

# Early Childhood Development— Basic Concepts

TRAINING FOR EARLY CHILDHOOD CAREGIVERS AND TEACHERS





**MODULE 2** FACILITATOR GUIDE

# Early Childhood Development— Basic Concepts

TRAINING FOR EARLY CHILDHOOD CAREGIVERS AND TEACHERS

*This guide is part of a series of manuals that focuses on six topics in Early Childhood Development (ECD): different programming approaches, basic concepts, assessments, early childhood environments, children with special needs and child protection, and the health, safety and nutrition of young children. The series was prepared within a three-year CRS-led project called “Strengthening the Capacity of Women Religious in Early Childhood Development,” or “SCORE ECD.” Funded by the Conrad N. Hilton Foundation, the project helps Catholic sisters in Kenya, Malawi, and Zambia in their work with children aged 0-5 years and their families. The project is being implemented from January 2014 to December 2016.*

CRS referred to a wide range of documents in preparing this curriculum. Please see “Reference Documents” section in Module 1 facilitator or resource guide for the full list.

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Cover photo: Lawrence Gervais, 40, and Elizabeth Simon, 38, have created a home space for their children where they can apply the early childhood development skills they’ve learned from a CRS project funded by the Hilton Foundation in Geita, Tanzania. Lawrence was selected by CRS and the local diocese as a “role model” male, to be an example for other men and women in the village. *Philip Laubner/CRS*

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# Facilitator's Guide 2: Early Childhood Development— Basic Concepts

## SESSION TOPICS

- Session 1: Introduction to Early Childhood Development
- Session 2: Development and intervention of infants and toddlers
- Session 3: Development and intervention of preschool children

## SESSION LENGTH

- Session 1: 3 hours & 45 minutes
- Session 2: 6 hours & 30 minutes
- Session 3: 5 hours



# Session 1: Introduction to Early Childhood Development

## LEARNING OBJECTIVES

By the end of this session, participants will be able to:

- Describe the meaning and benefits of early childhood development.
- Discuss factors influencing child development.
- Describe the main domains of child development.
- Set appropriate learning and development goals to meet the needs of children in each domain of development, including fostering development for children with disabilities.
- Identify strategies that caregivers can use to help families support their children's development.

**SESSION LENGTH: 3 HOURS & 45 MINUTES**

## SESSION OUTLINE

| ACTIVITY  | SUGGESTED TIME                  |
|---|---------------------------------|
| 1. Welcome and introduction   | 30 minutes                      |
| 2. Early Childhood Development and its benefits                                   | 45 minutes                      |
| 3. Factors influencing child development  | 30 minutes                      |
| 4. Domains of child development and the concept of the "Whole Child"              | 60 minutes                      |
| 5. Application: Nurturing the whole child: The case of Mary, the vulnerable child | 45 minutes                      |
| 6. Closure and session evaluation   | 15 minutes                      |
| <b>Total</b>  | <b>3 hours &amp; 45 minutes</b> |

## MATERIALS

- Name tags and attendance register
- Flipchart and markers
- Handout
- Ball of string
- Collage of pictures of babies and children of different ages doing different things (e.g., babies sleeping, eating, crawling and walking, young children talking, playing, running)

## SESSION PLAN AND PROCEDURE

### SESSION ACTIVITIES

#### Activity 1. Welcome and introduction (30 minutes)

- Have the participants sign an attendance register on arrival and provide them with name tags (5 minutes).
- Welcome everyone and open the meeting in an appropriate way, such as with a prayer or a song (10 minutes).
- Play a game or do an icebreaker activity to help the participants relax and get to know each other better (5 minutes).
- Briefly explain *Module 2, Session 1*—its purpose, and what the participants are expected to learn from this session by going through the activities listed under the session outline above (10 minutes).
- Recap the previous modules/sessions (if applicable), and begin session activities.

#### Activity 2. Early Childhood Development and its benefits (45 minutes)

##### ACTIVITY 2.A. DEFINITION OF EARLY CHILDHOOD, THE BENEFITS OF INVESTING IN EARLY CHILDHOOD DEVELOPMENT, AND BRAIN DEVELOPMENT IN CHILDREN (30 MINUTES)

###### Preparation

- Use the information in this chapter to prepare a presentation on the following topics:
  - Definition of “Early Childhood” [**Note:** Use the quotes described in the ECD policies of Kenya, Malawi, and Zambia.]
  - Why early childhood care and development is an investment priority in Kenya, Malawi, and Zambia.
  - Brain development in children.
- A ball of string

###### Instructions

- Start off by asking the participants to share their understanding of the words “Early Childhood” and the reason why they need to learn about Early Childhood Development (ECD). Write the participants’ ideas on a flipchart.
  - Expand the participants’ ideas using the key points prepared on the flipcharts.
  - Emphasize the benefit of ECD on brain development by doing the small interactive activity below:
1. Tell the participants that there has been a lot of new and exciting research that expands our understanding of how a person’s brain works. Say that you would like to demonstrate this with the group using a ball of string. Locate space outdoors or in the training room and stand in a circle. Hold one end of the ball of string and throw the ball to a participant across from you. Ask her to hold onto the loose

string and throw the ball to someone else. Continue in this way until everyone has had a turn and is connected to one another by the string.

2. Explain that our brain cells are also connected to each other, and that what we now know is that a lot of the connections are made after birth and during the first three years of a child's life. Point out that the baby's brain starts to develop soon after conception and the brain cells are present at birth, but most of the neurological cell connections are made during the first three years of life. Every sensory experience the baby has during this time helps build these brain connections. By three years of age, a child's brain is twice as active as an adult's brain.
3. Before completing the activity, give some examples of the way parents and teachers can help children's brains make connections (e.g., by creating safe places for them to play). Teachers and parents can also:
  - Talk to children.
  - Read to children.
  - Sing songs with children.
  - Dance with children.
  - Provide opportunities for children to play outside.
  - Encourage children to explore through their senses.
  - Comfort children when they are upset.

## ACTIVITY 2.B. PERIODS OF EARLY CHILDHOOD: WHAT IS GROWTH? WHAT IS DEVELOPMENT? HOW DOES DEVELOPMENT TAKE PLACE? (15 MINUTES)

### Preparation

- Use the information in this chapter to prepare a presentation on the following topics:
  1. Growth and development
  2. How does development take place?

Prepare the key points on flipcharts or PowerPoint.

### Instructions

- Start off by asking the participants to answer the question in *Activity 2.1* below, then think of the first idea that comes to mind when they hear the words:
  - Child
  - Growth
  - Development
- Write the participants' answers on a flipchart.
- The facilitator presents the definition of the words "Growth" and "Development" and the categories of the early childhood period, which are:
  1. Infancy: Birth-one year
  2. Toddlerhood: One to three years
  3. Preschool-aged: Three to five years
  4. Kindergartners: Five to six years
  5. Primary: Six through eight years
- Ask the participants to find a partner. Write the following lists of developmental milestones on a flipchart and instruct the partners to try putting them in the order in which they tend to appear during childhood.
  - Fear of ghosts
  - Fear of being embarrassed in front of others
  - Fear of strangers (stranger anxiety)

- Have them explain their rationale for arranging their list the way they did. Record on a flipchart the ideas that the partners have shared. Give the correct answer using the facilitator’s note below. Emphasize the idea *that development happens in a relatively orderly progress but each child develops at his/her own pace and experiences by presenting key points on the topic, “How does development take place?”*

### NOTE FOR THE FACILITATOR: ANSWER KEY

1. Fear of strangers
2. Fear of ghosts
3. Fear of being embarrassed in front of others

## Activity 3: Factors influencing child development (30 minutes)

### Preparation

Use the information in this chapter to prepare a flipchart presentation on the topic *Factors that influence child development*. Specifically:

- a. *Individual difference and its influence on child development.*
- b. *Environment and its influence on child development.*

### Instructions

- Ask the participants to brainstorm about the question, “What kinds of things affect children’s development positively or negatively?” Write their answers on a flip chart.
- Explain that individual differences and environments affect children’s development in many ways and give a presentation on the topic *Factors That Influence Child Development* using the prepared points on the flipchart. Include ideas that were not mentioned in the brainstorming exercise. Before completing your presentation, emphasize that it is important to know that *development is influenced by heredity, environmental factors, culture, and family values which are all unique to each individual*. The growing child affects his/her environment and the environment affects the growing child (e.g., abilities, personalities, families, social values, culture).

## Activity 4: Domains of child development and the concept of the “Whole Child” (1 hour)

### ACTIVITY 4.A. THE FOUR DOMAINS OF DEVELOPMENT AND THE MEANING OF “WHOLE CHILD” (15 MINUTES)

#### Preparation

- Make a collage of pictures of babies and children of different ages doing different things (e.g., babies sleeping, eating, crawling and walking; young children talking, playing, running). Display the collage on a wall in the training room.
- Use the information in this session to prepare a presentation on the four domains

of child development and the meaning of “Whole Child.” Write the key points on flipchart paper.

### Instructions

- Invite the participants to view the collage. Use the following questions to facilitate a discussion with the large group about how children in the pictures are developing and learning:
  - What is the child doing? What are the children doing?
  - How do you think the child is developing?
  - How old do you think the child is? Why?
- Continue discussing the concept of the “Whole Child” by asking the participants their understanding of the words, “Whole Child.”
- Give a presentation on the domains of child development and the meaning of the “Whole Child” using the prepared key points on the flipchart and showing examples from the displayed pictures.

### ACTIVITY 4.B. SETTING GOALS FOR SUPPORTING ALL AREAS OF CHILDREN’S DEVELOPMENT (45 MINUTES)

#### Preparation

Write the development and learning goals for each developmental area on a separate piece of flipchart paper (These are provided at the end of each developmental area in this chapter.)

#### Instructions

- Advise the participants that they will now be looking at how children grow and develop and invite them to draw on their own experiences as caregivers.
- Explain that during this course we will be looking at the different areas of development that make up the “Whole Child.” Write each of the developmental areas down on flipchart paper:
  - Physical and motor development
  - Social and emotional development
  - Cognitive and language development
  - Spiritual and moral development
  - Approaches to learning
- Remind the participants that *in real life, development is not divided, but doing so makes it easier to study the different areas.*
- Divide the participants into small groups, and give each group *one area of development* to focus on for this activity. Refer the groups to the session of *Resource Guide, Module 2* on developmental domain. Each group reads the information together and then discusses:
  - From what you have read, what does a child need in order to develop and learn?
  - How can you use what you know about this area to help children develop and learn?
  - What special consideration would you give to children with disabilities in this area of development?
- Give an example of how:
  - Physical development can influence cognitive development.
  - Spiritual and moral development can influence social development.

- Ask the groups to share their views, then summarize the main points about each area after the activity. Emphasize that development and learning goals for one developmental area can also foster two or more developmental needs of a child.
- Display the flipchart posters with the development and learning goals for each developmental area and talk about how the goals meet the needs that were identified in the previous activity. The activities we plan should help children develop and learn across all developmental areas.
- Summarize by emphasizing that all areas develop at the same time and that no one area is more important than the other. Give more examples of how one developmental area can affect another (e.g., if a child does not get enough to eat [physical development], he/she may be too tired to play with other children [social] and learn more about the world [cognitive]).
- Keep the developmental and learning goal posters for the activity that follows. You can reflect after each session on how the goals are being met.

## Activity 5: Application—Nurturing the “Whole Child”: The case of Mary the vulnerable child (45 minutes)

### Preparation

A handout on the case story, *Mary, the vulnerable child* for each group (Optional)

### Instructions

- Instruct the participants to go back to their small groups and ask each group to read from the resource guide the case story, *Mary, the vulnerable child*.
- Read aloud the case story and the questions in the case story for the whole group. Explain that this activity is about putting their knowledge of the “Whole Child” into practice through a case story analysis.
- Ask each group to reflect on the questions of the case story and work out a plan for Mary’s development and learning across all developmental areas. To facilitate discussion, remind the groups to refer to what they have learned about community mapping, domains of development, and the concept of the “Whole Child.”
- Have the groups report back on their plan and reflect on their experiences, and conclude the activity with the key message: **No single developmental domain develops independently of the others. Every skill requires a mix of developmental abilities. This is referred to as the “Whole Child.”**

## CLOSURE AND SESSION EVALUATION (15 MINUTES)

### Preparation

Make copies of the *Session Evaluation Form* for each participant [**Note:** Find the Session Evaluation Form in the appendix of this guide.]

### Instructions

Summarize what has been covered during the session and ask if there are any questions or anything that is not clear.

- Hand out the *Session Evaluation Form* and ask the participants to 1) conduct a self-assessment of learning, and 2) evaluate the training.
- Read the instructions for the session evaluation to the whole group before the participants begin to complete the form.
- Ask the participants to hand in their completed evaluation form.
- Keep the completed form in a file and give it to the organizer of the training. Close with a song or a prayer.



# Session 2: Development and Intervention of Infants and Toddlers

## LEARNING OBJECTIVES

By the end of this session, participants will be able to:

- Describe the stages of development during the prenatal period and factors influencing the development of the newborn child.
- Describe how the caregiver-child attachment relationship during the first three years of life is critical to “Whole Child” development.
- Describe the role of caregivers during caregiving routines.
- Understand the developmental skills of infants and toddlers across all the domains of development.
- Identify ways to foster the development and learning of infants and toddlers.
- Identify ways in which caregivers can deal with the challenging behavior of toddlers and promote prosocial behavior.

**SESSION LENGTH: 6 HOURS & 30 MINUTES**

## SESSION OUTLINE

| ACTIVITY  | SUGGESTED TIME            |
|---|---------------------------|
| 1. Welcome and introduction   | 30 minutes                |
| 2. The beginning of child development: Maternal and newborn care                        | 60 minutes                |
| 3. Attachment and its importance in development and learning of the child               | 1 hour & 45 minutes       |
| 4. Quality caregiving for infants and toddlers  | 45 minutes                |
| 5. Developmental milestones of infants and toddlers                                     | 30 minutes                |
| 6. Fostering the development and learning of infants and toddlers: Ideas for caregivers | 1 hour & 15 minutes       |
| 7. Guidance and discipline: Responding to challenging behaviors of toddlers             | 30 minutes                |
| 8. Closure and session evaluation   | 15 minutes                |
| <b>Total</b>  | <b>6 &amp; 30 minutes</b> |

## MATERIALS

- Name tags and attendance register
- A brief lecture prepared on flipcharts or PowerPoint
- Flipcharts and markers
- Handouts
- Training manual

## SESSION PLAN AND PROCEDURE

### Activity 1: Welcome and introduction (30 minutes)

- Have the participants sign an attendance register and give them name tags as they arrive (5 minutes).
- Welcome everyone and open the meeting in an appropriate way such as with a prayer or song (10 minutes).
- Play a game or do an icebreaker to help the participants relax and get to know each other better (5 minutes).
- Briefly explain *Module 2, Session 2*—its purpose, and what participants are expected to learn from this session by going through the activities listed under the session outline table (10 minutes).
- Recap the previous modules/sessions (if applicable), and begin session activities.

### SESSION ACTIVITIES

### Activity 2: The beginning of child development: Maternal and newborn care (60 minutes)

#### ACTIVITY 2.A. CHILD DEVELOPMENT DURING THE PRENATAL PERIOD (15 MINUTES)

##### Preparation

Presentation of key points on the topics:

- The importance of maternal health for child development
- Safe delivery and the newborn
- Bonding with the newborn child
- Self-test handout on *The beginning of child development* for each participant

##### Instructions

Start off by providing the handout below to each participant and ask them to complete the self-test. When everyone has completed the self-test, provide the correct answers for each question. Expand the answers for **questions 6, 7, 8, & 9** by using the prepared presentation.

## SELF-TEST HANDOUT: THE BEGINNING OF CHILD DEVELOPMENT: WHAT YOU SHOULD KNOW

Instruction: Read each question below and give your answers.

| 1.                          | When does child development begin?   |             |                                |
|-----------------------------|--|-------------|--------------------------------|
| 2.                          | During the prenatal period, the child develops in three stages: These three stages are called <i>the first, second, and third trimesters</i> . During these stages of prenatal development, the child shows distinct developmental characteristics.<br><b>Instruction: Match the developmental characteristics with the correct stage of prenatal development.</b> |             |                                |
| DEVELOPMENT CHARACTERISTICS |  | ANSWER      | STAGES OF PRENATAL DEVELOPMENT |
| 2.1.                        | All the baby's organs and body parts are fully present. The baby develops a sleep/wake pattern; kicks and pokes mother's ribs and abdomen; lungs are prepared, increasing the baby's survival chances at birth; toenails and fingernails are formed.   |             | A. 3rd trimester               |
| 2.2.                        | The baby's major organs such as the brain, the spinal cord, and nerves, heart, face, arms and legs, sexual organs, and muscles are formed.   |             | B. 2nd trimester               |
| 2.3.                        | The body size increases, eyelashes and eyebrows grow, the head becomes bigger, the heart beat is stronger, and the baby starts hearing sounds; begins to kick, suck, open and close hands. The mother may feel the baby's movement.  |             | C. 1st trimester               |
| 3.                          | <i>True or False?</i> A lack of prenatal health care checkups has serious effects on the child, such as preterm births or low birth-weight (LBW) infants, fetal death, and disabilities.   |             |                                |
| 4.                          | Pregnant women must have medically supervised prenatal care. Why do you think this is important? Give a brief explanation.   |             |                                |
| 5.                          | There are a number of things that a pregnant woman must have or do to ensure the development of a healthy baby. In your view, what are these things?   |             |                                |
| 6.                          | In a traditional community, most families choose to deliver their babies at home with the assistance of midwives. However, home delivery may involve some risks for both the mother and the baby. Do you agree or disagree? Give a brief explanation.  |             |                                |
| 7.                          | What do you know about <b>Kangaroo Care</b> ? Give a brief explanation.  |             |                                |
| 8.                          | Why is <i>bonding</i> between a caregiver and a newborn important? Give a brief explanation.   |             |                                |
| 9.                          | Newborn babies show some capabilities. Read each statement below and give your answer by stating whether the statement is true or false.   | <b>True</b> | <b>False</b>                   |
|                             | A. The infant looks at human faces.  |             |                                |
|                             | B. The infant shows a preference for milk smells and turns away from unpleasant odors.   |             |                                |
|                             | C. The infant recognizes their caregiver/mother through both sound and smell.  |             |                                |
|                             | D. Touch is the newborn's communication with his/her caregiver. Slow patting is soothing, whereas fast patting alerts the baby.  |             |                                |
|                             | E. When picked up and rocked, the infant's eyes open and they look ready for interaction.  |             |                                |
|                             | F. The infant keeps interesting objects in view and displays tracking behavior when the objects move.  |             |                                |

**FOR FACILITATOR USE ONLY: SELF-TEST HANDOUT: THE BEGINNING OF CHILD DEVELOPMENT: WHAT YOU SHOULD KNOW**

**ANSWER KEY**

**Instruction: Read each question below and give your answers.**

| 1.                          | When does child development begin? <b>Answer:</b> Child development begins at conception.   |            |                                |
|-----------------------------|---|------------|--------------------------------|
| 2.                          | During the prenatal period the child develops in three stages, called <i>the first, second, and third trimesters</i> . During these stages of prenatal development, the child shows distinct developmental characteristics.<br><b>Instruction: Match the developmental characteristics with the correct stage of prenatal development.</b>  |            |                                |
| DEVELOPMENT CHARACTERISTICS |   | ANSWER KEY | STAGES OF PRENATAL DEVELOPMENT |
| 2.1.                        | All the baby's organs and body parts are fully present. The baby develops a sleep/wake pattern; kicks and pokes mother's ribs and abdomen; lungs are prepared, increasing the baby's survival chances at birth; toenails and fingernails are formed.  | A          | A. 3rd trimester               |
| 2.2.                        | The baby's major organs such as the brain, the spinal cord, and nerves, heart, face, arms and legs, sexual organs, and muscles are formed.  | C          | B. 2nd trimester,              |
| 2.3.                        | The body size increases, eyelashes and eyebrows grow, the head becomes bigger, the heart beat is stronger and the baby starts hearing sounds; begins to kick, suck, open and close hands. The mother may feel the baby's movement.  | B          | C. 1st trimester               |
| 3.                          | <i>True or False?</i> A lack of prenatal health care checkups has serious effects on the child, such as preterm births or low birth-weight (LBW) infants, fetal death, and disabilities. <b>Answer:</b> True  |            |                                |
| 4.                          | Pregnant women must have medically supervised prenatal care. Why do you think this is important?<br><b>Answer:</b> Many diseases that can damage the child's health can be detected and treated early. Some of these diseases include HIV, malaria, tuberculosis, or syphilis.  |            |                                |
| 5.                          | There are a number of things that a pregnant woman must have or do to ensure the development of a healthy baby. In your view, what are these things? Answers can vary by individual (open discussion).<br><b>Answer:</b> Heath care; healthy lifestyle; healthy nutrition; adequate livelihood; healthy body weight; rest; avoiding teenage pregnancy.<br>[ <b>Note:</b> Explain each of these points by using the prepared presentation on the topic <i>The importance of maternal health for child development.</i> ] |            |                                |
| 6.                          | In a traditional community, most families choose to deliver their babies at home with the assistance of midwives. However, home delivery may involve some risks for both the mother and the baby. Do you agree or disagree? Answers can vary by individual: (open discussion).<br>[ <b>Note:</b> Explain the importance of safe delivery by using the prepared presentation on the topic <i>Safe delivery and the newborn.</i> ]  |            |                                |
| 7                           | What do you know about <b>Kangaroo Care</b> ? Give a brief explanation.<br>[ <b>Note:</b> Explain the key points on conditions affecting the newborn and how <i>Kangaroo Care</i> helps premature babies to thrive. Refer to the information on the topic <i>Conditions affecting the newborn and care for the newborn.</i> ]   |            |                                |
| 8.                          | Why is <i>bonding</i> between a caregiver and a newborn important? Answers can vary by individual (open discussion).<br>[ <b>Note:</b> Explain the key points on bonding and its importance using the prepared presentation on the topic <i>Bonding with the newborn child.</i> ]   |            |                                |
| 9.                          | Newborn babies show some capabilities. Read each statement below and give your answer by stating whether the statement is true or false.  |            | <b>True or False?</b>          |
|                             | A. The infant looks at human faces.   |            | <b>True</b>                    |
|                             | B. The infant shows a liking for milk smells and turns away from disagreeable odors.  |            | <b>True</b>                    |
|                             | C. The infant recognizes their caregiver/mother through both sound and smell.   |            | <b>True</b>                    |
|                             | D. Touch is the newborn's communication with his/her caregiver. Slow patting is soothing, whereas fast patting alerts the baby.   |            | <b>True</b>                    |
|                             | E. When picked up and rocked, the infant's eyes open and they look ready for interaction.   |            | <b>True</b>                    |
|                             | F. The infant keeps interesting objects in view and displays tracking behavior when the objects move.   |            | <b>True</b>                    |

## ACTIVITY 2.B. TEMPERAMENT OF THE NEWBORN CHILD (15 MINUTES)

### Preparation

- A presentation on the newborn's temperament [**Note:** Use the facilitator's note below.]
- Role-play scenarios written on a flipchart or handout

### NOTE FOR THE FACILITATOR: NEWBORN'S TEMPERAMENT

Each child is born with unique personal characteristics or temperaments that seem to stay with them as they grow. Some children have a temperament that is challenging to caregivers and some are easy. Some are lively and some are quiet and inactive. Most children fit into one of three types of temperament:

1. An *easy child* responds positively and happily to routine activities without making a fuss; he/she gets along well with the caregiver and adjusts quickly to the surrounding environment. This child often elicits positive reactions and responses from the caregiver.
2. A child with a *challenging temperament* has difficulty getting along with caregivers and routine activities; he/she resists new activities with intense reactions and takes time to adjust to new changes of routines. This child is more likely to elicit unfavorable reactions or responses from the caregiver. For example, a caregiver might ignore the child; her indifferent reaction in turn affects the bonding between her and the child and this can cause the child to experience emotional problems.
3. A *slow-to-warm-up* child is quiet, shows little reaction to changes in routines, and takes time to adjust to new happenings and experiences. This child may receive somewhat slow responses and reactions from the caregiver when compared to a child who engages emotionally with the caregiver.

### Instructions

- Start off by asking the participants to find a partner and discuss the topic below:
  - Describe your temperament (e.g., easygoing, passive, quiet, hot tempered) or personality characteristics as a child and if it has changed or stayed the same throughout your adulthood.
- Ask volunteers to share what they have discussed.
- Explain that each child is born with personality characteristics, and temperament is one of them. Using the facilitator's note above, discuss the three categories of temperament of a child: *easy*, *slow-to-warm*, and *difficult child*.
- **Role-play:** Ask for six volunteers to play the role in the three scenarios below. Divide the six volunteers into three groups of two.
  1. Assign Group 1 to role-play *Scenario 1: Grace and her caregiver*
  2. Assign Group 2 to role-play *Scenario 2: Mary and her caregiver*
  3. Assign Group 3 to role-play *Scenario 3: Richard and his caregiver* (The person playing the role of Richard pretends she is a boy.)
  4. Ask the remaining group to observe and give their views about the "child's" temperament and the "caregiver's" reaction to the child.

### SCENARIOS: THE EASY, THE DIFFICULT, AND THE SLOW-TO-WARM CHILD.

- **Scenario 1:** Easy child: Grace is a bubbly, easygoing baby. She responds with smiles when her caregiver changes her diaper; she actively communicates by cooing and making sounds when she sees her caregiver. When she is awake, the caregiver always wants to play with her.
- **Scenario 2:** Slow-to-warm child: Mary is quiet and passive. Caregivers have to try

hard to make her engage in communicating with them. Since Mary is quiet most of the time, the caregiver uses the time to do other activities and does not attempt to talk or play with Mary unless she cries.

- **Scenario 3:** Difficult child: Richard is active and alert. At one week old he wiggles his legs and his limbs seem to be moving. He makes noises wanting attention. His caregiver is already overwhelmed by his energy: “Oh, how difficult he will be when he grows up more...” The caregiver shows signs of tiredness and being upset as she walks slowly towards Richard.

### REFLECTION QUESTION FOR THE OBSERVERS

- What is the reason behind the different responses of the caregivers towards the children?
- What lesson have you learned from the three scenarios? What advice do you have for each of the three “caregivers” here?
- Summarize the caregivers’ reactions and responses in the three scenarios:
  - Grace’s caregiver interacts with her.
  - Mary’s caregiver ignores her.
  - Richard’s caregiver tries but gets frustrated.
- Expand your summary by explaining:
  - Children are born with their own temperament. They are sensitive to their environment and ready to interact and form a *bond* with the caregiver they meet.
  - Caregiver’s responsibility is to know the newborn well and be ready for a mutual, close, and rewarding relationship.
  - Bonding can be quick and easy for some caregivers and children; their attachment can also be spontaneous and immediate. For others, love grows more slowly.
  - It is important for caregivers to recognize that each child is born with a different temperament and should be treated as an individual.

### ACTIVITY 2.C. FOSTERING MATERNAL AND CHILD CARE FOR FAMILIES LIVING IN DISADVANTAGED COMMUNITIES (30 MINUTES)

#### Preparation

Handout on *The case of Turkana Village, Kenya*

#### Instructions

- Divide the participants into **three small groups**. Provide the handout to each group and ask them to read the case study carefully and answer questions one through six of the case study.
- Have each group present their work.
- Ask the whole group to reflect on what they have learned from this exercise.

## ACTIVITY 2.C. HANDOUT

### HOLISTIC INTERVENTION FOR MOTHERS AND CHILDREN: THE CASE OF TURKANA VILLAGE, KENYA

*Contributed by Sisters of Saint Marianas of Jesus, Kenya, SCORE ECD*

The sisters are working with the community in Turkana where there is a high prevalence of anemia, malnutrition, early marriages, and conflicts due to cattle rustling. Cases of mothers giving birth to twins are common. However, most of these children are malnourished as mothers lack the food they need to produce adequate breast milk. In addition, some children also suffer from anemia at early ages. Given the harsh climatic conditions, poor transport and communication networks, and inadequate health facilities, many children below age five of anemia and malnutrition each year. Due to inadequacy of resources, the congregation is supporting few marginalized families, e.g., the elderly, widows, and orphans. Given the great work that sisters are doing in this community, many of the people believe that the sisters are the only people who can listen to their concerns, especially on child care and nutrition issues. This makes the congregation overstretch their resources in attempts to meet the needs of the families.

Another challenge that the families are experiencing is polygamy. Women are struggling to raise their children in polygamous families since in most instances the father is away or is looking after the livestock or is with another wife. The men hardly support nor provide for the families. This situation contributes to high levels of malnutrition.

#### **Reflect, discuss, and report**

1. Identify the problems of the Turkana community.
2. Explain how each of the problems you have identified relates to *maternal health before and during pregnancy*. Use the information in this session to explain your answer.
3. Explain how the problems can affect a baby's development.
4. Who in your community can join the sisters' effort and bring more positive results for families and children in Turkana village? Focus your support on *expectant mothers and newborn babies*.
5. Answer *Question 4* by applying the holistic approach. Make a plan and recommend an actionable intervention for Turkana Village. How can fathers be involved?
6. Write down your plan on a flipchart and report to the whole group of participants.

## Activity 3: Attachment and its importance for child development (1 hour & 45 minutes)

### ACTIVITY 3.A. DEFINING ATTACHMENT AND ITS IMPORTANCE FOR CHILD DEVELOPMENT (15 MINUTES)

#### Preparation

Prepare a presentation of key points on the topic *Attachment*.

#### Instructions

- Ask the group to find a partner, discuss the question below, and report:
  - Imagine a dialogue with a caregiver of a newborn child who made the statement below. What would be your reaction to her statement? Would you agree or disagree? Why? What would you like to share with the caregiver? Write down the answers of the partners as they provide them.  
  
**Caregiver's statement:** "It is okay if a baby does not have a longstanding relationship with one caregiver as long as the baby's needs for feeding, bathing, changing, and sleeping are well taken care of."
- Present information on the definition of "Attachment."
- Explain that in addition to receiving full care, children need to form attachment with their caregiver. Attachment is a long-standing emotional bond of infants with an adult who cares for them. Attachment is important not only in infancy but also throughout life. Active communication between a caregiver and a child during caregiving routines fosters the attachment behavior between the child and the caregiver.
- Discuss the importance of attachment on the development of the brain. Start off by presenting the participants with the two quizzes below:
  1. *True or False?* Most of the brain cells are formed before birth, but most of the connections among cells are made as a result of the child's active engagement with a stimulating environment during infancy and early childhood (The answer is true.)
  2. *True or False?* Touch, language, and responsive and loving care influence a child's brain growth (The answer is true.)
- Ask the reflective questions below before you move to the next activity.

#### Reflective question: Whole group

- What are the most important points from what you have learned about the brain and its connection to attachment? Why are they important?
- How might you share this information with caregivers or parents?
- Explain that the participants will next learn how and with whom children form attachment.

## ACTIVITY 3.B. HOW ATTACHMENT IS FORMED: STAGES OF ATTACHMENT

(30 MINUTES)

### Preparation

- *Resource Guide, Module 2: Topic How is attachment formed and when does it take place?*
- Flipchart on the key points of *Benefits of attachment to children's development*  
[**Note:** Use the facilitator's note.]

### Instructions

- Divide the participants into **four small groups**.
- Refer the groups to the section in this session entitled *How is attachment formed and when does it take place?* Ask them to read the four stages of attachment.
- Assign one stage to each of the four groups.
  1. **Group 1:** Attachment Stage 1: Why is this stage important? How would you advise a caregiver or a teacher about a child in this attachment stage? Explain the attachment needs of a baby between birth to six months.
  2. **Group 2:** Attachment Stage 2: Why is this stage important? How would you advise a caregiver or a teacher about a child in this attachment stage? Explain why a nine- to ten- month-old infant might begin fussing and refusing to be left with an *unfamiliar* caregiver.
  3. **Group 3:** Attachment Stage 3: Why is this stage important? How might you advise a caregiver of a child nearing his/her first birthday? Explain why the child at this stage shows fear of strangers or of being separated from his/her caregiver.
  4. **Group 4:** Attachment Stage 4: Why is this stage important? How would you advise a caregiver or a teacher about a child in this attachment stage? Explain why the child at this stage finds it easier to let go of his/her caregiver without fear and anxiety.
- Allow each group to report back their answers. Expand the discussion by asking the whole group to reflect on this question: *With whom can young children form attachment?* Add your comment, emphasizing that children can form attachments with a mother, a father, and multiple caregivers. **The important thing is that children need to form a consistent attachment with at least one caregiver.** Programs of group homes must always make sure young children have a secure attachment figure that can provide them with guidance and consistent nurturing and trusting experiences.
- Conclude the discussion on attachment and its importance on child development by consolidating ideas with more information not mentioned by the participants.
- Emphasize that attachment is a long-standing emotional bond of infants with an adult who cares for them. Attachment is important not only in infancy but also throughout life. Its benefits to children's development are many.

**NOTE FOR THE FACILITATOR: BENEFITS OF ATTACHMENT TO CHILDREN’S DEVELOPMENT**

- Children develop healthier self-concepts and earlier and better language, cognitive, and social skills when raised by responsive adults who are warm, loving, and caring at all times.
- If a child feels secure with a caregiver, then the child will explore what is around him/ her; this contributes to his/her learning about the world.
- If a child feels secure with a caregiver, then the child has someone to go to in case he/she is frightened; this is important for emotional development.
- Attachment with a caregiver also helps a child to be confident in his/her self.
- Infants and young children thrive when adults respond promptly and positively to appropriate things a child says and does.
- When pre-term babies born with low birth weight bond with their caregiver/s and receive care, love, and stimulation, they not only develop physically, but also thrive.
- When children form secure attachment with one or more caregivers by twelve months of age, they become more obedient with adults as toddlers, accept parents’ limit setting, get into fewer fights and become friendlier, and expect a caring response from peers. In return they show empathy and care to their peers.
- Fostering the attachment process with children with disabilities or vulnerable children is not different than with the attachment process of typically-developing children. Children with disabilities or vulnerable children need extra attention and time from their caregivers.

**ACTIVITY 3. C. THE IMPACT OF SECURE AND INSECURE ATTACHMENT ON CHILDREN’S DEVELOPMENT AND SIGNS OF SECURE AND INSECURE ATTACHMENT (15 MINUTES)**

**Preparation**

- Write the key ideas on flipcharts on the topic *What happens when children form secure or insecure attachment?*
- Draw the *Activity Chart* below on a flipchart.

**ACTIVITY CHART: SECURE AND INSECURE ATTACHMENT**

| IMPACT OF SECURE ATTACHMENT ON CHILD DEVELOPMENT | IMPACT OF INSECURE ATTACHMENT ON CHILD DEVELOPMENT |
|--|--|
|  |  |
|  |  |

**Instructions**

- Ask the participants to find a partner and instruct them to discuss the following question and report: *What happens to children’s development if they have little or no attachment relationship with a constant caregiver?* Have them explain their answers.

- Bring the prepared *Activity Chart* and write the answers of participants in each column as they report.

### ACTIVITY CHART: SECURE AND INSECURE ATTACHMENT

| IMPACT OF SECURE ATTACHMENT ON CHILD DEVELOPMENT | IMPACT OF INSECURE ATTACHMENT ON CHILD DEVELOPMENT |
|--|--|
|  |  |
|  |  |

- Consolidate the participants' lists of answers by providing additional information from the session entitled *What happens when children form secure or insecure attachment?* Then, move on to the next discussion.

Ask the participants to switch a partner, then have them discuss the questions in the chart below and report:

- Draw two columns on a flipchart as shown below.
- Write the participant's answers in each column as they report.

| WHAT ARE SOME SIGNS OF SECURE ATTACHMENT IN CHILDREN? | WHAT ARE SOME SIGNS OF INSECURE ATTACHMENT IN CHILDREN? |
|---|---|
|   |   |
|   |   |

Consolidate the participants' lists of answers by providing additional information using your prepared flipchart presentation with key ideas on the topic *Signs of secure and insecure attachment* and move on to the next activity [**Note:** Hang all flipcharts on the wall so that the participants can refer to them during later sessions.]

### ACTIVITY 3.D. ATTACHMENT ISSUES AND WAYS TO PROMOTE ATTACHMENT (45 MINUTES)

#### Preparation

- A handout on *Attachment issues*, per participant (optional)
- A handout on *Ways programs can promote attachment: Case scenario*, per group

#### Instructions

- Read to the whole group **Attachment issues** from below and invite an open discussion on the questions that follow. After you wrap up the discussion, move on to the next small group activity.

## NOTE FOR THE FACILITATOR: ATTACHMENT ISSUES

Infants growing up in orphanages may face attachment issues. They often have more than one caregiver who provides all the care they need every day. Because the caregivers are many, the infants may not be able to form a stable relationship with one caregiver. Caregivers also may not be able to spend adequate time with each individual infant if the number of infants is large. In such situations, infants miss the constant physical and emotional reaction from the caregiver and eventually give up their attempt to elicit the caregiver's response. The lack of physical and emotional contact with a caregiver in turn deprives infants of early sensory learning and bonding with a trusted adult. Infants then gradually stop showing their communicating behavior (cooing, crying, smiling, looking at the caregiver, etc.), their development slows, and they fail to thrive.

- Ask the participants to reflect on the question below:
  - What is the likelihood that this issue is true for infants living in orphanages in your community? Is it likely to happen “all the time,” “most of the time,” “sometimes,” or “never?” [**Note:** There is no right or wrong answer for this activity as the issue depends on the context of the orphanage.]
- Summarize by pointing out that orphanage programs need to ensure that each child receives appropriate, consistent, and positive caregiver-child interactions that foster the trusting relationship between the caregiver and child. This trusting relationship enhances the development of children.
- Explain that in the next activity, participants will have the chance to explore some practical ways of addressing the attachment needs of children in an orphanage setting.
- Next, divide the participants into small groups and give each group the handout **Ways programs can promote attachment: Case scenario** (30 minutes)
- Explain to the groups that this exercise is about applying their knowledge of attachment to practice, then read aloud to the whole group the case scenario below.
- Ask the small groups to discuss the scenario and come up with their plan based on the questions that follow the case scenario.

### **ACTIVITY 3.D. HANDOUT: WAYS PROGRAMS CAN PROMOTE ATTACHMENT: CASE SCENARIO**

You are assigned to administer and supervise an infant care program in a group home care (orphanage). The supervisor expects you to come up with a plan for setting up and managing the infants' care room of the orphanage. The supervisor said this to you:

“Our infant-care room is occupied with 15 newborn babies, ages between three to four months old, except one child who is 11 months old. This infant-care room is well-equipped with cribs and resources for food and facilities for changing infants, etc. There is also a budget for hiring caregivers. However, we have no clear plan yet how to manage this responsibility. These children have been transferred to our facility by the government a week ago.

The background information we have about these children is this: five of the babies are orphans, their parents died of AIDS, and the remaining ten children have been abandoned at a health care compound. Whether these children have parents or not is not yet known. The 11-month-old baby boy is one of the five orphans whose parents died of AIDS and the government has started an adoption process for him which is highly promising. Because our orphanage advocates for family-based life for all children, it is likely that we will complete the process of the adoption for this child before his first birthday. But we need to have a good transition plan for his adoption.

My most immediate concern is about meeting the babies' emotional needs, as they have lost their parents' contact and care.

Your job is to make sure that all of these infants receive all necessary care and supervision and grow up well and happy, most importantly having a caregiver/s that can meet their basic needs as well as establish a warm, responsive relationship with the children.

#### **REFLECTION QUESTION: GROUP EXERCISE**

1. Based on what you know about *attachment*, how can you meet your job's responsibility?
2. What can you do for the five orphan babies whose parents died of AIDS?
3. What can you do for the ten children who have been abandoned at a health care compound?
4. What would you recommend for the 11-month-old infant who is likely to be adopted *before his first birthday*? Consider his health, age, and attachment stage.

#### **ROLE-PLAY: TRAINING CAREGIVERS**

Train newly hired caregivers by describing the importance of attachment to children and what will happen to the children if they do not have good attachment relationships with their caregivers.

#### **SCENARIO:**

One person from the group can play the role of the trainer and the remaining members of the group play the role of the newly hired caregivers.

- Have the groups report back and reflect on the most important thing they have learned from this activity.
- Summarize what has been covered during the activity and ask if there are any questions or anything that is not clear. Explain that the participants have learned about the first stages of child development, which takes place in the mother's womb during the prenatal period, and that they will continue to learn about the child's development during infancy and what caregivers can do to enhance development at this stage of the child's life.

## Activity 4: Quality caregiving for infants and toddlers (45 minutes)

### ACTIVITY 4.A. CAREGIVING AS A LEARNING AND DEVELOPMENT OPPORTUNITY FOR INFANTS AND TODDLERS (15 MINUTES)

#### Preparation

None

#### Instructions

- Start off by asking the participants to recall the age categories in early childhood. Remind them that *age divisions are to be used with caution and flexibility when dealing with children because there is great variation from one child to another*. Definition of age divisions and milestones also vary from one culture to another.
- Ask the whole group to brainstorm on:
  - What is your reaction to the statement: "Babies can't learn"?
  - Do you think infants and toddlers can learn?
  - If yes, how do they learn? If no, Why?
  - Who can teach infants and toddlers?

Expand the participants' understanding by pointing out that caring for a child is the primary goal of all parents and caregivers. In order to grow optimally, children need to feel safe, secure, happy, and healthy at all times. But in addition to care, nurturing children's developmental needs through constant positive stimulation is also critical to children's learning and development.

However, some caregivers tend to think that all they have to do with infants and toddlers is to watch out for their basic needs (food, shelter, health) and keep them safe, and learning comes later when they enter school. Their thinking is that infants and toddlers are not yet physically and mentally skillful or ready to learn. For this reason, most caregivers do not make much effort to engage children in learning activities. But this is not true. Infants and toddlers can learn and caregivers are their main teachers.

## ACTIVITY 4.B. THE ROLE OF CAREGIVER IN A CAREGIVING ROUTINE (30 MINUTES)

### Preparation

- A presentation of key points on the topic *The role of a caregiver in a caregiving routine* [**Note:** See *Caregiver's practice: Reflection checklist*].
- Handout: Copy of the *Caregiver's practice: Reflection checklist* per participant
- Handout: *Diaper changing scene 1 and scene 2* per participant

### Instructions

- Ask the participants to find a partner and share their ideas on this question: *On average, how much time do you think a caregiver spends with her child each day during her routine caregiving activities?*
- Ask for volunteers to share their thoughts.
  - Explain that the hours a caregiver passes with her child during caregiving routine activities are very important for teaching children many developmental skills. For caregiving to be a learning opportunity for infants and toddlers, the caregiver needs to play a special role and communicate with the child in a positive, warm, and responsive manner.
  - Present *The role of a caregiver in a caregiving routine* using the *Caregiver's practice: Reflection checklist* (see facilitator's note).
  - Provide each participant with the copy of the *Caregiver's practice: Reflection checklist* for infants and toddlers
  - Ask each participant to take turns and read aloud each practice item in the checklist. Ask them to think about their own practice with infants and toddlers and then rate themselves using the checklist. Explain that it is okay if some of the items do not describe their experiences. They can rate their behavior on items that are only applicable to their experiences, or that they will learn for future experiences with infants and toddlers. After all of the participants complete their exercise, ask for volunteers to share what they have learned and if they have identified room for improvement.

Explain that the activity which follows will give participants more examples.

Provide the handout ***Diaper changing scene 1 and scene 2*** to each participant. Read aloud the case stories of the *Diaper changing scene 1 and scene 2* and ask for two volunteers to role-play the case story *Diaper changing scene 1*, and two volunteers to role-play the case story *Diaper changing scene 2*. Then:

- Ask the remaining participants to observe and take notes on what they have observed during the role-play. Ask the observers to find a partner and discuss the following questions and report back to the whole group.
  - Are *Diaper changing scene 1 and scene 2* different or similar to what you know about child caring practices in your community? Explain.
- De-role the volunteers and the observers and ask the whole group to reflect on this question:
  - Based on what you have learned, are there some ideas that you might want to share with caregivers in your community?
- Summarize the discussed ideas by pointing out that caregivers are the main teachers of infants and toddlers. Using caregiving routine as an opportunity, caregivers can teach infants and toddlers a variety of developmental and life skills. Caregiving routines are essential everyday activities that nurture the early growth, development, and learning of a child. It is a time the caregiver pays close attention to and interacts with the child during her caregiving activities. This moment is ideal for fostering the child's development, including the development of the brain. Infants and toddlers learn through actively engaging with people and with materials in their environment.

## ACTIVITY 4.B.1. HANDOUT CAREGIVER'S PRACTICE: REFLECTION CHECKLIST

**A**=Always **S**=Sometimes **R**=Rarely

| CAREGIVING PRACTICE WITH INFANTS AND TODDLERS |   | A | S | R | REMARK |
|---|---|---|---|---|--------|
| 1.  | Do I talk and smile to the child when I wash and feed him/her or change his/her diaper?   |   |   |   |        |
| 2.  | Do I communicate with the child in a respectful way and explain to him/her what I am about to do when I change, feed, or bathe him/her (instead of rushing to get the activity done quickly)?               |   |   |   |        |
| 3.  | Do I spend enough time to interact and play with the child using songs, games, toys, stories, etc.?   |   |   |   |        |
| 4.  | Do I make an effort to study the child and understand his/her ways of communication such as his/her crying, words, movements, gestures, and facial expressions, and respond timely and appropriately?       |   |   |   |        |
| 5.  | Do I make an effort to nurture the needs of the "Whole Child," e.g., the social-emotional, spiritual-moral, physical-motor, and cognitive-language (instead of teaching shapes, letters, and numbers only)? |   |   |   |        |
| 6.  | Do I make an effort to express my honest feelings (e.g., happiness, sadness, disappointment) to the child so that he/she develops trust in me?  |   |   |   |        |
| 7.  | Do I make an effort to be a good role model for the child (e.g., gentle touch, saying please, thank you, and talking with respectful language and tone)?  |   |   |   |        |
| 8.  | Do I make an effort to let children learn through their own experiences, solve problems by themselves, not trying to do or finish activities for them?  |   |   |   |        |
| 9.  | Do I make an effort to be trustworthy and make the child feel safe by constantly being there for the child when he/she needs my comfort, attention, and support?  |   |   |   |        |
| 10.   | Do I recognize and value the child's culture and teach the child in a way that his/her family values and traditions are respected?  |   |   |   |        |

## ACTIVITY 4.B-2 HANDOUT

### EXAMPLE OF THE ROLE OF A CAREGIVER

#### *DIAPER CHANGING SCENE 1 - CAREGIVER-CHILD INTERACTION*

A caregiver heard her six-month-old son, Richard, crying. She glanced at him and saw that Richard, who was lying in his crib, needed a diaper change. She was busy doing household chores so she wanted to finish changing Richard's diaper quickly. She fetched a toy and gave it to Richard to look at and started changing the diaper, manipulating the child's body, and hurrying to get finished. The child resisted by crying. The caregiver continued doing her activity quietly. Then, she picked up Richard's milk bottle, put it in his mouth saying, "There, Richard, now drink your milk." Richard sobbed and gradually stopped crying and began feeding from the bottle. The caregiver moved to her next activity and began washing dishes.

#### *DIAPER CHANGING SCENE 2 - CAREGIVER-CHILD INTERACTION*

Seven-month-old Anne is sitting on the floor on a blanket with some play toys close around her. Reaching out to the toys, she touched them, picked one stuffed doll and touched it with her lips. Anne's clothes were damp. Anne heard a step and turned her head towards the sound of her caregiver who said, "Anne, I see your cloth is wet, you need a change, don't you dear?" The caregiver sat down to Anne's level and smiled at Anne. Anne got excited, smiled back at the caregiver, and started to make noises, wiggling her body. The caregiver responded, "I know, Anne, I came to change your diaper now." The caregiver then picked the child gently up and walked away toward the diaper-changing place.

#### **Reflect and discuss**

1. What is the difference between the first and the second diaper-changing scenes?
2. Which of the ten caregiving roles in the checklist were applied or not applied by caregiver 1 and caregiver 2?

## Activity 5. Developmental milestones of infants and toddlers (30 minutes)

### Preparation

Draw the development chart below on separate sheets of flipchart paper. Write headings for ages and each of the developmental domains.

### DEVELOPMENT CHART

| AGE  | DEVELOPMENTAL DOMAINS |          |           |       |        |           |                |
|--|-----------------------|----------|-----------|-------|--------|-----------|----------------|
|  | Cognitive             | Language | Spiritual | Moral | Social | Emotional | Physical-motor |
| <b>Group 1</b><br>Infants: Birth to 6 months |                       |          |           |       |        |           |                |
| <b>Group 2</b><br>Infants: 6-12 months       |                       |          |           |       |        |           |                |
| <b>Group 3</b><br>Toddlers: 1-2 years        |                       |          |           |       |        |           |                |
| <b>Group 4</b><br>Toddlers: 2-3 years        |                       |          |           |       |        |           |                |

### Instructions

- Start off with a general discussion with the participants about the ages children first learned to sit, crawl, stand up, walk, and say their first words. Discuss whether they learned each skill at exactly the same time or not. Example: At what age does a child learn to walk?
- Use the section from this guide on individual differences in milestones to explain that there are some things that most children can do by a certain age or within a certain block of time and that we call them developmental milestones.
- Divide the participants into three small groups. Assign each group with a different age group:
  - **Group 1:** Infants: Birth to 6 months old
  - **Group 2:** Infants: 6 to 12 months old
  - **Group 3:** Toddlers: 1-2 years old
  - **Group 4:** Toddlers: 2-3 years old
- Ask the groups to think about what they would expect children of this age group to be able to do.
- Instruct each group to pick one type of development—cognitive, language, moral, spiritual, physical, motor, social, or emotional—and identify and record what they would expect children of their age group to be able to do. For example, if *Group*

1 picks 'cognitive development,' this group will write on a piece of paper their expectation of infants' cognitive skills (birth-6 months).

- Have the groups discuss and write down their ideas on a separate piece of paper/s.
- Display the prepared *Development chart* with the headings of the age and the different developmental domains.
- Ask each group to share their ideas and then tape each piece of paper onto the *Development chart*. Ask them to refer to the developmental milestones in this session and let each group read the milestones of their age group in each of the developmental domains.
- Ask the whole group to reflect on what they have learned and summarize by discussing the importance of developmental milestones.

Explain that the way we do things with infants and toddlers should vary according to their age and developmental abilities. These developmental milestones help us (e.g., caregivers, teachers) to know what children should be doing in each of the developmental areas at a certain age. Using the developmental milestones of infants and toddlers as their guide, caregivers and teachers can observe how an infant or a toddler plays, learns, speaks, and behaves, and provide their support accordingly.

It is important to keep in mind that some children achieve their developmental milestones earlier and some later than other children. Some are able to express their feelings in words earlier than others, but walk later. Even though there are many variations in child growth, failure to achieve developmental milestones at the expected times could be an "early warning" sign that should not be ignored. In the next activity you will learn how to foster the development and learning of infants and toddlers as appropriate to their age.

## **Activity 6: Fostering the development and learning of infants and toddlers: Ideas for caregivers (1 hour & 15 minutes)**

### **ACTIVITY 6.A. HANDS-ON ACTIVITY: CREATING OBJECTS FOR LEARNING (30 MINUTES)**

#### **Preparation**

- Recycling materials (art materials such as strings, magazines, color papers, plasticine, play dough, crayons, construction paper, hard paper-board, etc.) that can be used to create objects/ counseling cards.
- Keep the **four groups** of the previous activity:
  - **Group 1:** Infants: Birth to 6 months old
  - **Group 2:** Infants: 6 to 12 months old
  - **Group 3:** Toddlers: 1-2 years old
  - **Group 4:** Toddlers: 2-3 years old

#### **Instructions**

- Ask each group to refer to the *Resource Guide, Module 2* session entitled: *Fostering development and learning for infants and toddlers: Ideas for caregivers and teachers*, and read through the section corresponding to their age group. Based on the ideas they have read, ask them to create one object for their age group child that can foster development and learning.
- Provide various recycling materials for creating objects (Each group creates only one object as a group.)
- Ask the groups to follow the criteria below when they create their object.

## Criteria

1. The object must be appropriate and safe for the age group.
2. The object can help the child to learn one or more developmental skills.
3. The object can be replicated easily by anyone in their community, e.g., families, ECD teachers, etc.

Ask each group to show their object to the whole group while answering the questions below:

1. Is the object safe for the child?
2. How does the object enhance the age-group child's development and learning?
3. How do we know the object is appropriate for the age-group child?
4. Can the object be easily replicated by anyone in your community (e.g. families, ECD teachers)?

Ask the whole group to reflect on what they have learned through this experience and point out that the participants can create a variety of other learning materials and activities using the list of ideas provided for fostering the development of infants and toddlers. Indicate that the participants can also share these ideas with parents and caregivers by preparing a simple counseling card. Point out that in the next activity, the participants will practice how to create a counseling card based on the information provided in this guide.

## ACTIVITY 6.B. REACHING OUT TO FAMILIES: PREPARING A MOCK CHILD DEVELOPMENT COUNSELING CARD FOR COUNSELING PARENTS/CAREGIVERS (45 MINUTES)

### Preparation

- Prepare four copies of the *CRS THRIVE Malawi Positive Parenting Counseling Card* or the CRS, Lesotho, "*Whose Child Is This?*" *Positive Parenting Counseling Flip Book* <http://www.crs.org/our-work-overseas/research-publications/ngoana-eo-ke-oo-mang>
- Handout for role-play: Make copies of the ***Counseling session scenario: Tips for the counselor*** for four groups.

**Note for the facilitator:** Users of this guide are recommended to adapt and use *The Positive Parenting Counseling Card* developed by Catholic Relief Services for THRIVE Early Childhood Development Program in Malawi, Kenya, and Tanzania or the UNICEF-WHO's *Counsel the Family on Care for Child Development Counselling Card*.

### Instructions

- Divide the participants into **four small groups** and explain that they will create a one-page mock child development counseling card. Point out that the counseling card will contain information on how to foster the development of toddlers and that the

participants will use the card for sharing the information with caregivers of toddlers. Also indicate that each group member will role-play a mock counseling session with 'caregivers' and 'children' using the counseling card they have created.

- Provide each group with a copy of CRS, Lesotho, "Whose Child Is This?" *Positive Parenting Counseling Flip Book* [**Note:** The organizer of the training needs to make copies for these tools.] <http://www.crs.org/our-work-overseas/research-publications/ngoana-eo-ke-oa-mang> or UNICEF-WHO Counsel the family on Care for Child Development Counselling Card [http://apps.who.int/iris/bitstream/10665/75149/14/9789241548403\\_eng\\_Counselling\\_cards.pdf?ua=1](http://apps.who.int/iris/bitstream/10665/75149/14/9789241548403_eng_Counselling_cards.pdf?ua=1)
- Instruct each group to use this counseling card as a **sample** when they create theirs.
- Provide the participants with papers, markers, crayons, construction paper, hard paper-board, etc.
- Instruct the groups to pick **one idea** from the *Resource Guide, Module 2* session entitled *Fostering development and learning for infants and toddlers: Ideas for caregivers and teachers*, and develop a counseling card. The counseling card should have three sections:
  1. The idea [**Example:** Let your baby explore and experiment doing things for him/herself.]
  2. Why the idea is important.
  3. What caregivers can do to promote the idea.
- Explain by showing the participants the excerpt of a counseling card, which is provided under the facilitator's note below.
- Instruct the groups to further examine the sample counseling card/s provided to them and begin to create their own. Ask them to add play material that can accompany their counseling card, if material is available. Suggest that they can use the object they have created in the previous activity, if applicable.
- Instruct the groups to first present their counseling card to the whole group and then, using the counseling card, role-play a mock counseling session with 'caregivers' and 'children.'

**Role-play:** Handout the copies of the **Mock counseling session scenario: Tips for the counselor** to each group and explain that each group is to use the tips when demonstrating their role-play. Remind the groups to use some play materials to facilitate their mock counseling session with the 'caregiver' and the 'child.' Then:

- Instruct the groups to follow the tips on the counseling session scenario for their role-play [**Note:** See **Activity 6.b. Handout: Role-play**].
- Have the groups divide the roles amongst themselves. One person can play the role of the counselor and the remaining members of the group can act as caregivers or children during the demonstration of this activity.
- Instruct others who are not presenting the role-play to observe and reflect on these questions: *What impressed you? What went well? What can be improved? Did the counselor let the caregiver fully engage with the child or did she do the activity herself with the child?*
- Rotate and let each participant play the counselor role.
- Ask the whole group to reflect on what they have learned from this exercise and summarize the activity, emphasizing that:
  - Children develop holistically and that the domains of child development are interrelated and influence each other.
  - Children develop and learn best when caregiving and teaching are appropriate for the child's age and development level, individual potentials and abilities, and culture.
  - Families are the first and most important teachers of their children and they need to be involved in all matters that concern their children's wellbeing. Work in partnership with families with full respect and regard for their ideas, values, and culture.

## ACTIVITY 6.B. HANDOUT: ROLE-PLAY

### MOCK COUNSELING SESSION SCENARIO: TIPS FOR THE COUNSELOR

The counselor, the two- or three-year-old child, and the caregiver/s sit in a circle. With the counseling card and play materials (prepared by the group) at hand, the counselor:

- Thanks the caregiver and the child for their participation and for being interested in fostering the child's development.
- Starts the counseling session using traditional ways of opening a meeting, e.g., prayer or song.
- Explains the purpose of the counseling session (e.g., fostering children's development).
- Shares and discusses the ideas on the counseling card with the caregiver.
- Asks the caregiver if she is ready to engage with the child and do some communication and play activities.
- Introduces a play or interactive activity to both the caregiver and the child, using the object or toy the counselor brought with her.
- Lets the caregiver and the child interact and play together; helps the caregiver, if necessary, to capture the child's attention.
- Once the caregiver and the child finish playing, explains the benefits of the play and communication for the child and for the family, and asks what materials are available at home to do similar activities with the child and how the caregiver will use them.
- Asks if doing such activities at home is easy or challenging, and offers some advice.
- Provides the caregiver with positive feedback and encouragement.
- Explains that babies and toddlers can learn by playing and interacting with people and objects and encourages the caregiver to continue interacting and playing with the child.
- Thanks the caregiver and ends the counseling session using traditional ways of closing a meeting, e.g., with a prayer or song.

Source: Adapted from WHO's *Care for Child Development* (2012) by UNICEF-WHO Resource link: [http://www.who.int/maternal\\_child\\_adolescent/documents/care\\_child\\_development/en/](http://www.who.int/maternal_child_adolescent/documents/care_child_development/en/) Users of this guide are recommended to adapt and use this manual for programs with parents/caregivers and other ECD service providers such as health clinics.

**FOR FACILITATOR'S USE: EXCERPT OF A ONE-PAGE COUNSELING CARD (FROM CRS THRIVE MALAWI ECD PROGRAM)**

**Idea: Let your baby explore and experiment doing things for himself/herself**



**Why this is important:**

- Your baby learns about the world by exploring with his/her eyes, mouth, hands, fingers and feet.
- When your baby uses his/her hands and fingers, he/she develops their small muscles.
- Your baby finds out he/she can make things happen which is an important part of development.

**What you can do:**

- Find safe playthings for your baby to look at, hold, and put in his/her mouth.
- Let your baby look at a mirror and touch it.
- Make sure the baby will not swallow or choke on the playthings.
- Make a mobile using things that are both colorful and make sounds when played with, e.g., shells, seeds, sticks, paper clips, or colored paper shapes. Join two sticks together to make a cross and hang pieces of string from the sticks. Then attach the mobile decorations to the pieces of string.
- Make a rattle by filling a plastic bottle with small objects that make noise, e.g., seeds or pebbles. Close and seal the lid.

## Activity 7. Guidance and discipline: Responding to challenging behaviors of toddlers (30 minutes)

### ACTIVITY 7.A. WHY TODDLERS SHOW CHALLENGING BEHAVIOR AND WHAT CAREGIVERS CAN DO TO PROMOTE PROSOCIAL BEHAVIOR (30 MINUTES)

#### Preparation

A presentation of key ideas on the topic *Challenging behaviors of toddlers and what caregivers can do*.

#### Instructions

- Start off by asking the participants to brainstorm on the question: *Toddlers are often at risk for unintentional injury. Why do you think this is true?* Write their answers on a flipchart.
- Ask the participants to find a partner and discuss the following question and share with the whole group: *What are some traditional ways you or other caregivers are using to guide or discipline toddlers? Identify which discipline methods are positive and which ones are negative or harmful and explain why.*
- Write down their responses on flipchart paper in columns, as shown below:

| POSITIVE DISCIPLINE | NEGATIVE/HARMFUL DISCIPLINE |
|---------------------|-----------------------------|
|                     |                             |

- Ask the participants to share their ideas with the whole group.

Expand the participants' thinking by discussing the information presented on the topic **Challenging behaviors of toddlers and what caregivers can do** and close the discussion by asking the participants to reflect on these questions: *Given what you know about toddlers' challenging behaviors, how would you advise caregivers of toddlers regarding the use of discipline? What change would you make regarding the use of discipline with toddlers?*

**Note for the facilitator:** If time is not enough to finish *Session 2* activities, cover the remaining activities on the next day of the training before you start *Session 3: The development of preschool children*.

## CLOSURE AND SESSION EVALUATION (15 MINUTES)

### Preparation

Make copies of the *Session Evaluation Form* for each participant [**Note:** Find the *Session Evaluation Form* in the appendix of this guide.]

### Instructions

Summarize what has been covered during the session and ask if there are any questions or anything that is unclear.

- Hand out the *Session Evaluation Form* and ask the participants to 1) conduct a self-assessment of learning, and 2) evaluate the training.
- Read the instructions for the session evaluation to the whole group before the participants begin to complete the form.
- Ask the participants to hand in their completed evaluation form.
- Keep the completed form in a file and give it to the organizer of the training. Close with a song or a prayer.



# Session 3: Development and Intervention of Preschool Children

## LEARNING OBJECTIVES

By the end of this session, participants will be able to:

- Identify the role of teachers in the development and learning of preschool-aged children.
- Describe the developmental milestones of preschool-aged children across all domains of development.
- Identify ways to foster the development of preschool-aged children.
- Identify ways to foster the spiritual and moral development of preschool-aged children.
- Identify guidance techniques to promote prosocial behavior among preschool-aged children.
- Describe strategies that can influence positive parenting among families.

## SESSION LENGTH: 5 HOURS

## SESSION OUTLINE

| ACTIVITY  | SUGGESTED TIME      |
|---|---------------------|
| 1. Welcome and introduction   | 30 minutes          |
| 2. Unique characteristics of preschoolers   | 15 minutes          |
| 3. The role of preschool teachers   | 30 minutes          |
| 4. Developmental milestones of preschoolers   | 45 minutes          |
| 5. Fostering preschoolers' development  | 30 minutes          |
| 6. Fostering the spiritual and moral development of preschoolers                              | 45 minutes          |
| 7. Fostering prosocial behavior and working with families on positive discipline strategies   | 1 hour & 30 minutes |
| Case story: <i>The story of four girls, Choolwe, Mampi, Chitalu, Misozi, and their banana</i> |                     |
| 8. Closure and session evaluation   | 15 minutes          |
| <b>Total</b>  | <b>5 hours</b>      |

## MATERIALS

- Name tags and attendance register
- Brief presentation prepared on flipcharts or PowerPoint
- Flipcharts and markers
- Training manual
- Arts and crafts materials include papers, markers, glue, scissors, etc.

- Copies of the handout ***The story of four girls, Choolwe, Mampi, Chitalu, Misozi, and their banana*** Copies of the handout on ***Preschool teacher practice checklist*** for each participant

## SESSION PLAN AND PROCEDURE

### SESSION ACTIVITIES

#### Activity 1: Welcome and introduction (30 minutes)

- Have the participants sign an attendance register on arrival and provide them with name tags (5 minutes).
- Welcome everyone and open the meeting in an appropriate way, such as with a prayer or a song (10 minutes).
- Play a game or do an icebreaker activity to help the participants relax and get to know each other better (5 minutes).
- Briefly explain *Module 2, Session 3*—its purpose, and what the participants are expected to learn from this session by going through the activities listed under the session outline above, then begin session activities (10 minutes).

#### Activity 2: Special characteristics of preschoolers (15 minutes)

##### Preparation

A presentation on the *Special characteristics of preschoolers* using a flipchart or PowerPoint. Use the information from *Resource Guide, Module 2* for your preparation.

##### Instructions

- Ask the participants to find a partner and think about their experience with young children of ages three to five (preschoolers), and also to think about what they learned earlier about toddlers' characteristics. Then have them answer the questions: *What are some special characteristics of preschool-aged children? How do they differ from toddlers?*
- Write the participants' ideas on a flipchart as they call them out.
- Explain the special characteristics of preschoolers by presenting the prepared information on this topic.

#### Activity 3: The role of a preschool teacher (30 minutes)

##### Preparation

A handout on *Preschool teacher practice: Reflection checklist* for each participant (see handout below)

##### Instructions

Ask the participants to go back to their partner and discuss the question: *What makes a preschool teacher a good teacher? Or, What is it like to be a caring teacher of preschool-aged children?*

After the partners share their views, expand their ideas with the statement below and provide each participant with the copy of the *Preschool teacher practice: Reflection checklist*.

**Note for the facilitator:** The role of preschool teachers is to help children develop to their full potential. They can do this when they have good knowledge and skills in child development and use their abilities, time, and effort to realize positive outcomes for children. The question is, as a preschool teacher or child service provider, how can you know whether you are providing the right kind of support to children? The checklist below can help you to assess and reflect on your own work with young children or invite a mentor or a supervisor to observe your work and provide you with comments. The checklist lists some of the main expected and appropriate practices of a preschool teacher. The teacher or the observer rates how often (A=Always, S=Sometimes, R=Rarely) the teacher demonstrates these specific practices and provides their feedback in the comment/reflection column.

Ask each participant to take turns and read aloud each practice item in the checklist, then:

- Ask them to think about their own practice with preschool-aged children and rate themselves using the checklist. Explain that it is okay if some of them are not preschool teachers. They can rate their behavior on items that are only applicable to their experiences.
- After all participants complete their exercise, ask for volunteers to share what they have learned and if they have identified room for improvement.
- Conclude by explaining that effective teachers need to understand that preschoolers' developmental needs are different from those of toddlers. They can learn about this by studying the developmental milestones of preschoolers so that they can support them according to their needs. Point out that next, they will learn about the developmental milestones of preschool children by differentiating their major developmental skills from those of toddlers.

## HANDOUT PRESCHOOL TEACHER PRACTICE: REFLECTION CHECKLIST

**A**=Always      **S**=Sometimes      **R**=Rarely

| PRACTICE   | A | S | R | COMMENT/<br>REFLECTION |
|--|---|---|---|------------------------|
| <b>Facilitating interaction</b>  |   |   |   |                        |
| I encourage children to have positive relationships with me, their peers, and other adults around them.  |   |   |   |                        |
| <b>Indicators:</b>   |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Talk to children; give children a chance to ask questions, listen well and give timely answers; show empathy when children feel worried, sad, or hurt.</li> </ul>   |   |   |   |                        |
| <b>Nurturing</b>   |   |   |   |                        |
| I approach and interact with children with respectful touch, friendliness, and gentle and positive guidance.   |   |   |   |                        |
| <b>Indicators:</b>   |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Holding a child close while talking, giving a hug, cuddling, or shaking hands</li> <li>Giving attention to children's nutrition, health, and safety needs, including their developmental and spiritual needs</li> </ul> |   |   |   |                        |
| <b>Helping children manage stress</b>  |   |   |   |                        |
| I help young children to cope with and manage stress.  |   |   |   |                        |
| <b>Indicators:</b>   |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Encouraging children to share their feelings without fear; give timely support such as spiritual and physical reassurances</li> </ul>   |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Providing true explanations about what is happening as appropriate to age</li> </ul>  |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Encouraging children to talk about what they feel and to ask questions</li> </ul>   |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Collaborating with all people that have a significant role in the child's life (families, teachers, health providers, communities)</li> </ul>   |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Facilitating play (social dramatic play, role-play, fantasy-play) for children to help them deal with stress</li> </ul>   |   |   |   |                        |
| <b>Ensuring children's security</b>  |   |   |   |                        |
| I constantly supervise children's safety and security at all times.  |   |   |   |                        |
| <b>Indicators:</b>   |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Setting up routines and smooth transitions for children so that they can have a sense of order, predictability, and self-regulation</li> </ul>  |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Providing safe space that allows children to interact with peers or individually during indoor and outdoor play</li> </ul>  |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Checking for and taking away hazardous or broken objects, materials, and equipment from both indoor and outdoor playing areas</li> </ul>  |   |   |   |                        |
| <b>Facilitating a learning environment</b>   |   |   |   |                        |
| I facilitate learning for children by being open-minded and flexible and setting up an environment that offers choices, resources, and varied activities.  |   |   |   |                        |
| <b>Indicators:</b>   |   |   |   |                        |
| <ul style="list-style-type: none"> <li>Encouraging children to exercise their creativity, imaginative play, conversational ability, and experimentation</li> </ul>   |   |   |   |                        |

| A=Always      S=Sometimes      R=Rarely   |   |   |   |                        |
|---|---|---|---|------------------------|
| PRACTICE  | A | S | R | COMMENT/<br>REFLECTION |
| • Encouraging children to actively explore and interact with adults, peers , and objects  |   |   |   |                        |
| • Encouraging children to learn through different means such as physical movement, socio-dramatic play, construction materials, science and math activities, indoor and outdoor games, reading books and telling stories; art, dance, and music               |   |   |   |                        |
| • Allowing children to have choices and engage in learning activities that excite and interest them   |   |   |   |                        |
| • Encouraging children to learn in group or individual activities or play   |   |   |   |                        |
| • Encouraging children to play and learn with things that are relevant to their own life and familiar to their surroundings and culture   |   |   |   |                        |
| • Encouraging children to have a chance to create things or solve problems by themselves and receive positive reward or approval for their effort and production  |   |   |   |                        |
| • Providing clear direction and guidance on how to master daily life and developmental skills   |   |   |   |                        |
| <b>Being a problem solver</b>   |   |   |   |                        |
| I have the judgment and problem-solving skills for nurturing positive behavior among young children.  |   |   |   |                        |
| <b>Indicators:</b>  |   |   |   |                        |
| • Observing each child to know him/her well as an individual and plan activities that are appropriate to the child's experience and personal characteristics  |   |   |   |                        |
| • Assisting each child so that he/she can master new challenges during learning   |   |   |   |                        |
| • Giving timely advice to each child to prevent or correct problematic behavior or recognize and reward good behavior   |   |   |   |                        |
| • Working with families   |   |   |   |                        |
| • I have good and positive relationships with caregivers and families and I involve them in my plans and activities for their children.   |   |   |   |                        |
| <b>Advocating for children</b>  |   |   |   |                        |
| I speak on behalf of children who are abused or neglected, for children with disabilities, for children who are vulnerable, hungry, or have inadequate health care, and children who live in unsafe living situations.  |   |   |   |                        |
| <b>Indicators:</b>  |   |   |   |                        |
| • Collaborating with other child welfare services in my community and bringing children's issues to public forums for promoting children's wellbeing (e.g., provisions of safe home, enough and nutritious food, education, protection from any kind of harm) |   |   |   |                        |
| <b>Learning</b>   |   |   |   |                        |
| I continuously learn about children and their families in order to become a more caring and competent person and meet the best interest of the child.   |   |   |   |                        |
| <b>Indicator:</b>   |   |   |   |                        |
| • Serving children with enthusiasm, creativity, and commitment  |   |   |   |                        |
| • Sharing my knowledge and experiences through workshop presentations, writing, and media   |   |   |   |                        |

## Activity 4: Developmental milestones of preschoolers (45 minutes)

### ACTIVITY 4.A. LEARNING THE DIFFERENCES OF SKILLS BETWEEN TODDLERS AND PRESCHOOLERS

#### Preparation

The chart **Major differences of skills between toddlers and preschoolers**, prepared on a flipchart

#### CHART: MAJOR DIFFERENCES OF SKILLS BETWEEN TODDLERS AND PRESCHOOLERS

|                           | TODDLER | PRESCHOOLER |
|---------------------------|---------|-------------|
| <b>Group 1</b>            |         |             |
| Physical and motor skills |         |             |

#### FIND MAJOR DIFFERENCES IN MILESTONES BETWEEN TODDLERS AND PRESCHOOLERS

|                  | TODDLER | PRESCHOOLER |
|------------------|---------|-------------|
| <b>Group 2</b>   |         |             |
| Emotional skills |         |             |

#### Instructions

- Bring the chart you have prepared on a flipchart and display it on a wall where the participants can see it clearly.
- Explain that the purpose of learning about the developmental milestones of young children is to have an appropriate set of expectations when working with young children of different age groups. One way we can do this is by closely looking into the **major** differences of abilities between toddlers and preschoolers.
- Divide the participants into six small groups and assign them the developmental skills shown below:
  - **Group 1:** Physical and motor skills
  - **Group 2:** Emotional skills
  - **Group 3:** Spiritual-moral skills
  - **Group 4:** Social skills
  - **Group 5:** Language skills
  - **Group 6:** Cognitive skills
- Provide one blank flipchart per group and ask each group to copy the prepared chart on their own and write the assigned developmental skills for their group. Then, have them complete the task below:

**Task:** To find the major developmental skill differences between toddlers and preschoolers by looking into the developmental milestone tables of toddlers and preschoolers in this chapter [**Note:** The participants need *Resource Guide, Module 2* to refer to the milestones.]

Let each group present their findings and then ask the whole group to reflect on the question: *What have you learned from this exercise?*

After the participants finish their reflection, conclude by emphasizing that caregivers and teachers need to recognize that toddlers are not preschoolers and preschoolers are not toddlers and they need to be treated according to their abilities. When fostering development, caregivers/teachers' sets of expectations and rules must be based on the developmental levels of a child, including the child's interests and family values and beliefs. Then, move on to the next activity.

## **Activity 5: Fostering preschoolers' development (30 minutes)**

### **Preparation**

Make a copy of the children's story handout provided below for each participant

## HANDOUT: CHILDREN'S STORY

### THE STORY OF FOUR GIRLS, CHOOLWE, MAMPI, CHITALU, MISOZI, AND THEIR BANANA

*Contributed by Religious Sisters of the Holy Spirit, Zambia*

Once upon a time in a village lived a group of young girls. These girls had a good social life, they helped their parents a lot, and their behavior was good so that most of the people in the village admired them. One day, the girls decided to go into the bush and while there, they found nice looking bananas and so they plucked them and agreed that they would bury them until the day they thought they would be ready. They agreed and went away and before the agreed day came, one of the girls decided to betray the friends by uncovering the bananas and eating them all. When the day for checking bananas came, they all went to the site and to their surprise, they found no bananas. They asked among themselves if anyone knew where the bananas went, but none answered. A few minutes later, a bird came back singing, telling them who ate the bananas because the bird was watching. When the bird finished singing, telling them who ate the bananas, the girl who ate them came out and apologized to the friends and they all forgave her and continued to be friends until they grew up.

#### **Discuss, reflect, role-play:**

Refer to what you have learned in your differentiation of skills between toddlers and preschoolers, then answer the questions below:

1. For which group age is the story more suitable: toddlers, preschoolers, or both? Why? What ideas influenced your decision?
2. What does the story teach children?
3. Which developmental domain is most emphasized in the story? Explain why.
4. How would you tell this story to children, if you want them to understand the story's message easily?
  - A. Make a list of ideas on how you will tell the story to children.
  - B. Demonstrate your idea in action through a role-play

## Instructions

- Ask the participants to take a moment and read the ideas provided on the topic, *Fostering the development and learning of preschoolers* and then reflect on the question: *What are some ideas that you have learned from your reading?*
- Let volunteers share their ideas, then move on to the next activity, *Telling a story to young children*.

Divide the participants into **three small groups** and hand out the copies of the story that you have prepared.

- Ask each participant to first read the story individually.
- Ask them to discuss in their group the four questions about the story.
- Ask them to share their ideas on the first three questions.
- Ask them to demonstrate question four in role-play for the whole group.

## Activity 6: Fostering the spiritual and moral development of preschoolers (45 minutes)

### Preparation

- Arts and crafts materials for creating a storybook for preschoolers; include construction papers, crayons, markers, glue, scissors, etc.
- *Resource Guide, Module 2*

### Instructions

- Divide the participants into small groups.
- Explain that, like any other developmental needs, fostering the spiritual and moral development of young children requires a well-thought-out plan and creativity.
- Ask a few volunteers to take turns and read the section from the **Milestone chart** of this chapter entitled, ***Fostering spiritual and moral development (4 to 5 years old)***.

## HANDS-ON ACTIVITY: CREATING A READ-ALOUD STORYBOOK ON SPIRITUAL AND MORAL DEVELOPMENT FOR PRESCHOOLERS

- Ask each group to **pick one scripture from the Bible** and use the scripture to foster children's spiritual and moral development. Use the example in the facilitator's note below:

**Note for the facilitator:** Example of scripture and story format: *Matthew 25:31-37*

Title of the story:

*A story of a boy who feeds the hungry, clothes the naked, comforts the sick and confined*

Once upon a time in a village of...there was a boy called...

The aim of the story is teach young children to develop **empathy** for the plight of others.

- Ask each group to:
  - Think about the scripture you have selected and how you can apply it to teach morality to preschoolers in a story form.
  - Create a story around the idea of the scripture and make a one-page to two-page storybook to teach morality to preschoolers.
  - Define the aim of your story (e.g., What do children learn from your story? Kindness, sharing, forgiveness, etc.)
  - Make the storybook appealing to young children with *large* drawings, colors, and big fonts.
  - Demonstrate how you will tell the story to the children. Select one member of the group to be the storyteller and the remainder of the group will pretend to be “preschoolers.”
  - Reflect on the storybook and the role-play: What have you learned? What can be improved?

Explain that the participants will be given the opportunity to share more ideas at the next training session. Move to the next activity by explaining that next the participants will learn about how young children misbehave, and how we can prevent behavior problems using positive discipline strategies.

## **Activity 7.** Fostering prosocial behavior and working with families on positive discipline strategies (1 hour & 30 minutes)

### **ACTIVITY 7.A. WHY YOUNG CHILDREN MISBEHAVE (45 MINUTES)**

#### **Preparation**

A brief presentation on flipchart about why children misbehave

#### **Instructions**

- Ask the participants to remember a time when they were children and did something very naughty. Have them share the incident with a partner:
  - Describe what happened.
  - Explain why they acted in this way.
  - Describe how they were disciplined and how this made them feel.
- When everyone has shared, ask for a few volunteers to share their experiences with the entire group.
- Talk about how the participants feel when a child in their class misbehaves.
- Brainstorm on what is **good behavior** and what is **bad behavior**.
- Write down the participants’ responses on flipchart paper in columns, as shown below:

| GOOD BEHAVIOR | BAD BEHAVIOR |
|---------------|--------------|
|               |              |

- Ask and discuss whether the participants agree with one another about the question: *What makes behavior good or bad?* Explain that we all have our own sets of rules for good behavior according to our cultural and family beliefs.
- Discuss the need to find out and respect the rules for good behavior as perceived and practiced by parents and caregivers in families and centers.
- Explain that there is always a reason why a child misbehaves. Give a few examples such as:
  - It's a normal stage of development.
  - The child is hungry, tired, or sick.
  - It's a way of being in control.
- Then, divide the participants into **five small groups**.
- Ask the groups to discuss possible reasons for children's misbehavior, and have them report back on their discussions to the larger group.
- Add any other ideas not mentioned, using the information in this guide. Explain that when teachers understand the reasons behind a child's actions, they will be better able to deal with the behavior when it occurs, or even take steps to prevent it from happening.

### ACTIVITY 7.B. PREVENTING BEHAVIOR PROBLEMS (45 MINUTES)

#### Preparation

1. Bring a selection of toys and other playthings for the demonstration.
2. Prepare a presentation on preventing behavior problems, using the information in this guide. Write the key points on flipchart paper, starting with the section on establishing rules.

| POSITIVE VS. NEGATIVE RULES     |    |
|---------------------------------|----|
| Do not                          | Do |
| Do not run inside.              |    |
| Do not shout.                   |    |
| Do not hurt other children      |    |
| Do not break the toys.          |    |
| Do not throw toys.              |    |
| Do not run with scissors.       |    |
| Do not leave toys lying around. |    |
| Do not write on the wall.       |    |

### 3. Prepare a flipchart as follows:

#### ROLE-PLAY

- Put out the toys at the front of the training room.
- Ask for a few volunteers to come and play the role of children playing with the toys.
- As they play, move around and talk to the “children” by telling them what not to do. For example:
  - “Do not walk with that toy.”
  - “No shouting.”
  - “Do not grab the toy from her.”
  - “No running.”
  - “Don’t leave the toys just lying there.”
- After the activity, ask the volunteers who played the role of children how they felt being told **not to do** things throughout the activity.
- Give a presentation on establishing rules, using the prepared flipchart points. *Highlight the need to **have rules that teach children how they are expected to behave** rather than being told what they should not do.* Then, continue the activity below.

#### DO NOT VS. DO RULES STATEMENT

- Ask the participants to return to their groups and display the prepared **Positive vs. Negative rules** flipchart paper.
- Ask the participants to turn each of the negative rules into a positive rule. Give a few examples, such as:
  - Do not shout.
  - Talk quietly.
  - Do not run with scissors
  - Sit at a table to cut with scissors.
- Have the groups share their ideas with the entire group.
- Give a presentation on other strategies to prevent behavior problems using the prepared flipchart points.

#### INDIVIDUAL REFLECTION: IMPROVING OWN PRACTICES TO PREVENT BEHAVIOR PROBLEMS

- Ask the participants to individually sit and think for a few minutes about their own experiences with young children.
- Each participant should write down **three specific ways** that they are going to improve their practice to help prevent behavior problems, then share these briefly with the group.
- Ask each participant to pass their papers to the facilitator with their names written on it.

## ACTIVITY 7.C. POSITIVE DISCIPLINE STRATEGIES (15 MINUTES)

### Preparation

1. Prepare definitions of the word “Punishment” on flipchart paper, using the information in this guide.
2. Make three signs: AGREE, DISAGREE, NOT SURE. Put these up on the wall in different places in the training room.
3. Read about why physical punishment does not work on page 65 of *Resource Guide, Module 2*. Write the points on flipchart paper.
4. Prepare a presentation on different discipline strategies using the information on pages 65-67 of *Resource Guide, Module 2*. Write the key points on flipchart paper.

### Instructions

#### MOVEMENT ACTIVITY

- Start off by explaining that there are many different views about how teachers and parents should manage misbehavior, and that the following activity will explore the participants’ viewpoints. Explain that a statement will be shown or read and that the participants should go to the sign which best matches their viewpoint.
  - Those who agree with the statement will go to the AGREE sign.
  - Those who disagree will go to the DISAGREE sign.
  - Those who are unsure will go to the NOT SURE sign.
- Show the first statement and once everyone has moved to a different sign, ask the groups to discuss their views with other people who are standing with them. Each group then shares their views with the whole group.
- Continue in the same way with the remaining statements, then move to the next activity below.

#### NOTE FOR THE FACILITATOR: STATEMENTS

1. Spanking is the best way to teach a child how to behave (AGREE, DISAGREE, NOT SURE).
2. Children who are repeatedly spanked are more likely to become violent (AGREE, DISAGREE, NOT SURE).
3. Making a child stand in the corner with his/her back to the class for five minutes is a good way to keep them out of trouble (AGREE, DISAGREE, NOT SURE).

- After the activity, thank the participants for their contributions and summarize the main viewpoints.

## ACTIVITY 7.D. DEFINING PUNISHMENT AND DISCIPLINE (15 MINUTES)

1. Write the word “Punishment” on flipchart paper and draw lines out from the word.
2. Ask the participants to come up to the flipchart and write down words that come to mind when they hear that word.
3. Next, write the word “Discipline” on new flipchart paper and draw lines from the word. Once more, ask the participants to write down words that come to mind when they hear that word.
4. Display the definitions of “Punishment” and “Discipline” and highlight the differences.

5. Briefly explain some of the reasons why punishment does not work, using the prepared flipchart points. Highlight the fact that research shows that children who are physically punished are more likely to become violent themselves.
6. Give a presentation on different discipline strategies using the prepared flipchart points.

#### ACTIVITY 7.E. ROLE-PLAY: PRESCHOOLERS' BEHAVIOR PROBLEMS (15 MINUTES)

1. Brainstorm on common behavior problems that teachers are faced with in preschools. Write these on flipchart paper as they are called out.
2. Divide the participants into small groups.
3. Ask each group to choose one of the problems listed and to discuss in their group which of the strategies they could use to resolve the issue.
4. Have the groups prepare and present role-plays to demonstrate one of the strategies they have listed.
5. After each play, de-role the players by asking how they felt playing their character, then discuss whether the selected strategy was effective, and if not, what other strategy could be tried.
6. Explain that sometimes the teacher may try a number of strategies, and if these do not work and the behavior persists, steps should be taken to try to understand the problem. The teacher needs to find out if the behavior happens at home. She should also observe the child at the preschools to try to establish patterns of behavior.

#### ACTIVITY 7.F. WORKING TOGETHER WITH PARENTS AND CAREGIVERS (15 MINUTES)

##### Preparation

Prepare a presentation on the different parenting styles, using the information in *Resource Guide, Module 2*. Write the key points on flipchart paper.

##### Instructions

- Start off by reminding the participants that each family has their own beliefs about how to rear their children and that there is no one right way. Explain that research has helped us to understand that there are different parenting styles.
- Give a presentation on the different parenting styles using the prepared flipchart points.
- Emphasize that every family has the right to decide what is best for their children. Remind the participants that one of the goals is to help children to learn to control their own behavior.

##### ROLE-PLAY: PARENTING STYLES

- Divide the participants **into three groups** and give each group one of the parenting styles to demonstrate in a role-play.
- Have the groups prepare and then present their role-plays. After each role-play, de-role the players by asking them how they felt to play their characters.
- Reflect on what children would learn from each parenting style. Talk about finding

the balance between enforcing rules and helping children learn to take responsibility. Explain that parents and caregivers need to understand that they have the responsibility to protect their children from harm, and they need to know that harsh punishments are harmful to children and affect the way they develop and learn. Parents and caregivers need to be given information on positive discipline strategies.

- Ask the participants to brainstorm on how this kind of information could be shared with parents and caregivers and write their ideas on flipcharts.
- Ask if the participants feel they can conduct such activities (e.g., a parent workshop) themselves and encourage them to do so in their programs.

## CLOSURE AND SESSION EVALUATION (15 MINUTES)

### Preparation

Make copies of the *Session Evaluation Form* for each participant [**Note:** Find the *Session Evaluation Form* in the appendix of this guide.]

### Instruction

Summarize what has been covered during the session and ask if there are any questions or anything that is unclear.

- Hand out the *Session Evaluation Form* and ask the participants to 1) conduct a self-assessment of learning, and 2) evaluate the training.
- Read the instructions for the session evaluation to the whole group before the participants begin to complete the form.
- Ask the participants to hand in their completed evaluation form.
- Keep the completed form in a file and give it to the organizer of the training. Close with a song or a prayer.



# Appendix

## MODULE 2 SESSION AND TRAINING EVALUATION FORM

This form is for evaluating each session and training of a module. It has two sections:

Section 1: *Self-Evaluation of ECD Knowledge and Skills*. This section has a list of knowledge and skills statements by session topics.

Section 2: *Training Evaluation*. This section asks: “What do you like most about the training?” and, “What would you like to change about the training?”

## ECD KNOWLEDGE AND SKILLS SELF-EVALUATION

Steps to fill out this section:

Step 1. Write your name, country, congregation/organization, date of training, and whether you have taken an ECD course or courses before this training.

Step 2. Take a moment to reflect and circle the number that represents what you knew *before* the session began.

Step 3. Take a moment to reflect and circle the number that represents what you knew *after* the session ended. Think about three to five changes you will make to improve your interaction with and support for infants, toddlers, and preschoolers based on the training session. List your ideas in the space provided.

**MODULE 2: SESSION 1**

**Step 1**

Name \_\_\_\_\_ Country \_\_\_\_\_

Congregation/organization \_\_\_\_\_ Training date \_\_\_\_\_

I have taken an ECD course/courses before this training                      **YES**                      **NO**

| Scale 1 = Very low 2 = Low 3 = Neutral 4 = High 5 = Very high  |   |   |   |   |  |                            |   |   |   |   |
|--|---|---|---|---|--|----------------------------|---|---|---|---|
| MODULE 2: SESSION 1—INTRODUCTION TO EARLY CHILDHOOD DEVELOPMENT  |   |   |   |   |  |                            |   |   |   |   |
| ECD knowledge and skills self-evaluation related to:   |   |   |   |   |  |                            |   |   |   |   |
| Step 2. Before the training  |   |   |   |   | Circle the number that represents your learning before (Step 2) and after (Step 3) the session.                | Step 3. After the training |   |   |   |   |
| 1  | 2 | 3 | 4 | 5 | Describing the meaning and benefits of early childhood development   | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Assessing factors that influence child development   | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Describing the main domains of child development   | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Setting appropriate learning and development goals to meet the needs of children in each domain of development | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Outlining strategies for helping caregivers/families to support their children’s development                   | 1                          | 2 | 3 | 4 | 5 |
| Step 3. After the training   |   |   |   |   |  |                            |   |   |   |   |
| Think about three to five changes you will try to make to improve your interaction with/support for infants, toddlers, and preschoolers based on the training session, and list them in the space below: |   |   |   |   |  |                            |   |   |   |   |
| 1.   |   |   |   |   |  |                            |   |   |   |   |
| 2.   |   |   |   |   |  |                            |   |   |   |   |
| 3.   |   |   |   |   |  |                            |   |   |   |   |
| 4.   |   |   |   |   |  |                            |   |   |   |   |
| 5.   |   |   |   |   |  |                            |   |   |   |   |

**MODULE 2: SESSION 2**

**Step 1**

Name \_\_\_\_\_ Country \_\_\_\_\_

Congregation/organization \_\_\_\_\_ Training date \_\_\_\_\_

I have taken an ECD course/courses before this training **YES** **NO**

| Scale 1 = Very low 2 = Low 3 = Neutral 4 = High 5 = Very high  |   |   |   |   |  |                            |   |   |   |   |
|--|---|---|---|---|--|----------------------------|---|---|---|---|
| MODULE 2: SESSION 2—DEVELOPMENT AND INTERVENTION OF INFANTS AND TODDLERS   |   |   |   |   |  |                            |   |   |   |   |
| ECD knowledge and skills self-evaluation related to:   |   |   |   |   |  |                            |   |   |   |   |
| Step 2. Before the training  |   |   |   |   | Circle the number that represents your learning before (Step 2) and after (Step 3) the session.  | Step 3. After the training |   |   |   |   |
| 1  | 2 | 3 | 4 | 5 | Describing the stages of development during the prenatal period and factors affecting development and the newborn child  | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Describing how secure attachment between the caregiver and the child in the first two to three years of the child’s life sets the stage for brain development and all other areas of child development | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Implementing quality caregiving for infants and toddlers during daily caregiving routines  | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Describing the developmental skills of infants and toddlers across all the domains of development  | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Enhancing development and learning for infants and toddlers  | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Implementing (delivering) positive behavior guiding techniques for dealing with the challenging behaviors of toddlers  | 1                          | 2 | 3 | 4 | 5 |
| Step 3. After the training   |   |   |   |   |  |                            |   |   |   |   |
| Think about three to five changes you will try to make to improve your interaction with/support for infants, toddlers, and preschoolers based on the training session, and list them in the space below: |   |   |   |   |  |                            |   |   |   |   |
| 1.   |   |   |   |   |  |                            |   |   |   |   |
| 2.   |   |   |   |   |  |                            |   |   |   |   |
| 3.   |   |   |   |   |  |                            |   |   |   |   |
| 4.   |   |   |   |   |  |                            |   |   |   |   |
| 5.   |   |   |   |   |  |                            |   |   |   |   |

**MODULE 2: SESSION 3**

**Step 1**

Name \_\_\_\_\_ Country \_\_\_\_\_

Congregation/organization \_\_\_\_\_ Training date \_\_\_\_\_

I have taken an ECD course/courses before this training **YES** **NO**

| Scale 1 = Very low 2 = Low 3 = Neutral 4 = High 5 = Very high  |   |   |   |   |  |                            |   |   |   |   |
|--|---|---|---|---|--|----------------------------|---|---|---|---|
| MODULE 2: SESSION 3—DEVELOPMENT AND INTERVENTION OF PRESCHOOL CHILDREN   |   |   |   |   |  |                            |   |   |   |   |
| ECD knowledge and skills self-evaluation related to:   |   |   |   |   |  |                            |   |   |   |   |
| Step 2. Before the training  |   |   |   |   | Circle the number that represents your learning before (Step 2) and after (Step 3) the session.                              | Step 3. After the training |   |   |   |   |
| 1  | 2 | 3 | 4 | 5 | Implementing quality caregiving and teaching for preschool-aged children   | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Describe the developmental milestones of preschool-aged children across all domains of development                           | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Fostering development and learning for preschool-aged children   | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Fostering the spiritual and moral development of preschool-aged children   | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Implementing (delivering) positive behavior guiding techniques for promoting good social behavior in preschool-aged children | 1                          | 2 | 3 | 4 | 5 |
| 1  | 2 | 3 | 4 | 5 | Implementing positive parenting activities for caregivers/families   | 1                          | 2 | 3 | 4 | 5 |
| Step 3. After the training   |   |   |   |   |  |                            |   |   |   |   |
| Think about three to five changes you will try to make to improve your interaction with/support for infants, toddlers, and preschoolers based on the training session, and list them in the space below: |   |   |   |   |  |                            |   |   |   |   |
| 1.   |   |   |   |   |  |                            |   |   |   |   |
| 2.   |   |   |   |   |  |                            |   |   |   |   |
| 3.   |   |   |   |   |  |                            |   |   |   |   |
| 4.   |   |   |   |   |  |                            |   |   |   |   |
| 5.   |   |   |   |   |  |                            |   |   |   |   |

## MODULE 2: SESSIONS 1-3 EVALUATION OF THE TRAINING

### INSTRUCTION

**Step 1.** Write the name of the trainer and trainer's organization.

Name of trainer \_\_\_\_\_

Trainer's organization \_\_\_\_\_

**Step 2.** Please provide brief answers to the questions below using a blank sheet of paper.

1. Briefly explain what you liked most about the training.

2. Briefly explain what you would change about the training.



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