

DOCUMENT RESUME

ED 481 128

PS 031 534

TITLE Arkansas Framework for Infant and Toddler Care.
PUB DATE 2002-07-00
NOTE 77p.; Produced by Arkansas State Department of Human Services, Division of Child Care and Early Childhood Education.
AVAILABLE FROM Arkansas Department of Human Services, Division of Child Care and Early Childhood Education, P.O. Box 1437, Slot S140, Little Rock, AR 72203. Tel: 800-682-1550 (Toll Free); Tel: 501-682-4891; Fax: 501-682-2317; Web site: <http://www.state.ar.us>. For full text: <http://www.arkansas.gov/childcare>.
PUB TYPE Guides - Non-Classroom (055)
EDRS PRICE EDRS Price MF01/PC04 Plus Postage.
DESCRIPTORS Bibliographies; *Caregiver Child Relationship; *Child Care; Child Care Quality; Child Development; Child Health; Child Safety; Cognitive Development; Early Experience; Educational Quality; Emotional Development; *Infant Care; *Infants; Interpersonal Relationship; Learning Activities; Physical Development; Self Concept; Social Development; *State Standards; *Toddlers
IDENTIFIERS *Arkansas

ABSTRACT

Noting that children must receive nurturing, consistent care during the first 3 years of life in order to reach their full potential as curious, confident, and able life-long learners and contributing members of their families and communities, this guide presents a framework to assist Arkansas caregivers in providing such care for infants and toddlers. The guide is organized into two major sections. Section 1 describes the elements essential to quality care (relationships, physical and program environment, child health and safety, program experiences, and respect and celebration of diversity) and six intertwining strands of development that unite essential elements of quality programs: (1) self concept development; (2) emotional development; (3) social development; (4) language development; (5) physical development; and (6) cognitive development. For each developmental strand, the guide delineates ways caregivers support the child's development and provides examples of development in a particular area. Appended to Section 1 are principles of assessment for infants and toddlers and a discussion of the importance of professional development and training for caregivers of infants and toddlers. Section 2, the bulk of the document, expands upon the framework by presenting developmental benchmarks with suggested strategies and activities for use by caregivers as they plan for infants and toddlers in their care. For each strand, developmental benchmarks are identified, with examples provided for young infants, mobile infants, and toddlers. General and specific caregiver strategies to promote development in each strand are also presented. Completing the document is a 100-item bibliography of children's literature for infants and toddlers, suggestions for selecting books for infants and toddlers, and a glossary of relevant terms. (KB)

Arkansas Framework for Infant and Toddler Care

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Elements of Quality Infant and Toddler Care

- Relationships
- Environment
- Health and Safety
- Experiences
- Diversity

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Developmental Strands

- To learn about themselves - Self-concept Development
- To learn about their feelings - Emotional Development
- To learn about other people - Social Development
- To learn to communicate - Language Development
- To learn to move and do - Physical Development
- To learn to think - Cognitive Development

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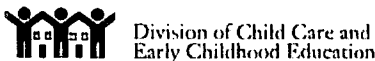
Benchmarks with Strategies and Activities for Infants and Toddlers

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Bibliography of Children's Literature for Infants and Toddlers

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developed by

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July 2002

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ACKNOWLEDGEMENTS

THE ARKANSAS FRAMEWORK FOR INFANT AND TODDLER CARE was developed and reviewed by early childhood professionals in the state. The process was supported by funds from the Division of Child Care and Early Childhood Education and was facilitated by Dot Brown, Early Childhood Services, Inc. Experts from many disciplines related to infant and toddler age children such as: early care, child growth and development, education, children with special needs, faith-based programs, children of English language learner families, teacher preparation, Early Head Start, and Health professions were represented during development and review. This framework is a document to guide the design and implementation of local early childhood programs caring for children of infant and toddler ages. The framework was developed to align with the Arkansas Early Childhood Education Framework and the Arkansas Department of Education Frameworks for Kindergarten.

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INTRODUCTION

ARKANSAS FRAMEWORK FOR INFANT AND TODDLER CARE

The Arkansas Framework for Infant and Toddler Care is written with every infant and toddler across Arkansas in mind. It is a document designed for program trainers, directors and parent educators to use as they work with caregivers and parents to insure quality care for infants and toddlers. Funded by the Division of Child Care and Early Childhood Education, Arkansas Department of Human Services, the work was developed by a panel of infant and toddler specialists.

Infants and toddlers are cared for in a variety of settings. These settings include the child's own home, child care centers and family child care. The quality of the care they receive, whatever the setting, is a primary concern here. The kind of relationships and experiences infants and toddlers have can either nurture or interfere with their development.

An infant's capacity to learn and thrive depends on the interplay between nature (genetic make-up) and nurture (life experiences). Infants come into this world with an inherited genetic make-up. However, it is the dynamic relationship between nature and nurture that shapes human development.

In order for children to reach their full potential as curious, confident and able life-long learners and contributing members of their families and communities, they must receive warm, consistent care (nurturing) during the first three years of life. This Arkansas Framework for Infant and Toddler Care is designed as a guide to assist caregivers in any setting to provide that care.

The Arkansas Framework for Infant and Toddler Care describes the following elements that are essential to quality infant and toddler care:

- Relationships
- Environment
- Health and Safety
- Experiences
- Diversity

Throughout their day-to-day experiences with infants and toddlers, caregivers will find that there are developmental strands that tie the elements together, much like a ribbon. The strands come together to create a picture of excellent care for infants and toddlers. The strands do not represent lessons or activities in the traditional sense. Rather, the strands provide a framework that supports optimal developmental in all areas.

The strands are:

- To learn about themselves - Self Concept Development
- To learn about their feelings - Emotional Development
- To learn about other people - Social Development
- To learn to communicate - Language Development
- To learn to move and do - Physical Development
- To learn to think - Cognitive Development

Infants and toddlers are born ready to learn. This learning normally takes place in a predictable sequence. However, there can be a wide range of attainment of developmental milestones from one child to another, for each has his or her own timetable. While activities can help foster development and give it a chance to flourish, activities do not "teach" infants in the traditional sense of teaching. Infants and toddlers

learn as they interact with their environment and those in it. Most importantly, infant and toddler learning takes place within the context of trusting relationships.

Each infant and toddler in Arkansas deserves the opportunity to reach his or her full developmental potential. This is more likely to occur when all the essential elements are in place and the developmental strands tie an infant's experiences together, resulting in a warm and responsive environment. The Arkansas Framework for Infant and Toddler Care provides the foundation for creating such an environment.

The infant and toddler developmental strands identified in this introduction to the Arkansas Framework for Infant and Toddler Care are used with permission from Teaching Strategies, Inc., PO BOX 42243, Washington, DC 20015. Phone 800-637-3652. Visit their web site @ www.TeachingStrategies.com

MISSION STATEMENT

The mission of the *Arkansas Framework for Infant and Toddler Care* is to promote continuity of quality care among families, caregivers and community programs responsible for children to birth three years.

ELEMENTS OF QUALITY INFANT AND TODDLER PROGRAMS

The following elements are essential to quality infant and toddler programs.

These elements are evident in all aspects of the program and therefore must be thoughtfully and deliberately developed with the same reflection and attention as that given to the development of quality learning for children three to five years old.

ELEMENT I. RELATIONSHIPS

A. Caregiver-Family Relationship

- 1. Caregivers understand that the family is the primary source of knowledge concerning the child and has the ultimate interest in the child.**
- 2. Relationships with families are supportive and encourage family members to seek and receive assistance as needed in developing parenting skills, understanding the growth and development of their children, and accessing community resources.**
- 3. Caregivers and families are partners in ongoing communication about the child's care and development.**
- 4. Caregivers understand the importance of parent-child attachment and support the family - child relationship.**
- 5. Caregivers respect and support family preferences and values in caregiving behaviors.**

B. Caregiver-Child Relationship

- 1. Caregivers nurture and respond to the needs of infants and toddlers. Trust and emotional security develop when infants and toddlers are responded to promptly and consistently in a positive manner. They assist children in adjusting to the program's setting.**

2. Caregivers use their knowledge of child development to provide appropriate interactions with infants and toddlers throughout the day. They learn and respond to each child's unique way of communicating, respond to the child's interest, give the child their full attention, especially during caregiving routines, and model the behavior they want to teach.

3. The program supports positive relationships and secures attachments between the caregiver and infants and toddlers by providing low adult/child ratios, promoting continuity of care and responsive caregiving, and assigning a primary caregiver for each child.

C. Child-Child Relationship

1. Caregivers model appropriate interactions with adults and with children.

2. Positive relationships between children are encouraged. Adults recognize emerging social skills and respect the limitations of infants and toddlers.

ELEMENT II. ENVIRONMENT

A. Physical

1. Both indoor and outdoor materials and equipment meet the developmental needs of each infant and toddler in the group.

2. The physical environment provides separate and appropriate space for sleeping, eating, diapering/toileting, and for movement and play. The atmosphere is "homelike" and comfortable for infants, toddlers, and the adults who care for them.

3. The physical environment for toddlers provides interest areas where materials with similar use are placed together. Child-sized furnishings are provided to promote independence and harmony.

B. Program

1. The daily program includes materials and activities that are designed to meet the individual needs of each child. Children are assisted with toilet learning and self-feeding skills based on individual needs. Children experience smooth transitions between activities.

2. Prevention and redirection, as defined in the Glossary of Terms, are the primary techniques for guiding behavior. Management of behavior is based on an understanding of infant/toddler development and appropriate strategies to help the child develop his or her own self-control.

3. Caregivers support the child's emerging self-control by fostering the child's developing language skills.

ELEMENT 111. HEALTH AND SAFETY

A. Nutrition

1. Caregivers have basic knowledge of nutrition and age appropriate feeding practices.

2. Nutritional needs of infants and toddlers are met; caregivers work closely with families to ensure appropriate amounts and types of foods are served in a consistent manner.

B. Sanitation

1. Sanitary practices and guidelines are in place to prevent the spread of disease. For example, diapering/toileting are in an area separate from the areas used for food service. Caregivers and children wash their hands to prevent contamination.

2. Bottles and food are handled in a safe and sanitary manner.

C. Safety

- 1. A hazard free environment is maintained for infants and toddlers both indoors and outdoors. The environment is planned so materials and equipment are age appropriate and in good repair.**
- 2. Caregivers are engaged with children and therefore able to visually and physically monitor their behavior.**

ELEMENT IV. EXPERIENCES

A. Routines

- 1. Consistent daily routines such as sleeping, feeding/eating and diapering/toileting provide opportunities for one-to-one contact between caregiver and child; a time to touch, to talk, to listen, and to respond to the child's cues.**
- 2. Routines such as diapering, feeding and sleeping are flexible and individualized to meet the needs of child.**

B. Activities

- 1. Caregivers use knowledge of child development to provide individualized age appropriate activities for infants and toddlers. Caregivers support children's play, exploration and experimentation with their environment.**
- 2. The daily schedule allows children opportunities throughout the day to choose activities based on their own interests.**

C. Sensory Experiences

- 1. An environment is provided that is rich in experiences and materials that children can explore with all their senses, thus promoting optimal development in all areas.**

2. Children are provided time and experiences each day to see, smell, hear, taste and touch a variety of stimuli.

D. Language

1. Caregivers talk, sing, read and communicate with infants and toddlers throughout the day.

2. Caregivers respond in a positive manner to individual children's communication attempts. The caregiver understands and adapts the language interactions to include cultural and linguistic differences.

3. Caregivers talk with each child about things that relate to that child's everyday experiences.

4. Caregivers tell each child what is about to occur before a routine activity begins and describe actions as they occur.

ELEMENT V. DIVERSITY

A. Cultural

1. Caregivers understand that culture affects child-rearing practices and may therefore affect an individual child's development.

2. Caregivers and programs support, appreciate and honor cultural diversity; including family and home experiences, language, beliefs, values and patterns of interaction.

B. Individual Differences

1. Caregivers recognize that children differ in temperament, preferences, culture, development and interaction styles.

2. Staff, administrators and family members use their observations of infants and toddlers to support learning experiences in ways that accommodate each child's unique characteristics and development.

3. Appreciation of individual differences is reflected in decisions relative to the physical environment, the social/emotional environment, interpersonal relations, personnel selection and the strategies that support learning and development.

4. High quality infant/toddler programs serve children with special needs in a manner that supports optimal growth and development.

INFANT AND TODDLER DEVELOPMENTAL STRANDS

Six infant and toddler developmental strands are outlined separately in this section. However, it is important to remember that the strands intertwine as development occurs, that each strand is of equal importance, and that the intertwined strands present a picture of the whole child. Vignettes are included to illustrate each strand.

STRAND 1. TO LEARN ABOUT THEMSELVES - SELF - CONCEPT DEVELOPMENT

Purpose: To develop a positive picture of self that will affect every area of development.

Infants and toddlers are supported by caregivers who promote self-concept development through:

- Showing respect for and pleasure in the children's actions to develop an overall positive sense of self.
- Providing responsive care and interactions to develop a sense of trust.
- Encouraging appropriate autonomy and independence.
- Recognizing the need of infants and toddlers for a balance between independence and dependence.

VIGNETTES (Examples of Self-Concept Development)

LOOK AT ME

As Katherine (caregiver) walks into the infant sleeping area after naptime, Carl (9 months) rolls over, peeks out through the bars and smiles. Katherine smiles back and approaches, wiggling her fingers at Carl in a silly little wave. Carl reaches out through the bars and attempts to wiggle his fingers. Katherine kneels down beside the crib and matches Carl's motions by lightly touching her fingers to the child's as they move, smiling and saying softly, "Well, I'm so glad to see you today, too." Carl smiles even more and giggles, then rolls away from the bars and reaches up. Katherine immediately stands up and says, "So you're ready to get up now, are you? Great!" Then she picks Carl up and takes him over to the changing table, continuing to talk softly with him about all the fun things they will do together. As Katherine (caregiver) follows Carl's lead in social interactions and responds to his needs, she is helping him to feel valued and attached to her.

I CAN HELP

Susan (caregiver) has always enjoyed feeding Tara (8 months), who is usually snuggly and sociable, making lots of eye contact and cooing noises while she eats. Tara has started to put her hands over Susan's while she eats, but cannot yet hold the bottle alone. Halfway through her bottle Tara suddenly lets go of the nipple and pushes up against Susan's hand. Susan allows her hand to move with Tara's motion, smiles, says, "So you want to do it yourself, do you?" and waits a moment without moving. Tara then pulls down on Susan's hands, moves her mouth to grasp the nipple again, and continues eating. Susan (caregiver) is noticing and supporting Tara's emerging independence.

ME DO IT

Christopher (24 months) usually has a difficult time with blocks, but this time it is different; Anna (caregiver) watches from the corner of her eye as he stacks them slowly and carefully. When he puts the third block on the pile Anna sees that it is a little crooked and almost reaches out to fix it, but stops herself and continues to watch while she visits with the other children at the table. Christopher puts the next block carefully on the pile and, although it teeters a little, it stays in place. Christopher looks around and says, "Anna! Me do it!" Anna says, "What a tall tower you built! Isn't that fun?" and smiles at Christopher while admiring his tower. By allowing Christopher to complete his tower without her help, Anna is supporting his increasing sense of competence and confidence in his growing abilities.

STRAND II. TO LEARN ABOUT THEIR FEELINGS - EMOTIONAL DEVELOPMENT

Purpose: To understand and express their own emotions and develop empathy

Infants and toddlers are supported by caregivers who promote emotional development through:

- Letting infants and toddlers know that their feelings are understood and accepted.
- Discussing children's emotional expressions to help them understand their own emotions and learn to empathize with others.

VIGNETTES (Examples of Emotional Development)

I'M HERE FOR YOU

Emily (6 months) is playing contentedly in the enclosed, carpeted play area with her back to the kitchen nearby. The cook drops a pan that makes a loud, banging noise. Emily jumps and starts crying. Maria (caregiver) picks her up and says, "Oh, that noise frightened you. It was just a pan that fell on the floor." Maria continues to soothe Emily by patting her and talking to her. As Maria (caregiver) responds promptly and offers comfort to Emily, she is helping the infant deal with her fears.

LANGUAGE OF FEELINGS

In the toddler room, the feeling word activities are a part of everyday experiences. There is a homemade happy face flip book and a box containing feeling faces. Vicki (caregiver) playfully acts out each emotion (happy, sad, angry) with the props and the toddlers.

The children learn the names of these feelings. One day Vicki hears a toddler say, "Can't find angry. Can't find angry." At first Vicki thinks, "What is he talking about? What is he saying?" It was clean up time, and Vicki discovers that he looking for the angry face that belongs in the feeling box.

FEELINGS HAVE WORDS

Even toddlers can begin to associate the names of feelings with their own emotions. One day during outdoor play, Todd bops Lane on the head because he wants the trike Lane is riding. As Vicki, caregivers, starts toward the two boys, Lane keeps possession of the trike and rides off down the path leaving Todd crying loudly. "What's the matter, Todd?" asks his caregiver. The child responds, "I, I (sniffle, sniffle)." Vicki asks, "Are you mad?" Todd continues crying, less loudly, but makes no response. Vicki asks again, "What's wrong, are you ANGRY?" Todd shakes his head yes, and says, "Yes. Yes, I angry. I want the trike." Vicki replies, "Todd, I know you're angry, but I can't let you hit Lane and take away his trike. You will have to find something else to play with," and she suggests a couple of other options on the playground. Todd's sobs subside and he runs to the sandbox and begins digging.

While Todd did not get the trike, his ability to express his emotions helped him get over it and get on with his play. Vicki uses fun activities to help the toddlers learn emotions, and then is able to listen as Todd uses the language of feelings in a real situation. Notice he didn't understand "mad"; because he had learned the word "angry".

STRAND III. TO LEARN ABOUT OTHER PEOPLE - SOCIAL DEVELOPMENT

Purpose: To develop social interaction skills and to enjoy being with others.

Infants and toddlers are supported by caregivers who promote social development through:

Engaging children in one to one interactions throughout the day.

Modeling appropriate social behaviors.

- Understanding the role of attachment in social development.
- Providing children with many experiences to interact with other children, and supporting emerging skills such as sharing and empathy.

VIGNETTES (Examples of Social Development)

I TRUST YOU

Melissa is the primary caregiver for four infants ranging in age from three months to twelve months: Tanner, Easton, Madison and Shanda. She greets each child and his/her parent as they arrive in the morning and makes them feel welcome, asking how they have been and if there is anything special she needs to know about the child today. Madison is the last of these four children to arrive this morning. When her mother has left for work, Melissa takes Madison to the play area. Easton, the youngest, is asleep in his crib. Melissa sits on the floor, with Tanner and Shanda in her lap, and begins reading a book to them. Tanner pats the book as he looks at the pictures and listens to her read. Madison crawls up to the caregiver, sits beside her and listens for a short time, then crawls away. When the children show signs that they are bored with the books, Melissa sings a few songs.

While Tanner and Shanda play with toys on the floor, Melissa (caregiver) plays with Madison. Easton begins to awaken. Keeping an eye on the three children on the floor, Melissa picks up Easton and checks his diaper. He is wet, so she asks Sue, the "floater"; to assist her with the three children while she changes Easton's diaper and feeds him a bottle. While Melissa changes Easton's diaper and washes his hands, she talks to him about what she is doing and about his "tummy" and "toes" and "fingers": She then prepares a bottle for him and holds him and talks to him while she feeds him.

As she interacts with and nurtures each child in her care, Melissa is helping each child develop a trusting relationship with her.

ALMOST SHARING

In the room next door, Myra is the primary caregiver for five children ranging in age from twenty-four to thirty-six months; Tarak, Keeley, Morgan, Jamie and Samuel. It is time for snack and the children are having cheese toast strips and apple juice.

The children are seated at the table and Myra hands Tarak a napkin and asks him to hand it to Keeley. He pushes the napkin over to Keeley as she pulls it toward herself. Myra then gives Keeley a napkin and asks her to give it to Morgan. Morgan laughs and pulls the napkin away from Keeley. Myra repeats this procedure until each child has given a napkin to another child. She then sits down at the table with the children and passes the bowl of cheese toast strips to the child beside her. Each child helps himself to a toast strip, passes the bowl to the next child and they begin to eat. Myra is guiding the toddlers to begin to share with each other.

SOMEBODY CARES

Later that day, during outside playtime, Samuel falls and bumps his knee. He begins to cry. Jamie comes over to him, pats him on the back and says; "Samuel hurt?" Myra, (caregiver), comes over, sees that Samuel is not hurt, proceeds to pick him up and comfort him. Jamie climbs up on the bench beside Samuel and Myra. Myra says, "Samuel, Jamie want to know how you are hurt. Can you tell her where you hurt?" Samuel points to his knee. Myra says to Samuel and Jamie, "It makes us feel better when someone cares that we are hurt, dosen't it? Thank you, Jamie." Myra is modeling caring and concern for others.

STRAND IV TO LEARN TO COMMUNICATE - LANGUAGE DEVELOPMENT

Purpose: To communicate successfully with others.

Infants and toddlers are supported by caregivers who promote language development through:

- Responding to, listening to, and understanding children's communications attempts and behaviors.
- Participating in one-to-one interactions which engage and reflect communication and behavior back to children.

- Including experiences which expose children to language such as singing and reading.
- Providing experiences in the family's primary language.

VIGNETTES (Examples of Language Development)

BUENAS TARDES (GOOD AFTERNOON)

Raoul's family speaks primarily Spanish at home. Jillian, (cargiver) approaches him as he awakens from his nap. She says softly, "Raoul, buenas tardes. (Good afternoon). Como esta' Ud? (How are you?) Tiene usted hambre? (Are you hungry?)" Jillian pauses between each phrase, giving Raoul time to consider her questions. She puts her hands out in a gesture for Raoul to be picked up, and he stretches out his arms in return. She picks him up. "Up we go to get some snack. Let's feed this hungry Raoul," says Jillian. Raoul yawns and then smiles at Jillian. She mimics his facial expressions back to him.

Jillian continues to talk with Raoul in a mixture of English and Spanish phrases as she washes their hands and then begins to give him some cereal for his snack. Each action is described to Raoul before she begins it, so he is aware of what she is doing. After each phrase or sentence, she pauses and allows Raoul time to respond. His responses are a babble that sounds like a mixture of Spanish and English. Jillian acknowledges his response with a smile or nod of her head, and then continues to talk to him about what is happening. By speaking to Raoul in English and in Spanish, his home language, Jillian is building a bridge for him between home and childcare.

MANY LANGUAGE EXPERIENCES

Ben (20 months) has been playing with plastic farm animals in front of a large picture of a farm. "Moo moos eat," says Ben as Jillian (caregiver) sits next to him.

"Yes, the cows are eating. They eat grass," she replies. "I think maybe the horses are hungry also. What should they do?" Jillian continues. Ben picks up a horse and has it stand next to the cows.

"Horsie hungry?" Ben asks, then answers himself, "Eat. Eat."

"Oh, so the horse is hungry. Will the horse eat some grass, too?" Jillian asks Ben.

Jillian begins to sing a made-up song to the tune of Mary Had A Little Lamb, "Cows and horses eat their lunch, eat their lunch. Cows and horses eat their lunch, hear them munch the grass. "She sings it a second time and Kaitlyn (22 months) comes over to listen. Kaitlyn demands, "Sing `gain!" and Jillian repeats the song. After singing the refrain several times, both Ben and Kaitlyn chime in at different times and seem to enjoy singing along with the

song. Both children have picked up plastic animals and are making the animals "eat" to the beat of the song. Jillian is encouraging children to communicate through language by listening to and expanding on what they say, by asking questions and by singing with them.

STRAND V. TO LEARN TO MOVE AND DO - PHYSICAL DEVELOPMENT

Purpose: To develop physical skills necessary to move and do in the world.

Infants and toddlers are supported by caregivers who promote physical development through:

- Establishing good health practices, providing good nutrition, routines for the basic needs of children, including rest, food, elimination and activity.
- Providing opportunities for fine and gross motor development.

VIGNETTES (Examples of Physical Development)

LOOK AT ME GO

Two-year-old Rachel has begun to crawl. After a year of physical, occupational and speech therapy, she is beginning to go where she wants to go! Her smile fills her face as her right knee hits the rug, quickly followed by a left leg that she extends forward while her right arm bears weight. This crab-like crawl belongs to Rachel alone! And it works! Rachel's caregiver and her physical therapist sit together on the carpet at the child care center, where Rachel has received her therapy. Rachel crawls to her caregiver, who receives her with a hug. Then she is off to explore on her own. Therapist and caregiver can only imagine the freedom Rachel must feel as she is able to go on her own.

OOPS, I'M STUCK

Seven-month-old Nathan has scooched off the floor mat toward the red ball that nestles on the floor under a toy shelf. With eyes fixed upon the ball, he inches forward on his belly, until he can reach the bright toy. "You can find the ball!" his caregiver encourages him enthusiastically. Nathan thrusts himself forward, a big smile

crossing his face as he reaches for the ball. He mouths the ball's smooth surface for a moment, then rears up on all fours. As he does so, his head bumps the shelf. He whimpers and tries to back out of his bind. "You bumped your head" : She suggests, "Keep your head down, and try again." This time Nathan backs out of the tight spot on his own without rescue. He smiles. His caregiver smiles too knowing she has given him an opportunity to feel competent and successful by not rushing in to solve his problem for him.

DO IT MY WAY

With the determination of a beginning walker, Neil (13 months), wants to climb the ramp on the outdoor play structure. However, the incline is a bit too steep for him to stay upright. Frustration has set in, and Neil sits at the bottom of the ramp, whimpering. His caregiver, Sally, who has been standing nearby for safety, says, "Neil, you want to walk up the ramp, but you are not ready for that. Try crawling. It works for you." With that said, she turns Neil around at the beginning of the ramp. Almost immediately, he scampers up the ramp on all fours. Sally has allowed Neil to be successful on his own terms, without having to give warnings of "be careful" or rely on her to hold his hands as he walks. He will navigate the equipment based on his own abilities and not rely on others to help him climb. Sally knows this approach will build Neil's confidence.

STRAND VL TO LEARN TO THINK-COGNITIVE DEVELOPMENT

Purpose: To develop problem solving abilities and concept attainment

Infants and toddlers are supported by caregivers who promote cognitive development through:

Providing opportunities to explore the environment through the senses, activity and play.

- e Building on the child's understanding of the world through a variety of experiences with people and objects.
- Connecting language to everyday routines and experiences.

VIGNETTES (Examples of Cognitive Development)

SENSING HER WORLD

Sarah (15 months) is sitting at the table with her caregiver, Anne, looking through a catalog. Anne shows Sarah her watch, letting her touch it and feel all the little knobs and bumps. Anne puts the watch up to her own ear and listens for a second, then puts the watch up to Sarah's ear. After a moment, they go back to looking at the catalog pages. On the next page Sarah notices a big picture of a man's watch. She immediately puts her ear down on the catalog and tries to listen to the watch on the page. Anna knows that children learn about the world through their senses.

LOOK WHAT HAPPENS

Cindy (parent) has placed a small pile of toys in front of Keith (9 months), directly on his high chair tray while she is cooking dinner. She keeps an eye on him as she peels potatoes. First Keith takes one finger and start pushing a soft ball around with the tip of his finger. Then he reaches out and grabs the ball in his hand. Looking directly at his mother, he holds his hand out and opens his fist, allowing the ball to drop on the floor. Cindy walks over, picks up the ball, and places it back on the tray. Keith immediately picks it up and drops it again. "Isn't this a fun game?" Cindy says as she stops cooking for a few minutes and continues to allow Keith to drop the ball and picks it up again until he tires of this and picks up another toy, dropping this one as well. With his mother's help, Keith is intentionally making something happen.

DRESSING MYSELF

Karen (30 months) and Tina (28 months) like to do things together with Karen usually taking the lead. Michael, their caregiver, brings out some "dress-up" clothing and the two girls start looking through them. Tina picks up a big man's T-shirt and begins to try to pull it over her head. When it gets stuck she pulls it back off and throws it on the floor. Karen takes the shirt and spreads it out flat on the floor, then gets down on her hands and knees and lifts up the top edge of the shirt. She slips her hands between the layers, ducks her head and slides herself into the shirt, pushing through the sleeves and standing up as she wiggles into the shirt and pulls it over her body. Michael laughs and says, "You really figured that one out, Karen!" Tina picks up another shirt and brings it to Michael. Together they lay out the shirt on the floor and Michael helps Tina a little when she gets stuck. "Very good, Tina! Wasn't that fun?" The two girls go off together and play. Michael has allowed the children to solve their own problem, commenting on successes and assisting only when asked.

APPENDIX A: PRINCIPLES OF ASSESSMENT

Infants and toddlers are constantly changing and developing in all six developmental strands described herein. The elements of quality described within this framework depend upon caregivers' abilities to adapt and implement individually appropriate activities and interactions. Assessment helps caregivers understand where an individual child is with respect to the developmental strands. It is, therefore, important that those who work with infants and toddlers understand how to informally assess and monitor children's development.

However, effective assessment of these youngest of children is challenging, for the informal assessment carried out by caregivers relies almost solely upon observation and interpretation of the observations of these individuals. Early care professionals must be proficient in a variety of observational methods; in understanding child development, and in being able to interpret the assessment data collected. The following basic principles provide the basis for assessment in quality infant and toddler programs.

Principle 1: Assessment should be positive, focusing on the development of the individual child, rather than comparing children to each other. The only purpose of assessment is to support the development of the individual child. This means that caregivers understand the reasons they assess the development of young children, have developed strategies to engage in meaningful assessment, and have developed a system that provides for ongoing collection of information.

Principle 2: Assessment relies upon ongoing observation of the child in multiple settings. Given the limitations of the language, cognitive development, and self-

control skills of the typically developing infant or toddler, caregivers cannot assume to use tasks or tests that rely upon the child's ability to interpret directions or presuppose the child's motivation to complete a task. Caregivers must, instead, observe children in their daily activities, record their observations carefully, and then interpret this data. They must be careful not to record opinions as to why a child is or is not at a specific level of development.

Principle 3: Families and programs work together to observe and document children's development. Families are considered equal partners in the assessment process. Caregivers understand that children's behavior may differ from one environment to the next; therefore it is important that information is gathered from all who have a good knowledge of the child.

Principles 4: Assessment requires caregivers and family members to observe and note those developmental skills and activities that the child is able to complete independently. Care should also be taken to observe and note those skills that the child is able to complete with the assistance of others, typically an adult. These skills and activities that the child is in the process of mastering are those that provide optimal opportunities for supporting the child's development. Such skills and activities are areas where caregivers should focus individual planning for the child.

Principle 5: Interpretation of individual assessment data must be made with a clear understanding of child development and the cultural context of the individual child. Caregivers must be able to understand and apply a thorough knowledge of development in order for observational assessment data to have meaning. That assessment is designed to meet a specific purpose, is ongoing, and includes data from several sources only further strengthens the caregiver's ability to correctly interpret the data.

Principle 6: There are times when the informal methods of assessment described above are too limited to provide effective care and education for a young child. At such times, more formal assessments, such as developmental screening instruments, might be implemented by program staff. Such instruments, when implemented properly, may indicate that a child needs to be referred for a formal evaluation completed by trained professionals. Formal evaluation may lead to the provision of very specific services for an identified child, such as speech or physical therapy, in an effort to better support and facilitate the child's development. Children who consistently exhibit delays in one or more areas of development should be referred for formal, professional evaluation. Decisions to formally evaluate children must be done in collaboration with families and with families' complete agreement. The assessment data collected by the caregiver, if it follows the principles stated above, will be an invaluable resource to the professional completing the formal evaluation. It is imperative that all formal assessments are used and interpreted with respect to their purpose, the quality of the instrument or tool used, and the implications of the decisions to be made as the result of the assessment.

APPENDIX B: PROFESSIONAL DEVELOPMENT AND TRAINING

Caregivers should be professionally trained to provide high-quality programs for infants and toddlers and families. This training must provide the infant and toddler caregiver with the necessary knowledge and skills to plan and implement a program that is developmentally appropriate. The training can occur in many forms such as college courses, by attaining a Child Development Associate (CDA) Credential, or by participating in seminars or workshops. Professional development training must be specific to the care of infants and toddlers and may include these topics:

- 1. The role of the caregiver in infant and toddler care**
- 2. Growth and development of the whole child (6 developmental strands) including children with special needs**
- 3. Supportive and cooperative relationships and partnerships with the family**
- 4. An appropriate physical environment for infants and toddler**
- 5. Safe and healthy environments**
- 6. Environments that promote positive adult-child and child-child relationships and interactions**
- 7. Daily experiences that are individualized and age appropriate and that promote development in all strands: self-concept, emotional, social, physical, language and cognitive**
- 8. Assessment and monitoring of children's development**
- 9. Cultural diversity and working with families of limited English proficiency**
- 10. Community resources to support programs and families**

GLOSSARY OF TERMS

The Glossary of Terms contains words, which are used in a special sense in the Arkansas Framework for Infant and Toddler Care. These terms are intended to assist the user in understanding the intent and purpose of the content of the Framework rather than to restate a dictionary definition.

assessment-a planned method or system for determining where an infant or toddler is in his/her development in all strands: self-concept, emotional, social, physical, language and cognitive

attachment-an emotional bond between an infant/toddler and adult that involves mutual closeness, trust, and responsiveness

autonomy-a sense of being a separate, independent self

behavior management-positive guidance to help young children develop inner controls and positive social skills

caregivers-all persons responsible for caring for infants and toddlers regardless of the care setting

continuity of care-predictable care provided by consistent primary caregivers over time so that relationships can develop

developmentally appropriate-care, experiences and physical environment that match the developmental level of the individual infant/toddler and contribute to each child's development

element-a basic part or principal of something

environment "everything" surrounding the child, including the physical setting, the caregivers, and the interactions and/ or experiences

families-includes all primary caregivers for the infant/toddler in the home setting; it may include parents, grandparents, foster parents, other extended family, etc.

formal assessment-a standardized instrument, such as a screening, developmental or diagnostic assessment that is administered for the purpose of determining if a child needs further assessment or referral for specialized services

framework-a document containing the necessary components to shape and guide the design and development of programs for infants and toddler

guidance-indirect and direct actions used to guide children to develop socially acceptable behavior, self-control, and new skills

homelike-an environment that includes some of the "cozy" and familiar characteristics of the child's home; upholstered furniture, cushions and soft rugs, for example

infant-includes young and mobile infants ages 0-18 months

informal assessment-ongoing observations of infants and toddlers in their care settings and interpretations of these observations for the purpose of planning for each child; observations that reflect each child's strengths, needs and interests

mobile infant-includes children between the ages of 8-18 months old

prevention-taking action to prevent problems before they happen

primary care-a situation in which one caregiver has the primary responsibility for the care of specific children in a group setting

primary caregiver-the person who has the primary responsibility for the care of a child

redirection-refocusing the child's attention to another desirable activity

responsive care-when a caregiver recognizes the needs of each infant or toddler in his/her care and responds appropriately to those needs; this includes respecting the child, following the child's lead, recognizing the child's feelings, and offering choices

routines-actions or activities repeated on a daily basis to meet the needs of the child, including diapering, feeding, handwashing and sleeping

strand-any part of something bound together to form a whole

temperament-personality traits and moods unique to each child that affect behavioral styles

toddler-includes children ages 18-36 months

trust-a child's confidence that his/her emotional and physical needs will be consistently met

vignette-an example of caregiving situations illustrating each developmental strand

young infant-includes children 0-8 months old

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*ARKANSAS FRAMEWORK FOR INFANT AND TODDLER CARE:
BENCHMARKS WITH STRATEGIES AND ACTIVITIES*

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SECTION II - Arkansas Framework for Infant and Toddler Care: Benchmarks with Strategies and Activities

INTRODUCTION

The Arkansas Framework for Infant and Toddler Care was developed as a guide for insuring quality care for infants and toddlers in a variety of settings. In support of, and as an expansion of this Framework, developmental benchmarks with suggested strategies and activities have been developed for use by caregivers as they plan for infants and toddlers in their care.

As the suggested strategies and activities were selected, care was taken to include the elements of quality care that are identified in the Arkansas Framework for Infant and Toddler Care. These elements are:

- **Relationships**
- **Environment**
- **Health and Safety**
- **Experiences**
- **Diversity**

The Arkansas Framework for Infant and Toddler Care included six developmental strands. These strands are:

- **To learn about themselves - Self-concept Development**
- **To learn about their feelings - Emotional Development**
- **To learn about other people - Social Development**
- **To learn to communicate - Language Development**
- **To learn to move and do - Physical Development**
- **To learn to think - Cognitive Development**

For each of the strands, developmental benchmarks are identified. While the benchmarks for each age level - young infants, mobile infants and toddlers - are identical, there are different examples for each. Where possible, the examples follow a sequence of development.

Caregiver strategies/activities to promote development in each strand are suggested. Both general and specific strategies are included. Many of the activities suggested for young infants should be continued for mobile infants, and some for toddlers. For example, it is suggested that to help young infants feel valued and attached to others, caregivers should keep promises to them. It is equally important that caregivers also keep promises to mobile infants and toddlers.

Although the strands are treated separately in this document, it is important to remember that each developmental strand is affected by or affects the other strands. Consider how the developing ability of infants and toddlers to communicate and use language is intertwined with their physical, cognitive, social, self-concept and emotional development.

The physical aspect of spoken language involves muscle control over mouths, tongues and lips, for example, and of fingers and hands for sign language. Thus language development and physical development are intertwined.

Consider the relationship between language and cognitive development. Language is symbolic representation for things (ball) and actions (run), thus an aspect of cognitive development. The toddler has to understand what the word "ball" means and be able to use the word so that others can understand it.

Language is social. Infants and toddlers learn language through their social interactions with others. They learn to use language to communicate with others.

The developing ability of infants and toddlers to communicate and use language is clearly related to their self-concept development. For example, the caregiver's prompt response to an infant's cries of distress promotes attachment, a benchmark of self-concept development. The caregiver who listens attentively to a toddler without rushing or interrupting the child, is helping that toddler see herself/himself as a competent communicator. Through their names and to label parts of their bodies, for example.

As the Arkansas Framework for Infant and Toddler Care: Benchmarks with Strategies and Activities was being developed, consideration was given as to how it would bridge to the Arkansas Early Childhood Education Framework: Benchmarks and Strategies and Activities for Three and Four Year Old Children. A careful examination of both documents indicated that they do connect, just as there is a bridge from the Early Childhood Education Framework to the K-12 Framework. Thus the two frameworks create a continuum for development and learning for children from birth to kindergarten that bridges to the Kindergarten Frameworks.

Care was taken in creating this document to insure that it is practical, user-friendly, applicable to a variety of infant and toddler care settings, and adheres to the recognized principles of appropriate practice. The Infant/Toddler Environment Rating Scale was used as a resource so that there is consistency between suggested caregiver strategies/activities and program evaluation.

The information that follows is organized by Developmental Strands with Benchmarks and Strategies/Activities for each strand. Each Benchmark within the strand has been assigned a number based on the following numbering system:

The first number indicates the Developmental Strand

The second number indicates the order of the Benchmark within that strand

The letter of the alphabet indicates age level as follows

A- Young infant (0-8 months)

B- Mobile Infant (8-18 months)

C- Toddler (18-36 months)

Infant and toddler benchmark- a level of behavior or skill that can be supported through observations, descriptions, documentation's and by samples of a child's work.

DEVELOPMENTAL STRAND 1: To learn about themselves - Self-concept development

Purpose: To develop a positive picture of self that will affect every area of development

Benchmarks	Caregiver Strategies/Activities
<p style="text-align: center;">A. Young infants</p> <p>1.1.A. Feels valued and attached to others Examples:</p> <ul style="list-style-type: none"> • responds to and is comforted by holding, rocking, and/or talking to • looks at human face, makes eye contact • smiles and shows pleasure when talked to • moves body towards caregiver when she approaches • enjoys games with others like "Where Is Your Nose?" 	<p>To promote attachment, allow only a small number of people to be regularly involved in the care of each young infant.</p> <p>If your work with infants is in a group setting where there is more than one caregiver in the infant room, be a primary caregiver for specific infants in the group. Assume primary responsibility for their daily caregiving routines such as feeding and diapering. This allows you to get to know each infant well and each can come to know you.</p> <p>Keep promises to infants. To Jack who wakes from his nap and begins to cry, use caring words and tone to let him know you hear him. Say, "Jack, I can't pick you up right now. But I'll get to you just as soon as I finish changing Mary's diaper." Then follow up on your promise to Jack. He did not understand your words, but he heard your reassuring tone and was comforted when you came to him. Jack is learning that you are someone he can trust.</p> <p>Consider caregiving routines of diapering, dressing and eating as unique opportunities for one-to-one interactions with each infant. Plan so that your time for preparation, such as getting needed supplies and washing hands, can be handled efficiently, leaving more time for relaxed interactions with the baby.</p> <p>In addition to daily caregiving routines, make time each day for the infant to have time alone with you and be truly engaged with you.</p> <p>Interact with all children in the group, not just your special charges.</p> <p>Make sure there is always a familiar adult present even if the primary caregiver is absent.</p> <p>Be concerned if you perceive that an infant in your care shows signs of lack of attachment; for example, becomes passive and non-complaining, shows changes in rate of development, or baby does not thrive in the same way other babies do. Document these behaviors and be prepared to discuss with supervisor and/or family for possible referral.</p>
<p>1.2.A. Becomes aware of self as a unique individual Examples:</p> <ul style="list-style-type: none"> • has own biological rhythms and way of using senses • is developing a sense of safety and security • does not distinguish between self and others (very young infant) • sucks fingers or hands • watches hands in fascination • begins to look and smile at mirror image 	<p>Be a keen observer of the infants in your care. Learn all you can about the uniqueness of each one. For example, individual sleeping and eating rhythms, how the infant prefers to be held for feeding, sleeping or comforting, their responses to different kinds of stimuli such as noise or light.</p> <p>Use this knowledge about each infant to be able to judge what a particular infant needs and to guide you to respond in a consistent and predictable way to those needs. For example, be able to predict when</p>

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Benchmarks	Caregiver Strategies/Activities
<p>1.2.A. Continued</p> <ul style="list-style-type: none"> • begins to discover that he/she is a separate human being (around age of 4 to 5 months) 	<p>the baby would like to be held, to be carried to a new place, or be shifted to a new position. Know the kinds of cuddling, stroking, talking and playing that brings comfort to each individual infant.</p> <p>Give infants an opportunity to see themselves by positioning stable, unbreakable mirrors on the sides of cribs, above changing tables and on bottom of walls in play spaces</p> <p>Talk with them about who they see. "That's Joshua in the mirror."</p> <p>Talk with infants as you observe them exploring their bodies. For example, as you see Aaron lying on his back carefully examining his hands, say, "Look at your hands, Aaron. You're moving your fingers."</p>
<p>1.3.A. Demonstrates increasing sense of competence and confidence in growing abilities</p> <p>Examples:</p> <ul style="list-style-type: none"> • depends totally on caregivers to meet all needs (very young infant) • expresses needs through sounds, facial expressions and movements 	<p>Observe the infants you work with. Learn their cues, their strengths and their needs.</p> <p>Help infants feel competent by responding to the needs they communicate. Respond in a soothing, calm and responsive manner. Encourage and show pleasure in their emerging skills. Verbalize what is happening. "You're wanting to hold that bottle all by yourself, aren't you?"</p> <p>Provide toys that young infants can act upon and get results; toys that can rattle, squeak, roll or push.</p> <p>Emphasize what infants can do rather than concentrating on what they can't do. For infants with physical disabilities pay special attention to the abilities infants have.</p>
<p>1.A.A. Asserts independence</p> <p>Examples:</p> <ul style="list-style-type: none"> • pushes away bottle • pulls at diaper when being changed • grabs for spoon when being fed 	<p>Notice and comment on the infant's emerging independence. As infant pulls away bottle, say "You're letting me know your tummy is getting full."</p> <p>Allow the infant to hold the spoon.</p>

B. Mobile Infants

1.1.13. Feels valued and attached to others

Examples:

- looks at, goes over to touch familiar adults while playing
- clings to leg of primary caregiver
- pulls away from stranger (fear of strangers)
- tries to follow departing parent (separation anxiety)
- imitates parent(s) and caregiver(s)

Recognize that both fear of strangers and separation anxiety in mobile infants are normal stages of attachment. Help parents understand this.

Encourage parents to enter their child in a group setting before or after the peak of separation anxiety.

Realize that parents may fear that the attachment to other caregivers (secondary attachment) will replace the child's attachment to them (primary attachment). Let them know that the secondary attachments are in addition to the primary ones - not replacements for them.

Encourage parents to say good-bye to their mobile infant so that the child comes to understand that the departure is predictable and will gradually learn that coming back is also predictable.

Continue to limit the number of people to be regularly involved in the care of mobile infants. Continue to be a primary caregiver for specific mobile infants in your group as discussed for young infants.

Remain nearby as a safe base for mobile infants as they move about the room and play independently.

Be on the floor with them so you can provide support and encouragement by making eye contact with them, talking with them and gesturing to them.

Add realistic daily life props to the environment: dolls, simple doll clothing, blankets, telephones, and simple dress-up clothes, for example.

Read books with mobile infants to foster feelings of attachment.
Example: *Just Like Daddy* by Frank Asch.

1.2.13. Becomes aware of self as a unique individual

Examples:

- recognizes that he/she is a separate person from caregiver
- begins to recognize and respond to name
- shows more awareness of mirror image (smiles, pats, vocalizes)
- begins to identify parts of body
- begins to use me, you and /
- is assertive and tries to direct actions of others (e.g., "Sit there!")

Keep brief anecdotal records on each child so that you are aware of the unique needs of each child. Use this information for individualized planning.

Call each child by name. Incorporate each child's name into fingerplays, songs and games.

Place unbreakable mirrors securely on wall at children's height (full length mirrors).

Talk with children about parts of their bodies. To Jerena who has climbed to the platform of the low climber, "See what strong legs it takes to climb up those steps."

Use fingerplays and songs with actions that include body parts.

Use the words "me", "you" and "I" correctly when you talk with children.

Benchmarks

Caregiver Strategies/Activities

1.3.13. Demonstrates increasing sense of competence and confidence in growing abilities

Examples:

- begins to explore environment independently, at first in close contact with, then ventures further away from caregiver
- fits a triangle into a shape box and claps
- climbs up the slide and proudly looks around for caregiver
- chooses slice of pear at snacktime and smiles as she takes a bite

Provide a secure base of support and encouragement for the exploring mobile infant. Be there to provide reassurance with a smile or a glance that says to a child, "You can do it."

Be there to share their joy in their accomplishments as you notice and say, "You did it!"

Provide a safe environment and interesting things for mobile infants to see and do. For example, as mobile infants begin to crawl and pull themselves up, make sure furniture won't tip over from the child's weight or roll away. Cover outlets and hide electrical wires.

Provide toys that will encourage exploration: clutch balls and balls with chimes and visible objects rolling inside, activity toys such as nesting cups and busy boxes, push and pull toys such as plastic lawnmowers or carpet sweepers, and transportation toys for grasping and pushing.

Arrange the room so that the beginning walker has sufficient space to practice this new found skill in safety. As mobile infants begin walking, provide carpeted surfaces and remove objects that can cause the child to trip.

Provide low open shelves so mobile infants can have access to toys.

Provide finger foods to help mobile infants become self-feeders: chunks of soft food such as banana or orange slices that can be picked up with hands.

1.4.13. Asserts independence

Examples:

- practices independence, while staying connected to caregivers (eye contact, vocalizing, gestures)
- moves away the hand of an adult who is helping with a puzzle
- insists on choosing what shirt to wear
- says "Me do!" when adult offers help in dressing
- shakes head "No".

Respond to the need of mobile infants to remain connected to you while testing their independence. Position yourself where they can see you as they play on their own. Comment on what they are doing. Respond to their strategies for staying connected to you. For example, as Winona turns from stacking two blocks to look at you, say, "Wow! Winona, you put one block on top of the other."

Help mobile infants become more independent. Allow them to do more things for themselves and offer them appropriate choices. For example, place toys of similar types, spaced so that mobile infants can make choices, on low open shelves within their reach.

Provide safe toys that mobile infants can play with independently and successfully: push and pull toys, 3-5 piece puzzles, some with knobs, cars and trucks, lightweight blocks.

C. Toddlers

1.1.C. Feels valued and attached to others

Examples:

- points out family picture in a scrapbook
- knows which child is out for the day after seeing who is there
- looks to caregivers for comfort and at times may comfort caregiver
- begins to realize that parent(s) will return

Support children's attachment to family while they are in your care. Greet both child and family members as they arrive. Become familiar with members of each child's family; their work, their hobbies and interests, their culture. Include this information in conversation with toddlers and in the daily program of activities.

Include family photos in a variety of ways: scrapbook or photo album of family members and of family celebrations, for example. Share books with toddlers that support attachment to family. For example, *Ten, Nine, Eight* by Molly Bang and *Runaway Bunny* by Margaret Wise Brown.

Allow children to bring special attachment objects such as a blanket or a stuffed animal from home.

Include opportunities for children to know they are valued members of the total group in your care. For example, sing songs and play games that include each child's name. To the tune of "Where Is Thumpkin?" since "Where is Adam? Where is Adam?"

Bid each child goodbye and let him know you look forward to his return. "See you tomorrow, Julio."

Respond quickly to toddlers' cries or other signs of distress because of their often limited language with which to communicate their needs.

Comfort toddlers and let them know they are cared for and appreciated. Give pats on back or hugs and hold toddlers in your lap. Be sensitive to ensuring that your touches are welcomed by individual children.

Include in your goodbyes to parents as they leave their child a comment about their return for example, say "We'll see you this afternoon after snack."

1.2.C. Becomes aware of self as a unique individual

Examples:

- points to self in photograph
- uses name for self and others
- shows interest in own body and bodies of others
- identifies gender (boy or girl)
- begins to have a notion about own value as a person (good/bad, attractive/ugly)

Know each child in your care and respond to his or her individual needs. Keep brief anecdotal records on children so that you can provide the individual attention that each needs.

Avoid comparing toddlers to each other.

Focus on each child's positive qualities; her accomplishments and things she can do well. For example, say "You buttoned those buttons on your coat all by yourself" or "That's a tall tower you built". Avoid referring to children as "good" or "bad" or "messy" or "neat", for example.

Accept children's mistakes as natural. To the child who spilled milk, say, "Oh, the milk spilled. Let's get a paper towel and clean it up" rather than saying "You're so clumsy. You're always spilling things."

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Benchmarks

Caregiver Strategies/Activities

1.2.C. Continued

Use fingerplays, songs, mirrors and dress-up clothes to help children naturally learn about their bodies.

Share books about bodies with toddlers. For example, *From Head to Toe* by Eric Carle or *Here Are My Hands* by Bill Martin, Jr. and John Archambault.

Take and use photos of each child. Involve them in developing photo album to place in the library or home living area. Use photos on bulletin boards at child's eye level.

Label each child's cubbie with name and photo.

Use each child's name as you communicate with and about them and in activities. "Good morning, Chan. We're glad you're here today."

Refer to children as "boys" or "girls".

1.3.C. Demonstrates increasing sense of competence and confidence in growing abilities

Examples:

- feeds self with spoon, with spilling gradually decreasing
- pours own juice at snack time and says, "I did it!"
- helps another child find the crayons
- stands on one foot and calls, "Look at me!"
- uses fork
- dresses self with assistance/supervision
- assists with pick up of toys

Arrange the environment so toddlers can be in control and be successful. For example, have child height sinks and paper towels that they can reach.

Set up areas or centers for a certain kind of activity with related equipment and materials for the activity in the area. For example: block center, manipulative center, art center, dramatic play center, language center.

Label shelves and containers with picture-word labels to help toddlers become more independent in selecting and putting away materials.

Provide opportunities for toddlers to learn to help themselves. For example, taking off own jacket and hanging it on a hook or pouring own juice at snack. For children to be successful in these tasks, have coat hooks at their height and have juice in small unbreakable pitchers.

Observe toddlers to determine when they seem to need assistance as they play. Help them just enough to continue the activity on their own. For example, you are watching Eduardo playing with a shape box trying to find where the cube fits. He tries to fit it into the triangular space and begins looking frustrated. Instead of showing him the correct space, say, "Try again, Eduardo. You can do it."

Provide opportunities for toddlers to repeat successful tasks over and over again until they are ready to move on to something a little more difficult. For example, working the same puzzle or continuously filling the peg board with pegs helps them gain confidence in what they can do.

Increase the complexity of toys, materials and activities as toddlers are ready for them. For example, add puzzles with more pieces and allow children to paint with two colors of paint instead of just one.

Share toddler's pleasure in new skills. "You did it. You caught that ball."

Model and encourage toddlers to participate in clean up following snack or play in an area.

Benchmarks

Caregiver Strategies/Activities

1 A.C. Asserts independence

Examples:

- insists on putting on own jacket
- begins to use toilet with adult assistance
- says "Goodbye" cheerfully to Parents and goes to play
- says "No" frequently
- resists change; transitions are difficult

Provide an environment that encourages independent choices. For example, have open shelves for storage of materials so that toddlers can select what they want to play with.

Allow enough time in the schedule for toddlers to do things for themselves such as putting on jackets, putting away toys, or toileting.

Help parents and toddlers separate. Suggest to parents that once the goodbyes are said, the departure should be immediate. This is easier on the child. Allow the toddler her feelings. Have an interesting and enticing environment that beckons the toddler to get involved.

Avoid taking resistance by toddlers personally. Respect a toddler's self-assertion and be patient when children say "no".

Keep your requests to a minimum.

Offer choices that do not include the opportunity to say "no". To the child wanting a ball, ask, "Which ball would you like to play with? The red one or the blue one?"

Offer only choices that are acceptable. For example, if you say "Are you ready to go inside now?" this implies a choice when there probably is not one. If it is time to go inside simply state that "It's time to go inside now."

Acknowledge a child's resistance while remaining firm in necessary requests. To the child who says "no" to going inside, say "I know you don't want to go indoors because you're having so much fun. But it's time for Ms. Peggy's children to come out. We're going to read **Brown Bear** when we go in." (This is the toddler's favorite book.)

Have a dependable schedule so that toddlers know what to expect. Prepare them for transitions, which are times of change or moving children from one activity to another. For example, explain to them that "We go outdoors after snack." Or if it's raining and children are unable to go outdoors, explain that "It's raining today and we can't go outside. But we are going to sing and dance instead."

Prepare for transition times with toddlers. For example, have all supplies needed for the diapering/toileting routines. Have something for toddlers to do when they are in transition from one activity to another. Sing songs or do fingerplays to keep children involved, for example.

DEVELOPMENTAL STRAND 2: To learn about their feelings - Emotional Development

Purpose: To understand and express their own emotions and develop empathy

Benchmarks

Caregiver Strategies/Activities

A. Young Infants

2A.A. Displays a wide range of feelings and emotions

- shows only satisfaction or dissatisfaction (very young Infant)
- cries to indicate distress
- begins to show pleasure
- begins to show fear
- becomes anxious when primary caregiver leaves (attachment)

Realize that very young infants have limited resources for expression; that crying may be all they are capable of at this early stage in their emotional development.

Be aware of some of the primary reasons young infants cry:

- hunger
- tiredness
- wet or soiled diaper
- pain (e.g. gas, colic, teething)
- other discomforts (e.g. uncomfortable position, too hot or too cold)
- boredom
- overstimulation
- sudden change (e.g. loud noise, sudden loss of support, bright lights)

Consider some ways to prevent distress in young infants, or keep it at a minimal level. For example:

- place infants where they can be safe and secure and where needs can be easily met
- establish a primary caregiving system so that you are better able to interpret and respond to an infant's needs
- know each infant's schedule for eating and sleeping
- be alert to early signs of hunger, sleepiness or irritability
- provide an environment that is neither overly stimulating nor overly restricting

Respond to distress promptly and appropriately. By doing this you are helping babies manage their own distress instead of crying excessively to get what they want. It is this responsiveness to a young infant's crying that builds a relationship and will aid in the development of later skills for self-quieting.

Respond to the young infant's displays of pleasure. Return their smiles and coos and talk with them about what they are expressing.

Provide for attachment needs by establishing a primary caregiver system as discussed in the first section on Self-concept Development and throughout this document.

Benchmarks

Caregiver Strategies/Activities

2.2.A. Expresses feelings and emotions through gestures, sounds, and - eventually - words

Examples:

- cries intensely and reason may not be obvious
- cries when hears sudden loud noises
- lifts arms to indicate need to be picked up and comforted while crying
- discovers ways to calm self (e.g. thumb sucking)
- coos and smiles when being rocked and sung to
- laughs aloud when playing peek-a-boo
- responds with more animation and pleasure to primary caregiver than to others
- looks to familiar adult when a stranger approaches

Respond in a trial-and-error method, when an infant's reason for crying is not obvious, even with an infant you know well. Be gentle and soothing as you try to determine the cause of distress. Observe the infant, ask yourself what the infant may be feeling and adapt your behavior to meet the infant's need.

Understand that your role in helping young infants manage their stress is one of balance; of rescuing the baby from distress and of letting them work things out. Obviously, you will want to change their wet or soiled diaper, feed them when they are hungry, alleviate their discomfort and try to ease their pain, for example.

Allow young infants to calm themselves, by sucking thumbs or hands, or a pacifier.

Realize that young infants differ widely in their ability to quiet themselves when they are upset. Therefore, the comfort you offer will need to be different for each child. For example, Dominique needs direct help by being picked up, carried or rocked. Sametta is able to calm herself fairly easily with her favorite thumb. For some infants, being nearby and checking in with a glance or calling to them helps them calm themselves.

Encourage young infants' expressions of pleasure by responding to them and following their lead in interactions. Be a partner in play with them.

Talk with infants about the feelings they seem to be expressing, especially during caregiving times of feeding, bathing, dressing and diapering.

Create a personal relationship with each infant. Know the kind of cuddling, stroking, talking and playing that brings good feelings to each individual infant.

Limit the number of people in the infant setting to primary caregivers and parents.

B. Mobile Infants

2.1.13. Displays a wide range of feelings and emotions

Examples:

- shows affection for familiar people
- shows increasing anxiety at separation from primary caregivers
- shows anger or frustration
- shows fear of things in the environment
- shows pleasure in new accomplishments
- begins to show empathy

Think of feelings in two categories: positive or "yes" feelings and negative, or "no" feelings, rather than as good or bad feelings.

Realize that expression of feelings, both positive and negative, is important to healthy emotional development in infants and toddlers. Children need to experience both.

Consider the "yes" feelings of joy, pleasure, excitement, delight, contentment, satisfaction, and power. As you observe infants in your care, do you see them expressing these feelings?

Provide a physical and social environment in which mobile infants can experience plenty of "yes" feelings; an environment in which they can safely explore by moving, seeing, hearing, and touching; an environment in which they have good choices. Support them as they master new skills which gives them a feeling of power, of competence. Give them opportunities to do things successfully; for example carry a loaf of bread to the table. Show them love, empathy, praise and appreciation.

Consider the "no" feelings of fear, anger and frustration. Observe to see how these feelings are expressed.

Support the mobile infants as they experience the "no" feelings of anger and frustration. This may mean helping them in a frustrating situation or it may mean allowing them time to work through some of their feelings. Know the limitations of each child in your care so that you can judge when to step in and help or redirect or when to sit back, observe and wait to see if the mobile infant can handle the situation without help.

Help mobile infant deal with their fears by providing a safe environment and by offering them comfort when they are frightened by something or someone they encounter in their environment.

Develop a respectful relationship with each child thereby providing the foundation for healthy emotional growth.

2.2.13. Expresses feelings and emotions through gestures, sounds and - eventually - words

Examples:

- hugs, smiles at, crawls or toddles toward, or leans against, a familiar person
- looks to adult for help when attempting a new skill (e.g., falling down when attempting to walk)

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Provide labels for the mobile infant's feelings. To Noah who breaks into a big smile as his father enters the room, say, "Noah, I can see you're happy to see Dad."

Express and label your feelings. After a rain exclaim, "I am so happy that the sun is now shining so we can go outside" or "It really makes me feel sad to see that the book is torn".

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Benchmarks

Caregiver Strategies/Activities

2.2.13. Continued

- clings to parents as they say "goodbye"
- cries when seeing someone in a Halloween mask
- moves near caregiver when a stranger enters the room
- screams "no" or "mine" when another child takes a toy
- helps caregiver comfort a crying child
- clings to blanket from home during rest time

Respect a child's right to have feelings and to express them. Avoid gushing sympathy such as "Oh, poor Jodi. Don't be afraid. I'll make it alright." Avoid trying to distract with a toy or an activity. For example, "Here's your favorite bear. I know you like to play with this bear." Avoid denying that the child's feelings are real by saying things like "Jodi, there's nothing to be afraid of." Instead, accept Jodi's feelings as real to her. Comfort her in a way that will lead her to comfort herself and know when to signal for help. For example, say, "I know you're afraid right now." Reassure Jodi that you are nearby if she needs you.

Recognize when the mobile infant has difficulty separating from parents or is fearful of new adults. Talk with the child frequently about his/her family, where they are, when they will come back and things they do together.

Stay close to or hold the mobile infant if she reacts negatively to the presence of a stranger. Let the stranger know about the child's concern. Be careful not to be overly protective of a child who is distressed by a stranger, for example by rushing over to hold the child each time a stranger comes into the room. From this the mobile infant may be learning that new people are to be feared.

Know each mobile infant in your care so that you can make a decision about the type of support to provide when they are in stressful situations. Is an encouraging nod enough? Does the child need verbal encouragement or do you need to step in and help the child work through the frustration?

Notice and communicate pleasure over such newfound skills as walking, climbing or adding new words. Communication can be a verbal "You did it!" or a smile, a nod, clapping of hands or a hug.

Allow children to have and use items such as a special blanket from home. For some children this may be a way to calm themselves.

C. Toddlers

2.1.C. Displays a wide range of feelings and emotions

Examples:

- exhibits contrasting emotional states and mood shifts
 - anger and tenderness
 - hostility and love
 - confidence and doubt
 - fear and power
 - pride and shame
 - independence and dependence
- begins to show new fears (e.g., monsters, animals, the dark)
- becomes aware of own feelings and those of others
- begins to develop empathy

Accept that caring for toddlers with their contrasting emotional states and mood shifts can be challenging. Be flexible in your ability to adapt to their constantly changing behaviors.

Understand that though at times they seem to be quite independent, they very much need a special caregiver and the secure base she offers.

Understand that because of their growing ability to imagine things they cannot see, their fears increase to include imaginary creatures, or monsters, for example. Take their fears seriously, give them support, and show the toddler that he or she can find a way to cope. Prepare them for potentially frightening situations. Tell them what to expect. Be there as a secure base when the toddler does encounter a potentially frightening situation.

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2A.C. Continued

Realize that although toddlers are beginning to become aware of the feelings of others and to develop empathy, that this is unpredictable and should not be expected on a regular basis. Toddlers are egocentric and have a hard time putting themselves in someone else's place. This means that if they want something, they take it. If someone is in their way, they try to move them. Thus life in groups for and with toddlers can be difficult.

‡ Accommodate the egocentric nature of toddlers, plan an environment that provides for both solitary and parallel play. Provide several of the same popular toys for children to play with alone or near another child. Provide private spaces for no more than two children and that can be easily supervised by adults.

To help toddlers feel secure in their environment, have a predictable sequence in the day while maintaining a flexible time schedule. This flexibility is essential because toddlers need to repeat tasks until they have mastered them. A flexible time line allows them to go at their own pace. Help toddlers have accomplishments they can take pride in. Take steps to minimize the frustrations toddlers might encounter in their environment. For example, provide toys that are age-appropriate and in good repair.

Prepare toddler for changes even though they may be a normal part of the daily routine. Plan for transition times so that toddlers have very limited "wait" time.

Be aware when toddlers are becoming tired and realize that they may not be able to recognize and control this. Help them transition to a calming activity.

2.2.C. Expresses feelings and emotions through gestures, sounds and - eventually - words

Examples:

- displays aggressive feelings and behavior (e.g., hitting, shoving, biting, grabbing toys)
- may say "no" even to things he/she wants
- experiences out of control behavior (temper tantrums)
- uses some language to express feelings (e.g., says "I did it!" after using potty successfully)
- expresses affection and preference for some peers (e.g., puts arm around shoulder)
- recognizes and reacts to feelings in others (e.g., "Camilo sad.")

Model the type of interactions with others you want children to develop: affection, empathy and gentleness, for example. Tell a child if you are angry, but never react in anger by shaking or jerking, for example.

Anticipate the actions of toddlers to prevent them from getting hurt or hurting others.

Help toddlers resolve their differences by using words to express what is happening and what they are feeling. For example, say "You want to play with that doll Sean has. Let's see if we can find another doll in the doll bed."

Assist and encourage toddlers to use language rather than aggressive actions in their relationships with others.

Recognize that constantly testing limits and saying "no" is part of a toddler's development of self as an autonomous individual. Limit your use of the word "no" to situations that relate to the safety of the children. State directions positively. For example, say "Walk" rather than "Don't run." Explain the reasons for limits in simple words. Say, "When you run inside you might fall and hurt yourself."



2.2.C. Continued

Realize that temper tantrums occur typically as the result of the culmination of fatigue and frustration, plus the toddler's inability to use words to express strong feelings. They are frightening to other children, to you and to the child who is having the tantrum. Avoid reacting to a tantrum with anger. Try to remain calm and let the child know you are there to help him or her regain control. The sort of help you provide will vary with the child. Seek help if you become too angry to handle the situation.

For older toddlers, consider using a calming down or cooling down time for when they are not capable of self-control and redirection. A word of caution: This is not punishment or time-out. Provide a soft, cozy spot, such as a corner with pillows, where a child can go to settle down and gain control with the support of a nurturing adult nearby.

Include plenty of materials in the environment to allow children to express and share feelings and to role-play. Some examples are:

- dramatic play props (dolls, dress-up clothes, small people figures)
- sand and water play
- art
- music

Use puppets, books and songs with toddlers to encourage them to share feelings.

DEVELOPMENTAL STRAND 3: To learn about other people - Social development

Purpose: To develop social interaction skills and to enjoy being with others

Benchmarks

Caregiver Strategies/Activities

A. Young Infants

M.A. Develops trusting relationships with nurturing adults

Examples:

- makes eye contact with caregivers
- listens attentively to adult when being fed or changed
- kicks legs and squeals when familiar adult appears
- looks to adult for attention or help
- may responds with fear to strangers (some infants)

Help infants to acquire "basic trust" which is a feeling of safety and security that the world and oneself are all right.

Help infants feel "at home" in a group setting by providing a sense of familiarity, acceptance and safety; a feeling of being with caregivers who know them, who care about them and who will care for them.

Assign a primary caregiver for each infant in your program, whether you work in a center-based setting or a large family child care setting with more than one caregiver. In the child's own home and in most family child care settings, you are likely to be each child's primary caregiver. This primary relationship supports the young infant's skills for developing relationships with others.

Include the family in the primary caregiver relationship so that they can have a primary contact in the program.

Respond to infants as individuals rather than as members of a group.

Build a responsive relationship with the children in your care by getting to know each one. Begin with families who can provide a wealth of information about their child.

Pay attention to a young infant's messages so that you respond in a way that truly meets that child's needs. As you watch the young infant, ask yourself what the infant is telling you with her eyes, movements, facial expressions and vocal sounds, for example. Based on your observations and your experiences with the infant, decide how to respond to her. Be consistent in your responses, thus helping her to acquire "basic trust".

Avoid ownership of a child. Understand that primary does not mean exclusive.

3.2.A. Shows interest in peers

Examples:

- does not distinguish between self and others (very young Infant)
- responds to adult caregivers before showing interest in other infants/children
- begins to watch other children
- reaches out to touch another infant's face
- grabs for toy another infant is holding

Provide peace and quiet and a minimum amount of stimulation for the very young infant.

Put infants in a safe spot where they can be part of the group, but not be overstimulated.

Begin to provide opportunities for infants to see each other. For example, place them facing each other on a quilt or mat on the floor. Be nearby to ensure their safety, but let them touch each other.

Provide a safe place for the young infant to watch mobile infants as they play. For example, hold the young infant safely in your lap while another caregiver interacts with the mobile infant.

Benchmarks	Caregiver Strategies/Activities
<p>3.3.A. Demonstrates caring and cooperation</p> <p>Examples:</p> <ul style="list-style-type: none"> • is comforted by holding, rocking and/or talking to • reaches for familiar person • pats adult on back when being held • <i>lifts</i> bottom in response to caregiver's actions when being changed • hugs cloth doll 	<p>Model the behavior you want infants to develop. Touch them gently. Handle their bodies with respect.</p> <p>Explain to them what you are going to do, such as changing a diaper or cleaning a runny nose. "Let me get that dirty diaper off you. I know it must be uncomfortable."</p> <p>Make caregiving routines such as diapering a one-to-one interaction rather than a time to distract with a toy, for example. Explain what is happening and invite the infant's cooperation. Say "Lift up, please" as you raise her bottom.</p>
<p>3.4.A Tries out roles and relationships through imitation and pretend play</p> <p>Examples:</p> <ul style="list-style-type: none"> • smiles at self in mirror • plays peek-a-boo • pretends to feed familiar adult 	<p>Respond to all social overtures by the infant; a smile or a babble, for example.</p> <p>Observe infants at play. Respond to their invitation to you that they want a partner in play.</p> <p>Play appropriate games such as peek-a-boo and This Little Piggy with interested infants.</p> <p>Be a partner in social interactions with infants. Take turns with them, accommodate to their needs and understand the cues they give. For example, you and Marco who is five months old have been playing peek-a-boo, both enjoying the game. Then Marco turns his head and looks away from you. This may mean that he is tired of the game. By knowing Marco well, you will be able to adapt your behavior to the change in his.</p> <p>Provide unbreakable mirrors so infants can see themselves as they play.</p> <p>Provide <i>soft</i>, washable dolls and animals of washable fabric.</p>
<p style="text-align: center;">B. Mobile Infants</p> <p>3.1.13. Develops trusting relationships with nurturing adults</p> <p>Examples:</p> <ul style="list-style-type: none"> • shows affection (hugs and kisses) • brings adult a book to read • enjoys helping with chores such as carrying paper towels into the bathroom • grabs onto caregiver's hand or leg when frightened 	<p>Give and return affection. Give hugs, smiles and nods of approval.</p> <p>Know the mobile infants in your care so that you can interpret their signals. For example, if Demaine puts his arm around your leg, does this mean he needs a reassuring touch or hug?</p> <p>Invite older mobile infants to help you with chores such as putting milk cartons on the table.</p> <p>Have toys that you and the mobile infant can play with together: books, balls, dolls, and musical instruments, for example.</p>

Benchmarks	Caregiver Strategies/Activities
<p>3.1.13. Continued</p>	<p>Be there as a safe home base for mobile infants to return to when they venture away from you to explore their environment</p> <p>Continue to limit the number of "strangers" other than parents and necessary staff members who come into the mobile infant room</p> <p>Encourage strangers to approach a mobile infant slowly. For example, a new caregiver assigned to work with mobile infants should always be with a familiar caregiver during this time of transition.</p> <p>Offer comfort both physically and verbally should a mobile infant display a fear of stranger. As you gently place your arm around Franklin who begins to cry when a stranger enters the room, say "That's Electra's grandmother, Franklin. She's come to get Electra and take her home. You've never seen her before."</p>
<p>3.2.13. Shows interest in peers</p> <p>Examples:</p> <ul style="list-style-type: none"> • identifies the family members and possessions of other children • joins other children in rocking wooden rowboat • knows names of other children • engages in parallel play (near but not with) 	<p>Use children's names and the names of their family members frequently. For example, "Here comes Sandra and her Dad. Good morning, Mr. Ambrose. Good morning, Sandra. We're glad you're here today."</p> <p>Provide toys and equipment that encourage children to get to know each other: balls, toy telephones, and rocking boats, for example. Provide enough of each toy so mobile infants don't have to share.</p> <p>Label individual cubbies with names and photos of each child.</p> <p>Display photos of the children playing together so that mobile infants can see them. Involve children in looking at and talking about who is in the photo.</p>
<p>3.3.13. Demonstrates caring and cooperation</p> <p>Examples:</p> <ul style="list-style-type: none"> • helps caregiver hold young infant's bottle • joins in search for a child's missing sweater • gives adult a big hug • becomes increasingly aware of own possessions 	<p>Model cooperating and caring behavior. As you hold a doll, pick up a blanket while saying, "I'm going to cover the baby. She's cold." or "Miguel looks like he's having a hard time getting those books on the shelf. Let's see if we can help him."</p> <p>Notice and comment when you observe a mobile infant helping another child. "Samuel, you helped Arizona pick up the blocks. Thank you."</p> <p>Acknowledge an infant's possessions. For example, as a parent brings in a diaper bag say "This is Alexander's bag. I'll put it in his cubbie." (Alexander's cubbie is labeled with his name and photo.)</p>

Benchmarks	Caregiver Strategies/Activities
<p>3.4.13. Tries out roles and relationships through imitation and pretend play</p> <p>Examples:</p> <ul style="list-style-type: none"> • enacts familiar events (e.g., puts on hat and looks in mirror) • scribbles on a shopping list adult is writing and says "Milk" • pretends to call parents on the phone 	<p>Add toys and materials to the environment to encourage role-playing and pretend play:</p> <ul style="list-style-type: none"> • cloth or soft baby dolls -handbags • paper bags with handles • pieces of cloth for blankets • hats (unless unable to use for health reasons) • telephones • washable stuffed animals <p>Include in the environment safe and interesting objects from the adult world:</p> <ul style="list-style-type: none"> • pots and pans • wooden spoons • nonbreakable bowls • discarded boxes of all sizes <p>Interact with mobile infants as they play. Initiate a phone call to a mobile infant who has a telephone in his hand, for example.</p> <p>Have an unbreakable full length mirror available so children can see themselves.</p>

C. Toddlers

<p>.1.C. Develops trusting relationships with adults</p> <ul style="list-style-type: none"> • imitates adult activities (e.g., reading a newspaper, setting the table) • is eager to help with chores (e.g., preparing meals, feeding the fish) • calls adult over to show an accomplishment (e.g., a painting, block structure) • is learning to use adults as resources 	<p>Include toddlers in the daily routines such as putting napkins on the table at snack and lunch.</p> <p>Notice and comment individually and specifically on a child's accomplishments. To a child who calls to you from the easel, "Look what me did" respond with "Wow, Grace, you covered that big piece of paper with blue paint."</p> <p>Be available to help toddlers who come to you for assistance. To Tralenda who shows you that her shoelace is untied say "Yes, Tralenda, your shoelace is untied. Let me tie it for you so you don't trip on it and fall."</p>
<p>3.2.C. Shows interest in peers</p> <p>Examples:</p> <ul style="list-style-type: none"> • enjoys including other children in pretend play (e.g., driving in a car or going food shopping) • refers to other children by name • comments on who is a girl and who is a boy • enjoys small group activities (2 or 3 children) • continues parallel play • begins to play with others (associative play) 	<p>Set up the toddler environment in learning/interest areas with sufficient toys and materials for two or three children:</p> <ul style="list-style-type: none"> • block/construction area with cardboard blocks, and small vehicles • home living/dramatic play area with child-sized kitchen furniture, dolls and beds for them, blankets or pieces of cloth, strollers, pots and pans and unbreakable dishes <p>Invite two or three children to join you in an activity such as reading a book or playing rhythm instruments.</p> <p>Use children's names as you interact with them.</p> <p>Refer to children as boys or girls. Sing songs, play games and read books that include references to children by gender.</p>

Benchmarks

Caregiver Strategies/Activities

3.3.C. Demonstrates caring and cooperation

Examples:

- responds to emotions of other children (e.g., helps adult pat a crying child)
- works with another child to complete a task (e.g., putting away a puzzle)
- feeds and puts doll to bed
- tends to hoard possessions ("mine" is favorite word)
- begins to understand personal property concepts
- participates in simple small group games with adult assistance
- begins to cooperate with less physical aggressiveness

Model caring and cooperation (prosocial behavior). Be kind and considerate not only to children in your care but to other adults they see you with, including their parents.

Notice children who show concern for others. "Megan, I noticed that you helped Micah with that puzzle."

Help children in their dealings with one another. Encourage them to talk with one another rather than to you. Give them words to use. For example, "Tell Zenobia you don't like it when she takes that doll away from you."

Plan activities that encourage toddlers to work together. For example, tape a large sheet of butcher paper to a table and allow two or three children at one time to draw on it with markers.

Play simple group games such as Ring Around the Rosie where all children do the same thing at the same time (they all fall down).

Be close by as toddlers begin to play together. Know your children well so that you will know when to let them work things out for themselves or to step in and prevent injuries and handle conflicts.

Respect children's who need to hold on to their possessions. For example, say to a child who is playing with a toy that another wants "Shanta, when you are finished playing with that purse, Ralph would like to play with it!" Be prepared for Shanta to say "No" and accept it. Later she may offer the purse to Ralph.

Model sharing rather than requiring it. "Here, Edwina, is some of my playdough."

Provide plenty of interesting things for toddlers to do and duplicates of favorite toys so sharing isn't an issue.

Tries out roles and relationships through imitation and pretend play

Examples:

- acts out simple life scenes (e.g., making dinner, going to the doctor)
- puts hat on and says, "I'm going to work"
- uses objects to represent something else (e.g., box as car, block as phone)

Set up familiar play settings such as a medical office or a grocery store. Include props common to their culture for toddlers to use.

Include simple dress up clothes, both male and female, for children to use in their imitation and pretend play.

Accept toddlers' unusual use of objects in their play. For example, "cooking" small wooden blocks.

DEVELOPMENTAL STRAND 4: To learn to communicate - Language Development

Purpose: To communicate successfully with others

Benchmarks	Caregiver Strategies/Activities
<p style="text-align: center;">A. Young infants</p> <p>4.1.A. Expresses needs and thoughts without using words</p> <p>Examples:</p> <ul style="list-style-type: none"> • startles to sound • cries or fidgets to signal hunger, discomfort or pain • smiles to invite an adult to interact • laughs aloud • moves body toward caregiver when she approaches • raises arms to familiar adult • uses a variety of sounds to express feelings 	<p>Have a primary caregiver who is responsible for each infant's daily care. This will help that caregiver better understand each child's unique way of communicating.</p> <p>Know each infant in your care. Observe and try to figure out what an infant's different movements and cries mean and respond quickly and appropriately. Listen, look and feel for the answer. Is she hungry, does she have a wet or soiled diaper, or is she just tired of being in the same position? Each of these needs requires a different response.</p> <p>Think of crying as positive; as a sign that the infant is communicating his needs and that he trusts you to respond to them.</p> <p>Use language with infants from the start. Talk with them long before they can talk to you.</p> <p>Talk with them during caregiving times. Tell them what will happen, give them time to respond. Tell them what is happening as it happens. Tell them what will happen next.</p> <p>Comfort with language. "Yes, I know, Raheem. That wet diaper doesn't feel very good, does it? Let's get a dry one."</p> <p>Pay attention to the infant's non-verbal expressions and respond to them both verbally and non-verbally. Respond to a smile with a smile and say, "Look at Joseph's big smile."</p> <p>Add toys such as rattles and squeaky toys that infants can use to create sounds.</p>
<p>4.2.A. Identifies with a home language</p> <p>Examples:</p> <ul style="list-style-type: none"> • listens to conversations • recognizes and begins imitating sounds of home language • understands names of familiar objects in home language 	<p>Determine the home language of each child in your care. If the home language is non-English or limited English, the following strategies and activities apply to your work setting.</p> <p>Respect the language of the family. Refrain from insisting that they speak English to their infant at home.</p> <p>Ask families to help you learn, in their home language, the names of some objects that are part of the caregiving setting. For example, bottle, diaper, food items, and body parts such as eyes, nose and mouth. Use these words in your interactions with the infant. Connect the words to the objects.</p> <p>Make sure you correctly pronounce the child's name as well as the names of other family members.</p> <p>Reassure families that as you care for their infant you will make every effort to understand what the child is trying to communicate to you.</p>

Benchmarks

Caregiver Strategies/Activities

4.3.A. Responds to verbal and non-verbal communication

Examples:

- quiets to voice
- listens attentively
- listens to and gazes at face of person who is talking
- coos when spoken to
- responds when called by name (e.g., looks up or turns head)
- touches mirror when adult asks "Where is the baby?"
- understands names of familiar people and objects

Know and use the name that parents want their infant to be known by. Use the infant's name in play, and during dressing, diapering and feeding, for example.

Encourage infants to respond to your verbal and nonverbal interactions with them. Say, "Feel the rabbit's soft fur" as you stroke the stuffed animal, or "Listen to the bells" as the infant hits the chiming ball and watches it rock back and forth.

Hold out your arms to the infant as a signal that you will pick him up and lift him out of his crib. As he reaches out his arms toward you, say "Upsy daisy, Ricardo. I am taking you out of the crib."

Put words to their actions. For example, say "You are reaching for that ball."

Use names of people and objects as you communicate with young infants.

Use motions to songs while singing with infants.

Learn and use sign language as a means of communicating with infants.

4.4.A. Communicates through language

Examples:

- coos
- vocalizes to self and others
- begins babbling
- imitates some tones and inflection
- babbles to others
- recognizes familiar person and vocalizes

Listen and respond to the infant's babblings and vocalizations. Match their vocalizations. Appreciate these sounds as the beginning of communication.

Exchange sounds with infants. Let them take the lead. Imitate their vocalizations. Play sound games with them.

Talk with infants in a pleasant, calm and natural voice. Speak in simple, clear sentences. Use real, adult talk, rather than baby talk. Maintain eye contact when talking with infants.

Talk with, sing, and read with infants.

Be aware of some warning signs that a young infant may have a communication disorder:

- displays lack of interest in social contact (e.g., avoids eye contact, holds body rigidly)
- does not respond to human voices or other sounds

Document your observations of a young infant's behaviors that support your concern. Discuss this with your supervisor and/or parents of the infant.

Benchmarks	Caregiver Strategies/Activities
<p>4.5.A. Shows enjoyment of books and stories</p> <p>Examples:</p> <ul style="list-style-type: none"> • enjoys the sound of language and steady rhythm of a book's words • becomes an active reading partner through chewing, shaking, banging and observing a book, for example • attempts to turn page of book being held by adult 	<p>Read to an infant as you cradle her in your arms. Accompany the reading with lots of cuddles and snuggles (if infant enjoys cuddling).</p> <p>Select books with simple bold illustrations. Refer to Bibliography of Children's Literature for examples of appropriate children's literature that is part of this document.</p> <p>Prop board books up so non-mobile infants can see the pictures.</p> <p>Select books that focus on things familiar to the infants: bottle, clothes, toys, and people, for example</p> <p>Provide books that can be easily cleaned. For example, washable cloth books, soft vinyl or oilcloth books.</p> <p>Provide board books with thick and coated pages.</p>
<p style="text-align: center;">B. Mobile Infants</p> <p>4.13. Expresses needs and thoughts without using words (nonverbal)</p> <p>Examples:</p> <ul style="list-style-type: none"> • points to ask for an out-of-reach toy • shakes head "No" when asked if hungry • catches eye of an adult to ask for help • indicates by gesture wet or soiled pants 	<p>Be tuned in to each child's non-verbal communication strategies such as pointing, shaking head "yes" or "no" and respond by using words to help them express their ideas. For example, "Oh, you want that ball that's on the shelf" to the child who points to a favorite ball.</p>
<p>4.2.13. Identifies with a home language</p> <p>Examples:</p> <ul style="list-style-type: none"> • looks at a bottle on hearing the word <i>bottle</i> in the home language • uses same sounds and intonations as parents do • says several words in home language clearly 	<p>Encourage family members to speak in their home language when they visit the center or family child care home.</p> <p>Use tapes with songs and stories in the child's home language.</p> <p>Invite parents to share records or tapes in their home language.</p> <p>Ask parents to teach you some most commonly used words. Use the words when speaking with the child.</p>
<p>4.3.13. Responds to verbal and nonverbal language</p> <p>Examples:</p> <ul style="list-style-type: none"> • reacts to facial expressions of adults • follows simple directions such as, "Will you carry these napkins to the table, please?" • pushes foot into boot as adult pulls it up • looks toward objects when named 	<p>Provide nonverbal support and encouragement to mobile infants by making eye contact, smiling, nodding, or gesturing to them, for example.</p> <p>Invite mobile infants to assist with a simple task. For example, "Andre', bring me the ball."</p>

Benchmarks

Caregiver Strategies/Activities

4.4.B. Communicates through language

Examples:

- creates long babble sentences
- repeats familiar words
- calls caregiver by name
- uses words such as "mama" and "dada"
- understands many more words than can say
- uses gestures and words to communicate needs (e.g., yes, no, up, all gone)
- begins to use me, you, and I

Listen and respond with conversation to the babbles of mobile infants with conversation.

Name and talk about things in the room or outdoors to help expand mobile infants' vocabulary.

Encourage mobile infants to say words by showing your pleasure and excitement when they say a word.

Expand on what they say to model complete sentences. For example, when a child says "Milk" as you are pouring milk into cups for snack, say, "Yes, Monteil, we're going to have milk for snack."

Add toys to the environment to promote language development. For example, add telephones, small vehicles, dolls and doll blankets

Be aware of some signs that a mobile infant may have a communication disorder:

- a young mobile infant who has been babbling stops babbling
- a mobile infant does not show interest in objects, in interacting with caregivers, or in playing games such as pat-a-cake

Document your observations of a mobile infant's behaviors that support your concern. Discuss your observations with your supervisor and/or parents of the mobile infant.

4.5.1131. Shows enjoyment of books and stories

Examples:

- looks at picture books with interest, sometimes pointing at objects
- begins to **follow** simple stories and may listen for a brief time when read to
- selects a book and takes it to an adult to read

Include books with pictures of objects and activities mobile infants can relate to: pets, vehicles, taking a bath.

Place sturdy board books in book pockets or sturdy book stand.

Allow children to look at books on their own.

Sit on floor with one or two children, reading to them. Support children in their responses to book illustrations. For example, "Yes, that's a dog. His name is Spot" as child points to dog in book. *Where's Spot?* by Eric Hill.

Encourage children to **follow** the illustrations as you read the text. Ask, "Can you find the cat?"

Refer to Bibliography of Children's Literature for list of suggested books for mobile infants.

Benchmarks	Caregiver Strategies/Activities
<p style="text-align: center;">Ejoddlers</p> <p>.1.C. Expresses needs and thoughts without using words (non-verbal communication)</p> <p>Examples:</p> <ul style="list-style-type: none"> • uses facial expressions to show excitement or distress • catches adult's eye for attention and reassurance when needed • tugs on pants to indicate need to go to bathroom 	<p>Respond quickly to toddlers' cry or other signs of distress because they have limited language with which to communicate their needs.</p> <p>Form a relationship with each toddler so that you can understand and respond to each child's non-verbal communications. For example, to a child who watches you intently as you start to leave the classroom, say "Renetta, I'll be right back. I just have to take the lunch count to Ms. Carol's office."</p> <p>Say to a child who is jumping up and down as the group prepares for outside play, "Rick, I can tell you are excited because we're going outside to play."</p> <p>Interpret a toddler's communication attempts with peers. For example, you have observed that Louis enjoys being with Max. When it is time for snack, Louis sits at the table, looks at Max and pats the chair next to his. Say to Max, "Max, I think Louis wants you to sit by him."</p>
<p>.2.C. Identifies with a home language</p> <p>Examples:</p> <ul style="list-style-type: none"> • speaks in home language with family members and others • recognizes tapes of stories and songs from home culture 	<p>Ask parents what words their toddler uses so that you can understand what their child is saying when speaking in a home language you do not understand. For example, words for toileting, food items, family members, toys.</p> <p>Become familiar with those words or expressions and use them in communicating with the child.</p> <p>Ask families to make tapes of stories and music their children know from home. Incorporate them into your plan of activities.</p> <p>Invite families to tell a story or read a book in their home language.</p>
<p>.3.C. Responds to verbal and non-verbal communication</p> <p>Examples:</p> <ul style="list-style-type: none"> • follows directions such as "Bring the book to me, please." • responds to adult's facial expressions (e.g., stops throwing blocks after a stern look) • goes over to cot when lights are dimmed for naptime 	<p>Give clear and specific one-step directions such as "Put the doll in the doll bed" rather than "Put the doll where it belongs."</p> <p>Match your body language, especially facial expressions, to voice tone and spoken words so that children do not receive a mixed message.</p> <p>Be consistent with verbal and nonverbal signals for routines and for transitions from one activity to another. For example, include a special song or fingerplay when preparing to go outdoors.</p>

Benchmarks

Caregiver Strategies/Activities

4.4.C. Communicates through language

Examples:

- expands vocabulary
- combines words
- uses words to indicate wants and needs (e.g., toys, food, drink, diaper changed)
- tells about what happened over the weekend
- talks with other children while playing together
- uses name to refer to self
- shows frustration when not understood
- begins to recite short rhyme or song

When initiating a conversation with a toddler, allow child ample time to respond. Talk with toddlers at their eye level.

Listen attentively as toddlers initiate a conversation with you and respond to their verbal initiations. Resist the temptation to rush toddlers or interrupt them as they talk with you.

Name objects, describe events and reflect feelings to help children learn new words.

Set up the learning environment to encourage children to communicate with each other. For example, in the home living area, include dishes and pots and pans, dolls and doll blankets and at least two telephones.

Help children listen to and communicate with each other. When necessary, talk for them or interpret what they are trying to communicate. "Tell her you want some play dough" or "He's telling you he doesn't like it when you push him off the tricycle."

When necessary, ask parents to interpret for you what their toddler is saying.

Be aware of some signs that a toddler may have a communication disorder, especially the older toddler:

- has a limited vocabulary
- is often misunderstood by others
- often misunderstands questions

Observe the child closely and identify and document the behavior, or absence of behavior, and when it occurs. Discuss your concerns with your supervisor and/or parents.

4.5.C. Shows enjoyment of books and stories

Examples:

- points to pictures in book and names some pictures
- enjoys looking at books on own
- makes up stories while turning pages of a book
- requests favorite books to be read over and over again

Select books with simple plots about familiar things and people, Refer to books listed in Bibliography of Children's Literature which is a part of this document.

Set up a cozy and soft reading/library/book area for toddlers to use independently. Include some familiar books.

Allow children to go to the library area and "read" independently. Join them in the area and read a requested book.

Recognize that repetition is important for toddlers. Therefore, read favorite books. Add others which may become "new" favorites. As you read with toddlers, allow them to turn pages and point to pictures in the book.

Frequently read to toddlers individually or to groups of two or three.

Tell stories, sometimes using props such as flannel or magnetic figures, story characters, and puppets.

Allow children to manipulate and place flannel or magnetic figures on the boards.

DEVELOPMENTAL STRAND 5: To learn to move and do - Physical Development

Purpose: To develop physical skills necessary to move and do in the world

Benchmarks	Caregiver Strategies/Activities
<p style="text-align: center;">A. Young Infants</p> <p>5.1.A. Develops gross motor skills</p> <p>Examples:</p> <ul style="list-style-type: none"> • moves arm and leg reflexively (Movement not under conscious control of very young infant) • begins to lose reflexes and have voluntary control of arms and legs gains control of head • gradually sits with support, then Sits without support • begins creeping and crawling 	<p>Provide head support needed when lifting and holding young infants until they can gain control of their heads.</p> <p>Facilitate rather than "push" the gross motor development of the young infant.</p> <p>Try to keep infants in the position in which they are the freest and least helpless during the waking hours. For example, avoid restrictive devices such as infant seats or swings (car seats in vehicles are the exception).</p> <p>Place infants in positions they can get in by themselves rather than putting them in positions they are unable to get into alone. Recognize that the process of getting into a position, such as sitting without support, is more important than being in the position.</p> <p>Place infants on a mat, rug or blanket in a safe area of the room.</p> <p>Place a variety of washable objects within reach for infants to look at and stretch for. As they show signs of becoming mobile, place objects far enough from them so they must work to get them.</p> <p>Encourage infants to practice what they know how to do rather than trying to teach gross motor skills. This practice helps them get ready for the next stage. For example, infants need lots of opportunities to raise themselves by arms in prone position in preparation for creeping and crawling.</p> <p>Ensure the safety of young infants as they are developing gross motor skills. For example, lock side rails on cribs in "up" position when infants are napping. Always stay with infants on changing table, keeping a hand on them.</p>
<p>5.2.A. Develops fine motor skills</p> <p>Examples:</p> <ul style="list-style-type: none"> • Progresses from hands being tightly fisted to being open • grasps what-ever is put in hand (Grasp reflex very young infant) • begins to grasp and briefly play with object • clasps hands together for play • consistently reaches for toys and objects • transfers small objects from hand to hand 	<p>Avoid putting a rattle or toys in the hands of very young infants because they can't let go of them (grasp reflex).</p> <p>Provide toys that are responsive and make a noise as young infants go from reflexive action to grabbing, grasping and manipulating objects. Include toys such as rattles, plastic keys and squeeze toys. Include soft, washable toys.</p> <p>Provide toys that are scaled to size; so that young infants can grasp, chew and manipulate them, toys must be large enough so that infants cannot choke on or swallow them. The toys must also be washable so that they can be washed and disinfected after an infant has mouthed</p>

Benchmarks	Caregiver Strategies/Activities
<p>5.3.A. Coordinates eye and hand movements</p> <p>Examples:</p> <ul style="list-style-type: none"> • follows toys with eyes as adult slowly moves it • looks at hand • reaches for and grasps a bottle • looks at toy or object while playing with it 	<p>Review the strategies and activities suggested for gross and fine motor skill development also apply to the coordination of eye and hand movements.</p> <p>Orient mobiles toward the young infant's sight so that they are clearly visible when the baby is lying on his back.</p> <p>Remove mobiles when the infant can grasp them.</p> <p>Be aware of signals of sensory impairments or delays in motor development. For example, a visually impaired child may not reach for an interesting toy because she cannot clearly see it or her creeping may be slow to develop because limited visual information may reduce her motivation to explore the environment.</p>
<p>5.4.A. Develops self-help skills</p> <p>Examples:</p> <ul style="list-style-type: none"> • coordinates sucking, swallowing and breathing • begins to mouth and gum solid foods • begins to hold own bottle • begins to feed self finger foods • sucks thumb or pacifier to comfort self 	<p>Allow young infants to determine the pace of feeding. Respect individual differences. Do not try to rush the infant during feeding.</p> <p>Hold infants with their bodies at an angle while feeding from a bottle.</p> <p>Allow infants to assist in holding a bottle. Work hand-in-hand with parents when it comes to introducing foods to infants.</p> <p>Allow babies to suck their thumbs or use a pacifier to comfort themselves. Note that pacifiers should only be allowed if provided by parents.</p>

B. Mobile Infants

5.1.13. Develops gross motor skills

Examples:

Standing •

- pulls self to standing by holding onto furniture
- stands alone holding onto low support
- stands alone without support
- walks with both hands held
- walks sideways holding onto support
- walks without support
- **climbing**
- climbs into an adult or child sized chair and seats self
- climbs up and down stairs
- **throwing**
- throws ball

Provide a safe environment and allow children to explore it with little adult interference.

Provide open space both indoors and outdoors for mobile infants to practice their developing gross motor skills.

Allow mobile infants to decide when they are finished with crawling and are ready to walk rather than trying to push them to begin walking.

Be alert for children who stand up but can't sit back down and help them when they indicate they need it.

Provide stationary rails or sturdy, low furniture for standing or cruising.

Add items such as pillows and low platforms to the environment to provide a variety of levels for mobile infants to explore and to have safe climbing opportunities.

Add large and medium size balls to indoor and outdoor environment

Benchmarks	Caregiver Strategies/Activities
<p>5.23. Develops fine motor skills</p> <p>Examples:</p> <ul style="list-style-type: none"> • holds crayon and begin with dot And progress to vertical lines. • empties objects from containers • places objects in container, progressing from few to many • stacks two to three blocks, one on top of the other • turns pages of board book 	<p>Provide opportunities and materials that encourage children to use manipulative skills:</p> <ul style="list-style-type: none"> • nesting toys • soft blocks • containers for filling and taking out objects • fat crayons and markers and large sheets of plain paper • playdough for poking and pounding <p>Add bowls, cups and spoons to water play activities.</p>
<p>5.33. Coordinates eye and hand movements</p> <p>Examples:</p> <ul style="list-style-type: none"> • attempts to put shapes into holes in shape box • stirs ingredients when helping to make playdough • puts round pegs in pegboard • peels a half of a banana 	<p>Provide additional opportunities to promote both fine motor skills and coordination of eye and hand movements by adding</p> <ul style="list-style-type: none"> • snap-lock beads or blocks • large pegs and pegboards • pounding bench • puzzles with 3-5 pieces, some with knobs • shape sorters
<p>5.4.B. Develops self-help skills</p> <p>Examples:</p> <ul style="list-style-type: none"> • uses spoon and cup, but may spill • feeds self with fingers • removes loose clothing (socks, hat) • cooperates with undressing/ dressing (e.g. pushes arms through jacket sleeves) • indicates wet or soiled pants through gestures or vocalizations • transitions from sleeping in crib to staying on cot or mats for napping 	<p>Recognize that allowing mobile infants to engage in self-help skills may take longer and be messier, but it is an important part of development.</p> <p>Provide time and needed tools and equipment for self-help skills for all children:</p> <ul style="list-style-type: none"> • unbreakable cups with handles • small spoons and dull tipped forks • bibs for mobile infants • paper towels for clean up • individual washcloths for cleaning hands and face • toys and tools that are designed or adapted for children with varying types and degrees of disabilities <p>Expect a mess in eating areas. Consider allowing mobile infants to eat at low tables as soon as they can climb into a small chair.</p> <p>Floors and tables where children eat should be easy to clean.</p> <p>Place mobile infants on low cots or mats for napping or resting. When they become big enough to climb out of their cribs. Follow licensing requirements for this transition from crib to cot or mat.</p>

C. Toddlers

5A.C. Develops gross motor skills

Examples:

Walking

- walks fast and well
- walks backward
- walks on low balance beam/board

Running

- runs, but awkwardly/stiffly
- runs headlong, has trouble stopping and turning
- runs with control

Climbing

Climbs well

Navigating Stairs

- creeps downstairs (e.g., on bottom)
- walks up stairs holding a hand
- walks up and down stairs independently

Playing with Balls

- throws ball
- kicks ball
- throws a ball with aim

Ride Wheel Toys

- sits on and moves "ride on toy" (without pedals)
- may pedal small tricycle

Provide space and opportunities for toddlers to walk, run, and climb.

Encourage gross motor experiences in both boys and girls.

Include appropriate toys and equipment:

- low climbers and slides
- low three- and four-wheeled, steerable vehicles, both with pedals and without
- large balls
- low balance beam/board

Include gross motor activities indoors; dancing and moving to music, for example.

Involve yourself in gross motor activities with toddlers. For example, moving to music, tossing ball back and forth with them.

Include plenty of sensory experiences such as water play and sand. Add props to sand and water play to develop fine motor skills:

5.2.C. Develops fine motor skills

Examples:

- pulls apart and puts together large pop beads
- threads large beads
- scribbles with crayons and begins to imitate marks
- turns pages of book cribbles to
- uses paintbrush, gradually learning to control drip
- pastes papers together
- attempts to snip paper with child safety scissors

- containers (pans and buckets)
- shovels
- measuring cups and spoons
- plastic tubing
- egg beaters
- turkey basting syringe

Provide a variety of art materials and experiences to offer manipulative opportunities:

- finger painting
- painting with brushes
- playdough and props
- large crayons, markers, pencils and paper
- child-size safety scissors (used with supervision)
- collage materials for pasting

Allow children to use art materials freely. Avoid using coloring books or sheets, or providing a model.

Establish a manipulative center that includes:

- large stringing beads of different sizes and shapes
- feltboard and magnetic shapes and pieces and boards
- Duplo sets, small blocks

Introduce fingerplays such as "Eensy Weensy Spider" and "Where Is Thumpkin?"

Benchmarks

Caregiver Strategies/Activities

5.3.C. Coordinates eye and hand movements

Examples:

- completes simple shape puzzles (circle, square, triangle)
- closes Velcro™ fasteners on shoes
- holds container with one hand and uses other hand to put objects into container

Provide opportunities to encourage development of fine motor skills and eye and hand coordination include toys and materials such as:

- large, lightweight blocks
- puzzles (wooden and textured)
- pegboards and pegs of various sizes
- shape sorters/boxes
- lacing cards

5A.C. Develops self-help skills

Examples:

- feeds self with spoon, scooping with some spilling, then with little spilling
- assists with pick up of toys/objects
- begins to use toilet with assistance
- unzips, unbuttons, unties, unsnaps
- pours own milk and juice from small plastic pitcher
- puts on own jacket and hat when going outdoors
- uses fork

Set up the environment and the daily schedule, including routines and transition times, to encourage self-help skills. For example, have coat hooks at toddler height and use small, unbreakable pitchers for pouring of milk and juice.

Allow sufficient time during transition times so children can do things for themselves. For example, when transitioning to outdoors, allow time for toddlers to put on jackets without being rushed.

Model, demonstrate and assist children to develop self-help skills. For example, wash your hands with the children, describing the steps. Be involved in pick up and putting away of toys after play.

Encourage parents to dress their toddler in loose, simple clothes they can remove themselves. (elastic waists rather than overalls, for example).

Recognize that each toddler will have his or her own timetable for toilet training.

Cooperate with parents in the area of toileting for their children. Be aware that cultural expectations in timing and styles for toileting may be different than yours and respect these differences.

DEVELOPMENTAL STRAND 6: To learn to think - Cognitive Development

Purpose: To develop problem solving abilities and concept attainment

Benchmarks

Caregiver Strategies/Activities

A. Young Infants

M.A. Gains an understanding of basic concepts and relationships

- engages primarily in reflexive behavior (very young infant)
- responds to sensory stimuli (e.g., touch, sounds, light, voices)
- gathers information through senses (e.g., mouthing, grasping and reaching)
- looks at face of person who is talking
- turns head toward sound/voice
- recognizes familiar objects (e.g., bottles)
- lacks object permanence (if cannot see it, it does not exist)
- looks for dropped toy
- differentiates between person attached to and others
- comes to realize ability to make things happen (e.g., hits or kicks mobile and it moves)
- begins to realize that self and people and objects in the world are separate

Recognize that basic trust and attachment are prerequisites for the cognitive development of young infants. In order for them to develop basic trust, they must experience responsive care from familiar caregivers to whom they are attached. Refer to Developmental Strand 1 - Self-Concept Development, for information related to attachment, and to Developmental Strand 3 - Social Development, for information related to trust.

Understand this additional relationship between attachment and cognitive development. Through the attachment process, infants come to differentiate between the persons they are attached to and others. This differentiation is a cognitive skill with social/emotional implications.

Understand that your initial role in the cognitive development of young infants is to be that primary caregiver to whom they can feel attached and know they can trust. It is from this sense of safety and security that infants are willing to explore their environment, to accept challenges and take risks. From continued exploration comes cognitive development.

Provide stimulation to promote cognitive development. To avoid over-stimulation of young infants, limit the adults in the room to caregivers and, if in group care, to other children present.

Give young infants faces to look at, especially yours. Infants respond to faces, either real or picture form, longer than to any other configuration.

Talk with young infants during caregiving times of feeding, bathing, diapering and dressing. Explain what will happen, what is happening, and what will happen next. It is these day-to-day relationships and experiences, more than toys and equipment, that contribute to the young infant's cognitive development as well as all other areas of development.

Provide for the very young infants a limited variety of soft, washable toys to be looked at and sucked on.

Place infants on their backs so that they can see more of their environment and can use their hands.

Talk with infants about what they are experiencing through their senses. For example, say "I know that dry diaper feels good."

6.2.A. Applies knowledge to new situations

Examples:

- shakes stuffed animal in same way as rattle to hear noise
- kicks new crib toy to see if it will move
- squeezes and tastes new finger food

Add interesting toys of different textures and that are responsive to the actions of the infant:

- soft balls
- rattles
- cloth toys
- squeeze toys
- plastic keys
- mobiles

Benchmarks

Caregiver Strategies/Activities

6.3.A. Develops strategies for solving problems

Examples:

- reaches for objects within view
- uses hands to steady self when sitting up
- reaches for a toy that has rolled away
- raises bottle as level of milk drops

Place infants in a safe area large enough for them to move freely. Place toys around the area to encourage them to move around and reach for them.

Allow infants time to try and solve problems on their own. Know each infant's tolerance for frustration and also developing abilities and tailor your actions accordingly. Balance helping the young infant by making the situation easier to cope with and letting the child work things out. For example, for the non-mobile child who becomes upset because a toy is out of reach, you would move it nearer. For the child who is beginning to creep or crawl, you might offer words of encouragement such as "Keep trying, Amanda, you've almost got it."

Comment on their successes as they solve problems. "Jamal, you worked hard to pick up that rattle."

B. Mobile Infants

6.1.B. Gains an understanding of basic concepts and relationships

Examples:

- enjoys filling bucket with pop beads and dumping them out
- remembers games and toys from previous day (memory)
- pulls cover off toy that has been hidden (object permanence)
- asks for wooden spoon to bang on homemade drum
- pretends to open door using a toy key

Provide a physical and social environment that focuses on play as the main ingredient for cognitive development. The environment should be safe, offer freedom to explore, and give and give opportunities for choice and self-direction. The environment should be rich in sensory experience..

Add toys and materials such as plastic or wooden cars and trucks, dolls, balls of different sizes and textures, nesting and stacking toys, play or real telephones.

Add toys that can be used in more sophisticated ways: large connecting blocks, small building cones and wooden snap trains, for example.

Include real objects, or realistic replicas, for pretend play: real cup and spoon or plastic replica, for example.

Provide safe and interesting items from the adult world: measuring cups, pots and pans, some with lids, wooden spoons, and junk items such as discarded boxes, both small and large, some with lids.

Prepare the environment so that mobile infants are able to make choices between clear alternatives. For example, display toys clearly on low shelves rather than in boxes. Store collections of items, such as small wooden blocks, in a clear, plastic container labeled with a picture of the items.

Maintain some familiar and favorite toys and materials in the environment while gradually adding new ones.

Remain nearby and available but non-directive while mobile infants play. They need you as a safe home base and for help when needed, but they also need the opportunity for independent exploration and discovery.

6.2.13. Applies knowledge to new situations

Examples:

- blows on noodles when adult explains they are hot
- spots cat and says "dog"
- uses hammer instead of hand to flatten playdough (creative use of materials)

Provide a variety of unstructured materials that children can use creatively. Refer to those identified in 6.1.B.

Encourage creativity rather than imposing limits on how mobile infants use materials.

Allow mobile infants to explore new materials and try to figure out what to do with them.

Notice and comment when children apply knowledge to new situations. For example, say to Mischa who puts small wooden blocks in shoebox rather than in intended container, and places on storage shelf, "Mischa, you found a new container for the blocks" rather than "Those blocks go in this container" as you put them in the proper container.

6.3.13. Develops strategies for solving problems

Examples:

- points to picture in a storybook and looks to adult for name of that object
- brings over a stool to help reach a toy
- tries various pieces in shape-sorting box until one fits
- uses a stick to gain an out-of-reach toy
- pulls string to get toy to roll

Allow free choices of materials for play so children will find problems to solve that are meaningful to them; problems they run into during the course of the day such as how to get the ball that rolled under the table.

Assist children in problem-solving, by taking your cues from them. Assist them only until they can work independently. If the child does not need or want help, back off.

Intervene in the mobile infant's play selectively to prevent them from hurting each other or to keep them from becoming overly frustrated. For example, as you sit at a low table with a mobile infant who gets stuck putting puzzle pieces in a three-piece puzzle, give verbal hints about how to turn the pieces so they will fit rather than showing the child how they fit. By doing this you have promoted problem-solving rather than rescuing the child.

Provide help when the mobile infant comes to you with a problem.. Provide the help the child is requesting. Say, "That's a shovel, Nonnie, You can use it to shovel dirt."

C. Toddlers

6A.C. Gains an understanding of basic concepts and relationships**Examples:**

- learns with whole body
- experiments with mixing colors when painting
- tells another child, "Your mommy comes back after nap."
- runs to tree and says, "I run fast."
- learns about spatial relationships through experiencing them (e.g., sits in box)
- connects language to concepts (e.g., says "More milk.")
- understands differences in meaning (e.g., go-stop, big-little, up-down, in-out)
- thinks concretely
- has increased memory of past events
- uses words related to concepts such as size and color (e.g., big, little)

Establish interest areas/learning centers for toddlers:

Home living/dramatic play area with child-sized table and chairs and kitchen appliances, beds for dolls, strollers, dolls with pieces of cloth to wrap around them, blankets, dishes and cooking utensils, handbags, simple dress-up clothes

Language and book area with sturdy books, pillows, couch, chairs, stuffed animals, special picture books that may be used with adult supervision

Art and expressive materials area with easel, thick paints, brushes, newsprint or other large pieces of paper, collage materials, paste, crayons, chunky pencils

Sensory area to include sand and water play, items of different textures such as cotton balls, rice, shaving cream and Fabric swatches. Add measuring cups and spoons, sieves sifters to sand and water play, for example.

Manipulative area with large beads to string, containers such as cans, cups, buckets, baskets, boxes, tennis ball cans, puzzles, peg boards and pegs.

- Block and Construction area with large cardboard or milk carton blocks, large plastic or foam blocks, vehicles, small

Allow children freedom to play with the materials with a minimum of adult interference. As they interact with the materials they will come to understand concepts and relationships. For example, as they play with props in the water area, they will come to realize that a cup holds water and a sieve does not.

Give toddlers power to alter sensory materials. For example, to a child who is playing in the sand area to which you have added molds, suggest that the child add a little water and see what happens. Then stand back and observe the child experiment and discover the difference in wet and dry sand as it is put into molds and dumped out.

Resist pressure to teach concepts such as colors and shapes to toddlers. Instead, include the names of colors and shapes in normal interactions with them. For example, "Donnella, please bring me the red ball."

Help toddlers understand number concepts in a natural context of play and daily routines. For snack, serve round and square crackers and label them as you offer choices. "We have round and square crackers for snack. Which do you want?" As toddlers play with blocks and in sand, they are learning to compare size and weight.

Include language in gross motor activities so that children can experience concepts with their bodies, thus coming to understand them. For example, in Ring Around the Rosie, "We all fall down."

Benchmarks	aregiver ra egies c lvi ies
<p>6.1.C Continued</p>	<p>Read books with toddlers that present basic concepts and relationships that are appropriate for them. They will enjoy <i>We're Going on a Bear Hunt</i> by Michael Rosen, illustrated by Helen Oxenbury, and <i>The Very Busy Spider</i> by Eric Carle. Refer to the Bibliography of Children's Literature which is a part of this document for additional concept books. Avoid asking an abundance of questions as you read with toddlers; questions such as "What's that?" Instead, remember that toddlers learn more from hearing you read than from answering your questions. Involve children in songs and fingerplays that include number concepts.</p>
<p>6.2.C. Applies knowledge to new situations</p> <p>Examples:</p> <ul style="list-style-type: none"> • sees a picture of a zebra and calls it a horse • paints on side of building with water after painting at easel • completes new puzzle using familiar strategy of turning pieces until they fit • is able to substitute one object for another (e.g., uses stick as spoon for feeding baby) 	<p>Add materials to the environment that are slightly more challenging to toddlers than what they are used to. For example, add puzzles with more pieces or add smaller balls.</p> <p>Add materials that are in the same category, but are different in some ways such as size, texture or that produce different results:</p> <ul style="list-style-type: none"> • large cardboard blocks, small wooden blocks, and foam blocks • fingerpaints and easel painting • crayons, markers and chalk • riding toys with and without pedals • tambourine and wrist bells <p>Allow toddlers to figure out what to do with new play materials you introduce rather than directing their actions. Observe them as they build on their skills in discovering how to use new materials.</p> <p>Let toddlers find unique ways to combine toys and materials. For example, putting small colored blocks in pot and stirring them as they cook in the home living area. Appreciate creative use of materials as a part of cognitive development.</p>
<p>6.3.C. Develops strategies for solving problems</p> <p>Examples:</p> <ul style="list-style-type: none"> • cooperates with others in implementing a plan (e.g., carries a large pillow across the room for a jumping game) • asks "Why?" questions • dips paintbrush in water to clean it • grows in ability to predict • finds solutions mentally 	<p>Review the information in 6.1.C. related to materials and props in the indoor environment. Toddlers will use many of these items in trying to figure out solutions for problems they encounter.</p> <p>provide equipment and materials in the outdoor environment that encourage problem-solving. For example, small wagons for moving items from one area of the playground to another, riding toys with and without pedals, and cardboard boxes for getting in and crawling over and under.</p> <p>Set up obstacle courses both indoors and outdoors that are challenging for toddlers to navigate.</p> <p>Allow toddlers to work on a problem uninterrupted. Observe what toddlers do so you can identify when to step back and let them solve their own problems. Be ready to step in if a child is in danger or is getting too frustrated.</p> <p>Observe toddlers as they work to solve problems and comment on what you see them doing. Say to Juanita who is dropping clothes pins into a plastic milk bottle, "Just look at you. You're dropping all those clothes pins into that bottle. Just two more and they will all be in the bottle."</p>

Benchmarks

Caregiver Strategies/Activities

6.3.C. Continued

Demonstrate that thinking and problem-solving is important to you. When a toddler figures out how to get a ball from under the table, say "You did some good thinking." Model problem-solving by offering children opportunities to help you solve problems. Verbalize the problem-solving activity. Say to the toddlers, "Someone tore a page in this book. Let's get the tape and mend it."

Encourage toddlers to ask questions by answering the many questions they ask.

Ask open-ended questions that encourage toddlers to predict what will happen or to think about solutions. To the toddler who is playing in the water table with a whisk, ask "Elena, what do you think will happen if you squirt just a little bit of soap into the water?" as you hand her the bottle of liquid soap. Stand back and watch what happens as she begins to use the whisk in the soapy water. Respond to her comments about what is happening. "Bubbles" she says with excitement. "Yes, you made bubbles," you reply.

BIBLIOGRAPHY OF CHILDREN'S LITERATURE
FOR INFANTS AND TODDLERS

What To Look For In Books for Young Infant

Types of Books
(BB) Board Books
(CB) Cloth Books
(VB) Vinyl Books
(PB) Paper Books
(113) Interactive Boo

Books for use with infants should:

- Be read often
- Include simple realistic pictures on each page (photographs are better).
 - Contain pictures of familiar objects
 - Have one or two pictures on each page. It is hard to focus when there is too much happening on a page.
 - Show the entire body or object.
- Contain (or only read) a few words on each page.
- Include naming books as well as those with rhyme and repetition.
- Reflect the child's culture as well as expose the child to other cultures.
- Include sturdy books for children to hold, clutch, and mouth. For example, cloth, vinyl and board books should be available.
 - These books must be safe, durable, and easy to clean.
 - These books should be inspected often and removed when tattered or torn. Books are not meant to last forever when young children are allowed to play with them.
- Be read with an enthusiastic voice. Babies are fascinated with the human voice and they are learning the basics of language long before they can talk

Books for Young Infants - Birth to 8 Months

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- Buck, Nola. (1998). How a Baby Grows. Illustrated by Pamela Paparone. New York: HarperCollins. (BB)
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What To Look For In Books for Mobile Infants

Include all young infant books plus:

- Read on a regular basis.
- Include books for children to hold, manipulate, clutch, carry, and mouth
 - These books must be safe, durable, and easy to clean
 - These books should be inspected often and removed when tattered or torn.
- Include books that encourage participation by mobile infants.
 - This may include fingerplay books, touch and feel books, and predictable books.
- Have favorite books on hand as well as introduce new books on a regular basis.
- Look for books about animals, things around the house, and naming books to increase a mobile infant's vocabulary.

Books for Mobile Infants - 8 to 18 Months

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- Brown, Margaret Wise. (1947). *Goodnight Moon*. Illustrated by Clement Hurd. New York: HarperCollins. (BB)
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- Fox, Mem. (1988). *Koala Lou*. Illustrated by Pamela Lofts. New York: The Trumpet Club. (PB)
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- Mayes, Susan. (1995). *The Usborne Book of Baby Animals*. London: Usborne Publishing. (BB)
- McBratney, Sam. (1996). *Guess How Much I Love You*. Illustrated by Anita Jeram. Cambridge: Candlewick Press. (BB) (PB)
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 Zeff, Claudia. (1996) *Find the Piglet*. Illustrated by Stephen Cartwright. London: Usborne Publishing. (BB)

Touch and Feel Books:

Hathon, Elizabeth. (1999). *Oh Baby*. New York: Penguin. (IB) (BB)
 Hathon, Elizabeth. (2000). *Night- Night Baby: A Touch and Feel Book*. New York: Penguin. (IB) (BB)
 Manhattan Baby. *Peek-A-Book*. Manhattan Toy. (CB)
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What To Look For In Books for Toddlers

Include all infant books plus other toddler books

Include books for children to hold, manipulate, clutch, and carry.

- 0 These books must be safe, durable, and easy to clean.
- 0 These books should be inspected often and removed when tattered or torn. Books will not last forever, replace books as they become damaged.
- 0 Children need to manipulate books to learn how to hold a book, turn the pages, turn pages from right to left, and read from top to bottom.

Rotate books often to provide new experiences, while keeping the favorite books available to read over and over. Children love to "read" books that they have memorized through repetition.

Include books children can interact with, for example touch and feel books, finger play books, rhyming books, or books with moveable objects.

- Read books with simple stories. Do not include books that are very wordy. You should be able to read an entire book in 1-2 minutes.
- Include multicultural books to expose children to people of other races and cultures. This can be done without drawing attention to the differences, but to simply expose children to different looking people, old and young, or those with handicaps.

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GLOSSARY

infant and toddler benchmark - a level of behavior or skill that can be supported through observations, descriptions, documentations and samples of a child's work.

anecdotal record - written description of one specific event or behavior

attachment - an emotional bond between an infant/toddler and adult that involves mutual closeness, trust and responsiveness

autonomy - a sense of being a separate, independent self

caregiver - all persons responsible for caring for infants and toddlers regardless of the care setting

egocentric - the inability to understand the world from any perspective other than one's own

empathy - being aware of and responding to the feelings of others

families - includes all primary caregivers for the infant/toddler in the child's home setting (may include parents, grandparents, foster parents, and other extended family, for example)

fine motor- the ability to use the small muscles such as fingers and hands to manipulate materials in the environment. Example of fine motor skills include grasping a rattle, picking up small objects and eating with utensils.

gross motor - the ability to use the large muscles of the body, the arms, legs and torso, to control body movements such as lifting the head, rolling over, climbing, walking and running

object permanence - understanding that something or someone continues to exist even when out of sight

open-ended questions - questions that have no right or wrong answer

parallel play - two children playing side-by-side, each involved in separate individual activity

primary care - a situation in which one caregiver has the primary responsibility for the care of specific children in a group setting

primary caregiver - the person who has the primary responsibility for the care of a child

prosocial behavior - showing concern, cooperation, kindness and consideration for others; demonstrating a sense of caring for others

reflexive behavior - when muscles react automatically to different kinds of stimuli. Examples of reflexive behavior in newborns include breathing, blinking and swallowing.

self-calming/self-quieting - the ability of infants and toddlers to calm themselves rather than relying on others to calm them. Thumb-sucking and holding onto a special blanket are examples of self-calming strategies used by infants and toddlers.

separation anxiety - becoming anxious when primary the caregiver leaves

spatial relations - the ability to make a logical connection about surroundings and the objects, including self, in them

stranger anxiety- exhibiting anxious behavior around unfamiliar adults

solitary play - one child playing alone

transition times - times of change or moving children from one activity to another, such as from indoors to outdoors

trust - a child's confidence that his/her emotional and physical needs will be consistently met

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