



Babies (and Their Families) on Board!

Directors Juggle the Key Elements of Infant/Toddler Care and Education

Mary Benson McMullen and Peggy Apple

The busy buzz and hum of an early childhood program is enhanced by the presence of infants and toddlers. A mom comes in at the start of the day holding her baby daughter in her arms, all heads turn, and more than one person says, “Ahhhhhh.” A Mongolian grandmother demonstrates her swaddling technique to appreciative infant teachers, who then invite her to visit their classrooms whenever she wishes. A dad, diaper bag slung over his business suit, struggles to put boots on his 15-month-old to go home, while the toddler insists, “Me do, me do!” to the rather smug amusement of a line of 4-year-olds heading in from the playground.

Early childhood programs with infants and toddlers are bustling and alive in ways different from programs that have only preschoolers. Infants and toddlers can make group care environments more caring and family focused spaces, nurturing the well-being of all adults and children participating in the program.

The number of infants and toddlers who spend their days in group care in either center or family child care settings in the United States continues to grow (Flanagan & West 2004; Laughlin 2010). Directors of early childhood programs that opened their doors to infants and toddlers and their families speak of added challenges and responsibilities for administrators, balanced with unique joys

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A study guide for this article is available online at www.naeyc.org/memberlogin.

and benefits. Cindi Catlin, director of University Presbyterian Children's Center in San Antonio, Texas, told us:

I love having infants and toddlers in our program—they bring a different energy to the center. Parents, especially first-time parents, are concerned primarily about having their child in a trusting, loving environment, rather than one focused on academic readiness. There are challenges, however, such as finding the teacher with the right disposition and managing the higher cost of infant/toddler care.

In this article we speak to directors of programs already serving infants and toddlers and their families and those who may be thinking about adding them to existing group care settings. Very young children, birth to age 3, have care and education needs different from and more specialized than those of preschoolers, age 3 to 5. We describe practices, such as family-centered early childhood environments and policies, and individualized, sensitively responsive practices, that are beneficial to all young children. However, they are critical elements for infants and toddlers in group care, to ensure their healthy growth, development, learning, and well-being.

The director's role in relationship-based birth to 3 programs

Directors who support developmentally appropriate practices in their programs help ensure a high-quality environment for all the children and families they serve; but more specifically, following the practices discussed in this article can result in positive outcomes for individual babies and families (Koralek, Dombro, & Dodge 2005; ZERO TO THREE 2008; Copple & Bredekamp 2009; Hammond 2009; Raikes & Edwards 2009).

A National Institute of Child Health and Development (NICHD) study (2005) connects quality infant/toddler care and education practices to multiple school readiness indicators, including verbal and receptive language achievement at age 3. At the heart of practices recommended for quality

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infant/toddler care and education is the director who supports trustful, respectful, and responsive relationships among all individuals who touch the lives of the very young children in their programs.

In considering the importance of relationships in quality care, we adapted Bronfenbrenner's Bioecological Theory as a way to think about the director's key responsibilities and relationships when administering an infant/toddler program

(Bronfenbrenner & Morris 2006). Bronfenbrenner believed that all members of a system (in this case the infant/toddler program) have a reciprocal influence on one another. This means that the babies and their families impact their teachers, who in turn have an impact on them; the director is influenced by her interactions, and the trust she builds, with the teachers and families in her program, who at the same time influence how she responds and makes decisions, and so on.

All administrative decisions made within such a deeply interconnected relationship-based early childhood program are intentional. The director is the heart and soul of an organization, taking the lead in creating, nurturing, and supporting the multiple and varied relationships that make for a healthy, quality environment for adults, infants, toddlers, and preschoolers in a child care program.

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Research shows that strong, secure, relationship-based developmentally appropriate practices that recognize the individuality of young children and the primary importance of their families in all decision making about the children's care and education are connected to positive long-term cognitive, social, and mental health outcomes (Shonkoff & Phillips 2000; Bowman, Donovan, & Burns 2001; Copple & Bredekamp 2009). The relationships that occur throughout an early childhood environment affect infants and toddlers (McMullen & Dixon 2009). Directors need to support these key relationships—teachers with families, teachers with babies, babies with other babies, teachers with their colleagues, teachers with their director, and the director with the community.

Key relationships in infant/toddler care

Teachers with families

Readers of *Young Children* are familiar with the concept of child-centered practice (Copple & Bredekamp 2009). More recently, early childhood educators have begun using the term *family centeredness*, especially as it concerns infant/toddler care and education (Gonzalez-Mena 2008). The concept of the infant or toddler and the family as one unit of care and attention is essential to family centeredness. Specifically, being family centered “recognizes that the family is the constant in a child’s life and that service systems and personnel must support, respect, encourage, and enhance the strengths and competence of the family” (Sandall et al. 2005, 301).

Family-centered infant/toddler programs support families in their role as primary caregivers and central decision makers in all aspects of their child’s health, care, and education. In practice, this means that teachers work with families to determine the care and education needs of and goals for the infants and toddlers in their program. Teachers alone do not determine what is best for infants and toddlers in their care (Gonzalez-Mena 2008).

During a recent study, we spoke to teachers and directors of infant/toddler programs about their family-centered practices. Many mentioned scheduling regular family conferences, ensuring that environments are open and welcoming to families, and holding occasional events such as picnics and potluck dinners. While such activities are important for building community and nurturing relationships with families, programs also need to engage in the more complex parent–teacher communication required to achieve the ideals of family centeredness—the achievement

of a trusting partnership with families in all decisions made about their child.

Teachers with babies

Building and maintaining meaningful, respectful relationships is central to teachers’ providing care that is *sensitively responsive* to the individual needs of infants in their care (NICHD 2005). Sensitive responsiveness requires teachers to know each baby in their care as a unique person and to respond promptly, in direct response to a baby’s verbal and nonverbal communications, in a style best suited to the individual baby (Kovach & Da Ros-Voseles 2008; Raikes & Edwards 2009; Gonzalez-Mena & Widmeyer Eyer 2011). This is not a simple task. Teachers need to learn how each infant communicates his or her immediate needs. When teachers recognize and understand individual personalities and temperaments, they can respond effectively to each baby’s interests, keeping the baby engaged and stimulated while remaining alert to challenges and conditions that may affect the child’s health and well-being.

Sensitively responsive practice is best accomplished when teachers have time to learn about and establish trusting relationships with individual babies and their families. Continuity of care and primary caregiving models put in place structures that foster relationships, allowing them to flourish between teachers and babies. Samantha Sisk, a teacher at Campus View Child Care in Bloomington, Indiana, stays with a group for up to three years between infancy and transition into a multiage 3- to 5-year-old preschool classroom. She says:

I appreciate developing relationships with the children and families in my care. I like to watch the children grow and discover new things. I feel like I am valued and respected by the parents. The trust involved in the relationship gives me great honor.

Continuity of care is the practice of keeping a group of infants and toddlers and their teaching team together over a period of two or three years, which promotes the formation of trusting relationships, secure attachments, and long-lasting bonds (Brazelton & Greenspan 2000; Honig 2002; Cryer, Hurwitz, & Wolery 2003; Lockwood 2003; ZERO TO THREE 2008). Assigning one teacher as primary caregiver to a small group of babies and families helps each teacher in an infant/toddler room build strong bonds with a few baby–family units and give focused attention to her specific small group (Bernhardt 2000; Theilheimer 2006; ZERO TO THREE 2008). Research shows that implementing continuity

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infants in group care, based on what they learned from their research. They say the first step in helping babies to be caring toward others is to treat them as individuals, in a respectful, responsive manner, “so they can learn the give-and-take, back-and-forth of being part of such relationships” (22). In relationship-based environments, adults’ caring behaviors promote children’s healthy sense of self and others, serving children in the present and preparing them for a lifetime of getting along well with others (Quann & Wien 2006; Riley et al. 2008; McMullen et al. 2009).

of care and primary caregiving not only benefits children and families, but lets the practices themselves become professional development opportunities for teachers, resulting in more thoughtful, sensitive, caregiving practices (Ackerman 2008).

Babies with other babies

Fostering relationships between infants and toddlers and their peers in group care can be encouraged—or discouraged—by teaching practices, program policies and philosophy, and the director’s support. A sufficient number of consistent adults in the infant/toddler environment provides the basis for facilitating the babies’ acquisition and practice of social skills that serve them well into adulthood (Honig 2002; ZERO TO THREE 2008; Copple & Bredekamp 2009; McMullen et al. 2009). In addition to maintaining appropriate teacher–child ratios and group sizes, and to setting up systems that encourage relationships between teaching teams and the babies and families served, directors need to select teachers with the knowledge, skills, and dispositions to support social and emotional development and learning (Manlove, Vasquez, & Vernon-Feagans 2008; Goble, Moran, & Horn 2009; Pianta 2011).

During the first three years of life, children come to understand who they are in relation to others. Teachers provide positive, early, lifelong lessons by fostering a sense of value in individual babies, helping them develop friendship and prosocial skills, and facilitating their understanding of their role within the larger group or community (Honig 2002; Quann & Wien 2006). In a previous article in *Young Children*, McMullen and colleagues (2009) offer advice about fostering prosocial behaviors among

Teachers with colleagues

Caring and productive teacher-to-colleague relationships are important contributors to young children’s feelings of security and to families’ trust in programs (Baker & Manfredi/Petitt 2004; Bloom, Hentschel, & Bella 2010; Carter & Curtis 2010). Infants and toddlers quickly pick up on tension between their teachers and other adults. With babies spending eight or more hours a day in group care, such tensions could mean that some babies are in a stressful environment for nearly all of the time they are awake. Adult family members easily read the emotional climate created by staff in a classroom and may worry about how it will affect their baby. Unresolved difficulties among the adults in an infant/toddler environment may also result in teachers working independently and not sharing relevant information about a baby’s needs and interests. Developmentally appropriate practice includes teachers working as partners to create an optimum environment of care and learning. The director’s role is to promptly address any dysfunction in relationships between colleagues.

Positive, respectful relationships among all of the adults in the program affect the emotional climate for everyone—children, staff, and families (McMullen & Dixon 2009). Collegiality

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among staff is one of 10 dimensions identified by Bloom, Hentschel, and Bella (2010) as important for a healthy organizational climate. Collegiality throughout a program requires all staff to understand the joys and challenges that infant/toddler teachers experience. Directors should watch for biases—for example, considering the work of preschool teachers to be more valued or more critical or complex than that of infant and toddler teachers. Consider this experience, recorded by this article's first author during a study of infant classrooms:

A preschool teacher on break walks noisily into the infant room and shouts, "Hello, everybody!" She's unmindful of the magic she's disrupting—conversation and activity between a teacher and a small group of infants. She swoops up a young baby from behind, sits down in the rocker, and starts chatting with the teacher about her plans for the evening. After a few minutes of her "baby fix," the visitor plops the baby back into the little group and leaves. I wonder how the preschool teacher would feel if someone burst into her room and began playing with a child or trying to engage her in a personal conversation during her large group circle time.

The director with teachers

The teacher–director relationship begins during the hiring process as the director screens applications, interviews candidates, and conducts orientation. A director looks for teachers who have education specifically related to growth, development, and learning in children ages birth to 3, and previous experience working with infants and toddlers. During the interview process, applicants can be required to interact with infants and toddlers in the classroom, allowing the director and infant/toddler teachers in the classroom to assess an applicant's disposition and skills for working with the age group and the applicant's "fit" in the setting. The director must feel that the applicant will embrace the joys and challenges of working with very young children, and do so for the long term. Phyllis Shaw, a toddler teacher since 2000 at University Presbyterian Children's Center, shared the following:

There are many changes in each toddler over the year that are so exciting. One week I changed nearly 100 diapers, but it is more than feeding and diapering. It's the spark in their eye when they use a new word or do something new.

Carter and Curtis (2010) suggest directors use a three-pronged approach when working with teachers. First, directors *build and support community* within the program by providing opportunities for infant/toddler teachers to interact with other staff. Just like their preschool colleagues, infant/toddler teachers need time to reflect and plan together and discuss needed changes to the environment and learning activities to meet the quickly changing developmental needs of each baby.

Second, the director *serves as a coach and mentor*. To do this effectively, the director must be knowledgeable about developmentally appropriate practices for infant and toddler care and education, and the standards and regulations for care that guide their program (Apple 2006). This knowledge base sets the stage for directors to guide teachers in reflective practice and provides the framework for conducting appropriate assessments—both components of individualized professional development plans to support teacher growth (Bloom, Hentschel, & Bella 2010; Carter & Curtis 2010). Individualized plans for infant/toddler teachers provide information for making appropriate, relevant decisions in selecting meaningful professional development opportunities (Pianta 2011).

Finally, directors expertly and efficiently *manage and oversee*, providing both short- and long-term structure and support so that infant/toddler teachers can do their best work. For instance, directors make daily decisions such as assuring consistent staffing, as well as strategic planning decisions such as budgeting for long-term planning.



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The director with the community

Together, directors and teachers provide a powerful influence in communicating the importance of high-quality developmentally appropriate infant and toddler programs (Sullivan 2009). Directors and their staff play an important role in educating communities and policy makers about the importance of the first three years, the need to support families, and the role of well-educated professionals in the care and education of infants and toddlers. Directors can

talk with local, state, and national stakeholders about the full cost of quality infant/toddler care and encourage them to advocate within their own circles of influence. Outreach can lead to the recruitment of members to program advisory or governing boards or to support other functions in the program, such as fund raising. Board orientation and training can be a powerful tool for building community allies for infant/toddler care in your program.

The director interacts daily with a number of adults and professionals who come in and out of early childhood programs. Visiting therapists, researchers, student teachers, janitors, social workers, food service providers, and many others influence the working environment and emotional tone of the program. This ultimately affects infants and toddlers (McMullen & Dixon 2009). It is up to the director to take the lead in building and maintaining strong relationships with these critical community collaborators, and in fostering respectful, welcoming treatment of them by program staff.

Intentional leadership

Throughout this article, we emphasize that building and nurturing relationships that enhance the holistic growth, development, learning, and well-being of babies in group care is essential and that the process requires directors to be intentional. Through strong leadership, management skills, and knowledge, directors create and maintain the structural elements that support this essential relationship work. But there is more: a director who wishes to optimize the experience of all those in the environment—children, families, and staff—considers all decisions and builds all relationships within an ethical framework. The NAEYC Code of Ethical Conduct (NAEYC 2011a) outlines responsibilities for all of us who work with young children. Directors will find further delineated ethical guidelines regarding administrative relationships with families, sponsoring agencies, governing boards, regulatory bodies, and personnel in a supplement written for administrators (NAEYC 2011b). The ideals and principles of the code and supplement assist directors in addressing the inherent moral complexities of their role in infant/toddler classrooms (Apple & McMullen 2007).

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Checklist for Directors of Relationship-Based Infant/Toddler Programs

- ✓ Commit to a family-centered philosophy in which the program supports families in every way they can as the primary decision makers and caregivers of their infants and toddlers.
- ✓ Implement policies, such as continuity of care and primary caregiving, to promote the formation of trusting and lasting bonds between all members of classroom communities—the babies, the families, and the caregiving team.
- ✓ Hire and retain teachers who understand the personhood of the individual infants and toddlers in their care, respect very young children as experts in communicating their own needs and interests, find joy in helping babies learn and engage in their everyday lives, and believe infant/toddler caregiving is a professional pursuit.
- ✓ Provide appropriate professional development opportunities for teachers that include understanding growth, development, and learning from birth to age 3; promoting the social and emotional well-being of each individual baby in the program; creating, implementing, and assessing appropriate curriculum and activities for infants and toddlers; respecting and celebrating family culture, beliefs, and values; and engaging in relationship-based caregiving strategies.
- ✓ Model mindful, caring, respectful communications in interactions with all adults in the program environment, fostering relationships that lead to professional growth and satisfaction for all who work in the setting.

If you are adding infant and toddler classrooms to your program or confirming your commitment to providing quality infant/toddler care and education, it is imperative that all constituency groups (families, staff, administrators, and community members) review the program's *vision*, *mission*, and *philosophy* statements to assure that the documents reflect the developmentally appropriate and relationship-based care and education elements of a quality program. Directors need to engage with staff in regular, constructive review to make sure the documents align with what actually occurs in the program on a day-to-day basis. When a director provides leadership in these reviews, staff more easily embrace the program's commitment to relationship-based care.

Final thoughts

Directors of programs that serve infants and toddlers work in a whirl of relationships involving babies, families, teachers and other staff, and members of the community. There are added complexities in management responsibilities involving structural and financial concerns as well. We honor all directors who keep all these balls in the air and seek to

provide developmentally appropriate, relationship-based programs in which all members of the community grow and thrive—for the babies in their care now and in the future.

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