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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Edited by David Snyder

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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# Table of Contents

**RESOURCE GUIDE 2: INTRODUCTION TO EARLY CHILDHOOD DEVELOPMENT** ........... V

<table>
<thead>
<tr>
<th>Purpose</th>
<th>V</th>
</tr>
</thead>
</table>

**SESSION 1: INTRODUCTION TO EARLY CHILDHOOD DEVELOPMENT** ......................... 1

<table>
<thead>
<tr>
<th>Learning objectives</th>
<th>1</th>
</tr>
</thead>
<tbody>
<tr>
<td>Early childhood development and its benefits</td>
<td>1</td>
</tr>
<tr>
<td>The benefits of investing in early childhood development</td>
<td>2</td>
</tr>
<tr>
<td>Factors influencing child development</td>
<td>4</td>
</tr>
<tr>
<td>Domains of child development and the concept of the “Whole Child”</td>
<td>7</td>
</tr>
<tr>
<td>Setting goals for supporting all areas of children’s development</td>
<td>7</td>
</tr>
</tbody>
</table>

**SESSION 2: DEVELOPMENT AND INTERVENTION OF INFANTS AND TODDLERS** ........ 21

<table>
<thead>
<tr>
<th>Learning objectives</th>
<th>21</th>
</tr>
</thead>
<tbody>
<tr>
<td>The beginning of child development</td>
<td>21</td>
</tr>
<tr>
<td>Safe delivery and the newborn child</td>
<td>24</td>
</tr>
<tr>
<td>Attachment and its importance in the early stage of child development</td>
<td>26</td>
</tr>
<tr>
<td>Quality caregiving and developmental milestones of infants and toddlers</td>
<td>30</td>
</tr>
<tr>
<td>Milestones and fostering the development of infants and toddlers</td>
<td>32</td>
</tr>
<tr>
<td>Guidance and discipline: Responding to challenging behaviors of toddlers</td>
<td>41</td>
</tr>
</tbody>
</table>

**SESSION 3: DEVELOPMENT AND INTERVENTION OF PRESCHOOL-AGED CHILDREN** ....... 45

<table>
<thead>
<tr>
<th>Learning objectives</th>
<th>45</th>
</tr>
</thead>
<tbody>
<tr>
<td>Special characteristics of preschool-aged children</td>
<td>45</td>
</tr>
<tr>
<td>The role of a preschool teacher</td>
<td>46</td>
</tr>
<tr>
<td>Developmental milestones and fostering preschoolers’ development</td>
<td>48</td>
</tr>
<tr>
<td>Guidance and discipline: Supporting positive behavior of preschoolers</td>
<td>54</td>
</tr>
</tbody>
</table>

**REFERENCES** .............................................................................................................. 67
RESOURCE GUIDE 2: INTRODUCTION TO EARLY CHILDHOOD DEVELOPMENT

Resource Guide 2 is one of six ECD Resource Guides from the CRS SCORE ECD curriculum. The six series are:

1. Approaches to Early Childhood Programs
2. Introduction to Early Childhood Development
3. Assessing Young Children’s Development
4. Quality Early Childhood Environments for Young Children
5. Children with Special Needs and Child Protection
6. Health, Safety, and Nutrition

SAMPLE REVIEW

“This curriculum is very comprehensive and inclusive. Furthermore, it is very simple to understand; one can even just read it and use it. As long as you know English, you do not need a tutor to take you through it. You can just go through it on your own!” (Reviewer: CRS SCORE ECD Coordinator/Association of Sisters Kenya (AOSK), April, 2015)

“The age group 0-2, which is a gap in the Zambia government ECD policy, is well covered in this curriculum. We have been equipped with knowledge and skills on how to deal with this unique age group, which is very critical in human development. Infants, toddlers, persons with disabilities and children with HIV need appropriate interventions to fully grow and develop. How this is done is covered in this curriculum.” (Reviewer: Member of the CRS SCORE ECD Project Curriculum Review Team, Kenya, April, 2015)

“The counseling card and the child behavior modification techniques are missing in the Zambia government curriculum; and we found the caregiver counseling card and the guidelines for disciplining young children very helpful techniques. We learned that discipline means teaching and not punishing children and the behavior modification tips are helpful.” (Reviewer: Master Trainer/sister, CRS SCORE ECD Zambia, July, 2015)
Resource Guide 2: 
Introduction to Early Childhood Development

PURPOSE
The purpose of this guide is to provide information on basic concepts of Early Childhood Development (ECD), including its components, importance, the age range classification of ECD, and the expected pattern of children’s developmental skills in all areas of development—physical-motor, social-emotional, spiritual-moral, and cognitive-language development. Further topics include the importance of attachment in child development, ability differences among infants, toddlers, and preschoolers, and the need for caregivers to differentiate their support according to children’s individual interests and developmental levels, including shaping the behavior of children through positive care and guidance in partnership with families. This guide is divided into three sessions:

1. Session one describes the early childhood period, childhood development, and how investment in early childhood benefits children and society. Further topics include factors influencing child development, how development takes place, domains of child development, and ways in which caregivers and teachers can work with families and set appropriate developmental and learning goals for children, including children with special needs.

2. Session two describes the importance of maternal and newborn care and explains how a caregiver/child early attachment relationship lays a foundation for child development. The developmental milestones specific to infants and toddlers in areas of physical-motor, social-emotional, spiritual-moral, and cognitive-language development are also discussed. Further topics include how caregivers and teachers can foster learning and prosocial behaviors for this age group of children.

3. Session three describes the special characteristics of preschool-aged children, including their milestones in physical-motor, social-emotional, spiritual-moral, and cognitive-language development. In addition, ideas on how to foster learning and prosocial behaviors for this age group are provided.
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 caregivers can use to help families support their children’s needs.

EARLY CHILDHOOD DEVELOPMENT AND ITS BENEFITS

DEFINITION OF EARLY CHILDHOOD

Generally, early childhood is defined as a time that “spans the prenatal period to eight years of age and it is the most intensive period of brain development throughout the lifespan” (WHO & UNICEF, 2012). This period is the most critical time for the growth and development of the child and needs the utmost attention and appropriate care. This guide describes only the early childhood development of children from birth to five years of age.

Early childhood development is defined with many different terminologies by different programs or institutions. Here is how the ECD policy documents of the governments of Malawi, Kenya, and Zambia define early childhood.

Government of Kenya: Early childhood care and development is a “framework that targets all children including the vulnerable and marginalized from conception to eight years of age…and all these children have the same needs which consist of nutrition, health, nurture, protection, stimulation, and training...” (National Early Childhood Development Policy Framework, Republic of Kenya, June 2006).

Government of Zambia: Early childhood care and development is a provision of support “for every young child to realize his/her right to survival, to protection, and to care that will ensure optimal physical and psychosocial development from birth to age eight...including infant stimulation, health and nutrition, early childhood education, community development...” (National Policy of Zambia on Early Childhood Care, Development, and Education: Investing into Our Children’s Future, Everyone’s Responsibility, 1st Draft by Mulenga, n.d.).

Commonly used early childhood terminology

“Early Childhood Education (ECE), Early Childhood Care and Education (ECCE), Early Childhood Care (ECC), Early Childhood Care and Development (ECCD), and Early Childhood Care for Development” (WHO & UNICEF, 2012).

THE BENEFITS OF INVESTING IN EARLY CHILDHOOD DEVELOPMENT

The early childhood period is the basis for later success in life. It is the time when a child’s brain develops at a rapid rate creating plenty of opportunities for children’ learning and development. A child can have a good start in life when he/she grows up in a nurturing and stimulating environment that meets his/her essential needs such as nutrition, health, and safety, as well as the psychological, social, spiritual, and intellectual needs. This also means that the child has a greater chance of reaching his/her full potential later in life. Therefore, it is important to address children's needs holistically because the absence of one or more essential needs can lead to negative developmental outcomes for children.

Each and every child has a right to early childhood development. The United Nations Convention on the Rights of the Child Article 6 (Article 6, UNICEF) highlights that the child has “a right to live...and develop healthy” and that every child has “the right to a standard of living that is good enough to meet their physical and mental needs” (Article 27, UNICEF) http://www.unicef.org/crc/files/Rights_overview.pdf.

The ECD policies of Kenya, Malawi, and Zambia recognize that investment in the early years of life has multiple return values to the development of both children and society. For example, Kenya’s national ECD policy document (June, 2006, pp. 2-4) states the benefits of investing in early childhood development as follows:

Brain development: The development of the brain is most rapid during the first three years of life. Quality early childhood stimulation, nutritional support, and nurturance
enhances the development of the brain. Lack of a responsive and sensitive caregiving can seriously affect the child’s development, and cause failure to thrive.

**Early identification and intervention:** Investment will be spent not only to deliver outcomes but to also reach the children who need it most. Therefore, children with disabilities and vulnerable children who are socially marginalized and discriminated against will have opportunities for early detection and intervention which ensures child’s survival, health, growth, and psycho-social and intellectual development.

**School readiness:** All children, regardless of their sociocultural background, will have equal opportunity to enter school at their appropriate age. The opportunity to help disadvantaged children attain an equal start in schooling is in the early years of life. The experiences of early years help young children to build their competence in all areas of development; the physical-motor, the social-emotional, the cognitive-language and the moral-spiritual, including a positive attitude towards learning.

**Cost savings for society:** A quality early childhood environment and education will translate into better health, fewer illnesses, good academic skills, and fewer school drop outs and repetition, preparing the child to become a productive citizen. Families and social services will have less cost in child care and intervention and invest in other family or national development programs.

**Poverty reduction:** Quality early childhood development experiences and education lead to better success in school, which in turn prepares the child to become an adult with higher employment and earnings, better health, and lower levels of dependency on families and society as well as lower crime rates compared to children who don’t have these opportunities.

### BRAIN DEVELOPMENT IN CHILDREN AND WAYS TO IMPROVE NEURAL CONNECTIONS

New research in brain development shows that:

- The baby’s brain starts to develop soon after conception and the brain cells are present at birth.
- Most of the neurological cell connections are made during the first three years of life. By three years of age, a child’s brain is twice as active as an adult’s brain.
- The care and experiences a child has within the first three years determine the capacity of the brain to develop. Caregivers and early childhood teachers play an important role in helping children form strong brain connections. Early brain stimulation has increased significance for vulnerable children who are exposed to violence and trauma, inadequate nutrition, and toxic environments.

Below are some ways parents and teachers can help children’s brains make neural connections:

- Pregnant women need to eat nutritious food and not take drugs or alcohol to make sure the baby is born healthy.
- Give babies breast milk or iron-fortified baby formula to feed their brains with good food.
- Create safe places for them to play.
- Talk to children to help them learn about language and communication.
- Read to children.
- Sing songs with children.
- Dance with children.

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• Provide opportunities for children to play outside.
• Encourage children to explore through their senses.
• Comfort children when they are upset.

PERIODS OF EARLY CHILDHOOD
The early childhood period is categorized from birth through age eight (Charlesworth, 2012).

Infancy: Birth to one year
Toddlerhood: One to three years
Preschool age: Three to five years
Kindergartners: Five to six years
Primary: Six to eight years

[Note: Different programs classify the early childhood period according to their own context. Therefore, it is recommended that users of this guide refer to their own early childhood development national policy guidelines when planning and implementing early childhood programs.]

WHAT IS GROWTH?
Growth refers to a process of change in the child’s physical body and size. Some examples of growth are a child’s height, weight, head circumference, shoe size, length of arms and legs, and body shape.

WHAT IS DEVELOPMENT?
Development begins at conception. It refers to a child’s ability to do more challenging things as they get older. These skills allow a child to become independent (e.g., physical development of large and small motor skills to sit, crawl, hold objects etc.) and develop with age.

HOW DOES DEVELOPMENT TAKE PLACE?
Development takes place in a predictable manner and all children (e.g., children with or without disabilities) follow a similar sequence of development but grow at their own rate. For example, children crawl before they stand; they stand and walk before they eventually run. Developmental milestones help us to check how a child progresses in his/her development.

FACTORS INFLUENCING CHILD DEVELOPMENT

Important: Development is influenced by heredity, environmental factors, culture, and family values unique to each individual. The growing child affects his/her environment and the environment affects the growing child (e.g., abilities, personalities, objects, families, social values, culture).

2 CRS, Lesotho (2012).
INDIVIDUAL DIFFERENCE AND ITS INFLUENCE ON CHILD DEVELOPMENT

Teachers and caregivers need to understand that each child is unique and has different needs and styles of learning. This will help teachers to plan activities that are appropriate for each child’s learning and development needs.

- Children inherit physical characteristics from their parents through their genes (e.g., skin, hair and eye color, height, gender).
- Children develop and grow at different rates. Some children grow more rapidly than others.
- Children belong to families with their own culture, language, and traditions.
- Children are born with different personalities and they respond to people and situations in different ways. For example, some children can be irritable, easygoing, or indifferent to outside stimulation.
- Children explore roles related to their gender; e.g., girls mimic their mothers and boys their fathers.
- Children have different interests and often follow them over a length of time.
- Children have preferred ways of learning called learning styles:
  - Auditory learners learn best by listening and being told about things.
  - Visual learners learn best when they are shown how to do things.
  - Kinesthetic learners learn best by moving and doing practical things.
- Children have different life experiences. Some children may have ill health or a disability, or a member of their family may be chronically ill.
- Some children who live in dire poverty may experience neglect.
- Teachers need to take individual differences into account when planning an appropriate program for young children.

ENVIRONMENT AND ITS INFLUENCE ON CHILD DEVELOPMENT

Children begin to grow and develop from the moment they are conceived. Their growth and development is based on a number of factors:

- Children inherit characteristics from their parents (e.g., height, skin and eye color, gender, blood type and temperament). Sometimes, medical conditions and disabilities are also inherited.
- Genetic differences in other children may cause a child to look different.
- A child can be affected by what happens before birth. If the mother is infected with HIV, she can pass this on to her unborn baby. The effects of alcohol, nicotine, and drugs can delay development.
- The family is the most important factor in a child’s development. All children need the attention of a warm and loving family, to feel safe and to have their basic needs met. A child who is neglected, abused or separated from his loved ones may fail to grow and develop. Some children may live in several different family structures during childhood and find it difficult to form close and trusting relationships with their families or caregivers.
- The environment in which children grow up plays a huge part in their development. An important way to support children’s healthy brain development is to provide a safe and happy environment for them to grow up in, yet many young children live in unsafe communities. Some children are exposed to abuse or neglect, which has profound and long term effects on their development.
- Poverty can negatively affect children in many ways. Families often have to live on very little money due, for example, to unemployment, sickness, or disability. They may not have enough money for food, clothing or proper housing and sanitation.
These problems often create stress amongst family members, which children can sense and be affected by.

- Children need nutritious food to grow and stay healthy. A child living in poverty may also suffer from poor nutrition, which in turn affects his ability to concentrate and learn.

- Children need enough sleep for their growth and development. They need sleep to rest from the day’s activities and to wake up full of energy for the next day’s activities.

- Cultural background influences development. There are different values and practices about the way things are done and how children should behave. For example, in some cultures boys and men are not supposed to cry and children are not allowed to express their anger.

- Some disabilities (but not all) will pose obstacles for children to learn. For example, a child who was born without an arm and is considered to be capable will find other ways of doing things independently, like playing and learning. Activities can often be adapted to suit a child’s special needs. For example, a toy can be adapted to make it easier to grip, or a table can be lowered to make it possible for a child to participate in an activity.

- Children with disabilities are likely to be exposed to social stigma and exclusion, discrimination, and institutionalization because of their disabilities. All of these factors are damaging to child development and can cause developmental delay and irreversible psychological harm to young children. Children with disabilities thrive when they grow up within a family setting—whether biological, adoptive, or foster.

- Some children have health conditions that may affect their development. A sick child may miss out on opportunities to play and learn.

- Sometimes, parents may have chronic health conditions that will prevent them from engaging in some types of play, and it may reduce interaction between child and parents. Examples of chronic health conditions include diabetes, cancer, asthma, allergies, HIV, etc.

- Children who are infected with or affected by HIV are exposed to a number of factors that can affect their growth and development:
  - HIV is a virus that can negatively affect the development of the child’s central nervous system. A child with HIV may not grow normally, be slow to reach developmental milestones, or experience learning or language problems. He/she may also lose previously gained milestones.
  - Children with HIV and AIDS may get sick more often or have less energy to learn. They will also miss out on opportunities to play with other children and make friends.
  - In many cases, at least one of the child’s parents will be infected with HIV as well. One or both parents may fall ill or die, which adds to their emotional distress.
  - Children who are not HIV positive themselves are also affected. They may have to deal with the loss of their parents or have to care for sick family members. Many children are separated from their families and have to live with other relatives, foster parents, or in a children’s home.
  - Children and their families may be stigmatized and discriminated against because of their HIV status or that of a family member.
DOMAINS OF CHILD DEVELOPMENT AND THE CONCEPT OF THE “WHOLE CHILD”

Children grow and develop in different domains of development and they are:

- Physical and motor development
- Spiritual and moral development
- Social and emotional development
- Cognitive and language development

The above areas of development are interrelated and affect each other; therefore, addressing the whole child requires the consideration of each area of development. The skills a child acquires are influenced by his/her different developmental abilities. This means social upbringing influences caregiver/child relationships; cognitive behaviors promote or limit social skills, and physical activities impact language and thought processes.

For example, why do some children have good social skills? It is because they are liked by their peers and they get along with them. To get along with and be accepted by peers, a four-year-old child may:

- Show many talents such as competence in movement activities (e.g., running, jumping, climbing), building blocks/structures, (physical-motor skills).
- Show care for others, collaborate, and take leadership in planning games (social-emotional; cognitive skills).
- Describe events with clear expressions of thought (language and cognitive skills).

SETTING GOALS FOR SUPPORTING ALL AREAS OF CHILDREN’S DEVELOPMENT

Below is a broad description of each developmental domain as well as a set of educational goals that describe what teachers can expect young children to know and be able to do. These goals will help caregivers and teachers plan activities that will support all areas of children’s development.

PHYSICAL AND MOTOR DEVELOPMENT

Physical and motor development describes how children’s bodies grow and develop and how they learn to control the movements of their bodies. This domain has two parts:

1. The physical growth of the child such as size, weight, and height.
2. The large and small motor skills that a child uses to do things.

*Physical development:* For healthy physical development children need nutritious food and clean water, regular exercise, enough sleep and rest, healthcare when they are sick, and to complete the immunization schedule so that they are protected against diseases.

*Motor development:* The large motor skills of a child are crawling, walking, running, skipping, climbing, hopping, and jumping. The small motor or fine motor skills of a child are the use of the hands and fingers to handle or pick up objects such as a spoon, toy, or crayon. Children use their eyes to coordinate their movements and handling of objects, and this is called hand-eye coordination.

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3 Copple & Bredskamp (2009); Marotz & Allen (2013); Senefeld (2014).
4 Catron & Allen (2008); CRS, Lesotho (2012).
Development and learning goals for young children in the area of physical development include:

- Learning how to move their large muscles and feel confident about what their bodies can do.
- Learning how to control the small muscles in their hands and fingers and develop their hand-eye coordination.
- Being healthy and physically fit.

**Physical development** is about how children’s bodies grow and develop and how children learn to control the movements of their bodies. Growth is the physical change in children’s height and weight.

During the first two years of life a child’s growth in height and weight is very rapid. For example, by the time a child is two years old, he/she should have already reached half of his adult height.

For healthy physical development children need nutritious food and clean water, regular exercise, enough rest, and healthcare when they are sick. They need safe, clean, and open spaces, as well as time and encouragement to explore these and develop their physical skills.

Children also need to complete the immunization schedule so that they are protected against diseases. As children grow, it is important to check that they are growing and developing as they should, so that if there are any concerns these can be managed as early as possible. This means regularly weighing children to see if they are gaining enough weight for their age.

Physical development follows a natural progression, for example:

- Control of head movements happens before control of leg movements.
- Muscle development proceeds from the center of the body outwards. This means that control of the head, upper body, and arms happens before control of the hands and fingers.

Motor development involves skill in using the body parts. There are two types of motor skills:

- The large muscle skills
- The small muscle skills

1. Large muscle skills: Children need to move the different large muscles in their bodies so that they can do things like crawling, walking, running, skipping, climbing, hopping, and jumping.
2. Small muscle skills: Children need to control the small muscles in their hands and fingers to handle things like a spoon or a crayon, or to pick up an object. These skills are important for learning to write.
Small muscle skills also help children to do things for themselves, like feeding and dressing. These activities involve developing the ability to use their eyes to guide the movements of their hands. This is called hand-eye coordination.

**PHYSICAL AND PERCEPTUAL DEVELOPMENT**

Physical development is also linked to children’s development of perception. Perception is the ability to gather information through the sensory experiences. Children receive information through their senses of touch, sight, smell, taste, and sound. For example:

- Children notice similarities and differences in the way things look. This is called visual perception.
- Children notice similarities and differences in the way things sound. This is called auditory perception.
- Children notice similarities and differences in the way things feel. This is called tactile perception.
- Children also recognize similarities in the way things taste and smell. This is called olfactory perception.

**INDIVIDUAL DIFFERENCES**

- It is important to remember that each child develops at his/her own pace and in their own way. One child may take longer to learn some skills than another.
- There is also a lot of overlap because a child will practice one skill and at the same time move on to learn a new skill. For example, he/she might practice throwing and catching a ball and at the same time want to learn how to skip.

Important: Children need many opportunities to use the different muscles in their bodies in different ways and to practice their skills.

Caregivers and teachers can help children develop large motor skills by:

- Giving them plenty of time and space to exercise and practice their skills outdoors. Play lots of movement games.
- Letting children play hopscotch, racing, and other games involving the use of large muscles.

Caregivers and teachers can help children develop small motor skills by:

- Letting children draw and paint, model with clay, cut with scissors, thread beads, and do puzzles.
- Encouraging children to do things for themselves, e.g., pour water into a cup, dress themselves, and wash their hands.

*Note: Refer to the Developmental milestones in this guide for ideas on supporting children’s development by ages and stages.*
SUPPORTING CHILDREN WITH PHYSICAL DISABILITIES

Children who have a physical disability may need additional support to develop and practice their skills. Teachers can help children practice their large muscle skills by:

- Giving them plenty of time and space to exercise and practice their skills outdoors.
- Playing lots of movement games.
- Letting children play hopscotch, racing, and other games involving the use of large muscles.

SPIRITUAL AND MORAL DEVELOPMENT

Development and learning goals for young children in spiritual and moral development include:

- Developing a positive self-identity (feeling good about who they are).
- Beginning to enjoy cultural events with their families.
- Beginning to understand the difference between right and wrong.

Spirituality is about searching for meaning in life and is often found through a belief in a higher power such as God or Allah. Many people also find meaning in life outside of organized religion.

Young children are curious and, by the age of four or five, they start to wonder and ask questions about life, death, and God. Children at this age are still concrete thinkers and do not understand abstract concepts of belief. Parents can help their children learn about the family’s spiritual practices by including them in cultural and religious celebrations and customs. In this way, they will develop a sense of belonging within their family and community. Children also need to be helped to value cultural and religious differences in other people. Children learn common values such as kindness and compassion when they observe these in people and then imitate them.

Caregivers and teachers can nurture spiritual development by:

- Encouraging the young child to experience a personal relationship with God through concrete experiences of nature, plants, animals, and people as gifts of a loving God. Caregivers or teachers allow children to have daily opportunities for discovering God’s gifts through aesthetic expression like art, music, movement, and dramatic play.
- Including children in cultural and religious festivals
- Modeling behaviors like mercy, kindness, and sharing
- Answering children’s questions about spiritual matters respectfully

Moral development is about knowing and being able to make the right choices. Children between the ages of two and five years old believe that something is either
right or wrong and that they will know that something is right or wrong because they will be punished if they do something wrong. If they do something right they won’t be punished. Through modeling, young children learn a sense of responsibility for others through acts of caring, empathy, kindness, and mercy. Caregivers guide and teach them to differentiate the good from the bad and commend good conduct consistently.

Caregivers and teachers can nurture moral development and help children learn about right and wrong by:

- Praising good behavior
- Being consistent with the way they are disciplined
- Talking to children about why something is wrong
- Modeling acts of caring, empathy, kindness, and mercy

**SUPPORTING CHILDREN WITH DISABILITIES IN SPIRITUAL AND MORAL DEVELOPMENT**

Children with disabilities need as many life experiences as typically developing children and should be able to participate in all cultural and religious celebrations. Parents and teachers work together to find ways to adapt the environment, change seating arrangements, or help a child interact with other people.

**SOCIAL AND EMOTIONAL DEVELOPMENT**

Emotional development relates to children’s feelings about themselves other people in their lives and the environment in which they live.

Social development is about how a child gets along with other people in family and in the society at large.

Social and emotional development are closely tied. How children feel about themselves will affect how they interact with others. A child who feels good about himself/herself will be more likely to feel good about being with other people. As children develop emotionally they learn to express their feelings in ways that are acceptable.

Development and learning goals for young children in the area of social and emotional development include:

- Learning to trust other people and things
- Feeling good about themselves and what they can do (self-esteem)
- Learning how to get along with others
- Learning to do things independently
- Learning to control their own behavior and have a sense of self-control
- Learning to express their feelings

A child’s early relationship with his parents and family caregivers is very important for health, social, and emotional development. A child who has not formed strong attachments in early stages of development may be fearful of interacting with other children and adults.

**A SENSE OF TRUST**

During the first year of life, learning to trust is the most important need for babies. They are totally dependent on their mothers or caregivers to meet their needs. If their needs are met over and over again in a loving and consistent way, they will learn to rely on other people and learn to trust them. If the caregiver does not attend to children when they are upset or address their needs, they may become mistrustful of others. If they have developed a sense of trust in the early stages of their lives, they will continue to form trusting relationships with other people as they grow older.

Caregivers and teachers can help children develop a sense of trust by:
- Providing a safe environment and following a regular routine so that children know what to expect every day
- Developing close relationships by getting to know each child better
- Having simple rules and helping children follow them
- Responding to children’s needs for attention

**A SENSE OF SELF (SELF-CONCEPT)**

A child’s self-concept is the way they see themselves. A young child’s self-concept centers on what he/she can or cannot do. For example:

- “I can brush my teeth by myself.”
- “I can put on my own shoes.”

A child’s self-esteem is how they feel about themselves. If they feel good about themselves, they will have a high self-esteem. If they do not feel good about themselves or do not feel valued and accepted, they will have low self-esteem.

The way people respond to children will directly affect how they feel about themselves. When children are praised for their efforts and achievements, they will feel confident in what they can do. However, if they are constantly being put down or scolded, they will start to doubt their abilities.

Parents and teachers play an important role in making children know that they are loved and appreciated. Making children feel loved and appreciated helps them to feel secure about themselves and positive about their abilities.

The best way to build self-esteem in children is to make them feel loved, challenged, and competent. Parents and teachers play an important role in making children know
that they are loved and appreciated. This helps them feel secure about themselves and positive about their abilities, which results in higher self-esteem.

Children’s self-esteem is hurt when other children insult them or call them names. Children need to be helped to understand that these behaviors are hurtful and teachers need to make it clear that they will not be permitted in the preschool. Children should be helped to learn to care for and appreciate one another.

**SUPPORTING CHILDREN WITH DISABILITIES**
Children with disabilities may also develop low self-esteem if they are made to feel that they are helpless and dependent on others, or if they are left out of children’s games and activities.

Children with disabilities will learn and be as much a joy to their families as any other child. Children with disabilities have the right to be included in every aspect of family and community life. Parents, teachers, and other children play a vital role in supporting and including them.

**CULTURAL IDENTITY**
An important part of a child’s self-concept is their cultural identity. All children develop within families and communities, giving them a sense of belonging. They are able to feel proud about who they are and where they come from. Language is an important part of cultural identity, and families need to be supported in teaching their children their home language.

Teachers need to be sure that children see themselves and their families in the learning environment. This includes play, teaching and learning materials, pictures, and books. Teachers should invite parents, caregivers, and other community members to share their cultural heritage through stories and other activities in the preschool.

Minority children have the right to practice their own culture, language, and religion, and it is important for teachers to find ways to bring these practices into the classroom. Children and families can be invited to share traditions and festivals with the other children in the preschool.

**GETTING ALONG WITH OTHERS**
As children relate to different people, they learn important social skills that will help them to get along with others. This includes learning to care for and help others, learning to share and take turns, and learning how to behave in ways that are acceptable to other people. Very young children are more concerned with their own needs and will find it hard to share with others, but from around age three, they start to practice the social skills they need to get along in the world.
CHILDREN GO THROUGH DIFFERENT STAGES IN DEVELOPING MAKING FRIENDS

<table>
<thead>
<tr>
<th>AGE</th>
<th>STAGE OF DEVELOPMENT</th>
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<tbody>
<tr>
<td>0–2 years</td>
<td>Children notice other children, particularly older ones. By the age of two, children are playing side-by-side.</td>
</tr>
<tr>
<td>3–4 years</td>
<td>By the age of three, children are beginning to play cooperatively and friendship preferences start to emerge. They often play with both genders and friendships are fluid, with the choice of activity being more important to children than who else is involved in the activity.</td>
</tr>
<tr>
<td>5–7 years</td>
<td>The first stable friendships begin to emerge. Children actively start to seek the company of their friends. They share willingly with their friends and having friends starts to become important. Sometimes a child may cry if his friend has not come to school that day. It is also common for children to start to choose same-sex friends.</td>
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SUPPORTING CHILDREN WITH DISABILITIES IN SOCIAL AND EMOTIONAL DEVELOPMENT

Children with disabilities love and need to play. Teachers can help by setting up activities in such a way that all children can play and talk together. Sometimes pairing a child with a disability with a typically developing child can encourage friendships and motivate development, moral values, and social skills. This benefits both the child with a disability as well as the child without one.

INDEPENDENCE AND SELF-CONTROL

From a very young age children want to do things for themselves. At about seven months old, a baby starts to realize that he/she is separate from their mother. They start to crawl and stand and move around on their own to explore the world around them.

During the toddler years, between about one and two and half years, children want to explore things they could not do or reach before. They want to do everything themselves including dressing and feeding themselves. This is also the time when they start learning to control their bladders and bowels. During this period, children are still developing their skills and it is important that they are not made to feel shame or guilt when they do not succeed.

From around three years of age, children further develop their ability to do things on their own, and start to make their own decisions, choose their own activities, and explore and learn in their own way. They understand that there are things they should not do and are able to follow simple rules. Between three and five years of age, children are developing more self-control, and they can sit and concentrate for longer periods of time.
**SUPPORTING CHILDREN WITH DISABILITIES**

Children with disabilities need to develop a sense of independence, which is important in building their self-esteem. If they can do things on their own, they will feel good about themselves and learn that they can have control over their lives. A child may find some things difficult to do on their own and may need help. The teacher should check first whether the child needs help, then let them do as much as they can by themselves, and help with those parts they cannot do.

**EXPRESSING FEELINGS**

Children’s emotional development involves identifying, understanding, and dealing with their own feelings. It is also about learning other people’s feelings and caring for them. Very young children have angry feelings and get frustrated because they have not yet developed the language they need to express these feelings. They may also want to do things that they are not yet able to do. Once children are able to talk about their feelings, they develop better self-control. By the time they start school, children are more aware of their own feelings and the feelings of others. This is a normal part of children’s development and they need help from their parents, teachers, and other caregivers to manage their emotions.

Caregivers and teachers can help children develop socially and emotionally, helping them learn to trust other people and things by:

- Letting them know that they are cared about
- Being dependable
- Being consistent
- Being nearby to help when needed
- Acknowledging each child’s unique set of skills and interests

Caregivers and teachers can help children feel good about themselves and what they can do by:

- Praising what they do and try to do
- Taking an interest in what children do and say
- Teaching children in their home language
- Making sure children can see themselves and their families in pictures
- Teaching with learning and play materials
- Helping children feel proud of who they are, what they look like, and where they come from
- Making sure all children are involved in the learning process
- Using positive discipline strategies

Teachers can help children learn how to get along with others by:

- Arranging activities so that children can sit and work together
- Planning lots of play time
- Playing games with children
- Praising children when they try to share or take turns
- Modeling social skills like being patient and respecting and helping others
Ensuring that children understand and respect each other’s differing cultural traditions, skills, and abilities

Caregivers and teachers can help children learn to be independent and develop self-control by:

- Storing play materials at a height and in areas that they can reach so that they can help themselves
- Encouraging children to do things for themselves
- Supporting children when they want to try something new
- Setting simple rules
- Helping children control their own behavior
- Helping children resolve issues peacefully
- Modeling good behavior
- Encouraging children to help with preparing and serving food, sweeping the floors, packing away toys, etc.

Caregivers and teachers can help children learn to express their feelings by:

- Encouraging children to talk about their feelings
- Listening to what children are saying
- Providing activities that help children express their feelings

COGNITIVE AND LANGUAGE DEVELOPMENT

COGNITIVE DEVELOPMENT

Development and learning goals for young children in the area of cognitive development include:

- Learning about themselves, their families, and the people around them
- Learning about the environment in which they live
- Learning to concentrate
- Acquiring thinking and problem-solving skills

Cognitive development is the way that children learn about their world, develop thinking skills, and learn how to solve problems. It is strongly influenced by the child’s own experiences with objects, things, and the people around him/her.

Learning about the world: Children need to learn about themselves and their families, and the people around them. They also need to learn about their environment, e.g., all the different objects around them, and the animals, insects, and plants in nature.

Developing thinking skills: For children to learn about concepts like color, shape, size, texture, and quantity, they need to develop thinking skills that help them recognize, match, and classify (group) things that are the same and things that are different. These thinking skills will help them to better understand numbers and other mathematical concepts.
Solving problems: An important part of cognitive development is to encourage children to find out things for themselves and solve their own problems. Children use all their senses to explore their world and develop their thinking skills. The best way for children to learn is by playing and interacting with objects and people in their environment.

INTELLIGENCE TESTING

Until recently, it was believed that children’s intelligence could be measured by testing. Children were then considered to be intelligent or not intelligent according to their IQ test score. Today it is believed that people are intelligent in different ways and being intelligent entails more than doing well on a test. It is important for teachers to value each child’s own learning style and strengths, so that they can plan suitable activities to suit the different learning styles.

Caregivers and teachers can help children develop cognitively by helping children learn more about themselves, their families, and the people around them by:

- Reading and telling stories
- Providing fantasy-play and encouraging children to imitate what they see around them in their daily lives
- Building on children’s interests by talking about how people and things are alike and different

Caregivers and teachers can help children learn about the environment in which they live by:

- Taking walks around the neighborhood to help them find out more about nature
- Providing books and pictures about the environment

Caregivers and teachers can help children learn to concentrate by:

- Keeping noise levels down when children are playing
- Telling stories that encourage children to remember what happened
- Allowing children time to follow through with what they are doing

Caregivers and teachers can help children develop their thinking and problem-solving skills by:

- Providing lots of things for children to play and experiment with, for example:
  - Building with blocks and learning about shape and space
  - Making snakes with clay and learning about shorter and longer
  - Filling containers with sand and learning about more, less, and how many
  - Playing memory games, e.g., looking at a page in a book and then naming everything from memory
  - Putting cards face down and turning them up one at a time to find matching pairs
  - Remembering the events in a story or what happened the day before
  - Encouraging children to work in their own ways and try to solve their own problem
LANGUAGE DEVELOPMENT AND COMMUNICATION SKILLS

Development and learning goals for young children in the area of cognitive development include:

• Using language to communicate their thoughts and feelings with others
• Learning new words
• Enjoying books and showing an awareness of the purpose of print
• Experimenting with drawing and writing

Language development is how children learn to speak and listen, and later read and write. Infants, toddlers, and preschoolers need to use language to:

• Express themselves and how they are feeling
• Tell us their needs
• Describe, explain, and share their ideas and interests
• Listen and respond to others
• Think and solve problems

Speaking and listening lay the foundation for writing. Young children learn how to speak, read, and write through day-to-day interaction and conversation with people, caregivers reading aloud books to them or listening to oral stories, telling stories, scribbling and drawing, and early exposure to print materials. This type of holistic input is referred to as whole language approach.

Children need lots of practice in using words to talk to others about things that interest them, the things they know, and the things they can do. Children learn to read by being read to and given the opportunity to explore printed materials. When they look at books and enjoy them, they will want to read on their own. They also learn about important print concepts for their own language, such as that print is read from left to right and from top to bottom.

Research has shown that the way parents speak to their children plays an important role in language development. Caregivers and teachers need to encourage a home environment that supports literacy and language.

Although children are capable of acquiring more than one language at a time, they need to first master their home language before they are ready to learn a second language.

Caregivers and teachers can help children develop their language and communication skills by:

• Listening to children
• Talking to them about what they are doing and introducing new words
• Playing rhyming games
• Teaching nursery rhymes and songs
• Telling and reading stories
• Encouraging children to make up their own stories
• Providing a variety of books for children to page through
SUPPORTING CHILDREN WITH DISABILITIES

There are also children who use sign language to communicate with others. If teachers do not know sign language, they can:

• Ask parents to teach them some basic signs and share these basic signs with the other children in the class
• Use their own gestures to make themselves understood
• Use pictures and real objects to help children understand

APPROACHES TOWARDS LEARNING

Important: All children want to learn and can learn, and it is important to remember that each child learns in his/her own unique way. Children need to be supported as they explore and develop their own style of learning.

Development and learning goals for young children in relation to approaches towards learning include:

• Using their initiative and being creative in what they do
• Learning to persist and complete activities and tasks
• Learning to find different solutions to problems and tasks
• Learning to concentrate despite distractions
• Being able to reflect on an experience and apply what has been learned in new situations
• Learning to set goals, follow through, and then reflect on experiences

There are attitudes and behaviors that help children to become good learners and be successful throughout their lives, such as:

• Creativity
• Initiative
• Curiosity and interest
• Motivation
• Thinking and problem-solving skills
• Persistence
• Attentiveness
• Reflecting to build new knowledge

Caregivers and teachers can help children develop positive approaches to learning by:

• Encouraging children to use the play materials in their own way
• Allowing time for children to complete what they are doing
• Praising children’s efforts
• Asking questions that will help children think of new ways of doing things
• Following children’s natural curiosity and interests

CHILDREN WITH SPECIAL NEEDS

Many types of developmental delays and disabling conditions affect young children. Developmental delay means when a child has delays in one or more of the following:

• Physical/motor: The child shows fine and large motor skills not quite fitting for his/her age
• **Self-help skills:** The child has difficulty in doing some daily life activities such as going to the toilet independently, or feeding or dressing by himself/herself.

• **Social-emotional behaviors:** The child shows difficulty in controlling their own feelings and getting along with others during play or completing group tasks.

• **Communication:** The child shows difficulty in clearly expressing himself/herself using words and sentences, as well as understanding others.

• **Cognitive development:** The child shows lack of curiosity and concentration during learning or playing activities.

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**APPLICATION—NURTURING THE “WHOLE CHILD”: THE CASE OF MARY THE VULNERABLE CHILD**

*Contributed by Sisters of the Holy Rosary, Malawi*

Mary comes from Mavuto village in the traditional authority Mzikuwola in Mzimba. Mary (fake name) was born from an HIV infected mother who died during her birth due to excessive blood loss. The parents were ordinary farmers in a very rural village. The father too died. Since then, she has been living with her grandmother who struggles to find ideal food for her.

I came to know Mary when I was going for my routine home visits of other children who are HIV infected and affected. I met her grandmother, Mrs. Bamusi. Mrs. Bamusi started telling me about Mary’s life and asked me for prayers. At 24 months of her age, Mary started having on and off episodes of diarrhea and fevers. Her weight also started to drop. When I saw the child, I did not hesitate to ask the grandmother if Mary had ever had an HIV test. Her response was that Mary was never tested before.

I counseled the grandmother to have the HIV test done for the child, which she agreed to. They were taken to the nearest HIV testing center. Mary was tested and was found positive. Mary was then referred to our community hospital where she was started on ARVs and other treatments and the grandmother was taught how to prepare locally-found foods to improve the health of the child. After being on treatment for six months, Mary got better and started gaining weight. Now Mary is four years old and running around like any other child. The grandmother, who had almost lost hope, amazingly looks at Mary and says she really looks like her mother. Having improved, Mary was registered at a village preschool. We thank God for it.

**REFLECT AND DISCUSS**

Mary, the vulnerable child, has joined preschool at the age of four and she needs support from her early childhood caregiver or teacher in order to thrive in all aspects of her development: spiritual/moral, physical/motor, social/emotional, and cognitive/language.

1. Think of yourself as Mary’s caregiver or teacher at the village preschool.
2. What can you do to help Mary develop holistically?
3. List all of the developmental domains.
4. For each developmental domain, set one or two development and learning goals for Mary.
5. Apply the whole child approach and make a plan to help Mary develop and learn based on the goal/s you have set up for her. (One learning goal may enhance more than one development outcome for the child; it is okay because developmental domains are all interrelated.)
6. Share your work with all of the participants and give your worksheet to your facilitator.
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 fetal and newly born child development.
• Describe how a caregiver/child attachment relationship during the first three years of life is critical to the development of the whole child.
• 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 caregivers can deal with the challenging behavior of toddlers and promote prosocial behavior.

THE BEGINNING OF CHILD DEVELOPMENT

CHILD DEVELOPMENT DURING THE PRENATAL PERIOD
Child development begins at conception. There are three stages of development during the prenatal period. They are the first, second, and third trimesters.

During the first trimester, conception to three months, the baby develops:

• Nervous system (brain, spinal cord, and nerves)
• Heart
• Sexual organs
• Muscles, arms, and legs

During the second trimester, four to six months, the baby shows:

• Increased body size
• Growth of eyelashes and eyebrows
• Increased size of the head
• Stronger heart beat
• Ability to hear sounds
• Ability to suck and make movement such as opening and closing hands and kicking

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During the third trimester, seven to nine months, the baby can survive a premature birth and he/she shows:

• Fully developed body parts including toenails and fingernails
• Fully developed organs, including lungs prepared for oxygen intake at birth
• Ability to sleep and be awake
• Ability to push his/her mother’s ribs or abdomen
• The right position for birth (head down)

THE IMPORTANCE OF MATERNAL HEALTH FOR CHILD DEVELOPMENT

A mother’s health determines the development of the child during the prenatal and postnatal periods. In order to have a healthy baby a mother must pay attention to the following:

**Health care:** A woman needs to have a regular health/medical checkup at all times (e.g., before, during, and after the prenatal period). By doing this she can prevent:

• Low birth weight (LBW), premature, or still birth, and disabilities that can happen to the unborn child
• Malaria, tuberculosis or syphilis, which can be dangerous to the growth and development of the child
• Transmission of HIV to the fetus (this is possible if the mother is positive with HIV and enrolled in PMTCT services on time)

**Healthy lifestyle:** A woman, especially during pregnancy, needs to constantly look after her health. In order to maintain a healthy lifestyle she needs to:

• Protect her health from any kind of environmental hazards such as pesticides.
• Refrain from harmful practices such as, smoking, drinking alcohol, and taking harmful drugs. These substances directly affect the wellbeing of the developing child leading to low birth weight, still birth, or mental retardation.

**Healthy nutrition:** Good prenatal nutrition ensures healthy development of the child. Research shows that maternal and child under-nutrition is the cause of 3.5 million deaths annually (The Lancet, 2008; Hesperian, 2012). Adequate consumption of nutrition and calories by a pregnant mother can prevent:

• Still birth
• Low birth weight babies
• Newborn death
• Mental retardation; speech problems
• Cerebral palsy
• Rickets
• Epilepsy

It is important that health workers or community volunteers counsel pregnant women on national guidelines and procedures recommended for nutrition to ensure an adequate consumption of vital nutrients and calories.

**Adequate livelihood:** Mothers who live in poverty lack sufficient nutritious food and medical care. To ensure healthy child development, it is important that community services support poor families with programs such as nutrition supplement, maternal and child health care, and income-generating and farming activities. The advantages are:

- Families can ensure nutritious and sufficient food for their children.
- Mothers become healthy and can appreciate breastfeeding, which is helpful for the healthy growth and development of the child, including prevention of illnesses such as diarrhea.

**Rest:** Severe stress on pregnant mothers can affect the child’s development. Some risks related to maternal stress are:

- Miscarriage
- Premature birth or low birth weight of baby
- Problems related to breathing, newborn irritability, digestion

To prevent stress-related problems it is important that pregnant mothers receive constant emotional and social support from family and community members.

**AVOIDING TEENAGE PREGNANCY**

Teenage pregnancy has a damaging effect on child development. Some possible risks to the fetus include premature birth, low birth weight, or disabilities. Some children may also die during birth.

Problems related to teenage pregnancy include:

- Inadequate prenatal care
- Poor nutrition and housing (often pregnant adolescents feel ashamed of their pregnancy and may run away from home and live on the street)
- Drug and alcohol abuse
- The teen mother’s lack of knowledge on basic prenatal health care, which can put the child at increased developmental risks

The most effective method for preventing teen pregnancy is by working on the major factors that lead to teen pregnancy:

- Providing positive behavior guidance and counseling throughout the period of early childhood and adolescence
- Helping girls and boys to become successful in school
- Counseling children on early behavioral problems
- Counseling parents on providing healthy and functional family environments for their children
- Helping families to overcome the pressure that comes with poverty, i.e., establishing better income and be able to provide food, shelter, health, safety, and education for their children
- Working with males to help them understand that becoming a father as a teenager is not good and if it happens, that they need to become responsible fathers and seek help to become a good one.
SAFE DELIVERY AND THE NEWBORN CHILD

THE IMPORTANCE OF SAFE DELIVERY

Pregnant mothers need to have a plan for safe delivery. This is because a mother may not always give birth at the expected time; she might have a delay or a pre-term delivery with or without a problem. However, most mothers who live in disadvantaged communities lack health care services and may face birth difficulties. Therefore, it is important that women who lack adequate resources receive prenatal care and support from their community. For example, a community health worker or a traditional birth attendant can help pregnant women get the appropriate information ahead of time and prepare them on what to do and where to go during labor. One way to do this is by providing mothers health referral information.

It is also important to be mindful that due to culture, some mothers may prefer to give birth to their child at home, without being aware of the danger signs that can put the life of both the mother and the child in harm’s way. Some examples of danger signs are “feeling very weak; pain in the belly; swelling of hands and face; blurred eyesight; fever” (Hesperian). In such situations, it is important to respect the families’ norms and values. But it is also important to counsel them about the danger signs and how to access safe delivery services in case of emergency, or even for quality safe delivery.

CONDITIONS AFFECTING THE NEWBORN

The newborn’s health is negatively affected if he/she is born with HIV, born premature, or with low birth weight. Without timely medical treatment, these conditions can cause health problems for the child such as developmental delay, learning difficulties later in life, or even death. For example, children with premature birth can thrive if they have a constant body massage and a loving care from the mother immediately after birth. Skin-to-skin contact between the mother and the child can also help the baby to regulate his/her heart rate, breathing, and body temperature. This skin-to-skin contact is called kangaroo care. Kangaroo care also provides the mother and the child the chance to be close to each other and form bonding. All children will benefit from such care.

BONDING WITH THE NEWBORN CHILD

- **Bonding** with the newborn child happens within the first two weeks of the child’s birth. The mother gives the child her undivided attention, especially during breastfeeding. By doing this, the mother sets the stage for long-term attachment relationship, which significantly enhances the growth and development of the brain, including other areas of the child’s development such as the social-emotional and intellectual development.

- The mother uses her natural instinct to communicate with her baby and respond to the baby’s behavioral cues. Knowing about the newborn’s abilities can help the mother to connect well with her child and form a mutual relationship. Some of the abilities a newborn exhibits at birth include:
  - Responding to voices, showing a preference for the mother’s voice
• Turning toward a soft sound of objects or human voices
• Looking at human faces
• Showing a liking for milk smells and turning away from disagreeable odors
• Recognizing the primary caregiver/mother through her sound and smell
• Responding to touch; a mother’s gentle stroking relaxes the child while firm touch awakens the baby
• Opening eyes and becoming alert when held and rocked by the caregiver
• Looking at stimulating objects and following with their eyes the movement of objects or people

**MUTUAL RELATIONSHIP IN ACTION!**

When the caregiver shakes a rattle gently, the newborn shows a reaction and may turn her head towards the caregiver.

When the caregiver changes the baby’s cloth, the child reacts by moving his/her body, e.g., arms and legs.

When the caregiver holds the child, he/she snuggles to the caregiver’s body.

When the caregiver plays a game with the newborn by singing or calling his/her name, the child responds by turning his/her face towards the caregiver.

**KNOWING NEWBORN’S TEMPERAMENT**

Each child is born with unique personal characteristics or temperament that seems 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 or inactive. Most children belong in one of three types of temperament categories:

• **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 reaction and responses from the caregiver.

• A child with a **challenging temperament** has difficulty in getting along with caregivers and routine activities, resists new activities with intense reactions and takes time to adjust to 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.

• 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.

Because each child has a unique personality, it is important for caregivers to be mindful of this fact and provide their support as appropriate to each child’s individual needs.

**Note:** It is recommended that this session be provided with the assistance of a local health professional or health and nutrition educator.
HOLISTIC INTERVENTION FOR MOTHERS AND CHILDREN: THE CASE OF TURKANA VILLAGE, KENYA

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

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 die 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.

ATTACHMENT AND ITS IMPORTANCE IN THE EARLY STAGE OF CHILD DEVELOPMENT

WHAT IS ATTACHMENT?

A positive, trusting relationship that a caregiver and a child form during the first three years of the child’s life is called attachment. During this period the child’s brain develops as he/she actively interacts with the caregiver and learns about his/her world through the five senses: touch, smell, taste, sight, and hearing. Attachment

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is the foundation for all aspects of the child’s development: the psychological, intellectual, and social.

**HOW IS ATTACHMENT FORMED AND WHEN DOES IT TAKE PLACE?**

Attachment develops through a continuous positive interaction between a caregiver and a child. Attachment becomes successful when the caregiver provides the child with loving care, stimulation, and protection from any kind of psychological and physical harm. It takes place over the child’s first two years and happens in four stages.

**STAGE 1—PRE-ATTACHMENT**

The first stage of attachment takes place between birth to four or six months. The child easily complies with any caregiver’s comforting gesture (e.g., holding, cuddling) without fussing. To fulfill his/her attachment need, the child communicates with the caregiver using body language, gestures, and verbal cues like smiling, crying, and cooing. Babies cry when they feel hungry. However, when a baby cries continually, it is a sign of seeking attention and comfort from the caregiver. It is important that the caregiver responds to the child’s communication needs on time and with sensitivity. The caregiver can do this by hugging, cuddling, playing, singing, or humming traditional songs or rhymes and playing with the baby.

**STAGE 2—ATTACHMENT-IN-THE-MAKING**

The second stage of attachment takes place between four to eight or nine months. The infant begins to show the ability to recognize familiar voices, faces, or people around him/her. This ability is related to the cognitive development of the infant because he/she is now able to tell whether their primary caregiver is present or absent in the room. The infant follows the movement of the primary caregiver with his/her eyes, smiles at them, and cries or fusses when the caregiver leaves the room or when being left with another unfamiliar person. The state of the infant’s ability to know that his/her caregiver or other object still exists, even if she or it is out of sight, is called object permanence.

**STAGE 3—CLEAR-CUT-ATTACHMENT**

The third stage of attachment takes place around eight or nine months up to two years of age. The infant begins to show interest to actively engage and make contact with the caregiver. The infant’s relationship with the primary caregiver becomes stronger and he/she comes to know their caregiver well. Therefore, the infant begins to show discomfort when being separated from his/her caregiver and/or held by an unfamiliar person. The infant resists separation by crying and clinging to the caregiver and hides behind her when seeing a stranger. This state of fear is a sign of normal cognitive and emotional development and is called separation or stranger anxiety.

Note: Separation or stranger anxiety reaches its peak at about the child’s first birthday. If the child is adopted or enters a child care facility just at this time, the transition can be very difficult. Whenever possible, it is better if adoption or the transition of the child to a new home or caregiver is done before or after the peak of separation anxiety. But it is encouraging to know that separation anxiety is a normal developmental process and a sign of strong and healthy attachment behavior. All children, including adopted ones, who have healthy attachment with at least one caregiver thrive and become successful in life.
STAGE 4—FULL ATTACHMENT WITH CAREGIVER

The fourth stage of attachment takes place around 24 months and beyond. The child begins to form a give-and-take relationship with the caregiver; he/she begins to understand the caregiver’s intentions and they begin to have a two-way interaction. The child plays with increased collaboration with the caregiver, assuming adult roles. For example, the child will say to the caregiver, “I am the mother, you are the baby” and pretends to go out and collect water saying to the “baby” (caregiver), “I will be back soon.” The child shows increased trust and ability to think mentally. This ability allows the child to play independently without the presence of the caregiver because he/she knows that his/her caregiver will be back. The ability to explore and strive for independence is a key characteristic of toddlers. Caregivers at this stage need to foster toddlers’ need for independence while at the same time setting clear and developmentally appropriate guidance and expectations for behaviors.

WITH WHOM DOES A CHILD FORM ATTACHMENT?

Children form secure attachments when they have a caregiver whom they can trust. Children can form attachment with both male and female caregivers. Research shows that children’s outcomes are better in most areas of development if they have a strong male influence in their lives. Children can also have attachment with multiple caregivers. For example, in African tradition, the mother or the father may not be the primary person with whom the child is attached; children may live in extended families and may have strong emotional bonding with people other than their primary caregiver/s. Uncles, aunts, grandparents, or day care teachers can become the secondary caregivers of the child. Children who grow up in group residential homes benefit from this type of attachment relationship. 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.

WHAT HAPPENS WHEN CHILDREN FORM A SECURE ATTACHMENT?

Attachment is important not only during the first two to three years of age but also throughout an adult’s life. When children grow up having a quality relationship with their caregivers the benefits to children’s development are many:

• Children can thrive in all aspects of their development: social-emotional, language, cognitive, and moral skills.
• Children can develop a sense of self-confidence and trust that allows them to freely examine and learn about things and interact with peers and adults.
• Children can count on adults in time of discomfort or sadness.
• Children born with premature or low birth weight can thrive when caregivers gently touch and massage their body regularly while at the same time talking to them softly.
• Children show less undesirable behavior as toddlers, get along with social rules and adult expectations, show caring attitudes, and play nicely with peers.
WHAT HAPPENS WHEN CHILDREN DO NOT HAVE A SECURE ATTACHMENT?

Children can develop insecure attachment when the caregivers do not spend enough and quality time interacting with them. Other reasons could be some caregivers may neglect or ignore the child’s crying or sense of discomfort for various reasons. Some children may grow up without having one adult as their primary caregiver. In such situations the attachment process is interrupted and the child fails to develop trust on others.

When an infant grows up with little or no attachment he/she may:

• Mistrust people and expect less positive response from others. Doubt leads to the child’s learning not to trust peers or adults.
• Have difficulty in learning, such as lack of focus and emotional control
• Show undesirable or challenging behavior like not complying with rules, limits, and boundaries
• Show withdrawn behavior like not mixing and playing with peers or exploring their environment freely

WHAT ARE THE SIGNS OF SECURE AND INSECURE ATTACHMENT?

SIGNS OF SECURE ATTACHMENT

A child can develop a secure attachment when the caregiver has a constant interaction with the child that involves talking, playing, and fulfilling the child’s physical, social, and emotional needs. A positive and long-term caregiver/child relationship enables the child to:

• Feel safe and develop good self-image
• Seek the caregiver after short- or long-term separation
• Have confidence in the caregiver’s support in time of discomfort
• Trust his/her environment and explore without doubt or fear

POSSIBLE SIGNS FOR INSECURE ATTACHMENT

• The child may not show the interest to talk to or be held by the caregiver when they come together after separation.
• The child may show conflicting behavior, e.g., he/she seeks the caregiver’s attention to be held but when the caregiver tries to hold him/her, the child may refuse and push the caregiver away.
• The child may not be interested in mixing with other children during play or show irritable behavior; such children may be avoided by their peers or caregivers.

Note: It is important to know that some children may show irregular or challenging behavior for reasons unrelated to attachment problems. Some behavioral problems can be attributed to the child’s personality characteristics or his/her developmental progress. For this reason, caregivers need to make a holistic assessment of the child before making any decision about the child’s attachment behavior.

REASONS FOR INSECURE ATTACHMENT

• Lack of a warm, responsive treatment from the caregiver. Some caregivers spend little time and have very limited interaction with the child. Some reasons could be
maternal post-natal depression, sickness, or even neglectful or hostile behavior.

• Lack of a constant primary caregiver during the first three years of the child’s life. For example, an orphan child may grow up with multiple substitute caregivers, missing the chance to build a stable relationship with one adult whom he/she can trust.

• Lack of good health that leads to a child spending most of his/her time in bed or at a clinic. This situation may not be inviting or conducive for the primary caregiver’s constant attention and interaction with the child.

WHAT ARE SOME ISSUES OF ATTACHMENT?

One issue is that some children due to their personality (temperament) may fail to elicit the caregiver’s interest to interact with them. In such cases, it is important for caregivers to learn about each child’s characteristics and treat her/him with sensitivity and care.

Another issue is that newborn orphan infants moved to group home care may not necessarily get the chance to form a steady and warm relationship with one caregiver whom they can trust. It is important for group home care providers to recognize the critical role of attachment on children’s development. The key message is that newborns need to form a consistent attachment to at least one caregiver before four to six months of age.

QUALITY CAREGIVING AND DEVELOPMENTAL MILESTONES OF INFANTS AND TODDLERS

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, children need constant positive stimulation, which 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; they think learning comes later when children enter school. Their thinking is that infants and toddlers are not yet physically and mentally ready to learn.

For this reason, most caregivers do not make much effort to engage children in learning activities. For example, during caregiving routines, many caregivers may spend a number of hours every day with their children without actively engaging them in play or conversations. This leads to the children missing the chance to start learning early in their life.

Caregivers are the main teachers of infants and toddlers. Using caregiving routines 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. They are times when the caregiver spends a focused interaction with the child during her caregiving activities. These moments are ideal for fostering the child’s development, including the development of the brain.
These everyday routines are:

- Feeding
- Toileting
- Bathing, washing, dressing
- Sleeping
- Playing

Think of the time a caregiver spends feeding, bathing, and diapering a child. During this time, the caregiver can engage the child to play, talk, and explore her/his surroundings. When she does this the child begins to learn about different things and develop more curiosity to explore his/her surroundings. This opportunity will not happen if the focus of the caregiver is only to finish the task and quickly get back to her daily activities.

The Caregiver’s practice checklist below can help caregivers reflect on their daily routine activities with young children.

### THE ROLE OF A CAREGIVER IN A CAREGIVING ROUTINE

#### CAREGIVER’S PRACTICE: REFLECTION CHECKLIST

<table>
<thead>
<tr>
<th>CAREGIVING PRACTICE WITH INFANTS AND TODDLERS</th>
<th>A</th>
<th>S</th>
<th>R</th>
<th>REMARK</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Do I talk and smile at the child when I wash and feed him/her or change his/her diaper?</td>
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<tr>
<td>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)?</td>
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<td>3. Do I spend enough time to interact and play with the child using songs, games, toys, stories, etc.?</td>
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<tr>
<td>4. Do I make an effort to study the child and understand his/her ways of communication such as his/her crying, sounds, movements, gestures, and facial expressions and respond in a timely and appropriate manner?</td>
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<tr>
<td>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?</td>
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<tr>
<td>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?</td>
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<tr>
<td>7. Do I make an effort to be a good role model for the child (e.g., gentle touch, saying please, thank you, talking with respectful language and tone)?</td>
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<tr>
<td>8. Do I make an effort to let the child learn through his/her own experiences, solve problems by himself/herself, not trying to do or finish activities for the child?</td>
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<tr>
<td>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?</td>
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<tr>
<td>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?</td>
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</tbody>
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When caregivers interact with infants and toddlers in the ways described above, they become a care teacher, linking care and education together to provide the child with a good start in life.

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?

MILESTONES AND FOSTERING THE DEVELOPMENT OF INFANTS AND TODDLERS
• Physical-motor
• Spiritual-moral
• Social-emotional
• Cognitive-language

A milestone is a developmental skill or behavior that most children can do by a certain age or within a certain block of time. Most milestones usually build on one another. Developmental milestones are useful because they help parents and family caregivers know what is expected of their child at a particular age. They can observe and reinforce the child’s developmental progress through their appropriate support.
It is important to remember that the age given for each developmental stage is just an average. Each child is different from every other child and develops and learns at his/her own pace. A child may also develop more quickly in one area and take longer to develop in another area. If a child cannot do what is expected for his age group this does not necessarily mean there is a problem. However, failure to reach the expected developmental milestone could be an early warning sign that needs attention.

Below is a chart on developmental milestones by age and what caregivers and teachers can do to foster development.

<table>
<thead>
<tr>
<th>AGE</th>
<th>MILESTONES/SKILLS</th>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Infants Birth to 1 year old</td>
<td>Physical-motor development</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Large muscle development</td>
<td>Shake a rattle or move an object from side-to-side to help him/her move their head and eyes.</td>
</tr>
<tr>
<td></td>
<td>• Lifts head and chest when lying on stomach</td>
<td>Put baby on his/her back on a mat and let them kick and move around.</td>
</tr>
<tr>
<td></td>
<td>• Moves and kicks with arms and legs</td>
<td>Make a mobile by hanging things from a coat hanger. Hang the mobile near him/her so that they can kick or try to grab it.</td>
</tr>
<tr>
<td></td>
<td>• Pushes arms and legs when held</td>
<td>Place the baby on his/her tummy, put an interesting object in front of them, and encourage him/her to lift their head and look at it.</td>
</tr>
<tr>
<td></td>
<td>• Rolls over from stomach to back (and back to stomach)</td>
<td>Hold the baby near an object and encourage him/her to reach for it.</td>
</tr>
<tr>
<td></td>
<td>• Lifts up knees</td>
<td>Help the baby roll over from side to back on a mat.</td>
</tr>
<tr>
<td></td>
<td>• Sits with support</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Stands up if held under arms</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Small muscle development</td>
<td>Provide safe objects for babies to look at, grasp, squeeze, pick up and put in their mouths, e.g., soft pieces of fabric, ribbon, or a soft ball.</td>
</tr>
<tr>
<td></td>
<td>• Opens and closes hands</td>
<td>Put a finger in the baby’s hand and encourage him/her to grasp it by closing their fingers around it.</td>
</tr>
<tr>
<td></td>
<td>• Plays with fingers and toes</td>
<td>Put rattles or other small objects into the baby’s hand for him/her to hold.</td>
</tr>
<tr>
<td></td>
<td>• Takes hand to mouth</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Grasps and tries to hold objects or a finger</td>
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<tr>
<td></td>
<td>Social-emotional development</td>
<td>Respond to the baby’s cries quickly and care for their needs to be fed, changed, or held.</td>
</tr>
<tr>
<td></td>
<td>• Tries to tell you he/she is hungry, tired, wet, or needs a cuddle</td>
<td>Care for the baby in a warm loving way, holding them close to the body.</td>
</tr>
<tr>
<td></td>
<td>• Gets easily excited or upset</td>
<td>Smile, talk, and sing to the baby when changing nappies, washing, feeding, or playing.</td>
</tr>
<tr>
<td></td>
<td>• Loves to be held and cuddled</td>
<td>Respond to coos and facial expressions.</td>
</tr>
<tr>
<td></td>
<td>• Begins to smile in response to someone else</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Learns to recognize the faces and voices of parents, family, and caregivers</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Returns a smile</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Shows excitement through waving arms, kicking, wiggling</td>
<td></td>
</tr>
<tr>
<td></td>
<td>• Scared of loud noises, new situations, and people</td>
<td></td>
</tr>
</tbody>
</table>

9 CRS, Lesotho (2012); Marotz & Allen (2013); Johns Hopkins University and Maryland State Department of Education (2010).
<table>
<thead>
<tr>
<th>AGE</th>
<th>MILESTONES/SKILLS</th>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td><strong>Cognitive development</strong></td>
<td>Talk to babies about what you are doing and the things you see around you. Move the baby around to new places and in different positions so that he/she can see things from a different viewpoint. Hang objects above the baby where he/she can see, reach, and touch them. Put safe objects where baby can touch them.</td>
</tr>
<tr>
<td></td>
<td>- Focuses on and follows moving objects with eyes</td>
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<tr>
<td></td>
<td>- Cries in different ways to say he/she is hungry, sore, or wet</td>
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<tr>
<td></td>
<td>- Makes sounds – babbles, coos, and gurgles</td>
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<tr>
<td></td>
<td>- Turns towards familiar voices and sounds, e.g., a rattle or bell</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Turns towards bright lights and colors</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Plays with fingers, hands, and feet</td>
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</tr>
<tr>
<td></td>
<td>- Forgets about objects he/she cannot see</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Explores things with his/her mouth</td>
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<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td><strong>Language development</strong></td>
<td>Imitate the sounds that the baby makes--coos and babbles. Shake a rattle or make sounds with different objects. Talk to the baby about what you are doing when you feed, change, wash, and play with him/her. Call the baby by his/her name. Sing songs when washing and changing the baby or rocking him/her to sleep.</td>
</tr>
<tr>
<td></td>
<td>- Communicates needs by crying</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Babbles and coos when pleased or to get attention</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Knows familiar voices</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Begins to understand some words (tone of voice)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Starts to make simple sounds</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Smiles back at a parent</td>
<td></td>
</tr>
<tr>
<td></td>
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<tr>
<td></td>
<td><strong>Approaches to learning</strong></td>
<td>Put colorful objects nearby to capture the baby's interest. Play music on the radio or sing to the baby. Talk to the baby about what you are doing, e.g., “You shook the rattle and it made a noise.” Provide a routine and avoid sudden changes.</td>
</tr>
<tr>
<td></td>
<td>- Uses his/her mouth to explore and learn</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Explores his/her own hands and feet</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Watches interesting objects and people nearby</td>
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</tr>
<tr>
<td></td>
<td>- Looks for, reaches for, and puts objects in his/her mouth</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Turns his/her head toward sounds</td>
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<tr>
<td></td>
<td>- Explores for a purpose, e.g., hits an object to make it move</td>
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<tr>
<td></td>
<td>- Cries, shouts, or moves his/her body to get attention</td>
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<tr>
<td></td>
<td>- Smiles when an adult talks or interacts</td>
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<td></td>
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<tr>
<td></td>
<td><strong>Physical-motor development</strong></td>
<td></td>
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<tr>
<td>6-12 months old</td>
<td><strong>Large muscle development</strong></td>
<td>Place a plaything on the floor out of reach and encourage baby to crawl over and get it. Stand the baby on your lap with his/her feet on your legs and let them bounce up and down or dance. Put a plaything or object on a chair or table and let him/her play with toys while standing. Stand behind the baby, hold him/her under their armpits and walk forward together.</td>
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<tr>
<td></td>
<td>- Creeps on his/her stomach and crawls</td>
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<tr>
<td></td>
<td>- Sits alone without support</td>
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<tr>
<td></td>
<td>- Pulls up to a standing position</td>
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<tr>
<td></td>
<td>- Stands holding onto furniture with support</td>
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<tr>
<td></td>
<td>- Stands alone</td>
<td></td>
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<tr>
<td></td>
<td>- Walks with help or by holding on to furniture</td>
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<td></td>
<td><strong>Small muscle development</strong></td>
<td>Hang things just out of the baby’s reach and encourage him/her to stretch out, reach and grasp them. Give the baby many things to pick up, hold and put in his/her mouth, e.g., a plastic spoon, feather, sponge, piece of cloth, and things that squeak. Let the baby start holding a cup when he/she drinks. Cut food into finger-sized portions and let the baby pick it up with his/her fingers. Give the baby boxes, packets, and things to pack and unpack.</td>
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<tr>
<td></td>
<td>- Grasps objects with thumb and forefinger</td>
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<tr>
<td></td>
<td>- Lets go with hands</td>
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</tr>
<tr>
<td></td>
<td>- Bangs and shakes things</td>
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<tr>
<td></td>
<td>- Uses finger to point</td>
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<tr>
<td></td>
<td>- Drinks from a cup</td>
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<tr>
<td></td>
<td>- Begins to eat finger foods</td>
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<tr>
<td></td>
<td>- Puts things in boxes and takes them out again</td>
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</tbody>
</table>
### AGE MILESTONES/SKILLS

#### Social-emotional development
- Responds when called by name
- Talks to self in front of a mirror
- Needs to have parent or familiar person in sight
- Is afraid of strangers and new situations
- Imitates what other people do
- Has a favorite toy or blanket
- Shows frustration when needs are not met

<table>
<thead>
<tr>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
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</thead>
<tbody>
<tr>
<td>Hold the baby to a mirror and call him/her by their name.</td>
</tr>
<tr>
<td>Describe feelings when holding and talking to the baby, e.g., “You’re so happy.”</td>
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<tr>
<td>Touch or pick up the baby when there are strangers around and reassure him/her that they are safe.</td>
</tr>
<tr>
<td>Give the baby his/her favorite toy or blanket when he/she is sad.</td>
</tr>
<tr>
<td>Play peek-a-boo (hide-and-seek) games.</td>
</tr>
<tr>
<td>Pick up the baby and soothe him/her when they are upset.</td>
</tr>
</tbody>
</table>

#### Cognitive development
- Repeats actions that cause a response e.g., shakes a rattle to repeat a sound
- Claps hands, waves bye-bye
- Solves simple problems, e.g. moves one toy to reach another toy
- Drops toys over and over again
- Looks for things not in sight, e.g., a play thing under a blanket
- Follows simple instructions
- Places objects inside one another

<table>
<thead>
<tr>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Have many safe things that the baby can explore – look at, touch, taste, and make sounds with, e.g., plastic containers and lids, clothes pegs, piece of fabric, plastic key ring, rattles, soft balls, plastic spoons, coffee cans with lids.</td>
</tr>
<tr>
<td>Provide a safe place for the baby to crawl around and explore.</td>
</tr>
<tr>
<td>Give the baby plenty of time to explore.</td>
</tr>
<tr>
<td>Point to and name the baby’s mouth, ears, nose, fingers.</td>
</tr>
<tr>
<td>Play hide-and-seek games with the baby.</td>
</tr>
</tbody>
</table>

#### Language development
- Understands more words, e.g., body parts
- Makes word sounds
- Begins to say first words by the 10th or 11th month, e.g., da-da or ma-ma
- Vocabulary between two and twelve words

<table>
<thead>
<tr>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
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</thead>
<tbody>
<tr>
<td>Talk with the baby about what he/she is doing and name objects around him/her.</td>
</tr>
<tr>
<td>Point to and name different parts of the body.</td>
</tr>
<tr>
<td>Describe what objects look like or how they sound.</td>
</tr>
<tr>
<td>Sit with the baby and show him/her pictures or look at books about familiar things.</td>
</tr>
</tbody>
</table>

#### Approaches to learning
- Feels different textures
- Tries new sensory experiences
- Interacts with an object in more than one way
- Experiments with objects for a purpose
- Uses different senses to explore objects by looking, touching, mouthing, and banging
- Looks for objects that are out of view
- Shows pleasure when someone reads, talks, or sings

<table>
<thead>
<tr>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Give the baby objects of different textures to explore.</td>
</tr>
<tr>
<td>Show the baby a new way to use things, e.g., clapping things together, banging, shaking, or squeezing.</td>
</tr>
<tr>
<td>Provide a routine and avoid sudden changes.</td>
</tr>
</tbody>
</table>

### Toddlerhood 1 to 3 years

#### 1 to 2 years

**Physical development**

**Large muscle development**
- Walks alone
- Takes a few steps backwards and sideways
- Pulls or pushes toy when walking
- Crawls up steps and climbs onto low furniture
- Starts to run around
- Dances to music
- Tosses or rolls a ball

<table>
<thead>
<tr>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Turn on the radio and dance, jump, and clap to the rhythm with your child.</td>
</tr>
<tr>
<td>Make a ball by stuffing the toe of a sock with plastic bags. Throw and catch the ball together.</td>
</tr>
<tr>
<td>Attach a piece of wire or string to a tin, bottle, or cardboard box to make a push or pull toy.</td>
</tr>
<tr>
<td>Let your child play outside and practice walking, running, and jumping.</td>
</tr>
</tbody>
</table>
### Small muscle development
- Begins to use a spoon
- Stacks two to four blocks
- Enjoys taking things apart
- Takes things out of cupboards and boxes
- Takes off pull-on clothing

Give your child a chance to:
- Spread peanut butter, margarine, or jam on bread
- Fill and empty containers
- Pour maize meal or rice from a box
- Mix things for cooking
- Take off socks
- Comb or brush hair
- Brush teeth
- Feed himself/herself
- Pack things in the cupboard or boxes
- Take the lid off a jar
- Clear away toys after playing with them
Find pots, lids, and spoons for the child to bang on and make music.

### Social-emotional development
- Wants to do things on their own
- Plays alone or beside other children
- Has difficulty sharing
- Gets upset when separated from a parent
- Shy around strangers
- Finds it difficult to remember rules
- Imitates others, e.g., pretends to talk on a telephone
- Says ‘me’ and ‘mine’ a lot
- Likes the attention of adults

Give the child many chances to do things for himself, e.g., dress or feed himself/herself.
Give praise when the child does something on his/her own, e.g., “Well done, you did it.”
Give the child choices, e.g., “Would you like to sweep the floor or wipe the table?”
Have rules that will keep the child safe and help him/her to learn them.

### Cognitive development
- Looks for objects that are out of sight
- Points to and names objects, body parts, and familiar people
- Imitates animal sounds
- Starts to play make-believe and copies actions observed, e.g., feeds a doll
- Begins to sort shapes and colors

Provide a variety of household objects that the child can safely explore like plastic or non-breakable cups, plates, spoons of different sizes, containers with lids, things to fill the containers, e.g., pegs, stones, leaves, sticks, fabric. (Be careful to choose objects that the child will not swallow or choke on.)
Name the objects when the child points to them.
Give the child things to fill and empty, push and pull, open and close, take apart and put together again, e.g., empty boxes, jars with lids.
Have a doll and some dress-up clothes for the child to play with.

### Language development

#### 12-18 months
- Uses single words to say the names of things and people
- Points towards things or pictures when named
- Says ‘hi’ and ‘bye’ if asked
- Makes two-word sentences, e.g., ‘daddy,’ ‘ball.’

#### 18-24 months
- Uses two or three words in a sentence
- Vocabulary of a few hundred words,
- says ‘please’ and ‘thank you’ if asked

Name objects, animals, and body parts and encourage the child to name and talk about them.
Encourage the child to talk about what he/she is doing.
Sing favorite songs over and over again.
### Spiritual-moral development
- Has undifferentiated concept about self and others
- Has no sense of right or wrong and no religious or spiritual beliefs yet
- When a loving, kind, tender caregiver who meets their needs cares for infants, infants begin to trust and ultimately develop faith in that person—a foundation for having faith and a relationship with God

Provide warm and loving care to child

### Approaches to learning
- Moves towards object or asks to play with something that interests him/her
- Uses senses to learn more about an object
- Asks “What’s that?” or “Why?”
- Approaches an unfamiliar adult
- Tries new food
- Plays near others
- Watches how another child plays and then imitates them
- Likes to try new skills and do them on their own
- Repeats actions to find out more

Encourage the child to work out things for himself/herself, e.g., “I wonder what would happen if...”
Ask what will happen next, e.g., “We’ve picked the spinach from the garden. What should we do with it now?”
Join in play, and answer the child’s questions.
Break down a task into different steps.
Let the child repeat things over and over to learn a skill.
Praise the child for trying to do something, as well as when they succeed.

### Large muscle development
- Walks up and down steps two feet at a time
- Runs easily and stops when he/she needs to
- Walks backwards
- Jumps with both feet together
- Kicks a large ball
- Stands on one foot
- Climbs well

Walk as much as you can with your child.
Give plenty of opportunities for your child to play outside, playing ‘follow-the-leader’ games, catch games, and kicking a ball back and forth.

### Small muscle development
- Makes marks on paper
- Turns pages of a book
- Stacks four to six objects, e.g., blocks, plastic containers, or cardboard boxes
- Holds crayons and scribbles
- Eats easily with a spoon
- Helps to dress himself/herself

Encourage the child to do things for himself/herself like:
- Feed self with a spoon
- Wash and dry hands
- Help with dressing such as pull on their own pants, put on shoes, take off shirt
- Use toilet with help
Make rhythm shakers from two plastic lids of the same size (like the furniture polish cans). Fill one lid with small stones or seeds and then glue or tape the lids together. The child uses the shaker when singing or dancing.
Let your child scribble or draw on paper or with a stick in clean sand.
<table>
<thead>
<tr>
<th>AGE</th>
<th>MILESTONES/SKILLS</th>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
</table>
| Social-emotional development | • Wants to do everything for himself/herself, like dressing, washing, feeding  
• Plays alongside other children  
• Plays simple pretend games and copies what he/she sees adults do  
• Enjoys helping with household chores  
• Says ‘no’ a lot and has temper tantrums  
• Starts to do things with other children  
• Can hurt other children when angry  
• Is shy around strangers  
• Seeks adult attention | Encourage the child to play with a friend who lives nearby. Give them a task to do together and finish.  
Provide a doll for the child to play with and talk to about how he/she is feeling.  
Keep large cardboard boxes that the child can use to make a house or a car.  
Give the child the words he/she needs to say how they are feeling. For example, “I don’t like it; it hurts.” Or, “I am very happy.” |
| Cognitive development | • Matches an object to a picture in a book  
• Plays make-believe with dolls, animals, and people  
• Completes puzzles with three or four pieces  
• Understands the concept of ‘two.’ | Let your child sort things and put things together according to shape, color, or size, e.g., all the blue shirts, all the spoons, all the boxes of the same size. Name the objects, shapes, and colors that he/she is using.  
Put small things into pairs of empty cool drink tins, e.g., seeds, sand, small stones. Tape the tins closed.  
Let the child shake the tins and try to find the tin that has the matching sound.  
Match similar objects one-to-one to introduce the idea of numbers, e.g., “Get one plate for you, one plate for daddy, and one plate for me.”  
Encourage the child to play pretend games. |
| Language development | • Recognizes and names almost all common objects and pictures  
• Understands two-step directions  
• Uses pronouns (I, you, we, they)  
• Enjoys simple stories, rhymes, and songs | Tell favorite stories and sing favorite songs.  
Give the child words when he/she is not sure.  
Give directions in two steps, e.g., “Find the bag of flour on the shelf and then put it on the table.” |
| Spiritual-moral development | • Begins to develop a sense of “I” and “them”  
• Begins to learn what is right and wrong but has no religious or spiritual beliefs yet  
• When a loving, kind, tender caregiver who meets their needs cares for infants, infants begin to trust and ultimately develop faith in that person—a foundation for having faith and a relationship with God. | Provide warm and loving care to the child. |
| Approaches to learning | • Asks other children if he/she can join in play  
• Chooses what to play with  
• Asks questions to find out more  
• Cooperates with others to complete a task  
• Thinks ahead about how he/she will play with an object  
• Completes tasks in a sequence  
• Uses knowledge from previous situations to solve problems  
• Uses trial and error to complete a task | Ask how things are the same or different.  
Give the child enough time to complete a task.  
Remind the child what will happen next during the day.  
Ask questions, e.g., “What will I need to stir the pot?”  
Praise the child when he/she completes a difficult task. |
IMPORTANT:

- Remember children develop holistically and that domains of child development are interrelated and influence each other.
- Children develop and learn best when caregiving and teaching are appropriate for a child’s age and development level, individual potentials and abilities, and culture.
- All children can learn and all need some form of support in learning. Vulnerable children such as children living with HIV and/or children with disabilities are not without abilities—they can learn as any other child would, but just need a special form of support to reach their full potentials of growth and development. Special health care and adaptive and inclusive environments are just what they need to thrive!

DEVELOPMENTAL DELAYS

Remember that every child develops and learns at his/her own pace. However, if a child is far behind in meeting the milestones listed for his/her age group, that could be a developmental alert and the child may need special help. Remember that special health watch is even more significant for children affected by HIV and AIDS and children with disabilities because they are more vulnerable and at risk compared to children without serious physical and health conditions.

It is very important that caregivers observe each child’s wellbeing every day and if concerns arise they can refer the child to a health worker for early screening and appropriate early intervention. Caregivers at all times must put in place contact information on health referral systems that exist in the community and closely work with health workers providing services to young children.

Note: Share the above child development information with families. Make a home visit and share information with parents and family members about child development and ways in which parents can foster learning for their children. One way to share information during a home visit is to prepare and use a counseling card that contains key ideas about how children develop and learn and what caregivers can do to foster their development. The Positive Parenting Counseling Card developed by Catholic Relief Services for THRIVE Early Childhood Development Program in Malawi, Kenya, and Tanzania is a good resource to use. An example of this counseling card is provided below:

Below is an example of the Positive Parenting Counseling Card, THRIVE Early Childhood Development Program in Malawi, Kenya, and Tanzania, or CRS, Lesotho, “Whose Child Is This?” Positive Parenting Counseling Flip Book http://www.crs.org/our-work-overseas/research-publications/ngoana-oe-ke-oe-mang User of this manual is also recommended to use the Care for Child Development (UNICEF & WHO, 2012) Counseling Card (Note: The full package of this manual accompanies this curriculum)
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.
GUIDANCE AND DISCIPLINE: RESPONDING TO CHALLENGING BEHAVIORS OF TODDLERS

Toddlers exhibit challenging behavior as they develop and learn new skills. The most common challenging behaviors of toddlers include biting, tantrums, fighting, getting into everything, difficulty with sharing, and jealousy over a new sibling. Their unique characteristics often expose toddlers to random injury.

Caregivers and teachers usually find toddlers’ behavior challenging. Toddlers behave this way because they do not know other ways of expressing their feelings. Infants and toddlers are not yet able to use words to express their anger, love, or frustration. Testing limits is also a developmentally appropriate behavior for toddlers.

CHALLENGING BEHAVIORS OF TODDLERS AND WHAT CAREGIVERS CAN DO TO PROMOTE POSITIVE BEHAVIOR

**TODDLERS BITE**

It is normal for toddlers to bite a person or an object. They bite because they have not yet developed the ability to express their feelings in words. Children bite, for example, out of love, to get attention, when they feel frustrated, to experiment (to see what happens when they bite), to imitate others; they also bite when someone takes away their toy or they are afraid and do not feel safe.

What caregivers can do to promote positive behavior:

- Biting hurts people and should not be allowed. Observe children regularly to prevent biting. Help the child who is biting to use another means to express his/her feeling. For example, if the child bites out of love, show hugging as an alternative means of expressing emotion.
- Give approval to the child when he/she shows positive and desirable ways of expressing feelings.

**TODDLER SAY “MINE!”**

Sharing is difficult for toddlers. It is common for a toddler to say “Mine!” whenever friends or caregivers ask them about what they have or are playing with. This is a sign that toddlers are just beginning to develop independent thinking and expression of feeling. Forcing toddlers to share their possession to friends may not yield the desired result. On the contrary, it will make the toddler angry and frustrated and even hit or bite. Caregivers might try to stop such behavior by physically punishing the child but corporal punishment can damage the child’s physical and psychological development.

What caregivers can do to promote positive behavior:

- Recognize that developmentally, toddlers are not yet capable of sharing. As they grow and develop, they will develop increased mental and emotional abilities that enable them to share gradually. Before they share, toddlers need to first learn how to take turns. Therefore, teach and model turn-taking during play activities. Providing enough and duplicate toys can also minimize fighting over toys.

**TODDLERS GET INTO EVERYTHING**

Remember, toddlers have just discovered the joy of walking and they are curious to know more about their world! For this reason, they explore and want to touch, feel, and taste everything within and beyond their reach. While this is a learning experience, it is important to communicate the limits of safety with them.

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10 Dodge, Rudick, & Berke (2011); Gonzalez-Mena & Widmeyer Eyer (2012); Senefeld (2014); Swim & Watson (2011); Tadesse (2014).
experience for toddlers, for caregivers it can be overwhelming as they try to keep
toddlers safe from possible accidents and injury.

What caregivers can do to promote positive behavior:

- Assist toddlers’ effort to become independent. This can be done by engaging them in
  the daily routines of a household or daycare activities. Allow toddlers to make
  choices about what they want to do within a reasonable sense of limits. Choice
  gives toddlers a sense of self-accomplishment. Avoid offering a toddler too many
  choices because it can be confusing. Usually two realistic choices work best for the
  toddler’s thinking ability. For example, say, “You can eat the bread or the rice.” An
  example of an unrealistic choice is, “You may come with me now or you may stay
  alone on the playground.”

- Adjust or change the environment. If you think the toddler may be in harm’s way,
  modify the environment by removing dangerous objects or by putting the child into
  a new and safe place. If the child is crawling, avoid coarse areas and place him/her
  on a smooth surface or grass. Explain to the child what you are about to do and why.
  Know the child’s needs and behaviors well and arrange the environment as suitable for
  anticipated behavior. Doing this prevents problems and encourages positive behavior.

TODDLERS THROW TANTRUMS

Because toddlers want to do everything themselves, they get into trouble with their
caregivers. When caregivers say “no” to their actions, toddlers throw tantrums. This
is because toddlers find it difficult to understand their own limited abilities as well as
the limits set by caregivers. Due to developmental progress, they show contradictory
behavior—at one moment they want to be a baby and at another a grown up child.
They get angry and cry if the caregiver refuses to pick them up when they want to or
if they are told to stop playing and start eating their food.

What caregivers can do to promote positive behavior:

- Observe a child and know why he/she is likely to get upset and try to remove the
  things causing the behavior.

- Always set a transition time between activities and let the toddler know about it. You
  can do this by singing a transition song, ringing a bell, clapping hands, or repeatedly
  saying, “It’s time to...” When you do this, you are giving toddlers a sense of order
  and predictability; they gradually learn the routines and comply with rules without
  throwing tantrums.

- Remember children learn through modeling! If a toddler is in a tantrum, try to calm
  yourself and then calm the child with a controlled and soft voice; make sure the child
  is not hurting himself/herself and you are there to help him/her.

- Give approval to a desirable behavior. For example, you can tell a child who was
  about to throw a piece of block, “John, I saw that you are keeping the blocks and did
  not throw them, that is good.” By making the “I see...” statement, you can prevent the
  undesirable behavior in toddlers.

- Use simple rules that toddlers can understand easily. State your rules in positive
terms. For example, instead of saying, “Do not eat before you wash your hands,” say,
“Wash your hands before you eat.” Select and use a few rules that are important. For example, important rules for toddlers include safety from any physical harm or injury and caring for materials such as toys and equipment.

**TODDLERS FIGHT**

Toddlers fight because they do not yet have the ability to express their feelings in words. When they are angry they fight. They usually get angry if someone takes away their possessions, if they want a thing that belongs to another child and cannot get it, or if people stop them from what they are about to do. They scream, cry, push, or snatch from or throw things at a child.

What caregivers can do to promote positive behavior:

- Recognize the toddler’s feelings and offer help. For example say, “You are angry and that is okay. But I will not let you hit a child because that hurts him/her. Let me help you so that you stop hitting.”
- Encourage and teach toddlers to use appropriate words for their feelings.
  - To an angry toddler you can say, “Paul, if you are angry with Anna then say to her, ‘I am mad.’”
  - To a child who snatches away a ball from a child, you can say, “Jane, if you want Paul’s ball then say to Paul, ‘I want your ball, please.’”
- Shouting at toddlers and punishing them may not yield the desired behavior.

**TODDLERS SAY “NO!”**

To say “No!” is a common behavior of toddlers. They say “No!” because developmentally they are at the stage of wanting to try and do everything independently. When people offer assistance, toddlers decline by immediately saying “No!” even if their action can put them in danger. When caregivers remove toddlers from harm’s way, they begin to lose control and throw tantrums.

What caregivers can do to promote positive behavior:

- Recognize toddlers’ developmental needs for independence and encourage their effort to accomplish a task by themselves.
- Set up the environment in such a way that it prevents unwanted behavior. For example, set clear limits and provide enough play materials and space that allows toddlers to explore and try new things; respect the toddler’s refusal to play with you and refrain from asking repeatedly. If you do, you are testing the toddler’s limits.

Overall, the first step to teach toddlers prosocial behavior is to observe and identify the problematic behavior and prevent it. Remember that there is no one correct way of disciplining toddlers because each child develops as an individual in different social and cultural contexts.
Session 3: Development and Intervention of Preschool-aged 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.

SPECIAL CHARACTERISTICS OF PRESCHOOL-AGED CHILDREN
Like toddlers, preschool-aged children have special developmental characteristics. The preschool child finds his/her world expanding beyond home and family life. It is an age where the child starts school and meets more people and has new experiences. Preschool teachers, school children, and group play become of great interest to the preschool child.

Developmentally, preschool children exhibit increased energy and eagerness to know about their world and they become very active both physically and mentally. They need adequate nutritious food, sleep, and medical and emotional care.

Preschoolers show increased desire for independence and want to master skills such as climbing, jumping, drawing, writing, counting, reading, building, pouring milk into cups without spilling, constructing, etc.

It is common to hear preschoolers saying, “I can do it!” and expect adults’ approval for what they have created or accomplished. Their increased mental ability allows them to imagine and create things and ask “Why?” questions repeatedly. They enjoy activities such as fantasy play, storytelling, constructing things, and group play. Caregivers/teachers need to encourage preschoolers’ effort for self-dependence through positive guidance and assistance, as needed.

Caregivers/teachers’ support to preschoolers has positive implications for families too. Families want assurances that their children are learning in a safe and happy place. They perceive teachers as their child’s secondary caregiver.

To meet caregivers’ expectations as well as the development and learning needs of preschoolers, early childhood teachers must play important roles. Their attitudes and abilities are important and they must be genuine and sensitive and must create a developmentally and culturally appropriate supportive environment for young children, including children affected by HIV and AIDS and children with disabilities.
THE ROLE OF A PRESCHOOL TEACHER

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 *Preschool Teacher Practice 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 provides 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.

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**PRESCHOOL TEACHER PRACTICE: REFLECTION CHECKLIST**

<table>
<thead>
<tr>
<th>PRACTICE</th>
<th>A</th>
<th>S</th>
<th>R</th>
<th>COMMENT/REFLECTION</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Facilitating interaction</strong></td>
<td></td>
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<tr>
<td>I encourage children to have positive relationships with me, their peers, and other adults around them.</td>
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<tr>
<td><strong>Indicators:</strong></td>
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<tr>
<td>• 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.</td>
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<tr>
<td><strong>Nurturing</strong></td>
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<tr>
<td>I approach and interact with children with respectful touch, friendliness, and gentle and positive guidance.</td>
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<tr>
<td><strong>Indicators:</strong></td>
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<tr>
<td>• Holding a child close while talking, giving a hug, cuddling, or shaking hands</td>
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<tr>
<td>• Giving attention to children's nutrition, health, and safety needs, including their developmental and spiritual needs</td>
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<tr>
<td><strong>Helping children manage stress</strong></td>
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<tr>
<td>I help young children to cope with and manage stress.</td>
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<tr>
<td><strong>Indicators:</strong></td>
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<tr>
<td>• Encouraging children to share their feelings without fear; give timely support such as spiritual and physical reassurances</td>
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<tr>
<td>• Providing true explanations about what is happening as appropriate to age</td>
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<td></td>
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</tbody>
</table>

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11 Catron & Allen (2008); Senefeld (2014).
### PRACTICE

<table>
<thead>
<tr>
<th>INDICATORS</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Encouraging children to talk about what they feel and to ask questions</strong></td>
</tr>
<tr>
<td><strong>Collaborating with all people that have a significant role in the child’s life (families, teachers, health providers, communities)</strong></td>
</tr>
<tr>
<td><strong>Facilitating play (social dramatic play, role-play, fantasy-play) for children to help them deal with stress</strong></td>
</tr>
<tr>
<td><strong>Ensuring children's security</strong></td>
</tr>
<tr>
<td>I constantly supervise children’s safety and security at all times.</td>
</tr>
<tr>
<td><strong>Indicators:</strong></td>
</tr>
<tr>
<td>• Setting up routines and smooth transitions for children so that they can have a sense of order, predictability, and self-regulation</td>
</tr>
<tr>
<td>• Providing safe space that allows children to interact with peers or individually during indoor and outdoor play</td>
</tr>
<tr>
<td>• Checking for and taking away hazardous or broken objects, materials, and equipment from both indoor and outdoor playing areas</td>
</tr>
<tr>
<td><strong>Facilitating a learning environment</strong></td>
</tr>
<tr>
<td>I facilitate learning for children by being open-minded and flexible and setting up an environment that offers choices, resources, and varied activities.</td>
</tr>
<tr>
<td><strong>Indicators:</strong></td>
</tr>
<tr>
<td>• Encouraging children to exercise their creativity, imaginative play, conversational ability, and experimentation</td>
</tr>
<tr>
<td>• Encouraging children to actively explore and interact with adults, peers, and objects</td>
</tr>
<tr>
<td>• 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</td>
</tr>
<tr>
<td>• Allowing children to have choices and engage in learning activities that excite and interest them</td>
</tr>
<tr>
<td>• Encouraging children to learn in group or individual activities or play</td>
</tr>
<tr>
<td>• Encouraging children to play and learn with things that are relevant to their own life and familiar to their surroundings and culture</td>
</tr>
<tr>
<td>• 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</td>
</tr>
<tr>
<td><strong>Providing clear direction and guidance on how to master daily life and developmental skills</strong></td>
</tr>
<tr>
<td><strong>Being a problem solver</strong></td>
</tr>
<tr>
<td>I have the judgment and problem-solving skills for nurturing positive behavior among young children.</td>
</tr>
<tr>
<td><strong>Indicators:</strong></td>
</tr>
<tr>
<td>• 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</td>
</tr>
<tr>
<td>PRACTICE</td>
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<tr>
<td>-------------------------------------------------------------------------</td>
</tr>
<tr>
<td>• Assisting each child so that he/she can master new challenges during learning</td>
</tr>
<tr>
<td>• Giving timely advice to each child to prevent or correct problematic behavior or recognize and reward good behavior</td>
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<tr>
<td>• Working with families</td>
</tr>
<tr>
<td>• I have good and positive relationships with caregivers and families and I involve them in my plans and activities for their children.</td>
</tr>
<tr>
<td><strong>Advocating for children</strong></td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td><strong>Indicators:</strong></td>
</tr>
<tr>
<td>• 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)</td>
</tr>
<tr>
<td><strong>Learning</strong></td>
</tr>
<tr>
<td>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.</td>
</tr>
<tr>
<td><strong>Indicator:</strong></td>
</tr>
<tr>
<td>• Serving children with enthusiasm, creativity, and commitment</td>
</tr>
<tr>
<td>• Sharing my knowledge and experiences through workshop presentations, writing, and media</td>
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</table>
DEVELOPMENTAL MILESTONES AND FOSTERING PRESCHOOLERS’ DEVELOPMENT

Below are the developmental milestones of preschool-aged children. Knowledge of these developmental milestones helps teachers provide age-appropriate support for preschool children.

- Physical-motor
- Spiritual-moral
- Social-emotional
- Cognitive-language

The chart below shows preschoolers’ milestones by age and what caregivers and teachers can do to foster development:\(^\text{12}\):

<table>
<thead>
<tr>
<th>AGE</th>
<th>MILESTONES/SKILLS</th>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Preschoolers 3-5 years old</td>
<td></td>
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<tr>
<td>3 to 4 years old</td>
<td><strong>Physical-motor development</strong></td>
<td>Invite other children in the neighborhood to play.</td>
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<tr>
<td></td>
<td>- Large muscle development</td>
<td>Give your child a ball and let him/her play catch games with a friend.</td>
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<tr>
<td></td>
<td>- Rides a tricycle</td>
<td>Find objects in your home for children to jump over, climb over, crawl through and jump off.</td>
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<tr>
<td></td>
<td>- Catches a ball with arms straight</td>
<td>Let the children explore different ways of moving together, e.g., running, jumping, walking on tiptoe, or balancing.</td>
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<tr>
<td></td>
<td>- Throws ball to a large target</td>
<td>Let children play hopscotch, racing games, and other games involving use of large muscles.</td>
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<tr>
<td></td>
<td>- Jumps forward with two feet</td>
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<td></td>
<td>- Balances to walk across a plank</td>
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<td></td>
<td>- Walks on tiptoe</td>
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<tr>
<td></td>
<td>- Stands on one foot</td>
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<tr>
<td></td>
<td><strong>Small muscle development</strong></td>
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<tr>
<td></td>
<td>- Builds a bridge of three blocks</td>
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<td></td>
<td>- Makes snakes and balls from clay</td>
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<td></td>
<td>- Pours from jug into mug</td>
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<tr>
<td></td>
<td>- Begins to put together simple puzzles</td>
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<tr>
<td></td>
<td>- Dresses fairly well</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Can feed self (with some spilling)</td>
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<tr>
<td></td>
<td>- Puts shoes on (but cannot tie laces)</td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Brushes teeth, washes hands</td>
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<tr>
<td></td>
<td><strong>Social-emotional development</strong></td>
<td></td>
</tr>
<tr>
<td></td>
<td>- Starts taking turns (but still can’t share)</td>
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<tr>
<td></td>
<td>- Follows simple directions</td>
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<tr>
<td></td>
<td>- Is eager to please and wants adult approval</td>
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<tr>
<td></td>
<td>- Wants to help with simple chores</td>
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<tr>
<td></td>
<td>- Begins to play with other children</td>
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<tr>
<td></td>
<td>- Likes to do the same things as other children</td>
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<tr>
<td></td>
<td>- Enjoys playing house and copying others’ behavior</td>
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<tr>
<td></td>
<td>- Is interested in similarities and differences between self and others, e.g., gender, hair, skin tone</td>
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<td></td>
<td>- Has fears, e.g., the dark, strangers</td>
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<td></td>
<td>- May hit out at others when frustrated</td>
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</tbody>
</table>

\(^{12}\) CR5, Lesotho (2012); Johns Hopkins University and Maryland State Department of Education (2010); Senefeld (2014); Touro Institute and University of Minnesota (n.d.).
<table>
<thead>
<tr>
<th>AGE</th>
<th>MILESTONES/SKILLS</th>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
</table>
| **Cognitive development** | • Asks lots of questions – ‘Who?’ ‘What?’ ‘Where?’ and ‘Why?’  
• Stacks five to seven blocks, boxes, or small containers  
• Draws a circle and a square  
• Puts together a six-piece puzzle  
• Matches objects to pictures  
• Counts two or three objects  
• Solves simple problems  
• Can say their age  
• Enjoys make-believe play | Provide a variety of household objects that the child can explore and experiment with, match, sort, and count, e.g., sticks, leaves, seeds, stones, pieces of fabric, bottle tops, toilet rolls, pegs.  
Follow the child’s natural curiosity by building on his/her interests and answering his/her questions.  
Encourage the child to count during daily routines, e.g., at meal times.  
Give the child the word for things if he/she is not sure.  
Provide old (adult) clothes for the child to dress up in and play make-believe games.  
Ask questions like “How can we...?” |
| **Language development** | • Uses three to five words in a sentence  
• Uses lots of verbs  
• Uses some prepositions, e.g., in, on, under  
• Most of what is said is understandable  
• Likes to repeat words and sounds  
• Asks questions (Who? Where? Why? What?) and enjoys singing, stories, and rhymes | Encourage the child to talk with you and other people around him/her.  
Listen to what the child says and answer his/her questions in ways they can understand.  
Sing favorite songs together.  
Read a book with the child.  
Tell a story to the child and ask what will happen next.  
Let the child clap out the syllables of his/her name or other words. |
| **Spiritual-moral development** | • Has difficulty understanding the concept of God  
• Develops an inner sense of right and wrong  
• Wants praise and avoids punishment and reprimand  
• Controlled by adults’ approvals; he/she fears punishment and loss of approval  
• Understands that actions have penalties or rewards  
• Begins to feel a sense of guilt, e.g., blames self or others for wrongdoing  
• Be able to tell what good behavior looks like and perform good behavior to get approval and prevent punishment | Encourage children and model the use of words such as please, excuse me, thank you, sorry, and may I.  
Read books or tell stories to teach right and wrong, as appropriate to the child’s culture.  
Create a task that invites children to work and make things together and help each other, e.g., make a pot out of clay.  
Tell stories to children about people who were kind, helpful, and thankful to God.  
Teach children to learn the name of God or recite poems about God as appropriate to the child’s family faith.  
Make available picture books, magazines, holy books (e.g., the Bible) and discuss the pictures; let children sort out model postures and gestures used in praying, as appropriate to the family’s faith.  
Teach prayer by modeling, as appropriate to the child’s faith; encourage children to lead a prayer through modeling.  
Let children sing religious songs they learn and know from their family.  
Take children for nature walks and talk about God’s creation; about people, animals, birds, plants, insects, seas, oceans; show local churches, mosques, temples.  
Praise children with spiritual blessings for showing good behavior, following rules, or accomplishing a task. |
### Approaches to learning

- Wants to know how a story ends as well as guess what may happen next
- Interested in new materials
- Asks questions to understand better
- Wants to try new things without asking for help
- Follows one or two step directions
- Completes activities from beginning to end
- Uses trial and error to learn
- Breaks tasks down into steps
- Enjoys music, art, and stories to express feelings

### Fostering development: ideas for caregivers and teachers

- Give clear and simple directions.
- Allow the child time to complete what he/she is doing.
- Offer help if the child experiences difficulties.
- Ask the child to think of another way to do something.
- Ask the child to describe what he/she has done or how they made it.
- Comfort and encourage the child during stressful times.
- Think of ways to help the child control his/her behavior when they get angry or frustrated.

### Physical development

#### Large muscle development

- Runs fast
- Climbs with ease
- Walks up and down steps one at a time
- Stands on tip toes
- Throws, catches, and bounces a ball
- Tosses beanbags into a container
- Runs slightly on tiptoe
- Hops on one foot (rather wobbly)
- Jumps with two feet over objects
- Gallops
- Skips with rope
- Runs and kicks a ball

### Fostering development: ideas for caregivers and teachers

- Encourage your child to play games with his/her friends in a safe place outside; give them a rope to jump over or play skipping games.
- Teach children how to play hopscotch and traditional games.
- Let children play hide-and-seek.
- Have children stand a distance away from a bucket or basket and try to throw a ball or other plaything into it.

### Small muscle development

- Stacks ten or more blocks, boxes, or small containers, and can build a complex structure
- Threads beads on a string
- Makes shapes out of clay
- Uses eating utensils
- Cuts out simple shapes
- Draws a detailed picture

### Fostering development: ideas for caregivers and teachers

- Encourage the child to practice buttoning, zipping, or washing dishes.
- Play hand-clapping games.
- Let the child pour, fill, and empty containers.
- Give the child clay to play with.
- The child can draw on papers or in the sand.

### Social-emotional development

- Plays with other children and chooses who to play with
- Begins to share
- Understands and obeys simple rules
- Enjoys involved make-believe play
- Has trouble understanding what is real and what is pretend
- Can be jealous
- Enjoys showing off: “Look what I did!”
- Tells tales about other children
- Uses words to express emotions

### Fostering development: ideas for caregivers and teachers

- Give the child a chore to do with one or more other children.
- Play games where children must cooperate and follow rules, e.g., singing songs or dancing to a rhythm.
- Praise and encourage what the child does or tries to do.
<table>
<thead>
<tr>
<th>AGE</th>
<th>MILESTONES/SKILLS</th>
<th>FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS</th>
</tr>
</thead>
</table>
| **Cognitive development** | • Can work on one activity for ten to fifteen minutes  
• Is curious about everything and asks lots of questions  
• Places objects in line from largest to smallest  
• Understands big, bigger, biggest; more, on, over, under  
• Sorts by shape and color  
• Can count seven objects | Sort and count things during routine activities, e.g., plates, pegs, cups of rice, beans, etc.  
Talk about where things are in space, e.g., behind, next to, on top of, under.  
Take the child on a walking trip around the neighborhood to learn more about their world, e.g., plants and insects, shops and buildings, people at work in church.  
Ask questions to help the child discover, e.g., “Why do you think that happened?” “How can we do that?” “What do you think will happen?” |
| **Language development** | • Understands most of what is said  
• Communicates clearly  
• Talks in longer, more detailed sentences  
• Asks lots of questions  
• Follows simple commands | Encourage the child to talk with you and other people around them.  
Listen to what the child says and answer their questions in ways they can understand.  
Sing favorite songs together.  
Tell a story and ask what will happen next.  
Use an old sock to make a puppet. Make a face from off-cuts of fabric, paper, or wool. Show the child how to move the mouth up and down. Encourage him/her to tell you a story with the puppet ‘speaking.’ |
| **Spiritual-moral development** | • Apologizes for wrongdoing to others  
• Hugs or comforts friends who feel sad or are crying  
• Begins to tell the difference between bad and good  
• Follows rules to avoid punishment  
• May not fully understand the meaning of prayer but rituals give the child ideas  
• Prays with teacher modeling, e.g., can make the Sign of the Cross  
• Begins to have the concept that God or a higher power can reward or punish behaviors  
• Likes to participate in rituals, bedtime prayers, religious holidays, and mealtime blessings and imitates the behaviors of adults in these practices  
• Learns simple, short prayers through repetition and recites them with caregiver modeling  
• May increasingly express their understanding of God to their family; ask questions about God and death  
• Asks God for something special in their own words | Model respect for others by respecting children, saying to the child often please, thank you, sorry, good morning, good afternoon, welcome, how are you? etc.  
Help the child to tell you ways in which he/she can help their family, siblings, or friends; help children to send comforting cards to hospitals, nursing homes, hospice, and to sick people in their school and parish communities.  
Model to child ways that sharing brings happiness to self and others; use everyday interaction.  
Encourage the child to return objects and toys that do not belong to him/her and give it back to the owner, which teaches honesty.  
Model appreciation of others by giving good remarks about a child’s good behavior and abilities to do things, e.g., “I like the way Michael helped Betty put on her sweater.”  
Avoid belittling, shaming, or scolding a child for not accomplishing a given task or misbehaving, give guidance and simple rules that the child can understand and follow; make the rules together with the child.  
Help children draw and label family members to show each family is special and unique in the eyes of God.  
Take the child for a neighborhood walk and show places of worship, and how people worship and keep holy books in prayer places (church, mosque, or temple).  
Help the child celebrate religious events observed by his/her family and let other children participate in the activity to be a part of a community and appreciate their own faith as well as others’--prepare decorations, make cards, share sweets with friends, etc.  
Prepare a quiet small place, a prayer corner, or a meditation place for the child to pray or to comfort himself/herself at a time of distress; sing religious songs or turn pages and look at pictures of people in a holy book (e.g., the Bible).  
Read aloud stories from religious books about people who helped others and talk about being helpful and sharing, e.g., the story of the Good Samaritan. |
AGE MILESTONES/SKILLS FOSTERING DEVELOPMENT: IDEAS FOR CAREGIVERS AND TEACHERS

Approaches to learning
- Asks questions to find out more
- Predicts story endings
- Shares ideas and interests with others
- Follows two- or three-step directions
- Concentrates on one activity and completes it
- Completes activities from beginning to end on his/her own
- Explores and tries out new ways of doing things to succeed with a task
- Combines different materials to create a piece of work
- Tries new roles in make-believe play
- Asks for help from a friend or an adult

Give clear and simple directions.
Ask the child to describe the steps he/she went through to complete a task.
Encourage a child who wants to do things on their own.
Give the child tasks he/she can complete on their own.
Encourage the child to solve his/her own problems.
Tell stories or read aloud and ask children what the story is about; What will happen next? Encourage them to enact the roles of the characters in the story.

THE STORY OF FOUR GIRLS, CHOOLWE, MAMPI, CHITALU, MISOCI, AND THEIR BANANA
Contributed by Religious Sisters of the Holy Spirit, Zambia

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

IDEAS FOR REACHING OUT TO FAMILIES
Parents are the first and most important teachers of their children and they need to be involved in all decisions regarding their child.

- Let parents know that they are the main actors in their children’s learning.
- Take time to get to know parents and build up trusting relationships.
- During your meetings, help parents feel valued by:
  - Greeting them by name and with a smile when they bring and fetch their children.
• Showing respect for the ways that they choose to raise their children and discussing how these will be accommodated in the child center.
• Being careful not to impose your own beliefs and values.
• Inviting parents and caregivers to share their own knowledge and experiences about children.

GUIDANCE AND DISCIPLINE: SUPPORTING POSITIVE BEHAVIOR OF PRESCHOOLERS

Positive discipline strategies focus on the positive aspects of a child's behavior and help young children learn to control their own behavior.

WHY YOUNG CHILDREN MISBEHAVE AND PREVENTING BEHAVIOR PROBLEMS

Below are some ideas why preschoolers misbehave and what caregivers/teachers can do to prevent behavior problems.13

All young children misbehave at one time or another for various reasons. Teachers often do not understand what causes children to act this way and most children are too young to explain their actions. It can be frustrating for teachers when children do not listen or behave as expected.

Understanding some of the reasons why children misbehave can help teachers be more effective when dealing with this type of behavior. Teachers will also be able

13 CRS, Lesotho (2012).
to support parents and caregivers to find positive ways to manage their children’s behavior at home.

Children show different types of behavior as they grow and develop. It is helpful for teachers to know which kinds of behavior are normal for the ages of the children in their care, so that they know what is reasonable to expect from them.

For example, many preschoolers get angry and hit, push, or shout nasty words when other children try to take their toys away. This is an example of the frustration children feel when they can’t express in words what they want to say. Teachers can help children learn the words they need to express how they are feeling and what they want.

- Children need to feel a sense of control over their lives. When all their decisions are made for them by others, they often feel that they have no choice. Children often respond by misbehaving or breaking rules to show that they can have their own way and be in control.
- Children need routine in their lives to feel secure. When there are changes in the daily program at the preschool, children may feel uncertain about what is going to happen and react in different ways. For example, if a field trip has been planned, children may find it hard to control their excitement.
- Children feel secure when they know what their limits are. Rules tell children how to behave. However, having too many rules makes it difficult for children to follow them. Rule setting for children should focus on explaining how the children should behave rather than how they should not behave.
- Children misbehave when they are made to feel bad about themselves.
  - When children are made to feel that they can do nothing right, they may become discouraged and believe that there is no reason to behave well.
  - When children feel hurt, they will often want to hurt others.
- Children sometimes misbehave just to test their limits, to learn about whether rules are consistently applied, and to find out what will happen if they break a rule.
- Many children live in stressful environments. For example, families living in poverty may not have enough money for food, clothing, or proper housing and sanitation. These problems cause stress amongst family members, which children can sense and be affected by. Children may respond by expressing their feelings of fear, hurt, or anger in unacceptable ways.
- Changes at home can be upsetting for children. There may be a new baby in the family, sickness, or even death. Children may get less attention than they usually do and as a result feel unloved. They may respond to this by seeking attention through misbehavior at preschool as well as at home.
- Children who are tired, hungry, or ill may not have the language to explain that they feel bad and often become short-tempered and misbehave.
- The way the preschool environment is set up and the kinds of activities that are provided can contribute to children's misbehavior.
- If there are large empty spaces in the classroom, children may be tempted to misbehave.
- If the activities are not suitable for the children's ages or there is not enough for them to do, children may start to misbehave.
- If children have to sit for long periods of time without being actively involved in their learning, they will get bored and start to misbehave.
SUPPORTING CHILDREN WITH DISABILITIES

Children with intellectual and physical disabilities often get frustrated or may have trouble concentrating on an activity and disrupt other children’s play. A child with a visual disability may feel frustrated if denied the opportunity to touch and feel things with his/her hands or sometimes mouth.

Note: Teachers can read the Developmental milestones chart on pages 49-53 of this guide to promote their understanding of the typical developmental stages that children go through.

PREVENTING BEHAVIOR PROBLEMS

The best way for teachers to manage problem behaviors is to stop them before they start. When teachers understand what causes misbehavior, they can look at the early childhood environment, the daily activities and routines in the preschool, as well as their own interactions with children and plan ways to prevent problems.

ORGANIZE THE ENVIRONMENT AND ACTIVITIES

The way that the classroom is arranged and the materials that are provided may be one of the reasons that children misbehave. If there are enough interesting things for children to explore, there are fewer chances that children will get bored and start to misbehave.

- There needs to be enough space for children to play and move around without bumping into one another or knocking things over.
- Check the classroom layout to make sure that there are no large open spaces or long pathways where children will be tempted to run up and down.
- Provide hands-on activities that do not involve children having to sit still for long periods of time.
- Provide enough age-appropriate activities and toys for the number of children so that they will not have to share. If possible, have duplicates of favorite toys so that children do not have to wait too long. This will also help to prevent children fighting over them.
- Arrange the materials on low shelves so that children can choose what they want on their own.
- Divide the learning corners to help children concentrate better without being distracted.
- Plan activities that will encourage children to express their feelings, e.g., fantasy play, painting and drawing.
- Provide lots of physical activities throughout the day so that children can run around and move in different ways to release their energy.
- Keep group times short and find ways for children to actively participate in some way. Avoid telling children to sit still or to stop fidgeting. Plan to sit near children who may cause problems or pair them with more responsible children.
- Be aware of when children become bored, and add new and stimulating materials for them to explore.

Note: For tips on how to organize the classroom, refer to Resource Guide, Module 4.
REVIEW THE DAILY PROGRAM

- Children often misbehave when they do not know what they are supposed to do. A daily program provides the same kinds of activities in the same order every day. This helps children to know what they are expected to do.

- Children will be less irritable if their basic needs for food and rest are provided in the program.

- Provide enough time for children to be involved in free-play activities. Give them plenty of warning to start packing away the things they are playing with and help to clean up. If children have not finished with what they are doing, find a way for them to return to the activity later that day or the next day to complete it.

- Be prepared for challenging times when children move from one activity to another. Make sure that children do not have to wait in line or sit quietly for long periods of time. This is most often when they start to push one another around or fight.

**Note:** For tips on how to plan a daily program, refer to *Resource Guide, Module 4*.

ESTABLISH CLEAR RULES

Children need limits to help them understand what behaviors are expected of them. This allows them to be in control within the limits, and at the same time feel safe and secure. Rules help children to know what the limits are as well as what will happen if they break the rules. Young children are still learning how to behave, and they often break the rules unintentionally. Teachers need to be patient and accept that children will make mistakes as they gradually learn how to behave in acceptable ways.

- Have rules that are based on keeping children and others safe from harm and that protect the environment from damage.

- Choose a few essential rules for the classroom. When there are too many rules children will find it hard to remember and follow all of them. Thinking about what will happen if children break a rule will help teachers decide whether the rule is necessary. For example, will someone be hurt or put in danger if the rule is broken? Will something get damaged or broken if the rule is broken? If not, is there really a need for the rule?

- Help children understand the reason behind each rule. When children understand what will happen if the rule is not kept, it will be easier for them to follow it. For example, “Sit down when you cut with scissors. If you run or walk with scissors, you may fall and cut yourself.”

- Have rules that teach children what to do rather than what not to do. For example, instead of a rule that says, “Do not run around,” make the rule, “Walk from one place to another.” Instead of a rule that says, “Do not leave toys lying around,” make the rule, “Put the toys away when you have finished playing with them.”

- Children of four years and older can help the teacher to come up with ideas for rules. This will help children to feel that they have made their own rules, making it easier for them to understand the reason for a rule and remember to keep it. For example, if there is a problem with the children leaving toys lying around, the teacher can ask the children what rule they would suggest that might solve the problem.

- Be consistent in upholding the rules and let children know what will happen if they break a rule. For example, “The rule is to put the toys away when you have finished playing with them. You will not be able to play in another learning corner until you have put these toys away.”

- Teachers need to remind children often of the rules as they play. They can also create and display illustrated posters at children’s eye level as a reminder.

- Make sure that parents understand the rules and the reasons for them and agree to them, so that they can be consistent with putting them into practice at home. All adults working in the preschool should also all agree on the same rules.
ACKNOWLEDGE CHILDREN BEING GOOD

Teachers often spend a lot of time telling children when they are not behaving well and forget to let them know when they have done something well. Teachers can acknowledge good behavior with a smile or a hug and a few words of encouragement. Praise the child for the positive ways in which he/she behaves. Describe the behavior, not the child. Instead of saying what a good child he/she is, let them know that you noticed and liked what they did. For example, “I like the way you shared your crayons with Mary.”

Teachers also need to focus on the behavior and not the child when he/she misbehaves. When adults routinely label children as naughty, lazy, or dishonest the children start to believe what adults tell them and behave accordingly.

GIVE CHILDREN CHOICES

Children often misbehave to prove that they are in control. Children can be helped to feel that they have control over their lives when they are given choices as it sends the message that what they think and prefer is important. Children start to learn the difference between a good choice and a bad choice and take responsibility for the choices that they make.

Giving children choices does not mean allowing children to do whatever they want. Teachers should give children limited choices with a few options that allow them to make decisions for themselves. For example:

- “Would you rather draw or paint this morning?”
- “Would you like an apple or a peach?”
- “Would you like to learn a new song first, or would you like to sing a favorite song?”

KNOW WHAT BEHAVIOR TO EXPECT

If teachers understand the stages of development that children go through, they will know what kinds of behavior to expect. This will help them to plan ahead. For guidance, review the stages of development beginning on page 35 of this guide.

GIVE YOUNG CHILDREN THE WORDS THEY NEED

Children need to learn the words to express how they are feeling. Teachers can help by listening to children and helping them find the words for feelings. For example, “You looked really angry when Rafael wanted to join your game. Is that how you felt?”

MODEL GOOD BEHAVIOR

Children learn by imitation. If they see their teacher or parent shouting or getting angry, they will get the message that this is acceptable behavior. Teachers should behave in the same way as they expect children to behave. When children see how adults are getting along with others and solving their problems peacefully, they will learn to behave in more socially acceptable ways.
SUPPORT CHILDREN WITH BEHAVIORAL PROBLEMS

- Clearly explain the rules and routines and repeat them often.
- Try to be aware in advance of when a child is about to misbehave or lose control and step in quickly. Put a hand on the child's shoulder or give him/her a hug to help them calm down.
- Provide activities that help children release their frustrations such as beating a drum or hitting a punching bag.
- Prepare the child for any change in advance by telling them what will be different and how this will affect them.

DISCIPLINE VERSUS PUNISHMENT

Discipline is a strategy that guides and shapes children's behavior and helps them understand limits in a positive way. It aims to teach children to understand, be responsible for, and control their own behavior.

Punishment is a strategy to make children "pay" for what they have done wrong and forces children to behave in a certain way. It teaches them that adults are responsible for the way children behave and that adults have the power to control their behavior.

- The most effective ways to manage children's behavior is not to involve punishment. Teachers need to use positive discipline strategies that help children understand that some behaviors are wrong.

WHY PHYSICAL PUNISHMENT DOES NOT WORK

Physical and other harsh punishment is often used as a way to hurt children and correct their behavior. These punishments include hitting, locking the child in a room, forcing the child to stay outside the house, threatening or shaming the child, or keeping food and water from him/her. Many parents and teachers feel that this is the way misbehavior was managed when they were children and it worked.

Research shows that not only are punishments harmful and affect the way children grow and develop, punishment does not work.

- Punishments are designed to make children behave in a certain way rather than to make them want to control their own behavior. Children may stop the behavior for a short time, but will do so out of fear of punishment rather than having an understanding of how the behavior affects other people or what to do instead.
- Punishments make children feel bad about themselves and lower their self-esteem.
- Children learn that they will be punished if the bad behavior is found out. They often find ways to repeat the behavior without being caught.
- Children learn by imitating the behaviors of others. When children are punished by being spanked or hit, they get the message that it is then acceptable for them to hit other people. Research shows that children who are spanked or hit are more likely to become aggressive themselves.
- Children lose trust in parents and caregivers who hurt them.

POSITIVE DISCIPLINE STRATEGIES

In spite of teachers doing all that they can to prevent misbehavior, there will still be times when children will misbehave. Teachers need to use positive discipline strategies to guide children's behavior and not punish them. It is not acceptable under any circumstances, even with the permission of parents, for teachers to physically hurt a child. Teachers need to have a variety of strategies at hand so that when one
method does not work, they can try another way to discipline children. Here are some positive discipline strategies that teachers can use to handle unacceptable behavior.

**TIME OUT**
Time out is used to remove a child from the place where the misbehavior is happening to sit in another part of the room and calm down for a few minutes (and not more than five minutes). The purpose of the time out is to help the child gain control of his/her emotions and give them time to think about their behavior. The caregiver sits together with the child during the timeout moment and gets to know the child’s feelings. **Time out should never be used as a punishment; children should not be put in another room or left alone.**

Time out is not suitable for children younger than three years of age, as they will not understand the concept of waiting. A guide for time out is one minute per year of age:

- Three minutes for three-year-olds
- Four minutes for four-year-olds
- Five minutes for five-year-olds

**HOW TO USE TIME OUT**
1. Identify a time out place that is quiet and safe in the classroom that can be seen at all times and where there are no activities or toys.
2. Give a child fair warning. Explain that the next time he/she behaves in a certain way, they will need to stop playing and sit in the special time out place.
3. If the behavior reoccurs, calmly tell the child exactly what will happen so that they understand how long they will need to stay in the time out chair before they can return to the activity. Tell them that they need to sit quietly during this time and that they will be told when the time is up. Stay near them during the time out.
4. After the time out, sit with the child and explain to them why they were in time out and talk to them about how they are feeling. Help them to understand what they had done wrong and how they can return to the activity without breaking any rules.
5. Praise the child when he/she behaves appropriately.

Time out does not work when it is used too much or when it is used as a form of punishment. When the child is sent to another room or is made to spend an unreasonably long period in the time out area, this is a punishment. The child may correct his/her behavior but does so out of fear of being treated in the same way again if he/she misbehaves. He/she is not helped to understand why the behavior was wrong.

**NATURAL AND LOGICAL CONSEQUENCES**
Consequences are the result of something a person has done. Teachers and parents can use consequences to help children learn what happens as a result of the choices they make about their behavior. It is an effective way to help children learn to make decisions and then take responsibility for their actions.
NATURAL CONSEQUENCES

Natural consequences are what happen naturally as a result of something the child did. They happen without the teacher or parent getting involved. For example:

- A child does not wear his/her coat to school. They get cold.
- A child leaves a ball outside instead of putting it away. It gets stolen.

Natural consequences as a discipline strategy are effective only if the teacher does not interfere. If the teacher brings the ball inside, the child will not learn that bad things happen as a direct result of his/her behavior.

Natural consequences are the best way for children to learn. If something unpleasant happens as a result of their behavior, they will not want to repeat it. Sometimes natural consequences are not suitable or safe. For example:

- A child who plays with matches can get burned.
- A child who walks around with scissors may fall and cut themselves badly.

When natural consequences are not appropriate, teachers can use logical consequences to help children understand and learn to control their behavior.

LOGICAL CONSEQUENCES

Logical consequences also happen as a result of the child’s behavior, but they are arranged by the adult to help the child understand what will happen as a result of his/her behavior, such as when rules are broken. For example, if the child handles a book roughly and the pages tear, he/she must help to repair the pages while other children are playing.

Logical consequences work best when they are:

1. **Made in advance.** Tell the child what the consequences will be if the rule is broken.
2. **Related directly to the behavior.** The consequence needs to make sense to the child. If the child runs with scissors, it does not make sense for him/her to have to sweep the classroom.
3. **Reasonable.** The consequence should help the child learn from the experience, not punish the child. In the above example, removing the scissors would help the child to make a better decision in the future.
4. **Consistent.** Children will not respect the rule if it is not followed through every time the behavior occurs, and will probably repeat the behavior because they think they can get away with it. For example, “Daniel, the rule is to sit down when you cut with scissors. If you carry on walking around with the scissors, I will pack them away for the rest of the free-play time.”

Teachers who choose this strategy will need to be well-prepared and think of what consequences will encourage children to think for themselves.

REDIRECT THE BEHAVIOR

Redirection involves removing a child from a problem situation and guiding him to an alternative activity. When the teacher notices that something a child is doing or about to do is unacceptable, she stops the behavior immediately and directs the child’s attention to another activity. The teacher lets the child know that she understands the reason for the behavior and explains why it is not acceptable. She gives suggestions for another activity that is in keeping with their needs. For example, “I see that you want to draw a picture, but you may not draw on the wall. It is hard to scrub the marks off the wall. Let’s go to the art corner where there is paper for you to draw your picture.”
This strategy works well for younger children who are too young to understand what will happen as a result of their behavior, so the teacher takes responsibility for solving the problem. Other strategies should be explored for older children who need to take more responsibility for their actions and for solving the problem.

**ACTIVE LISTENING**

Active listening involves encouraging children to talk about what they are feeling:

- To try to understand their behavior
- To help them work through their feelings and find solutions to their problems

When children have someone to listen to them and try to understand how they are feeling, they will feel accepted and loved and encouraged to work through their problems and behave differently in the future. For example:

Teacher:  
“Why are you sitting here on your own?”

Child:  
“Paula bumped the table.”

Teacher:  
“You sound upset. What happened?”

Child:  
“The water splashed all over my painting.”

Teacher:  
“What did you do?”

Child:  
“I threw her painting on the floor.”

Teacher:  
“I wonder why she did that.”

Child:  
“I think she was trying to reach the paint.”

Teacher:  
“Oh, do you think it was an accident?”

Child:  
“Yes.”

Teacher:  
“Do you think it was fair to throw her picture on the floor?”

Child:  
“No. I was just mad.”

Teacher:  
“What can you do to make it better?”

Child:  
“Maybe I can give her a hug.”

Teacher:  
“Yes, that’s a good idea, but she may still be upset. If she does not want your help, maybe you need to give her some time on her own.”

**SAYING SORRY**

Children should not be forced to say they are sorry when they may not be ready to apologize. If children are not really sorry, the words are insincere (and often angry). The goal is for children to understand why the behavior was hurtful and regret it, and to think about how to make the situation right.

**REWARDING BEHAVIOR**

Giving rewards is one way that teachers respond to positive behavior. For example, many teachers give children stars or sweets. Rewarding children for good behavior does help them learn to control their own behavior, but children tend to be motivated by the reward for doing something good rather than by a desire to do something well.
Teachers can reward children with a hug or a smile and words of encouragement. This will make them feel appreciated for what they have done and encourage children to repeat the behavior. Teachers may use these strategies or any combination of them in response to children's challenging behavior. Whatever method is used, teachers should remember a few general guidelines.

- Stay calm and keep personal feelings under control. Here are a few suggestions:
  - Take deep breaths, count to ten. Think about how best to respond to the behavior while counting.
  - Plan ahead of time, when calm, how to respond to the problem behavior when it happens.
  - When very frustrated, leave the situation for a few minutes to calm down.
- Treat each child as an individual and with respect.
- Discipline the child immediately after the behavior.
- Be on the alert for problems and try to prevent them.

**CULTURAL APPROPRIATENESS**

Children will be taught the rules of good behavior by their families and the community. These may be different from culture to culture and from family to family. Teachers need to be respectful and sensitive to these practices. They should find out from families how each child is expected to behave so that behavioral issues can be managed in the same way at the preschool.

Culturally, many parents in Africa still believe in spanking a child, but this practice is being discouraged in preschools; the trend is that government policies and guidelines discourage spanking in all schools and take action against teachers and schools that are known to punish children harshly. Teachers are encouraged to use positive discipline strategies as described in this section. There are also cultural practices that avoid physical punishment when disciplining young children such as staring at the child who misbehaves without speaking until the child realizes he/she is doing wrong, or explaining the reasons why something is wrong.

**DEALING WITH EXTREME BEHAVIORAL PROBLEMS**

When the teacher has tried a number of discipline strategies and these don’t work, she should try to understand what is causing the misbehavior. She should talk to the parents or caregivers to find out if the behavior happens at home and get their ideas. She should also observe the child over time to see if there are any patterns. For example:

- What happens just before the behavior occurs?
- Where and when does the behavior take place?
- Who is involved?
- What is the teacher’s response?
- Work together with parents and caregivers.

Parents and caregivers have definite beliefs about how their children should be raised, and they have the right to decide what is best for them. It is important for teachers to work together with parents and caregivers to find ways to promote children’s good behavior as well as to manage their misbehavior in ways that are positive as well as consistent between home and the preschool.
PARENTING STYLES
It may be helpful for teachers to understand the different ways in which parents raise their children. These can be grouped into different types, based on how much or how little control parents use to teach their children the rules of life and guide their behavior. In reality, families may not fit neatly into just one of these groups, and they may use one or another style at different times.

AUTHORITARIAN PARENTING
Authoritarian parents or caregivers value obedience and are strict and controlling. Children are told how they should behave. Rules are made without discussion, and children are expected to obey them. When children disobey the rules, they are punished. Children are not allowed to question authority and to do so is considered disrespectful and impolite. Independence is discouraged and children are seldom given choices.

PERMISSIVE PARENTING
Permissive parents make no demands on their children. Children are allowed to do whatever they choose. Parents leave it up to the children to set their own rules and make their own decisions.

MODERATE PARENTING
Moderate parents set clear and reasonable rules and explain to children why they are important. When children break the rules, their parents and caregivers help them to take responsibility and learn from their mistakes. Parents and caregivers recognize children’s rights to be heard, encourage independence, and give children choices. Parents and caregivers praise children’s good behavior rather than focus on negative behavior.

One of the educational goals for young children is to help them learn to be independent and develop self-control. Whatever the preferred parenting style, parents and teachers can help children learn how to manage their own behavior by finding a balance between setting limits and encouraging children to take responsibility for their own actions.

DIALOGUE WITH PARENTS AND CAREGIVERS
There will be times when the teacher will need to discuss the child’s behavior with a parent or caregiver. She needs to arrange a time and a place to do this in private. Here are a few guidelines that the teacher can use for such a meeting:

• Bring specific observations of the challenging behavior.
• Be sure to mention things she appreciates about the child.
• Describe the behavior and why she is concerned about it.
• Ask parents about their experience with, and understanding of, the behavior.
• Listen carefully and with empathy in order to fully understand families’ expectations and viewpoints.
• Engage parents and caregivers in brainstorming possible causes and solutions.
• Find a mutually acceptable approach that draws upon the strengths of all perspectives.
• Develop a plan of action that shows how practitioners and the family will address the behavior.
• Plan for another meeting to discuss progress.

**ISSUES OF HANDLING PHYSICAL PUNISHMENT**

Teachers need to show respect and honor parents’ decisions about their children’s behavior. At the same time, it is important that parents and caregivers understand that they have the responsibility to protect their children from harm.

Parents and caregivers need to know that harsh punishments are harmful to children and affect the way they develop and learn. These include hitting, locking the child in a room, forcing the child to stay outside the house, threatening or shaming the child, or keeping food and water from him/her.

The topic of physical punishment needs to be handled sensitively so that parents and caregivers do not become distrustful. Dialogue and advice with parents and caregivers should not focus on judging and shaming parents and caregivers, but rather on understanding the negative impact of physical punishment on young children’s development and finding ways of disciplining young children without hurting or shaming them.

**CHILDREN WITH SPECIAL NEEDS: GENERAL GUIDELINE**

There are children who have special learning needs because of chronic illnesses such as HIV and AIDS, asthma, diabetes, and epilepsy. Children with disabilities and chronic diseases often feel left out or excluded and their abilities are often ignored or overlooked. But caregivers and early childhood teachers must provide the support needed for children with chronic illnesses or disabilities. This means that children should not be excluded from playing with friends in the neighborhood, school, or an early childhood program (a daycare or a preschool) because of their health conditions and/or disabilities.
SESSION 1: INTRODUCTION TO EARLY CHILDHOOD DEVELOPMENT


SESSION 2: THE DEVELOPMENT OF INFANTS AND TODDLERS


Johns Hopkins University and Maryland State Department of Education (2010). Healthy beginnings: Supporting development and teaching from birth through three years of age—Every Child—Every Baby. www.marylandhealthybeginnings.org


SESSION 3: THE DEVELOPMENT OF PRESCHOOLERS


Johns Hopkins University and Maryland State Department of Education (2010). Healthy beginnings: Supporting development and teaching from birth through three years of age—Every Child—Every Baby. www.marylandhealthybeginnings.org

