ZERO TO THREE®

January 2012 Volume 32 No. 3

Journal of ZERO TO THREE: National Center for Infants, Toddlers, and Families

Conversations With the Experts

THIS ISSUE AND WHY IT MATTERS

When ZERO TO THREE conducted a survey to better understand the challenges and issues facing parents today (Hart Research Associates, 2010), a number of interesting findings emerged that provided useful insight into how professionals can better support parents and other caregivers in their efforts to nurture healthy development. Some of the important discoveries included:

- **Parents need more information to fully understand the timeline and processes of early social and emotional development.** 69% of parents thought that children could not experience feelings such as sadness and fear until after they were 6 months old. Parents also did not realize that from the first months of life, infants can sense and be affected by their parent's moods. In addition, more than half of parents did not think that children can experience feeling either good or bad about themselves before they are 2 years old. Parents also had misconceptions about how much self-control young children are capable of: 20% thought they should have the ability to manage their frustrations by 2 years old and 43% expected the ability to emerge by 3 years.
- **Parenting practices are powerfully influenced by one's own upbringing.** More than half (53%) of the survey respondents reported that the way they were raised had a major influence on parenting. This was particularly true for African American (62%) families. In addition, faith and religious background had an influence on parenting practices for two thirds of the respondents.
- **Grandparents are vital sources of support and information.** Parents often to turn to their own parents for practical support, such as providing regular child care. Parents also go to grandparents with questions about child development and parenting: 47% of parents indicated that they look to their mothers or mothers-in-law for the answers.
- **Fathers and mothers experience parenting differently.** Fathers are twice as likely as mothers to identify bedtime and sleep as a top challenge; mothers are twice as likely as fathers to pick temper tantrums as their top challenge. Fathers are also less satisfied than mothers with their work–family balance, and fathers were not as well-informed as mothers on infant development, for example, how singing and talking to newborns can influence their early cognitive development.

These and other important insights from the survey provided an opportunity for ZERO TO THREE to develop new resources to inform the infant–family field and bridge the gaps in information. In September 2011, ZERO TO THREE launched ***Little Kids, Big Questions***, a podcast series featuring interviews with national experts who offer guidance and resources to parents and professionals in nurturing children's healthy development. The articles in this issue of *Zero to Three* provide excerpts that have been adapted from these interviews, and offer a unique look at how leaders in their fields understand and address the issues raised in the survey. To listen to the original podcast series, hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a past contributor to ABC's *Good Morning America* Parenting Segment, and to give us your feedback, please visit www.zerotothree.org/parentingpodcast.

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Hart Research Associates (2010). *Parenting infants and toddlers today: A survey among parents of children birth to three years old in the U.S. for the period June 4-11, 2009.* Washington: DC: ZERO TO THREE.

ZERO TO THREE®
National Center for Infants, Toddlers, and Families

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Cover photo:© iStockphoto.com/Viatcheslav Dusaleev

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Zero to Three is the bimonthly journal of ZERO TO THREE: National Center For Infants, Toddlers, and Families. **ISSN 0736-8038** 1255 23rd Street, NW, Suite 350, Washington, DC 20037, (202) 638-1144; *Customer Service:* 1-800-899-4301

Little Kids, Big Questions

Using Technology to Inform and Support Parents and Professionals

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In the summer of 2009, ZERO TO THREE commissioned Hart Research Associates to conduct an in-depth survey of parents with children from birth to 36 months old. The survey objectives were to: (a) better understand the challenges and issues facing parents today, (b) discover where gaps in knowledge of child development exist, (c) identify where parents find their sources of information and support, and (d) learn about the factors that influence parenting practices. The survey, *Parenting Infants and Toddlers Today* (Hart Research Associates, 2010) revealed a number of interesting and important findings for parents and for professionals who work with infants, toddlers, and their families. For example, the survey found that while parents have a better understanding of the importance of the kinds of experiences that are critical to young children's learning—reading, singing, and communicating with their children—than they did 10 years ago, there remains a significant and critical gap in parents' understanding about how deeply babies are affected by their earliest experiences. The survey also shed light on the kinds of behaviors that parents find most challenging: temper tantrums, crying, controlling emotions, and, to a lesser extent, sleeping, not listening, and feeding issues.

Knowledge Gaps and Information Needs

To respond to the gaps in understanding and the information needs identified in the survey, ZERO TO THREE created a new podcast series, *Little Kids, Big Questions*, developed with generous support from MetLife Foundation. The 12 podcasts are hosted by Annie Pleshette Murphy, vice president of the board of ZERO TO THREE and a past contributor to ABC's *Good Morning America* parenting segment. Each podcast features an interview with a national expert focused on the important issues revealed in the research. Some of those issues include:

- The need for better understanding of how deeply infants and toddlers' social and emotional development is affected by their early experiences.
- Misunderstandings about how early in life children can experience complex emotions, develop self-esteem, and control their behavior.
- The need to recognize the important influences on parenting decisions, such as one's own upbringing, faith and religion, and the guidance parents receive from their own parents.
- Understanding the role of fathers in the lives of very young children.

Given that more and more parents and professionals "plug in" to technology for information on child development, ZERO TO THREE developed this podcast series as an innovative way to offer information and resources, and because of the sheer volume of people who now turn to podcasts as a source of information on child development and childrearing. The articles in this issue of *Zero to Three* are adapted from the podcast interviews. They are offered here in recognition that not all parents and professionals have the opportunity to access the podcasts, and that some users might benefit from the printed interviews as an alternative context for learning and sharing information.

The Influence of Technology on Parenting Education

The advent of the Internet and digital technology has completely transformed the parenting education landscape. Consider the following:

- A recent survey, conducted as part of the University of Minnesota's Parenting 2.0 project (University of Minnesota, 2010), showed that 62.7% of parents go to the Internet at least weekly to seek information, advice, or support and to identify problems. More than 20% go to blogs for information, advice, and support. More than 52% read emailed newsletters.
- The penetration of MP3 players has been significant: 22 million Americans owned an iPod as of 2005 (Pew Internet and American Life Project, 2005).

And podcast consumption is rising. A 2008 study by Arbitron/Edison Media Research (Edison Media Research) found that an estimated 23 million Americans had listened to a podcast in the previous month. Projections of podcast growth estimate that by 2013, 37.6 million people will be downloading podcasts on a monthly basis, more than double the 2008 figure of 17.4 million (Edison Media Research).

- ZERO TO THREE's *Parenting Infants and Toddlers Today* (Hart Research Associates, 2010) survey revealed that:
  - 42% of all parents and 52% of parents with household incomes of $100,000 or more go to the Internet at least once a month for child development information. First-time parents and parents of very young babies (less than 9 months old) turn to parenting Web sites monthly with greater frequency, 60% and 62% respectively.
  - Approximately one in four parents uses parenting blogs, chat rooms, or social networking Internet sites once a month or more frequently. Parents who turn to these sources for information once a week or more often include the following groups: Parents under age 25 (18%); Hispanic parents (18%); and West Coast parents (17%).

The Potential of Podcasts

I've come to the conclusion that my "podcast time" is the equivalent of "me time"—it's a medium that allows me to dabble in all the topics I'm interested in, that challenges me and entertains me, so that when I pull into my driveway after an hour or more on the road, I'm ready to go back to meeting other (little) people's needs for the rest of the day. (39-year-old mother of two)

Given the fact that parenting podcasts are a more recent phenomenon, there is not a lot of research yet available specifically about parents' usage of this medium. However, research on usage in the general population provides some useful information: According to a December 2007 Pew Internet Project survey (Pew Internet and American Life Project, 2008), 34% of American adults and 43% of Internet users report owning an iPod or MP3 player, up from 20% of the total population and 26% of Internet users in April 2006. Men download podcasts in greater numbers than woman (22% vs. 16%), signaling that this may be a good vehicle for reaching fathers. In addition, the highest percentage of podcast users are 18–29-year-olds, underscoring this medium as a viable way to reach a new generation of parents, including teen parents.

Factors driving the jump in podcast consumption include: growing awareness of podcasts as a vehicle for getting information, increased penetration of the market by portable MP3 players and thus greater comfort with this technology (indeed, the University of Minnesota Parenting 2.0 Project (University of Minnesota, 2010) found that 59% of parents surveyed were "comfortable" or "very comfortable" using an MP3 player). Furthermore, a continual evolution in smart phones allows users to easily access podcasts on-demand. The result is that podcasts are becoming increasingly integrated into most Americans' media diet. The most recent data available (Pew Internet and American Life Project, 2008) finds that 19% of all Internet users—almost one in five—report that they have downloaded a podcast.

The *Little Kids, Big Questions* podcast series reflects ZERO TO THREE's commitment to delivering high-quality information and resources for parents and professionals in innovative ways that meet diverse needs. We hope that parents, professionals, policymakers, and educators will use this information to help make a positive impact on infants, toddlers, and their families. Visit ZERO TO THREE's Web site for additional resources and to listen to the podcasts online at www.zerotothree.org/parentingpodcasts or on iTunes at www.apple.com/itunes/.

PHOTO: ©ISTOCKPHOTO.COM/BEST-PHOTO

There remains a significant and critical gap in parents' understanding about how deeply babies are affected by their earliest experiences.

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How Emotional Development Unfolds Starting at Birth

ROSS THOMPSON
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In recent years, there have been changes in researchers' understanding of the importance of early social and emotional experiences, and their influence on early psychological growth that can be described as revolutionary. As is true of science, these discoveries have been slow to find their way to parents, practitioners, and policymakers, despite their importance to efforts to promote healthy early development for all children. Central to these discoveries have been new insights into the richness of early emotional experience, the sensitivity of babies and toddlers to the feelings of those who care for them, the early foundations for a positive or negative self-concept, and the challenges of self-regulation that are the focus of this interview.

Q: It's hard to imagine that a very young baby is experiencing much more than "I'm hungry," or "I'm tired." But when parents are told that an 8-month-old can be depressed or can be angry, this is a tough thing to understand. How do we know that babies have all of these emotions?

A: It comes from careful observations in studies where researchers look very closely at babies' facial expressions, their vocal expressions, and the organization of their behavior in common situations designed to elicit different emotions, such as facing a barrier to an attractive toy. In other work, researchers are looking at the overall quality of a baby's emotionality, their capacities for joyful play and animated sociability, or whether their predominant mood is sadness, when studying signs of emotional problems. It's easy for researchers to miss the rich emotional life of young babies, and, in a sense, parents have the same trouble trying to understand the feelings of their infants.

Q: So, if we were talking about a baby, let's say, who was depressed at 10 months old or even younger than that, what would you see if a mother brought a baby to you and was worried? And what might she see if her baby was depressed?

A: One of the things that is really apparent in infants and young children is their emotional vitality, their emotional animation. Indeed, it can be, at times, daunting to parents to see how their young babies seem to be all emotion. They go from states of great delight, to rage, to sadness or petulant crying, to happiness again. They are emotional in many respects. One of the things that is worrisome is seeing a child who is not showing that full range of vibrant emotions that one expects to see in a child of this age. They are emotionally flat, often seem sad or irritable, and they lack the emotional vitality that is expected in a child of this age, and these can be a sign of the child's depression. It is something sometimes seen in infants and young children who themselves have a depressed parent. So, it's when a child is subdued, sad, does not take typical delight in play or social interaction, becomes withdrawn, possibly irritable—this is when we become concerned. And these characteristics are easy to overlook because they do not draw attention, as does the behavior of a child who is angry and aggressive. It's important to recognize that, of course, kids vary temperamentally. Some kids are simply not as emotionally animated as others, so it's important not to overinterpret, but I think when you see a child like this, it's wise to ask, "Is there something going on here?"

Abstract

Ross Thompson, PhD, professor of psychology at the University of California, Davis, and a ZERO TO THREE Board Member responds to questions about the capacity of infants and toddlers to experience complex emotions and about how parents and caregivers can support early social and emotional development. He underscores the importance of allowing children to experience a wide range of emotions—including frustration and anger—as vital to their sense of competence and mastery. Furthermore, parents need support so that they can provide the kind of emotional support to their children that they need to thrive.

Q: One of the things you just touched on was how children are sensitive to their parent's depression. One of the interesting findings in ZERO TO THREE's recent parent survey (Hart Research Associates, 2010) was that only about 44% of parents thought that a young child could begin to sense whether their parents were angry or sad and could be affected by their moods. What you're saying is that they are very sensitive to their parent's moods.

A: We must shift our mindset a bit to understand that as much as we are striving as parents to remain sensitive to what's going on inside the minds of our infants and young children, they are also extremely sensitive to the feelings of the adults to whom they're attached. If you watch closely, what you find is that they are watching carefully the facial and vocal expressions, body language, and other behaviors of those who really matter in their lives. I have been watching a little girl who's been growing up with a mother who has problems with depression, and this child now at 3½ years old is extremely solicitous of her mother's feelings. She's constantly attending to what her mother is expressing, and how she's responding, and is very quick to ask, "Mommy, are you sad?" because sadness has been such a regular part of her experience. We have every reason to think that this sensitivity begins very early in life.

Q: This is a great opportunity for you to describe the still face experiment. It's such a dramatic representation of what a very young baby experiences when a mother is essentially not presenting any emotion.

A: It really is quite a striking demonstration. In the video, a mother and her baby are engaged in the kind of face-to-face joyful interaction that mothers and babies enjoy, and that fathers and babies enjoy, in the first year of life. But at one point, on an instruction from the experimenter, the mother turns her head away and collects herself, and then turns back to the baby and her face is completely impassive. She looks at her child, but she does not smile, she does not respond. All the wonderful back and forth interaction that had characterized them before is now absent. The baby responds first by quieting down, because something very important has changed, and she starts trying to elicit greater responsiveness from mother. Babies will smile at mother suddenly, or they'll reach out toward her, or they'll vocalize. They're trying to get her going, recognizing that she's not acting the way she typically does. As mother continues to be impassive, babies themselves become subdued, and sometimes they'll withdraw or cry and become fussy, because something has gone dramatically wrong in what they ordinarily expect to be true of how their mothers respond to them. All their social and emotional expectations for the mother have been violated. The last episode of the still face is when the experimenter instructs the mother to return to her naturally responsive way of interacting, and babies take a bit of time to warm up again. It's as if having experienced the unreliability of their mothers, they're now a little bit hesitant to get back into things.

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Young babies seem to be all emotion.

This experiment has been a powerful demonstration of the enormous sensitivity of young infants to the emotions of the people who really matter to them. It's a reminder that much the emotional world in which a baby is living is something they feed on. We're accustomed to thinking of attending to a baby's physical needs, and those are important. But it's very clear that human emotion becomes part of the nurturance of psychological development early on. And the emotional atmosphere that the baby feeds on in the early months and years of life becomes as important an influence on psychological development as is the nutrition of the baby's diet that nurtures physical growth.

Q: This gets to a whole other body of research that grew out of tragic stories of orphans whose physical needs were taken care of but whose emotional needs were completely neglected (Smyke et al., 2007). Not just their psychological development; but their physical development, their emotional development, and their cognitive development were severely impacted. That's a tragic and dramatic demonstration of what can happen to a child if they're fed and they're changed and they're protected physically, but the emotional interaction is not there.

A: It is quite remarkable because, although physical needs were attended to, they received little emotional nurturance or social stimulation. Most aspects of their development were delayed as a result. When I talk about this research, I show a picture to my students of one of the children in orphanage care and ask them to estimate the age of the child in the picture. Reliably my students will say, "Oh, this looks like a 6-year-old or maybe a 7-year-old." Well, the child in the picture was a 16-year-old, and she had spent her 16 years in one of the orphanages where children experienced gross neglect, especially of emotional needs. Her experience there had clearly delayed physical development, impaired mental development, and had an impact on language. So, emotional experience is tremendously important.

Q: The other side of this is that children are incredibly resilient, and healing can take place if, for example, a parent recognizes that she's suffering from postpartum depression, or that she is seriously depressed, or that the parents are having a hard time as a couple. Although, yes, this might have an impact on a baby, if she's able to get help—if she's able to get support—the baby will bounce back, and there's enormous healing that can happen relatively quickly. Would you say that's true?

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Infants and young children are extremely sensitive to the feelings of the adults to whom they're attached.

A: That certainly is true. Quite frankly, parenting a young infant is a tremendously challenging task, especially when it occurs in the context of all the other stressors that adults are trying to manage. When a parent is going through real difficulty, the important thing is to obtain the kind of support that will enable that parent to be a secure base for the child again. We should not exaggerate young children's emotional resiliency, but they respond positively when parents can provide the kind of nurturance they need.

Q: Let's talk a little bit about some of the research findings (Hart Research Associates, 2010). A lot of parents think that a child can't really experience a whole range of moods and feelings like fear and sadness. Thirty percent of the parents surveyed thought that a child can experience these kinds of feelings only when they're a little bit older, but certainly not at a young age. Why do you think this disconnect exists? Why do you think parents often underestimate the emotional sensitivity of their children?

A: You've got to be sympathetic with parents. When researchers have talked with parents about their experience of taking care of a young baby, what becomes clear is that parents often experience the young baby as a needy object of care. And why not? They're trying to keep up with the child's obvious and immediate needs, the feeding, diaper changing, keeping the baby warm and safe, attending to health concerns, monitoring weight gain, adjusting to changing sleep schedules and naps, and all the various things that go into addressing the needs of a young baby. In addition, from the parent's perspective, the baby is living in her own inner world of needs to which caregivers must respond. So the idea that this child is not just a recipient of care but is actually a person, that there's actually an emerging personality here, may be a little astonishing because parents are so focused on the more obvious needs of the young baby. I think it's helpful for parents if they can start perceiving even their newborn infants as people, because that is in fact what they are. And when they do so, the emotional richness and social sensitivity of the baby's life may also become more apparent.

Q: I think the flipside of that is sometimes parents may actually overestimate what babies are capable of controlling. In other words, the survey found was that there was misunderstanding about how much of their emotions children could control, that their ability to self-regulate was not what a lot of parents expected. Forty-three percent of parents thought that children could control their emotions by age 3 years, and 20% expected this by age 2 years. Is that a fair assumption, or is that really an unrealistic expectation?

A: Unfortunately it's what parents wish was true. But it is not true, especially in light of what we know about brain development. The areas of the brain that help children manage their impulses—to regulate their feelings, to control their thinking, to focus their attention—all of these self-regulatory features of children's behavior depend on the areas of the brain that are slow to mature. Indeed, these areas of the brain are continuing to mature well through adolescence and early adulthood. So infants and young children are really, if you'll excuse the expression, only taking baby steps in terms of self-control. We all recognize this in lots of other areas of children's behavior, such as attentional self-control. With respect to emotions, however, I think parents feel that children ought to be more self-controlling for lots of reasons. One is simply that when you are sharing life with a young child, a lot of their emotions are expressed in relation to their own desires and wants...children becoming petulant at the supermarket when they can't get a treat they desire or becoming uncontrollably frustrated when a block tower collapses. It's easy for parents to believe that children are in some cases using their emotions strategically, and that they have a lot more control over their emotional outbursts than they really do.

Q: That wishful thinking is there. When you say to your 2-year-old, "Would you be quiet now and just wait patiently in the line," you really wish they could. Especially if a child has a fair amount of language, one of the big surprises for me was how much tougher the 3s were than the 2s. At the point at which my kids were able to say a lot and express a lot, and seemed very grown up, when they lost it, it was that much more confusing to me when I had been told that the terrible 2s were named that because they were much less likely to be able to control their emotions.

A: Once children reach the stage of development when language enables them to express their feelings, sometimes their emotional under-control can be even more surprising. But psychological development is complex. It's also reflecting growth in children's sense of themselves that sometimes they become petulant because they really are willing to insist on what they want. The problem is that children easily lose control, and what started off as a persistent request can quickly explode into a full-blown temper tantrum. And the child may be as surprised as parents are that he has completely lost control. The problem here is that when parents believe that children ought to be able to manage their emotions by the ages of 2 or 3 years, it's very easy for them to interpret these emotional outbursts as being willfully defiant. And that's when parents can respond angrily. They can respond punitively, because they're interpreting the child's behavior as deliberately being uncooperative when the child may be incapable of controlling his own feelings and expressions.

Q: What you're describing is something that a lot of parents struggle to understand—that this is really something that's a function of the children's brain development; not anything they're doing on purpose.

A: It really is. And when parents and others who work with young children understand that, they realize that it is the adult who has to try to provide the self-control that the child's brain is not yet mature enough to be able to accomplish. There are things that parents can do to help children manage their emotions. Adults can use words to help children understand what they're feeling, to put into words why they're feeling this way, and to validate that: "You're so sad. It really feels bad when you build something and it all falls down." If the child is having the experience of flying off the handle, adults can provide a calm focus that they can use to help the child calm down. If the parent instead gets upset and becomes emotionally overreactive, then

you've got two people each feeding off the downward spiral of each other. For some children soothing touch—repetitive rubbing of the back, just to give the child a calming influence—can be helpful if children enjoy that kind of physical contact.

Q: I wanted to say one thing about how important it is to support other parents in those situations. The more we can do to let parents know that we've all been there, that this is something that's very embarrassing, but it's not because you're a bad mom; it's just the way it is.
A: That's right. And when we can show that we've all been there, we've all had this experience—you are no worse a parent because your child is having a meltdown in the supermarket or child care center—it helps. Then we're helping the parent become a better parent with their child.

Q: One of the things you've worked a lot on is this idea of how a child does develop feelings of being good or bad about themselves. When you talk about self-esteem, I think there's a lot of confusion about where that comes from and how early a child might be capable of feeling such things. What adults say to them, or how adults interact with them, has a dramatic impact. In the parent survey, only about 4 out of 10 parents thought that a child was capable of feeling good or bad about themselves when they were 2 years old. In fact, most parents didn't think that happened until they were quite a bit older. Is that in fact the right timing, or do children have a sense of feeling good or bad about themselves sooner?
A: One of the things that researchers have been surprised to learn is that young children are developing a positive or negative sense of themselves very early on. Parents don't often think that they do so because they've been told that young children are egocentric, that they don't have a sense of self and self-esteem until much later. So parents are not as attentive to the influences on young children's sense of themselves in the early years of life.

Q: When you talk about *egocentric*, what does that really mean?
A: Well, in the past adults thought that young children have a lot of difficulty seeing the world except from their own point of view. Adults believed that children are wrapped up in their own perspective, in their own feelings, their own desires, their own needs, and their own thoughts. Adults thought children really have difficulty appreciating how other people might have feelings and thoughts and needs and viewpoints that are different from a child's own. That idea has been completely turned on its head by research of the past 20 years. Researchers now recognize that infants, before their first birthday, are already aware that Mommy has thoughts and feelings that are different from their own and that what's going on in Mommy's head is different than what's going on their own heads. The emotional and social sensitivity of young children is apparent in many everyday situations. For example, one of the reasons why infants will look to their mothers when they encounter a friendly stranger is because they know that although they can't figure out how to respond to the adult, Mommy might be able to. And by looking at how she's responding, they can get some clues about how they should respond. And that's very non-egocentric.

Understanding that young children are not egocentric is important to understanding many aspects of the emotional and social sensitivity of young children. Recognizing that young children are not completely wrapped up in their own point of view, one can understand they're trying to figure out what's going on in other people's heads. If children can make sense out of what the other people are feeling and thinking and wanting, and what their goals, desires, and intentions are, they can understand why people act in the ways that they do.

One of the reasons that young children are so sensitive to others' emotions is because emotions are a child's first entrée into the internal world of other people. Emotions are the first things they can understand that give them a clue about what's going on in that other person's head.

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A warm, secure parent–child relationship is one of the most important predictors of positive self-concept in preschoolers.

Q: Are they sensitive to that, Ross, even on television?
A: Very young children experience TV in a way that is different from how adults do. They become captivated. Indeed, they become mesmerized by the bright colorful images of a TV screen. Actually understanding the content of what they're seeing on a television show, however, will take several years to develop. For very young children, the best use of televised content is when they are viewing in the company of an adult who can help them understand, interpret, and respond to what they are seeing. This is one of the reasons why some specialists recommend TV be restricted for very young children.

Young children are sensitive to other kinds of emotional experiences. We have not yet discussed peer relationships, but children who are in child care or an early childhood education setting are in emotional environments where they are witnessing and experiencing strong feelings by other children. This is also an important context in which young children learn about other people's feelings and begin to learn how to manage their own feelings.

Q: You will see children go over to comfort another child. One child may whack another kid over the head when he takes her truck from her, but they will also exhibit unbelievable empathy and caring behavior that, for a lot of parents, is both surprising and really sweet and wonderful.

Let's go back to this idea of self-esteem and positive self-image. This

Photo: ©iStockphoto.com/Alberto Pomares

It's easy for parents to believe that children have a lot more control over their emotional outbursts than they really do.

is something that a lot of parents are confused about. We do know that the idea of constantly telling a child they're terrific, or applauding every little thing that a baby does, may not necessarily be the way to help them develop a really good self-concept. But, it's obviously not a good idea to berate what a child does, or belittle their feelings. So, what's a healthy balance? What would you recommend to parents in terms of being aware of how this develops?

A: It's one of those areas where it's really easy for parents to feel like they don't quite know what to do. I think one message that a child needs to receive is that they are loved unconditionally, that they are a person of inestimable value to their parents. Researchers have found that a warm, secure parent–child relationship is one of the most important predictors of positive self-concept in preschoolers. They can understand that they're loved unconditionally.

It is a child's effort—while trying really hard to complete a puzzle or draw a picture—which children are often looking to have recognized by their parents. We know that children's earliest experiences of emotions like pride, or guilt and shame, are often coming from the reactions of parents to their behavior and achievements. Their own sense of pride is built upon having that drawing applauded by the adult. It contributes to their own sense of pride in their accomplishments.

Q: This is often a tough dance that parents have to do, knowing when should they swoop in as a child gets frustrated. It is important to stand back, to let a child muscle through a very frustrating experience, because the payoff is big. You actually deny them if you make that block tower stand up straight even though it probably was going to come tumbling down.

A: Children need to have experiences in which they can develop their skills, in which they can have the experience of working hard and accomplishing their goals or, alternatively, coping with the frustration of their goals. They need to have the experience of developing the tools of self-control that sometimes develop when something they really, really want is not something that they can have. And a parent who feeds every child's request—who jumps in before frustration and problem-solving efforts can ensue, a parent who gives children all that they want in an effort to ensure that they are perpetually happy—may be making the child's development of pride in their own accomplishments and efforts that much harder. I always thought that perhaps better than being a helicopter parent, who jumps in on every occasion, one needs to be an attentive parent, covering the child's back, but letting the child develop the pleasure and pride in mastering these developmental challenges on their own with the parent being there in case they really, really do need help.

Q: So, you're saying letting a child experience a certain amount of frustration is OK; that the goal as a parent is not to make sure the child is happy 24/7, and in fact, that can have a negative impact. Let's talk a little bit about what sometimes makes kids unhappy. You're at the playground. You're having a great time, but you've got to get home and little Ross, Jr. does not want to budge. In the perfect world, how would you advise a parent to handle that in a way that shows love, shows that you are understanding, but are still going to get the kid into the stroller and home?

A: One thing a parent can do in a situation like this is let the child know in advance when it's going to be time to leave. Children have trouble with transitions because self-regulation is required. So a parent can help the child with self-management by signaling a couple of minutes before it's time to leave that they're going to have to begin picking up their things to help the child get ready for this. But if the child is happily playing and wants to continue, he may become petulant. In a situation like this, it's important for the parent to give the child the experience of learning to cope in a world where there are limitations, and parents have to be able to manage themselves when they're in those circumstances. So, a parent should validate what the child is feeling—"I know you're sad because you're having such a good time playing. It's frustrating having to leave to go home when you don't want to quit" but at the same time making it clear that it is time to go. "We can't stay any longer." Give the child some choices, such as, "Do you want to get in the stroller before we go, or do you want to walk with me?" Parents can help the child have the tools to cope with this situation without feeling that the only answer that the parent can accept is to give in, because then parents have robbed the child of a chance to find ways of coping with disappointment with the support that the parents can provide.

More than ensuring that the child is happy all the time, an important goal for parents is helping to ensure that their child becomes competent, and sometimes competence arises from having to confront the things that frustrate the child and make her unhappy, and figuring out what to do in those circumstances. And the early childhood years are a time for learning these skills. Children can do that well when parents are with them, maintaining a calm presence in helping them figure out how to cope.

Q: One of the saddest things is when a child is not curious. When a child is tentative in how he explores his environment, sometimes you get this feeling that he has not really been supported, or maybe he's even been punished for trying something. Is that going back to what you were saying earlier about how we can recognize when a child just has not been getting the kind of emotional

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support he needs, and is that something one would see in a child who was either depressed or who really had not had this kind of support?

A: One of the things that researchers have learned about young children is that the environment of relationships in which they live is foundational to their experience of the world. It has a lot to do with how children think about themselves and the self-confidence with which they approach the world. We have found in our research that the security and warmth of the parent–child relationship predicts a positive self-concept. When mothers are reporting a lot of stress and report depressive symptomatology, on the other hand, their children tend to have a more negative self-concept. A child's natural tendency is to seek support from their parents, and when they can count on this support, they face the world with confidence. They go out and boldly go where no toddler has gone before. Not because they're foolish, not because they're daring, but because they are utterly confident that the parents have their back and will be there if they're needed. It's striking when we see young children who don't have that confidence, who tend to hover close to where caregivers are, who don't venture forward, and who don't really show that active curiosity about mastering this exciting world around them. They have to watch out for themselves without the confidence that an adult will be there then needed.

Q: For parents who are struggling, it's so critical that they take care of their own needs. The main reason to do so is because parents can't give if they're so drained, or so challenged themselves. Taking care of one's own needs as a parent is actually something they're giving to their child. It's something that a lot of moms in particular need to know and keep in mind, especially when their babies are young. And it is so tough.

A: And in the same way that, as parents, we give support to each other when a toddler is having a meltdown in a supermarket, parents need to recognize that they aren't alone in the parenting process. This is where partners and friends and extended family members can play a wonderfully enabling role in helping those primary caregivers be the best kind of caregivers they can be.

Ross Thompson, *PhD, is professor of psychology, University of California, Davis, and a ZERO TO THREE Board Member. Dr. Thompson's expertise focuses on early personality and socio-emotional development in the context of close relationships. His work in the cross-disciplinary field of developmental relational science pursues dual tracts. First, his research explores the influence of relational processes on emotional growth, conscience development, emotion regulation, and self-understanding. Second, he has worked on the applications of developmental relational science to public policy problems concerning children and families, such as divorce and child custody, child maltreatment, grandparent visitation rights, and research ethics.*

Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

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Nurturing Brain Development From Birth to 3

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Over the past 20 years, there has been an explosion in research examining how very young children come to understand the minds of others. Even newborns have some ability to link their own emotions with others as they demonstrate the ability to imitate facial expressions and respond to the emotions of those around them. During the first few years of life, children develop an increasingly complex and sophisticated understanding of how the mind works and, much as a scientist develops a hypothesis, children learn about the world around them in what turn out to be very clever "experiments" in how things and people operate.

Q: Almost 30 years ago it was thought that babies were not just blank slates, but that they were, as you said in an article, irrational, egocentric, and immoral. We didn't know about the brain's plasticity, which we now know exists. There's this amazing growth we actually can see in ways that we never did before. Can you talk about what kind of research is being done right now, what you think are some of the most exciting arenas that you and others are working in that helps us understand how babies learn, and what goes in those not-so-little brains?

A: Well, there's been a major revolution on understanding babies and children over the last 30 years or so, and part of it has come just because researchers have been taking babies and children more seriously. But a lot of it is because we've developed new methods—new ways of asking babies questions in their language instead of in our language. So, as adult psychologists, or just adults in general, we're used to thinking that the best way to find out what someone thinks is to ask them. And of course you can't do that with infants at all. They really look dumb if you ask them questions. Even with preschoolers, if you ask what they think about something, you're likely to get a beautiful stream of consciousness about past birthdays and ponies, but you're not likely to get anything that sounds very rational or logical.

So, the first thing that we had to figure out was how we could get babies and children to tell us what they know in a way that doesn't require them to use language to talk, or at least that requires them to do that in very simple ways. A lot of the research has come because we've figured out by using videotape, for example, how we could take where babies look, what they reach for, what preschoolers do—we could use those kinds of techniques to actually pose questions to babies and children the right way and get them to answer. What we've discovered is that even the very youngest children already know more, learn more, care more, feel more than we ever would have thought in the past.

One of the biggest changes that has happened most recently is that the whole first wave of this research was about how amazingly much babies know from the time they're born. Far from being a blank slate, even the youngest babies already seem to have some basic ideas about other people, about language, about the physical world, about the objects around them. For example, newborn babies already imitate the facial expressions they see other people around them producing. If you stick your tongue out

Abstract

Alison Gopnik, PhD, a researcher and professor at the University of California at Berkeley, responds to questions about the ways researchers are discovering the complex processes of early cognitive development. Dr. Gopnik shares some of the creative research methods that are demonstrating how infants are figuring out what is going on in the mind of another human being, an area of research that has come to be called *theory of mind* and has made a significant contribution to the understanding of the remarkable progress of early cognitive and social development in the earliest years of life.

at a newborn baby, he will stick his tongue out at you. That might not seem too amazing until you think about the fact that there aren't any mirrors in the womb. Babies have never seen their own faces, and yet they seem to link the way it feels inside of them when they smile with the smile they see on the face of another person. So, from very early on babies seem to know things about the world—in the physical universe. They seem to know things about how objects move, about the fact that one object will appear from behind another object. In the linguistic universe they seem to know some basic things about how the sounds of language work.

The more recent work, which is just as exciting, shows that babies are born knowing a lot, but they also learn a lot, and they learn a lot even when they're very little babies. Babies and young children are very sensitive to the complicated patterns of the sounds and sights that they see around them, and they can actually learn from those patterns just the way that scientists learn from looking at a statistical pattern. This research started out with language, so people would play a sequence of sounds that have some particular pattern—not language sounds; just arbitrary sounds, for example, a sequence where the syllable BA always followed CA, but never proceeded TA. And it turned out that even 7-month-old babies could figure out those patterns.

Q: How did you see that? What is happening in a lab when you're testing a baby like this?

A: There are a lot of different techniques that people have used, but one of the important ones is what's called the *looking time technique*, and this takes advantage of the fact that babies look longer at things that are surprising or unexpected than they do at things that they expect or predict. For instance, you could let babies listen to a bunch of sounds that followed some rule—some pattern—and then you could play the babies either a new sound that followed the pattern or didn't follow the pattern. Even 8-month-old babies would listen longer if it was an unexpected pattern, if it broke the rule, than if it was an expected pattern. In an amazing study by my colleague Fei Xu at Berkeley (Xu & Garcia 2008), she showed the babies a box full of ping pong balls, 80% white, 20% red, and then the experimenter would take some balls out of the box. Sometimes the experimenter fit the statistical pattern in the box, for instance, she would take four white and one red ball out of the mostly white box. Now, that's something that is completely predictable. That's the kind of statistical pattern that you'd expect. But sometimes the experimenter would do the opposite: she would take four red and one white ball out of that box. And in that case the babies looked longer even though it wasn't an impossible sequence of events, but it was just much less likely than the four white and one red. And babies seem to be sensitive to that probability. They seem to understand the fact that that was an unlikely outcome. One way to put it is these babies are just like scientists looking, and when they see that four red and one white they say, "Aha, a less than .05 probability if you're looking at results." There must be something else going on here. This couldn't just be random. So, even grownups have a lot of trouble understanding probability, but it turns out that little 7-month-old babies already are figuring out quite a lot about it.

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Babies are very sensitive to the complicated patterns of the sounds and sights that they see around them.

Kushnir, Xu and Wellman (2010) did a follow-up study in which they tried to ask, "Can babies use those statistical patterns to actually learn something new about the world?" Is it just that they're sort of sensitive to the statistics, but in a kind of mindless way? Or are they really using the statistics to figure out something new? Incidentally, one of the things that's most important for babies to figure out, and one of the areas where there's been the most exciting research, is figuring out what other people are like, figuring out what's going on in the mind of another human being. And that field of research, which we started back in the 1980s, has come to be called *theory of mind* and has become an enormous and very exciting field of research.

So, here's a question you could ask. When babies see these patterns of statistics, do they actually use them to figure out what's going on inside of the mind of another person? To test that problem, they did the same experiment I just mentioned with the ping pong balls, but now they did it with little toys—green frogs and yellow ducks. This was with 20-month-old babies. The babies saw someone take mostly green frogs from a container that had mostly green frogs with just a few yellow ducks, or else the baby saw the experimenter take mostly green frogs from a container that had mostly yellow ducks. Then the experimenter would give the babies a bowl full of green ducks and a bowl full of yellow frogs and put out her hand and say, "Can you give me one?" So, here's the thought process. Let's take the first case. Suppose the experimenter takes mostly green frogs out of a box mostly full of green frogs, well that doesn't tell the baby anything about what she likes. That's just a sort of random draw from the box. So, really, there isn't anything else she could have done but take the green frogs.

But if she takes mostly green frogs from a box full of yellow ducks, then that tells the baby it isn't something that could just happen by chance. It's a really significant event. So, the best explanation for that pattern of statistics—if the baby were a little scientist, or a little psychologist—is, "Oh, well, she must want the green frog." And it turns out that that's exactly what the babies conclude. So, when they see the person take the green frogs out of the box full of mostly yellow ducks, then they'll give her the green frog, whereas if she takes green frogs out of

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Even the youngest babies already seem to have some basic ideas about other people, about language, about the physical world.

a box full of green frogs, they'll either give her green frogs or yellow ducks equally. They seem to be able to use the statistics to figure out something very important about other people: this person could have liked the frogs, or she could have liked the ducks, but, look, it turns out she really likes the frogs.

Q: This reminds me of a wonderful study of the little Goldfish Crackers and the broccoli, and I'd love you to talk about that because it's one of the most elegant pieces of research that I have heard about in a long time.

A: The study about the yellow ducks and the green frogs took off from a study that my student, Betty Repacholi and I did a bit earlier (Repacholi & Gopnik, 1997). So far we'd learned that babies seem to know about statistics, and they can use statistics to figure out what someone else wants. However, there was a deeper question, which is "When do babies get to realize that what they want may be different from what someone else wants?" The ability to take the perspective of another person is a profound ability. It's at the root of a lot of our social and moral lives. The conventional wisdom was that this skill wasn't something that developed until children were 8 or 9 years old.

We thought maybe we weren't asking the babies the right way, so maybe if we asked the babies about something that they know in a way that they understand, we could show that they could take someone else's perspective earlier. The way we did this was to give them two bowls of food. One bowl of raw broccoli and one bowl of Pepperidge Farm Goldfish Crackers. And the babies, even in Berkeley, like the crackers more than they like the raw broccoli. Then we showed the babies the experimenter taking a little taste from each bowl of food, and she would either make a happy face—so, she'd go, "yum, crackers—I tasted the crackers,"—or else she would make a disgusted face—she would go, "Oh, yuck. Crackers. I tasted the crackers." Half the time she acted as if she had the same preference as the baby. She said, "Mmm, crackers," and, "Oh, yuck, broccoli." But half of the time she reversed it and her preferences were the opposite of the baby's. So, she said, "Mmm, broccoli," "Oh, yuck, crackers." And then she put the two bowls of food out—one bowl of broccoli and one bowl of crackers—and put her hand out and said to the baby, "Can you give me some?" Now, the remarkable result was that the 18-month-old babies would give her the crackers if she liked the crackers, and they'd give her the broccoli if she liked the broccoli. So, these very young babies, only 18 months old, already seemed to understand that someone else might have a different preference than they did, and that—interestingly, from the perspective of morality—they also seemed to have the impulse to give someone what they wanted rather than what the child wanted. On the other hand, the 15-month-old babies didn't do this. So, the 15-month-olds just always gave her the crackers.

The two remarkable things about this study are that 18-month-olds—who are such young babies, just starting to walk and talk—could understand something so profound about other people. But the equally striking thing is that this isn't just something that's there from the get-go. It's not there innately. It actually seems to be something that babies are learning between the time they're about 15 months old and about 18 months old. And that's where the green frogs and yellow ducks study comes in. We think that the way that they are learning may be by looking at what people do, looking at the patterns in what people do, and figuring out from those patterns, "Oh, I see, it has to be that people sometimes don't want the same thing."

Q: What all of this speaks to is this amazing growth in children's brains in their early years. What I'm hearing is that having a child experience healthy relationships has an impact on their brain development. Is there that connection? Or were you looking specifically at cognition more than their emotional growth?

A: What researchers are increasingly discovering is that it isn't as if there's a strong separation for babies between their cognition, or what they're figuring out about the world, and their social and emotional life. So, if you think about this whole field of theory of mind, figuring out what's going on in the mind of another person, that's something that's cognitive in the sense that babies are using these abilities to do statistics and do experiments to try and figure out what's going on in the world.

Of course, once you figure out what's going on in someone else's mind, that really changes the way that you interact with them. And the opposite is true, too. So, the way that babies are learning about other people's minds—and the kinds of conclusions that they're drawing about other people's minds—depend on what kinds of things they see other people do. If they see other people behaving in a loving and secure way, then that seems to be evidence that lets the baby say, "Oh, okay. That's the way love works. When you love someone, you take care of them." Whereas if they see someone behaving in a way where when the baby cries the caregiver turns away, then babies will conclude, "Oh, that's the way human beings work. That's the way human interactions work." There's a constant back and forth between the kind of emotional and social information that babies are getting and the kinds of cognitive learning capacities that enable them to figure out what's going on.

All of this learning takes place in a protected, nurturing context. One of the interesting ideas—it's an evolutionary idea—is "Why do we have useless babies at all?" After all, why is it that babies are so dependent on adults and require so much nurturing? And one of the evolutionary ideas is that that early period is where they're just free to learn and explore without actually having to put all that learning to work. And then later on as they're adults they can take all the things they learned when they were babies and can actually put them to use to practically get on in the world. Having a caregiver who's actually willing to invest in taking care of them is one of the prerequisites for being able to do all this amazing learning that we know babies are capable of.

Q: This idea of our babies being dependent on us from birth in a way that other species aren't is directly related to the fact that we can think in ways that most other species can't.

A: That's exactly right. It's fascinating if you look at other kinds of animals, for example, if you look at different species of birds, some kinds of birds are much smarter and more flexible and depend on learning much more as adults than others do. The poster child for this is actually a bird called the New Caledonian crow. This is a crow on an island

near New Zealand which turns out to be as smart as many primates. It can do things like use tools, for example. An incredibly smart crow. Well, it turns out that crows are babies or fledglings until they're 1 year old, and the New Caledonian crows' babies are immature for even 2 years, which is a very long time in the life of a bird, in contrast to the birds in families like chickens that are mature in a matter of weeks.

It turns out to be a very good generalization that the longer the period of immaturity, the more the adults can be flexible and learn. If you think about it, that kind of makes sense—that the disadvantage of an evolutionary strategy of learning is that while you're doing all that learning, you're going to be helpless, so you don't want to have that mastodon charging at you and be saying to yourself, "Mmm, a mastodon, what should I do? Maybe a stick would work. Perhaps a stone." You want to have all that in place by the time the mastodons are out. This may be the reason why the New Caledonian crows end up on the cover of *Science* magazine and the chickens end up in a soup pot. The way that nature seems to have solved that problem is by having a kind of division of labor between the young critters that don't have to do much, but can learn a lot, and then the old critters, like us that have to do a lot—including taking care of the young critters—but can rely pretty much on the things that we've already learned.

One of the things I say is that you can think about babies and young children as being the research and development division of the human species, and we adults are production and marketing. So, they're the blue-sky guys all set to go who get to eat cereal and have fun and think big thoughts all the time, and have wild, crazy ideas, and we're the ones who have to figure out how to take all those ideas and actually bring them to market. A good generalization is that you need someone to take care of you if you're going to be able to be that free and creative.

Q: How important it is to understand this and to respect this—because the kind of interactions that we have with our children when they're very young is so unbelievably important and is much more profound than we ever really realized.

A: As we researchers study babies and children more and more, what we've discovered is that there's even more going on in that early period than we would have thought, which is supported by the scientific data. There's something very important to emphasize here, which is that often when parents hear how much their babies are learning and that they're learning from parents their immediate reaction is to think, "Oh, well, I should sort of be like a teacher in school to my baby." Their first impulse is to think, "Oh, well, I should make sure that my child's nursery school looks more like a second or third grade or a high school rather than like a place where the children are just running around and playing." It's very important to emphasize that the research shows just the opposite. One of the most exciting things in the recent research has been that psychologists are starting to show that playing actually is a way of figuring out the world. I said before we think that a lot of what babies and children are doing is like what scientists are doing. One thing scientists do is analyze statistics. But of course another thing that the scientists do is experiments, and we increasingly think that babies and young children are doing these experiments, too, except that when they do it we call it getting into everything.

Let me tell you about one really wonderful experiment that Laura Schulz at MIT and her student Elizabeth Bonawitz (Schulz & Bonawitz, 2007) did that demonstrates this beautifully. They showed 4-year-olds a box that had two levers on it and two little puppets on the top that popped up. Half the time for half the children, they would set it up so that the child would press one lever and the experimenter would press the other lever at the same time, and both the puppets would pop out. In the other condition the child would press one lever and one puppet would pop out, and the experimenter would press the other lever and the other puppet would pop up. So, in the first case you haven't really figured out how that toy works, because it's what scientists would call a confounded experiment: there are two levers and two toys, and the child hasn't really figured out how each lever works with each toy. In the second case the child has figured out how the toy works. She knows one lever makes one puppet pop up, and the other lever makes the other puppet pop up. Then the experimenters just left the children alone with this toy and another new toy and they saw which toys the children played with. They discovered that the 4-year-olds were much more likely to play with the mysterious toy, the toy they hadn't figured out, rather than with the toy that they understood perfectly well. If they already knew how the lever–puppet toy worked, then they would go on and try to figure out the new toy. But if it was mysterious, just like a scientist with a problem to solve, they just kept playing, kept exploring until they figured out how it worked. So, what looks like just playing and messing around to parents is actually a very clever experimental research program.

Q: Parents are often asking me "what's the best toy to get for my 3-year-old or my 4-year-old?" and there's certainly a lot that parents are up against in terms of being told that something is an educational toy, or this is not good for kids to play with. Is there an example of a couple of toys that you can think of that, if you were shopping for a 3-year-old, you would say, "Okay, this is the kind of thing I'm talking about," this is a toy that will provide endless amusement, because this kid is going to have to figure out how it works?

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The best kinds of toys are ones that let children themselves do lots of different things.

A: Just as exploratory play seems to help children understand the world, pretend play seems to help children understand the world. And, in particular, pretend play seems to be especially important for understanding other people. It turns out that children who engage in a lot of pretend play—and children who have crazy imaginary friends, and spend a lot of time off in these alternate universes with ninjas and mermaids and so forth—actually are better at understanding people. And researchers think that pretend play is like a little scientific thought experiment trying to figure out how do people work, in which a child asks "What can I predict about what people will be like?" So, the best kinds of toys are ones that let children themselves do lots of different things and let there be lots of exploration, and that support lots of different kinds of pretend play. For example, a little toy farmhouse with lots and lots of animals and little people in it, or a pretend cell phone, or a pretend computer—things that allow children to try out all the different ways that adults function.

Photo: Kiwi Street Studios

Pretend play seems to help children understand the world.

It's a sort of a catch-22 in some ways because the less the toys do, the better as far as the children are concerned, because the more there is for the children for to do—and the children are always going to be much more imaginative and think up many more new things than any toy manufacturer could. So, the old standbys like brooms, and toy dishes, and toy tea sets—and I think, nowdays, toy computers and toy cell phones—are examples of things that let children explore in lots of different ways. If you think about how many different things a child can do just with a set of four blocks, or a set of five mixing bowls that actually let them do many, many more different things than most electronic toys do. These kinds of toys also play into exactly the problems that children are trying to solve at this point. As adults we don't even think about, say, working out the way one thing can fit into another as being a problem to solve. We think a problem to solve is figuring out all the letters of the alphabet, or being able to recognize numbers. But many of the problems that babies and children are trying to solve are problems about just the everyday things that they see around them. Those are the problems that are most engaging and interesting for the toddler. There's certainly nothing wrong with teaching children to recognize letters, but that's actually a much less profound discovery than the discoveries that children make by pretending to be princesses or by stacking a bunch of mixing bowls.

Q: I'm assuming it's important that if you join a child in their play that you let them lead the way. Letting them figure out that the blocks may not stay in that tower if you put that big one on top is something important for them to struggle with and experiment with, rather than to show them that it's great to start with the big block on the bottom.

A: There's a fascinating study which is just coming out in the journal *Cognition* (Bonawitz, Shafto et al., in press) which demonstrates this in a very striking way. They showed 4-year-olds a toy that could do lots of different things. If a child pressed a button and it squeaked, or he pulled a ring and it would make another kind of noise, and it had a hidden mirror that the child could look in—it had a whole bunch of different kinds of things that it could do, many of which weren't obvious when a child just looked at the toy.

Then they had the experimenter appear and the experimenter would do one thing to the toy to make a result. For example, she pressed the button and the squeak would take place. The interesting thing was sometimes she would say, "Oh, look at this toy." And then press the button as if she were pressing it by accident. She'd trip and bump into the toy and the button would go off. Sometimes she'd come in and say, "Look; this is my toy. I'm going to show you how it works." And she would press the button.

They discovered that when the button just got pressed by accident, the children would press the button and would also go on to explore all the other things that the toy could do. When the experimenter said, "This is my toy, I'm going to show you how it works," and pressed the button, the children only pressed the button. They didn't go on and figure out all the other ways that the toy could work.

We have an experiment that showed much the same thing. In our experiment we show children different sequences of actions they could perform to make a toy work. So, they could, say, squeeze it and stretch it, and roll it to make the toy go. And the question was whether they would figure out which ones of those actions were really necessary and which of them weren't. And, again, it turned out that if we just said to the children, "I don't know how this toy works; let's figure it out," the children would go and solve that problem. But if we said to them, "This is my toy, I'm going to show you how it works," they would just imitate exactly what we did; not try to work through rationally which of the things that we did actually worked and which ones didn't. Now, that doesn't mean that adults shouldn't ever show children things. But it does mean that there's a kind of double-edged sword about teaching that, on the one hand, teaching can be a very quick, efficient way of learning specific things, but, on the other hand, teaching too much can actually narrow down the options that children would get if they were just spontaneously exploring. And sensitive parents and caregivers intuitively get a sense of when to let children explore and figure things out for themselves and when to just give them the right hint at the right moment, rather than having an agenda that they want the children to accomplish.

Q: I'm thinking of all the 2-year-olds I see around me playing with tablet computers, or playing with mom or dad's smartphone on an application that may

Learn More

Web Site

Alison Gopnik
www.alisongopnik.com

Books

The Scientist in the Crib: What Early Learning Tells Us About the Mind
A. Gopnik, A. N. Meltzoff, and P K. Kuhl (2000)
New York: William Morrow

The Philosophical Baby: What Children's Minds Tell Us About Love, Truth and the Meaning of Life
A. Gopnik (2009)
New York: Farrar, Strauss, & Giroux

Article

How Infants Come to Understand Others
A. Gopnik & E. Seiver (2009)
Zero to Three, 30(2), 28–32

have many, many bells and whistles. I know parents are struggling with how they want their children to have opportunities to play with these things, which are highly portable, and they're really entertaining, but they also are worried. And I've been asked by a lot of parents whether an tablet computer is a good idea or whether, in fact, they shouldn't really let their kid play with it. I'm wondering if this concerns you?

A: The answer is researchers don't know, because these things are so new that we haven't actually been able to do any good studies about what will happen with them or the consequence of them. In general if you look at the way that children play, one of the most important things that children, even very young children, learn about from playing is about how the world of the grownups around them works. So, a hunter–gatherer child learns how to use bows and arrows and machetes by the time he's 6 or 7 years old, which is sort of terrifying for the middle-class parents. But those are the things that are important in those cultures and those worlds, and sure enough those children learn how to master them. My view is, after all, what are they doing? What they're doing is figuring out how to use our screens, and our tablets, and our smartphones, and our computers. I think it would be sort of hopeless and wrong to expect that children—including young children—weren't going to be fascinated and interested in trying to master the skills of working with those machines. And something that we all know is that it's actually much easier to learn those new skills when you're a child than it is when you're an adult.

There's a general principle of moderation in everything. Just like for myself, doing other things besides just sitting in front of a screen all day. Especially with these new technologies, like the tablet computers and smartphones that have a touchscreen interface that are actually more interactive, the fact that the children are engaged in that is a pretty good sign that they're learning from it. So, I don't think I would want to say, "Oh, there should be a general ban on ever interacting with a screen until you're 6 or 7 years old. On the other hand, I think, just as with nutrition, having lots of different kinds of things that the children can interact with is the best recipe for making sure that they're learning a wide range of different skills—and having them be able to interact with lots of different people, too.

Alison Gopnik, *PhD, is a professor of psychology and affiliate professor of philosophy at the University of California at Berkeley. She is an internationally recognized leader in the study of children's learning and was one of the founders of the study of theory of mind, illuminating how children come to understand the minds of others, and she formulated the* theory theory, *the idea that children learn in the same way that scientists do. She is the author of more than 100 articles and several books including the besteselling and critically acclaimed books for the public* The Scientist in the Crib *and* The Philosophical Baby. *She has also written for* The New York Times, Slate, *and other newspapers and magazines and has appeared extensively on TV and radio including the* Charlie Rose Show *and* The Colbert Report.

Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

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The Influence of Media on Young Children's Development

ELLEN WARTELLA
Northwestern University

Advances in technology have led to a steady increase in the amount and type of media that young children interact with on a daily basis. While the long term impact of the burgeoning role of technology in the lives of very young children is yet to be known, researchers are beginning to explore how they interact with and learn from various forms of media.

Q: A few months ago I went to my niece's baby shower, and she received "educational" videos for young children and babies. I would love to start with your thoughts on what we mean when we say something is educational, and is it true that there is such a thing as educational media?

A: It's really interesting when you think about it. For the first time in history infants and toddlers are spending time with objects other than with people. There's been a lot of concern about the nature of these videos and television shows. So, what's meant by educational media? It's typically an attempt to craft a particular message for a specific age group of children that is thought to be within their ability to comprehend and to learn from. Can you have educational media? Absolutely. The evidence of more than 40 years of *Sesame Street* has demonstrated that people can develop quality educational media for preschool children (Fisch & Truglio, 2001). The jury is somewhat out regarding the development of educational media for children less than 2 years old, although I can say that researchers know much more today about how babies interact with video than we knew even 4 or 5 years ago. (Courage & How, 2010)

Q: What have you been working on or are you aware of that is particularly striking in terms of how babies learn when they're watching a screen?

A: One of the things we know, and parents know this really well, is that babies are engaged with the medium and that they react to the medium. It's not just that their eyes are glued on the screen, but they demonstrate some evidence of understanding what goes on by the way they follow the screen with their eyes, occasionally by the way they laugh, or express themselves in front of the screen. We shouldn't discount that information about the nature of how babies are learning from screen media.

Researchers also have done some experimental studies in controlled environments over the last 5 years which suggest that babies can make sense, starting at around 18 months, of what they see, and use that information to solve problems (Lauricella, Gola, & Calvert, 2011; O'Doherty, Troseth, Shimpi, Goldenberg, Akhtar, & Saylor, 2011, Zack, Barr, Gerhardstein, Dickerson, & Meltzoff, 2009;). So, there's growing evidence that babies can learn from these videos. And we probably will become even more effective in developing educational materials. When they are crafted to meet the developmental needs of a particular target age group, we can demonstrate that learning occurs.

Abstract

Ellen Wartella, PhD, a leading scholar of the role of media in children's development, responds to questions that explore how children interact with and learn from various forms of media. She discusses how technology is having an impact on parents and children and provides some context for how parents and caregivers can make informed decisions about using media with young children in ways that best support their emerging developmental skills.

Q: One of the big problems parents have is the glut on the market—there's so much out there. When parents are looking to make good choices, could you talk a little about what to look for and what to avoid?

A: First, parents should look to see if the content will be of interest to their child. So, if your child is interested in animals, and you have a lot of books with animal sounds, then a video that uses language to teach children about animals, or about nature, is probably one that they'll be engaged by. Secondly, children younger than 18 to 20 months tend not to be engaged by narrative. And so you probably want to look for narrative material for slightly older children. And by narratives I mean story-based. Although very simple stories might be appropriate between about 9 months and 18 months. And by simple stories I mean just a video that shows perhaps an animal walking through a field, or a child picking up a flower from a field. We're finding that children in these early ages are engaged by very simple attempts to teach children language labels for objects.

So, things that are very loud, and have a lot of sound effects, and are fast-moving are probably not very good for this really young age.

Q: The American Academy of Pediatrics has issued a statement that children should not be spending any time in front of screens before they're 2 years old. Is this too extreme? Do you think it's unrealistic? And if so, how much TV or media should babies and toddlers be watching?

A: It's certainly unrealistic when we look at evidence such as from the Kaiser Family Foundation studies (Rideout & Hamel, 2006), looking at children from 6 months to 6 years old. In that age group they're spending about an hour a day with television or videos. And even children younger than 2 years are spending about 30–35 minutes a day with video.

The American Academy of Pediatrics just last year revised its 1999 statement saying no TV and no screens for children less than 2 years old, to advising caution with parents using screens for babies under 2 (American Academy of Pediatrics, 2010). By that they mean caution in not only the amount of time that the babies are spending in front of a screen—because we know that the best situation and context for babies to learn is to have caring adults interacting with them. So you want to spend time with your babies interacting with them more than you want to put them in front of a screen.

Researchers know that parents have multiple motivations for showing babies and toddlers screen information. They think that it is going to help them. They observe that their children are learning language, or colors, or somehow interacting and engaged with the screen. Sometimes they need to have time away from the baby and they want them in a safe environment, and putting them in front of the screen is a way for the parent to be able to do something else.

Q: I think there's a certain pride they take that their kids are using the latest technology.

A: You're absolutely right. I think that's a consequence of the recognition that we live in a technologized world. I would like to point out that there may be both positive and potentially negative long-term consequences, and we don't know what all of those consequences might be.

Q: Sometimes a child is hanging out in a room where the parents are watching television, and they're assuming that because the young child doesn't really understand he's not affected by it. But I do know that there was research that this kind of background noise is not just white noise to children; they pick up on a lot. You talked about studies where the television is on, and children may be engaged in other things, but they are very aware of and affected by something that may be disturbing.

A: There are three areas of concern with background media. One, research (Kirkorian, Pempek, Murphy, Schmidt, & Anderson, 2009) suggests that when babies and toddlers are in a room and a parent is watching adult media in the background, it does seem to interfere with their natural play and suggests that they're having difficulty focusing. Second, they can be disturbed by the information on the screen, particularly given what's in the news today, and adults should protect the child from that. And the third concern is the extent to which television is a background for daily life, something that's called the *constant television household*. We have some developing data that suggests as many as a third of American children less than 2 years old live in households where a television set is on from morning to night, and it's a background to daily living. There's some evidence from data that were collected on children in the 2000s and the late 1990s (Vandewater, Bickham, Lee, Cummings, Wartella, & Rideout, 2005) that suggested that children who grow up in constant television households may have lower literacy scores and may not be reading as early as children who do not grow up in households where television is on in the background.

Q: In those households, nobody's talking to each other. If you're feeding your baby and you're watching the news at the same time, chances are you're not going to say, "Oh, did you like the taste of that?" or respond to the child. I would love you to share what is a "healthy diet" when it comes to media? When a child is 2, 3 years old, what is your recommendation?

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Babies demonstrate some evidence of understanding what goes on by the way they follow the screen with their eyes.

A: The guidelines that were set out by the American Academy of Pediatrics of no more than 2 hours of screen time, even for children older than 2 years, are excellent guidelines. You certainly want them to be engaged more with people, with parents, and with objects that they can manipulate.

Q: Even if children are interacting with media, it's basically a very passive experience. In terms of hoping to boost your child's learning, do you think it's important for parents to have their children engaging in some of this new media? Or do you think that the traditional ways of children learning and engaging and developing are still what parents should be focusing on?

A: I absolutely believe that they should focus on the traditional ways, particularly parents of very young babies. There's a long tradition of parents holding their child and just talking. That's the most important thing that a parent can do. And using daily opportunities, such as when walking through a grocery store, to talk to the child about what they see around them.

Just talking to a child is the most important platform for language development.

Q: This gets back to what you were saying about having the tube on all day long—that this can't help but reduce interaction with adults and reduce language.

A: And for older children who are more aware, the 3 and 4-year-olds, there is an awful lot of entertainment media that has inappropriate material. It's remarkable how—even in primetime—how much more sexually explicit comments there are, and parents have to be careful, and be aware of what they think is appropriate or not appropriate for their child.

Q: This gets back to what we were talking about earlier, about these videos and DVDs, they're very expensive, and when it's promising to make your baby smarter, it's very hard for parents to resist. What are some of the things to be on the lookout for? Are there places that the parents can turn to?

A: There are online communities of parents who report how they feel about programs. There are some guidelines online. Common Sense Media has some recommendations for parents and ways for looking at material. PBS has a parent's guide about shows and programs that are available for preschool children, and it's quite a wonderful parent's guide that also suggests activities that they can engage in with a child when they watch TV. In fact, ZERO TO THREE's Web site, and podcasts like this, are examples of support mechanisms that parents can use to guide themselves through the thicket.

Q: One of the things that you touched on that's so critical in all of this is to follow the child's lead. If there are things that seem to be really engaging her, but a parents are a little worried that she gets engaged to the point where they kind of lose her, I would guess that that's a big red flag that maybe this is not something the child should be spending a lot of time with.

A: Absolutely. And some children will show that they're frightened by some of the material, or it's disturbing for them. Parents need to be able to assess whether they think it's appropriate or not appropriate.

Q: If a parent of a 12-month, old, for example, said to you, "Look, I really would like to be picking videos or DVDs that are going to help in my child's learning." What kinds of things would you tell them to look for?

A: For 12-month-olds they're learning language, so look for a video that is targeted for a 12-month-old that specifically labels objects and the world around the child. For example, labels objects in the natural world, such as animals, or plants, or trees, and the sounds that animals make. Parents can extend the learning and repeat it in a real-life context, for example to remind the child that this is a ball like they saw Elmo play with, or this is a dog much like the dog that they saw in the video. The parents help shape the child's attention and can reinforce the language that is used both when they're watching the screen or outside of the screen.

Q: I'm assuming that's also true if you have an 18-month-old, but at that point they're getting much more mobile, or they are really mobile, and is that a good time to make sure they're watching videos that get them up and moving?

A: By 18 months old, absolutely. What parents want is to see the child engaging and interacting. Let's say if they're watching a television show where there's singing—the child is standing up and singing and clapping and engaging with the material in a very physical way, and the parents can help shape that again. The mother can point out what's going on in the screen, ask the child to see if she can do the same action. "Can you clap your hands the way you're seeing Dora clap her hands?" Or, "Can you open the umbrella the way that you see Dora open the umbrella?" That's a way of extending the child's language and their understanding of a social context in which language is learned

Learn More

Web Sites

Common Sense Media
www.commonsensemedia.org
Common Sense Media is a nonprofit organization that provides information and tools for parents to make informed decisions about media and technology for children.

Fred Rogers Center
Resource Database: www.fredrogerscenter.org/resources/database
The resource database provides contact information for organizations and individuals related to early learning, early childhood development, and children's media.
Publications: www.fredrogerscenter.org/resources/publications
Publications related to children and media are available to download.

Joan Ganz Cooney Center
www.joanganzcooneycenter.org
The Cooney Center supports research, development, and investment in digital media technologies to advance children's learning.

Book

Into the Minds of Babes: How Screen Time Effects Children From Birth to Age Five
L. Guernsey (2007)
New York: Basic Books

Journal
Babies, Toddlers, and the Media
Edited by E. Fenichel
Zero to Three (2001), *Volume 22*(2)

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The parents help shape the child's attention and can reinforce the language that is used both when they're watching the screen or outside of the screen.

both at the point of watching and also away from the screen.

Q: When a child is 2½ or 3 years old, what are some of the things that parents should be looking for?

A: They should be showing more stories and narratives at that point, to see if the child understands the story, and ask him to repeat the story. What did he just see? Why was Dora upset about something, or why did Dora try to achieve something? What they want to see is that the child is making connections between the motivations of the characters in the story, their actions, and the consequences of their actions. It's always appropriate, even if they're at the dinner table, to ask the child, "What did you watch on the video today?" and, "Can you tell Mommy or Daddy or your brother or your sister the story that you saw?" And that's one way of reinforcing the child's understanding of narratives, and narrative is a very important basis for learning as the child gets older.

Q: There's no question that in the field of child development, sometimes we have painted media with a very negative brush. As you pointed out, there's a huge potential for learning, and they are going to be growing up in a world that we can't probably even imagine…

A: Exactly. And we've known for a long time that the best context for young children to learn is to have caring adults and interesting objects that they interact with. Sometimes those interesting objects are the pans that they're beating with a stick. But there is good evidence that media can also be these interesting objects. And to the extent that parents engage in media use with their young children, that's the best context for learning.

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Just talking to a child is the most important platform for language development.

Ellen Wartella, *PhD, is Al-Thani Professor of Communication, professor of psychology and professor of human development and social policy at Northwestern University. She is a leading scholar of the role of media in children's development and serves on a variety of national and international boards and committees on children's issues. She is co-principal investigator of the Children's Digital Media Center project funded by the National Science Foundation (2001–2011) and was co-principle investigator on the National TV Violence Study (1995–1998). She has published widely in communication and psychology journals on children's media issues.*

Dr. Wartella currently serves on the Board of the World Summit Foundation, the Academic Advisory Board of the Children's Advertising Review Unit of the Council of Better Business Bureaus, the advisory boards of the Rudd Center on Food Marketing and Childhood Obesity at Yale University and the Center on Media and Children's Health at Harvard University. She is a Trustee of Sesame Workshop and serves on the PBS Kids Advisory Board.

Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

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Developing Self-Esteem in the Early Years

JEREE PAWL
Mill Valley, California

Self-esteem, though variously defined and described, is studied for its innumerable possible sources and for correlations with an endless list of capacities that equips one for success in life, both personal and work-related. This interview focuses on the sources of good feelings regarding one's self, stemming from mutual, transactional relationships that babies and parents (and other significant caregivers) create. Equally important are the positive feelings that rise naturally from the child's experiences of his mastery of his physical development and his physical world. His felt competence in his interpersonal world is of special importance.

Current research in social neurosciences—on effects of early traumatic experiences and the huge body of knowledge spanning decades on infant development, maternal deprivation and separation—all support the essential role of early nurturance. It also supports each child's unique contribution to those relationships and to his own sense of self.

Q: Let's start off by trying to define self-esteem in young children and paint a picture of what a very young child with good self-esteem looks like.

A: The foundation of self-esteem begins from the time a baby enters the world. Already, expectations, hopes, fears, dreams—a host of feelings exist in the parent. And the infants are so constructed that it is not an exaggeration to describe them as "born looking for us" and eager to engage. Adults are the most fascinating things in their world, and parents have certainly been waiting for them and imagining them. Parents are amazed and awed, and they will begin to get to know each other. It is in that context of loving, paying attention, and turn-taking that infants begin to feel more or less competent, good about themselves, and begin to make the most miraculous mutual adaptations with those caring for them. It is within this interpersonal, mutually created relationship that self-esteem develops.

Q: There's no question that you do see—even from the earliest moments—the way a baby attends to his mom or his dad's face is miraculous. There's probably been a lot of research in terms of how humans are wired for that. But this idea of bonding, for some mothers it doesn't happen instantaneously. They may have that instant, "Oh, my gosh," falling madly in love with their babies, but sometimes they don't. Is that a problem? Or is that something that can take some time, and mothers really shouldn't beat themselves up for that?

A: It is a process, and parents differ as to how quickly they feel invested or at all sure of themselves. There are many external circumstances that surround a baby and her parents that affect how a parent may welcome the infant. Parents differ in their own confidence and self-esteem. What one hopes is that the parent follows the child's lead, letting the child tell the parent who she is. Also important is that the parent is

Abstract

Jeree Pawl, PhD, retired clinical professor, Department of Psychiatry, University of California at San Francisco and past director of the Infant-Parent Program located at San Francisco General Hospital responds to questions about how parents and caregivers can support the development of self-esteem in very young children. Contrary to the idea that self-esteem comes from simply praising children, it comes from their experiences of mastery and competence that are often born out of struggle and discomfort. The foundation of self-esteem is also created when parents can acknowledge and accept the child that they have, particularly when that child may be different from their ideas of how they think their child should be.

not always the same parent, but sometimes a grumpy parent, an exhausted parent, a distracted parent. Babies are very forgiving and so are parents. There is not a set period of adjustment. It is different for everyone.

Q: Let's talk a little bit about when you see a baby interacting with a parent, and this wonderful thing where they wiggle around and you smile at the baby, and the baby wiggles around and seems to be saying, "Gosh, I am just a terrific person."
A: They do feel a parent's feeling that they are terrific. Parents beam at them and it's like they are basking in a brilliant splash of sunshine. They are just undone from being so treasured. Parents and babies have back and forth conversations and you couldn't miss the affection, love, and delight they experience in one another.

Q: One of the things you said that's so important is that it doesn't mean that you have to be a happy mommy or a happy daddy every minute; of course, children love it when you're smiling at them, but they also can tolerate it when you're not in such a great mood, but you're addressing their needs. That certainly responding to them doesn't necessarily mean you have to be responding in the most upbeat way all the time.
A: Not at all. And they aren't always the happiest babies either. And parents are forgiving of them. What is important is finding out about the cues they're giving; learning babies' different cries, and what they mean, and how to respond. And they are so quick to pick up parents' cues. Think about a baby being fed. It's nighttime and you go and pick them up and get settled and feed them. Within a short time they will respond not only to being picked up, but also to your smell, your voice, or your footsteps but to that click of the light switch in the hall. They begin to know you are coming, and begin to calm themselves and to quiet. This, by the way, is another source of their developing self-esteem—being able to deal with their own feelings, to regulate themselves, any of the things they can do that are self-soothing are important sources of feelings that they are a competent person.

Q: There are so many things with kids as they grow—not swooping in to save them, not necessarily making sure that they're happy every minute, is very important to their development of self-esteem.
A: It is important to their self-esteem to give them the message that there are things they can do: "You can entertain yourself, you can sing to yourself, you can do all kinds of things so that you don't, in that moment, need that other person. You will find your way through it." And that's really another source of feeling like a good and competent person though it stems in part from the interpersonal connection.

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The foundation of self-esteem begins from the time a baby enters the world.

Q: One of the things that a lot of parents are confused about is the idea of telling a child how great they are. In other words, how do you advise parents when it comes to how much praise children need?
A: The thing that's most important for parents is not to overlook the ways in which a child comes to feel proud of himself through his own growing competence. It is not as if there were this empty vessel sitting somewhere in the child's tummy that a parent has to fill with self-esteem. As though if you didn't pour in enough it would all leak out and they'd never have any. Letting them be the source of their own self-esteem is a very important aspect to get in your head so that you don't feel responsible for continuously pouring into this vessel that may be leaking over. Praising constantly and carrying on as if they didn't feel intrinsically proud, which they do. The necessary context is the positive connections, the relationship that operates within it.

Q: This reminds me of a moment when my daughter was 8 or 9 months old, and she'd often get under a table, or under a piece of furniture and then sit up, and then not be able to figure out how to get back out again. I always rescued her by moving the chair out of her way. Once when she did this I was with someone who said, "Oh, no-no, don't do that. She can do it, you just tell her how to do it." I got down and I looked at Mattie, and I said, "You can do it, honey. Just put your head down." And she bent down, and she crawled out. And I have to say that the look on her face was this unbelievably triumphant smile of, "I did it." It was a really important lesson for me. Mattie was my first, and so I was constantly, I think, swooping in to make sure she didn't get frustrated or upset or scared.
A: There is little more exciting in a child's life than the gradual mastery of her own body, feelings, and the physical world. What she can do with a ball or block or her fingers. Pulling up on the side of a crib, reaching, grasping. Being the master of the Cheerios. She has a rudimentary pincer grasp. She can reach it, pick it up, and smush it to her mouth. How great is that? All of these things adults take so much for granted are often not counted somehow in thinking about the building of a child's self-esteem. They build their own. The parents' job is to understand them, love them, and make sure there are opportunities for them to naturally accomplish these things. Parroting "good job" for everything a child does falls on deaf ears at best, and diminishes the impact of the praise when they truly deserve it.

Q: This is a great opportunity for us to talk a little bit about limit setting in this

Photo: Kiwi Street Studios

A child comes to feel proud of himself through his own growing competence.

context, Jeree. This is something that a lot of parents struggle with. They don't want to make their children unhappy. They don't want to frustrate them. But I'm sure you would agree that limit setting in a loving way is linked to this idea of helping them develop mastery. Can you talk a little bit about that?

A: Passing through the world without encountering sorrow, sadness, frustration, misery, and a number of other things that I could mention that are unpleasant is not going to happen to anyone. So, comforting children and helping them through such things—their upsets and disappointments—are terribly important. They are learning ways to deal with something difficult and in a real sense it is again part of their competence. That they can find ways to deal with these things. Self-esteem itself is not something that gets built and nothing assaults or changes it. Also, there are two things I think are important when a parent needs to disappoint a child or set a limit. It is very important to appreciate and recognize to the child the legitimacy of what they want—to let him know you understand that and that it is OK to want it: "Of course you want to stay in the park and swing. It's fun. But we need to go home to start dinner." There are other aspects of saying "no" and they matter a great deal.

Q: You're saying that there's a big difference between not enabling a child to explore, and enabling a child to explore but setting limits within that environment.

Let's talk a little bit about temperament. For some kids it must be harder for them to tune in to people, to tolerate frustration, to manage their emotions and their impulses. Maybe they have experienced a lot more "no's" and it's harder to be a loving, patient parent with certain kinds of children. What are some of the issues if you have what we might call a challenging child?

A: I would start a little bit before that, which would be for parents to acknowledge the child they really have, and to respect that. Parents have a tendency to think that as much as they adore this child, if only she were a little more this way or a little more that way, it would be really good. Parents have our own ideas about exactly who the perfect child would be, and superimpose that image on their own child sometimes. It is actually acknowledging the reality of who this child is and her difficulty, and not wishing or imagining that the child could or should be someone else.

Q: We all do have expectations. We have an image of what we want our children to be from a very young age, sometimes even labeling children in utero. Even if it's an affectionate label, it says a lot about what we want that child to be or don't want that child to be.

A: That is certainly true, and it's important to honor the real individual differences that exist. I was thinking about two little girls that I witnessed. They're the same age. They're maybe 18, 20 months. And it was Easter, and there was a basket waiting in the living room for each of them, and they were sent on their way to get them. And one of the little girls stopped dead still, looked across the room and studied what that was that was over there, then walked very slowly toward it, looked down on it, sat down, and began picking up the items in it one by one and examining it. And the other little girl ran so fast across the room that she collided with it and spilled everything that was in the basket all over the floor. Now, advice for the parent of either one of those children would be rather different. And acknowledging that you're not going to get this quiet one, if that's what you might have preferred, and you're not going to get this lively one, if that's what you preferred, is extremely important. It is also extremely important to fully appreciate how differently these children experience the same thing, their responses reveal how uniquely they take in the world.

Q: And the children who seem to fall short of a parent's expectations, or a caregiver's expectations, are getting the message that they're not good enough, they're not right. In a situation where you have the child who tends to be the one who barrels into the room and knocks over whatever it is she was going after, what are some of the things you say to parents who are dealing with a child who is high energy—maybe they're low energy, as parents, and that that fit is a bit of a challenge?

A: It is really an effort to help people try to imagine what it is like to be that child. Who is she? What does it feel like to be her? What would you be feeling if you were behaving like that? On the other hand, it can be very helpful to a parent too if you've observed the parent and child together to say, "You know, when you do this, I think this may be what it feels like to him," and help them to move over there—to identify with the child—just enough so

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that their attitude shifts so they can be more flexible and more thoughtful about how they might respond more empathically.

Q: Often a difficult trap for parents to avoid is projecting what they may either want the child to be feeling, or they may be feeling, which seems to be the flipside of the same coin of not respecting who that child is.
A: Of course, the child plays quietly in the sandbox by herself, and a parent thinks, "My God, she must be lonely."

Q: Exactly. Or she must have low self-esteem. That's a great example. I have a gregarious friend who was concerned about her son and said, "You know, he only has one friend, and I'm really worried about it. I think he just has such low self-esteem. I don't know what to do about it." What would you have said to her?
A: I suppose I would first say, "Why do you think that? What worries you about it? What makes you think he feels badly?" One would try to help the parent focus on how the child seems to feel. Another question to ask might be "If it were you, would you be lonely?"

Photo: Kiwi Street Studios

There is little more exciting in a child's life than the gradual mastery of her own body, feelings, and the physical world.

Q: What I'm hearing you say, Jeree, it is both about standing in his little shoes and also standing outside of those shoes and letting him be who he is, that you can't control who your child is.
A: That's right.

Q: There are moments when you have an otherwise lovely child, but they just lose it. You see parents who just say, "Cut it out," or, "What's the matter with you?" or things that are actually somewhat humiliating and shaming to a child. I'm assuming you would say that's probably not the best way to react when a child is out of control or doing something that may even be embarrassing to you if this is in a public place?
A: The pressure of public embarrassment often provokes parents. We use our empathy to understand others, and sometimes our capacity fails us. We simply can't get inside that little person to understand exactly why they're behaving this way and what to do. That's when parents feel most impotent and angry, and are likely to be insulting to them, unsupportive, and make them (and the parents) feel ashamed and as if they're wretched, rotten people. It is bound to happen to parents at some time.

Q: If you are a parent of a child who is very sensitive, or is prone to meltdowns, or who has such a hard time with transitions, you might get to the point where you know that to move from one activity to the other is going to cause a big battle. There are times when you do need that outside help.
A: Certainly a parent can need help in untangling who is bringing what to any recurring situation. One of the things that we haven't mentioned in this regard is there are children, particularly toddlers, that really need to work things out themselves. That is, the more parents intervene, the more they try to persuade, the more they try to understand, the worse it is. A child like that will often run into her room and stay there and come out transformed. They really are a child whose insides are in such turmoil that input from parents does not help. It only agitates the already disorganized little system. I've seen it in one of my grandchildren. We realized that if we didn't assume we knew the perfect intervention but remained calm and available and let her work it out, she did much better and was successful.

Q: This gets back to following your child's lead, especially as they grow. You get to see a little bit more of how complex, but also how very consistent, their personalities are, and is really in many ways one of the gifts of parenthood.
A: The more different they are from us as people and what we imagine they might be like, the more we're interested in how they function because it us a puzzle and surprising to us.

Q: The things you've said today, Jeree, about the development of self-esteem and helping children learn to muscle through problems to get that sense of mastery is wonderful.
A: Being a parent and learning to know a child—letting him tell you who he is—is for the most part, a wonderful adventure.

Jeree Pawl, *PhD, is a clinical psychologist who has specialized in the mental health of young children for more than 50 years. She is a past president and current member of the Board of Directors of ZERO TO THREE. She is also a former editor of the* Zero to Three *Journal. She was the director of the Infant-Parent Program at the University of California, San Francisco for 20 years. She currently consults in the San Francisco Bay Area.*

Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

The Influence of Fathers on Young Children's Development

KYLE D. PRUETT
Yale University

We've all noticed that the current generation of families is more committed to having fathers more actively engaged in nurturing their young children than in previous generation. This is true across class and race, and has contributed significantly to the well-being of their children, though it has also made the nurturing domain a more complicated space—not unlike a kitchen in which two chefs are working. This conversation is about embracing that complexity for the sake of the family and its young children.

Q: We are going talk about something that is near and dear to your heart—to your work, to your life—which is the critical role that fathers play in the lives of infants, toddlers, and children. You told me a story not long ago that I have been thinking about, and smiling about, and I would love for you to repeat. It was about a grandfather who came up to you after a talk you gave, correct?

A: Yes. There was a distinguished-looking gentleman who was actually standing for most of the presentation, looking like he was going to leave if this turned out to be too boring for him. He came up afterwards, and said, "I've been waiting to tell you something. I am an extremely active grandfather, but I was not an active father, and it's bothered me more and more." I said, "Well, how did the change happen?" And he said, "It was my own son's welcome of me into the nurturing realm that he and his lovely wife have created. And, I was there, not at the labor and delivery, but I was in the hospital, and I came out and met my grandchild in the arms of my son, and he had been instantly transformed by this experience. He just looked different than he ever had. And I was reminded that I and my wife had made this stupid decision that I wasn't going to be involved with them very often until they could really talk, because, you know, I didn't know what to do until they started asking questions, and then I knew what to do."

And he said, "My heart just aches now as I watch these moments between my son and my grandchild, and I have begun to copy them, and I'm now there holding this child. I've learned to give him a bath, I've learned to swaddle him when he's upset, I've started to sing my dumb old college songs to him when I have a minute, and I now know what I was missing and saw in my son's eyes. What a waste of time to have waited on the sidelines while these children were growing, and I wish you would just tell everybody about how important it is to be there from the beginning, because it doesn't just change the children. I heard you talk about that, Dr. Pruett. I mean, it changes the man, and I've watched my son change, and I've felt it happen to me, and I'm an old guy, and it still affected me. So, this is more powerful than anything I would have ever believed, and I feel lucky that it didn't escape my life completely. I'm a lucky old guy."

Q: I'm smiling hearing this story all over again. Do you think that times have changed, whether the fact that it was the dad who brought his child out to meet the grandpa is something very different? And is that something that makes you happy given what you know about how important it is for dads to be involved early? Do you think most dads still feel that they really shouldn't jump in there—that there's not much they can do or offer if mom's breastfeeding, mom's doing most of the care—that they wait until the child can talk and ask questions? Or is that changing?

A: I think it's changing. I've watched it occur in the 30 years that I've been interested in

Abstract

Kyle D. Pruett, MD, clinical professor of child psychiatry at the Yale School of Medicine, responds to questions about the importance of engaging men in the lives of children. Dr. Pruett discusses how men parent differently than women; how mothers and fathers can effectively co-parent; the impact of parenting on the marital relationship; and the long-term benefits children gain from having actively engaged men in their lives during childhood.

this, and since, by the way, I've been having my own children. I needed a signed letter of permission to be present in the labor and delivery room for the birth of my first child, who's now 40. And this was in the same labor and delivery room where I delivered about eight or nine babies as an intern! I mean, it was preposterous. Now it is the expectation that fathers be there. It's the expectation that they will either cut the cord, or be supportive of the mother and the baby in some direct way. It is the expectation, no longer the exception. That has been a profound change. I've seen it in a lot of domains. A child development course that I've been teaching at Yale for many years used to have only women in it in the mid 1970s, and now it's about half and half. And the men are there not because they have lost the bet; the men are there because they have an expectation that they will know something about what they're doing. Men hate to not know what to do. So, the expectation of their girlfriends, their partners, their potential partners is that they will be co-parenting with them, and that has been something that certainly was not an expectation when I was growing up. These are new days, and I think there's an excellent chance that they will improve the species because of the things that two people can do on behalf of their children that one can't.

Q: Let's talk specifically about what dads can do. What is the unique role that dads play in children's lives? I know that's a big question. But let's talk about infancy, because a lot of dads feel they're not as critical, or they don't play as important a role, and they therefore often do stand on the sidelines. What do you say to encourage dads to get right in there from the beginning?

A: Well, most men are reluctant to do anything at which they have no skill and for good reasons. I mean, they feel sort of ham-handed when they're trying to bathe or hold the baby or feed them, but that doesn't keep them from trying. One of the things researchers know is that when fathers do get involved, they do not mother. They father. In general, fathers are more likely to be physically activating of their children compared to mothers. Mothers love to hold their children close to the upper chest and the crook of the neck comforting, protecting, holding. Fathers, when they hold their children, are more likely to hold them up against their side supporting their weight on the upturned palm.

Q: The old football hold.

A: Well, yes. The mother carries the child through protecting the child from the world, and the father carries the child sort of as a hood ornament.

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The father's experience with his wife's pregnancy is actually being influenced by some profound hormonal changes in him.

Q: Facing out?

A: Facing out. They're saying, "We're going to encounter this together." And those are subtle differences, and of course I don't think they're tied, by the way, to gender chromosomes. I think they're just social conventions that men and women are a part of. But it is intriguing to watch. Fathers will do a little more roughhousing, for example, with their children than mothers. Often when they do pick them up, it's most likely that they'll pull them to their body immediately. They may roll them over, turn them upside down, and they throw them in the air. They're going to play with them. And fathers will tell you, "I like to have my kid's attention," when they're spending time with them. Mothers are often sort of saying, "Oh, calm them down. God, enough is enough. You know no one's had any sleep. We don't need a turned-on kid."

Mothers also tend to work with their children to avoid frustration. They like to tip the playing field in their child's direction. You'll hear dads doing that a little less often in the service of helping their children manage frustration. "I've got to get you ready for the outside world. Nobody's going to cut your crust off your toast when you go to college, so let's figure out how you're going to problem solve, and that means you're going to get a little upset, and I'm going to hang back a little bit when I know you can solve the problem." Mothers and fathers—they discipline slightly differently. When the children get older mothers will have learned more in the context of the emotional relationship—you know, "When you disobey me," "You don't listen to me," "You're in trouble with me. Our relationship is sort of out of whack here." The father is more likely to discipline "Listen to me or you're going to get in trouble." "I know how to make your life better in the world, and I want you to learn that too." "I'm less involved with how it feels emotionally between us, I'm more secure," or something about that. "But I want you to knock it off, because they send people to jail for that around here," whatever it is. And they're more likely to use humor, for example, and do a little teasing. So, these are differences. I think they're trending social differences. But they're differences that seem to matter to children.

Q: Tell me a little bit about that. In other words, I think a lot of parents are struck by how different they are as parents and it's upsetting to parents when they feel as though they're coming from very different places in their approach to their baby. I'd love to hear you talk about how it benefits babies to have very different styles of parenting.

A: Now you've asked two fascinating questions. I'll try to take the simpler one first, which has to do with what this difference means in behavioral trends to children. We have evidence that babies as young as 6 weeks old are already responding to paternal versus maternal styles differently. Whenever a mother goes to pick up her baby out of the infant seat (Yogman, Kindlon, & Earls, 1995) after feeding, the baby, at 6 weeks old, the eyes begin to close, the shoulders relax, and heart and respiratory rates became slow and regular. The baby begins to settle and calm. And when the father goes to pick up

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The contemporary dad is just as worried about work–family balance as the contemporary mom.

the baby, what happens is quite different physiologically in the baby. Their eyes open, the neck tends to extend, the shoulders hunch up instead of relax, and heart and respiratory rates begin to get a little faster and a little dysregulated as if they sort of say, "Wow, you know, Dad, party time," or something. We don't know what's going on in the baby's mind but I don't think this is learned behavior. It just can't be. It's too early. There seems to be some advantage for the baby to be able to tell the difference between paternal and maternal approaches. And you'll also see, for example, toddlers will often approach the dad for physical activity. They want to use the father's body as a jungle gym. Mother says, "No—no thanks, you've already had my body. I'd like it back now. Go play with your dad if you want to do nutty stuff like that."

And you'll see, for example, babies turning to their mothers when they're distressed between the ages of 8 and 11 months. They'll turn to their mothers and fathers about equally when they're, 11—15 to 18 months. And then 24 to 30 months it's intriguing to watch them turn to their fathers more than their mothers (Lamb, 1977). Even when the fathers have just been weekend dads. Considering what's going on developmentally with children at that age, this is all about autonomy and independence, and generally from the mother who has been their primary caretaker, or at least as experienced by the child, and so the toddlers often tend to start to look to the fathers as somebody who's figured out a way to be separate and equal and still close to the mother—"Maybe he knows something about this, and I'm going to hang out with him to learn what it is."

Q: Fascinating. What I'm hearing is that this is really good for babies, that they need both, or that it's good for them to have both if possible. Babies need to both have that sense of, "Ah, here comes Mom. I can relax. She's going to soothe me." and, "Here comes Dad, we're going to have a lot of fun, and it's going to be stimulating." Dads don't have to parent their children like Mom, in fact, just the opposite; different styles are both tolerated and needed by babies.

A: Well, I think that that was the second question that I was avoiding, which I'll now take on, since you brought me back to it.

Q: Yeah. Who's better? You can just tell me, Kyle.

A: What you're describing we call "gatekeeping," which is a mother's belief, and often her social position, that she has been born to the task of knowing exactly what to do at every moment of a child's life. And, of course that's not really true, because parenting is on-the-job training for both mothers and fathers. Often mothers have had more social support, and they practice with other people's children, and they get a lot of support for doing this well. They also get a lot of criticism for doing it less well, especially from other mothers, I might add. But when the mother is gatekeeping, what she's doing is saying, "Honey, please do it my way. I've figured out how to do it. It's easier, you know, if, when you take the child out, make sure you don't take him out too close to his naptime. Make sure you don't feed him too many solids today. Make sure that you've got him dressed in a coordinated outfit. If you take him out, run into people in the neighborhood, I want him X, Y, Z." So, the mother, often without intending, has turned the father sort of into her employee rather than supporting his relationship with the child.

Q: Right. I used to call it the expert and the dumb apprentice trap.

A: Yeah. Bingo. You've got it right. No wonder women are a little upset that they don't get support from their husbands in situations like this, because how often would you like to be treated as the dumb apprentice? And he'll back away and say, "You want the job? Hey, sister, you've got it. I'll see you in a few years." The problem with that is that the mother winds up alone, the father disenfranchised, and the child winds up feeling distanced somehow from this figure to whom he or she is intrinsically drawn. When you go back and look at pregnancy and how it's experienced by men and women, of course men are not pregnant. But that doesn't mean nothing's happening. Researchers now have data showing that the father's experience with his wife's pregnancy is actually being influenced by some profound hormonal changes in him (Feldman, Gordon, Schneiderman, Weisman, & Zagoory-Sharon, 2010). His estrogen levels are going up. Of course that's the female hormone. His testosterone levels are going down—way down. And oxytocin is beginning to be excreted in larger amounts inside his central nervous system.

Q: And what is oxytocin related to?

A: Well, oxytocin is this curious hormone that is in fairly high concentration in the central nervous system when someone is involved in an intense emotional relationship. They are awash in this stuff when they have their first puppy-love experience. Being loved—it may not be very romantic to say this, but it's neurophysiologically mediated by oxytocin. And so here's this hormone preparing the father for the arrival of his child as though to say, "This kid's going to knock your socks off. Be there—be nearby. Have it work on you." And so those are clues that the father's peripheral existence does not necessarily serve the well-being of his child. So, when a mother can figure that out and figure out ways to support his connection to the child, support his time alone with the baby, support his skill building, not be critical when he does it wrong, and, by the way, not to insist on 50/50.

Q: That's interesting. A lot of parents get hung up counting how many diapers each has changed. Why is that not what it's about?

A: It's not possible, first of all. It's never going to feel 50/50. They can bean count all they want, but they have this unpredictable

variable called a child that's going to be turning to one or the other of them at different times for different things throughout their entire life. And so what real co-parenting is—it's not about 50/50. Children get up in the middle of the night. It's more comforting for them to be soothed by a father when they're breastfeeding, because he doesn't have breast milk on him. The mother does. And it will drive the babies nuts because they feel like they should feed when they're not hungry, and it gets intense. Other times, the mother is absolutely the right recipe for the distress the child is in. So, parents have to be led by what the child needs, and that means back-and-forth tag teaming—"I'll cover when you're up," and, "I'll let you sleep when I am on duty," "Let's figure out ways to….". "What do you believe, by the way, about babies sleeping in our bed? What do you think about spanking? What do you think about using an iPad when a child is 2 years old?" One of the things my wife, Marsha, and I tried to do in our book (Pruett & Pruett, 2009) was really to encourage these kinds of conversations, because they're a great antidote to gatekeeping.

Q: These kinds of conversations are, to me, the key to co-parenting, but the most challenging step is to take that time to sit down and share these values. Certainly if you wait until the baby's arrived and you're exhausted and you have a short fuse with one another it's not the time to be talking about your values. So an important part of your work is encouraging parents to have these conversations. You mentioned a few things that parents should talk about—how involved Dad will be, whether the baby would share the bed with them—are there other issues that you think come up for parents in the first year that they often just are kind of blind-sided by that they need to be addressing ahead of time?
A: You're quite right, that when they've been sleep deprived now for 6 months, when they can't even remember why they married this person, and while they're really trying—and they're used to feeling competent, and an area comes along and, my God, they feel as dumb as a post. Many adults have not felt that way since early adolescence, and so they're not used to feeling that incompetent. So, our message is, if they're thinking about having kids, they need to have these conversations. Get the conversation going, because when they have these conversations before the child has come, then the toddler years—which, by the way, are the Armageddon of co-parenting—will go easier on both of them. They will realize, "This is something we thought we had talked about. I think I remember you saying X. I'm feeling Y. This is really about our belief system. It's not about what you're doing right and I'm doing wrong, or vice versa. It's about what we believe. Let's go back and revisit that conversation." And that brings them back into a partnership instead of a competition, which is such a fine distinction when they're exhausted and feeling defeated. So, those questions: sleeping, eating, discipline, what do they think about the media—television, Baby Einstein videos, SpongeBob, what do they think about Grandma looking after the kids, when will the child have the first sleep-over, what do they think they ought to be doing about their relationships, how are they going to keep their marriage interesting while they're so consumed by these work-balance issues? Those are all really good conversations to be having, because once the baby is there, it's all going to feel about them.

Q: A couple of things you just said were reflected in some of the findings from ZERO TO THREE's parenting survey (Hart Research Associates, 2010). For example, let's talk a little bit about how dads and mothers experience the early years, because dads said that they found issues like sleep and feeding much more challenging than moms. But tantrums didn't really bother them so much, whereas mothers were much more likely to say that behavior challenges were the most troublesome. What do you think is going on there? Is it what you were talking about that it's more an emotional issue for mothers? Or why do you think parents experience this so differently?
A: The ZERO TO THREE survey was such an interesting and creative addition to researchers' understanding of today's parenting struggles, because parenting struggles change over time, and we're looking at a population of new parents who, by and large, think that co-parenting is a good idea; not a dumb idea. And they also believe that moms have more to their value as human beings than their capacity to reproduce. They are working, contributing, and so the work–family balance is an issue for everybody. The contemporary dad is just as worried about work–family balance as the contemporary mom. So, this survey is the first to have looked at people who are raising children under those social norms, and there were some interesting findings—what I call gendered findings—that dads were half as likely to get upset with temper tantrums as moms. And I think moms take temper tantrums far more personally than dads do. And it's not just because moms have to deal with them more often than dads. It's that they feel like they have failed their child if they're going to be

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Parenting struggles change over time.

this far out of control. It means they're doing something wrong. It's an indictment of their inadequacy. Dads see the temper tantrums as immature, dumb, stupid behavior, and, "Why would you do that, because you're just going to embarrass yourself." Dads are less likely to be troubled by kids biting, fighting, and hitting than moms. Moms see that as antisocial acts: murder, premorbid behavior. Dads see it as artful and immature way to get your problem solved. They can understand why the child might want to do it, but tell the child to use words next time. And men were also twice as likely, as you mentioned, to be upset by bedtime and sleep issues, and as a sleepless father myself, I can say the self-interest in this is that I'd rather be sleeping with my wife than with my children. And I need my sleep. And mothers often feel worried about the emotional consequences of a child not sleeping well: bad dreams, anxiety, not a good day tomorrow. Fathers also tend to be a little more upset than moms about eating and food issues. And that's a puzzle to me because a lot of these dads are not involved in preparing food for their children, and I don't quite understand that one. But those were interesting dimorphisms, and there are many more to come. Now that we've begun to look for them, we're going to have more interesting and, I think, some surprising findings once we get used to these new social norms.

Q: We've talked a lot about the impact that dads have on children, and the

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The father's vocabulary is a better predictor of verbal competence in young children than the mother's.

importance of co-parenting. But I'd like to go back to when you talked about the hormonal changes that happen in men during their wives' pregnancies. I'm assuming that once the baby is born, we can see the impact that babies have on dads. Obviously that grandpa you talked about earlier articulated just what a wonderful experience it was. But in terms of involving dads, are there ways of getting them to see that this is something that's going to benefit them in ways that I think a lot of dads are not brought up to expect?

A: I've given this a lot of thought, because the evidence about the positive effects of paternal engagement on men's entire lives is very persuasive. We know that, for example, fathers live longer than men who do not have children. I know it doesn't feel like that when you're doing it. But the actuarial data says that it does; men have fewer accidents, less suicidal deaths occur when men become fathers, and they tend to change jobs less frequently. So, there are healthy improvements which, by the way, ought to be reflected in lower insurance premiums but I've never see that happen. So, you know, why doesn't this speak for itself? Why doesn't this convince men that the closer they are to their children, the better off they are? Well, I give us a C-minus at best on preparing our school children for the idea that being an engaged father will be good not only for you, but for your children. We still are using family and sex education to prepare women for parenthood and sexually transmitted diseases and birth control, and we prepare the boys for sexually transmitted diseases and birth control. We're not even talking with them about the powerful impact that parenting could have on them. What a missed opportunity. We just don't seem to be able to get that right. So, Madison Avenue, believe it or not, is doing a better job than the Department of Education. They are at least retraining men in situations where competent fathering is now as available as, to use a media example, as is Homer Simpson. And so kids are now getting the view that men don't have to be stupid idiots to be caught with a baby that needs changing. I'm very hopeful about this. We have to look at the nontraditional sources of support, though, for young boys and young men to get this message. And other men, by the way, really need to be stepping up to the plate, because when researchers ask young fathers, "To whom do you turn, who would you like to be like as a father?" and they either say, "My own dad, he was great, I want to be exactly like him," or, "The last thing I want to be is like my dad, I want to do a better job." The researchers ask again"So, who do you turn to?" But the men respond, "Gosh, I can't think of anybody right off hand, but, you know, I'll figure something out."

Q: This is so hugely important. And I have to say sadly I don't think that has changed, because this generation is still dealing with having been brought up for the most part by fathers who, for whatever reasons, were not as involved as they'd like to be. And then of course you run into the problem that the yardstick they use is very different. If they're comparing themselves to their own fathers who were not very involved, suddenly Dad feels really great, because he's taking the kid out to the park on his own, but if their wives are comparing the dads to themselves, he's really not done what mom thinks he should have been doing. He's comparing himself—"Well, my dad never took me to the park," or, "If my dad did, he would never have been able to do it if my mom hadn't packed up the diaper bag for him. I did that myself, and she's not really impressed because she does it every day." Those are things where couples have to understand where the other person is coming from, and not necessarily just who they married. In other words, we all go through a little bit of thinking, "My gosh, I thought you'd be different once the baby comes along."

A: You've opened the door of one of the dark truths of parenting, and that is that marital happiness is one of the early casualties of parenting. Researchers are up to, I think, eight international studies (VanLaningham, Johnson, & Amato, 2001) on this but we don't seem to be able to stop. They seem to need to keep going, because they don't believe marital happiness is one of the things that starts to hit the skids when people become parents. And we don't like to look that right in the face, but in fact, the kind of sacrifice and love and unconditional commitment that parents give to their children doesn't come out of nowhere. It comes out of somewhere. And it often is mined under the ground of the marital infrastructure. That's where this may come from. And so we've just decided it's best to call a spade a spade. We say, "Get ready, here comes this unhappiness. Be prepared for it. Try to find the time to date each other. Sex is going to be a casualty. Intimate talk, funny sense of humor—all of that stuff—now your kid's going to get your best, and your spouse is going to get the leftovers. That's going to take a number of years to sort of help out. Let's be honest, let's be grownup about it, and let's take on this issue at the beginning, because, if you don't, you're going to be looking at each other as the problem at 7 years." And that's how long the average American marriage is lasting these days—actually I think we're up to 8 now.

But this doesn't feel the same to the father as to the mother. The mother is the main protagonist for paternal engagement. If she thinks it's a good idea that he be close to their children, it is far more likely to happen. The reverse is not true. She is going to be close to that child whether the father supports it or not. It's going to go a lot better for the marriage if he does support it, and she's going to have a real partner, and she's going to enjoy it a lot more. But if he is uncertain, wobbly, frustrated, insecure, she's still going to try to be a good parent on her own, because of the biological differences between mother's

and father's predisposition to parent—it shows itself very directly here. So, the maternal support is a powerful variable for paternal engagement. Paternal support is less of a powerful variable in terms of maternal engagement. It's whether she had a good relationship with her mother or not that will be more predictive. So, there's a difference there, and that probably plays itself out in terms of marital and family satisfactions, which mothers and fathers also feel differently about.

Q: So, what you're saying is that it is really critical that mothers open that gate for dads, that they encourage engagement. Even if a dad wants it, he needs that encouragement from the mom. The opposite doesn't seem to be quite as true for mothers. Even if the dad seems to be jealous and doesn't want her to spend that much time with the baby, it may make it more difficult but she will just say, "Sorry, Charlie, this is what I'm doing" whereas dads might just say, "Okay, fine, you can do it, and I'm stepping aside." Is that a fair way of summarizing it?

A: Yes, in a nutshell, the mother's support for the father's engagement with the child is a really critical part of the relationship. If she doesn't think it's a good idea, there is practically no way it's going to happen.

Q: What do you say to parents whose relationship does end, or they are separated by something else? Let's start with the situation where the marriage doesn't make it. Are there ways to get past the anger and the hurt they may be feeling toward one another in order to keep the dad involved? Do you think divorce dads sometimes have it easier because it's mandated that they see the children a certain number of hours? I had one divorced dad tell me, "Well, you know, actually I see more of my kids now that I'm divorced, because my wife never let me near them."

A: That is a commonly repeated story, and I'm always of two minds about how to hear it. As a psychiatrist of course I'm doomed to hear the many layers of that communication, including that I couldn't figure out a way to be close to both the child and the woman at the same time, and now it's easier. Most of the families who do divorce do a fair to good job of continuing to co-parent their children with the children's needs at the top of their preference list. We hear a lot about the people who make a hash of it, because it's a big mess. It's complicated. It's painful. We feel bad for them. We wish we could help them. And we keep hearing their stories over and over again. But most of the people that feel the need to separate themselves from their marital partners do not abandon their children, and continue to try to be a positive presence. And I want them to feel the support of our field and each other. And it is a totally doable job. It isn't easy. It is complicated. It's logistically often a nightmare, particularly in the multitasking world that we all inhabit. But when you talk to children who have had a mother and father who continued to make the sacrifices for them, who made the other parent's job as easy as they could, that really supported each other—did not do the badmouthing, did not do the undermining, did not do the manipulative, provocative changes of schedule, etcetera—you'll hear from these children, "I really miss my parent's marriage, but they parented me well, and I respect what they had to do in order to help me feel loved and protected for all those years. I know it wasn't easy." That's a more common story than the opposite.

What that involves, though, is to have respect for what the other contributes, that it not be "You have to do it my way or it's the highway," and "When my schedule falls apart I'm going to turn to you first; not hire a babysitter, and see if you'd like some extra time. I am going to make sure that I keep you appraised of what happened at the dance this weekend, I'm going to make sure that you know there's a booster shot due"—really treat the other partner as someone whose presence they appreciate in the life of their child. Parents need to remember that this is not about them anymore. It's about the child. And so to the extent that people can they need to support each other's presence in that they do not have to think about paternal neglect or abuse or abandonment, in the ways that some of the naysayers would have us believe is so common.

Q: It's one thing if you're divorced, but if, let's say, Dad has been deployed, or if there's a situation where dad is really having to spend long periods of time away from the kids, is it possible to maintain that connection? How do parents do that if they're dealing with a toddler or a preschooler?

A: I've had an opportunity to work both formally and informally with military families, at the invitation of the Department of Defense, and have learned an enormous amount about the remarkable creativity of the current deployed American military family. The men and women with young children who have found themselves separated—their devotion to keeping their absent parent engaged in their relationships with their children has just staggered the imagination. Tools such as Skype and fax, which provide the opportunity to keep a visual image of the absent parent, have been extremely supportive to children and to the mothers or the fathers at home, and my fellow professionals and I have actively supported the use of these technologies. They are a little bewildering to very young children who don't understand the difference between a digital image and the real image, but it's a small price to pay, that bewilderment, in order to feel the support that the mother feels when the father uses a video chat, or when he sends a fax, to say, "Let's hear what Daddy's up to." It is so different than the pre-digital deployment where the father simply disappeared and was off the radar. There was no image of him available. And so researchers are watching reunions occur that are easier. Re-integrations are easier. They're not simple, but they are easier, because the child and the mother, the staying-home parent, has felt the liveliness of that image kept fresh by the digital information. We've got some research models where we're beginning to study the long-term effect of this. But it's hard for me to imagine a negative effect. So, the message is, "You know, Daddy may not be here, but we care about him. He's very important to us. You are very important to him. And let's make him a picture and we'll fax it to him tonight."

Q: I remember interviewing a woman whose husband had been deployed, and it was very moving. They had a handprint

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The Supporting Father Involvement study is a randomized, controlled clinical trial focused on encouraging father involvement in low- and middle-income families. It looked specifically at what happens when family resource agencies actively encourage fathers to become more involved in parenting their young children and when those agencies offer programs that help fathers foster positive relationship and parenting styles.

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Six Barriers to Father Involvement and Suggestions for Overcoming Them
P. A. Cowan,C. P. Cowan, M. K. Pruett,, & K. Pruett (2009)
National Council of Family Relations Report, 54

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Fathers are more likely to be physically activating of their children compared to mothers.

of Dad that they hung up, and they did a high five every night for the dad. That idea of keeping both the image of Dad and the presence of Dad very much a part of the family's life was not only easier, but it was clearly being encouraged, and the Department of Defense was much more in tune to what the needs of young children might be. We still have a ways to go, but the kind of work you're doing is fantastic.
A: During previous wars, the opinions of early childhood professionals were not even invited. And now we're at the table. And one of the things we've been able to help them understand is that the struggle the father goes through if he's the one deployed during re-integration—his guilt about being absent, often the trauma of the experience he's had while he was away from his family—makes him need to be reengaged emotionally with his children at a deeper level; something we need to plan for, because many of these soldiers talk about being healed with their children in their arms in ways that we need to recognize and support.

Q: I'd like to talk a little bit about some of the physical or emotional changes that men experience when they become fathers. You have mentioned the idea that some dads experience postpartum depression, and of course this is something we only associate with mothers.
A: This has been a surprising, and I would call it almost a thunderingly important, discovery. A large group of 15,000 mothers and fathers are being followed in Avon, England (Ramchandani, Stein, Evans, O'Connor, & the ALSPAC Study Team, 2005), and one of the stunning findings from the first round of data in the first 5 years is a postpartum depression rate in women of around 7%, which is typical of the national average. What they were not anticipating was a rate of paternal postpartum depression of 3.5%. Researchers are beginning to speculate that the reason some women do not respond to the treatment of their postpartum depression may very well be because they are in partnerships with men who are also depressed. The absence of our attention to this, if we don't look for it, means we're obviously not treating it. And if we're not treating it, it's not getting better, and it's burdening families with vulnerabilities and risk factors, which we definitely need to be attending to, because these are treatable illnesses.

Q: We've seen a lot of evidence of what a really devastating impact it can have on a baby if the mom is depressed. So, I'm assuming that what we were talking about before—of having dads get involved, of having them experience the positive feelings that come with being a new father—doesn't happen when dads are depressed, and that puts both dad and the baby at risk.
A: And the marriage.

Q: That's very important.
A: Because she is wondering, "What is the matter with you? Didn't you want to have these children? How am I going to do this alone?" And so I think the public health implications about blindness to paternal depression are not innocent, and this is the advantage of doing science. And I know that we are not training midwives or obstetricians or internists to ask men, after they become fathers, how their moods have been.

Q: And you know—this is a whole other discussion—but it may not look the same in men as it looks in women.
A: It doesn't look the same in men, because it's not focused on the inability to care for the baby in quite the same way since it's not expected that he's going to be doing that.

Q: You've talked a lot about what wonderful things dads bring into children's lives: the way they parent, the kind of ways they handle disciplinary issues that are very different than moms, what they encourage and bring out in children. And so I have a really nice picture of this wonderful role dads play in children's lives when they're very young. But what do we know about long-term what this means for kids?
A: When we're talking about the impact that fathers have on the lives of their children over time, I think it's important we describe the right canvas. We're not talking about men who are only biological parents. We're talking about men who are committed to the emotional well–being of their children. It's most convenient if they're biological, but they can be stepfathers, they can be grandfathers, they can be beloved uncles. What matters, it seems, is that they are engaged in a supportive parenting collaboration with the mother and that they carry their children's needs in them as an obligation. And when that happens, children benefit behaviorally, educationally, and emotionally. Children who have had these kinds of men engaged in their lives are much less likely to be involved with the juvenile justice system. They're more likely to be better problem solvers. They're more likely to use far fewer violent problem-solving techniques, such as hitting or yelling or screaming. They are more likely to delay their first sexual contact until late in their adolescence or young adulthood. There's something about having these partnerships in life that makes them respect their body a little bit more, and they're not looking for love in all the wrong places. Educationally, children stay in school longer. They'll have stronger verbal performance scores (Pruett, 2000). And that is a bit of a mystery since the joke is that men don't talk, and don't quite understand the cause-and-effect relationship, but researchers are aware that the father's vocabulary is a better predictor of verbal competence in young children than the mother's.

Researchers see girls showing more problem-solving and abstract mathematical competence through the fourth and fifth

grades when they've had engaged fathers in their lives. Those are the educational benefits. Researchers are also watching the social–emotional maturation of children who have had engaged men in their lives. They typically are less gender stereotyping. They tend to be more open to relationships across genders; they are more flexible about being able to move across those boundaries. They're by and large better problem solvers across the board, not just intellectually, but also socially (Pruett, 2000). And I think it's important for moms in particular to hear this, because when they're wondering whether it's worth the trouble to support father's engagement, it is important to realize that it is going to further her own goals as a mother and also is going to support the well-being of their children long after they leave home.

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Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

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Errata

The first Reference listing in the November 2001 article "Beyond a haircut, lunch pail, and new shoes: Opening doors to school readiness for Latino children and their parents" by Margaret Bridges and Sandra Gutierrez, *Zero to Three*, 32(2), 46–50, should read:

Bridges, M., Cohen, S., Fuller, B., & Velez, V. (2008). *Evaluation of Abriendo Puertas executive summary*. Available online at www.familiesinschools.org/site/images/stories/fruit/laccpcexecsumforweb.pdf

The Role of Grandparents in Young Children's Lives

BARBARA T. BOWMAN
Erikson Institute

Like everything else in the world, families change over time. Parents become grandparents, children become parents, and the dynamics of the family are no longer the same. Figuring out how to adapt to changes is challenging for both parents and grandparents. While love may abound, there are apt to be difficulties in building a new relationship, one in which old patterns must transform (sometimes overnight) into new ones. Grandparenting and parenting can be sources of great satisfaction—and sometimes of frustration. To manage it well, grandparents and parents need to meet challenges with honesty, respect, and mutual support.

Q: ZERO TO THREE's parenting survey (Hart Research Associates, 2010) found that 47% of parents turn to their mother or mother-in-law for information on childrearing, much higher than the number who turned to friends, or pediatricians, or Web sites. In addition, 27% of those who use regular child care rely on grandparents for that care. And there are other surveys that would indicate that the figure is higher among certain populations. If we're lucky enough to have a grandparent nearby, that's often understandably the first person a mother or father will turn to. Is this something you are finding in the communities you're working with?
A: Absolutely. And let me say that's not new. Grandparents have always been important in the lives of their grandchildren and their children. For many, what has happened is a return to old ways as the consequence of the recession that hit us several years ago. When times were good, many grandchildren went to child care or parents had help in the home. But when times get bad, often parents look to grandmothers and grandfathers for help.

Q: Let's talk about some of the ways in which a grandparent's role in a child's life is very different from a parent's role and what they bring to the relationship with a young child that's unique.
A: All children need to be loved, to be cared for, and to be responded to. But, it can be quite a drain on parents to be the primary caregivers that for one child, much less two or three. So, one of the really important roles that the grandparents play is to provide the extra support that grandchildren and their parents need. Luckily, most grandparents come to the relationship ready to love their grandchildren. It's an absolutely wonderful opportunity for grandchildren to have someone who's not the parent who loves them unconditionally. And it's a wonderful thing for grandparents to be able to love their grandchildren without the responsibility of parenting again. What most grandparents add to the mix is someone else who is not the primary caregiver, who loves the child, who's there to help, and in an emergency to assume responsibility for the child.

Q: Also important, as a child gets into the toddler years, is introducing the child to things that may be from another generation, another era. These days particularly with kids being so plugged in to video things—a friend of mine was saying that for her child the experience of bonding with her grandfather was very

Abstract
Barbara T. Bowman, MA, the Irving B. Harris Professor of Child Development at Erikson Institute, discusses the important roles that grandparents play in the lives of their grandchildren. Professor Bowman offers suggestions for how to approach the grandparenting role, including setting boundaries, maintaining open communication, and valuing the differences between the generations. Grandparents are a rich source of support for families with young children and receive as much as they give when building strong, enduring bonds with their grandchildren.

much about connecting with nature in a way that she and her husband didn't really have a chance to.

A: Grandparents need to understand that if they're going to be important people in their grandchildren's lives, they must spend time doing things together. They've got to be there. They have to be a part of their grandchildren's lives, otherwise they're just nice strangers that visit from time to time. It really does require an effort on the part of both parents and grandparents to be involved with one another. Often grandparents' interests and skills (fishing, carpentry, gardening, even technology) can draw the generations together. Either alone or with parents, grandparents can introduce important resources to children. My husband introduced his grandchild to computers, and chess at an early age, with encouragement from his daughter. These activities became his special area, which he and his granddaughter enjoyed together.

The grandparent–grandchild relationship can be very, very strong and permanent not only during childhood, but into the adulthood of the grandchild. But it isn't something that just happens automatically. If the relationship has been sturdily built during the early years doing things together, the probability is it will maintain itself well into adulthood. And for grandparents it may mean having someone to come visit them, help them set up the next generation of computers, someone who will bring the greatgrandchildren to visit, or who will be there for them in times of sickness or adversity. Grandchildren are a wonderful resource for older people, but it takes cultivating them in a reciprocal relationship when they're young.

Q: You're pointing to something really important, which is maybe this assumption that since you're the grandmother, they'll just love you because you're the grandmother.

A: No-no-no. It takes a relationship built on shared interests, values, and activities.

Q: When we talk about some of the challengers that grandparents face, in terms of who does what, or what role they play, what do you feel are some of the biggest challenges to being a loving and effective grandparent?

A: We all have in our heads the model of grandparents we experienced as children. But, when we become grandparents, our children may have married people who belong to different races and religion, who have different belief systems about how family ought to be structured. Our own children may have grown to prefer another model. So, what we are prepared for may or may not work.

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Grandparents have been playing an important role in the lives of their grandchildren and their children for many years.

Grandparents need to be very cautious about assuming their model of grandparenting is the best. This is particularly true if the children's spouses come from different backgrounds. Grandparents have to feel their way to find out whether the model they have is one that's going to work effectively, and, if not, how they can change what they do so as to maintain the joy of being a grandparent, without creating unnecessary tension.

Q: This idea of mutual respect means really spending some time, paying attention to the kinds of parents the kids and their spouses want to be before leaping to make assumptions or suggestions. What do you think is the most important thing for grandparents to think about as they negotiate this new relationship?

A: Probably the most important thing is how grandparents get along with their grown children. Obviously the relationship has to change. Grandparents probably know more about many things than their children do. On the other hand, if they simply take over and act is if their children are idiots and can't possibly take care of their own child, they antagonize their children or undermine their competence.

Q: That's harder for a lot of people than it is for others. Grandparents need to be aware of how important it is, especially if this is a first baby, for parents to learn from their mistakes. If grandparents can be there with guidance without taking over, grandparents stand a much better chance of being included in that family's life and forging that bond with that new member of the family.

A: And children are wonderfully resilient. If they're loved, it usually comes through. Even if the parents don't do all the things we, as grandparents, think they should do, their children will probably do just fine.

Q: One of the things every generation faces is the difference in the knowledge of child development and how that influences parenting practices.

A: And grandparents really need to find out what the younger generation is up to if they're going to play an active role. I recently heard a grandparent say it was a surprise when her daughter just put the receiving blanket over her shoulder and started feeding the baby in mixed company. Many grandparents are not used to women showing their breasts in front of other men. However, that's the way many young people do it nowadays, so grandparents need to familiarize themselves with those kinds of changes and accept them.

Q: There's certainly a need to be very up-to-speed on what is accepted, as you said before, in terms of the world that the parents are now living in versus the world that a grandparent might have lived in as a parent.

Let's talk a little bit about a situation where grandparents are the primary caretaker. Or perhaps, as you pointed out, because of the recession they are doing more of the child care than they anticipated, or even necessarily wanted

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The grandparent–child relationship can be very strong but it isn't something that just happens automatically.

to do. I think that's often a very tough spot that grandparents are in. What are you hearing from the people you work with that sometimes one of the toughest things is that there's this assumption among new parents that their mom or dad will be just thrilled to take care of the baby?
A: Grandparents are frequently old for parenting. I remember keeping my granddaughter for the weekend, and when her mother finally came home, my husband and I went to bed at 5:00 pm. We were absolutely exhausted! We had forgotten how much energy it took to have a young child in the house. We began to say that 2 days is the limit that we can keep her.

Q: Right. That probably was hard, to realize that you had to be clear. But it's so important for grandparents to be clear about their limits.
A: I think my daughter recognized it as well as we did. When she came we were dragging our tails. She understood that we didn't have the kind of energy we had when she was young. And that she needed to protect us, too. Parents need to be aware of not asking too much. Most grandparents are more than willing to pitch in, and particularly if there's an emergency—they are the first line of defense of the family. And I think they want to be called on. But parents also need to be aware that a grandparent's energy may be limited, their health may be impaired, and they have to protect the grandparent as well as protect their children.

Q: If a parent is actually turning to a mother or mother-in-law to be a primary caretaker, are there other kinds of supports that you think a grandmother in that situation needs that parents can provide that they may have overlooked?
A: Let me say it is not just grandmothers. Increasingly grandfathers are playing an active role. The most important thing that parents can do is be appreciative. They don't have to give money. They don't have to buy presents. But it is important for grandparents to feel that parents are appreciative of the effort that they're making, and it is not just taken for granted.

Q: One of the things that can be a challenge for grandparents is if the parents get divorced.
A: Grandparents come to divorce with attitudes and beliefs that may get in the way of maintaining a good relationship with both parents, which makes it hard to be supportive of their grandchildren. One of the most important things for grandparents to figure out is what to do to be supportive. Naturally it is important to be supportive of one's own child. But it's probably equally important not to subvert or be abrasive to the spouse who is still the parent of the grandchild.

As divorce has become more common, there are more models of how it can be managed. For example, in some instances when both parents remarry, all eight grandparents and all four parents are able to provide a united front for the children, to give the message that they are all there for the child, even though they have separate households and live separate lives.

Many families come against hard times. And grandparents need to do more than just be there. They may need to be caregivers. Or, to provide financial resources. Each family has to work out how much of the grandparents' energy or financial resources will go to the children and grandchildren, and how much will they reserve for their own old age. There are some very sticky issues that have to be confronted. Open discussion of health and financing are things that people tend to avoid and shouldn't.

Q: I've seen where, for example, if someone had more than one child and one of them has a grandchild and needs a lot of support and help which is draining their nest egg, it affects not just what they're living on, but what they might leave to the other children.
A: How do you manage to be fair? Fair does not necessarily mean treating everybody equal, but it certainly means everybody knows why particular decisions are being made. Talking frankly with all of your children about your finances and why you're making the decisions that you're making in terms of dividing resources among them is really, really important if you're going to help them maintain good relationships with each other as well as with you.

Q: If you could give grandparents one piece of advice about being a good grandma or grandpa, what would you say?
A: The one thing I would say is that there isn't any one single way to get there. How

Learn More

The Importance of Grandparents
B. Bowman & B. Weissbourd (2010)
Zero to Three, 30(4), 23–27

Early Head Start National Resource Center
http://eclkc.ohs.acf.hhs.gov/hslc/resources/cinema/EHS%20-%20NRC%20Audio%20Cast%20Conferences%202008/GrandparentsRais.htm
Listen to the audioconference, *The Second Time Around: Serving Grandparents Raising Their Grandchildren* and download related resources.

AARP Foundation GrandCare Support Locator
www.giclocalsupport.org/pages/gic_db_home.cfm
The GrandCare Support Locator is a service of the AARP Foundation. The GrandCare Support Locator connects grandparents with national, state, and local groups, programs, resources, and services that support grandparents or other relative caregivers as well as grandparents facing visitation issues.

one organizes one's grandparenting will depend on so many different factors. Don't be rigid about it. If you have more than one child, you're going to have to have more than one model. Be flexible, be willing to change yourself, to find out more about the world that your children and grandchildren are living in. I think that as we get older we tend to get a little rigid and a little unwilling to change. But the real secret to a happy life as we age is our ability to change with the times. It's going to take constant work and, like all relationships, constant change.

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Parents need to be aware that a grandparent's energy may be limited.

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Nurturing Healthy Eating Habits From the Start

DANIEL B. KESSLER
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Feeding issues are one of the most common concerns of parents in their children's early years. Feeding and mealtime are about much more than what and how much food to give a child—it is also an opportunity to bond with children and nurture their social and emotional development. Feeding and mealtime offer a chance to establish healthy eating habits, as well as demonstrate to children that they are loved, understood, respected, and cared for.

Q: Feeding is about a lot more than just what a child is going to eat or not eat so let's talk a little bit about the nature of the interaction between parent and child during feeding and help us understand why the relationship matters so much in terms of nurturing a baby.

A: Just as you said, feeding is a lot more than how much a child eats, or even what a child eats. It's really all about an opportunity for a child to join in on the social fabric of a family. Mealtimes can be hectic, but for many families it's also a time when they all come together, at least at times, to share in their joy of being with one another, share their experiences, and really participate as a family.

Q: What in your mind would be the ideal feeding environment or interaction?

A: If you could imagine an infant in the middle of the night waking, crying, not quite sure why she's crying, and obviously she hasn't necessarily made the connection between "I'm hungry, I need to eat." The infant is fussing, and uncomfortable, and the parent picks her up and cuddles her and is talking softly and responsively. The message is "I'm here for you." And then the parent either offers a bottle or, if they're a nursing mom, the breast, and it ends that discomfort and the feeling of hunger. The message for the baby around feeding is that "People are in my life who will meet my needs by making me warm and by providing love and nourishment." That's such an important message for this new, growing, developing infant. And hopefully, those same messages are consistently being expressed throughout the day.

Q: Describe what it would be like for a 12-month-old.

A: The toddler is at the family table. He's observing, and maybe in his own way participating in the conversation. Every participant is taking a turn, maybe sharing something about their day while they're enjoying their food, they're thanking somebody for preparing the food. They're hopefully enjoying the food. And it's also an opportunity to maybe comment on the physical properties of the food. Parents can talk about the color of the food, the texture of the food, the smell of the food. The child is using his skills to do that as well. And typically by 12 months the child is certainly capable of picking up small pieces of food with his fingers, and getting them into his mouth. If he doesn't like it he might make a comment or a noise, and that's something to be aware of. Or a parent can say, "We haven't seen you eat a carrot before," and describe the carrot. "The carrot is orange." And if it's

Abstract

Daniel B. Kessler, MD, a developmental and behavioral pediatrician, provides guidance on establishing healthy eating patterns in the early years. He emphasizes the importance of the feeding relationship as part of a child's social and emotional development. How parents approach feeding and mealtime is about so much more than physical health, but is an important way of nurturing the parent–child relationship.

a cooked carrot it's soft, or if it's slices of carrot, then they're round. So, there are lots of things—the physical properties, the color, the sensation of feeding—that can be used as a teachable moment for that child.

Q: What age or at what stage do parents begin to set the stage for healthy interactions around feeding? Are we talking about the point in which parents are introducing solid food, or does it really start earlier?

A: Concerns about feeding babies start as soon as parents start feeding them. The first decision that parents often make is "Will I be breastfeeding them, or will I be bottle feeding them?" There are many advantages to breastfeeding, but breastfeeding is not the only way to raise a healthy child. Not every mother can breastfeed for a variety of reasons and they need to feel comfortable with that decision as well. As soon as parents feed their infants that relationship becomes so important. It should be a pleasant experience for both parent and child. So, it starts right away.

Q: I'm assuming that a lot of strong feelings surround that very early nursing or bottle feeding experience so it's important to pay attention to them.

A: Absolutely. You know, all feelings are mirrors into our souls, and they should never be ignored. Parents' feelings around feeding affect how they approach the child during the feeding, and can color that experience both for the parents and the child. So, feeling good about a choice, speaking with people, making sure that parents are providing the best possible experience for their child—whether it's nursing, or it's formula feeding—that's what's important. The feeding experience is to the benefit of both parties, no matter what a parent chooses. Parents should feel comfortable with those choices, and should know from the start that they can meet their child's every need even if they choose not to breastfeed.

Q: Let's talk a little bit about when a child is a bit older, when there is a certain amount of interaction going on, and maybe even a little bit of refusing, or spitting the food out. What are some of the things you tell parents in terms of when they first start introducing solid foods and they're interacting with their child in a different way?

A: I like to think of feeding as encouraging interaction, encouraging connection. Even for the infant it's a time of warmth and togetherness, and they get very important first lessons from those interactions. As kids get older and they're beginning to start on foods other than the breast, or other than a bottle, then it becomes a little bit more challenging. I like to talk to parents about two concepts. One, is what Ellyn Satter—who is a registered dietician, and therapist, author, all-around feeding guru—likes to talk about as *division of responsibility* (Satter, 2000). The parent is responsible for what the child eats, meaning what is offered to the child, when the child eats, the schedule around feeding, and where the child is eating. Is the child eating in a high chair, at a table along with the parent who's also eating a meal, or—what I prefer not to recommend—with a tray in front of the TV because that completely ignores the social aspects of feeding. Children need the opportunity to see what an adult is doing around feeding, how they are enjoying their foods, what types of food they're enjoying. So, I really discourage putting the child in front of the boob tube with a meal. The parent decides the what, the when, and the where of the meal. The child decides how much to eat. So, the decision what to eat and even if they're going to eat is totally up to the child. There is absolutely no call for this clean-your-plate mentality.

If the child decides "I'm going to skip this meal," parents should not be desperately worried. They need to think in a larger time period. So, if they look at what a child is eating over several meals, she could have an excellent meal, and then a couple of so-so meals, and then a meal when she is really not interested in eating anything, and then another really good meal.

Q: That's a very important point to take the big picture, not worry over a single meal, or certainly a single serving of something.

A: And you raise a very good question. When should a parent be concerned? Parents need to take the larger perspective and part of that comes from their visits with their primary care provider, and the monitoring of a child's growth and also of her health in general, and of her development. If she is happy, developing well, doing the kinds of things that kids do, and growing within the range of what should be expected for a child, and for that family. Maybe everyone in that family is on the thin side, and that's probably the better side of the growth chart to be these days. We have much more problems with individuals who are too heavy for their age and their size. So, parents need to know when to worry and when not to worry.

Q: Certainly checking with a health care provider is a really important starting point, particularly if parents are worried. But I want to go back now to something you were talking about, which was the idea that it is a child's responsibility to decide how much to eat, which certainly sounds like following your child's lead is really important.

Photo: ©iStockphoto.com/Richard Bowden

Typically by 12 months the child is certainly capable of picking up small pieces of food with his fingers.

A: Yes. Parents really can't make them eat, just as they can't make them sleep, and can't really make them do anything. They are completely self-contained individuals. Obviously they can't survive by themselves. But they have the abilities to do amazing things. And that's the other concept that I like to share with parents: kids should be given a responsibility around feeding based on their developing abilities. Parents follow the child's skills and then increase the expectations about the child's participation in the feeding experience as he gets older. Parents are not going to expect a newborn baby to lift a spoon and feed himself. But as kids develop new abilities, they are provided increasing responsibilities.

In part that's also how parents decide to begin introducing foods other than the breast or the bottle. As kids are capable of sitting unsupported, can move their head front and back and side to side, can use their expressions to tell parents that they're pleased or that they're not pleased, or that they're enjoying their food or not enjoying their food. I always think of this as a good sign when a parent approaches a child with a spoon full of food and that child can either turn away or push that spoon aside. That's a basic important communication that parents need to notice, and acknowledge, and respect.

Photo: ©iStockphoto.com/Reynardt Badenhorst

There are many advantages to breastfeeding, but breastfeeding is not the only way to raise a healthy child.

Toddlers are typically not going to try a new food easily. There are certain children who might eat anything that is presented to them, but it's characteristic for toddlers to be afraid of a new food or a new experience.

Learn More

Healthy From the Start: How Feeding Nurtures Your Young Child's Body, Heart, and Mind (2006)
C. Lerner & R. Parlakian (2007) Washington, DC: ZERO TO THREE
Available online at: www.zerotothree.org/site/DocServer/healthy_from_start_eng.pdf?docID=1041&AddInterest=1153
This downloadable pamphlet offers parents information on how feeding skills unfold over the first 3 years. Explores how feeding is much more than about food—it is a chance to bond with children and nurture their social–emotional skills. Provides strategies for dealing with picky eaters as well.

Diagnosis and Treatment of Feeding Disorders in Infants, Toddlers, and Young Children
I. Chatoor (2009)
Washington, DC: ZERO TO THREE

Coping When Your Baby Has Reflux or GERD: You Are Not Alone
www.zerotothree.org/child-development/health-nutrition/coping_with_gerd.pdf
Provides coping strategies and links to additional resources for families struggling with gastroesophageal reflux disease (GERD).

However, if they've had the opportunity to observe that food on someone else's plate—sometimes it's easier for toddlers to take a food off of someone else's than have it put on their plate. And if they've seen other family members enjoy that food and comment on that food, even if they're not interested in trying it the first time it's made available. Toddlers often require multiple presentations or multiple opportunities to experience a new food. A child may need as many as 15 opportunities to experience or try a new food before they actually take it, enjoy it, and then add it to their repertoire of foods.

Q: That's so interesting because I think that so many parents decide after one bite of something that the baby doesn't like it, "Oh my child hates spinach, or hates green vegetables, or my child won't eat fish." Bearing in mind that you may have to introduce them a number of times, up to 15, is very important.
A: Absolutely, and trying it again, and maybe trying it in a different way, or spicing it up, putting some butter on a vegetable, or cutting it in a different way just to make it interesting for the child. It makes the experience more enjoyable and over all a more pleasant experience for everybody.

Q: That's the happy experience. But what would be a less happy way, or one that you feel is really going to backfire?
A: Well, the child is now at her highchair, and parent puts a plate of some small pieces of food in front of her, and maybe now adds something that the child has never had before. A possible response in the child is to take that little piece of food and drop it on the floor. And the parent is upset, and concerned, and now takes the piece and puts it in front of the child's mouth. And the child is old enough to know that she can keep her mouth closed. It begins to become a battle. Probably about 1 in 10 parents of toddlers will admit to forcing a child to eat. If the child is not eating, that makes the parent feel even more stressed. And so they will try to force the child to eat it by opening the child's mouth, or putting the spoon into a child's mouth, or even bribe the child.

Q: Right! Three more peas, you can have your chocolate chip cookie!
A: Parents want the child to be able to self-regulate, and they are remarkably capable of self-regulating if they are offered a selection of healthy, nutritious food without coaching, without bribing, without forcing, over a period of days and weeks. A child can self-regulate, and take in all that they need for healthy growth and development.

Q: That's actually really fascinating. I want to talk briefly about getting stuck, "My child will only eat noodles with butter—that's all he wants. I just think he's going to starve to death, or he's just not getting what he needs."
A: A parent who might be overly concerned about the child's growth, or weight, or will be turned into a short-order cook, and begin making three or four meals at a time, which

Photo: ©iStockphoto.com/Nabi Lukic

If the child decides "I'm going to skip this meal," parents should not be desperately worried.

is really unsustainable, and really teaches the child the wrong lesson.

Parents need to encourage kids to have what the family is having. If they're not hungry for that particular thing, maybe a parent can offer them one alternative, their "rescue food" that will be available to eat at a given meal. But they should begin making note of whether kids are decreasing the kinds of foods that they're eating, and really limiting it to two or three foods only. That may be a cause for some concern, or looking for some help. There have been a number of suggestions made on how to get kids out of these food jags.

There are many interesting ways of doing it by taking a favorite food and changing some aspect of it. For example, if it's a peanut butter sandwich they can cut the sandwich using a cookie cutter and put it into a different shape, they can take macaroni and cheese and use green food coloring to color it just to get the kid out of that box of eating the same food. That's often very helpful in getting kids out of that rigidity that sometimes happens around meals.

Q: If a parent is locked into making sure the child only eats things a certain way, then it can really turn into an unpleasant experience, and in the long term is not what a parent wants a child to associate mealtime with.

A: And that's the parents' role. I mean, people communicate during mealtimes, and they bring a lot of personality to it. And if they're happy and enjoying their food and being flexible and not getting upset about little things, then the child will experience that, and hopefully incorporate similar attitudes around feeding, and nonfeeding activities as well.

Q: Since mealtime was probably the most important time of the day in my family when I was growing up, I've loved talking to you about this. You're sending an important message about how if we empower our kids and follow their lead and respect what they bring to this dance around food, that it can be a wonderful away of nurturing a relationship, not just their health.

PHOTO: ©ISTOCKPHOTO.COM/KICKERS

Kids should be given a responsibility around feeding based on their developing abilities.

A: I think of feeding as one of life's great experiences, and great pleasures. And if we look at it as a social opportunity, it really is a wonderful way of inviting that child in as a full member of the family, participating in activities of the family, enjoying one another's company, and feeling both the love of the family, and the nurturance of good healthy food.

DANIEL B. KESSLER, *MD, is the medical director of the Children's Developmental Center at Easter Seals Southwest Human Development in Phoenix, Arizona. He is a developmental and behavioral pediatrician, and for 21 years he was the director of Developmental and Behavioral Pediatrics at the Children's Health Center of St. Joseph's Hospital and Medical Center and has an appointment as clinical professor of pediatrics at the University of Arizona College of Medicine. Dr. Kessler has been picked locally as a "Best Doc" by* Phoenix Magazine *and by "Best Doctors" nationally on multiple occasions, most recently in 2011. In addition to his abiding interest in babies and the earliest relationships, Dr. Kessler has expertise in autistic spectrum disorders, attention deficit/hyperactivity disorder and related co-morbidities, problems of learning and emotional adjustment, feeding, and self-regulation.*

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How Partnering With Your Child's Caregiver Supports Healthy Development

JERLEAN E. DANIEL
National Association for the Education of Young Children
Washington, DC

When parents go to work or school, they must make arrangements for the care of their children. Clearly cost, location, safety, and what kind of learning environment it will be are all part of the decision-making process. The key, however, to finding the right mix for a positive, high-quality child care arrangement begins with the relationship built between the parent and the child care program and its caregivers or teachers. The foundation of that relationship is open, honest, two-way communication. All parties have to listen carefully, seek to understand, and share freely. This is the formula for a strong partnership among adults guiding children along a healthy, positive growth and developmental pathway.

Q: I find when I am talking to parents about quality child care, one of the big questions is "What are we talking about"? What does quality child care look like?
A: Well, it's an opportunity where the parent and the caregiver have open, two-way communication, that there's nothing too large or small to talk about, even if each party feels a little uncomfortable with it. They've built a relationship—or are in the process of building the relationship—so there is open, honest communication, and each really trying to understand the other's point of view.

Q: I'm actually going to interrupt you, because what's so fabulous is that when asking that question, I, of course, thought you were going to launch into a whole list of statistics: the ratio of child care provider to child should be this, and there should be clean places to wash hands… and actually I want to keep talking about this, that really what you're focusing on is this relationship.
A: Absolutely. And one of the fastest ways to build a relationship is for a parent to find a caregiver who is curious and anxious to know the child—really know who the child is. Parents really resonate when caregivers are clearly observing, asking questions, sharing information. That tells a parent, "Yes, I may be with a group of children, but I'm keeping an eye out in particular for your child, because I want to know who this is." That will make a relationship soar.

Q: Yes. And I think what would make a relationship sore (spelled the other way) is if, in fact, there isn't this kind of openness. And more than that, there isn't a kind of respect for what the other person is doing. I'm thinking about the situation in this country where, in my opinion, we don't pay child care providers a respectable wage. Parents, unfortunately, sometimes think of it as just a babysitter as opposed to an early childhood educator.
A: Well, if a parent is fortunate enough to have as a caregiver for their infant or toddler a professional who has chosen this field, they will pretty quickly get over the notion of a babysitter. Because the kinds of things that the caregiver will pay attention to in terms of the whole child's development, and the explanations that the professional can give to the parent for various stages of a child's life—you know, when they're really clinging, or when they're teething, or whatever it is. They soon will come to respect the knowledge base that the caregiver offers.

Abstract
Jerlean E. Daniel, PhD, executive director of the National Association for the Education of Young Children, describes what quality child care looks like and how parents and child care providers can work together to nurture young children's healthy development. Dr. Daniel shares information about what to look for in a child care provider, how to identify high quality care, and the importance of continuity of care.

Q: And part of what you're touching on is if a parent is fortunate enough to find someone like that, or to find a center that hires people like that, they understand where the parent is at. For example, the heartbreak of dropping a child off for the first time is something all of us who have your kids in child care know. It's just really, really tough. And, you know, if a parent has someone who is not only making her feel that the child will be safe, but is understanding that, you know, separation anxiety may be more on her side of the equation than on the child's, that can be also really, really important.
A: What you said is really important, because the clientele, if you will, of a caregiver is not only the child, but the parents as well. And she has to look after the needs of both of those generations, parent and child.

Q: Of course in the ideal situation, the caregiver who is aware that the whole family is affected when the child goes into care. The caregiver is there to support the whole family and they're not competing for the child's affection. A lot of parents suffer from this idea that the child care provider, or the people at the center, are going to somehow replace them. It should never be communicated that a parent is not welcome.
A: And if there's any hint that you're not welcome any time of day, especially when your child is there, it's time to find new care.

Q: If the parents are looking for quality care are there certain things that they would look for in terms of how a person interacts with a child that would really be a clue to whether they would be the right person?
A: Well, I think a person who exhibits patience, who is calm but animated, if that makes sense. I think excellent caregivers are curious people. And they look you in the eye. And, they ask questions. And they willingly answer questions. They seem to be people who are reading their environment, and both responding to it, but also anticipating. So, if you watch this kind of person, for example, in a toddler classroom, it's going to appear as though they have eyes in back of their head, because they're anticipating. For example, in the course of talking to you they will quietly move a table aside so that the traffic of kids speeding along with their little Tonka trucks aren't going to smash into it—that kind of person.

Q: The other thing that you're talking about is how some of the best child care providers and early educators that I dealt with helped me reframe some of the behavior my kids were exhibiting.

Photo: Kiwi Street Studios

One of the fastest ways to build a relationship is for a parent to find a caregiver who is curious and anxious to know the child.

I'll never forget talking to my daughter's teacher when she was 3, and I said, "Well, you know, Mattie can sometimes be unbelievably obstinate. Has this bothered you in class? At home she just will dig her heels in." This teacher said, "Well, we really see Mattie as very persistent. She sticks to things." Everything I said she was able to put a positive spin on. It really also helped me help Mattie, and to see it as a positive. Now let's talk a little bit about some of the practical factors that a lot of parents think about, the ratio of child care provider to child, the cleanliness, the safety.
A: A place should smell fresh and clean. You know, that's an indication that it probably is. And the staff–child ratio—what we're really talking about is a small-enough number of children for a caregiver to be able to give focused attention to each of the children in her care. That's really what that's about, that she can tend to the needs of each child, and help each to blossom to their full potential.

Q: You hear a lot about this ratio of children to child care provider, you know how many kids is it considered either safe or really possible to watch when, let's say, we're talking about children under 1 year old.
A: For infants, one adult for three children, and for toddlers, it's more like one to five. But the group size matters. So twelve children and four adults, that's—that's probably too crowded because it's going to be a little chaotic. If there are 25 toddlers, that's too many. But 15 is manageable.

Q: And how about having a lot of toys there, a lot of books? If you had to make the choice between a center that has tons of resources and equipment and one where the caregivers are more about this open, collaborative relationship, I'm guessing you'd say the heck with the equipment and go with the one where they have an open, caring relationship.
A: The relationship is always paramount in my mind. But what I also know is that if you walk into a place that is clearly resource-poor, and what I mean by that is if it's a room that's caring for children who are, let's say, 18 months old and you look at the shelves and there's only one of everything, that's a problem. That means this wonderful teacher now has disgruntled children, because they're going to be fussing over the lack of equipment. Children need something to do. They need enough of it that several children can be using the equipment. They don't need so much that every single child in the room has one of everything, because they do want them to share. So, there's a middle ground that's needed.

Q: One of the things that ZERO TO THREE found when we did this research with 1,600 parents (Hart Research Associates, 2010) was that the economy has had a terrible effect on parents' ability to find child care, to afford child care. One in four parents have had to make adjustments to their child care arrangements, and about 20% of parent said that they just couldn't afford child care. A lot of them had spouses who

Photo: Kiwi Street Studios

The staff–child ratio is a small-enough number of children for a caregiver to be able to give focused attention to each of the children in her care.

were taking over the duties due to losing a job, and a lot of them had to cut back on the number of hours they had their child in care. We all know families, and we've been there ourselves, where we have to cobble together something using relatives. What happens in a situation like that, particularly if Aunt Tilda really doesn't want to be looking after the kids? How can parents handle that? Or is it just very important to be aware of that?

A: What I would want them to keep thinking about as they make their choice, is whether this is a person who really wants to be with their child and finds joy in being with their child, because if they don't, the day-to-day drudgery is going to send the child a message that they're a burden. So, look for the relatives and friends and neighbors who enjoy being with children and see the work they're doing not so much as doing a favor for the parent, but rather it's about the child and showing the world to the child, if you will. That's where you get the best circumstances. Another concern is when parents might have a family member on one day, a neighbor the next day, and the arrangements are a little discombobulated. Well, the child experiences it that way, in an uneven kind of way. And particularly for younger children, that's really problematic and hard for that child to latch on to what is the routine going to be, wondering "What can I count on?" That's difficult.

Q: You hear about continuity of care, and in a center the turnover rates unfortunately are often very high, but I'm guessing that that's something parents really should ask about just for that reason.

A: When I was a child care center director, I can remember a number of parents saying, "How long has the infant staff been here?" and, "When was the last time you had to hire somebody new?" and those are all good questions to ask. But I think they also need to ask "Will my baby be assigned a primary caregiver, will I know to whom I'm handing my child each day, will that be the person who will be tending to my child's needs, putting them down for a nap, and so on?" It's not that others can't help, but there ought to be a primary person that the child and parents will know who is the person they can go to to find out all they need to know about how the day has gone.

Q: Why is that important even when a child is very young?

A: What the child needs to know is that his actions are appreciated, are encouraged, and that he can count on somebody when he's uncomfortable and he knows who that somebody is going to be. And so when programs move the infant to new rooms and new caregivers as they progress developmentally, that is just the worst reason in the world to change a child's room or caregiver! Because they're starting to crawl? No. Or started to walk? No. They need the consistency of caregiving. It's from that attachment that the child really can soar. That connection is what allows them to soar and conquer the world.

Q: That is a very important thing for parents to be aware of. One of the other challenges that a lot of parents have is that they don't have a lot of choice, or maybe they're finding someone who's pretty good, but they don't really know if they share their values, or their way of caring for the child or disciplining the child would be consistent with what they would hope. Is there a way that parents can address this without offending someone, without coming on too strong? I know for a lot of moms it's a tough dance to do.

A: First of all, if parents have some strong values around things like discipline and so forth, then that's one of the earliest conversations they ought to have. For example, they need to know whether the caregiver sees trial-and-error learning as okay and part of normal development, or if trial and error means if you don't do it right, you've done something bad. That's a fundamental issue that parents need to know where the caregiver stands. In addition parents need to know what a caregiver considers appropriate discipline and that needs to be talked about quite early on. Let me give you an example. This is of me as a young mother, and, mind you, this is somebody who studied child development. But, mothering and telling other people what to do about their children are two different things. As a young mother I used family child care. Those are people who care for children in their homes.

When my two children were very, very young, there wasn't a lot of center-based infant care out there 40 years ago. I chose a family child care provider, and I was looking for someone who was traditional in their viewpoints around child rearing, traditional in the sense of African-American culture. I was way away from my family. There were no grandmas, no nothing, but I wanted somebody who brought that both to my parenting and to my children. And so I picked a particular caregiver because she was just so down to earth and I felt steadier

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National Association for the Education of Young Children
www.naeyc.org

Spotlight on Infants and Toddlers (2011)
D. Koralek & L. G. Gillespie (Eds.)
Washington, DC: National Association for the Education of Young Children

The Program for Infant Toddler Caregivers
www.pitc.org

Supporting Quality in Home-Based Child Care (2011)
Zero to Three 31(5)

as a parent having her as a partner even that early on. I went to her house. And low and behold she had a huge German Shepherd. This dog's name was Sheba. And Sheba was very protective of the caregiver and her children. But the first time or two that I left my children—leaving them with her and Sheba in the house, I was just convinced Sheba was going to eat my kids up. I was just absolutely convinced of that. But I shared it with her, and she laughed and she said, "Girl, you don't have to worry about Sheba. If you look at your child wrong she will bother you, but she's not going to bother your child." And indeed Sheba didn't. My kids were hanging off of Sheba! They loved Sheba, but Sheba made me nervous. And this woman was a wonderful caregiver for my children. She helped me with potty training, which I was atrocious at. But imagine if I had decided not to use her because of that darned dog. We had to meet each other in the middle there somewhere.

Q: That's a wonderful example because Sheba's a great metaphor for all sorts of things—in terms of baggage as parents that we have when we are meeting a caregiver. We all have those stories, for good or bad.

A: And that's why being able to go and visit at any time is so important. One of the things that I always tell parents even before you choose, is go and visit. Without your child, go and sit there for 45 minutes to an hour. Just watch what's going on. And I say that because even the best actress in the world in front of you in terms of how they relate to children cannot keep it up for as long as an hour. They're going to show you their real stuff.

Q: One of the hardest things for me, and I think for a lot of parents, is when you do see things differently. For example, if the child is a picky eater and the child care provider believes in the "clean plate club," that can be a tough thing for parents to know how to address if, in fact, they don't want to pull the kid out of the child care center because of this. How would you approach someone about that?

A: Then you sit down and you talk about quantity. You find compromise in talking about the quantity. The deal may be that the caregiver agrees to put half as much of what they would normally put on the child's plate so the child has a chance to clean the plate, if you will, and ask for more if he or she wants it. I remember being at a parent meeting when I was a center director, and someone from the public health department came and gave every parent some play dough and said, "Make me a hamburger the size you make for your child." They had a good conversation about what's an appropriate quantity for a child of a particular age. So, negotiating the quantity—put half as much, or a third as much, and then go from there.

Q: You can even say, "Look, maybe I'm being crazy about this, but…" and give the caregiver an opportunity to see your side of things.

One of the things I did want to ask about, because there are lots of parents who have children with special needs who maybe have a disability or who need a special kind of care, and they have a particular challenge in terms of partnering with a provider. Are there specific tips that you could give parents who are in this situation?

A: Actually I don't think I would change anything that I said in particular, because in my mind every child is really special, and whether it's a child with a learning disability, or developmental delay, or exceptionally shy, or overly boisterous—all of those kids have special needs and need a special kind of caregiver. And parents in the search for that special caregiver for their special child still have to ask questions, observe, work toward open, two-way communication, so that they can jointly give that child the very best opportunities. In the case of a child that has some developmental delays, or learning disabilities, or whatever it might be, parents need to know, as does anybody caring for any child, does this person really have a lot of patience, and then on the other hand they also want to know does this person believe in the child? If you've got a caregiver who's written your child off, you don't have what you need.

Q: Part of what I'm hearing is that this is a two-way street, that we have to recognize that it may be really good for a child to experience people who are not necessarily what you thought would be the perfect candidate for a child care provider. They may surprise you in terms of both what they bring to the relationship, and what they bring out in your child, which may be very different than what you do.

A: And what they bring out in you.

Jerlean E. Daniel, *PhD, is executive director of the National Association for the Education of Young Children (NAEYC), the nation's largest organization of early childhood education professionals working with and on behalf of children from birth through age 8. Dr. Daniel currently serves on the board of The Fred Rogers Company and the advisory council for PNC bank's Grow Up Great initiative. Previously, Dr. Daniel was a child care center director for 18 years. During that time, she served at various times as a board member, secretary, and president of the Pennsylvania Association of Child Care Agencies; president of the Pittsburgh AEYC; and governing board member and president of NAEYC.*

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The child needs to know that his actions are appreciated, are encouraged, and that he can count on somebody when he's uncomfortable.

Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

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Coping With Crying in Babies and Toddlers

PAMELA HIGH
Brown University

Crying is a significant source of stress for the parents and caregivers of fussy babies. Because crying, sleeping, and eating are intimately tied to one another in the life of a young infant, it's important to approach the child's total environment to better understand the source of a child's distress and to help develop effective coping strategies.

Q: One of the most distressing issues for so many new parents is how to cope with fussiness and crying. In the ZERO TO THREE parent survey (Hart Research Associates, 2010) crying was cited as the number-two most challenging behavior just behind temper tantrums. It would be helpful to touch on why babies cry—what they're trying to communicate, because it may not make it any easier to hear it or live with it, but it does certainly help to allay some parents' anxiety about what's going on.

A: The most important thing is for parents to realize that crying is one of the child's earliest means of communication; that it's really their human nature. It's a skill that they use to get what they need the most, which is their parents' attention. So, when infants cry, it isn't really a crisis, but more likely it's a mystery that parents may need to try to solve. And it's not so easy to solve that mystery a good deal of the time.

I think that crying, sleeping, and feeding are all intimately intertwined with each other, so trying to pay attention not just to crying, but to the other elements that are going on in the baby's life are an important first step at trying to understand why babies are crying.

Q: What is typical in terms of a baby crying? Is there a number of hours that most babies cry when they are newborns? Is there a certain period of day that tends to be the witching hour for every parent?

A: There is a significant amount of variability, but for most babies the first few days or weeks is a kind of a honeymoon period. The peak of crying in babies we think is around 6 to 8 weeks. When babies are born early, correcting for their prematurity, crying also peaks at 6 to 8 weeks of age, which is an interesting kind of phenomenon. And, at least 25% of babies cry more than 2½ hours a day at that peak of crying. So, it's not surprising that this is a significant stress on families.

Q: No matter how much parents read about crying, or are told that the baby's going to cry, it sets off something that is very visceral, and difficult to tolerate. And if you add sleep deprivation, hormonal changes, and the fact that Dad may have been around for the first couple of weeks, but then he's at work and the mother is alone, it can be really a very, very tough challenge.

A: The good news is that for the majority of babies this improves; so there is a peak at around a month and a half or 2, but by 3 to 4 months it's usually diminished significantly.

Q: Is there anything that you think seems to work, or that parents should try that they may find is effective, or at least gives them a step-by-step to try when they're struggling with this?

Abstract

Pamela High, MS, MD, co-director of the Infant Behavior, Cry and Sleep Clinic at the Brown Center for the Study of Children at Risk, discusses infant crying and the impact it has on families. In most cases, infant crying will peak and resolve in the early months, but infant irritability can increase the risk of maternal depression. In extreme cases, infants who cry excessively are at increased risk for injury from shaken baby syndrome. Thus, parents and caregivers need to seek help and support to cope with the challenges of caring for infants who are difficult to console.

A: Well, the first thing that I try to do is look at the bigger picture. So, I use diaries to help families look at the amount of crying and feeding and sleeping, and how these are all related with each other. So, for me thinking about how to establish some amount of routine and regularity in the infant and the family's life, and I often start with the bedtime and a bedtime routine.

Parents also need to have differential behavior with their babies during the day and during the night. Many times parents are up at night with the television or something on to be able to keep themselves awake while they are soothing their child, and inadvertently there may be a significant amount of stimulation that's going on from what the parents are using to stimulate themselves to stay awake.

When the day and the nighttime get reversed, which is more common than you would imagine, what sometimes happens out of desperation is the parent may nap when their child naps, or the parent may try to get the things done during the day when the child naps during the day, and the baby may end up having very long sleep times during the day, and more minimal sleep in the nighttime.

So, I would never say don't let your baby sleep, but I would say don't let your baby sleep too long at any one nap. After a couple of hours, it's probably time to wake them up and show them their beautiful face in the mirror and sing with them and dance with them, and do the active things in the day with the lights on, because they can't tell the difference between day and night. But they can tell the difference between light and dark, and they can tell the difference in their parent's behavior. If the parents are really subdued and try not to talk with them or play with them in the middle of the night, but keep it as unstimulating and boring as possible.

Q: I want to ask you about pacifiers, because I know this is something that a lot of parents wonder about. It can help soothe the baby. Some approaches to curing colic say parents should definitely give them something to suck on. What's your thinking about that?

A: I would say there's a little bit of controversy in this area, and the controversy comes up, in part around breastfeeding and whether or not pacifiers interfere with breastfeeding or not. So, it's less controversial in a baby who isn't breastfed, but we know that breastfeeding is the best thing parents can do if it's going well for baby and mom.

After breastfeeding is well established then I don't think there's any reason not to try a pacifier. Some babies will love it and take to it, and other babies will not. The biggest difficulty with the pacifier is as kids get older when it falls out and the baby wakes up, and the parents can become a slave to the pacifier.

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All babies cry and all babies smile, too.

Pacifiers are protective against sudden infant death syndrome (Norton, 2007), or crib death when babies fall asleep and don't wake up. This is not a common condition. It used to be in 1 in 1,000 children in the United States. Since our Back to Sleep Campaign, it's now fewer than 1 in 2,000 children. There is some data that pacifiers are protective against this, so that's another reason that people are enthusiastic about them.

Q: Back to when my kids were babies, there was a lot of talk about, "Well, you can spoil a baby. Don't pick the baby up if a baby's crying." Parents now know that's not a good philosophy, and certainly when babies are very young, they're not manipulating you. They're doing it to signal something that's bothering them, that you have to be a detective to solve.

A: When babies start to cry is exactly the time to pay the most attention to them to try to figure out what's going on. But, on the other hand, if parents have been holding and walking and gone through their whole repertoire of trying to understand what's going on—are they cold, are they hungry, are they wet or dirty or need to be changed? When really nothing is working, that might be a time that they put the baby down and give both themselves and the baby a little break. Not to leave them to cry for an hour or anything like that, but to leave them in a safe place for a short amount of time to see if the baby has any self-soothing strategies.

Q: When nothing seems to be working, is there a way that you counsel parents when it might be worth calling the pediatrician or their health care provider?

A: Babies who cry for more than 3 hours for more than 3 days a week for 3 weeks in a row, and it's mostly in the first 3 months of life, that is the typical definition of colic. But it doesn't really help very much, because it doesn't identify at all why the baby is crying. Depending on whose study you look at, this is very prevalent, somewhere between 5% and 20% of young babies are considered to be in this fussy baby, colicky baby category which can be very distressing for their parents.

Q: If parents do have a colicky baby, those hours when the baby is screaming can feel like the entire day and can be very, very stressful. How do you counsel parents in terms of coping? You mentioned before that sometimes they just have to put the baby down and exit. Why is that in fact a good strategy?

A: It's a good strategy for multiple reasons. One reason is that the baby and the parent, often the mother, become a very symbiotic pair. They really feed off of each other. They need each other. And they respond to each other's pain, if you will. So, if the baby is distressed, the mother is trying very hard to calm the baby, sometimes this can make the mom feel stressed, the two of them sometimes can feed each other's kind of angst during that time. Also, this can be an incredibly stressful time for parents and they just need a break from it.

Q: To leave the baby for 5, 10, 15 minutes is not going to do irreparable harm to the baby, and, in fact, the opposite could occur, which is a break in this dance, a

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Sometimes the baby is crying because she's just absolutely exhausted and she wants everything to stop.

time for parents to kind of regroup, use whatever calming strategy they can.
A: Just from the mental health perspective for the parent. And the fact that sometimes the baby is crying because she's just absolutely exhausted and she wants everything to stop. So, in my experience, when parents do this—and I'm talking about leaving the baby for maybe 5 minutes, or 10 minutes, or at most 15 minutes—parents usually say that when they come back either this baby that they've been working very hard to soothe now will let them soothe her, or sometimes the baby was absolutely exhausted and she just falls asleep.

Q: Let's talk a little bit about what happens with parents who tell me, "Well, my child has been a pain in the neck since he was born. He came out screaming, and he's always been screaming." They are labeling them maybe a little bit prematurely, but also worrying that this is what they're going to be like for the rest of their lives.
A: The follow-up information that we have on very fussy babies is that mostly they're indistinguishable from other children after their difficult first few months. Parents get thrown off in their expectations for themselves and for their babies.

Q: So, it's important, therefore, to not label a child, to understand that this too shall pass, that the child who starts off as a real fusser may turn out to be the most calm and even-tempered child, and vice versa. Certainly by the toddler years they may be very different.

Other than focusing on the baby's needs, what are some of Mom or Dad's needs if they have a colicky or very fussy baby?
A: First and foremost, parents do need to take care of themselves. They need at least 30 minutes a day of Mom-time and Dad-time to do whatever is relaxing for them, whether it's to take a shower, to go for a run, to meet a friend, to read a magazine, to even just veg in front of the television, if that happens to be the most relaxing thing to them. They need a time to recharge their own batteries. And also to not be shy about calling in the people around them—their family, their friends—to take care of the parents if not the babies, to maybe bring over some food, or to come and watch the baby while Mom takes a nap. Calling their lifeline.

Q: Calling their lifeline. And having those lifelines speaks to understanding that no matter how sweet and calm the baby might be most of the time, there are going to be times where parents really need that break, they need that lifeline.
A: They need to call in their village, the people around them who love them, who can potentially take care of parents or come and take care of the child for a while so the parent can have a break.

Certainly this has to be a trusted person who knows young children, because just as this can be stressful for the parent, this can be stressful for anyone who takes care of them. Parents need to give themselves a break and not worry that every little piece of housework must be taken care of in the timely way that it might otherwise be taken care of.

Q: Paying attention to their own experience of the child's development is so critical, particularly if they have a colicky or a fussy baby. Parents are going to have a lot of feelings about this, including stress that can tip over into being very angry. A lot of mothers would admit that as much as they adore this baby, there are moments where they're just very angry and upset, and then feel guilty about that. Do you find that is true with mothers that you counsel?
A: That's very true. It not a sentiment that they will talk about really openly.

Q: Sometimes, it's not until people have a baby that they begin to understand why parents can become so desperate, and frankly so angry at the baby if they've been crying and crying and crying, and they can't solve it, and they actually consider or even go so far as to harm the baby. Maybe even in trying to calm the baby they go too far. Let's talk a little bit about this, because I think a lot of parents are very reluctant to give voice to these feelings.
A: There are many parents who have these feelings and feel very guilty about it. It's something that I've only learned about when probing how parents are feeling in this very stressful time that they'll actually admit that they have had thoughts of hurting their baby. Now, certainly if parents feel that they might hurt their baby, it's in an emergency situation, and professionals really do need to get help for both the parents and for someone else to step in and take care of the baby for a period of time. That's not the common situation. The common situation is someone who realizes that even though they're having these feelings, they have enough support that they wouldn't do anything that they might regret. The most common harmful thing that can happen during this period is something referred to as shaken baby syndrome. With shaken baby syndrome, a young infant's head is proportionately much bigger than the rest of their body and their neck is much weaker than in older children, and this puts them at particular risk. It turns out that if you have a young infant who is crying hysterically and you give him a little jerk it often will surprise him and he'll stop crying for a period of time—a very short period of time. And someone who doesn't really understand about the delicate situation of a baby may do the same thing again which may be the mechanism whereby this very serious

Learn More

Fussy Baby Network
www.erikson.edu/fbn.aspx
The Fussy Baby Network offers a nationwide warmline for support; a clinic, home visits, and parenting groups in the Chicago area; and help from partner organizations around the country.

SIDS and Other Sleep-Related Infant Deaths: Expansion of Recommendations for a Safe Infant Sleeping Environment
American Academy of Pediatrics Policy Statement (2011)
Pediatrics, 128(5) *e1341-e1367. Published online October 17, 2011.*

Postpartum Support International
www.postpartum.net
Postpartum Support International is a nonprofit organization whose mission is to promote awareness, prevention, and treatment of mental health issues related to childbearing. Resources include an English and Spanish helpline, a newsletter, training and education for professionals, and more.

traumatic brain injury situation happens in some babies. Shaken baby syndrome isn't something that happens all the time, but when it does happen, it's really a devastating situation for families.

Q: Let's talk therefore a little bit about the association between fussy babies and maternal depression.

A: In my own clinical practice, it's almost surprising to see a fussy baby that doesn't have a stressed and oftentimes depressed-feeling parent. The two feed on each other. As the baby becomes more and more irritable, the parent feels more and more stressed. And sad, and potentially even depressed. Maternal depression is not an uncommon phenomenon. As many as 15–20% of mothers may experience postpartum depressive symptoms. And there is an association with infant irritability.

In my experience, as babies become calmer and less irritable, those symptoms improve very dramatically in parents as well. I think sleep is another important element that's part of the constellation. So, when the babies are irritable and not sleeping, the parents aren't sleeping either, which is reflected in their mood.

Q: One of the symptoms of depression can be that a person can't sleep. So, if you add to that the fact the baby won't let the parents sleep when they may want to, or be able to sleep, it's an unbelievably difficult thing to deal with. And, as you've stressed, if a mother feels she is suffering from postpartum depression, having really dark thoughts, or not being able to relate to the baby or deal with the baby's care, she doesn't wait and hope that it gets better. It's critical to get some help.

Is there anything else that you have found in your work, that's comforting or just very practicable?

A: Crying isn't a crisis; it's a mystery. It's human nature, and don't take it personally. And all babies cry and all babies smile, too.

Photo: ©iStockphoto.com/Catherine Yeulet

When the babies are irritable and not sleeping, the parents aren't sleeping either which is reflected in their mood.

Pamela High, *MS, MD, directs the Division of Developmental-Behavioral Pediatrics (DPB) at the W Alpert School of Medicine at Brown University where she is also program director for both fellowship and residency training in DBP. She also co-directs the Hasbro Partial Hospital Program at Hasbro Children's Hospital and the Brown Center for the Study of Children at Risk's Infant Behavior, Cry and Sleep Clinic. Dr. High's primary areas of interest are medical education in the field of DBP for parents, students, residents, fellows, and faculty, and interdisciplinary collaboration with emphasis on early childhood. Dr. High's clinical and research interests include infant behavioral issues such as colic, sleep and feeding problems and autism, anticipatory guidance, including literacy promotion in primary care, and the interrelationship of medical and psychological problems during childhood. Clinically she sees patients and families as a member of interdisciplinary teams in the Hasbro Partial Hospitalization Program and in the Infant Behavior, Cry and Sleep Clinic at Women and Infants' Hospital. She also attends on the Hasbro inpatient service and supervises fellows in developmental assessment and care in the Hasbro Children's Neurodevelopment Center.*

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How Our History Influences How We Raise Our Children

DANIEL J. SIEGEL
University of California Los Angeles School of Medicine

To be effective, parents need to make sense of their own past so that they can free themselves of repeating unhealthy patterns with their children. When parents take the time to reflect on their early life experiences, and understand how they have had an impact, they are better able to give their own children a positive attachment experience that will allow them to thrive.

Q: When I think about the power of the past on parenting, I think of that moment that we all experience as parents when, having sworn that you would never say certain things that your mother or father said to you, your kid does something and suddenly your parent's voice comes flying out of your mouth. I think that most parents have had that experience. Why is that? Why is it that it's very hard for us to avoid repeating in our own parenting what we experienced as kids?
A: Bringing a response to what we've experienced can go on automatic pilot, so you can be aware that you're saying something and you actually didn't really choose to say it. Parents can be aware they're behaving in a certain way, but they didn't choose to behave that way; they're just doing it. And that's how early experience shapes us and why research shows it's so important for parents to make sense of their lives. Because if they don't they end up just repeating what happened to them, and if what happened to them wasn't so good, which is true for about a third of the population, then it just gets passed down through generations. So, becoming aware and understanding the impact of the past at least gives parents a window into making a difference. Parents still continue to do things and say things that are never exactly what they want them to be, but at least their intentions, and then their direction, is to go in a more positive way for them and their child.

Q: I remember someone made the joke "Why did your parents push your buttons?", and the answer is "Because they installed them.", which I always thought was very apt.
A: Exactly. That's right.

Q: And there's no question that my mother could certainly push my buttons, in ways that some people couldn't. In ZERO TO THREE's parenting survey (Hart Research Associates, 2010), 8 in 10 parents said that the way their parents raised them had a major impact on their parenting. They may have been talking about something at a slightly different level, which is choosing to adopt the values or the approach to how they raised their kids. But let's start with some of this interesting, almost unconscious way that parents can repeat the past, and the importance of bringing that to the surface of tuning into their own childhood experiences. What are some of the ways that you think parents do experience that other than opening their mouths and saying things they may not have planned to?
A: That's a good place to start, actually. The research that I'm trained to do is called attachment research. Some really wonderful people, who are often trained as psychologists, studied the way parents interact with

Abstract
Daniel J. Siegel, MD, clinical professor of psychiatry at the University of California Los Angeles School of Medicine, discusses how early childhood experiences in one's own family have an influence on adult parenting practices. Attachment research has studied the way parents interact with their children, across all different cultures and different settings, and found that how parents communicate with their children has a direct impact on how that child's mind develops. Parents who are able to reflect on and make meaning out of their own childhood experiences are able to make more conscious choices about their parenting practices.

their children, across all different cultures and different settings, and they found that the way parents communicate with their children directly influences how that child's mind develops. Researchers are now starting to look at how those patterns of communication also affect the brain. But just let's stick with the mind for now. So, what we know is that about 20% of kids have an experience of emotional distance from their parents. Emotionally there's just not much closeness, and things are dealt with on a surface level—just behaviors are what the parent focuses on; not on feelings, or thoughts. About 20% of parents don't tune in to that aspect of the child. Now, if a child is raised like that, the research shows they themselves will not be given a rich set of tools to know their own inner life. Then as that child grows up, first of all, their peers will see them as somewhat distant and controlling, and not really that likeable. And then as they get older there's a probability—it's not a certainty, but a probability—that they themselves will raise their own children in a way that's cold and distant. So, you can see it's experientially created—the buttons, if you will, are installed. In this case it's almost like the absence of a button.

Q: Very interesting. So, you're not talking about a parent who's severely depressed.
A: No.

Q: This is really more about a parent who is just not helping children label emotions or get a sense of their own feelings—their world of feeling and emotions is somehow cut off. Especially boys are told, "You're okay. You're fine." Particularly if there are feelings of vulnerability or sadness, they're quickly told you're not having those feelings, or you shouldn't, you need to man up and not show those feelings. I guess that also gets back to family situations where children's emotions are not only not labeled, but they're discounted or belittled or they're told what they should be feeling, as opposed to having them experience the help of learning to label their feelings and work them through.
A: Absolutely. If a parent was raised to say she can't be vulnerable, often then she'll be raising her child with that exact same stance even though she may not even be aware of it. But other studies show that when parents don't talk about feelings, children don't learn how to deal with their own feelings. So, I use the phrase "name it to tame it."

So, if a parent isn't given the opportunity to have a conversation with people really close to him or his folks about his internal world, his internal world becomes a dark forest and he just doesn't go there. He stays in the light. In this case the light is just the surface behaviors, not the feelings behind the behavior. So, if that kid now becomes an adolescent, then becomes an adult, and not much has changed in the relationships he has, then as a parent he will come to the experience of parenting just focusing on a child's behavior looking for performance, not passion, looking for how that child will achieve things and not be attuned to their inner world. If you're married to someone like that, or you're listening to this and you find you yourself are like that, the great news is these individuals, as all the people we're going to talk about, can change.

Q: Let's say someone felt she was raised in such a way that she consciously did not want to repeat. In order to get in touch with the impact of that on her own life, where does she start? I mean, does she need to see a therapist to get this to work out?
A: No. I think therapy sometimes is necessary, and of course as a therapist I know that when people need therapy, it can be extremely helpful. But, no, I do not think the majority of people need therapy. The reason Mary Hartzell and I wrote *Parenting From the Inside Out* (Siegel & Hartzell, 2004), is we felt that people who would be given the information and the tools to actually take the steps to change can do that. That book is basically a workbook to take people through the steps of change because not many people can have access to or can afford therapy, nor do they need it.

So, I would say to a person, "Look, there are two sides of the brain. There's a right side and a left side, and if you just spend most of your time in one side or the other, it's an unbalanced life." The right side of the brain is more tuned in to the body, and to nonverbal signals, and to the raw emotions of life. The left is a little more distant from the body, so it's more logical, and clear reasoning. They're both important. But if you've been raised in a family which didn't use much right hemisphere bodily affection and emotional communication, you would have leaned over to your left just to survive, because that's what everybody else was doing in your family. Now, if you're an adult and raising kids and you're mostly leaning to the left looking at performance and outcome and logical things and stuff like that, the fact is you're missing half a brain. So, I say to people in a really loving and supportive way, "You did the best you could, but there's a whole richness of feelings and bodily experience and connectedness to other people that, although you may not have had in your childhood, you can have it now adult to adult, and certainly you can have it now adult to your own child, and you can have it now as a gift you give to your children."

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Becoming aware and understanding the impact of the past at least gives parents a window into making a difference.

Q: How do you see this playing out with parents?
A: If they say, "Hey, my childhood wasn't so good, why should I even think about it," a professional can say, "It isn't what happened to you that matters now in your parenting; it's how you make sense of what happened to you."

Q: Let's pause on that for a second. This is so critical. A lot of parents will either say, "Oh, my gosh, I had such a terrible childhood," or, "It's all my parents' fault," or "What can I possibly do about it now?" But what you're saying is that parents can take responsibility for at least becoming aware of it and thinking about what the impact has been. And then being able to say, "I can change this, it's not too late. This is something that I owe my kids."
A: If parents make sense of what happened to them, they can liberate themselves from the patterns that generally get passed on when people haven't made sense of the past—they just repeat those same things because it's the way the brain is structured. If parents make sense of their experiences, they change the passing on generation after generation of these non-ideal ways of being with their kids and they break the generational passage.

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The way parents communicate with their children directly influences how that child's mind develops.

When they've made sense of their lives they're giving their children an attachment experience that'll allow them to thrive and become the best girl or boy that they can be. They'll feel at home in their skin, the parents will be able to accept them for who they are, they're going to feel motivated, they're going to reach their academic potential with emotional and social intelligence.

Q: Dan, one of the things you've touched on a couple of times that I want to make sure I understand is this idea of being reactive versus being receptive. I'm thinking about a kid who has a tantrum and it's really a hard moment for a parent. What would a reactive parent's reaction look like?

A: A lot of people hear the terms *receptive* and *reactive*, and they think being receptive means saying yes all the time. But that's not what it means. And reactive doesn't necessarily mean the parent is always yelling or screaming; it's where he's not open to really seeing the inner world of his child. So, let's say there's a 2½-year-old who is insisting that she have ice cream before dinner and is really getting upset. A reactive way of being is to say "Shut up. Stop saying that. And you're not supposed to have that. You're spoiled." What the parent is doing in that situation is reacting to his daughter's behavior, and he's not being receptive to her inner feelings—her inner experience. Now, someone might hear that and say, "Oh, I see; he's going to give her the ice cream. That's what it means to be receptive." No. Receptive would be like this: "I can see you really are excited to have some ice cream. Why don't we go into the living room and we'll have some ice cream together after we eat dinner?" In this situation, the daughter has felt that the father has attuned to her inner world, which basically means he's tuning in. He's focusing his attention on her feelings, instead of just yelling at her or being reactive to her behavior. He tunes in to her inner feelings, and when parents do that, children feel that they've been seen, their inner feelings have been felt, and it gets them to actually feel at ease because they're not invisible—they're not alone. And now she's more willing to have dinner, and then maybe they have a little bit of ice cream after dinner, if that's what the parent has decided is okay to do. It gives her what every child needs, which is absolutely structure, but then it shows that he's tuned in to her inner world and she can actually have some of her feelings not only seen but even turned into a reality, and they have a little ice cream after dinner. So, reactivity actually usually makes things more explosive and shut down, and children don't really learn from it; they just get their behavior modified. What parents want to do is truly know what the word *discipline* means. It's an opportunity to teach. So, even the roughest opportunity—sometimes especially the roughest moments in parenting—are the deepest opportunities for learning. Children can learn incredibly well, and people raised in this way actually have deep emotional and social understanding. They're flexible, they're resilient. This is the root of resilience.

Q: You're reminding me of a time when my daughter was about 3 years old, and my father had died, and I had actually gone back to work too soon, and I was dealing with a lot. And she did something. It really set me off. And I really flipped my lid, and it was not like me to do that. And she was very upset, and it didn't take long for me to realize where that was coming from, and I said, "Mattie, I'm really sorry. Mama is very sad about Papa, and I should not have yelled at you. I'm very sorry." And I'll never forget it. She went out of the room, and I thought, "Oh, no, she didn't really understand what I was saying." And she came back with a box of tissues.

A: Oh, my gosh.

Q: A big part of your message I'm hearing is that children are a lot sharper and tuned in, as you say. Certainly that right brain part of their brains is working big time when they're young. And adults do them a great disservice when we think that they can't handle certain feelings or they're not going to get why I'm apologizing. Well, I think they certainly do.

A: They do. And it's so important what you're saying about making a repair, taking the time and also having the courage to be open; not to overwhelm kids, but just to explain to them so they themselves can make sense. You see, this is the invitation for all of us is that when parents take the really important steps to make sense of their lives, it really invites the child to make sense of their own experience with them, and be open to the parents' making repairs when there are these inevitable ruptures, disconnections. And it's a great thing, because ultimately this approach allows parents to bring kindness into their interactions not only with their

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Zero to Three, 31(2), 6–14.

children, but to teach them to be role models. They can be kind to themselves, and that's really important for a child going through adolescence to enter into young adulthood having these tools for inner understanding, for making sense, and for being kind to oneself and to others. I mean, what more can we want from our children?

Q: Well, that's certainly, I think, every parent's wish. I think it's a wonderful place to end on. And so important. We should all be very mindful in our parenting and in our lives.

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When parents don't talk about feelings, children don't learn how to deal with their own feelings.

Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

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How Babies Begin to Develop Self-Control in the First 3 Years

BRENDA JONES HARDEN
University of Maryland, College Park

The ability to control one's emotions and behavior is a critical aspect of early social and emotional development. Self-control is one of the major issues that underlie the challenging behaviors of concern to parents and other caregivers. Thus, adults need to have appropriate expectations for what children are capable of at different stages of development, and they need to know how to support children in learning this essential skill.

Q: When early childhood professionals talk about self-control, what do they mean? What does it look like when a child really doesn't have much impulse control?

A: I would define self-control as the child's capacity to modulate his emotions and behaviors. The word control is a little misleading, because it sounds like children should be able to stop a behavior right in the moment at a certain time. Even we as adults don't have that capacity sometimes! We lose it a lot. So, it's more the ability to use strategies to exhibit appropriate behaviors. And what is defined as an appropriate behavior does change depending upon the context in which a child finds himself. For example, it might be okay to yell at a ball game, but not in the house. It might be okay to throw a ball at other people when playing catch, but not when somebody else is not a part of a game. So, it really does depend, which suggests that this is a developmental process. And I would argue that children are not able to exhibit that kind of self-control in the way adults think about it until at least 4 or 5 years old.

Q: ZERO TO THREE's parenting survey (Hart Research Associates, 2010) found that 43% of parents thought that a child could control her emotions, such as not having a tantrum, by 3 years old. So, part of what you're pointing out is that parents' expectations can be inconsistent with what researchers know, and that can of course lead to unrealistic expectations about kids.

A: And it certainly can impact a child's capacity to control herself, because a parent's inappropriate expectations could lead to inappropriate discipline and other kinds of inappropriate behaviors with a child that could really make the child worse at the capacity for self-control.

It's important to think about self-control as having cognitive, language, emotional, and behavioral components. In other words, children have to be able to think before they act, understand the consequences of their actions, and use words like all the good nursery school teachers tell their children to use words instead of negative behaviors.

Children need to understand what they're feeling, how to manage those feelings, and then exhibit the appropriate behavior. That's very, very complex and challenging for young children. But there are specific things that I would argue are important to think about in terms of influencing a child's capacity to control self. One certainly is temperament, which most of the temperament folk describe as a biologic predisposition to certain behaviors. For example, was a child the type of baby who could calm down when she got her bottle, or did she wake up screaming? Or was she the kind of child who could be picked up and consoled easily or could adapt to new situations, and that kind of thing? Those children who are able to do those things are typically considered easy temperamentally. And children who have trouble with adapting

Abstract

Brenda Jones Harden, PhD, associate professor in the Department of Human Development, University of Maryland, College Park, describes how young children develop the capacity to modulate their emotions and behavior in the first years of life. A child's basic temperament has an impact on self-control, but temper tantrums are a normal part of child development. Dr. Jones Harden provides strategies that parents can use to help children learn how to recognize, label, and manage their strong feelings effectively.

and consoling are more difficult infants. So, those babies typically have more difficulty controlling self.

But also there's this hot topic called executive functioning, those cognitive processes like attention, and a child's ability to remember things in his brain in order to solve a problem, planning, reasoning, problem solving in a strategic way, inhibition. Researchers know that most of these executive functions are not fully developed until adolescence. So, even adolescents sometimes have trouble. The behavioral control problems that are seen in teenagers sometimes have to do with the fact that they haven't developed these kind of executive functioning skills.

And then, there's things like the children's contex—if she's tired, if she's hungry, if she's vulnerable in some other way like she's frightened, also her mood of the day, or even the demand of the context. For example, in a child care facility where there are just too many children and not enough caregivers, certainly that context can influence a child's ability to be controlled. And then, if children experience significant events—and I think it's important to note that a significant event for a child may not seem particularly overwhelming for an adult, so, for example, if she has a change in her schedule, or her caregiver at child care is absent that day, or even a preferred playmate is absent, those kinds of things can affect a kid's ability to self-control. Also the big events, like if a family moves, or the child loses a parent, or one of the things that I do a lot of work in is if children experience some kind of trauma, like maltreatment, or exposure to violence—family violence or community violence—those things obviously have huge implications for a child's capacity to control self. But for me the most important thing is that relationship with a trusted adult, and, I mean, mostly a parent.

So, what a child learns from a parent—what the parent shows in terms of his own self-control, how that parent helps the child to be consoled as a very young infant, and to help her to address her own frustrations as a toddler, who teaches her strategies—it's that relationship, to me, that has the biggest impact on whether a child is able to exhibit controlled behavior. The parent is really showing the child how hard he's working to regulate himself, and even when he doesn't, apologizing to the child and saying, "Daddy, really got out of sorts that time, and I'm really sorry. I'm trying to work on holding it together." I had a colleague of mine talk about that the repair sometimes in those situations is as important as doing the behavior in the first place. So, showing the child that the parent can get dysregulated too, he can apologize for it, and he can pull it back together.

Q: They learn from parents, through the relationship, about how parents manage their own anger and other feelings, and manage to kind of put the brakes on it.
A: Oh, absolutely. The parent who is trying to manage who the child is, and trying to manage her own feelings, and trying to respond to the child in a way that's appropriate for that child. So, it's a very complex, dynamic family situation that occurs. And it's very challenging to parents to be able to pull all that together. And one of the things that helps me is thinking about if it's so challenging to me, how must it feel for the young child.

Q: Yes. Exactly. Well, that's a really important thing to be able to do, even when children are stomping their feet, for parents to stand in those shoes. One of the questions that a lot of parents have is, in addition to providing the love and emotional support, is it also very important to create very clear boundaries? Is it true that kids need those kinds of secure boundaries particularly when they do feel out of control?
A: Oh, absolutely. Particularly young children need, as you're intimating, the structure in a social environment that says, "I will keep you safe, and I will make sure that you're okay." They know on some level that they don't have the ability to do that for themselves. And I'm talking basically about children 5 years old and younger. So, they rely on the adults in their world to provide the scaffolding, the structure, and the safety, and the security that will enable them to move along.

So, it is critical for parents and other adults, like adults in the child care center, to provide that kind of structure that says to the child, "We keep a safe environment here. Things that are not acceptable are when you hurt yourself or you hurt others." And one of the things that have been found to be really important for children's pro-social skills and their ability to control self in ways that don't hurt others is their capacity to be empathic. When adults say to children, "How do you think that makes Johnny feel when you hit him?" or, "How do you think that makes Mommy feel when you scream at me like that?" So, those kinds of things where adults are trying to get children to think about the other really help them to develop control skills, particularly when we're talking about behaviors that relate to the other.

Q: We've talked about that age is a factor, temperament is a factor, obviously some of the environmental things, if a child's exhausted or hungry that they're going to be less able to manage their emotions, but are there ways that parents can help them develop those muscles?

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Self-control is the child's capacity to modulate his emotions and behaviors.

A: I think there's a lot we can do as parents to help children learn self-control. One of the things I say to parents is that we think about discipline as saying no or punishing, but the root word of discipline is to teach. So, there are lots of things parents can actively teach their young children to do that really help them to gain self-control. One, the importance of providing a few rules for behavior—keeping safe, being kind to others, taking care of their things and other's bodies—is important. I also think, just like the good nursery school teacher says, ("Use your words, use your words,") that it's important to have children understand and label their emotions. To be able to say "I'm angry right now," for example.

So, I actually talk to children about "think, think, think," like Winnie the Pooh, as a way to think before they do something. And there's even some research on executive functioning that if you ask children to just stop—not only does their behavior improve, but even their cognitive capacity (Diamond, Barnett, Thomas, & Munro, 2007). Getting children to use self-talk is important. So, having them to even say "think, think, think" out loud to help themselves, or, "Oh, I'm getting mad now, I'm getting mad now"—that

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Self-control has cognitive, language, emotional, and behavioral components.

kind of thing—that kind of self-talk can help. And I've seen some really good nursery school teachers use this, taking a quiet moment really well. So, they even create in their classrooms a little space where children can go. It makes children take responsibility, and they can go and get away from other children. I think parents can do that in a home, a little quiet place for the child that he knows that this is where I go, and it's not like a time out.

Q: I have a friend who has something she calls the peace corner, and it's just that. I mean, it's like a little tent, and it's sort of decorated in a sweet way, and it's a very comforting little environment. And she says sometimes she goes in it, too!
A: I love that. I love that peace corner idea. And I like the idea of a parent using it, because then she's, again, modeling for a child how sometimes she gets upset, and here's a strategy that she's taken. And children might laugh at it, but it's a good example for them to follow. Little children can come up with strategies themselves. A parent can say to them, "What helps you to calm down? What helps you to feel better?" The parent can come up with these kind of individualized strategies that the child uses. For some children it might be going to read a book. Another kid it might be playing with a favorite toy. Children's own strategies that they can come up with help them to calm down.

Also, I really believe in making a big deal when children show any kind of pro-social or controlled behavior. And I'm always on the lookout for it. Sometimes with some children who have a lot of trouble, I often say it's like finding a needle in a haystack, but when adults see it they've got to make a big deal.

Q: A lot of parents are told to create an environment where kids aren't constantly hearing "No, don't touch that, no, don't go near that." Create an environment where they're free to explore, especially for a child with a temperament that is a big personality and is active and physically doesn't have a lot of impulse control. It seems to me very important to create an environment where they're free to express themselves without constantly hearing "no."
A: Absolutely. When a child is constantly told no, it's starts to have less of an impact. As a behavioral strategy it's not as effective as positively reinforcing a child when he is able to control his impulses or when children do something nice to one another. So, researchers know that that positive works much more than an adverse response. But the other thing I think that you are alluding to is the importance of prevention, and that is parents don't want to set up an environment where they constantly have to tell children "No." So, parents don't want to have a child playing in a room where they have all their priceless things. The parents have to put those away. They have to also make sure that there are no safety concerns. When parents have situations where children are exposed to things that could hurt them, they're quick to say no. But clearly the parents should get rid of all that kind of stuff.

But, having said that, again, it's important for children to understand very early on that there are limits to what they can do. No child should be given the message that you she do whatever she wants to do. I would argue as early as the second half of the first year of life parents begin to help children understand that the world is one of limits. And that she cannot do everything she wants to do even when she is 9 months old, that she can't pull Mommy's earring through her ear. Again, it's how parents set the limits that's important

Q: Let's say a parent really feels that even though a child tends to have a lot of trouble controlling his emotions, that the intensity of the tantrums, or the number of tantrums, is just out of control. When do you advise parents to seek help?
A: Well, first I would say that tantrums really are normative. That's the first thing that I like to tell parents. So, they shouldn't think that because their child tantrums this is inappropriate behavior. And what tantrums really are is the child saying "I have a self, and I have goals." The problem is that sometimes a toddler's goals are inconsistent with the goals of their environment, like sticking fingers in plugs, and standing on furniture, and hitting another child who has a favorite toy. So, their goals are often inconsistent with the adults', and so they get frustrated and they fall apart emotionally. That is a process that is important for them to go through, because it is through that process that they begin to learn that they do have these intense feelings that occur when things happen in the world that they don't want to have happen, and then they develop strategies. So, that's the first kind of myth I want to dispel, that tantrums suggest that parents are doing something wrong or something's wrong with the kid. Parents really have to do prevention and try to anticipate situations that might cause a tantrum to emerge.

It's also important to think about ignoring tantrums. Again, researchers know that they are normative. Researchers know that it's usually because a child wants to do something that parents have said no to. My experience as a parent and as a clinician is that the best thing to do with a tantrum is to ignore it. Now, that clearly has to change if safety is an issue, like when a kid is hitting his head against the wall, or floor, or something like that. But it is so important for parents not to give in. What I've seen happen so much is that parents get completely overwhelmed by the tantrum and just say, "Here, take it. Take it. I just don't care." Because they are so upset themselves, or they're embarrassed in a public place. But then the kid learns really, really quickly this is what he can do to make Mom give in, or make Dad give in. So, then parents are really increasing the child's use of tantrums as a way to get what he wants.

Q: I have a vivid memory of my daughter—I mean, not even 2 years old—she was fussing and whining about something, and—and I did just what you said. I said, "Okay. Fine. Here you can have it." And she stopped crying, and she said, "I cry; Momma do it."

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A: She had learned a lesson. They learn that lesson very young.

Q: They really do. When you were talking earlier about children's ability to put on the brakes, a lot of parents tell me I have a kid who's hyper, or they are concerned about attention deficit and hyperactivity disorder. Are you hearing this more? Are you finding that this is more of a problem? And are there things parents can do to determine whether their child is just very active, or really has a serious issue?

A: Researchers clearly know that children who have an ADHD diagnosis typically have more difficulty with self-control. But it's important to note that diagnosis should not be given to children until they're around 7 or 8 years old. Parents want to make sure children have gone through all the developmental transitions that they have that make them look like they have ADHD behavior, like the lack of mature language, the lack of cognitive skills that allow them, as you said, to put the brakes on, to think about the future, to think about the consequences of their behavior. Parents want to make sure they've attained all those skills that would shape their behavior.

Q: Right. Something we were talking about earlier, and something that ZERO TO THREE has focused on for years, is the relationship between the parent and the child, or the caregiver and the child, and how much of a contribution an adult makes in terms of modeling self-control.

A: Learning self-control begins in infancy, begins with that very important relationship with parents. So, parents really have to think about not only their contribution in terms of teaching children self-control, but their own self-control. I think it plays a critical role. One of the things that I often tell parents is that the first thing they have to do is forgive themselves, because all adults have momentary or sometimes more than momentary lapses in the ability to self-control, and they have to be willing to say "I'm doing the best I can" and forgive themselves, because otherwise they will be so anxious and so angry that it ends up having more of an impact on their dysregulation.

They have to know what is going to make them most stressed. Just like they're trying to teach the children how to be more in tune with who they are and their own emotions, parents have to do that too. So, if when parents go home from work, they are really stressed out, they have to set up some kind of time where they go take their 5 minutes, even if that's going into the bathroom and locking the door.

And it's important that parents—just like they're trying to teach the child how to label emotions—put feelings into words. A parent can say to a child that he's upset and that he's angry, and he can use words instead of screaming, and hollering, and getting all out of control himself. And sometimes using time out—I don't like to think about time out as a way to punish children; I like to think about time out for parents. Sometimes a parent really has to take a step away from the child so he can take a breather, and count backwards from 10, and get himself together so he can respond to the child in a more appropriate way. The other thing that is important is parents having someplace they can go to dump this stuff, such as a spouse, or a good friend, or somebody—or a therapist. And parents often don't give themselves time for self-care.

Q: A person can't be an effective parent if she hasn't nurtured herself, particularly if she has a child who's more challenging. Certainly during the toddler years it's very critical to build in that time do to the things that parents often put last, because people see parenthood as an either/or proposition—either you're nurturing your children, or you're not. And, in fact, by taking care of herself, she's really doing them a great favor, which is to be able, as you say, to come to more challenging times with the reserves that she needs.

A: To close, I would like to reiterate that the ability to exhibit self-control is a developmental process. Self-control crosses developmental domains and requires a certain level of cognitive, linguistic, and affective maturation that many young children do not have. So to expect a 2-year-old child to exhibit self-control is just not developmentally appropriate. Parents and other caregivers, as well as programs that work with young children and families, should focus on equipping young children with the strategies that will allow them to grow into adults who are able to control themselves in ways that are adaptive to the context. In the first few years of life, this would mainly center on promoting core developmental processes that promote self-control, such as language and emotion regulation. It is through learning to express wants, needs, thoughts, and emotions in appropriate ways that children learn to exhibit behavior that is acceptable and effective in the various contexts in which they grow and develop.

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Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

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Talking About Babies, Toddlers, and Sleep

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Sleep is a critical aspect of a child's early development. It is also essential to family well-being. During their first 3 years, infants and toddlers spend more than 50% of their lives sleeping (Iglowstein, Jenni, Molinari, & Largo, 2003). However, things do not always go smoothly when it comes to sleep. Concerns about sleep and sleep problems are among the most common issues brought to the attention of pediatricians and health care providers (Mindell & Owens, 2009). Sleep can present significant challenges for many families, with studies finding that 20% to 30% of young children have a sleep problem (Mindell, Meltzer, Carskadon, & Chervin, 2009).

Q: Concerns about sleep are probably the number-one issue that parents struggle with in the early years. Why are sleep challenges, especially getting a child to sleep through the night, such a big issue other than just the fact that nobody wants to be exhausted? What is it about babies and sleep that becomes particularly challenging even for parents who have been told it's going to be challenging?

A: Whether or not the parents get a good night's sleep, and whether the baby gets a good night's sleep affects so many aspects of functioning, how they feel that day, how parents feel about their baby, how parents feel about their partner, and whether or not they can think clearly. It just permeates everything, dreading the night and then the next morning not feeling well. And, you're right—it's basically the number-three question when you meet a parent, and I hear it all the time, such as on an airplane, "Oh, you have a baby? How old is the baby? Is it a boy or a girl? Is the baby sleeping?"

There are a number of things that make sleep issues so challenging. Parents have this image of bedtime being this wonderful cuddly time and they're rocking in this dark room. Instead the reality is they may have a child who's upset and crying, and they're trying to get him to go to sleep, and then at 2:00 in the morning, there's that little face again, wanting some attention. It's just very, very hard for a parent to handle. The reality does not always match the parents' dreams and expectations.

I often talk to parents whose expectations are at both ends of the spectrum. One expectation is that at 6 weeks old a baby should be sleeping 12 hours straight, which is ridiculous. They can't do that. They obviously need nighttime feedings. The other side is parents of 1-year-olds who have a child who is waking twice at night to feed, and parents think that's also normal. It's educating them on the other side, "No, your baby really could sleep through the night and doesn't need that feeding." So, it's not one side or the other. Parents are not well-educated about what to expect at different ages.

Let's start with newborns. Newborns' sleep is all over the place. The other thing that's dramatic about newborns is that there is dramatic individual variability (Iglowstein et al., 2003). Some newborns are only sleeping 10 hours a day, and others are sleeping 18 hours a day. So, a parent looks at a neighbor's child who's very different than her own, and she tries to compare. Newborn sleep habits are also very different than, say, an 8-year-old. Most 8-year-olds are sleeping about the same amount of time. So, especially in those first few months there are these big varied differences in how much sleep babies need. The other thing to understand is that there's no day or night for a newborn. They don't even develop the hormone that we use as our sleep guide until about 6 to 10 weeks. So parents shouldn't have any expectations about sleep.

At 3 to 4 months old, babies are sleeping anywhere from 8 to 12 hours a night and getting between 3 and 5 hours of sleep during the day.

By 1 year old, things have settled down, and babies are sleeping about 10 or 12 hours a night, and taking typically two naps a day—usually an hour to an hour and a half in the morning, and an hour to an hour and a half in the afternoon. Somewhere between 1 and 2 years—usually by 18 months—most toddlers have given up their morning nap. So they've moved to one nap a day right after lunch, for 1 to 3 hours.

Q: Great. That is so helpful. One of the things you mentioned was sleep habits. Parents are often told that they have to get the baby on a schedule, and let's say, they are at that fork in the road, the baby's 3 months old, really not sleeping in a way that the parents want, is that a time to actually introduce a certain

Abstract

Jodi Mindell, PhD, the associate director of the Sleep Center at the Children's Hospital of Philadelphia, describes how parents and caregivers can help children develop healthy sleeping habits beginning in infancy. Healthy sleep habits are an essential skill for children's overall health and well-being, and they impact family functioning. Dr. Mindell shares tips and strategies for helping children learn to fall asleep independently and addresses issues around the use of pacifiers, co-sleeping, and bedtime safety.

pattern that's going to help develop these good habits, or is that too soon?
A: No. By the time the baby is 3 months old parents absolutely want to be developing good sleep habits. And, to be honest, they can even do it at a much younger age and be setting the foundation. Now there are certain pieces they can do at a young age, and some pieces they would wait until later. Parents often feel helpless when it comes to sleep. They feel like they have no control, and it's one of the things that's a biological function that just kind of happens in their baby. They don't realize that parents really guide sleep habits. They can set their baby down a path, to either develop to be very good sleepers or develop to be poor sleepers.

The earliest thing that parents can do from when a baby is very young is start developing a bedtime routine. And I don't mean the day they come home with the baby, but within a couple of weeks they can start developing a bedtime routine. Now, a bedtime routine with a newborn is going to be really simple. It's going to be washing up, changing from one onesie to another onesie, and maybe dimming the lights and singing a lullaby. So, it may only be 5 or 10 minutes, but it's letting the baby know, that when I get changed, I'm in dim light, and I hear this lullaby, that means it's time to transition from day to night. And if parents do that at really little age, babies get it very quickly.

Second, by the time a baby is 3 months old parents should start to have a set bedtime. If they have a set bedtime, the baby's internal clock is going to start getting sleepy at that time every single night. And make bedtime early. Babies who go to bed before 9:00 fall asleep faster, wake less often at night, and overall get more sleep (Mindell et al., 2009)

Q: The one part of that routine that I would assume would be fairly typical is nursing or giving the baby a bottle. Do you recommend that feeding be a separate thing, that parents feed the baby, then go through the routine? I mean, if the baby falls asleep at the breast, or falls asleep halfway through the bottle, is it important to put the baby down when he or she is not yet asleep?
A: Right. That's the other piece to it—how does the baby fall asleep? I think of feeding as separate from sleep. I was a very long-time nursing mom, and I know as a nursing mom the easiest way to get your baby to sleep is to nurse. And it's a great trick you're probably going to want to use once in a while. But it's not the trick you want to use every night. Again, I'm not really talking about a 2-week-old, but by 3 months parents really want to separate feedings from sleep and feed before starting the bedtime routine.

Q: That's so interesting. That's really different than a lot of what parents are taught to do.
A: Right. We want breast or bottle, bath, book, and then bed. Not the other way around.

It makes no difference if a parent feeds the baby at 7:00 or if they feed the baby at 7:20 in terms of when she's going to wake up and when she's going to need her next feeding. Parents need to make a little space between feeding to sleep. That's that path I'm talking about—getting babies to start to develop what is probably the most important habit, which is falling asleep independently.

Now I don't want babies forced to be able to fall asleep independently at 1 week or 2 weeks, though there are many newborns who can do this on their own from the start — you bring them home, you put them down, they look at that mobile, and drift off to sleep happily. But by 3 months old parents really want to start putting the baby down when he's drowsy, but awake. I'll say, "Did you put them down awake?" "Oh, yeah. He opens one eye and looks at me." That's not awake—that's asleep. Parents really want to put their baby down wide awake so that he can develop that skill to fall asleep independently.

And the reason that skill is so important is because all babies wake up between two to six times per night. And that's kind of an "aha" moment for parents. When parents ask the question "Why does my baby wake up during the night?", the answer is that's normal. Even as adults we wake up multiple times per night. We're just not aware of it. All babies, even the best of the best sleepers, wake up several times during the night, but they fall right back to sleep independently. The problem typically isn't why is she waking up, but the question is why can't she fall back to sleep on her own? If a baby is nursed to sleep, rocked to sleep, driven in a car to sleep, pushed in a stroller to fall asleep, all the things that desperate parents do, then parents are not only going to be doing it at bedtime, but they're also going to be doing it at 1:00 in the morning and 3:00 in the morning.

And it's a skill. It's just like learning to crawl. If a baby is never put on the floor, he'll never learn to crawl. Think of it like learning to ride a bicycle. If a child can ride a bicycle in the morning, he can ride a bicycle in the afternoon. It's just like that with sleep. If a baby can fall asleep independently at bedtime, he's going to be able to do the exact same thing in the middle of the night.

Q: Right. And the biggest challenge for parents, particularly because they're tired, is when they put babies down, it's hard to just let them cry it out. And should parents let them cry it out?
A: Let's separate those into two different parts. One part is prevention of sleep problems, and developing good sleep habits early. If parents do it early enough, they don't have the crying, because they haven't developed a bad habit that they now have to change. I really recommend to parents, at 4 weeks, 6 weeks, 8 weeks, put the baby down awake and see what happens. I'd say half the time the babies just drift off to sleep, and the parents are stunned about it.

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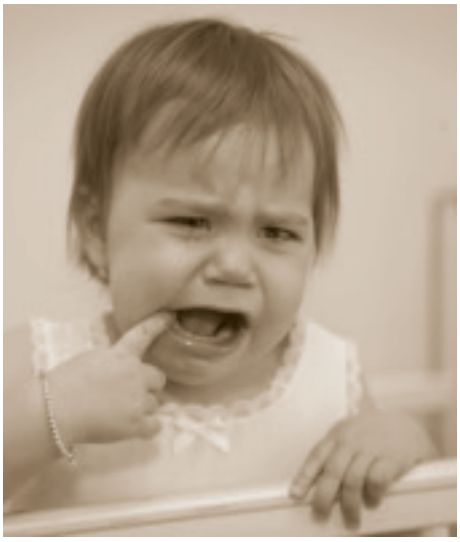
Some newborns are only sleeping 10 hours a day, and others are sleeping 18 hours a day.

Now, the other babies, if they do cry, please go to them right away. I don't want a 4-week-old or an 8-week-old left to cry. And you can see it in large families. By the time it's the parents' fourth child, they're not in that room rocking them to sleep for an hour and a half. They can't. They don't have the time. The babies all go down awake.

Q: I have a friend who had triplets, and, believe me, she never went through any problem with getting her kids to sleep.
A: Right. Because there's just not enough hands available. And so they all go down awake. So, one part is prevention. The other part is what professionals call intervention, which is what to do if parents now have a problem—they now have a 9-month-old, or a 1-year-old, a 2-year-old, or even a 6-year-old who's never fallen asleep independently. Will there be tears? Yes. There will be tears. Any change is hard. And they're tired, and all they want to do is fall asleep. Now, the tears, though, are typically fairly minimal. It's usually a few nights of tears. One thing I always recommend to parents is start with bedtime first.

At first, only put a baby down awake at bedtime. In the evening, parents have the wherewithal to do it. At 2:00 in the morning, I want all parents responding to their children in the middle of the night when they first start sleep training. Again, it's a skill. Once babies



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Parents often feel helpless when it comes to sleep.

develop the skill to fall asleep independently at bedtime, most of them naturally start sleeping through the night. Parents never have to do sleep training at 2:00 in the morning. This way parents can always respond to their children during the night, because it's more likely that something really is wrong rather than it's just a habit.

There are a few children that need a little encouragement in the middle of the night, too. And I'm not going to deny that sleep training is difficult. The first night babies are usually upset for a while, about 30 to 40 minutes. The second night is almost always worse, and that's a really important warning to parents. Parents think, "It's getting worse. This isn't working." But for babies, the first night they're thinking, "Okay, I'm not liking this." The second night they're like, "No. I really don't like this." By the third night any crying may be 15 or 20 minutes. After that it gets progressively better and better. I tell parents to just focus on bedtime for at least 2 weeks. Don't do anything else—don't make any other changes. Nurse in the middle of the night. Do whatever they need to do to get everyone back to sleep. Most parents will find that their baby just starts sleeping, and it's wonderful.

Q: Yeah, having done just what you're describing when my daughter was about 9 or 10 months old, it was just those first two nights that were really real torture. I remember standing outside her door and hearing her sobbing and saying, "Ma, Ma, Ma, Ma," and then the third night I didn't hear a word. I thought, "Oh, my gosh, she's choked to death, or something." I mean, I kind of waited and waited, and when I looked in and she was asleep, I felt as though I had parted the Red Sea. I never had experienced such a sense of accomplishment! But those first two nights were really tough. I was actually doing something, which I don't know whether you recommend, of going in, not even touching her, but just saying, "You're okay," and then going back out.
A: Exactly. The big question is what should parents do during that 45 minutes of the baby being upset. Parents should be looking for that golden moment of their baby falling asleep on her own. How parents get to that golden moment doesn't really matter. So, they can go in every 30 seconds. They can go in every 5 minutes. They can go in every 10 minutes. I recommend, though, that parents please go in and not just wait out the 45 minutes. I find that the crying lasts longer if parents don't go and check. I also really worry about making sure the baby's okay.

What parents do when they walk in is to present the sense to their child that everything's okay. Babies pick up their cues from their parents. So, parents need to fake it a little bit and just be like, "It's okay. It's night-night time. I love you. I'll see you in the morning." And they should just say that same calming statement every time, even if they're not feeling it, and the baby's going to sense that everything is okay. Can the parent pick them up? Some of the families in our clinic who really struggle with doing this, we tell them to pick up their child for a moment and put him right back down. But it works better if parents just walk in, say "You're okay," and leave again. Parents should do what they feel most comfortable doing. Some parents don't feel comfortable with leaving and feel like in the beginning they need to just sit there. I recommend if they're sitting there, they have a book or a magazine. They may not get any reading done, but at least they're not just staring at the baby and the baby staring back at them. They have something else to look at for a little bit of break in that eye contact. They have to decide how they get to that golden moment of their child's falling asleep independently. How they get there is really their comfort level. But getting there is key, and we've done studies all around the world (Mindell, Sadeh, Kohyama, & How, 2010; Mindell, Sadeh, Wiegand, How, & Goh, 2010) and found the key to sleeping through the night is falling asleep independently.

Q: One of the things you haven't said, but is so critical, and I know is a big part of your work, is reframing this for themselves. What I tell parents is they have to think empowerment not punishment; that they are teaching their child a critical skill. Not just critical for their own sanity, but for the child's well-being. If parents think about it that way, as though they're actually giving babies the gift of learning to do this—being able to self-soothe and go to sleep is a gift to kids. I just spoke to a father recently who was asking my advice about this, and he said, "And of course my wife and I don't believe in letting our child cry." And I said, "Well, Bob, you're going to have a problem. Not because I advocate that you let the child cry and cry for hours, but if you think it's a punishment, you're thinking about this the wrong way."
A: Exactly. It's just like a child learning to walk. They stumble, they fall, they cry. Parents don't say, "Oh, you can never walk again." They pick them right up and put them right back down, because it is such a critical skill. And I agree with you in thinking about it as a gift. I always tell parents, "You're not being selfish about this. Your baby will feel better not waking up three times a night just like you're going to feel better not waking up three times a night." I also worry that a parent can't expect that 100% of time they're going to be there at bedtime. One night it would be nice for the parents to go out and have a babysitter, or have Grandma or somebody else be able to put the baby to sleep. Parents need their baby to be flexible in this world, because the world isn't always constant.

Q: Exactly. This is great advice. Let's say parents do have the child on a schedule at night, or at least they have the child developing what are good habits going to sleep, sleeping pretty much through the night. But let's say naptime is a challenge. Do they go from the nighttime routine to the nap routine? Or do they do them at the same time?.
A: In terms of falling asleep independently, I always have parents do it in three steps. We do bedtime first, we do nighttime next if they need it, and then we do naps third. Naps are much harder. Bedtime is clear. Their baby is tired. It's time to go to bed for the night. Naps are not clear. Parents put them down and they cry for 45 minutes. Is that the end of the nap? Or do the parents get them up? Or do they let them go? So, I find once that once babies have the skill in place from bedtime it's a little easier to deal with naps. I even have parents start with just one nap. During the second nap, parents can do whatever they can to get their child to go to sleep.

Very young babies nap on one of two different schedules. The first schedule is what I call "by the clock": they nap every day at 9:00 and 2:00, or 9:30 and 2:30. And that's pretty typical. Then there's the other ones, and my daughter was one of those other ones, who take about a 30- to 45-minute nap, wake up happy as can be, and then are awake for 2 hours. They go down to sleep for 30 to 45

minutes and they're awake again for 2 hours. I call that the "2-hour rule"—taking a nap after being awake for 2 hours. Neither one is right or better. It's just the child's internal clock. But it can drive parents crazy, because it makes the day a little unpredictable and they think something's wrong that the child's only napping for 45 minutes. But the child's fine.

Q: That's so important. A big part of what ZERO TO THREE has been able to share with parents and with providers and people who work with parents is that no child is the same. Baby number two is not going to be the same as baby number one. Getting to know the baby, getting to know what works, is such a critical part of helping the baby get a good night's sleep and letting parents get a good night's sleep.

A: And we see that with twins all the time. Parents come into clinic and they have one little baby with them, and this is their problem sleeper, and then it comes out that it's a twin—the other one's fine.

Q: During the toddler years, where it's a little bit about "You can't tell me what to do," or a lot of pushback in terms of, "No," and not wanting to go to bed, do parents still stick to the same idea that they need a schedule, that children may need to be able to go to sleep independently, or do parents have to change their strategy once they're dealing with a toddler?

A: Toddlers are their own little animals. And they're very cute. And those terrible 2s really start more like at 18 months. It's a long terrible 2 phase. But in terms of the basic sleep rules, it's the same. Parents still should have a schedule, a bedtime routine, and falling asleep independently. But there are some tricks that parents can start to do by 2 or 2½ years that really help. One is a bedtime routine chart. It's a chart that literally shows what's going to happen. And parents can say, "What do we do next?" "We brush our teeth, then we put on our pajamas, and then we read two books." And they should put a picture of two books, and therefore there's no argument about it.

Another thing is making an absolutely favorite activity be the very last thing of the bedtime routine. We had one family we worked with, and all their son wanted to do was play with his G.I. Joes. He fought his bath and he fought his bedtime routine. So we set in place that he and the dad got to play G.I. Joes the last 5 minutes before lights out, and we put it on his bedtime routine chart. That kid just zipped through it all.

It's a win-win. Parents want bedtime to be successful for everyone. They want it to be a time that everybody looks forward to. So they can think about what's the favorite thing that their child always wants to do, and make that a special bedtime activity.

Q: The difference, of course, between toddlerhood and babyhood is they can get out of bed.

A: Right. And that's a challenge. Many parents move their child to a bed when they can first climb out of a crib, and a lot of them are still too young to be in a bed. Most 2-year-olds can't stay put. They just don't have the behavioral control. I often recommend a crib tent. And it's all in the sell. Let the child know that now that she is older, she gets this cool tent, and that's what big kids get. And a 2-year-old will immediately buy it—"Oh, okay. That's great." A crib tent can keep them safe and secure. I worry a lot about a 20-month-old who's wandering around her room or the house in the middle of the night. It's much more dangerous than being safely ensconced in her crib and a crib tent. If they're not ready for a bed, they're not ready. It's not worth the 6 months of fighting it, and the tears and the lack of sleep on everyone's part. I'd rather keep them put in their crib where they sleep well. And by 3 years old, kids have more behavioral control and most of them don't get out of their bed at bedtime.

Q: Let's talk about the impact on parents when there are sleep challenges. One of the interesting findings in the Hart research (Hart Research Associates, 2010) that was done for ZERO TO THREE was the gender differences around sleep challenges. Twice as many fathers as mothers said sleep and bedtime issues were the top childrearing challenge. My first thought was maybe that's because they're around more for the sleep time, and so they have to deal with it. But, is there anything else that occurs to you, or do you think it's just that more dads may be coming home at that time of night?

A: Right. It's the witching hour. The evening is when kids are falling apart, and right around dinnertime is stressful for families because the kids are tired and they're hungry. At the same time parents are trying to get dinner on the table. So, some of the fathers may be just more present for that difficult time of the day. There's been some really interesting research which shows that fathers' involvement in sleep and nighttime care leads to fewer night awakenings, which is interesting (Tikotzky, Sadeh, & Glickman-Gavrieli, 2011). So professionals do want fathers clearly involved. And I get asked this question all the time. I gave a talk the other day and a pediatrician asked the question, "What do I do about the family where Dad comes home and starts roughhousing at bedtime?" I really want to encourage different parenting styles and different ways of interacting. But that roughhousing is probably better done at a different time of day. Encourage something else they like to do. Maybe they like to do puzzles instead of read books, or something like that.

Q: Let's talk just a little bit about a topic that's gotten a lot more press, which is this issue of co-sleeping. There are some developmental experts who say that it's really important for bonding and attachment. Do you have any sense of what the research shows, and, more important, what's the impact of co-sleeping on sleep?

A: Let's take each piece of that. There is no research that shows whether or not co-sleeping is good for babies or bad for babies and the impact on attachment and things like that. Professionals can't do that research. We can't say to 100 families, "You need to sleep with your baby every night," and say to another 100 families, "You're not allowed to," and then look at them at 5 years old.

So we just can't do that research. Parents who are loving and wonderful, and have babies who are well-attached during the day, need to decide what works best for their family in terms of where they want their child sleeping.

And we talk about two different kinds of families who co-sleep. There are the families where it's a lifestyle choice; where the parents think it's important for their child to be close to them during the night. Culturally we know, in many, many Asian countries that co-sleeping is just the norm, and that's the

Learn More

Back to Sleep Campaign
www.nichd.nih.gov/sids/
The campaign, which began in 1994 as a way to educate parents, caregivers, and health care providers about ways to reduce the risk for Sudden Infant Death Syndrome (SIDS), is sponsored by the Eunice Kennedy Shriver National Institute of Child Health and Human Development, the Maternal and Child Health Bureau of the Health Resources and Services Administration, the American Academy of Pediatrics, First Candle/SIDS Alliance, and the Association of SIDS and Infant Mortality Programs.

The Sleep Center, Children's Hospital of Philadelphia
www.chop.edu/service/sleep-center/home.html
The Sleep Center diagnoses and treats children for sleep disorders. The Web site offers links to organizations and resources for families and professionals.

expectation. The other group are what we call reactive co-sleepers, which is, "At 1:00 in the morning, I can't stand it anymore. I just put her into my bed." That's a family where we want to make a change.

What researchers do find is that co-sleeping is associated with more nighttime wakings, later bedtimes, and less total sleep. But it really has nothing to do with co-sleeping. It has to do with that parental presence at bedtime. Those parents who are present at bedtime, that is have children who do not fall asleep independently, have children who wake more often at night and need their parents versus those who are falling asleep independently; it's just that for families who co-sleep, parents are more likely to be there at bedtime.

We really encourage co-sleeping families to have their child fall asleep independently even if the child is going to be there all night, because parents usually go to bed later than their child anyway. I hope that children are going to bed early enough and not at the parents' bedtime.

So, back to that bigger picture of whether parents should co-sleep or not. They really, as a family, have to make that decision based on what is important for them, what works for the family, what gets everyone the most sleep at night, and make that as an informed decision with the codicil that we've got to make sure babies are safe.

Q: So, what's safest for the baby? Let's talk about one of the most successful campaigns to help prevent sudden infant death syndrome, which is Back To Sleep. Is that still something that should be every parent's mantra?

A: The Back To Sleep Program has been instrumental in reducing sudden infant death by almost 50% here in the United States and almost 50% in every country that has adopted it. We want all babies sleeping on their backs right from the day that they are born. It's going to make a critical difference. Now, at some point the baby's going to start rolling over. Once they start rolling over, they're typically past the risk period and parents can't keep them on their back. So, it's the Back To Sleep Program until babies start rolling over. And then at that point they're usually fine.

Other safety issues that researchers are really concerned about, again, with co-sleeping, is that we don't want any comforters, any pillows—anything that a child can suffocate on. We don't want parents with sleep problems themselves, like snoring and sleep apnea, rolling over on their babies. So, if they're going to co-sleep, the most safe way to do it is with a co-sleeper, which attaches to the side of the bed. The baby's then right there within reach, but she's in her own safe space.

Q: What about pacifiers? Can they be a good thing in terms of safety and sleep?

A: First of all, I'm a big pacifier supporter. There are just babies who really need to suck. It really soothes them and it's important for them. And there's a little initial data showing that pacifier use also reduced SIDS (Moon & Fu, 2007; Moon, Tanabe, Yang, Young, & Hauck, 2011).

So, I wouldn't discourage a baby who's a pacifier user. There are a few months when parents have to pop it in the baby's mouth in the middle of night because their baby can't reach it yet, but then they become great sleepers. A few other safety practices are to make sure that the crib is safe, that all bolts are tightened securely, and that slats are the right distance apart and it doesn't have cutouts on it. Finally, make sure that where the child sleeps isn't near any cords, either electric cords or cords hanging from blinds.

As I said in the beginning, sleep problems can be a real challenge for families. However with just a few changes, parents can make a major difference, resulting in their child sleeping well and the entire family sleeping well.

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Editor's Note: The text of this article is adapted from a podcast in the "Little Kids, Big Questions" series, which addresses some of the most common—and challenging—issues facing the parents and caregivers of infants and toddlers. The 12 podcasts in the series were all hosted by Ann Pleshette Murphy, vice president of the ZERO TO THREE Board of Directors and a former contributor to ABC's *Good Morning America* Parenting Segment. The podcast series is available at www.zerotothree.org/parentingpodcasts and was made possible with the generous support of MetLife Foundation.

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Jargon Buster

Given the multidisciplinary nature of our work with infants, toddlers, and families, we often come across words or acronyms that are new or unfamiliar to us. To enhance your reading experience of this issue of *Zero to Three,* we offer a glossary of selected technical words or terms used by the contributing authors in this issue. Please note that these definitions specifically address how these terms are used by the authors in their articles and are not intended to be formal or authoritative definitions.

Phrase	*What it means*
Continuity of Care	Continuity of care helps children develop close bonds with their caregivers. In the context of high-quality child care, continuity of care refers to the practice of assigning a primary caregiver to a child upon entry into the child care program, and maintaining that relationship throughout the time of enrollment. (Find it in Daniel, page 42)
Executive Functioning	Executive functioning refers to the mental processes involving cognitive skills and self-control. (Find it in Jones Harden, page 54)
Looking-Time Technique	Looking-time technique is a research method used on young infants that takes advantage of the fact that babies look longer at things that are surprising or unexpected than they do at things that they expect or predict. (Find it in Gopnik, page 12)
Still-Face Experiment	The Still Face Experiment (Tronick, Adamson, Als, & Brazelton, 1975) is an experimental procedure for studying infant social and emotional development. During the experiment, an infant and a parent interact playfully before the parent suddenly stops responding and looks away. After a short period, the parent reengages with the infant. The infant's reaction to a suddenly unresponsive parent and his or her behavior when the parent resumes interaction have been used to study many aspects of early social and emotional development. (Find it in Thompson, page 6)
Theory of Mind	Theory of mind refers to the cognitive ability to understand the mind of another human being. (Find it in Gopnik, page 12)

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