hears a knock at the door. “Sasha, good morning! It’s good to see you here today!” Alona greets Sasha’s father and asks how their morning went. Then Alona says, “OK, I’m going to unbutton your coat—1-2-3, 4 buttons! Now out comes one arm and now the other arm. Here, you can help me put it on the hook.” Sasha hugs her daddy and says, “bye-bye” and reaches out for Alona’s hand. “Sasha, you told your daddy bye-bye and off he goes. Let’s go in the kitchen for breakfast. Look, I think we have oranges and toast today.”

Strategies:

Greets with positive communication.

Self-talk.

Parallel talk.

Repeats and extends child talk; describes actions.

Labels items.

PROMOTING COGNITIVE DEVELOPMENT: LITERACY/NUMERACY FOUNDATIONS

Key concept: Infants learn about and develop an interest in books and writing through meaningful, active exploration and exposure.

To provide quality care and education, educators:

- Read simple picture books together and let the child interrupt to point to objects and say their names.
- Read books with children individually, in small groups, and in various settings (for example, the block area or housekeeping area).
- Provide opportunities to draw/write on paper with writing tools such as markers, crayons and paint.

As educators grow in knowledge, skills, and abilities, they:

- Read and write during the day and talk about why, such as “Oh, I’d better write that appointment down so that I can remember it.”
- Use and talk about environmental print. Examples of environmental print are traffic signs in the neighborhood, labels in the classroom or home and posters in a store.
- Read predictable books. Ask the children to complete lines of predictable text (“The spider was very busy spinning his ____.”)

Key concept: Children learn mathematical and scientific concepts by exploring and experimenting with the things around them.

To provide quality care and education, educators:

- Use math words like “more,” “less,” “over,” “under,” “taller,” and the names of shapes and numbers.
- Use numbers in everyday activities such as counting as you go up or down stairs, take of two shoes, play finger games, or talk about sequence (“First, I need to wash my hands.”)
- Have plenty of materials for exploration and discovery (items from nature, toys, and objects to handle, sort, and stack). These experiences support children’s classification skills (the ability to notice differences/ similarities in order to sort objects into categories). Some items (puzzles, shape sorters) have one outcome and provide immediate feedback about how things fit in space and relate to each other.
- Use movement to teach a variety of skills, for example, jumping four times to teach the quantity of four.

As educators grow in knowledge, skills, and abilities, they:

- Help children recognize patterns.
- Use language that includes math concepts such as patterns (“You’re wearing stripes today”), measurement (“You had a long nap!” “That’s a heavy bucket”), comparison (“Your diaper was wet and this one is dry,”), and sorting (“You put the baby with the bottle.”) (Luckenbills, 2018)
- Recognize how young children develop an understanding of quantity. For example, children understand “more” and “all” before they understand “one” and “two.”
- Help children become observers by asking questions and making predictions. For instance, while watching an insect, ask about and comment (depending on the child’s verbal skills) on what it is doing and wonder what it might do next. Watch to see if the prediction is right.
- Provide materials and opportunities to explore spatial relationships (including distance, perspective, size relationships, gravity, speed, and balance), such as:
 - toys that move through space, fit into spaces, or can be filled (roll balls through tubes or into buckets; coffee cans, wagons).
 - small cups and scoops, such as measuring cups or spoons to experiment with pouring different amounts.
 - items that can drop into containers (to demonstrate gravity), such as pom poms that can drop into a coffee can with a hole cut in the plastic lid.
 - materials of different shapes and sizes. For example, provide a variety of balls for an infant (soft, hard, small, bumpy, cloth) or items that can be stacked for toddlers (wooden blocks in a variety of shapes).

As educators design and lead, they

- Give parents ideas about how to do simple math and science activities at home.

PROMOTING SOCIAL-EMOTIONAL DEVELOPMENT

Key concept: Social-emotional development is the primary task of infancy; it impacts all other domains and lays the foundation for later development. Social-emotional development grows in the context of safe, nurturing relationships.

Infants and toddlers develop a sense of self by how they are treated by their parents and caregivers. When adults offer young children experiences that support positive emotions and help them successfully deal with negative emotions, children learn how relationships and interactions work. When children are treated with respect, they learn to respect themselves and others. In these ways educators encourage the beginnings of self-identity, language and communication, and the child's cognitive and physical skills/competencies.

To provide quality care and education, educators:

- Sit on the floor and play with children.
- Look at, listen to, and respond promptly to infant and toddler cues.
- Gently touch, hold, and cuddle infants; soothe crying infants.
- Model positive emotions and appropriate responses to negative situations.
 - Recognize, respect, and label feelings in children and ourselves. For example, say, “I see you are sad that Daddy is leaving; he will be back to pick you up.” Or, “I’m so happy to see you this morning.”
 - Recognize and respond to signs of stress by offering consistent routines and a reliable nurturing relationship and by comforting the child.
- Show pleasure in activities and accomplishments; match the child’s positive emotions (“I see those new shoes! And they are purple, your favorite color!”)
- Ask for children’s input and opinions.
- Become familiar with the child’s ways of calming and seeking comfort.
- Use caring words to let children know they are valued, understood, and respected.
- Use the child’s name.
- Provide warmth, sensitivity, nurturance, acceptance, and safety.

As educators grow in knowledge, skills, and abilities, they:

- Figure out ways to interact with more than one child at a time, such as singing with one child while rocking another.
- Promote perspective-taking. (“Julie, Ali can’t see when you are up on your knees in front of him. Please sit on your bottom.”)
- Recognize that strong nurturing relationships provide a buffer for stress and trauma.
- Use positive statements to guide children’s behavior so they learn what to do. For example, say, “please sit in the chair” instead of “don’t stand on the chair.”

- Support continuity across the child’s relationships and environments by including sights and sounds that are like those of children’s own homes. Let children keep favorite items (for example, blanket, toys) in a special place.
- Talks honestly and respectfully about similarities and differences that children recognize in people, families, and communities.
- Promote inclusion of all children and increase opportunities to encourage acceptance of individual differences.

As educators design and lead, they:

- Establish smooth transitions across the program that are efficient and infrequent.
- Partner with family members to prevent challenging behavior and respond in consistent ways at home and child care where possible. (Follow licensing regulations if the parent requests responses to behaviors that are not allowed.)
- In center-based settings, consider continuity of relationships (adult-child and child-child) when transitioning children to another age group. Provide short times in the room with familiar adults and peers, transfer to the new environment over time, preferably several children at a time. Consider ways to move caregivers with children when possible.

Key concept: Infants and toddlers need support as they are beginning to learn to calm themselves, express their feelings and pause before reacting to situations.

Infants and toddlers are not expected to “have” self-regulation; however, the seeds of self-regulation are planted during the infant-toddler period and activated and supported later.

To provide quality care and education, educators:

- Model self-control in their own behavior.
- Accept and appreciate each child’s growing ability to do more for themselves and others.
- Respond consistently to each child’s needs.
- Give toddlers clear specific expectations and simple rules such as, “Walk when you’re inside,” or “Please put the pegs in the basket” (instead of “Please clean up”).
- Give toddlers opportunities to choose or to say “no.” “Would you rather pick up blocks or markers?”
- Provide multiples of favorite toys to avoid conflict.
- Provide opportunities for toddlers to do things independently, such as climbing up a step to the changing table or serving themselves from a serving bowl.
- Allow children to begin simple chores like dressing and wiping off cabinets.
- Encourage age-appropriate ways for children take care of their own eating, toileting, dressing and hygiene—and recognize their accomplishments when they try. Caregiving routines vary within culture and families, so include family members in making decisions about when children feed or dress themselves and how toileting proceeds.

As educators grow in knowledge, skills, and abilities, they:

- Support children’s decision-making and autonomy (a sense of personal independence and the ability to make choices and act on decisions) by encouraging them to choose their own activities. Give toddlers room and time to solve problems on their own or with others (when safety is not an issue), staying close and offering help when needed.
- Help children understand (or talk about) theirs and other’s feelings, such as happy, sad, angry, and distressed, through role modeling, books, and pretend play.
- Recognize when they do show self-control. For example, when the child looks at you and puts the block down instead of throwing it, say, “Thank you for putting the block down gently—when you put the block down gently you were being very careful.” This type of phrasing labels the child’s positive behavior.
- Redirect behavior with specific instructions: “Remember, we are cleaning up. You can pick up the red blocks and I’ll pick up the blue ones.”
- Prevent or redirect disruptive behavior by adjusting the schedule (avoid long or frequent transitions) and offering activities that are interesting and challenging yet doable (instead of too easy or too challenging).
- Help children learn to stop, take a breath, and think before responding to upsetting situations.

As educators design and lead, they:

- Realize that infants and toddlers can become overstimulated by the amount of noise and activity in large groups and adjust accordingly.
 - Arrange activities into small groups, where very young children are more able to focus on exploration and discovery.
 - Limit the number of adults and children in the overall group size. (Limiting group size helps young infants develop deep relationships and a feeling of trust in the world around them.)

Stories from the field:

Kyle (age 2) was moving the pieces of the puzzle, trying to get them to fit together. His face reddened and he threw the puzzle piece across the room and fell to the floor. Annie, the family child care provider, came over to sit nearby. After Kyle began to calm down, Annie acknowledged and showed she accepted his feelings when she said: “Not being able to finish that puzzle made you feel mad. Nishkendam (feel mad). It is scary to be so angry.” Next time you feel mad, you can ask me to help you.”

Strategies:

Develops “emotional literacy” by acknowledging and naming feelings.

Teaches positive options.

Once a tantrum has started, there is little to do except keep the child from hurting himself or others and let him know you are there. As he calms down, supports self-regulation skills.

Key concept: Infants and toddlers notice, imitate, and interact with peers, increasing these interactions over time.

To provide quality care and education, educators:

- Create a sense of community where children notice and care about each other.
 - Position young infants so they can see/hear one another.
 - Sit with the group of children at the table while eating.
- Describe their behavior when we see them being friends (giving a toy to a friend, patting a sad child on the back). Reinforcing behaviors that demonstrate empathy contributes to a child's emotional literacy.
- Share ideas that support play and positive interaction ("Oh, can you get the ball for the baby?" "Let's roll the ball back and forth to each other." "You can pass out the napkins at snack today.>").
- Provide opportunities for pretend play (caring for baby dolls, pretending to bandage animals at the veterinarian's office).
- Provide props that lead to interaction (toy phones, cooperative toys, climbing toys, rocking boats).

As educators grow in knowledge, skills, and abilities, they:

- Encourage older infants to work together by planning opportunities for children to work in a group and solve problems together.
- Help children learn through play by occasionally being a play partner, playing next to a child, or offering resources to support play.
- Observe children and notice challenges as they first begin to play with others. Based on your observations, arrange or comment on opportunities to practice new play skills over time. For example, say, "Jaime, I see that Angelis is ready to trade the blue crayon as soon as you are finished with the red one." Or set up a pretend pet store (which is usually an attraction for older toddlers) and ask which animals the children want to care for. Promote social interactions by comments like: "Asha, I see Luke is taking care of his pet in the pet store. Here is a bowl for you to give Luke so that he can feed the puppy. Which animal do you want to take care of?"

PROMOTING PHYSICAL DEVELOPMENT

Key concept: Infants and toddlers are developing strength and coordination in their large and small muscles and need opportunities to move their bodies as they grow.

To provide quality care and education, educators:

- Periodically put young babies on their tummies when they're awake so that they can strengthen their muscles and learn to use their arms to raise their heads and bodies and look around.
- Provide safe, interesting, and closely supervised places for mobile infants and toddlers, including safe places to roll, walk, run, jump, climb, and crawl into or around (for example, boxes, tunnels, and tables).
- Adapt (change, modify) physical activities for children with special needs.
- Take infants and toddlers outdoors as often as possible and allow them to explore.
- Provide opportunities for infants to practice reaching and grasping the caregiver's fingers or small objects and toys.
- Invite families to share music, rhymes, stories, dances, and games that they enjoy and that reflect their cultural practices.

As educators grow in knowledge, skills, and abilities, they:

- Play games that require physical actions, such as patty-cake, or songs that include motions, such as ring-around-the-rosie.
- Provide different kinds of balls to roll, throw or kick.
- Provide tools and materials for infants and toddlers with disabilities to explore and activate events in their environment (adapted handles, stabilizing materials, switches, etc.).
- Encourage many different positions during play (tummy time, supported sitting, and use of adaptive equipment for children with disabilities if necessary).
- Encourage families to participate in physical activities with their children, both inside and outdoors, and in natural settings like parks, whenever possible. How families view physical activities varies by culture so ask, listen, and encourage activities that fit their family life.
- Know who to ask (a parent, occupational therapist, physical therapist, speech, and language therapist) about how to best position (stand, sit, lay on their side, etc.) children so they can move and explore.

As educators design and lead, they:

- Support movement throughout the day across all types of activities.
- Observe regularly to identify, adapt, and/or order equipment and materials that support physical development.

PROMOTING CURIOSITY and CREATIVE DEVELOPMENT

Key concept: Children gain a sense of competence, enjoyment, and language when they explore and think about open-ended materials and sensory activities.

Open-ended materials can be played with in many different ways and develop flexible thinking, focus, and curiosity.

To provide quality care and education, educators:

- Choose toys and materials that are interesting for young children to investigate and that will gently challenge their developing abilities.
- Allow blocks of uninterrupted time for play and exploration.
- Comment enthusiastically on children's exploration, discovery, and play.
- Join in play with children to facilitate exploration, enjoyment, and language.
- Provide a variety of visual displays in the environment, such as mobiles, pictures/photos, and children's artwork that are available for young infants to see or touch.
- Include a variety of textures in the environment (including on the floor for young infants) so that children experience and explore materials that are hard/soft, rough/smooth/silky, etc.
- Offer a variety of safe, open-ended materials that children can hold, explore, move, stack, and assemble, such as puzzles, stacking toys, balls, and containers; when using large crayons or paint be sure to offer a variety of colors, including colors that match a variety of skin tones.
- Take young infants to interesting items (such as toys, food, trees, etc.) or bring interesting items close to infants and describe them so they can use their senses to explore.
- Provide simple instruments and toys/materials that make sounds.
- Encourage free movement to music, swaying with scarves, holding infants in arms or toddlers' hands while dancing. (Be sure to include examples of music that families listen to at home.)

As educators grow in knowledge, skills, and abilities, they:

- Support problem-solving. Trying out new activities promotes learning, even when things don't work out. ("Oh, that block won't fit in that hole. I wonder if another one will.")
- Offer safe art materials for infants and toddlers to use as a form of self-expression, focusing on process (how they are using the materials) rather than an end product. Avoid using models/templates that show what an end product should look like.
- Give toddlers materials that they can use to create, build, and draw, such as large crayons, markers and play dough.
- Offer materials that are that are easy to reach and available throughout the day for open-ended play.

- Describe actions, textures, height, differences, and materials children use and produce.
- Ask questions, comment, and wonder aloud: “How high will that go before it falls?” “How does that feel? Is it sticky?” “What does this horn sound like? Did you hear a horn in that song?” Although infants and toddlers may not respond, they are hearing examples of questions that promote exploration, comparisons, predictions, problem-solving and other thinking skills.
- Provide opportunities for young children to explore object permanence (knowing that things and people exist even when one cannot see them) by playing peek-a-boo, facilitating parent-child separation, or offering items children can identify and track through space (ball on a string, fish in an aquarium).
- Expand children’s knowledge of nature, living things and materials by providing objects, tools, and experiences indoors and outdoors that will allow them to observe closely and explore nature and scientific concepts (cause and effect, time, temperature, buoyancy, changes in materials).
- Encourage children to use their imagination through pretend play, exploration, and conversations that include a sense of wondering (“I wonder what will happen when...”; “I wonder why...”)
- Ask families to suggest and help collect materials that children explore in the learning environment, such as pretend play props, boxes, books, family pictures, empty cereal/juice boxes, etc. Include materials that:
 - Honor diverse families and cultures (First ask families how they see their children exploring and learning at home and in the neighborhood).
 - Support a variety of skills (fine and gross motor).
 - Encourage children to use all of their senses (sight, sound, touch, smell, taste).
 - Allow children to explore shapes, sizes, colors, and balance.
 - Are found at home or outdoors.
 - Encourage quiet and active play.

As educators design and lead, they:

- Explain to others how children learn to show their thoughts, feelings and ideas through art, dance, construction, and music.
- Provide musical experiences in a variety of ways, such as singing, musical toys, recorded music, dance. Expose infants and toddlers to different types of music – such as lullabies, classical, jazz, folk music, children’s songs – from a variety of cultures and languages.
- Talks honestly and respectfully about similarities and differences that children recognize in people, families, and communities.

Stories from the field:

María ofrece cuidado infantil/guarder y tiene a seis niños bajo su cuidado. Josie, madre de Ariana, una niña de 15 meses, esta interesada en aprender más sobre el desarrollo de lenguaje/idioma. Ella esta preocupada por Ariana porque no ve que la niña repita sus palabras en la casa. “Cuales palabras le estas enseñando?” pregunta María. “En general palabras como por favor y gracias,” responde Josie. María afirmo, “Yo puedo trabajar en eso también!” Al siguiente día en el cuidado infantil/guarder, Ariana le llevo una taza a María mostrándosela con un pequeño pujido. “Por favor?” dijo Maria, haciendo la señal de “por favor.” María sabe que a Ariana le encanta bailar, y entonces aplaudió y dijo, “Pam pam por favor, pam pam por favor.” Después de dos días de jugar el juego rítmico de “por favor”, Ariana aplaudió las manos y dijo, “favo, favo.” María se rio y después le conto a Josie sobre la palabra nueva de Ariana. “A veces solo toma un poco de practica y usar algo divertido tambien ayuda.”

English: María is a family child care provider with six children in her care. Josie, mother of 15-month-old Ariana, is interested in learning more about language development. She is worried about Ariana because she doesn't see her copying or imitating words at home. “What are some words you are teaching her?” Maria asks. “Mostly things like please and thank you,” Josie replied. The next day in child care, Ariana brought a cup over to Maria and held it up with a grunt. “Please?” Maria said, making the sign for “please.” Maria knows that Ariana loves to dance, and so she clapped her hands and said, “Boom boom please, boom boom please.” After two days of playing the “please” rhythm game, Ariana clapped her hands and said, “peas, peas.” Maria laughed and later told Josie about Ariana’s new word. “Sometimes it just takes a little more practice and using something that is fun helps, too.”

Strategies:

Parent is comfortable asking educator questions, talking about concerns.

Educator:

- Makes observation.
- Uses sign language.
- Plays with language.
- Shares information with parent.

Content Area III:

Relationships with Families

The most important relationship a child has is with their family. Educators who understand this will spend time building a positive, respectful relationship with the child's family. Frequent communication between the educator and the family will help make certain the child's needs are being met in ways that support healthy development.

Key concept: Families are children's first and most important caregivers and educators.

To provide quality care and education, educators:

- Help parents and family members feel welcome.
- Recognize, respect, and build on family strengths.
- Support positive separations and reunions during drop off and pick up times by allowing time for families to say goodbye and letting children save their work or materials so they can continue to play with them the next time.
- Listen with understanding to parents' needs and concerns while keeping professional boundaries.
- Encourage children to share stories from their daily family life, such as favorite family activities or pets.
- Respect and promote the rights of families to make their own decisions about what their children need.
- Protect the privacy and confidentiality of each family's information, only making an exception when filing necessary reports to protect the safety of a family member (for example, Children's Protective Services, Duty to Warn).
- Exchange complete and unbiased information in a supportive manner with families (and other professionals who work with the family/child when appropriate and with the family's permission). For instance, you might talk to a parent about the child's frustration with peers. Ask for examples they have seen at home and work together to figure out how to help reduce the child's frustration.
- Support the child's home language and culture with an openness and sensitivity to cultural and family style of care, communication, and interaction.
- Recognize that many families have blended cultures of traditional and modern values and beliefs. Children's feelings of security and self-esteem are deeply embedded in a positive identification with their own family and culture of origin.

As educators grow in knowledge, skills, and abilities, they:

- Establish a trusting atmosphere that encourages dialogue (www.pitc.org).
- Partner with families to resolve problems and work with families on mutually agreed upon goals for the child.
- Support families at drop-off and pick-up time. Be clear about who is responsible for helping a child who is having a hard time when they arrive and leave.

- Establish open communication including descriptions of daily activities and events.
- Recognize cultural assumptions and biases, understanding that unacknowledged assumptions (beliefs) may cause problems or conflict.
- Support parent-child attachment by sharing developmental reasons of behavior. For example, a twenty-month-old stamps her foot and screams, “No!” and her parent says, “she doesn’t like me,” or “I think she’s out to get me.” The educator responds with compassion (“I know that can be frustrating at the end of a long day” and shares a developmental reason for the child’s behavior: “Saying no is normal for children at this age because they are figuring out that they are a separate person and part of that process is testing limits.” Understanding the developmental meaning for behavior can help a parent relax and, in this way, caregivers support the parent-child relationship.

As educators design and lead, they:

- Support children and parents when they move to a new school or program.
- Make certain that policies are written and/or revised to support family partnerships.
- Partner with families to develop program policies.
- Provide staff and parent training that supports communication and partnership.
- Review philosophy and mission statement to reflect policies and procedures for family partnerships and relationships with community specialists.
- Watch for and work to eliminate inequity or bias in program policies as well as daily interactions with children and families.

Key concept: Children and families need educators who are knowledgeable about the community and can direct them to resources if necessary.

To provide quality care and education, educators:

- Identify and provide families with information about health care providers and schools in the area, as well as affordable community resources if needed.

As educators grow in knowledge, skills, and abilities, they:

- Refer parents and guardians to community agencies, health, or social services, when necessary.

As educators design and lead, they:

- Work in partnership with families and specialists (medical, dental, speech, nutrition, and mental health) to meet a child’s needs.

Key concept: Cultural values differ as far as how families view learning.

Cultural beliefs differ as to whether learning is child-centered or adult-directed, in regard to the value of movement/motor activity, dance as a key experience, collective ways of living vs. independence, oral storytelling as well as print, and individualism versus and collectivism (Durdan & Curenton, 2021). Culturally responsive educators seek and consider multiple perspectives (including their own) as they plan infant-toddler environments and experiences.

To provide quality care and education, educators:

- Notice and encourage home language use.
- Greet and affirm family members daily.
- Engage in conversations to get to know the family (who is in the family, where they are from, what they enjoy doing as a family, what they hope their child gains in the program, etc.).
- Learn a few words in the family's home language (if it is different than the educator's and there is no interpreter available) or find a way to communicate through technology (google translate), sharing photos, etc.
- Invite families to stop to visit whenever it is convenient for them.
- Regularly provide information about the daily schedule as well as their child's interests and routines.

As educators grow in knowledge, skills, and abilities, they:

- Provide activities where children learn about themselves and others through nonverbal and verbal activities (create a classroom family book or family wall; as children grow in language skills, talk about roles family members hold both inside and outside the home).
- Ask families how their children expect/demonstrate affection and respect. For instance, many Latinx families address teachers as “maestra” rather than using first names (Keys Adair & Alejandra Barraza, 2021.)
- Recognize the importance and strengths of cultural values transferred from families to children. For example, families may value dance as a key movement experience and others may prefer running or biking. Some black parents avoid sandbox play because of the time-intensive work with black hair. Some Muslim parents may prefer their child not act like pigs making noises when singing Old McDonald. All families have preferences that reflect their values and culturally responsive educators learn to listen in ways that benefit each child.
- Incorporate foods, items and photos of children and families that are important to and represent cultures of families represented in the early childhood setting.
- Warmly invite extended family members and elders if the family indicates a desire for them to participate in conversations or meetings.

As educators design and lead, they:

- Provide cultural/language liaisons in the early childhood program. Provide opportunities for early childhood staff to learn key words or phrases in languages spoken by children and families.
- Pay attention to tension between families and the infant-toddler program when you sense it and consider what the reasons might be. (www.pitc.org)
- Engage in discussions and provide opportunities to learn about children and families in the program; find out what fits family schedules, interests, and locations (ie. family activities, family nights, indoors/outdoors).
- Invite family members to participate in informal and formal advisory capacities in the early childhood program; create opportunities for family members to share strengths with one another.

Stories from the field:

Two-year-old Sophie's mom approached Germaine, a family child care provider who specialized in infant-toddler care. Germaine could see the mom's phone showing a picture of Sophie holding her fork and stabbing at her peas at lunch. Germaine was excited to hear Akina's thanks for sending the photo and said, "Oh! You got the photo! Isn't that cute? I've been working on helping the children feed themselves because I thought it would help them be independent and also use their fine motor skills." Germaine slowed her speech when she realized that Akina seemed distracted and uncomfortable. "I'm sorry," Germaine stopped. "I got carried away telling you what was happening and it looks like you are worried."

"Well, said Akina, "in our family children do not feed themselves until they already have good skills for holding their spoon and not spilling their food. We believe that children should learn to be careful and that the kitchen will get too dirty if Sophie feeds herself."

At first Germaine felt disappointed and a little annoyed. Then she paused, "So, you would rather wait awhile for Sophie to feed herself?"

Akina looked relieved. "I know you have many children here and so it might not work for you to change your mealtime. I wanted to let you know and maybe we can keep talking about it."

"That's a good idea," Germaine replied. "Thank you for telling me and for understanding that it might not be easy to make a change. Now that I know, I can think what is possible."

Strategies:

Observes.

Reads cues, responds.

Reflective listening.

Pausing to think and check in with own feelings, restates the parent's comment.

Open to ongoing communication, cooperative problem-solving.

Content Area IV:

Assessment, Evaluation and Individualization

When educators observe children playing and interacting with others and the environment, they gather information that helps them meet the needs of each child. With careful noticing and documentation, educators can plan and offer experiences that build on each child's interests and skills toward the next step in their development.

Key concept: Educators observe children, document what they notice, and use the information to promote children's growth.

To provide quality care and education, educators:

- Pay attention to and comment on children's individual abilities and interests.
- Add activities or materials that individual children enjoy. ("Teran, I know you love big machines. Look at the book I found for you at the library on bulldozers.")
- Observe the skills children are working on and plan activities that will help them practice.
- Share with families what the children enjoyed, learned, and are practicing.

As educators grow in knowledge, skills, and abilities, they:

- Regularly keep a record of children's abilities and achievements using informal (or formal) assessment tools (written notes, checklists on specific areas of development, work samples and photos).
- Look for and document progress over time in learning and development.
- Use observations of child to intentionally plan individualized activities that promote growth.
- Sharing examples of children's activities and progress with families and invite their ideas based on what families notice and value.
- Offer multiple ways for families to share ideas about what their child needs and is able to do that fit their cultural values. For instance, ask families about preferred communication methods (conversations, interpreters, scheduled times, text messages, photos).
- Observe families and intentionally describe and affirm strengths.
- Offer to be part of an IFSP meeting and continue ongoing conversations with families about how their child is growing and developing.

As educators design and lead, they:

- Train and/or review assessment procedures.
- Assess children's progress in English and the child's home language if appropriate.
- Support staff with training in observation, use of assessment tools, early child development and use of child-centered curriculum.
- Provide oversight as educators use formal or informal child and classroom assessment/evaluation tools to check routinely that policies and procedures are implemented.
- Manage ongoing program interactions with families so that families are informed of their children's activities and growth and are able to offer input from their own observations and experiences at home.
- Key concept: Educators know the requirements for growth and development screening and how screening can help identify individual needs.

To provide quality care and education, educators:

- Know the rules and regulations for health and developmental screening.
- Provide families with information about contacting their local public school district for information about scheduling an Early Childhood Screening when their child turns three. Screening checks for learning and health problems so they can get help right away if needed and children will be better prepared for school.
- Provide information in multiple languages and be able to explain the process and purposes of developmental screening. If possible, demonstrate the kinds of interactions their child will experience in the early childhood screening appointment.



Stories from the field:

Tus zov menyuam: “Yam tas dhau los kuv tsis paub ntau txog kev ntsuam xyuas menyuam kev loj hlob li tam sim no. Tam sim no nws pab tau kuv ntau heev. Piv txwv, kuv tsis tau xav hais tias menyuam yuav tsum xyauv taug kev ib kab ncaj ncaj. Thaum kuv pom hais tias phau ntawv Creative Curriculum Assessment nug txog yam ntawd, kuv mus raum zoov thiab muab ib txoj xov paj cab ntev ntev. Kuv yuav hais kom Zuag taug kev ncaj ncaj raws txoj xov paj seb nws puas tau txawj taug kev ib kab ncaj ncaj tab sis thaum kuv tig los kuv pom tau hais tias nws twb taug kev raws txoj xov paj lawv kuv qab lawm! Nrhiav ntau yam rau menyuam ua thiab paub hais tias menyuam yeej ua tau no lom zem rau menyuam thiab hos pab tau rau kuv.”

English: Child care center educator, older toddlers: “I didn’t really know much about assessment until recently. Now it really helps me. I was going to ask Zhoua to walk on the yarn, but then I noticed as I was stretching it out she was following right behind me—right on the yarn! Setting up things to do and finding out what the children can do is fun for the children and helpful for me.”

Strategies:

Learns from an assessment tool about a skill to pay attention to.

Plans an activity to support assessment.

Observes during the activity.

Notes child skill level.

Content Area V: Historical and Contemporary Development of Early Childhood Education

An educator understands that what was believed and done in the past impacts current practice. Educators also strive to understand how current events and issues affect children, families, and programs.

Key concept: Educators realize that historical perspectives about child development influence educators and community expectations and that these past beliefs can inform or interfere with current recommended practice.

To provide quality care and education, providers:

- Recognize ways that past practices and present trends may or may not influence quality for the benefit of young children and families.
- Understand that neuroscience has given us new information about the effects of joint attention, positive interactions, and trauma on behavior.
- Examine past beliefs and practices that may interfere with child development or prevent others from accepting new research and understandings. For example, “this is how we’ve always done it” may create assumptions or negative biases about applying new research-based methods.
- Demonstrate willingness to consider new information and balance past practices with new ideas.

As educators grow in knowledge, skills, and abilities, they:

- Are able to describe why they choose to maintain a particular strategy when confronted with community expectations that may reflect past beliefs but not align with current professional practice. For instance, when a caregiver promotes interpersonal problem-solving between two toddlers who both want to play with a toy, a community member might advise the caregiver to put that toy away so no one can play with it. In this case, the educator is able to articulate why they decided to encourage problem-solving.
- Recognize when their own bias or preference for past practice interferes with their willingness to change and is willing to discuss, consider, and shift to incorporate new recommendations.

Key concept: Educators need to understand the variety of perspectives that guide current practices.

To provide quality care and education, providers:

- Recognize that the history of infant-toddler care emerges from economic needs (helping parents enter the workforce) and educational (learning and/or school readiness) needs. Multiple societal needs impact laws (minimum standards of health and safety, ratios, etc.) and recommended practices (interactions, curriculum, etc.) with young children.
- Are aware of a variety of program models, such as a center-based model, family child care, and Family Friend and Neighbor care, and understand that families benefit from having choices.
- Notice a variety of program and curriculum approaches (such as Montessori, play-based learning, Program for Infant Toddler Care, etc.) and seek information that informs their own philosophy of care.
- Recognize the impact of NAEYC's Developmentally Appropriate Practice over the past forty years and how the recommendations have adapted in a way that "underscores the importance of social, cultural, and historical contexts of development and elevates the need for active engagement through play, exploration, and inquiry in ways that support the whole child." (from <https://www.naeyc.org/resources/blog/dap-2020>)
- Identify historical contributions to program and/or curriculum approaches (such as Montessori) in infant-toddler care, and understand that recommended, developmentally appropriate practice continues to be informed by research and practice.
- Know and work within the requirements of federal, state, and local law agencies' policies and practices.
- Know and work within the National Association for the Education of Young Children (NAEYC) Code of Ethical Conduct (see resources).

As educators grow in knowledge, skills, and abilities, they:

- Compare past and present curricula and program approaches and are able to describe potential benefits (or limitations) in the choices they make to families and colleagues, particularly when making changes such as adopting new approaches.
- Use the NAEYC Code of Ethical Conduct to solve dilemmas.
- Continue to examine and adjust their own practices, reflecting on changes and staying current with new research and recommended practice. For instance, explore the new edition of "Developmentally Appropriate Practice" from the NAEYC and adjust accordingly.
- Discuss and continue to notice how cultural, community, and historical practices play a role in understanding and supporting growth and development.
- Recognize the value of quality and program enhancements in early care and education (such as accreditation or quality rating systems such as Parent Aware).
- Demonstrate a willingness to change interactions, environments, and procedures based on updates to local, state, tribal, and federal policy changes.

Stories from the field:

“I wasn’t too sure about becoming Parent Aware rated (Minnesota’s Quality Rating and Improvement System) when it first came to my area, but it was important for our program to be able to access scholarships for some of the children in our community. I decided that it would also be a good thing for our program to keep growing and improving. Once we jumped in, the supports for quality improvement were really helpful and I’ve learned a lot through the process. Now that we have our rating, I tell prospective parents about it and they seem to like that we have a “seal of approval.” We want to keep working to get the next star. Thinking about quality improvement is becoming so much a part of who we are that even once we get our fourth star, I know we’ll keep trying to be better for the children and families we serve.”



Content Area VI: Professionalism

Caring for infants and toddlers is a profession that reflects emerging research about what young children need to learn and grow. Capable educators demonstrate a career-long commitment to seeking opportunities to increase knowledge and skills in order to better meet the needs of infants, toddlers, and their families.

Key concept: Educators strive to continuously improve their own skills.

To provide quality care and education, educators:

- Fully participate in ongoing professional development by asking questions, reflecting on learning, and acting on new information.
- Identify resources (including mentors and colleagues) who can answer questions about procedures and practice.

As educators grow in knowledge, skills, and abilities, they:

- Intentionally plan and engage in professional development to improve their own skills, including in areas that are challenging or involve higher levels of learning.
- Add related skills that help grow their career, such as technological skills, advocacy, leadership training, reflective practice groups, finance, etc.
- Understand and act within professional boundaries, including confidentiality and respect for diverse family structures, culture, languages, and practices.
- Advocate for professional recognition, including scholarships, wages, and benefits.
- Use the NAEYC Code of Ethical Conduct when encountering ethical dilemmas (https://www.naeyc.org/sites/default/files/globally-shared/downloads/PDFs/resources/position-statements/Ethics%20Position%20Statement2011_09202013update.pdfresources).

As educators design and lead, they:

- Model best practices for others.
- Critically reflect on their own practice as well as research and trends in the field and adjust their behavior.
- Identify ways to embed reflective supervision and mental health support in infant-toddler programs.
- Become a member of and participate in professional organizations and activities.
- Lead others in advocacy for the well-being of children, families, and early education professionals.

Key concept: Early childhood providers learn from others to apply best practices in their programs.

To provide quality care and education, educators:

- Observe others interact with children through videos, other classrooms, or programs, and learn from their strengths.
- Discuss their own work and career planning and ask for feedback from colleagues and supervisors.
- Stay current with changes to licensing regulations food program rules and regulations.

As educators grow in knowledge, skills, and abilities, they:

- Reflect on their own skills and work to continuously improve them.
- Seek professional feedback (such as coaching) and reflect on successes or challenges and set goals for improvement.
- Are able to describe the program's mission and purpose.
- Follow sound business practices. For instance, if they own and operate a family child care program or direct a center, seek training and use budgeting resources to track income, spending, grants, taxes, etc.
- Talk with parents about policies and agreements.
- Join professional organizations, such as the National Association for the Education of Young Children (NAEYC), the National Association of Family Child Care (NAFCC), etc.
- Go beyond minimum standards by becoming accredited and/or participating in quality initiatives such as Parent Aware.

As educators design and lead, they:

- Write policies/contracts in their parent handbook and discuss with families.
- Review and regularly update their contract and parent handbook.
- Support staff with ethical dilemmas or challenges with professional boundaries.
- Participate in leadership activities in professional organizations, committees, and advocacy or networking groups.
- Explore and participate in a variety of professional development modalities for program staff, including support for credit-based learning as well as relationship-based professional development (RBPD) such as coaching, mentoring, and consultation.

Key Concept: Educators seek personal and professional growth to better understanding the role culture plays in early childhood practices.

To provide quality care and education, educators:

- Determine situations where they are a cultural, racial, or ethnic minority and gather feedback that helps them understand the beliefs and practices of others (as well as their own).
- Reflect on their own cultural identity in a way that helps them identify biases and where they came from as well as consider how to make changes in attitudes and practices.

As educators grow in knowledge, skills, and abilities, they:

- Notice how teaching practices may reflect personal biases and welcome feedback to improve. For example, an educator may realize (through self-reflection, discussion with colleagues, or coaching) that they call out negative behaviors more from boys than girls; by becoming aware, they seek support and develop intentionality to address their behavior.
- Identify ways to adjust teaching practices to better meet the needs of diverse children and families.
- Recognize that the professional knowledge base is changing and are willing to ask questions, seek information, and remain curious about how research reflects multiple people groups (or does not reflect them).
- Take responsibility for biased actions even if unintended and actively work to repair the harm. (Alanis & Iruka, 2021).
- View their commitment to cultural responsiveness as an ongoing process. (Alanis & Iruka, 2021).

As educators design and lead, they:

- Design or arrange staff development opportunities so that staff can learn, discuss challenges, and understand the role of implicit bias in each person's beliefs and behaviors.
- Create a safe environment for co-workers to ask questions and reflect on their own beliefs as well as challenge their own assumptions and learn to accept multiple perspectives.
- Seek to fill gaps in knowledge in order to meet the needs of a variety of cultural communities.
- Speak out against unfair policies or practices and look for ways to work collectively with others who are committed to equity.
- Institute hiring practices and staff support that intentionally find and retain educators who reflect the cultures and languages of children in your program.

Stories from the field:

Abdi had been teaching older toddlers in an Early Childhood Family Education (ECFE) program for two years. He recently attended several professional development sessions related to toddlers and open-ended play that included art and music. Abdi realized that toddlers love to explore and try out different kinds of markers, crayons, brushes. Soon the toddlers were mixing paint and dipping unusual items for printing, using a variety of kitchen utensils for painting. Colleagues began to stop by and gather ideas and soon the ECFE coordinator asked Abdi if he would share at the next staff meeting. Abdi had never presented a workshop to adults before, but he decided to invite his co-workers to experience the activities themselves and then discuss all the skills they were using. The workshop was such a success that Abdi began to think about other ways to share his ideas...maybe he would even write an article or make a proposal to a conference!

Strategies:

Participants in professional development.

Curious, observes, applies ideas to practice.

Co-worker and administrative support for growth.

Continues to plan for growth.

Content Area VII: Health, Safety and Nutrition

When parents are asked what is most important to them when looking for child care, the most frequent answer is a safe and healthy environment. Infants and toddlers are at greater risk for disease and injury in group settings than older children and need more adult supervision to stay safe and healthy. A healthy environment also means providing nutritious food and daily opportunities for physical activity. Research indicates that children whose basic health needs are met are more able to learn from their environment and are much more prepared to succeed in school than children with poor health (Lally, et al., 2009).

Key concept: Infants and toddlers learn to develop lifelong healthy habits from the adults around them.

To provide quality care and education, educators:

- Use, and teach children to use, basic health habits like covering a cough by coughing into their elbow, hand washing, and brushing their teeth.
- Provide plenty of outdoor activity time for infants and toddlers where they can move their bodies freely in fresh air.
- Allow time and offer support so that toddlers can manage their own bathroom and dressing needs, as they are able to do so.
- Encourage children to engage in a variety of daily physical movement activities to instill healthy habits.

As educators grow in knowledge, skills, and abilities, they:

- Model and encourage children to develop healthy eating, exercise, and rest habits.
- Identify examples of how to stay healthy that come from different cultural traditions.
- Recognize when they or others alienate children from partaking in activities because of differences (race, gender, hair texture, physical abilities), as this can have lasting physical and emotional impact.

As providers design and lead, they:

- Create opportunities for self and others to recognize when children feel alienated due to differences (race, gender, skin color, physical abilities) and work to implement inclusive practices.
- Ensure that staff training includes health promotion, including daily provision of nutritious foods and age-appropriate physical activities.

Key concept: Children need proper nutrition to fuel their bodies and help them grow.

To provide quality care and education, educators:

- Promote healthy eating and active living by providing physical activities and offering a variety of nutritious foods for snacks and meals.
- Practice safe storage, preparation handling and service of nutritious foods including breast milk.
- Follow individualized feeding and sleep schedules for infants and toddlers.
- Sit, eat, and talk with children during meal and snack time.
- Recognize and avoid health hazards related to food such as choking and allergies.

As providers grow in knowledge, skills, and abilities, they:

- Provide family style meal and snack times which encourage healthy eating.
- Stay current with health and safety information and incorporate updated information into daily practice.
- Keep current with changes to licensing regulations such as food program rules and regulations.
- Ask families about their home practices for food preparation, diet, and eating routines in order to respect family preferences as much as possible.

As providers design and lead, they:

- Accommodate cultural food preferences, both in food itself and ways of preparation and eating together.

Key concept: Follow health and safety guidelines to prepare and maintain the caregiving environment.

To provide quality care and education, providers:

- Keep emergency telephone numbers handy.
- Learn the procedure for reporting safety concerns to county, tribe, or other appropriate agency.
- Follow health and safety guidelines during hand washing, toileting, sanitizing toys and diapering to reduce the spread of infectious disease.
- Arrange the environment so that all children can be seen and heard at all times.
- Keep materials, equipment, and condition of classroom or home safe and clean, and include daily safety checks; Keep the environment smoke-free.
- Follow safe sleep practices such as laying babies on their backs to sleep and being sure that infants under age one do not have anything in the crib except a tight-fitting sheet. Guidelines for lowering the risk of SIDS at all times by putting babies on their backs to sleep are found at <https://www.nichd.nih.gov/health/topics/sids> and <https://safetosleep.nichd.nih.gov/>
- Make prompt and correct reports of harm or threatened harm to a child's health or welfare to protective services.

- Know health conditions of children (such as diabetes, food allergies, asthma, etc.) and how to respond to potential health needs.
- Childproof the spaces infants will explore and remove unsafe and valuable objects (including materials that would be a choking hazard, toxic, or irritating to the eyes, nose, or skin).
- Keep materials, equipment, and condition of classroom or home safe and clean and include daily safety checks.

As educators grow in knowledge, skills, and abilities, they:

- Have young and mobile infants (birth to 18 months) nap as needed throughout the day.
- Include furnishings and equipment that are comfortable for very young children (child-sized, flexible, allowing movement and choice).
- Arrange the environment in such a way that children can explore it safely. For instance, include open space where children can move freely while also avoiding obstacles that new walkers may run into. As infants begin to pull up and climb, find safe ways for them to do so such as adding cushions, play tunnels, and climbing structures.
- Define areas that need protection, such as places where infants will be playing on the floor.
- Adapt the environment as needed for children with physical disabilities and sensory impairments.
- Notice and affirm healthy practices that may vary between and among cultures and families. For instance, in cultures that stress interdependence and communal values, parents may feed children until they are older than cultures that stress independence and early self-help skills. Both approaches lead to healthy nutrition and educators can affirm home and program practices, negotiating when possible.

As educators design and lead, they:

- Know, review, and routinely update all applicable rules and regulations of record keeping (from emergency card information to written procedures and data privacy and confidentiality) to ensure that their program, center, or agency complies.
- Offer orientation and staff training on each applicable component in their area(s) of responsibility.
- Provide staff training on recognizing and responding to child abuse and neglect.
- Establish clear procedures for documentation and notification of suspected abuse and neglect.
- Stay current with health and safety information and incorporate updated information into daily practice.
- Seek information and understanding about the long-term health risks of racism as experienced by young children and their families.
- Serve as a bridge to families who may not know medical processes, screening requirements, etc., offering to go with them or invite someone to the facility to explain expectations.
- Work alongside families and specialists (for example, medical, dental, speech, nutrition,) to determine appropriate connections and referrals.
- Review Content Area II: Learning Environment, which also has tips on creating a safe environment.

Stories from the field:

Cali kaalay, wax baa u rayee. Keen fiirshee, haa waad xaartay. Innakeen ku soo nadiifinee oo kaa badalno xafaayada. Hab miiska aan ku saaree, surwaalkana kaa bixinee. Hoo qabo xaashidan, ii hay. Fariid glove-ka ii dhiib aan gashadee, xafaayadana kaa saaro, xaashidana ku masaxno dabada, nadiifinay. Innakeen kuu dhaqno dabada, dabadeedna qalajino, kuuna xirno xafaayad cusub oo nadiif ah. Surwaalkana gasho fariidkay, waanigaa glove-ka iska bixiyeyo. Inna keen gamcaha dhaqanee oo qalajinee. Nadiif shaxshax.

Ali, come here, let's check your diaper quick. Yes, you need a diaper change. Let's go clean you up! Here are the wipes. Please hold them for me while I am putting gloves on. Then, I will take off your diaper and wipe your bottom to get you all cleaned up. Here's the clean diaper, let's get in on so you will be nice and dry! We did it! Now let's get your pants back on. I took off the glove and now it's time to wash our hands. Water and soap, scrub together! Now, we dry them. All done! Thank you for being so helpful while I changed your diaper.

Strategies:

Diapering area, supplies (gloves, wipes), nearby sink, both adult and child wash hands afterwards.

Communicates intentions, respect.

Supports independence.

Uses self-(describes what she is doing) and parallel (describes what the child is doing) talk.

Content Area VIII:

Application through Clinical Experiences

An educator learns about and learns to use best practices through a variety of experiences.

Key concept: Early childhood educators learn from others and implement best practices

To provide quality care and education, educators:

- Observe demonstrations of others interacting with children in videos or various programs and learn from their strengths.

As educators grow in knowledge, skills, and abilities, they:

- Reflect on their own skills and work to continuously improve them.
- Seek professional feedback and coaching and reflect on success or challenges.
- Seek reflective supervision or consultation to process strong emotions that may arise in working with very young children and their families.

Stories from the field:

At first when I heard that we were signing up for a coaching project in challenging behavior, I wasn't very happy about it. I thought I was doing just fine with my kids, although working with the parents sometimes stressed me out. I was surprised when my coach asked me a lot of questions about what I enjoyed in my work, what the kids were doing in the classroom, and what was hard about my work as an infant teacher. She was easy to talk to, and I found myself sharing some of the frustrations I've had when parents have so much trouble leaving in the morning. She helped me figure out that it bothered me because the children sometimes seemed to stay sad longer when their parent hung around longer. I learned about "protective urges:" that both the parents and I are "wired" to feel protective toward the baby even though we saw the solution differently. Maybe the mom thought the baby would feel better if she stayed longer, but I thought the baby would feel better if the mom left more quickly. It's still hard sometimes, but realizing that leaving your baby is hard, too, made me more patient. I decided to give them the time they need and asked the mom to tell me when she was ready to make the transition to leave. It isn't perfect, but I'm more relaxed about it, and I think the mom and baby are, too. These days I'm really glad when my coaching appointment comes up!



Content Area IX: Trauma Informed Care and Practice

An educator understands the impact of trauma on young children's development and develops capacity for interpreting behavior and responding in ways to promote resilience in healing for children, families and themselves.

Key concept: Children's stress response systems, behaviors and overall development are impacted by trauma.

When infant-toddler educators know more about trauma and how it impacts development, they can support young children and their families in ways that build resilience, coping, and healing for children, families, and themselves.

To provide quality care and education, educators:

- Understand stress and trauma definitions (such as positive stress, tolerable stress, early trauma, toxic stress, complex trauma, historical trauma, and race-based trauma).
- Recognize the signs of trauma and understand that trauma impacts behaviors, actions, and development. (See <https://developingchild.harvard.edu/resources/aces-and-toxic-stress-frequently-asked-questions/>)
- Remain curious about and interested in children's behaviors and how their role as early educators can support children's development in positive ways. Ask, "What is the meaning behind this behavior? What is this child needing from me right now?"
- Understand the importance of positive relationships with families for young children.
- Identify ways that children's experiences in the infant-toddler program impact the child, family and community relationships and have the potential to support resilience.
- Acknowledge parents' stressors and levels of stress.

As educators grow in knowledge, skills, and abilities, they:

- Help parents identify their child's strengths by asking questions like, "What do you enjoy most about your child?"
- Develop a catalog, folder, or list of resources and begin to build partnerships with community professionals. High-quality infant-toddler programs that partner with strong relationships with parents and community members offer a trusted bridge to and between services and resources for families.
- Treat infants and toddlers respectfully so that they know they matter. For examples, communicate intentions by explaining what is about to happen when touching or moving them ("I'm going to wipe your nose"), use the children's names, turn toward them when talking.

As educators design and lead, they:

- Provide professional development opportunities for all program staff to learn about stress and trauma in young children as well as strategies to help children be successful and resilient.
- Utilize state and local resources for program staff and families such as the Trauma Informed Tool Kit from the Minnesota Association of Childhood Mental Health.
- Trauma Informed Tool Kit : www.macmh.org/toolkit

Key concept: Relationships are impacted by trauma and also can buffer children from the impact of trauma. A child facing adversity benefits from a supportive, consistent relationship with an adult beginning early in life.

For children, responsive relationships with adults have a double benefit: they promote healthy brain development and provide protection to prevent very challenging experiences from producing a toxic stress response. For children and teens who develop the ability to overcome serious hardship, the most common protective factor is having at least one stable and committed relationship with a supportive parent, caregiver, or other adult. (Harvard Center on the Developing Child, 2021)

To provide quality care and education, educators:

- Check their own regulation before acting or reacting.
- Understand their role in regulation.
 - With infants, educators notice and respond in timely ways so that the baby experiences a sense of safety and belonging. Adults notice and support how individual babies begin to calm themselves, using routines and a calm environment.
 - Educators are co-regulators of toddler's emerging self-regulation. Adults pay close attention to cues children send and respond consistently with the right amount of support. (Harvard Center on the Developing Child, 2021)
- Are aware of supports for families impacted by trauma.
- Model and teach taking breaks to calm down and describe the process to children, paying attention to cues that indicate children need extra time, connection, and physical closeness.

As educators grow in knowledge, skills, and abilities, they:

- Model positive interactions and relationships with all adults and children.
- Establish respectful and trusting relationships with parents, and involve families in collaborative decision-making.
- Connect parents to local and state resources for support.
- Encourage families to have regular routines for their children and to regularly engage in positive parent-child interactions, such as talking, reading, playing, or singing together.
- Recognize the role of individual and family strengths in promoting resilience in the face of adverse childhood experiences and are intentional about naming family strengths.

- Let children (and families) know ahead of time about transitions and new experiences.
- Talk about safety and use visuals to help children know what you mean, “My job is to keep you safe so I am going to help you get your feet back on the floor.” (MACMH)
- Use touch in ways that communicate safety and respect.
- Increase their support when children are experiencing severe hardship, such as homelessness.

Highly stressed infants and toddlers and their families are faced with day-to-day stressors that can negatively impact their development. High quality infant and toddler programs can help to buffer against the multiple adverse influences that may hinder young children’s development. Researchers have consistently identified several essential structural characteristics of infant-toddler program environments [i.e., primary care, continuity of care, small groups] that serve to foster supportive, responsive care for infants and toddlers. (Cryer, Hurwitz, & Wolery, 2000; Edwards & Raikes, 2002; WestEd, 2005).

As educators design and lead, they:

- Train staff in trauma-specific child care approaches.
- Incorporate families’ cultures in the setting, understanding that recognizing cultural strengths can support healing from trauma.

Key concept: Intentionally structure infant-toddler programs in ways that support nurturing relationships. When appropriate supports are provided along with ongoing quality in other respects, caregiving environments can be protective and support child resilience.

To provide quality care and education, educators:

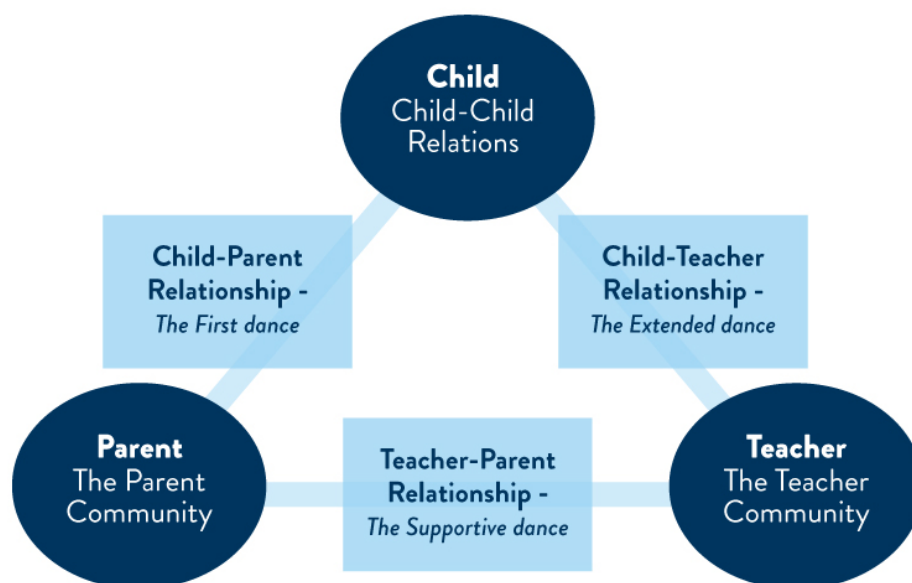
- Are sensitive to parents and children as they enter childcare, and caregivers provide extra time for the child to separate from the parent.
- Consider extra supports as children enter care, such as visits to the home, parent visiting the program, and conversations at drop-off times. These and other interactions with parents make the first days in childcare be more comfortable for everyone.

As caregivers and teachers grow in knowledge and skills, they:

- Establish consistent, predictable routines, expectations, and interactions for and with children (although some flexibility for individual preferences and unique events is appropriate)
- Establish a welcoming environment with positive messages of inclusion and diversity. For example, provide children with familiar sensory experiences (textures, smells, tastes, sights) to remind them of the positive elements of their homes.
- Offer safe, cozy spaces for children to take a break from others or practice calm-down strategies.

- Describe and model the behavior they want to see in positive language instead of telling toddlers what not to do. For example, say, “Your feet belong on the floor.”
- Provide opportunities for connection with and among children and adults; model and teach peer interaction skills, such as my turn, your turn.
- Teach “emotional literacy”:
 - Model how to regulate emotions, notice and name feelings, and use visual examples for recognizing own feelings and those of others. For instance, adults may say to a crying infant, “I see you are sad. Let me pick you up so we can walk around together,” or read a book with faces of children experiencing a variety of feelings.
 - Model empathy and provide opportunities to practice empathy. Educators may describe another toddler’s perspective, such as, “Hakim is sad because his tower fell. Let’s try to help.”
 - Help children connect behavior to feelings. (“I wonder if you hit your friend because you were scared when he yelled at you?”) —from Minnesota Association for Children’s Mental Health, or MACMH)
 - Acknowledge and encourage children’s efforts to label and regulate emotions. (“I see you taking deep breaths. You are calming down.”)
 - Incorporate teaching, modeling, and practicing self-regulatory strategies into everyday routines. These strategies may include calm-down strategies, deep breathing, mindfulness or yoga, anticipating transitions, physical or sensory activities, or turn-taking.
 - Introduce visuals for self-regulation and emotions such as puppets, emotion books with facial illustrations or descriptions for feeling words, or a “Feeling Chart.”
 - Support the parents as the primary attachment partner for the child and understand that the parent-child attachment is primary (as the primary “dance” in the visual pictured below).

The visual below illustrates the relationships that surround and support the child, describing them as a “dance” between parent and child, child and teacher, and parent and teacher (Raikes & Edwards, 2007).



As educators design and lead, they:

- Develop hiring practices aimed at identifying and selecting staff who reflect the cultural/racial/ethnic backgrounds of families in the program, as well as individuals who are motivated to build strong relationships with diverse families from a variety of backgrounds and needs. For example, they use an interview process in which candidates can be observed relating to others. (Harvard Center on the Developing Child, 2021).
- Find ways to provide a primary caregiver for each child. (see “What is primary care?” page 15). When each child is assigned a primary caregiver, this means that everyone—parents, the program director, other caregivers, and the caregiver—knows who is principally (not exclusively) responsible for each child. This helps each child build a closer relationship with their caregiver (Lally, Torres, Phelps, 2003).
- Find ways to offer continuity of care. Having one special caregiver over time helps the infant learn to predict and become a competent participant in her or his own care and promotes the child’s healthy growth and development.

Key concept: When working with families who experience trauma, educators remain aware of caregiver fatigue and secondary trauma.

To provide quality care and education, educators:

- Understand that caregivers care best for others when they care for themselves.
- Are aware of the impact of secondary trauma on early educators and know the symptoms of secondary trauma (such as burnout, hopelessness, sleeplessness, exhaustion, and more.)

As educators grow in knowledge and skills, they:

- Take care of their own emotions. In situations with children, educators first calm themselves by pausing, using conscious breathing, reflecting, and questioning their own feelings: “What is behavior telling me? What can I do to be present and in a relationship with the child?” (MACMH)
- Use self-care practices in calmer moments, too. These practices may include meditation, seeking reflective support or perspective-taking from peers, or mindfulness (not thinking about the past or the future and taking a break from using cell phones and the like).
- Recognize that potential symptoms of secondary traumatic stress can mimic those of post-traumatic stress disorder and acknowledge and seek support for their own experiences of stress.

Note: Recent writings on compassion fatigue and trauma relate to the self-care practices listed above. Whether we are practicing mindfulness strategies ourselves or facilitating them for others, keep in mind that some practices can be triggering for trauma survivors or those coping with extreme stress (in particular, sitting meditation and some breath practices). According to Treleaven (n.d.), the following are “ways to help ensure mindfulness offerings at your work are safe and effective for everyone.”

- Practicing should always be voluntary, never forced.
- Offer options—for example, eyes open or closed, standing instead of sitting. If certain practices produce anxiety, offer alternative places to focus (listening to sounds instead of following the breath).
- Let everyone know that it’s always ok to modify (opening the eyes, practicing for shorter time periods, or taking breaks) or stop the practice if they are becoming dysregulated. (Treleaven, n.d.).

Adults who work with infants and toddlers increase their competence and strengthen the professional relationships that support families and young children through reflective supervision/ consultation (Fenichel, 1992; Heffron, 2005; Heffron & Murch, 2010; Heller & Gilkerson, 2009). Reflective supervision involves regular, ongoing conversations; thoughtful, non-threatening questioning; and active listening between caregivers and their supervisors and/or colleagues. Through reflective supervision, caregivers are able to self-reflect and explore their own beliefs, attitudes and behaviors that may be contributing to or interfering with effective work with young children and their families

As educators design and lead, they:

- Adopt relationship-based professional development models (i.e., coaching, consultation) that help staff (and/or parents) identify, plan, and meet goals. Professional development includes opportunities related to self-care such as mindfulness trainings.
- Recognize, appreciate, and build on the skills people already have that have helped them manage and grow in their work.
- Provide staff with the supports they need, such as reasonable caseloads and class sizes, responsive supervision, and skill development, to manage their own stress.
- Adjust workload expectations as needed.
- Support all adults who work in the program to maintain appropriate boundaries that protect them emotionally.
- Promote reflective supervision, also called reflective consultation. Programs may vary in how they provide facilitation for reflective practice. Center-based programs may hire a consultant. Home-based programs may use their existing family childcare associations and identify trained reflective consultants. The following recommendations are found in the best practice guidelines for reflective supervision (Michigan Association for

Infant Mental Health, 2004) and can be adapted to models that fit the program.

- Work with a trained consultant. (Identify a trained reflective consultant or offer reflective practice training to a program supervisor.)
- Integrate clinical processes by using key practices of reflection and parallel practice. (Refer to the Michigan and Minnesota guidelines¹ for more details.)
- Include a focus on infant parents and emerging relationships.
- Integrate exploration of emotions in addition to content and attend to individual reactions.

Stories from the field:

Milana is the assistant director of an infant-toddler center. She recently learned that a young mom and her 4-month-old are being evicted and going to a shelter. While standing in the hall, Milana notices this mom holding her baby and singing softly, “Mommy loves you, little bear.” After a moment, the mom takes the baby in to the classroom and prepares to head out to catch the bus. As she is leaving, Milana smiles at the mom and pauses. “I saw you cuddling and singing to your baby a few minutes ago. That is a gift for the little one, a sweet moment that matters so much for your baby. Did you know that holding and singing it actually helping build her brain along with telling her that you love her?” The mom looked puzzled and then a smile spread over her face as tears shone in her eyes. “I didn’t know that. This morning I was thinking that I’m not doing anything for her, even keeping our home. Thank you for telling me I’m doing something right.”

Strategies:

*Parent attachment, comfort.
Affection.*

*Educator observes, reassures,
names strengths.*

*Parent gains knowledge,
confidence.*





Content Area X: Working with Multilingual Children and Families

The term multilingual children is used to refer to culturally and linguistically diverse children, ages birth to five years, who are learning two or more languages. Multilingual children are exposed to multiple languages in their homes, communities, and/or early care and education settings, and they develop and use language in dynamic ways. In the field, these children are commonly referred to as dual language learners, or DLLs. This Infant-toddler Guide is specifically written for children ages birth to three.

Key concept: An approach that's based on child and family strengths enhances language development and learning for MLL children.

Children's feelings of security and self-esteem are deeply embedded in a positive identification with their own family and culture of origin, including their home language.

To provide quality care and education, educators:

- Use a strengths-based approach to support each child's home language and culture by being open and sensitive to cultural and family styles of care, communication, and interaction.
- Respond positively to children's home language use.
- Affirm parents' use of home language and how it enriches and deepens their child's language skills.
- Develop an awareness of their own cultural assumptions and biases about language (including specific languages, dialect, accents, grammar) in order to recognize when these assumptions may cause a lack of understanding, problems, or conflict.
- Play tapes, stories, rhymes, and songs in the child's home language.
- Invite children and families to teach them key words and phrases. For example, a teacher may ask to be taught how to count in their home language or how to say "please" and "thank you."

As educators grow in knowledge, skills, and abilities, they:

- Invite families to share their interests, skills, talents, and traditions with children in the classroom or child care environment.
- Pay attention to how infants, toddlers, and families use language in the caregiving environment, understanding that language and culture are intertwined. What languages do children use? How do they use language in meaningful ways?
- Support language development in very young children, who do not yet have words of any language. Pay

attention to children’s behavior and nonverbal communication (smiles, kicking feet, etc.), and communication attempts (including crying—“Oh, you don’t like that? OK, we can find another toy”) and label their communication. Language-rich environments in any language support language development for all languages.

- Reflect children’s interests and experiences in activities and materials. Let children be the “expert” and lead learning in their language of choice. For instance, older toddlers might teach the educator (or peers) words in their home language.
- Research words, songs and fingerplays used in home languages of children in their setting.
- Provide families with information about classroom learning and invite families to share information from their communities, home culture, and experiences that support content learning.
- Value the benefits of families using their home language. Research suggests that many parents would like their children to learn and use their home languages in order to develop their cultural identity and maintain connections with their family and community (Zheng et. al., 2021) When parents seem uncertain about the value of speaking their home language (either because they are not sure about school expectations or because they’ve experienced criticism from the community around them), educators can reassure families of the value across all developmental domains for children remaining strong in their first language.

As educators design and lead, they:

- Plan for professional development on the benefits of multilingual language development for early educators or families.
- Identify ways all early childhood educators and staff can employ strategies to encourage home language use throughout the day.
 - When adults speak the same home language as the children, use the language for a wide variety of interactions (rather than simply to give instructions or manage behavior). (Zheng, et.al., 2021)
 - Label and describe real objects whenever possible to help children understand an object. For example, bring in an actual camera rather than a toy or picture; make food that is pictured in a storybook. (Zheng, et.al., 2021)
- Include information on MLL learning benefits in program brochures and newsletters.

Key concept: All adults (administrators, educators, and parents) work closely together to meet the language needs of multilingual infants and toddlers.

To provide quality care and education, educators:

- Welcome children and families in English and their home language if possible.
- Notice children’s interests and discuss (with families and colleagues) ways to build on interests to support peer interactions and communication during routines and play.

As educators grow in knowledge, skills, and abilities, they:

- Use a variety of communication methods such as conversations, text photos or video, home visits, conferences, family events and meetings to develop communication systems that work for individuals and groups.

- Encourage trust and extend invitations so that families initiate and suggest activities that support their children's overall language. For example, work with families to develop language goals for home language and English development in the early childhood setting (if it is English-speaking); families can share their expectations and suggestions for what their child hears in their home language and when they learn English.
 - Remember, in the years 0-3, the critical consideration is about how children communicate and learn a language, not about which language is spoken.¹
- Invite families to share a story in their home language.
- Develop partnerships to ensure that every child has someone who can communicate with parents and child in their home language.

As educators design and lead, they:

- Learn about the strengths of different family cultures and languages in enrollment forms and welcome meetings or as part of program policy.
- Provide opportunities for families to share their language expertise both at home and in the infant-toddler setting.
- Collaborate with community agencies and programs (including libraries) to provide resources and connections for families. Look for resources to use in the program, too, such as
 - Books and tapes that reflect the languages of the children in the program
 - Pictures that look like the children and families.
 - Culturally familiar images, materials, foods, and routines.
- Build relationships with families and work with community resources in order to address any barriers to regular attendance and consistent participation in the program.
- Ensure time is allotted for collaboration and professional development. For example, support paid time (or substitutes) so that educators can collaborate around language learning with each other and families.
- Offer tools and resources to program staff such as the Minnesota Department of Education Multilingual Learners Page: <https://education.mn.gov/MDE/dse/early/highquality/multiling/index.htm>
- Provide materials in languages represented in the community. At key enrollment times, ensure families can access language support from people who speak multiple languages.

¹ The Educare study ((Yazejian & Bryant, 2010) suggests that true simultaneous bilingualism, where children under age 3 hear both languages (in this case one language at home and another language—English—in the Educare program), maintains the advantages of bilingualism. In some studies, Spanish-speaking children lost some of their Spanish ability when they were in English-dominant programs. But in the Educare study, the program was high quality and children attended consistently across their first three years. For these reasons, these students were able to learn two language *and did not lose any of their Spanish-speaking abilities* (*italics added for emphasis*).

Key concept: Gather and apply information about the culture and language of multilingual families so that infant-toddler program routines, curriculum, and programming is developmentally and culturally appropriate.

Children’s acquisition of communication skills and learning the language of their own culture is considered by many early childhood experts to be a major milestone in the first three years of life. Research over the past three decades has shown that language acquisition, vocabulary development, and the foundation for literacy are established in infancy and toddlerhood through the quality interactions and experiences young children have with adults (cf. Baldwin, 1995; Nakeman & Adamson, 1984; Tomasello & Farrar, 1986).

To provide quality care and education, educators:

- Observe multilingual infants, toddlers, and their families to recognize their responses to language, nonverbal cues, and how they demonstrate understanding of language. Use the information to think about what further supports may be needed.
- Use rich language that describes what is happening and what children and adults are doing during routines and as children explore and play. “Rich language” includes a variety of types of sentences, questions, labeling and responding to children’s communication attempts, even if they are nonverbal.
- Use hands-on learning experiences in 1:1 interactions with multilingual learners before doing a similar activity in a group to facilitate familiarity and support social interactions.
- Consider how to support and scaffold language use by:
 - Respond in a way that matches their communication attempts. For example, speaking for the infant when the infant makes a sound while eating, “Oh, are you telling me you love that cereal?”
 - Imitate infant babbling and sounds to support and reinforce their communication attempts.
 - Notice infant-toddler use of language during goodbyes and greetings with their families and use similar gestures and expressions.

As educators grow in knowledge, skills, and abilities, they:

- Use documentation from child observations and family conversations to plan engaging experiences. Ask questions about how children use language at home (“How does your child let you know when she’s hungry? What tells you your child loves a particular experience or toy?”).
- Integrate key words or phrases from children’s home languages in meaningful ways throughout the day.
- Use language supports throughout the day to support all children’s learning (picture schedules, cue cards, songs, gestures, and play or real props). While these may impact older toddlers more than infants, they also provide visual cues that support language interactions. (“Oh, look, the toothbrush is telling me it’s time to brush our teeth!”)
- Incorporate small group activities to provide opportunities for children to use language with peers and adults. For example, turn infant chairs toward one another while eating. Invite toddler friends over to the book area when reading to one or two children. Encourage older infants to notice younger infants’ communication (“Look! He’s smiling because you showed him the rattle. He likes it when you show him things.”)

- Provide opportunities for children to learn about the cultures, traditions, languages, and family structures of children and families in their own infant-toddler setting and the greater community. For instance, playing, book-reading, and community exploration (such as a walk to the park) help children learn about each other and their community.

As educators design and lead, they:

- Provide time for observation and documentation.
- Assess program/classroom practices that support developmentally and culturally appropriate activities and language use. Use documentation and ongoing routines-based assessment to make improvements in the interactions and environment.
- Regularly collect or meet with families about children's interests and family strengths and assets.
- Create a family leadership or advisory group for multilingual families to co-create program policy and practice or to mentor incoming families.



Stories from the field:

Nindaanis brings the “Firefly Night” book to teacher Kim and holds the book up. Kim snuggles down into a bean bag with Nindaanis to once again read her favorite story. Nindaanis turns the pages quickly to get to her favorite page to see the bears sleeping in the cave and the wolf peeping in. Kim asks, “Where’s the makwa (bear)?” Nindaanis points to the makwa and her makoons (bear cubs) as she growls and giggles and then quickly snuggles next to Kim again to look for the wah-wah-taysee (firefly). “There they are!” Kim exclaims as she points and counts the fireflies, “Bezhiig (one), niizh (two),” and together they say “Niswi (three)!”

Strategies:

Shares positive emotions, responds to cues.

Follows child’s lead.

Repeats books/stories.

Supports home language (Ojibwe).

Points /labels.

Non-verbal communication.

Want to Learn More?

These additional resources will help you learn more about the care and education of young children:

- Beardslee, W., Watson-Avery, M., Ayoub, C., Watts, C., & Lester, P. (2010) *Building resilience: The power to cope with adversity*. Zero to Three. <https://www.zerotothree.org/resources/357-building-resilience>
- Center on the Developing Child. (2021). *3 principles to improve outcomes for children and families*. Harvard University. https://46y5eh11fhgw3ve3ytpwxt9r-wpengine.netdna-ssl.com/wp-content/uploads/2017/10/HCDC_3PrinciplesPolicyPractice.pdf
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- Christie, T. (2018, July). Respect: The heart of serving infants and toddlers. *YC Young Children*, 73(3), 10–15. <https://www.jstor.org/stable/26788974>
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- Early Childhood Learning & Knowledge Center. (2021). *Early essentials webisode 7: Environments* [Video]. U.S. Department of Health & Human Services. <https://eclkc.ohs.acf.hhs.gov/video/early-essentials-webisode-7-environments>
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- Keys Adair, J., & Barraza, A. (2019). Voices of immigrant families in early childhood settings. In C. Gillanders & R. Procopio (Eds.), *Spotlight on young children: Equity & diversity* (pp. 57–70). NAEYC.
- Kuh, L. P., LeeKeenan, D., Given, H., & Beneke, M. R. (2019). Moving beyond anti-bias activities: Supporting the development of anti-bias practices. In C. Gillanders & R. Procopio (Eds.), *Spotlight on young children: Equity & diversity* (pp. 17–29). NAEYC.

- Lally, J. R., Stewart, J., & Greenwald, D. (2009). *A guide to setting up environments* (2nd ed.). California Department of Education and WestEd.
- Luckenbills, J. (2018, July). Mathematizing with toddlers and coaching undergraduates: Foundations for intentional math development. *YC Young Children*, 73(3), 26–33. <https://www.jstor.org/stable/26788977>
- Minnesota Association for Children’s Mental Health. (n.d.). *Toolkit for healing-centered practice*. Accessed May 18, 2022, from <https://macmh.org/publications/resources-for-healing-centered-practice/>
- National Association for the Education of Young Children. (2011). *Code of ethical conduct and statement of commitment*. https://www.naeyc.org/sites/default/files/globally-shared/downloads/PDFs/resources/position-statements/Ethics%20Position%20Statement2011_09202013update.pdf
- National Child Traumatic Stress Network. (2011). *Secondary traumatic stress: A fact sheet for child-serving professionals*. U.S. Department of Health and Human Services, Substance Abuse and Mental Health. <https://www.nctsn.org/resources/secondary-traumatic-stress-fact-sheet-child-serving-professionals>
- Neilsen Gatti, S., Watson, C. L., & Siegel, C. F. (2011). Step back and consider: Learning from reflective practice in infant mental health. *Young Exceptional Children*, 14(2), 32–45. <https://doi.org/10.1177/1096250611402290>
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