

Perspectives in Infant Mental Health

Professional Publication of the World Association for Infant Mental Health

Responsibility for Children under the Age of Three Years

Recommendations of the German-Speaking Association for Infant Mental Health (GAIMH) for the care and teaching of infants and toddlers in daycare centers

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About the development of the GAIMH recommendations

These recommendations have been approved and published by the board of GAIMH. The basis for these recommendations are the result of work done in April 2008 during an intensive day-long session involving invited experts and members of GAIMH internal working groups. This session involved intensive interdisciplinary discussions of findings and experience from the research and practice of invitees from GAIMH's member countries -- Germany, Austria, and Switzerland -- based on international studies on the development of infants and toddlers.

The recommendations are directed at all of those who share responsibility for the care and raising of infants and toddlers: parents, politicians, preschool management, teachers, and therapists involved from birth to preschool, governmental authorities, pediatricians, child psychologists, psychiatrists, child psychiatrists, and journalists.

Only part I – The GAIMH Recommendations - is published in the Perspectives in Infant Mental Health, the full text with part II is available at www.waimh.org

Preliminary remarks

The present text consists of two main parts:

I GAIMH recommendations on the quality of supplemental care for infants and toddlers in daycare centers.

II Comments and explanations to the

GAIMH recommendations.

The second part consists of the following sub-items:

-- Chapters 8 through 10 formulate the concerns, basic positions, and issues important to GAIMH (as an association concerned with emotional health in early childhood) with regard to the requirements for care of infants and toddlers outside the family.

-- Chapters 11 to 15 derive the requirements for self-understanding, conceptualization, and organizational implementation of supplemental care outside the family from the developmental and relational needs of infants and toddlers.

-- Chapters 16 and 17 deal with issues of teaching policy and the overall societal framework for daycare centers, and discuss the scope of future research.

GAIMH recommendations on the quality of supplemental care for infants and toddlers in daycare centers

In addition to private networks, families with infants and toddlers need social resources that provide relief, encouragement, and a sense of belonging to both adults and children.

Because of this, GAIMH welcomes the encouragement and support for centers outside the family as an opportunity for all infants and toddlers to experience age-appropriate care, teaching, and relationships outside of but with the close cooperation of their own family. However, this requires that the centers be

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attuned to the special needs of this age group. This also means that preschools should not simply be open to one- and two-year olds. In their basic concept, they must be adapted structurally (in smaller groups, more personnel, age-appropriate environment and procedures) and in terms of content (trained personnel with an understanding of early childhood developmental psychology and pedagogy) to the learning needs of infants and toddlers.

1. Recommendations for dealing with basic needs

1.1 Responding to and satisfying physiological needs

Caregivers must have adequate time and the professional knowledge to provide support on an individual basis (!) for the sleeping-eating-waking rhythms of infants and toddlers, to document this, and to transmit this information to the parents and other caregivers (cf. also the recommendations in the white paper of the Gesellschaft für Sozialpädiatrie un Jugendmedizin [German Association for Social Pediatrics and Youth Medicine], Horacek et al., 2008).

1.2 Security through attachment

Affect regulation and impulse control in infants and toddlers must still be supported by trusted persons in the immediate environment. Even in daycare centers, infants and children need -- and choose! -- one primary caregiver and other familiar caregivers who are reliably available at a glance in critical situations to help the children regulate their emotional states, needs, and impulses. This presupposes that these caregivers are able to assess appropriately the situational stress that the infant or toddler is under (Papoušek, 2006; Papoušek et al., 2008). Because of this, the training of staff must include attachment theory so that they recognize the attachment needs of toddlers, as well as the need to assist in affect regulation and avoidance behavior, and to respond to the children appropriately.

Daycare centers and their staff must recognize the importance of the parents for each child as a trusted and safe base in frustrating or fear-inducing situations through a careful, and if needed, repeated process of familiarization and ritualized support in separation situations. Good care aims at continuity. Changes in groups or caregivers should be avoided during the first three years, that is during the sensitive phases in which the child constructs

identity, relationship, and attachment. This must be taken into account in forming children's groups, and speaks against groups that are strictly segregated by age during the first two years of life. Because of this, staffing should remain as constant as possible.

1.3 Stimulation and regulation

The daycare center and its staff must structure the day for each child in such a way that both overstimulation and understimulation -- and the potential resultant disorders of behavioral and emotional regulation -- are largely avoided. The staff should be well grounded in the behavioral organization of infants (Als & Butler, 2008), and be sensitive to the individual needs and sensitivities of the children placed in their care. They should be able to create a stimulating environment for the group and the individual child, as well as spaces for retreat and withdrawal. They recognize the child's overload signals, and are able to adjust the care setting to each child's needs.

1.4 Exploration and self-efficacy

In order for children to explore their environment, be open to engagement with adults and children, and experience self-efficacy, the space in which they are doing their exploration must be easily understandable, the routine predictable, and the level of stimulation moderate. For infants or toddlers this means that their daycare center group should be small, and the staffing levels large (cf. recommendations for structural and procedural characteristics of quality of care in daycare center and Chapter 13.1). The daily routine should be designed with these needs in mind, that is, provide a stimulating and a protective environment. Both daycare center management and their staff must be able to protect the children in their care from confusing circumstances such as frequent rotation of caregivers, avoidable changes in the group, or from loss of or disrespect for objects that have meaning to the child.

Even very small children are interested in other children and are especially fond of learning from older children whom they trust. As a result of their "teaching activity," these "older children" also acquire valuable social competence (K. Grossmann, oral communication, 2008). This is why mixed-age groups are integral to an environment that invites exploration and makes it possible for the child to experience self-efficacy. Mutual exploration, imitation, and action are possible for infants and toddlers only in the presence of reliable primary

caregivers and other trusted children. They also need places to which they may withdraw when they are tired, fearful, or frustrated (Hellmann, 2009).

1.5 Coordination and cooperation between family and daycare center

Coordination between family time and time spent at the daycare center must be directed primarily at the individual needs of the child and the structural guidelines for quality of care in daycare center (see Chapter 13.1 and the following “recommendations for structural and procedural characteristics of quality of care in daycare center”). The child should be able to reconcile the time spent at the daycare center and in the family, and to benefit from both. The care of infants and toddlers requires sensitive, supportive work with the parents that is available on a daily basis. It takes into account that the parents’ identities develop as part of a process along with the developmental steps taken by the child, as they resonate to his critical steps and advances. For this reason, parents easily subject to uncertainty. The management of the daycare center and the child’s primary caregivers in the daycare center must make room for the concerns of parents, assume various functions in work with the parents, and maintain limits counseling the parents.

2. Recommendations for good-quality teaching process

The familiarization or settling in period, that is, the time in which the infants and toddler experiences separation for the first time and begins to get used to her new primary caregiver or attachment figure in the new environment of the daycare center, is crucial for integrating and infant or toddler into the daycare center, and for his well-being (Ditfürth, 2009).

A trusting relationship must develop between caregivers and parents, in which emotions, expectations, and fears are appreciated and can be discussed and clarified.

The staff must understand the significance of and forms and conditions under which infants play, foster those conditions, and lend support to the children. The appreciation of the each child as an individual and as a member of the group requires individualized group teaching methods that satisfy the various individual and age-dependent needs of the children.

Infants and toddlers should be cared for in mixed-age groups because such groups provide opportunities for many different types of experience, and because both the younger and older children gain necessary competence.

3. Recommendations for an adequate structural quality

Infants should be cared for in small mixed-age groups (6 to 8 children).

The general caregiver staffing ratio (number of caregivers in relation to the number of children cared for) should be closer to 1:2 than 1:3, and should not be confused with the ratio of adult caregivers and children in actual everyday situations.

A staffing ratio of one teacher to 2 to 3 toddlers is viewed as developmentally advantageous according to international studies, and is viewed as high-quality.

The recommended ratios between caregivers and children in actual everyday situations should be met in order to protect the children from overstimulation, understimulation, and stress (cf. the results of the NICHD study, Watamura et al., 2003; Friedman & Boyle, 2009).

The time that children and caregivers spend together should be coordinated and structured such that the children have continuous relationships with trusted caregivers and other children. The acceptance of children with large differences in the times during which they are in daycare is to be avoided.

Small mixed-age groups should have three connected rooms available to them in which concentrated play, loud activity, gross motor movement and recuperative withdrawal or sleep are possible simultaneously. Interestingly structured places for play should enable children to engage in suitable activity. Easily accessible external spaces complement the group rooms.

4. Recommendations for operational quality and professionalism

Quality of the day facility in terms of structure, process, and guidance should ensure that the developmental needs of the children and the needs of the parents are supported. The fulfillment of this task presupposes child-centered management that permits staffing that is both well trained and adequate in number, and a protective atmosphere that is both stimulating and friendly in which the child may develop in collaboration with the

parents.

Teaching should be supported by both staff and case supervision. The qualification to lead such a center should be based on educational studies or equivalent professional experience and be acquired through deepening of educational qualifications. The management of daycare centers should not only be capable of handling day-to-day teaching and organizational requirements, but also recognize situations that may endanger the child and the potential need for expert consultation and interdisciplinary support.

5. Recommendations for children and families with special needs

Good institutional daycare may promote the developmental opportunities of all children because it makes social integration possible.

Children and families with special needs may find in daycare centers opportunities for social networking and peer belonging, which increase the chances for healthy development. However, these specific integrative tasks that daycare centers are called upon to fulfill are associated with challenges that require commensurate conceptual, professional, and personnel resources.

For infants and toddlers with an migrational background, daycare centers assume the function of a transitional space between the family and the surrounding culture. The experience of belonging based on meaningful relationships decreases parents’ fears and makes it easier for children to acquire a second language, which facilitates later integration into school (cf. also Chapter 14.1).

Infants and toddlers from at-risk families benefit from daycare center care that stimulates them, shields them from the effects of neglect, and fosters social integration. For the parents, childcare that supplements the family may facilitate economic integration and support their own parenting competence. Risks to the child and the associated conflicts between family and daycare center occur frequently when caring for these children. The handling of these complex situations requires that the daycare center management be well integrated into an interdisciplinary network including youth welfare services, have specialized knowledge, and a pedagogical approach that defines institutional responsibilities, possibilities, and limits, and which is

supported by the trustees or sponsors and the staff.

Infants and toddlers from families with emotional risk factors benefit from ongoing alternative relationships in daycare centers. The parents get both relief and encouragement, which in turn supports their own parenting competence. However, incomprehensible and impulsive behavior on the part of parents and child may trigger fears in both the caregivers and other parents, and strain the day-to-day routine. Psychotherapeutic supervision and support may help the parents, children, and staff avoid becoming overwhelmed.

Infants and toddlers with special developmental risks that would likely not be adequately dealt with in remedial facilities may benefit from the available teaching and peer groups in daycare centers. However, such integration is possible only with additional staffing and consultation with child support services based on the individual needs of the child and her family, and the composition of the child's group. It is important that the children themselves and the group in which they are integrated be shielded from overstimulation.

6. Compensatory care as prevention and opportunity

The availability of daycare care facilities outside the family may contribute in important ways to primary and secondary prevention of abuse and neglect.

If resources are inadequate -- in terms of staffing, training, group size, networking among centers --, GAIMH considers supplemental care outside the family to be harmful to the infants and toddlers themselves and an additional stress for the parent-child relationship.

7. GAIMH policy recommendations for educational and institutional frameworks of daycare centers

Societal interest in the quality of teaching in daycare centers for infants and toddlers has also stimulated discussion across the board about the educational tasks in young families and the care and learning needs of infants and toddlers in general. This interest has demonstrated what young parents accomplish on a daily basis and shown that both families and daycare centers are dependent on protection, support, encouragement, and discussion for the fulfillment of their

caring and educational tasks. These are needed to ensure that infants and toddlers are supported in their early childhood development. In this sense, the upgrading of early childhood care and education strengthens all young families.

7.1 Education in early childhood

The family is the most important site of learning and socialization for infants and toddlers. When parents entrust their infants and toddlers to daycare centers, they must be certain that their children receive the individual attention they need in terms of overall learning needs and age-appropriate stimulation that neither over-challenges or under-challenges them. Because of this, GAIMH recommends that overall educational plans for early childhood proceed from learning processes of infants and toddlers, and that these plans make early childhood education relevant to the developmental stage of the individual child. These overall educational plans should contain specific recommendations for educational processes and goals in early childhood, facilitate the transition to subsequent educational systems, and decrease barriers to access to high quality educational and care opportunities.

7.2 GAIMH recommendations and questions for future research

Research in the area of early childhood care and education can still be expanded and networked more effectively. In the areas of basic and applied research, gaps in our knowledge with respect to early childhood learning processes, particularly in group situations, and social exchanges among infants and toddlers in multi-person settings must be closed. Quantitative and qualitative longitudinal and case studies can yield important knowledge about the significance of daycare outside the family for child development, about risk assessment and indications, and about how educational approaches work. A national and/or regional statistical database should be created in all three countries that would enable us to obtain clear information about the status of quantitative and qualitative care at daycare centers, which can then be used for policy and professional planning.

7.3 GAIMH recommendations for mandatory supervision of daycare centers

The qualification and supervision of centers that provide care outside the family cannot be left to the management of daycare centers, or to the trustees or financial sponsors. Rather, they must be held up to measurable standards of

structural quality and embody professional knowledge and standards for the assessment of procedures and guidance. As a result, in the interest of the children and to ensure quality in daycare centers, GAIMH recommends the mandatory establishment of specialized oversight agencies under the aegis of state-run youth welfare services. These oversight bodies must have knowledge in the areas of developmental psychology of early childhood and of early-childhood education, and examine the structure and work of daycare centers based on scientifically established standards and criteria. In addition, GAIMH considers the elaboration and establishment of overarching pedagogical quality management for infants and toddlers to be indispensable in all three countries. GAIMH recommends that the state expressly stress the importance of quality in all competitive bidding by providers.

The full recommendation with a list of the participants in the GAIMH internal working group is available at <http://www.gaimh.org/publikationen/betreuung-in-krippen.html>

In this paper, the term "daycare center" [Krippe] was used uniformly for institutions or facilities that care for small children outside the home, in the full knowledge that different terms are used in Germany, Austria, and Switzerland as well as in other countries.