Introduction to Infant and Toddler Social Emotional Development*

[Introduction]

Hi, my name is Eva. In this course, we are going to focus on infant and toddler social emotional development, with a special emphasis on the role that relationships play in facilitating development in these important areas.

The process by which infants and toddlers become socially and emotionally competent is filled with challenges—challenges that occur in normal development, challenges that signal unmet needs, and challenges that are particularly difficult for children themselves, their families, and for providers. Social emotional development begins at birth and continues throughout life. It provides a foundation for meaningful relationships and learning throughout life. When children experience difficulty in acquiring social emotional skills, they are at increased risk emotionally, developmentally, and academically.

Before we move in to the course content, let’s take a few minutes to review the learning objectives for this course. After completing this course, you should be able to:

- Define social emotional development,
- Explain the role that relationships play in facilitating social emotional development in infants and toddlers,
- Identify important developmental concepts, such as self-regulation, temperament, and attachment, that impact infant and toddler social emotional development,
- Identify key social emotional milestones during the infant and toddler stages, and
- Describe the unique importance of families to the social emotional development of infants and toddlers.

[Social Emotional Development Defined]

The term social emotional development refers to the developing capacity of the child from birth through five years of age to form close and secure adult and peer relationships; experience, regulate, and express emotions in socially and culturally appropriate ways; and explore the environment and learn – all in the context of family, community, and culture.

Caregivers promote healthy development by working to support social emotional wellness in all young children, and make every effort to prevent the occurrence or escalation of social emotional problems in children at-risk, identifying and working to remediate problems that surface, and, when necessary, referring children and their families to appropriate services.
Let’s consider some of the key phrases in this definition of social emotional development.

“Developing capacity” — Infants and toddlers grow and change quickly, gaining more skills in all areas of development: physical, cognitive, and social emotional.

“Form close and secure adult and peer relationships” — Infants and toddlers require nurturing relationships with adult caregivers for healthy social emotional development. When adults are loving, responsive and consistent in their care, very young children learn that they are valued and that their world is primarily satisfying and predictable. They learn through these relationships how to interact with their peers. In the first few years they require a lot of support in managing peer relationships.

“Experience, regulate, and express emotions in socially and culturally appropriate ways” — Joy, sadness, and frustration are just some of the emotions that all children experience during their first years. Infants and toddlers watch important adults to figure out how they should feel and act in certain situations. With adult help, they increasingly learn how to control or regulate their emotions so that they don’t get overwhelmed by them. The family’s culture affects the way in which parents interact with their very young children as their values, beliefs, goals, expectations, and resources are expressed in their child-rearing practices.

“All in the context of family, community, and culture” — Infants and toddlers first learn about relationships and feelings as part of a family. As was just mentioned, culture influences the relationship between children and caregiving adults. Communities, too, play a role in shaping how adults and children interact and how they are supported (or not) through public policies and the availability of resources.

[Important Role of Relationships in Infant and Toddler Social Emotional Development]

The primary focus of this course is on developing relationships. One of our most important roles in supporting positive social emotional development with young children is to establish nurturing and trusting relationships. It is through these relationships that infants and toddlers learn about their world and their place in it. They learn that the world is safe and responsive to their needs. They learn to form satisfying relationships with others, to communicate, to face challenges, and to experience and regulate their emotions.

Since relationships are constantly adjusting to changes in development, we need to understand the course of social emotional development. Building positive relationships with both children and parents is essential for a child’s healthy development. Young children observe our relationships and what they observe shapes their expectations for how people treat each other. Relationships are established with each individual infant, toddler and family and, therefore, look somewhat different with each. Those of us who provide care to infants, toddlers and their families build our skills in carefully observing the social emotional cues provided to us by infants and toddlers in order to respond to them with interactions that build responsive, nurturing relationships.
We’re now going to watch two short video clips of interactions between young children and their caregivers. Please observe these interactions and pay particular attention to what the adult does and says.

[Video Clip]

What did you notice about the interactions between these two young children and their adult caregivers? In the first interaction, we see the caregiver do a number of important things, such as holding the child, using a warm, comforting voice, following the child’s lead, being responsive, and saying the child’s name. In the second interaction, we see the caregiver using an engaging, warm voice, responding to the child’s vocalizations, and using good positioning.

As the training progresses, we will be thinking about and looking at a number of examples of effective ways of building strong relationships with babies and toddlers.

[Relationships are Different from Interactions]

Let’s now turn our attention to the difference between relationships and interactions. Think for just a moment about a “good” relationship that you have with another person.

Perhaps you thought about someone you have not known all of your life – but rather someone you met along the way. How did this “good” relationship with the person develop? It began by interacting! It is through these interactions over a period of time that a relationship was formed.

Relationships:

- Have emotional connections,
- Endure over time,
- Have special meaning between the two people, and
- Create memories and expectations in the minds of the people involved.

Repeated interactions lead to fairly predictable relationships because the infant or young child begins to know how the other person will respond to him or her. This pattern of responses creates the emotional connection that the infant has to the other person. Most adults respond to infants in predictable ways and they, too, form emotional connections when they repeatedly care for an infant.

[The Role of Relationships in Our Own Lives]

Our prior relationships create feelings, expectations and behaviors that we bring to each new relationship, including those with babies we care for. If we have a personal history, going back to our childhood, of basically satisfying and supportive experiences, we are likely to go into new relationships with the expectation that these relationships will also be satisfying and supportive.
But, if we have a personal history of emotionally difficult or traumatic experiences, we may find it harder to manage new experiences as adults – particularly stressful ones.

During our childhood, we received all sorts of messages about ourselves. We are likely to send some of those messages on to the children we care for, whether we intend to or not. Sometimes these messages were verbal and sometimes they were non-verbal. If they were received before we could talk and use language, they were pre-verbal experiences. Reflecting on how we interpreted the messages we received in childhood make it easier to recognize the impact of our own experiences on the messages we send to children in our care.

As adult caregivers of very young children, it is not easy to be calm and supportive of infants and toddlers when they are behaving in ways that we don’t understand or that are causing problems for them or others – particularly if we have not experienced relationships in our own personal lives that helped us deal with stress. It is important that all of us have the opportunity to think about and discuss the impact of our past experiences on our current behavior and relationships with other adults and children as part of ongoing professional development experiences. Working to become more self aware helps us separate our current feelings and reactions from those generated in past experiences.

[Babies’ Readiness for Relationships]

I now want to direct your attention to a few photographs that show adults and children interacting with one another. As you look at each of the images, think about what the baby or toddler is doing that tells us the child is inviting or participating in a relationship. Focus especially on the behavioral cues that the infant or toddler is demonstrating.

What do you see in this first image? Perhaps you noticed that the child and adult are smiling, maintaining eye contact, having fun together, and are in a comfortable position.

Let’s take a look at another image.

What do you notice in this second image? As with the first image, the child and adult have established eye contact. Both are smiling and appear to be enjoying the interaction.

Finally, let’s take a look at a third image.

In this third image, we see two children interacting with each other face-to-face. One child is smiling, while reaching out to the other, and the adults seem to be enjoying watching their children interact.

Looking at these photos of interactions between adults and children provides a simple illustration of how we use our observational skills to pick up on behavioral cues. Being good observers helps us connect with children. The more we observe how individual infants and toddlers interact, how they use non-verbal and verbal cues, and how they communicate emotional signals, the easier it is for us to match the child’s interaction style.
Findings from research on children’s early social emotional development have helped us gain a much better understanding of the amazing capacity of babies to seek out and develop relationships with other human beings. Listen to the following statements that summarize some of these key research findings:

- Nature and nurture combine to define who we are as individuals.
- Nature has provided humans with what some scientists call early infant competencies or motivations.
- Babies are born to connect with other humans.
- They discriminate sounds of language very early.
- They recognize their parents’ voices.
- They can match emotional voice tone to emotional facial expression.
- Babies prefer looking at faces.
- They seek physical and emotional equilibrium.
- Babies are predisposed to signal their needs to someone who will help them survive.
- Babies are an emotional trigger for adults.
- Babies are born with the desire to master and explore their environment and are active participants in their own learning.
- The infant’s early brain development is designed to connect the newborn with other human beings around him who will provide care.
- The brain grows through the experiences the infant has with the world. Parents and other important adults are that world.
- The family’s culture influences all areas of a baby’s development, including the social emotional realm.
- Many factors can affect social emotional development, including developmental delays or serious health issues with the baby, or an environment with multiple risk factors.
Examples include poverty, substance abuse, adult mental health issues, and domestic violence.

- The baby’s communication of emotions and needs establishes the learning pathways in the brain that lead to all other physical, cognitive, and emotional learning.

As the training progresses, we will talk more about these statements. For example, “Nature and nurture combine to define who we are as individuals” means that each infant’s capacities are a combination of the biological makeup of the infant along with the experiences the baby has in the first few years. “Babies are born to connect with other humans” means that since babies are born “ready” to connect, as caregivers, we have the opportunity to provide positive experiences that nurture and encourage infants to connect with other humans. When we change an infant’s diaper, we softly talk to the child telling them what we are doing, making them more comfortable by putting on a dry diaper, telling them how special they are, and so forth. All of these positive interactions encourage infants to continue to try to connect with others.

[Developmental Concepts that Impact Social Emotional Development in Infants and Toddlers]

As infant-toddler caregivers, you have an awesome responsibility and great pleasure, along with a child’s parents, to introduce them to the world of relationships and the process of loving and learning in these formative early years. I hope that this training will excite and inspire you to take great satisfaction in your opportunity to make such an important contribution to the lives of children.

There are three major elements of social emotional wellness in infancy: forming close and secure relationships (which we have been talking about); experiencing, expressing and regulating emotions; and possessing the ability to explore and learn. We will spend time exploring each of these elements and thinking about what this means for us as we work with infants and toddlers.

[Self-Regulation and Stress]

Newborns are actively engaged in regulating or managing their reactions to all of the new experiences they are encountering in the world. During their first weeks of life outside of the womb, they must learn to manage their body temperature; eat, digest, and eliminate; and be awake and alert or restfully sleeping.

They also must manage the enormous amount of sensory information to which they are subjected: faces, sounds, textures, shifting air temperatures, light and dark, pleasant and unpleasant smells, and tastes. Sensory information is all around infants and it can be a tough task to experience and regulate all of this stimulation. Many times when an infant is exposed to new sights, sounds, smells, tastes, and touches it can be too much. He needs adults to help him learn how to cope. When you are there to support him and show him how to calm down, he begins to be able to calm himself. For example, he might suck on his fingers to soothe himself before he falls asleep or he may stop crying when you sing to him.
[Video Clip – Taking in the World]

We’re now going to watch a video clip of an interaction between a caregiver and infant. As you view the video clip, observe the multiple sensory experiences the infant is encountering, how the infant reacts to the stimuli, and what the adult does to assist the child.

In this video clip, the infant encountered a variety of sensory experiences. Infants regularly encounter sensory experiences such as the sound of a caregiver’s voice, movements of objects, bright colors, the feel of textures on their skin, and the sounds objects and people make. Infants may react to these stimuli by following objects with their eyes and heads, making faces, hiccupping, moving their legs, vocalizing, blinking their eyes, or through many other responses which indicate how the child is responding emotionally to the experience. What about the adult providing assistance to the child? In this clip that we just viewed, we saw the caregiver assisting the child in a number of different ways. Some common ways caregivers provide assistance in regulation include talking about what is happening, removing some of the sensory stimulation, and using a soft, calming voice.

Please take a look at the handout entitled, “Regulation and Stress in Young Babies.” The left column shows the behaviors that indicate that an infant is achieving the regulation of his sensory intake and moving toward increased organization of his/her body. The right column, in contrast, lists the physical and behavioral indicators that might demonstrate the infant is experiencing stress. When we say stress we mean that the infant is uncomfortable, that his or her body is experiencing sensations or signals such as those from the central nervous system or digestive system, that keep him or her in an uncomfortable or stressful state.

It is important to note that sometimes the same behavior can indicate different things. For example, when a baby hiccups or yawns, it may mean that s/he has just taken milk too fast or is sleepy. These behaviors, though, combined with other signs of stress such as turning away from the caregiver or flailing her arms, can indicate that the baby is stressed and needs help to calm down.

[Strategies for Helping Babies Self-Regulate]

Adults help babies to be calm and to be able to quietly pay attention to the things that interest them. In the first months, adults and babies co-regulate, or work together, to help babies learn over time to manage or regulate their reactions.

Generally, adults are able to comfort and help babies regulate pretty easily. But for some babies, it is a hard process. It can be helpful to think about different behaviors in terms of regulation and to think about what strategies we might use if regulation is the cause of difficulty for the baby.

Most strategies that help babies self-regulate are directed at assisting them to move from one state of alertness to another. The short term goal for the infant is to become more comfortable
and less stressed. The long term goal is for the infant to self-regulate or for the infant to be able to do what keeps him/herself calm.

Let’s watch another video clip of an adult caregiver supporting a child’s self-regulation. As you watch this clip, observe what the baby is doing, what they see the caregiver doing to help the infant regulate himself, and if the caregiver’s efforts are successful.

[Video Clip – Adult Supporting Self-Regulation]

In the clip that we just viewed, we saw the baby doing a number of things. Did you notice any behaviors that might indicate that the baby is having trouble self-regulating?

What did you see the caregiver doing to help the infant regulate? Some things you can do to help infants regulate include explaining in a calming voice what is happening, labeling what the child is doing or feeling, responding to the child’s needs or desires, following the child’s lead, and talking for the child.

Would you consider the efforts of the caregiver in the video successful? The child was happy at the end of the interaction. Sometimes we as caregivers have to let go of our own short-term goals for an interaction in order to meet the needs of the child. For instance, if you are reading with an infant, and he wants to open and close the book, you might need to give up your short-term goal of finishing the story in order to meet the infant’s need to explore the book by opening and closing it.

It is important to note that one strategy does not always work, so we need to observe the infant carefully and, if necessary try several different things. Babies have a lot to learn to manage their bodies, so they require a lot of support and patience.

[Temperament]

Each baby’s ability to regulate his/her reactions is dependent in part on his/her own biology and in part on how sensitively adults are able to provide support. The biological aspects of regulation are often best understood as temperament. Each child is born with his/her own temperament or individual way of approaching the world. A child’s behavior and approach to the world is shaped by his/her experiences and interactions with the adults in his/her life. Understanding a child’s temperament helps us provide more responsive and sensitive care.

Some aspects of temperament are noticeable from birth and continue throughout life. Right from the start, all of us have our own unique genetic makeup which includes our nervous system and the way we take in sensory stimulation. For example, some people may like bright lights and loud music. Others prefer the lights low and the music quiet. Some people eat and sleep in pretty regular patterns; others have no pattern at all. The concept of temperament helps us understand that children engage with the world according to their inborn characteristics.
A large part of a caregiver’s job is to adapt his or her own temperament to meet the needs of the infant. For example, a caregiver who likes bright lights and loud music may need to provide less stimulation by talking more softly and reducing the lights and other noise. The degree to which this is managed is referred to as “goodness of fit.” The sensitive adult adapts his or her behavior in such a way as to not require the infant to make the adaptation, knowing it would be stressful for the infant. The adult seeks to match her behavior to meet the infant’s needs.

It is also important to understand the impact of inborn, biological differences on the behavior of individual children. Each infant is born with his or her personal style – his or her typical way of approaching or reacting to the world. Learning about temperament can help providers understand more about how these inborn traits play a major role in a child’s pattern of behavior and may eventually have a major influence on how a child feels about him or herself. Understanding an infant’s or toddler’s temperament can help us begin to anticipate what situations may be easy or more difficult for him/her. Understanding an infant’s or toddler’s temperament can also help us be better caregivers.

[Temperament Traits]

There are nine traits that are considered to be key components of a child’s temperament. These nine traits can be found in the handout entitled, “Temperament Traits.” They include:

- Activity Level
- Biological Rhythms
- Approach and/or Withdrawal
- Mood
- Intensity of Reaction
- Sensitivity
- Adaptability
- Distractibility, and
- Persistence.

[Temperament Types]

There are three temperament types into which many children fall. Each of these three common temperament types is characterized by a trait that may dominate the child’s behavior. The following groupings for temperament traits are discussed and illustrated in The Program for Infant Toddler Caregivers which is a training that many of you may be familiar with.

It is important to keep in mind that we are not trying to “label” children. We are discussing different temperament types to help us become better observers of young children’s needs. It is your responsibility to adjust your own temperament to better match the temperament of individual infants and toddlers.

The easy or flexible child is generally easy to care for. She adapts quickly to new situations, is biologically regulated, is optimistic in her approach to new people, and generally has a positive
mood. She tends to learn to use the toilet without a lot of difficulty, sleeps through the night, and has regular eating and sleeping patterns. She enjoys new people and places and typically gives mild signals of distress. Even when very unhappy, this child may cry little.

The feisty child is often the opposite. This child may be hard to get to sleep and sleeping and eating patterns are irregular. Toilet training may be more difficult because of irregular bowel patterns. This child may fuss or cry at loud noises, and is often wary of new people and things. He is slow to warm up and may escalate to temper tantrums quickly if frustrated. He may have frequent unhappy moods. This child may be very noisy when even slightly unhappy.

The third group of children often has difficulty in adapting to new people and places. They are often called fearful, shy, or slow-to-warm. Their mood may not be easy to gauge because it takes longer for them to engage with a group or a new activity. Their biological rhythms may or may not be regular.

To help describe a child’s temperament, you might think about:

- What is the child like?
- How calm or active is she?
- How does she respond to changes in routines?
- How does she deal with a lot of stimulation? and
- How does she let you know she likes something, dislikes something, etc.?

The three photos of young children that you see on your screen capture expressions that are indicative of these different types of temperaments.

[Attachment]

Let’s revisit the definition of social emotional development that we discussed earlier. The second and third elements of the definition of social emotional development are often described as two internal, psychological systems that balance each other. Achieving this balance is key to social and emotional competence during childhood as well as throughout life. A child who is secure in his or her primary relationships is a child who is likely to be comfortable exploring and learning about new things.

The phrase used in the definition of social emotional wellness “the capacity to form close and secure interpersonal relationships” refers to the important concept of attachment. The feelings of protection, safety, and security a child gets from an attachment relationship give him the courage and confidence to pay attention to exploring the world.

“Attachment is a pattern of interaction that develops over time as the infant or toddler and caregiver engage.” John Bowlby, one of the first writers and researchers to write about attachment, describes the term “attachment” as the emotional bond that develops between a baby and a caregiver.
When infants feel threatened, they turn to the caregiver for protection and comfort. The caregiver’s consistent, accurate response to the infant’s signal of need, such as crying, helps mold the attachment relationship into a predictable, back and forth pattern of interaction that develops over the first year of life. The infant is, in fact, biologically inclined to use the caregiver as a provider of comfort. We use the term “secure base” to describe the feeling of safety provided to an infant or toddler by a caregiver. For example, you have probably seen a toddler venture off to try something new, but keep looking back to make sure that you (his secure base) are still there and close by if he needs you.

The history created between the infant and the caregiver, as the relationship develops, allows the infant to begin to predict the caregiver’s response to efforts to seek comfort. There are many things we can do in childcare and in supporting families to facilitate the development of strong attachment relationships.

When we consistently and lovingly meet the needs of infants and toddlers in our care, secure attachments are formed. Children who develop secure attachments to one or more adults are more likely to develop positive social and emotional skills. They know that they can rely on adults to meet their needs, to respond to them, and to comfort them. They feel important and begin to develop a sense of competence and confidence. When we are unpredictable, unresponsive, insensitive, or even threatening, insecure attachments develop. Insecure attachments can make children feel badly about themselves and feel that they aren’t important. They may feel a lack of control over their environment and may struggle to develop positive relationships with others. Secure and insecure attachments are reflective of the quality of the relationships between caregivers and children.

[Developmental Continuum of Social and Emotional Indicators: Birth to 3 ½ Years]

As babies grow from birth through the first three years of life, they develop different social and emotional abilities and use different behaviors for communication. The newborn may only know “things feel ok” or “things don’t feel ok.” He may be quiet and alert when things are ok, cry when they’re not, and sleep the rest of the time.

By three a child has a variety of relationships, including peer friendships, primary attachments with parents, and close caring relationships with other relatives and infant care teachers. He has formed a strong idea about what it is like to be in relationships and whether it is generally pleasant or not, depending on the specific relationship.

The developmental course of social emotional wellness may be described by stages or as milestones which do not always develop in a smooth fashion. Each stage or milestone may represent a period of confusion and disorganization for the child – and both a challenge and an opportunity for the adult and child to realign their relationship.

Behaviors have different meanings at different times in development. A newborn may cry urgently for food but we expect that a two-year-old will be able to wait a few minutes and maybe even help set the table. A 21-month-old may throw herself on the floor in a tantrum but by the
age of three, we expect that a child will be able to express frustration in more age-appropriate ways such as saying “I don’t like that. You make me mad.”

Please take a look at the handout entitled, “The Developmental Continuum of Social and Emotional Indicators.” This can be used as a tool that captures the major differences in the social emotional milestones of the ages that are illustrated. The first column and second column (Attachment, Trust/Security and Self-Awareness, Identity/Self-Esteem) focus on the elements of social emotional wellness that we have been discussing: experiencing, expressing and regulating emotions and forming close and secure relationships. Out of a strong, positive attachment relationship in which a young child receives responsive care and is helped to manage and express his emotions, he/she develops trust in others and a sense of security. Through relationships that support his/her self-awareness, a young child develops a sense of who he is and what he can accomplish and learn.

The third column (Exploration, Autonomy/Independence) focuses on another element of social emotional wellness, the ability to explore and learn. Through relationships that support safe exploration, an infant or young child gains the sense of autonomy and independence that is so necessary to learning and success in school and in later life.

Each of these age breakdowns speaks to a period of change, of new abilities and new perspectives on the baby’s part. But these new skills may not come without a cost.

For example, as the baby has the cognitive ability and positive experiences to fall in love, he may be so in love with familiar people that being with a stranger becomes terrifying. This language “falling in love” may be familiar to some participants from the work of Stanley Greenspan in his Six Essential Developmental Stages.

The young toddler may use biting or hitting as a form of communication because he does not yet have many words. The 18 to 24 month old who is creating emotional ideas may be creating ideas too big and complex to carry out, such as creating a three foot tower of blocks. Or the toddler may be thwarted by an adult and collapse in a tantrum.

Each new stage in development on the part of the baby produces changes in the relationship and requires changes, or adaptation, on the part of the adult caregiver. The sensitive and knowledgeable caregiver learns to read the cues from the infant or toddler that indicate developmental changes.

We don’t always know what emotions a preverbal infant or toddler is experiencing or what she might need. We are often in the position of needing to form a hypothesis or a guess about what is happening for the child emotionally and what she needs from her caregiver to make her more comfortable. We use our knowledge of development to read the emotional cues the infant or toddler offers us and then we attempt to make her feel better. We may need to make several attempts before we are successful.

[Building Relationships with Families]
We have spent a lot of time in this training focusing on the caregiver-child relationship; however, it is also important that you build strong relationships with the families of the children in your care.

Let’s watch a video clip on partnering with families that demonstrates the way in which a caregiver can learn from a family how to more effectively care for a baby.

[Video Clip – Partnering with Families]

Now that you have viewed this video clip, how do you think culture played a role in helping to develop this partnership? Each baby is born into a unique family that has its own culture and history, its own strengths, and its own way of coping with stress and adversity.

Families have the most continuous and emotionally charged relationship with the child. Infants and toddlers learn what people expect of them and what they can expect of other people through early experiences with parents and other caregivers.

It is within their families that infants and toddlers learn about their culture and experience relationships that influence their sense of who they are and who they will become.

Because most of us are trained to focus on children, we may not necessarily think about the importance of healthy parent-caregiver relationships.

We all have culture and our cultural identity is made up of many aspects of our lives. Culture influences our values, attitudes, beliefs, and assumptions about caring for and teaching young children. It isn’t static, however, and may change with new experiences.

The most important influence on how family members parent their children is their own experience with relationships as children. Culture is one aspect of that influence. That’s why it is so important to reflect on our own experiences in being parented.

Without reflecting on our own upbringing, we may, without realizing it, adopt parenting or caregiving practices that did not feel good to us children and that do not help children feel good about themselves.

It is important to understand what infants and toddlers learn in their relationships with family members and their culture that they bring to their interactions with teachers and peers. This helps us understand who children are and why they behave as they do.

As early childhood providers, we need to be aware of cultural differences among families and colleagues and learn constructive ways of talking about and resolving differences or misunderstandings.
Even our briefest contacts with parents can be helpful in building connections of support, needed information and guidance.

[Factors that Create Challenges for Families]

There are many influences that interact with a parent’s experience of emotions and relationships that impact on how they interact with their children. Some of these influences include:

- Poverty,
- Nonflexible work situations,
- No maternal or paternal leave,
- Little support from other family members or neighbors,
- Challenging relationships with their own families,
- Substance abuse, and
- Domestic violence.

We have provided you with a downloadable handout entitled, “Working with Families Inventory.” While we don’t have time to review this handout during this training, we believe that it is a useful tool to help caregivers think more about how they work with the families of the infants and toddlers they serve. We would like to encourage you, on your own time, to go over the handout with another staff member and discuss how you can improve your practice with families of the children in your programs.

[Using Your Relationship to Promote a Child’s Social Emotional Development]

Before we conclude this training, I would like for us to take a very personal look at what we want for babies, and at the messages we want to be sure we are sending to young children. While there are many positive messages that we want to send to children that communicate how valuable they are to us and how committed we are to them, here are several that we believe are essential:

- When the infant learns that his physical needs for comfort will be met he is free to relax and learn from his environment.

- The adult caregiver’s ability to notice and promptly respond to the baby’s signal of discomfort assures the baby that she can be understood and that it is possible to feel better and to learn skills of self-comfort.

- Experiencing the safety and comfort of early relationships helps the infant or young child learn that others can be counted on and trusted.

- When the infant is kept close and gradually allowed more time out of the caregiver’s arms, while still being reassured by her presence, he expects to be safe as he learns to be separate from the adult caregiver.
• When an infant’s emotional cues are understood, accepted and correctly interpreted, he will understand his own feelings, emotions and behaviors.

• The ability of the infant to predict that he will be physically and emotionally cared for teaches him to trust that his needs will be met.

• The adult caregiver’s desire to actively nurture and calm an infant teaches him or her to seek a calmer state when over stimulated.

• When parents and other caregivers behave toward infants and toddlers in ways that show them that they are valued, accepted, and loved, infants and young children learn to communicate with and treat others in a similar way.

• When adults speak positively to infants and toddlers and behave affectionately toward them, infants and toddlers feel positively connected with others.

• When adult caregivers help the toddler achieve a calmer state, they are helping her learn to gain control of her emotions and behavior.

• When caregivers calmly accept and verbally label feelings, the toddler learns to use language to communicate his feelings.

• When the adult caregiver supports and admires his accomplishments, the toddler gains a feeling of power and independence.

[Major Messages to Take Home]

During this training, we have focused on how social emotional wellness develops within the context of relationships. We’ve talked about how we use ourselves to help babies develop regulation and close, secure relationships, and how to manage significant developmental shifts. We’ve talked about how important our support is to families. As we bring this training to a close, here are the major messages we would like for you to take home:

• Early social emotional wellness develops within the context of relationships,

• In order to support the emotional wellness of infants and toddlers, as well as their families, we need to be aware of our own emotional history,

• Caregivers use themselves to help babies express emotion and regulate emotional, form close, secure relationships, and explore the world and learn, and

• Families have the most continuous and emotionally charged relationship with a child and it is within families that children learn to experience and communicate emotion.
Thank you for your participation in this training, and for your continued commitment to providing the best care possible for infants and toddlers.

* Content used in this course was obtained, with permission, from the Center on the Social and Emotional Foundations for Early Learning (CSEFEL) at Vanderbilt University. The original infant/toddler training module (“Social Emotional Development within the Context of Relationships”) on which this online course is based can be found at CSEFEL’s website: http://csefel.vanderbilt.edu/. This course was converted into an online format by the Texas AgriLife Extension Service of the Texas A&M University System in cooperation with the Texas Department of Family and Protective Services, Child Care Licensing Division, and using funds provided under the American Recovery and Reinvestment Act of 2009.