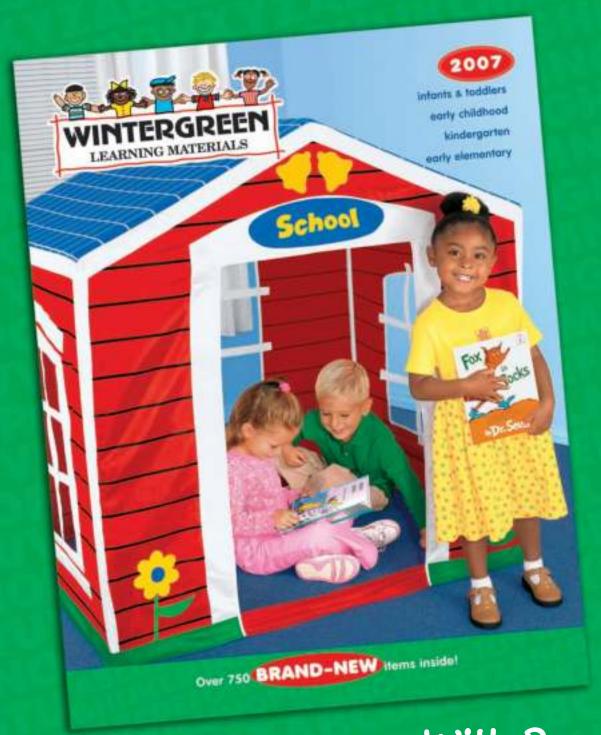


VOLUME 21, NUMBER 1, SPRING 2007



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Interaction Volume 21, Number 1, Spring 2007



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Behind the Scenes

As I write this column, Ottawa is in that transitional season when winter begins to give way to spring.

The Canadian Child Care Federation is also going through a time of transition, moving into its 20th year. This issue of Interaction celebrates CCCF's 20th anniversary with a number of articles that honour its past and look toward its future. But as you'll read in Don Giesbrecht's column on page 6, the year began on a decidedly non-festive note when 12 dedicated colleagues were let go due to funding constraints.

Interaction itself is changing in its 20th year - to two print issues and four online issues per year - to reflect the funding situation and to address the need for more frequent communication with members. I encourage you all to sign up for Interaction Online for up-to-date news and other features that will complement the print version of Interaction. See more on page 9.

Despite all of this transition, as I delved into CCCF's history to prepare this issue of Interaction, I was struck by how much has remained constant. CCCF was born of a vision by the child care sector to create "a national body which would help us coordinate our community, network with each other and share resources and expertise." This vision continues to be reflected in all that CCCF does and in every article that is contributed and shared in Interaction. Now that's something to celebrate! Let's blow out the birthday candles together and make a collective wish for many more years of exchange and networking within our vibrant early learning and child care community.

Lana Crossman, editor Icrossman@cccf-fcsge.ca (613) 729-5289 ext. 221

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The mission of the Canadian Child Care Federation is to achieve excellence through early learning and child care. Its core focus areas are best and promising practice; capacity building; and collaborations, networks and partnerships.

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Inside the Federation

New! Meeting the Challenge Online – An Aboriginal Perspective

The Canadian Child Care Federation is pleased to introduce a new training resource that builds on its popular publication *Meeting the Challenge* (with additions from current theory and practice) and adapts the strategies for guiding young children's behaviour to an Aboriginal perspective.



Meeting the Challenge: An

Aboriginal Perspective acknowledges and celebrates that each community is different. It encourages Aboriginal child care practitioners to "take what's best" of early childhood practice and adapt it in a way that is appropriate for their children, families and community.

Available on CD-Rom, this resource presents strategies in six complete workshops – including facilitator notes, activities, handouts and video clips – on the following topics:

- · Culture and community
- Creating a positive environment
- Building relationships
- Listening
- Messages we send to children
- The guidance continuum

Video clips allow participants to see and hear the views of early childhood experts from three Aboriginal communities: First Nations, Inuit and Métis.

The CD-Rom is available to purchase for \$6 while quantities last! For more information: orders@cccf-fcsge.ca or 613-729-5289 ext. 234, or purchase through the CCCF E-store at www.cccf-fcsge.ca.

Important Message about Changes to Interaction

Dear valued members and subscribers:

As Don Giesbrecht, CCCF president, outlines in his column on page 6, facing substantial funding cutbacks and changes externally and in the child care field, the Canadian Child Care Federation has taken the opportunity to reassess its strategic directions and as such has made some changes to its activities.

We recognize that *Interaction* is a valuable service and we will continue to offer it in print format twice a year in the spring and fall. In order to address the need for more frequent, cost-effective communication and networking with our members, we are launching a new electronic e-bulletin, *Interaction Online*, to be emailed to members and subscribers on a bi-monthly basis.

Interaction magazine will continue to offer thought-provoking articles on current issues, updates on CCCF projects and strategic directions, profiles of programs and best practices, and reviews of new resources. Interaction Online will keep you up-to-date on time sensitive news and will provide a way for you to exchange stories, ideas and comments with an online community of fellow child care practitioners across Canada.

I'm excited about a new electronic spin-off of *Interaction* and how together the print and electronic versions will contribute to moving CCCF forward on its mission to achieve excellence in early learning and child care. I look forward to your continued support and participation in *Interaction*.

Be sure you're subscribed to *Interaction Online*. Visit our website at www.cccf-fcsge.ca and send us your e-mail address. Watch for your first issue in June 2007!

Lana Crossman, Editor



INSIDE THE FEDERATION

ECLKC Update

The Early Childhood Learning Knowledge Centre (ECLKC) is preparing the upcoming issue of the *ECLKC Bulletin*, focusing on brain development, and on its next *Lessons in Learning* on parenting skills.

This spring, ECLKC will take part in many events to promote the importance of early learning. In March, ECLKC sponsored an international workshop organised by the Ottawa-based Provincial Centre of Excellence for Child and Youth Mental Health at CHEO to investigate the benefits of school-based interventions to reduce the stigma associated with mental health difficulties. Issues concerning young children's mental health were also addressed. At the end of March, ECLKC also participated in Spring Forward!, the national Early Years conference organized by Success by 6 Peel and the Council on Early Childhood Development. The event provided a forum to discuss and examine current research, programs and practices promoting optimal early child development outcomes.



From June 15-17, come and meet us at our exhibit booth at Set Sail for Quality on an Ocean of Caring, the Halifax national child care conference. Meanwhile, join us online at www.ccl-cca.ca/childhoodlearning to read more about why *learning* starts early!

— Valérie Bell

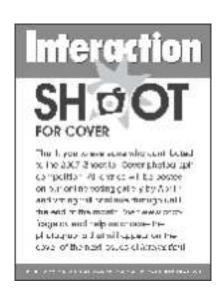




INSIDE THE FEDERATION

Language and Literacy: From Birth... for Life

Current research shows that much of children's language and literacy skills are developed in the years from birth to school-age. It's clear then that early learning and child care practitioners play a key role in fostering language and literacy development. CCCF is pleased to partner with the Canadian Language and Literacy Research Network to produce a learning kit that will support you in your daily work building the language and literacy skills of the children in your care. Each kit contains a research paper, resource sheets, workshops and presentation tools so that you can share the knowledge within your centre and in the broader community. The kit will be launched at *Set Sail for Quality on an Ocean of Caring*, the Halifax national conference and will be mailed this summer to each CCCF member.



Celebrate the CCCF's 20th Anniversary at the June National Conference!



CCCF's 20th anniversary is a running theme of the *Set Sail for Quality on an Ocean of Caring* conference, which takes place in Halifax, N.S. from June 15-17.

- Pick up your complimentary CCCF lanyard at the conference registration. Buy extras for your colleagues back home.
- Take a stroll down memory lane a collection of photos and archives from CCCF's proud history.
- Attend the CCCF's annual AGM and vote on the motion to ratify the updated *National Statement on Quality Child Care*.
- Pay tribute to the winner of the 5th biennial CCCF Award of Excellence at a special ceremony.
- Wrap up the conference with a keynote presentation by CCCF President Don Giesbrecht. His vision of What's on the Horizon for Child Care in Canada will inspire you to look ahead at the challenges and opportunities we face as we all work toward acheiving excellence in early learning and child care.



Set Sail for Quality on an Ocean of Caring is a national conference co-hosted by CCCF and its Nova Scotia affiliates – the Certification Council of Nova Scotia and the Nova Scotia Child Care Association. For more information, visit www.cccns.org/ocean.html.



FROM WHERE I SIT

Twenty years . . . A Time to Celebrate

by Don Giesbrecht

Twenty years . . . a time to celebrate and a time to reflect, refocus and reenergize.

The Canadian Child Care Federation (CCCF) entered into its 20th year with change on the immediate horizon change that was dramatic, emotional and sadly, indicative of what's currently happening across the early learning and child care (ELCC) field. At a time when we should have been launching a year-long celebration we were faced with serious funding constraints and were forced to let go of 12 wonderful and dedicated employees who have meant so much to the field. Instead of celebrating, we found ourselves introspecting and planning for the organization's immediate and long-term future.

The introspection and planning part is not so bad - all good organizations, from the smallest to the largest need to do it. CCCF had been preparing to re-examine its direction and goals for months previous to January's reorganization, and the funding situation certainly brought a sense of urgency to the planning.

The CCCF, over its 20 year history, has built great strength through its scope of membership and partnership, the breadth of its reach, the uniting of the field from coast to coast to coast, and through the quality of its work. CCCF is deeply respected for these strengths. However, we also recognize that it is difficult for one

care issues in Canada. There are also other significant organizations that through their focus on healthy child development, address ELCC issues, as well. With this knowledge, we will work to continue to position CCCF as the leader in quality ELCC in Canada, identifying and bridging the gaps that exist in Canada. We will continue to make our organization synonymous with quality child care and early learning, ensuring that every ECE, parent and policy maker knows the name and mission of the CCCF. This is a big task to be sure, but a worthwhile and necessary task all the same. We will be taking steps to ensure that we work

organization to mean all things to all people in our sector. To this, the work of the Child Care Advocacy Association of Canada and the Child Care Human Resource Sector Council are both critical and

necessary to the furthering of early learning and child

effectively and strategically with all of our affiliates and partners in meeting their individual needs, which in turn will help to meet the ongoing need to ensure

> stability and growth within the CCCF. Federation. While our sector has faced support of our affiliates and the sector, and knowledge as well as services that will build a strong ELCC workforce and with policy makers and governments to communicated.

Strong affiliates make for a strong some daunting challenges lately, the message we are hearing is that the collective resolve is stronger than ever. We will focus our work, with the on continuing to provide resources sector. We will also continue to work ensure that the need for quality child care and a strong workforce is

We have accomplished much over the last 20 years and from these successes the CCCF will forge its next 20 years. Clearly, we have had to step back and look at where we are today and where we want to be tomorrow. We are certain that Canada needs a strong CCCF and we will rise to the challenge of ensuring a bright future for the organization, its members and most importantly, Canada's children and families.

Don Giesbrecht is president of the Canadian Child Care Federation and executive director of the Assiniboine Children's Centre, Winnipeg, Manitoba, © CCCF 2007

Twenty years



Recipients of Prime Minister's Award of Excellence Announced

by Sara Tarle

On December 5, 2006, Prime Minister Stephen Harper announced the recipients of the Prime Minister's Awards for Excellence in Early Childhood Education. Ten early childhood educators received Certificates of Excellence and fifteen received Certificates of Achievement, recognizing their efforts to provide quality early childhood education and to bring innovation into their practices.

The Prime Minister's Awards for Excellence in Early Childhood Education were established in 2002 to profile Canada's best early childhood educators, to promote what they have achieved, and to share the innovative teaching methods that have worked for them.

Nominees are evaluated by a committee made up of early childhood education and care practitioners, as well as other stakeholders from across Canada. The criteria for the award include outstanding work and innovative practices by the nominee in aiding the early development and socialization of the children in their care. For more information on the award, visit www.pmappm.ic.gc.ca.

Congratulations to the following 2006 PM Award recipients:

Certificate of Excellence

British Columbia Natalie Lucas Susan Middlemiss Angela Roy Lillian Spurr Beverley Superie

Nova Scotia Patricia Monaghan

Ontario

Gail King-Seegers Fabi Tempio-Hillier

Québec

Sylvie Michaud

Saskatchewan

Patti Brotzell-Close

Certificate of Achievement

British Columbia

Catherine Burnett Ellen Elizabeth James Sherry Page Neermala Tulsie

Manitoba

Lori Carpenter Jo-Anne Palanuk

Nova Scotia

Patricia Thériault

Ontario

Donna Byrnes Jacqueline MacDonald Lakshmi Narain Dawn Roussel Eleanor Szakacs

Prince Edward Island

Anne Miller

Saskatchewan

Laurel Clark Shelley Cressman

Sara Tarle is business operations assistant at the Canadian Child Care Federation. © CCCF 2007

CCCF Member Council Rep. Receives PM Award

The Canadian Child Care Federation is proud to announce that a representative on its Member Council, Anne Miller, is one of the recipients of the 2006 Prime Minister's Awards Certificates of Achievement.



Anne Miller

Anne has represented the Early Childhood Development Association of PEI on the Member Council since 2005. She has worked for 20 years at the Souris Kindergarten, in Souris, PEI, where she has a staff that has an unusually low turnover rate especially in the child care sector. During her tenure with the kindergarten, Anne has touched the lives of well over 1000 children from the Souris area and made her program "the envy of all centres on Prince Edward Island." (Beth MacPhee and Gail MacInnis)

In addition to organizing holiday food and toy drives, and hosting the annual Teddy Bear Parade in honour of Early Childhood Week, Anne runs the children's activities for the annual Souris Regatta, a long-standing community event that brings together a broad multi-sectoral group of individuals in eastern PEI to promote family literacy, early language development and early intervention.

In Anne's own words "we are often the first people to be trusted with another's child for the day, a responsibility not to be taken lightly."



Child Care Practitioners Speak Out on Children's Environmental Health

by the Canadian Partnership for Children's Health and the Environment

Last fall, 128 early learning and child care practitioners from coast to coast responded to our national online survey to measure current knowledge, attitudes and needs of the sector related to children's environmental health. The respondents' level of knowledge and practices are impressive, maybe as a result of an existing interest in these issues. Child care practitioners are a respected source of information for parents and are well positioned to educate them on environmental health issues. Child care practitioners can lead by example by implementing strategies to reduce children's exposure to environmental contaminants in child care centres. However, some respondents indicated that parents, administrators and landlords can be uninformed on environmental health risks. This lack of awareness can make changes in their work places difficult.

The top five factors affecting children's health identified by survey respondents were allergens, outdoor air pollution, pollutants in food, pesticides and indoor air pollution. Cigarette smoke was identified as an obvious indoor air pollutant. Other indoor air pollutants identified as likely to affect children's health include dampness and mould, pesticides used indoors and outdoors and cleaning products. Plastics, perfumes and fragrances, building materials and chemicals in consumer products were also mentioned.

Not only did survey participants have a good understanding of the issues, but they also put their knowledge into practice. Many child care centres implement policies (see table) to help reduce exposure to toxic chemicals or other environmental factors that can have an impact on children's health.

Asthma, sinus and allergy problems, cancer and birth defects ranked highest as the health effects thought to have links to environmental exposures. Learning disabilities, hyperactivity and attention problems did not rate as highly. In recent years, studies have pointed to the risk of the impact of contaminants on the developing brain, which could lead to various learning and behavioural problems. In November, an

Hand washing	96%
Non-smoking policy	75%
Sunscreen	63%
Peanut butter and other nuts	63%
ndoor shoes	53%
Insect repellents	44%
Cleaning products	41%
Pesticide use	35%
Scent-free policy	34%

% of respondents reporting that a policy is in place in their facility. We did not examine the policies themselves.

article in the respected medical journal, *The Lancet*, reported that over 200 industrial chemicals, known to be neurotoxic in adults, may also affect children's brain development, causing a "silent pandemic" of developmental disabilities, including autism and attention deficit disorder. The authors also describe the chemicals known to be toxic to the developing brain, including lead, mercury, pesticides, phenol and benzene, all of which are not only used by industry, but are also found in many common products.

Many respondents provided stories of their experience with asthma. The estimates of how many children in the centres suffer from asthma varied widely but most fell in the range of 8 to 15 per cent. In 1997, Health Canada reported that 12 per cent of children suffered from asthma based on physician-diagnosis, a four-fold increase since 1978. Over the past 10 years, the number of children suffering from asthma or other respiratory problems may have increased and many are not diagnosed as their symptoms may not be so severe.

Many child care settings (48 per cent) have carpeting and/or polyvinyl chloride (PVC) (29 per cent) flooring in the areas where children spend most of their play time.

Some survey participants specified linoleum but true linoleum is no longer common and the flooring may be PVC (also known as vinyl). Both carpets and PVC may contribute to asthma and other breathing problems. New carpets can emit volatile organic compounds (VOCs) and may be treated with pesticides and flame retardants that can offgas for many months. Old carpets can become a repository for mould, dust and other toxic substances. PVC contains plasticizers called phthalates that have been linked to asthma and other respiratory problems.

Chemicals in cleaning products are also suspected of making asthma symptoms worse. Child care centres need to ensure that cleanliness and disinfection are appropriate and that regulations are met while reducing exposure to toxic chemicals often present in these products. We are currently looking into this issue and will develop resources on cleaning products for child care settings in the near future.

Thank you for your participation. We will provide a more detailed analysis of the results in the near future.

© CCCF 2007

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Canadian Partnership for Children's Health and Environment (CPCHE): www.healthyenvironmentforkids.ca. Publications and awareness-raising tools: Playing It Safe brochure. An environmental health audit tool specifically designed for child care centres in the Playing It Safe Strategies Manual (p.79–89)

Canadian Child Care Federation (CCCF): www.cccf-fcsge.ca Learning Kit on Children's Health and the Environment

Guide to Less Toxic Products: www.lesstoxicguide.ca

Healthy Spaces: www.cfc-efc.ca/espaces-sante/ home_en.php . An interactive web-based learning tool to identify health risks in children's environments

New! Family Child Care Training Program Goes Online

The Family Child Care Training Program Online – Level 1 is an e-learning course for individuals who are currently, or who are interested in becoming, providers of family child care in both the regulated and unregulated sectors.

The online course is an application of CCCF's best-selling training program, *Family Child Care Training Program Level 1* – recognized by some provinces as formal training for family child care providers.

This 12-week course involves a commitment of 5 hours a week for group and optional activities, individual reflection, implementation of the skills learned and "e-communicating" with fellow learners and coach. An online coach and technical support is also offered to all participants to ensure a positive online learning experience. A completion certificate is issued at the end of the course.

For more information about the online course, including future session dates and registration for the upcoming session this fall, contact us at fccinfo@cccf-fcsge.ca or visit the CCCF website at www.cccf-fcsge.ca and click on "family child care" on the left menu.



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Critical Abilities Related to the **Development of** Resilience

by Darlene Hall and Jennifer Pearson

This article is the second in a three-part series about resilience that is being published in Interaction. Coming next: "Using Children's Literature to Promote Resilience."

Over thirty years of research tells us that resilience helps people deal with stress and adversity, overcome childhood disadvantage, and reach out to new opportunities.1

In the last issue of *Interaction*, the article "Resilience – Coping Effectively with Life's Challenges" pointed to early educators to model resilient thinking and coping patterns in their everyday interactions with young children. According to researchers at the University of Pennsylvania, our thinking processes directly affect development of several critical abilities associated with resilience.1 Maintaining these abilities is an ongoing process that helps people of all ages persevere and bounce back from life's inevitable challenges. Findings from the Reaching In...Reaching Out resiliency promotion project suggest that using cognitive skills that support accurate and flexible thinking can help early educators effectively model the critical abilities detailed in this article.²

Ability I. Emotional Regulation - Being in charge of our emotions

In stressful situations, our emotions can be overwhelming and adversely affect our whole day. When we're in charge of our emotions, we can calm down and constructively express our feelings so that we don't stay overwhelmed.

Emotional regulation affects the way we interact with others, the way we solve problems - even the way we look at the world

One simple and effective way to regulate our emotions is the old tried-and-true "three deep breaths" method. Slowly inhale to the count of three, letting your breath fill your abdomen, then slowly exhale to the count of three. Repeat three times and experience a surprising calming effect. Young children can be asked to "fill their bellies up like a balloon" as they inhale and "blow out an imaginary candle" as they exhale.

Ability 2. Impulse Control - Pausing to choose our actions

Impulse control is the ability to manage our urges and choose our next steps. For example, when we become angry, we may feel the urge to shout and get into an argument. Impulse control enables us to stop and decide whether these actions will help or hurt the situation.

Impulse control helps us delay gratification, finish what we set out to do and plan for the future.

Children learn how to control their impulses and delay gratification by watching us model restraint and by learning to focus on something other than the desired object.3 We can provide guidance and encouragement in this regard; e.g., "As soon as Sheena is finished with the firetruck, it will be your turn. If you choose to do something else for now, it will be easier to wait your turn."

Ability 3. Causal Analysis – Getting to the root of the problem

Causal analysis is the ability to accurately analyze the cause of a problem or situation. Resiliency research shows that our thoughts about what *caused* a situation or problem affect how we respond. For example, if we believe we hold ultimate responsibility for a stressful day with the children we work with, we may end up feeling overwhelmed, incompetent and inadequate.

On the other hand, if we analyze the day more accurately, we will likely find multiple causes (e.g., ongoing rainy weather, children in transition, staff changes, etc.). "It's my fault" is replaced with "There's a lot going on. . . no wonder it felt stressful in the classroom today."

Analyzing the situation with more accuracy helps us see that many stresses we encounter are temporary and affect



only a specific part of our lives. Knowing this reduces our stress, and helps us steer through the challenging period.

We can help children develop the ability to analyze the cause of a problem by teaching them to identify the problem and work together toward a solution; e.g., "There is a problem here because you both want to play with the same toy. What could we do to solve the problem?"

We also can help children see the temporary aspects of frustrations and disappointments by first acknowledging their feelings and then offering an alternative perspective; e.g., "Trying new things can be frustrating at first. Remember, you thought you would never be able to zip up your jacket without my help? And now you can do it all by yourself!"

Ability 4. Realistic Optimism – Keeping a bright outlook

Realistic optimism is the ability to maintain a positive outlook without denying reality - appreciating the positive aspects without ignoring the negative ones.1



We model realistic optimism for children when we acknowledge that there are no magic solutions - that positive outcomes are achieved through effort, problem solving and planning. We can guide them, step-by-step, in problem solving by asking questions like "What else can happen now?" or "How else can we make this work?"

Ability 5. Empathy – Walking in another person's shoes

Empathy is the ability to understand the feelings and needs of another person. Children develop empathy by being understood and supported by adults around them. By teaching children to recognize their own and other's feelings, we are helping them gain important relationship and resiliency skills.

Ability 6. Self-efficacy – Believing in our competence

Self-efficacy is a belief in our ability to solve problems, handle stress and influence situations.

We can help children believe in their competence by giving them choices that allow them to shape decisions that affect them; e.g., "It's cold outside. Do you want to wear your hat or pull up your hood?" Children also experience competence when they are given opportunities that challenge them yet ensure their success.

Ability 7. Reaching out – Taking opportunities and assistance

Reaching out is the ability to take opportunities that life presents. Resiliency research suggests that people are more willing to risk trying new things if they see mistakes as inevitable and simply part of life.4

We can model that "no one is perfect" by talking with children about how we make and fix our own mistakes. Normalizing their mistakes with an encourgaging, "Everyone makes mistakes – it's how we learn" gives children the confidence to take risks.

We can also remind children of their accomplishments, highlighting that they are indeed growing and learning every day: "When you were a baby, could you walk? And look at you now! You run so fast, I can hardly keep up with you."

Another important part of reaching out is being realistic about how much we can cope with and asking for help from



friends or professionals when we need it. We can help children reach out by modelling that it is okay to ask for help – that we all need support from others sometimes.

It's not that we either have or don't have resilience. All of us possess some well-developed abilities and some that need work to increase our capacity to bounce back. Gaining and sustaining resilience is a life-long process. Children watch, copy and absorb our effective responses to stress and opportunity. Resilience truly can be learned.

This article is adapted from Guide 2 in the Reaching IN...Reaching OUT Resiliency Guidebook, pp. 4-8). For more information about developing resilient thinking and coping styles, please visit: www.reachinginreachingout.com. Click on "Guidebook & Videos.

Jennifer Pearson is lead writer/trainer and Darlene Hall is coordinator of Reaching In...Reaching Out (RIRO), an evidence-based skills training program promoting resilience in young children

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- 4. Brooks, R. B. (1994). Children at risk: fostering resilience and hope. American Journal of

ERRATUM:

The list of references in "Resilience - coping effectively with life's challenges" (Interaction, Winter 2007) was from another version of the article. The correct list is included below.

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Facilitating Routines and Transitions

by Nicole Malenfant

Routine and transitional activities take up a significant part of the schedule in early childhood education. In fact, 40 to 80 per cent of the educator's time is devoted to these activities, depending on the level of development of the children. This suggests that the educator must accord considerable value to these activities in early childhood education.

Among routine activities we find such basic needs as eating, drinking, going to the toilet, sleeping and taking care of personal hygiene. Determining the general development of the day, routine activities are distinguished from other activities by their ritualized aspect: The

repetition and anticipation of gestures, the prior designation of place, the familiarity of the people involved and the child's knowledge of the function are all examples of this ritualized aspect. As for transitions, they assure the organized passage from one activity to another, allowing the children to adapt. The change of activity, place, instructions, materials, staff, educator or group all involve a transition. In these activities we always see that tidying up, moving from one place to another and organizing into a group go along with arriving and departing. Well-organized transitional activities bring into play much that is helpful to the development of the child's autonomy.

The educator's profession demands that she meet the challenge of making routine and transitional activities as agreeable to children as possible in order to avoid fatigue and monotony.

Favourable Opportunities

We know that children who are rested, well fed and confident have a better chance of blossoming than those who are tired,

hungry and anxious. By assuring optimal quality in routine and transition activities, we permit children to develop their talents more fully and we allow them to acquire basic skills that will be useful to them throughout their lives.

Educators recognize more and more the educational significance of basic activities to the development of children. They see natural opportunities for every kind of learning and skills acquisition: psycho-motor, cognitive, linguistic, social and affective. In fact, they know that tidying-up activities help children situate themselves in space, that clean-up following a messy activity sensitizes them to the importance of taking care of their environment, that putting on his/her shoes simultaneously develops

> their dexterity and interests them in addressing certain personal needs.

Routine and Transition Activities as Legitimate "Activities"

Routine and transition activities merit the name "activities" just as much as bookwork, active games or educational trips. The educator needs to know how to profit from changing Alice's coat - viewing it as a way of encouraging her to speak, an alternative to occupying her attention with a game. The educator avoids noise during meal time by encouraging the children to listen to each other. She eats with them in order to instill in them good dining habits. She uses getting dressed

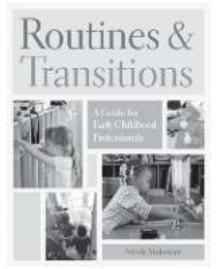
as a way of encouraging the children's self-esteem. She allows the children to explore little "discover" boxes during moments of waiting. In short, she transforms routine and transition activities into learning possibilities.

Creating a Warm Atmosphere

The kind-hearted educator creates a calm, inviting atmosphere. She speaks softly to the children. She accords equal attention to each of them. She receives them warmly on their arrival and sends them off in a cordial way on their departure. She smiles and sings often. She is sincerely interested in what the children say and do and looks upon them as autonomous individuals. Also, she is vigilant in trying to minimize noise and tries to encourage the collaboration of the children in this.

Taking the Time

To derive pleasure and satisfaction from routine and transition activities, they must not be thought of as a race against time or in terms of problem management. There is a certain way of being with children that consists of taking





advantage of opportunities for enriching experiences: finding and resourcing these experiences, learning from the children and taking the time to breathe, to have fun and to foster a certain camaraderie with the children. These are beneficial qualities that can be brought to basic activities.

Supervising Each Child in the Context of the Life of the Group

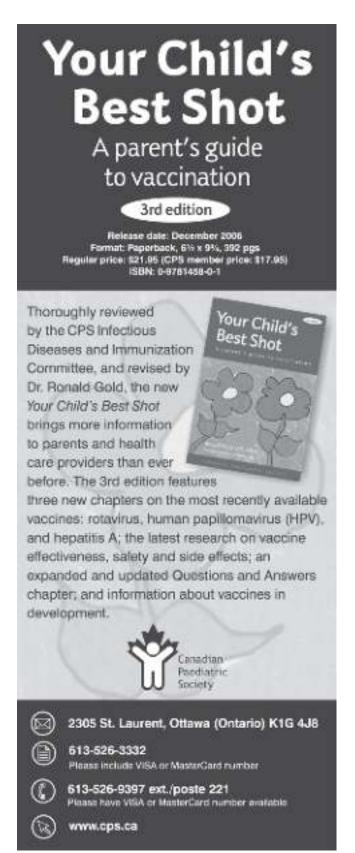
Since every child in ECE is different, this difference must be considered when adapting a child to the life of the group. Four-year-old Gabriel does not sleep during rest period, but at the request of the educator, he becomes progressively calmer on his mattress over the course of the half hour, after which he can take part in games calmly. In this way, he grows to respect the calm necessary to the unity of the group insofar as this corresponds with his own needs. On the one hand, Kevin eats his meal with a good appetite, whereas Michael is content to just taste his food. Nonetheless, he has learned to wait for the others to finish eating before getting up.

Putting the Needs of the Child First

Do no harm to the child. This is the rule to follow. For example, if Daniel sleeps for the first 20 minutes during rest period, it's because he needs to sleep. To respond to a parent's request to not let him sleep or to wake him up after half an hour even though he is sleeping soundly, is to make him feel as if he is in the wrong. The educator must make sure that parents' requests do not hinder the physical or psychological health of their child. She inquires about the role of sleep in the health and development of the child so that she may supply to the parents pertinent information on the subject. She understands that strengthening of the immune system, secretion of the growth hormone, development of the brain, the organization of newly acquired information, etc., are all benefits associated with sleep. As needed, she asks for the input of the directors in her method of dealing with the parents.

Planning for Many Contingencies

It is a collection of favourable conditions that assures the proper development of routine and transition activities. Security, the application of the security rules and hygiene measures, the instructions, the organization of the space, the management of time, the preparation of the material and the knowledge of the real needs of the children are the main issues to be considered in the quality of development envisioned. At the midday meal, the warm, calm voice of the educator may not, by itself, make up for the uncomfortable furniture when it comes to calming the children down. The cleanliness of the mattress and the bedding may not be enough to get the children to sleep if the air quality in the area leaves something to be desired. A balanced menu may prove to be incomplete if the educator is not attentive to the children during the meal.





Developing the Professional Image of the **Educator**

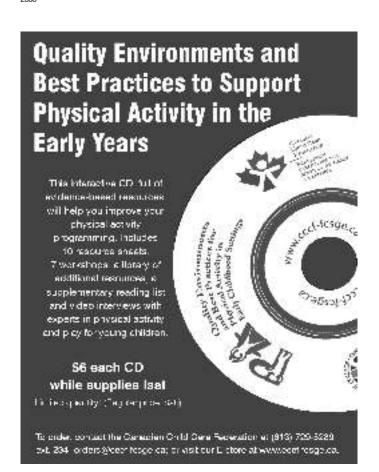
One may recognize the professionalism of the educator from the gestures and attitudes she displays during routine and transition activities, of which actively taking charge represents an important part of her responsibilities. Organizational sense, time management, emphasizing active learning, a capacity for adaptation, the ability to control stress, attention to matters of health and safety and observational skills - these are the other measures of her professionalism. "Tell me how you see routine and transition activities and I will tell you what kind of educator you are."

Translation: Richard Streiling.

Nicole Malenfant teaches in the early childhood department of Collège Édouard-Montpetit and at the continuing education department of the Université de Montréal, Québec. The book Routines and Transitions: A Guide for Early Childhood Professionals (Redleaf Press, 2006) is a training and working tool available to educators and future educators who want to ensure that all daily routine activities and tasks are performed in a harmonious manner. The author leads the educators to examine the quality of established routines in order to assess their professionalism.

The book is distributed in Canada by Monarch (www.monarchbooks.ca) and Les Publications du Petit Matin (www.petitmatin.com) and also available in bookstores.

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HEALTH WATCH

Preventing hamburger disease

Hamburger disease and barbecue syndrome are common names for a type of food poisoning caused by a

germ known as Shiga toxinproducing E.coli or STEC. The germ causes illness by producing a toxin (poison) that can break down the lining of the intestines and also, in some cases, damage the kidneys.

Most outbreaks of so-called hamburger disease come from eating undercooked, contaminated ground beef (hamburger). But outbreaks m have also been reported after eating or drinking unpasteurized milk, cheese or yogurt, other contaminated meat products (cold cuts, roast beef, salami), unpasteurized apple juice or cider, contaminated produce (alfalfa or radish sprouts, lettuce), or water contaminated with the germ. It is more common in the spring and summer than in the winter.

What are the symptoms?

- Severe stomach cramps and bloody diarrhea one to eight days after eating the contaminated food. Diarrhea may be watery without blood.
- Dehydration is common, due to loss of fluids.
- Fever, if present, is usually mild.
- The illness usually lasts seven to 10 days.

• A serious complication in children is a type of kidney failure called hemolytic-uremic syndrome (HUS).

How can the disease be treated?

Anyone with symptoms of bloody diarrhea, severe vomiting, bad abdominal cramps, or a decrease in urination during a diarrheal illness should immediately contact his or her doctor. Do not take antidiarrheal medication. Do not take antibiotics. Doctors don't know whether these drugs will help. Drinking small amounts of clear fluids (such as water) frequently can help prevent dehydration.

How can the disease be prevented?

- · Always wash hands before handling food, after handling raw meat products, after using the toilet, after changing a diaper.
 - · Children should wash their hands after contact with animals, especially at petting zoos.
 - · Clean utensils and kitchen work surfaces before and after use.
 - · Make sure kitchen surfaces where raw meat was prepared are cleaned and sanitized before ready-to-eat foods are placed or prepared on them.
 - · Put ground meat on the lowest refrigerator rack to avoid juices spilling onto other foods.
 - · Barbecued or cooked ground meats (hamburger, pork, or chicken patties) should be thoroughly cooked at the centre, not pink or red. Check to ensure this is the case.
- Do not drink unpasteurized milk, apple juice or apple cider, and do not eat unpasteurized cheese.
- Keep cold food cold (less than 4°C), and hot food hot (above 60°C).

For more information, visit the Canadian Paediatric Society website at www.caringforkids.cps.ca.

Source: Canadian Paediatric Society Infectious Diseases and Immunization



www.caringforkids.cps.ca / www.soinsdenosenfants.cps.ca



Exploring the Function of Behaviour for Young Children with Autism Spectrum Disorders

by Janet Young Guerra, Lisa Baker Worthman, Roxana Vernescu

Peter is a four-year-old boy recently diagnosed with autism. Peter has limited speech. He exhibits severe behavioural incidents in the preschool setting, including temper tantrums, destruction of property and aggression. Peter does not acknowledge requests and has difficulty when told that one activity is over and another is beginning. Peter shows repetitive behaviours with his toys and tears books if allowed to play with them. Due to his very recent diagnosis, Peter does not yet receive supportive services. He attends preschool five mornings per week.

Due to difficulties with communication, social interaction and information processing children with autistic spectrum disorders (ASD) often resort to inappropriate behaviours such as self-injurious behaviour, aggression or tantrums. In order to facilitate the integration of the child with ASD in the typical peer environment, it is important to prevent inappropriate behaviours that will further stigmatize the child and marginalize her in a group environment. To do this, one must be knowledgeable about the characteristics and learning disabilities of children with ASD. It is also necessary to assess the individual child from a functional behaviour perspective in order to

determine why a child is behaving the way she is. Once the reasons for the behaviour of a child with ASD are clarified, it becomes possible to plan and implement appropriate intervention strategies to help replace maladaptive behaviours. This article provides guideposts that resource teachers often use for analyzing the underlying causes of the behaviour of children with ASD. This information can then be used to develop strategies that will facilitate the integration of the child with ASD into a mainstream group setting.

Assessment

In assessing the child with ASD, resource teachers and other

professionals gather information by observing the child, obtaining a baseline for the behaviour in question, and interviewing those who know the child best. The idea behind a "functional assessment" or "functional analysis" is to determine what function a particular behaviour plays for the child, with the idea of helping the child find more socially appropriate ways of achieving the same end goal. In the case of Peter, for example, teachers need to know what sets off his tantrums and why he tears up the books he is given.

A number of questions across several areas of development need to be considered in assessing the child with ASD, including the following:

Receptive Language

What is the child's ability to understand language/ communication?

Expressive Language

How does the child communicate or express herself, her needs, her wants? Does she use words, gestures, pull/push someone, scream, cry?

Routines and Rituals

How strong is the child's need for routine and sameness? Does she have certain areas of preoccupation or overriding interests? Do you notice certain behaviours (e.g., tantrums) when she is surprised? Does she know what to expect next?



Attention and Concentration.

How long can the child sustain her attention on a task? Are activities typically completed at the same time each day? Does the child's attention seem to wax and wane throughout the day?

Play and Emotional Expression

What is the child's ability to engage in functional toy play? Is she able to express her wants, wishes, emotional states, in verbal or non-verbal ways?

Social Competence

Does she tolerate peers in her immediate environment? Does she tolerate peers interacting in her play? Does she share/take turns and understand what it means?

Processing Sensory Information

What are the child's hypo- or hypersensitivities? Does she cover her eyes or squint at the fluorescent lights? Does she cover her ears at the excited voices of the other children? Does she constantly chew or handle toys/ books, crayons, play-dough, other children?

In addition to answering these types of questions, it is important to begin to understand the child's maladaptive behaviour in operational terms. Determine the frequency, intensity and duration of the behaviour in question. For example, in Peter's case we want to know how often he has tantrums. What time of day, if any, does he tend to have tantrums? What does the temper tantrum look like? Does Peter throw himself onto the floor, kicking and screaming? What property does he destroy? Does he tear up books, kick holes in the wall and throw or break toys? Is the destruction directed at his own toys or at other children's toys? What type of aggressive behaviour and towards whom? Does he kick, bite, hit his peers and staff at preschool? How long do the tantrums last?

Understanding the sequence of events surrounding problem behaviours is especially important. Ask what happened immediately preceding the behaviour? What

happened following the behaviour? What are the reactions of the primary caregivers in response to the behaviour? What are the reactions of the children in the child's immediate environment? Do these reactions increase or decrease the intensity, frequency or duration of the behaviour? Larger sequences should also be considered. For example, what happened that morning? What happened the previous night (e.g., did he have a good night's sleep)?

In asking these questions, you are attempting to determine one or more causal connections behind a child's behaviour. It is important to note that you may have to ask yourself some or all of these questions for any new or reoccurring behaviour that the child expresses. The function of a particular behaviour may change not only with the developmental level of the child but also with changing environments, changing caregivers, changing consequences and so on.

Let us assume that we have conducted this kind of analysis with Peter and we have determined that

- 1. Peter's functional communication skills are very limited and as a result he has great difficulty getting his needs met.
- 2. He demonstrates a strong need for routine and predictability and a negative response to novelty. He does not know what to expect from moment to moment, has increased anxiety associated with changes and, thus, difficulty with transitions.
- 3. His social skills are weak and he has difficulty interacting with his peers and engaging in group activities for extended periods of time.
- 4. Peter has significant difficulty processing sensory information. He is a highly sensory child who seeks frequent tactile stimulation. This, in

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addition to his inability to play in a functional manner with his toys/books, contributes to his behaviour of chewing and tearing his books.

Program Planning

Having conducted a functional assessment and thus identifying the reasons behind the maladaptive behaviour of a child with ASD, one is in a position to teach acceptable replacement behaviours to that child. Begin by identifying goals for addressing skill deficits and/or environmental challenges. What are you attempting to change or address in the child's response to the environment or the environment itself? Once goals have been identified, determine which strategies will most likely reach those goals.

For example, in the case of Peter, the next step might be the development of goals and strategies that will help him regulate his behaviour and prevent future adverse reactions. Some of the goals that Peter's teachers might develop for Peter are to

- increase his functional communication skills
- handle transitions with less
- interact with peers more appropriately
- have more appropriate outlets for his need for tactile stimulation

It is important to note that ongoing assessment of a child's needs is essential. The difficulties and special needs of a child with ASD may change over time, requiring adjustment to the goals identified in the group setting.

Once goals have been identified, strategies for reaching these can be developed. Again, thinking about Peter's case, based on the identified goals, the following strategies might be considered:

- 1. Teach Peter functional communication through the use of an augmentative communication strategy such that he can learn to express his needs/wants. For example, teach Peter how to use the Picture Exchange Communication System (PECS).1 This will give him the ability to communicate in a functional, socially meaningful way with his teachers, peers and family members
- 2. a) Implement visual schedules, visual supports² or develop a Social Story³ to help Peter handle transitions within or between activities throughout the day. Learn to identify Peter's cues prior to the behaviour outburst and try to prevent the behaviour through the use of schedules or choice boards. Signs vary with each child, so watching for Peter's individual signs will let you know he is becoming overwhelmed. Develop a visual class schedule and include all daily routines such as snack time, circle time, etc. The pictures used must have meaning to Peter and be representative of his daily events. Allow Peter to check off each activity that he completes so that he can actively engage in the learning experience. Eventually, you may include a surprise/unknown card in the schedule to help Peter become accustomed to changes in these routines.
- b) Teach Peter how to identify and label his anxiety and instruct him on using individual techniques to regulate his emotions/behaviour (for example, engaging in a preferred activity or relaxing in a bean bag chair when he becomes overwhelmed). Develop visual cue cards such as Power Cards4 for the techniques you teach Peter so that he can refer to them as needed.
- 3. a) Establish a reinforcement schedule for positive interaction with his peers and teachers. Your baseline may show that Peter is able

- to sit in close proximity to his peers for only four minutes at a time before he becomes overwhelmed. Initially, introduce Peter to these group activities for three-and-ahalf-minute intervals (perhaps toward the end of story time for a story that is very familiar to Peter). Reinforce him for acceptable behaviour and as Peter gains skills for sitting/participating, gradually increase the time he is required to participate or engage with the group until he is able to participate during the entire story time segment.
- b) Respond positively and tell Peter what you want him to do, not what you want him to stop doing. The most effective strategy in changing a negative behaviour to a positive one is to reinforce the positive behaviour. Always name the positive behaviour you want to reinforce (for example "Good listening, I like the way you listened just now").
- c) Teach Peter functional play skills such that he may actively engage with his toys/books and begin to attend to the salient features of these items. In addition, this will help him begin to engage in parallel play with his peers and provide him with the entry-level skills necessary for more cooperative play later on.
- 4. Implement one or more sensory (tactile) activities in his day and mark these on his visual schedule. Have Peter engage in tactile activities during craft time. A rice bin, goop, play dough and water activities should also be available throughout the day.5

These are only a few of the strategies you may want to try in your child care setting. The resources outlined in this and the following article will provide you with useful information and sources for obtaining additional strategies. Most importantly,

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children with ASD will thrive in child care settings when there is open communication with caregivers and other professionals working with the child, individualized support, consistent routines, a clearly defined physical environment, and visual strategies used throughout the setting.6 It is also important to note that repetitive teaching increases the chances of lasting success. Consistent and planned reinforcement will create a positive environment and ensure the delivery of positive attention, improving the likelihood of children's positive behaviour. In turn, this will strengthen positive responses from educators over the long-term.6

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Promoting Inclusion for Young Children with Autism Spectrum **Disorders**

Roxana Vernescu

Young children with Autism Spectrum Disorders (ASD) require additional supports in order to attain fundamental goals of childhood across areas of emotional development including self-regulation, behaviour and attention; cognitive development, including communication and learning; and social development, including the ability to relate to peers and form social relationships. In order to help these children reach their optimal potential in an inclusive environment, strategies, supports and accommodations must be developed that take into account the features and learning characteristics of children with ASD.

Understanding Autism Spectrum Disorders

ASD is a neurological disorder that affects cognitive and behavioural domains and one's ability to integrate sensory information and regulate emotions. ASD falls under the diagnostic umbrella of pervasive developmental disorders, a broad category that includes autism and four other related disorders (Asperger's syndrome, childhood disintegrative disorder, Rett and pervasive developmental disorder - not otherwise

Learning Characteristics of Children with ASD

- 1) Disabilities with Social Interaction including difficulties with or lack of
 - a. social reference
 - b. response to social reward
 - c. modelling/imitation
 - d. drive for peer affiliation
- 2) Disabilities with Communication including difficulties with
 - a. comprehending natural gestures and emotional expression
 - b. expressing natural gestures and facial expression
 - c. auditory modalities (preferring visual modalities)
 - d. gestalt perception and processing
- 3) Disabilities with Processing of Environmental Stimuli including
 - a. over-selectivity of stimuli and perseveration with parts of objects
 - b. negative response to novelty and a preference for routines possibly including ritualistic patterns of activity
 - c. difficulties with sensory modulation

Adapted from Siegel, B. (1999). Autistic learning disabilities and individualizing treatment for Autistic Spectrum Disorders, Infants and Young Children, 12(2): 27–36

specified: PDD-NOS).1 ASD affects over 1 in 250 preschool children² with some estimates as high as 1 in every 166 children.3

The degree of impairment varies widely from child to child, depending to a large extent on the child's developmental and chronological age. Areas of difficulty include 1) social interaction, 2) communication and 3) restrictive, repetitive and stereotypical patterns of behaviour, interests or activities. Associated deficits are 4) sensory integration or odd responses to sensory stimuli and 5) a range of maladaptive behaviours such as hyperactivity, impulsivity, aggression, and self-injurious behaviours.1 Impairments may occur in the presence of other disabilities^{4,5} and may include a level of intellectual impairment that can range from mild to severe. ASD is evident in the first years of life, typically before the age of three. Because of the wide range of expression, children may not be diagnosed until four years of age or later.

Early intervention programs often target specific skill deficits, for example deficits with eye contact and joint attention;^{6,7,8} social responding and relating; 9,10,11 reciprocal communication;^{12,13} maladaptive behaviour;14 receptive and expressive language;12 functional use of play materials;15 symbolic and makebelieve play;8,16 and sensory-oriented behaviours.2

A more useful approach for child care and educational settings is to consider these challenges from a learning disabilities perspective.¹⁷ Dr. Bryna Siegel at the University of California, San Francisco, classifies some of the difficulties of children with ASD as specific learning characteristics that have to be addressed either through direct instruction or specialized accommodation in order to promote learning-conducive opportunities (Table 1).



Social Skills and Teaching Social Competence

Social and communication skills are very much related, and an integral part in engaging actively with one's environment. Children with ASD are often unable to understand the perspectives of other children or teachers.19 They have difficulty with social situations, which require the ability to process language, and non-verbal communication and social cues such as tone of voice, gestures or facial expressions.²⁰ In addition, they may have trouble expressing nonverbal behaviours themselves in social interactions with peers. This creates challenges for integrating children with ASD in mainstream ECE settings. As Schwartz et al note, "Without communication and social interaction between children an inclusive program is likely to provide little more than parallel instruction."18

Children with ASD are not typically motivated by social reward, such as smiles or positive feedback and they may fail to learn effectively if

this is the only motivator available. In the preschool environment, this typically intrinsic phenomenon is utilized to socialize and teach children;¹⁷ however, less naturalistic, more primary forms of reinforcement have been found to be more successful when teaching young children with ASD.21 For example, children with ASD often have specific tangible objects or items in which they have an intrinsic interest. These objects, unlike social praise to which the child with ASD must learn to respond, are naturally reinforcing to the child. With appropriate planning, such items can be utilized to increase the likelihood of occurrence of a particular, desirable behaviour. Children, however, must also learn the importance of secondary (or conditioned) reinforcers such as social praise, and as such, it is important to pair primary and secondary reinforcers whenever appropriate (e.g., pairing the desired object with a pat on the back or a smile).

Children with ASD may have difficulty understanding their peers'

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intentions or desires, or the relationship between their mental states and actions.¹⁷ For example, a child may have difficulty understanding that Johnny is sharing and talking about his baseball cards because Johnny likes baseball. These children have a tendency to play with toys in stereotypical ways rather than in socially engaging ways and fail to draw peers into their play. They may play near other children, but may have difficulty sharing or taking turns. The social interaction of children with ASD has been described as aloof, passive or active.22 One child may show no interest in interacting except for satisfying basic needs, become agitated in close proximity to others and reject social or physical contact. Another child may not initiate interaction but will accept others' attempts to interact. Yet another youngster may approach others but may not have the social skills to interact in a developmentally appropriate manner. Any one child may exhibit any or several of these behaviours depending on the social situation. Because young children with ASD have difficulty affiliating with peers and learning through modelling, typical learning opportunities are further disrupted in group and peer one-on-one settings.17

Children with ASD need to be directly instructed and supported in acquiring and honing these basic social skills. Because they have extreme difficulty acquiring such skills through incidental interactions or through observation alone, an inclusive environment has to plan and provide for many direct learning and practice opportunities. As such, it is important that entry-level skills be assessed and taught explicitly before expecting higher order social proficiency. For example, skills such as using and maintaining eye

contact, initiating and maintaining interactions, tolerating other children in their play space, engaging in parallel play with other children, sharing materials, taking turns initially while engaged in a familiar activity, and functional toy play, must be taught explicitly and at a rate that is manageable for the child.23

Communication Skills and **Teaching Communicative** Competence

While strengths and needs vary across children, all children with ASD will experience some degree of communication difficulty. Many children will have difficulty with both verbal and nonverbal aspects of communication. These children often have trouble understanding verbal information, following lengthy verbal directions and keeping in mind long sequences of instruction. They may show deficits or delays in expressive language, such as using language to meet basic needs but not in social interaction, repeating others' speech or utterances (echolalia), employing a restricted vocabulary or constantly talking about certain favoured topics. Finally, they may have difficulties with the pragmatics of conversation, such as initiating discussion, maintaining a topic of interest and showing inappropriate interrupting and inflexibility in conversation.24,25

Preschoolers and older children with ASD tend to exhibit difficulties both understanding and expressing nonverbal communications, 26 such as physical gestures, eye contact, facial expressions and body posture. Even prior to the development of expressive language, the nuances of nonverbal communication will escape the young child with ASD, and thus the child is either misinterpreted or may misinterpret situations.17

In an inclusive child care setting, children with ASD will likely need

to be taught a number of communication skills, including both receptive and expressive skills in both the verbal and nonverbal domains. Initial strategies should focus on developing entry level skills that will support the development of higher order communicative skills. These include increasing attention, training imitation – either systematically or embedding it in the preschool curriculum - utilizing short and concrete one- then two-step instructions, training the emergent use of language in social interactions, such as turn-taking and story telling activities, and emphasizing functional communication.²³ In addressing functional communication, for example, a child's disruptive behaviour should be replaced with an appropriate "replacement" behaviour that has a similar purpose and that will involve speech or some other form of communicative behaviour (e.g., pointing or gesturing for "more" or "break" instead of crying or hitting). As with any strategy for skill-development, a baseline assessment that reviews strengths and needs will lead to more appropriate, individualized learning opportunities.

Success will depend in large part on creating opportunities for active engagement with the child's typically developing peers. These opportunities need to be planned in advance in order to ensure that the child with ASD is engaged in these exchanges. A simple example of this is shared by Schwartz and colleagues¹⁸ in planning opening circle time: Have the child with autism share a toy with all the other children instead of only with the teacher. Similarly, have the rest of the children share their toys with the child with autism. When planning for these interactions, it may be important to teach the child with ASD to interpret the nonverbal

i |d|e|a|s

cues of others and, for non-verbal children, to initiate exchanges using the Picture Exchange Communication System (PECS) with their peers.²⁹

Accommodating for **Exceptionalities in Processing Environmental** Stimuli

Children with ASD tend to have information processing difficulties, including difficulties with concept formation and abstract reasoning; unusual responses to sensory stimuli; and unusual patterns of attention – for example, difficulties with attending to relevant stimuli, sharing or dividing their attention between multiple activities or objects and shifting their attention from one situation to another.⁴ These children will tend to notice and perseverate on irrelevant details of an object or learning situation, a phenomenon known as stimulus over-selectivity;30 have a negative response to novelty and a preference for sameness;31 and exhibit sensory modulation difficulties.32

The inability to normally attend to certain aspects of an object and then shift that attention to a salient set of attributes creates a disparity between what we assume the child is attending to (e.g., features of a story line) and what the child is in fact attending to (e.g., the movement of the pages).18 It is important to ensure that the child attends to the salient features of a learning situation. Identify what attributes tend to be over-selected by particular children and plan and organize the teaching environment accordingly,17 paying particular attention to minimizing distraction and providing structure. Organization can be provided through creating visual boundaries either by rearranging the furniture or using boundary markers, such as coloured floor tape, sitting mats, place mats, etc.³³ Given these children's preference for sameness,

it is useful to use repetition and integration of familiar stimuli into teaching routines.¹⁷ Instructional activities and requests should be delivered in clear and concise language targeted to the child's developmental level. This will focus children's attention and emphasize the most salient information.²³ In addition, teach children how to use compensatory strategies such as visual schedules34 or power cards35 so that they can organize their daily activities and learn skills for independence.

Sensory processing difficulties among ASD children cross tactile, auditory, visual, olfactory and vestibular and proprioceptive systems and may stem either from hyposensitivity or hypersensitivity to stimuli. Some children may react negatively and avoid touch while others have an intense preoccupation with tactile experiences such as touching smooth surfaces; some children may show extreme responses to the scraping of a chair or the sound of another child's cry and other children may fail to respond to the ringing of a phone or their name being called: some children react negatively to odours such as perfumes or lotions and others may seek out scents in their environments; some children will cover their eyes and squint under fluorescent lighting and others will look at lights or shiny objects for extended periods of time; some children may have difficulty with their vestibular orienting system and seem fearful or clumsy in walking up ramps or stairs and other children will engage in intense movements such as spinning or whirling that would not be tolerated by others.37,38

Teachers must be mindful of the challenges of children with ASD and be prepared to make special accommodations to increase the

likelihood of a successful experience.36 The sensory challenges of children with ASD may require modification to the classroom environment. Some of the sensory challenges experienced by children with ASD can be ameliorated by minimizing the sensory offenders. For example, one can minimize visual clutter on the walls, tables or shelving, use natural lighting and control the amount of light or noise in the classroom environment through the use of curtains, blinds and carpeting.33 For more persistent sensory needs, teachers can provide appropriate sensory activities. Consultation with occupational therapists, child development and behavioural specialists can help plan additional environmental modifications and individualize sensory programs for the child.

It is important to note that children with ASD may exhibit anxiety due to many of the identified difficulties. In planning environmental adaptations, ensure the availability of compensatory strategies that will reduce the anxiety of these children and help them cope with difficult situations. Provide children with warnings about changes in activities, events, or daily routines; daily and weekly visual schedules that will predict their activities; social stories or social scripts to promote calming strategies and coping skills; basic information to answer anxiety-provoking questions, such as what to do when your regular teacher is not at preschool in the morning, or what to do when your dad picks you up instead of your mom; and a calm/ quiet place in the classroom that all children can use when they are feeling anxious.23

There are a great many resources available for early child care practitioners, some of them referenced herein. In order to best support the children with ASD in

your child-care setting it is important to learn about ASD and the associated learning characteristics, to know the individual child well, and to clearly communicate with parents and other intervention specialists on an ongoing basis. Designing individualized and developmentally appropriate teaching and socializing opportunities that will promote the inclusion of the child with ASD, will bring about success for both yourself and the child.

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The Canadian Child Care Federation publishes IDEAS twice a year in partnership with George Brown College, Centre for Early Childhood Development and the Hinks-Dellcrest Institute. For submission to IDEAS please contact Connie Winder. Phone (416) 415-5000 extension 3018, fax (416) 415-2566, email cwinder@georgebrown.ca.

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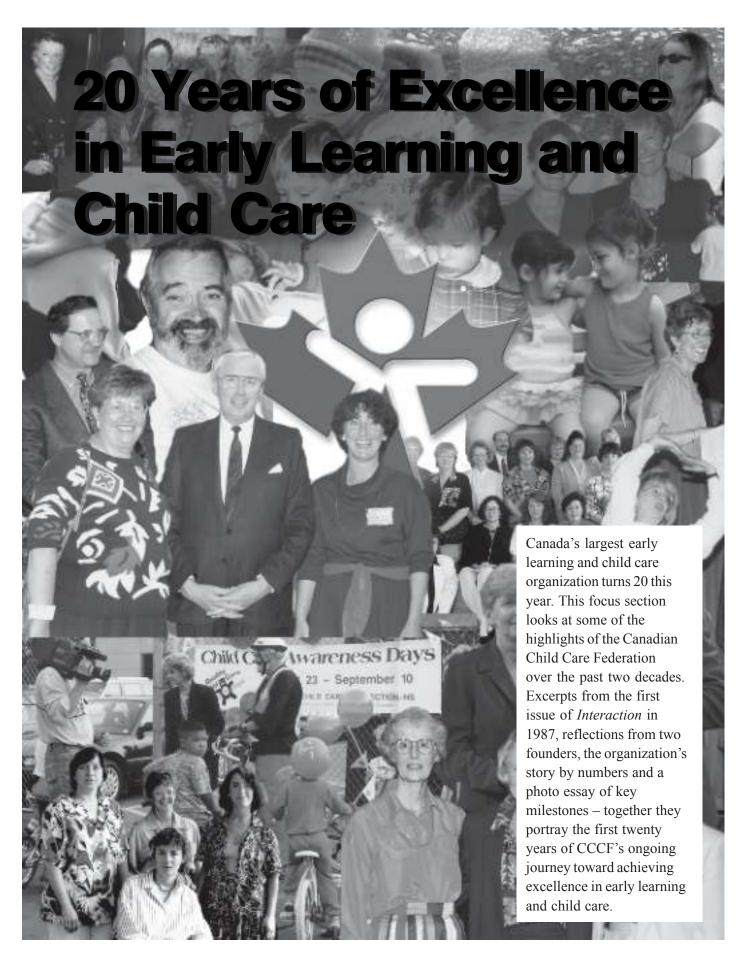
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20 YEARS OF EXCELLENCE

A Dream **Becomes** a Reality...

Originally published in the inaugural issue of Interaction, Vol. 1, No. 1. Autumn 1987

The twenty-two individuals who met in Toronto in March

1983 had a collective dream – the formation of a national day care organization that would provide much-needed support and information services to the Canadian child day care community. The meeting, initiated by the Association of Early Childhood Education Ontario, included representatives from each of the provinces/territories, Health and Welfare Canada, plus resource

A five-member Provisional Executive Committee was selected. They were asked to prepare and submit a proposal to Health and Welfare Canada for funds to prepare a development plan for a service-based organization, supported by a survey of the needs of the day care community.

Sandra Griffin, a lecturer at the University of Victoria and a member of the Provisional

Executive Committee was hired to develop and conduct the three-part survey. It consisted of personal interviews with key informants from across Canada; questionnaires, mailed to approximately 2000 individuals, associations and day care centres in every province/territory; and distribution of 10,000 posters which outlined the

proposed services and asked for community response. Support for the establishment of a service-based national day care organization was overwhelming. The day care community was "ready and waiting"! The final funding proposal was prepared and subsequently funded in 1986. Office space was rented in Ottawa and staff hired in early 1987. The dream had become a reality!







Originally published in Interaction, Vol. 2 No. 4/Vol. 3 No. 1, Winter 1988/Spring 1989. Prepared on the eve of CCCF's first National Conference in 1989.

We are a community built on late nights and weekends crowded around kitchen tables; often enlisting the help of our own children as we stuff another envelope, lick another stamp, compile another list on behalf of children everywhere. Herein lie the early seeds of the Federation, for in 1983 we were a community full of dedication and

> brimming with ambition but service poor and, as was our history, economically disadvantaged. We had a strong sense of what we could do given the opportunity - and we are acutely aware of the fact that we were fast becoming an essential service in this country.

> Our responsibility to help maintain and enhance the very fabric of our society through the provision of high quality child care services increased with the exponential growth of women in the labor force. Child care services were becoming a pivotal strength for the emerging new traditional family the working parent(s) family.

While recognizing our potential contribution to the health of our present and future society, we also recognized the potential harm of

child care services poorly planned and poorly executed. We searched for ways to improve our chances of success in this endeavour and one significant step was the creation of a national body which would help us coordinate our community, network with each other and share resources and expertise. - Sandra Griffin

list on behalf of children

everywhere."

people.



20 YEARS OF EXCELLENCE

A Journey to Achieve **Excellence in Early Learning and Child Care**

From a vision born out of a meeting of a small group of representatives from provincial/territorial child care organizations and Health and Welfare Canada to a vibrant partnership of 21 affiliate organizations representing over 11,000 members... The journey that has led to the Canadian Child Care Federation becoming the largest national early learning and child care organization is marked by numerous milestones. The following are some of the key events.

1983

The vision for a national service-based organization was developed at a meeting in Toronto hosted by the Association of Early Childhood Educators of Ontario and funded by Health and Welfare Canada. Representatives from provincial/territorial child care associations attended this founding meeting of the organization tentatively named the Canadian Child Day Care Federation.



The Federation opened its office at 500-120 Holland Avenue, Ottawa. The first provisional executive committee consisted of (left to right) Pamela Taylor (Western Provinces), Dianne Porter (Atlantic Provinces), Karen Chandler (Ontario) and Sandra Griffin (British Columbia and the Territories), who also served as CCCF's first president. Not pictured is Monique Daviault (Quebec).



The CCCF Story – By **Numbers!**

A Wealth of Leadership

The Canadian Child Care Federation has benefited from the leadership of numerous dedicated individuals who have contributed their expertise and passion to the Board, Member Council and staff. Here are some of the highlights:

11 Presidents -From 9 provinces

ВС	Sandra Griffin
ON	Karen Chandler
NF	Joanne Morris
PEI	Cathy McCormack
SK	Gail Szautner
AB	Karen Charlton
YK	Sandra Beckman
BC	Trudy Norton
BC	Marg Rodrigues
QC	Gina Gasparrani
MB	Don Giesbrecht

5 Chairs of Member Council - From 4 provinces

BC Trudy Norton BC Marg Rodrigues NL Mary Goss-Prowse ON Kathy Yach April Kalyniuk

6 Executive Directors

- Diana Smith: 1987-1991 (6 months educational leave of absence)
- Sylvia Fanjoy: 1990 (6 months interim), 1991-1993
- Dianne Bascombe: 1993-1999
- Sandra Griffin: 2000-2004 • Barbara Coyle: 2004-2006
- · Brigid Rivoire: 2006-



20 Members for 20 Years!

The members that make up the CCCF and our affiliates are a dedicated bunch! Their unwavering commitment to quality in early learning and child care is inspiring. CCCF thanks all its members for their continued support, collaboration and devotion to the field. For our 20th anniversary, we would like to extend special recognition to the following individuals and organizations, who have shown an extraordinary commitment to CCCF by being members for the last 20 years!

Woodgreen Community Centre Member since 1987

Margie Mayfield Member since 1987

Céline Dostie Member since 1987

Debbie Bumstead Member since 1987

Vanier College Member since 1987

Ecole technique et professionelle Member since 1987

North Shore Continuing Education Member since 1987

Susan Eberlee Spaull Member since 1988

Karen Charlton Member since 1988

Peace River Child Care Association Member since 1988

Jane Grantmyre Member since 1988

Elnor Thompson Member since 1988

Micheline Lalonde-Graton Member since 1988



Health and Welfare Minister Jake Epp announced that CCCF would be one of the first two projects funded under the Child Care Initiatives Fund (CCIF). The funding allowed the Federation to expand its programming, particularly in the area of information dissemination and exchange. Left to right: Diana Smith, Minister Epp, Sandra Griffin.



The first Federation national conference, entitled Children: Heart of the Matter, was held in Winnipeg and was co-hosted by the Manitoba Child Care Association. Guest speakers included Susanne Eden, Alan Pence, Thelma Harms and Dick Clifford. A pre-conference day called "Training: A Catalyst for Quality" led to the formation of the Federation's National Training Committee. The first Annual General Meeting of the Federation was held in Winnipeg. The first elected Board of Directors was installed. The Executive Committee was Karen Chandler, President; Suzanne Delisle, Vice-President; and Elaine Ferguson, Secretary/Treasurer.





The Honourable Perrin Beatty, Minister of Health and Welfare Canada, announced funding for a national study on wages and working conditions, entitled Caring for a Living, sponsored jointly by the Federation and the Child Care Advocacy Association of Canada.

1991

CCCF hosted its 2nd national conference. Children: The Heart of the Matter, in Charlottetown, P.E.I. From left to right: Karen Chandler, Don Ogston, Diana Smith and Cathy McCormick.

The National Statement on Quality Child Care was ratified at the AGM in Charlottetown.



The Federation's name officially changed to the Canadian Child Care Federation (CCCF) at a special meeting in Ottawa.



First CCCF Award of Excellence was presented. Recipients from left to right: Sue Wolstenholme, Rosemary Somers and Sandra Griffin.





Suzanne Power-Hann Member since 1988

Alice Leblanc-Boudreau Member since 1988

Shirley Miller Member since 1988

Patricia Pickens Member since 1988

Karen Chandler Member since 1988

Newpark Children's Centre Member since 1988

MUNSU/MUN Childcare Centre Member since 1988

8 Recipients of the CCCF Award of Excellence -From 7 provinces

The Canadian Child Care Federation's Award for Excellence in Child Care was launched in 1993 to honour individuals who have made an outstanding contribution to the field of child care. This biennial award recognizes achievements in caregiving, new initiatives, quality, research, education, policy and advocacy.

1993 - Sandra Griffin (BC), Sue Wolstenholme (NS) and Rosemay Somers (ON)

1995 - Bernadette Vangool (SK)

1997 - Karen Chandler (ON)

1999 - Karen Norman (BC)

2001 - Bev Peel (SK)

2003 - Sandra Beckman (YK)

2005 - Sherrill Brown (AB)

2007 - To be announced at the national conference, June 15-17 in Halifax, N.S.



81 Issues of Interaction



Interaction was launched in 1987 as one of the information services of the newly formed Canadian Day Care Federation. The original editor and first executive director, Marilyn Nault, wrote the following in the inaugural issue:

"In Interaction, you will discover the multitude of talents, programs and services that the national day care community provides to Canadian children and families. You will keep informed of current Canadian research and regional, provincial and national day care events. Through Interaction, individuals and communities in the Canadian day care mosaic, will hopefully not feel as isolated. As one Federation Director remarked, "It will be nice to have someone to share the load with."

The Federation hosted the National Forum on Guiding Principles for Child Care in Canada. The Honourable Lloyd Axworthy, Minister of Human Resources Development, addressed the Forum and the two-day workshop resulted in guiding principles and building blocks for the next steps in the development of a national child care policy.





1995

Sharon, Lois and Bram performed at the National Conference in Calgary, Alberta.



CCCF passed a by-law to adopt new affiliate structure that includes representation from each affiliate organization at its Member Council table.



A major web portal of information from 50 child serving organizations across Canada was launched - Child and Family Canada.

The Family Day Care Project was initiated with the goals of establishing the current status of caregiver training and professional development;



identifying the gaps in content, format and availability of training; and understanding and seeking ways to address the challenges in delivering learning opportunities.

The first Linking Research to Practice forum is held in Banff, Alberta, in partnership with the Association of Canadian Community Colleges. Two other forums were held (in 1999 and 2001) in partnership with the Canadian School Boards Association and the Centre of Excellence for Early Childhood Development.

Transition to new governance structure was approved. Sandra Beckman was named president and the board of directors took office.

CCCF was represented on the inaugural Child Care Human Resources Sector Round Table.



Health Canada announced the creation of five Centres of Excellence for Children's Health and Well-Being. CCCF is represented on the Directing Counsel of the Centre of Excellence on Early Childhood Development.

Since 1987, Interaction has grown and expanded:



• 16-page bilingual newsletter to

70-80-page magazine

- 550 member/subscribers to 11,500 member/subscribers, with a shared readership of over 55,000.
- an electronic version (Interaction Online) to be launched in June, which will allow for more frequent communication amongst members and will open the door for more community building and exchange online.

Despite these changes over the years, the spirit of *Interaction* today is remarkably similar to the initial vision of the publication. It continues to strive to bring together the child care field and to help us "share the load," the challenges, and the successes!





22 National Conferences

One of CCCF's top achievements has been its national conferences, bringing together diverse people and groups from across the country to discuss a wide range of topics pertaining to early learning and child

13 Conferences Organized by CCCF

Human Factors in Day Care 1987 - Guelph

Children: The Heart of the Matter

1989 - Winnipea

1991 - Charlottetown

1993 - Toronto (1326 delegates)

National Forum on Guiding Principles for Child Care in Canada

1994 - Ottawa

Caring for a Living 1995 - Calgary

Reaching Across Communities: Helping You Help Children and Families

1997 - in partnership with Association of Early Childhood Educators of Ontario, FRP Canada and Canadian Institute for Child Health. Toronto

Family Day Care Symposium

1998 - Aylmer

1999 - Ottawa

Linking Research to Practice/Linking Research to Policy and Practice

- 1998 in partnership with Association of Canadian Community Colleges, Banff
- 1999 in partnership with Canadian School Boards Association, Ottawa
- 2001 in partnership with Canadian School Boards Association and Centre of Excellence for Early Childhood Development, Ottawa

Early Learning and Child Care Leadership Summit 2005 - Scarborough

CCCF signed on as the Children' Affiliate for the Canadian Health Network (www.canadianhealthnetwork.ca).

CCCF took on its first international project - assisting communities in Argentina to improve the quality of child care and protection in order to optimize the development of their children. The project was funded by the Canadian International Development Agency.



2003

The first ever national francophone child care conference was held in Ottawa, co-hosted by the Association francophone des services à l'enfance de l'Ontario, the Fédération des centres de la petite enfancedu Québec and the CCCF. Centre: Suzanne Pinel (Marie-Soleil) surrounded by fans in ECE.



2004

At the annual general meeting, CCCF's membership ratified its new mission statement: We, the Canadian Child Care Federation, are committed to achieving excellence in early learning and child care. It also ratified the Occupational Standards for Child Care Practitioners.

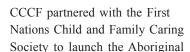
Accreditation model for the Alberta Child Care Accreditation Program completed and approved. The Alberta Child Care Network Association and CCCF received funding from Alberta Children's

services for the implementation phase of the Alberta Child Care Accreditation Program - the first provincial accreditation program in Canada. CCCF joins Alberta Child Care Network Association and Family Resource Programs of Canada to develop the Alberta Resource Centre for Quality Enhancement.





CCCF Project Manager Robin Kealey participated in a United Nations event in Geneva, Switzerland. The UN Day of General Discussions on Implementing Children's Rights was aimed at understanding the implications of the UN Convention on the Rights of the Child. Kealey accompanied Senator Landon Pearson and CCCF contributed a paper entitled "Keeping Our Promises: Rights from the Start," which analyzed some challenges inherent in promoting young children's rights in Canada.



Children's Circle of Early Learning on November 20, National Child Day. The site houses a searchable database with hundreds of research topics relevant to Aboriginal ECD service providers.



CCCF received a Lawson Foundation Achievement Award, a \$25,000 grant recognizing contributions to community and society. The award acknowledge CCCF for excellence in its work and strong leadership in fulfilling its mission.

CCCF President, Don Giesbrecht, was appointed to an advisory committee created by Minister of Human Resources and Social Development, Diane



Finley. The role of the Ministerial Advisory Committee was to provide advice on the approach and mechanisms required to effectively design and implement the federal government's Child Care Spaces Initiative, as well as to provide formal recommendations to Minister Finley.



9 Joint Conferences with **Affiliate Organizations**

- 1999 Manitoba Child Care Association, Winnipeg
- 2000 Association of Early Childhood Educators of Ontario, Niagara Falls
- 2001 Western Canada Family Child Care Association of BC, Kelowna
- 2002 Association of Early Childhood Educators of Newfoundland and Labrador, St. John's
- 2003 Association francophone des services à l'enfance de l'Ontario. Ottawa
- 2004 Early Childhood Development Association of PEI, Charlottetown
- 2005 Saskatchewan Early Childhood Association. Regina
- 2006 Early Childhood Professional Association of Alberta, Alberta Family Child Care Association and Alberta Child Care Network. Calgary
- 2007 Certification Council of Nova Scotia, Nova Scotia Child Care Association, Halifax

Special thanks to Gaétane Huot and Danielle Belair (CCCF Staff) for helping to compile this



20 YEARS OF EXCELLENCE

Reflections on CCCF's Past and Future from Two Founders

Karen Chandler

This musing intends to highlight the work of the Federation contributing to a broader perspective of practitioners from their immediate communities to a multidisciplinary/multi-pronged approach to meeting the needs of children and families.

The Beginning

When a small, representative group got together to create the Federation in the 1980s, our primary objective was to create a national organization with a purpose to support and enhance quality in early childhood programs. Our vision for the emerging organization was a strong pan-Canadian child care system including infrastructure, professional development opportunities and resources for practitioners; and available and affordable services for families.

Creation of a Shared Vision

As we began to collaborate across provincial/territorial jurisdictions, our similarities and differences became clear. Through results of our national survey, the focus shifted to the development a national vision for high quality child care.

From early on, the dedicated team of volunteers from the early childhood community, the leadership from the CCCF board, and the extraordinary

efforts of the staff made it possible for the organization to secure funding for numerous projects and important initiatives that upon implementation shaped the landscape across Canada.

One early project was the development of a national statement of quality which was published in 1991. The statement continues to be part of our national framework and has been updated in 2007.

The Creation of Partnerships

During the next period, the Federation forges numerous strong and long-lasting partnerships. Through collaboration with our sister organization, the Child Care Advocacy Association of Canada, we conducted a national survey of wages and working conditions. We brought together faculty from post-secondary institutions to identify strengths and challenges facing us. We continue this work with the Child Care Human Resources Sector Council as well as the Affinity Group. Additionally, our partnership with health professionals enabled us to bridge child health research and early childhood practice through projects and publications such as Well Beings, a resource published by the Canadian Paediatric Society specifically for child care practitioners.

The strength of the relationships with policy makers and researchers, the synergy in our early childhood collaborations and scope of our crossdisciplinary networks enabled the Federation to form strong alliances and collaboratively design and deliver innovative and valuable programs.

A major CCCF accomplishment over the past 20 years has been the opportunities for stakeholders to come together through projects and annual co-hosted conferences with provincial organizations. These opportunities provide a time for people to exchange ideas, forge partnerships and develop life long friendships extending everyone's network. Both Interaction and the websites provide for further exchanges of ideas.

The Emergence of Evidence-Based **Practice**

As researchers focused on the human brain, healthy child development, and the importance of the early years, there has been an increased appreciation of early childhood programs and services beyond being simply a support to working parents to recognizing that all children benefit from early learning experiences as well as being a critical social and economic resource. This knowledge reinforced the importance of early childhood's connection with kindergartens and the school system and implications for practice and the workforce. This work continues.

With ease of accessing information, practitioners acquired a greater understanding of international trends and solutions. Many countries are reaping the benefits of long-term sustainable funding and commitments countries such as New Zealand, which have made 20 years of investment in early learning and care versus 1-3 years of funding in many jurisdictions in Canada. In Canada, the CCCF continues



to work towards securing a clear national long term vision involving strong commitments from governments at all levels.

Karen Chandler is currently a senior policy analyst at the Ontario Ministry of Children and Youth Services, on sabbatical from her faculty position at George Brown College's Early Childhood Education program. One of the CCCF founders, Karen was on the first Provisional Executive Committee and served as President of the Board of Directors from 1989-1991, and as a Member Council Representative until 2006. She represents CCCF on the Child Care Human Resources Sector Council's Board of Directors.

Pam Nadeau (New Brunswick), Monique Daviault (Quebec), Pam Taylor (Alberta), Sandra Griffin (BC) and myself)

Sandra Griffin

It is January 2007 and I'm in an airport flipping through the Calgary Herald while waiting for my flight. I see an article about a parent who has just received notice of the closing of her child's centre due to lack of qualified staff - and her lament, "What am I to do?" And then I opened my BlackBerry email to find the following notice from the CCCF:

"due to substantial funding cutbacks, the Canadian Child Care Federation is undertaking some significant restructuring to ensure we make the best use of our limited financial and human resources.

As such, it was with much regret that we provided working notice to approximately 12 CCCF employees today that their position will terminate effective March 31st, 2007 due to necessary downsizing measures ..."

So, in answer to *Interaction*'s request to me as founding president of CCCF to provide a reflection on child care in the twenty years since the inception of the organization, my first thought is "It isn't looking good!" But, then I think ...twenty years ago the field across Canada was not connected and networked the way it is now. Twenty years ago there was limited ability to support the public in knowing just how important a role high quality early learning and child care plays in the lives of hundreds of thousands of children and their families across Canada. Twenty years ago there were not the rich resources that the CCCF now offers to practitioners and parents in every province and territory in this country.

Twenty years ago we, practitioners and parents, gathered together and launched a dream that has been realized a national network that provides resources that actively supports quality in the day to day practice of those hardworking people who "care for kids" - that make a difference in the lives of children and families on a day to day basis.

Twenty years ago child care wasn't on the agenda of every major political party in Canada. All of us working together over those twenty years put child care on those agendas. Why? Because the constant in those twenty years is reflected in our original motto: "Children - the heart of the matter." They were then, they are now, and they will be tomorrow. We can be proud of the work we have done. We've had a setback, but we have moved too far to fall back. And that is the good news.

Sandra Griffin is the founding president of the Canadian Child Care Federation and was its executive director from 2000-2004. Sandra is currently the administrative head of the new National Collaborating Centre for Aboriginal Health, based at the University of Northern British Columbia, Prince George, B.C.

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Paula Todd

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RESEARCH UPDATES

UN Report Tracks World Progress toward Early Childhood Education and Care

UNESCO has released the Education for All (EFA) Global Monitoring Report, an annual study that assesses where the world stands on the provision of basic education. The 2007 report, entitled Strong Foundations: Early Childhood Education and Care, shows that the demand for early



education and care is rising, mostly due to the increase of women in the labour force and one-parent households. The report findings state that despite the well-documented benefits of early childhood education and care, half the world's countries still have no early childhood education policy for children under three. Early childhood education and care is the first of six EFA goals to be met by 2015. This report details countries' progress toward meeting that goal, noting that financing programs is still a low priority for many countries. Less than 10 per cent of total public education spending was dedicated to primary education in 65 of the 79 countries (using 2004 data); more than 50 per cent of the countries allocated less than 5 per cent of their expenditures to early childhood education and care. The report emphasizes quality standards and regulations set by public policy to safeguard against inequalities, the importance of quality caregivers, and resources targeted to most disadvantaged children as a first step in the creation of a broader national early childhood education and care policy for all children. For the full report, visit the UNESCO website (http://portal.unesco.org) and click on "Education."

Childhood Obesity Linked to Lack of Sleep

Results of a study published in the International Journal of Obesity show that short nights may be contributing to childhood obesity. The study examined the lifestyle and socio-economic conditions of 422 children between the ages of 5 and 10 years old living in Quebec. Researchers found that of the factors examined - including time spent in front of the television, physical activity levels and nutrition – none had the same influence on obesity as did the lack of sleep. For children, a short night of sleep amounts to 8 to 10 hours. Lack of sleep affects the production of hormones, creating an additional influence on children's weight. A lack of sleep reduces the production of leptin and increases ghrelin, two hormones that help our bodies regulate metabolism and appetite. For more information, consult the International Journal of Obesity at www.nature.com/ijo.

Music Gives Children Brain Boost

A new study from McMaster University shows that music lessons can cause advanced brain development and improve memory in children. Using brain-scanning technology, researchers compared developmental changes in 12 children aged four to six for one year. Children who

had taken music lessons show more changes in brain responses. The research found that music lessons had a particular effect



on children's attentional systems, with the result that children were better able to pay attention and focus on important things around them. The study concludes that learning music likely sets up networks in children's brains that could lead to improvements in literacy, verbal memory, visiospatial processing, mathematics and IQ. For more information on the results of the study, see the October 2006 issue of Brain, a journal published by Oxford University.

Visit our @-store!

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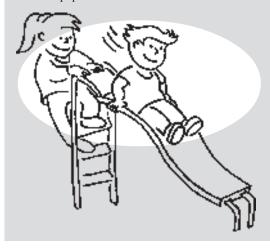


RESEARCH UPDATES

Reports Highlight **Importance of Play**

The American Academy of Pediatrics has released a new report, The Importance of Play in Promoting Healthy Child Development and Maintaining Strong Parent-Child Bonds, that claims unstructured play is essential for children's development. The report states that the loss of free time and a hurried lifestyle can be a source of stress and anxiety - and even cause depression – in some children. Unstructured play helps children manage stress and become resilient. It also enables children to achieve key social, emotional and cognitive developmental milestones. For more information, visit www.aap.org.

The importance of free play is echoed in a paper entitled Let the Children Play: Nature's Answer to Early Learning, released by the Canadian Council on Learning's Early Childhood Learning Knowledge Centre. This paper illustrates the ways in which unstructured play lays the foundation for children's logical mathematical thinking, scientific reasoning, cognitive problem solving, social and emotional self-regulation, social problem solving and communication skills and literacy. Visit www.ccl-cca.ca for the full paper.



ACROSS CANADA AND BEYOND

INTERNATIONAL

Chilean president, Michelle Bachelet, introduced Chile Grows with You, a program that offers support for children and their families. The program integrates supportive services in the areas of education, maternity care and health care, with some actions targeting children from the poorest 40 per cent of Chilean households and others aimed at children in vulnerable situations. The program will be implemented gradually, with the goal of being in full effect by

NATIONAL

The Early Learning and Child Care Act, known as Bill C-303, passed a second reading in the House of Commons in November 2006. This action moves the bill to a committee for clause-by-clause reading by MPs. Introduced in June by NDP MPs Denise Savoie (Victoria) and Olivia Chow (Trinity-Spadina), Bill C-303 lays the foundation for a national child care system. It also calls for reliable funding for the provinces and quarantees child care tax dollars will be invested in not-for-profit centres.

First Nations children suffer the greatest levels of poverty of all children in Canada. According Oh Canada! Too Many Children in Poverty for Too Long, a new report released by Campaign 2000 in November 2006, one in four children in First Nations communities lives in poverty. Among other problems cited, the report notes that one in eight Aboriginal children is disabled - double the rate of all children in Canada, 43 per cent of Aboriginal children lack basic dental care and close to 100 communities must boil their water.

ALBERTA

The City of Calgary is forecasting a 42 per cent increase in the number of children under nine. Almost 50,000 children are expected to be born in Calgary over the next 10 years, and child care centres will be the first to feel the change. There are currently 59,500 children under four, a number that is expected to jump to 77,100 in 2010 and 84,600 by 2016. According to Noreen Murphy, spokeswoman for Calgary Regional Association for Quality Childcare, centres in the city are unable to service the children under four that exist now.

BRITISH COLUMBIA

On January 5, Minister of State for Child Care Linda Reid announced that that annual funding for the Child Care Resource and Referral Program (CCRR) will be cut from \$14 million to \$9 million. effective April 1, 2007. The announcement upset many parents and child care practitioners who had received a letter from the minister in September, promising that current subsidies would continue until the end of the school year.

One in four children in BC is vulnerable in at least one developmental area at the age of school entry, says Dr. Clyde Hertzman director of the Human Early Learning Partnership. Using the Early Development Instrument (EDI) a research tool that asks teachers to complete a checklist for every child in the class, Hertzman has been able to measure the physical health and well being, social competence, emotional maturity, language and social development, communication skills and general literacy of kindergarten children. This data is used to map children's school readiness in order to identify the influence of socio-economic and community factors on child development, and to witness changes in children's school readiness over time. Hertzman believes that the vulnerabilities indicated in the latest EDI are preventable and that it should be possible to reduce the number of vulnerable children in the province to eight per cent, through resources and a commitment to a comprehensive. evidence-based approach to early child development.

NEW BRUNSWICK

New Brunswick's auditor general has raised concerns about money transferred to the province through the now-defunct bilateral early learning and child care agreement. Before cancelling the agreement in 2006, New Brunswick received about \$8-million from the federal government. The money was supposed to be used to develop curriculum, buy materials and train staff in the province's child care centres. The newly elected provincial government has said that it is in the process of consulting stakeholders to determine how best to spend the money. However, the funds have been paid out from the province into a trust fund, making it almost impossible to monitor how it is spent. Department of Family and Community Services spokeswoman Lori-Jean Johnson says that the provincial

government is reconsidering the fund and will address the concerns raised by the auditor general.

NEWFOUNDLAND

A new early learning and child care plan in Newfoundland and Labrador aims to support and develop a qualified workforce by providing incentives for practitioners to train or upgrade their skills. An educational supplement of between \$1,000 and \$2,000 a year for salaried child care staff earning less than \$25,000 will be introduced. Those earning up to \$35,000 will receive the money on a pro-rated basis. The plan also calls for an annual \$500 educational payment for entry-level centre-based and regulated family child care providers who are actively upgrading their qualifications to Level I. Eligibility for the existing educational supplement has been extended to family child care providers with Level I education or higher. The plan also earmarks \$100,000 for staff to support inclusion of children with special needs, a recruitment and retention strategy for the child care sector and professional development and training in quality improvement and playground safetv.

NOVA SCOTIA

A group of child care workers in Glace Bay, Nova Scotia, entered into conciliation with their employer on December 12, 2006. The workers had been without a contract since December 31, 2005. The employer was reportedly asking for pensions to be eliminated and for personal days to be reduced to six from twelve. Workers had spent the last two years raising funds totalling \$300,000 to build a new \$1-million facility, to which the provincial and federal governments pitched in \$700,000.

ONTARIO

The provincial government created a reference group to advise on the most effective ways to meet the needs of children with autism spectrum disorders. The 12-member group, composed of parents, researchers, educators and autism experts, met once a month, beginning in September 2006, and at the time of printing, was to present a report to the minister of education and the minister of children and youth services by the end of January 2007.

Toronto's Vital Signs, an annual report from the Toronto Community Foundation (TCF), found that from 2004 to 2006, the number of children on the waiting list for subsidized child care almost doubled, from 4,162 to 8,209. At current funding levels, it is estimated that 72 per cent of Toronto's low-income children (between birth and nine years old) do not have access to subsidized child care. Toronto's Vital Signs reports on trends in the city's quality of life, examining indicators such as health, safety, learning, housing and work. This year, Ottawa

launched its own Vital Signs report, which found that there are more than 8,000 children waiting for licensed child care in the city; half of them, for subsidized spaces.

At least twelve child care centres have been defrauded of at least \$400,000 by a Toronto bookkeeper. David Reiner, 59, is now believed to be in Nairobi, Kenya. The missing funds were allegedly discovered in September 2006 after Reiner resigned without notice; Toronto police have asked all centres who employed Reiner to doublecheck their payments, a costly and time-consuming process. Individual centres have reported missing funds ranging from \$5,000 to \$145,000. Reiner reportedly worked as a self-employed bookkeeper for Toronto-area child care for the past 15 years.

QUEBEC

Some private child care operators, practitioners and parents in Quebec are protesting provincial regulations that limit all child care centres in the province from charging more than \$7 a day for basic child care services defined as 10 hours a day, with a meal and snack. Government modifications to the Regulation Respecting Reduced Contributions and the Regulation Respecting Educational Childcare Services took effect September 1, 2006, prohibiting private child care centres from charging parents more than \$7 a day. Private operators receive on average \$33 a day for subsidized spaces while non-profit centres receive \$40. Some operators claim they will be unable to exist under the new limit.

Some of Quebec's child care workers will see pay increases in the summer and fall of 2007, the Quebec government has announced. The pay adjustments, which will benefit 18,000 school-age and 25,000 community-based chid care worker, come as a result of pay equity settlements. Payment will be retroactive to November 21, 2001. The legislation outlines a five-year phase-in plan; however, employers with financial difficulties will be allowed to apply for a longer payment period. Adjustments will not be retroactive for settlements paid to community-based practitioners in Quebec's Centres de la petite enfances (CPEs), which will begin in March 2007.

An investigation conducted by Enfants-Québec magazine and L'Épicerie, a Frenchlanguage television show, found that 50 per cent of Quebec CPEs provide fried foods to the children in their care. The study examined the menus of 100 of the province's 1,004 child care centres. Thirty of those CPEs voluntarily offered their menus to a nutritionist, who used a list of ten criteria to evaluate the meals. The investigation found that, at least once a day, half of the CPEs did not offer a vegetable and one in four didn't serve any fruit. Half of the

CPEs served junk food, such as egg rolls, fried fish, sausages, pizza and fries.

SASKATCHEWAN

At the time of printing, the Saskatchewan government had still not delivered on subsidy increases promised to take effect September 1, 2006. The increase of \$3.6 million is reportedly the largest single-year increase in the history of the 30-year subsidy program. The payments, which aim to provide financial aid to parents, are given directly to child care providers. Eligible parents pay 15 per cent of the cost while 85 per cent is covered by the provincial subsidy. However, some child care providers in Saskatoon have received neither the subsidy increase nor their usual funds. The province cites technical problems for the delay and expects changes to the payment system to be completed by January 2007.

YUKON

The Yukon Party won the territorial election in October, taking 10 out of 18 polls. Premier Dennis Fentie campaigned on promises of increasing child care spaces in the territory as well as making child care more affordable for families. The government's 2006 Speech from the Throne promised to deliver a territory-wide child care and early learning strategy, though details of the plan were not released at that time.

CALENDAR

APRIL

27-28

Toronto, Ontario

See what children know" Videatives: Using Video Documentation to Understand, Support and Communicate the Value of Young Children's Play

The Acorn Collaborative presents Drs. George Forman and Ellen Hall: "See what children know" Videatives: Using Video Documentation to Understand, Support and Communicate the Value of Young Children's Play. Dr. Forman, editor of The Hundred Languages of Children: The Reggio Emilia Approach to Early Childhood Education and The Hundred Languages of Children: The Reggio Emilia Approach Advanced Reflections is a world renowned lecturer, author and producer of educational videotapes. Dr. Hall is the co-chair of the North American Reggio Emilia Alliance (NAREA) and director of a Reggio-inspired school in Boulder, Colorado. April 27, from 4-7pm, attend a video showcase and high tea with George and Ellen at Seneca College. Saturday attend a full day workshop at Hilton Suites, Markham, ON. Visit www.acorncollaborative.ca or contact Rosalba Bortolotti at 905-918-2628 or Evette Serota at 416-491-5050 ext. 6130.



MAY

2-3

Halifax, Nova Scotia

Atlantic Canada Child Welfare Forum: Integrating Services for Children and Families Presented by CWLC, CECW and the Province of Nova Scotia, this forum will be of interest to front-line practitioners, policy and program staff, and researchers. Registration is limited to 80 participants. For more information, contact carrie@cwlc.ca.

24-26

Winnipeg, Manitoba

Our Greatest Treasures: MCCA's 30th Annual Early Childhood Conference

The Manitoba Child Care Association's annual provincial conference includes over 60 workshops and seminars as well as keynote presentations, child care centre tours, family child care home tours, MCCA's Annual General Meeting, Awards Banquet, and much more. For more information, visit www.mccahouse.org.

25-26 Richmond, BC

Honouring Childhood: ECEBC's 36th annual conference

Keynote speakers include Dr. Alan Pence and Carol Matthews. For more information, visit www.ecebc.ca.

31-June 2 Kingston, Ontario

Association of Early Childhood Educators, Ontario (AECEO) Provincial Conference

For their 57th year, AECEO will be presenting a southern and northern provincial conference in Ontario. AECEO provincial conferences draw a wide range of delegates from front line staff to directors and policy makers within the Early Learning and Child Care community. They offer an opportunity for professionals and organizations to showcase their programs, research findings and expertise to colleagues both provincially and nationally. For more information, visit www.cfc-efc.ca/aeceo.

JUNE

15 - 17

Halifax, Nova Scotia Set Sail for Quality on an Ocean of Caring

Join early learning practitioners, researchers, licensers, consultants and trainers at this national conference in Halifax. Speakers and workshops will explore new and innovative means and approaches to enrich the quality of your ELCC programs. This is an opportunity to expand the dialogue on quality and to celebrate and learn from each other. There will be preconference sessions, workshops, centre visits, a trade show, and lots of fun and down-east entertainment! Confirmed keynotes are Margie Carter, Deb Curtis, Dr. Richard E. Tremblay, Dr. Alan Pence, and Dr. Peter Moss. French workshops will be available; keynotes and some English workshops will be translated for Acadian and Francophone colleagues. For more information, visit www.cccns.org/ocean.html.

24-27

Toronto, Ontario

International Conference on Physical Activity & Obesity in Children

This intensive, content-rich, four-day program is the perfect opportunity for any professional involved in promoting children's physical activity to access the latest leading-edge science related to childhood obesity. You will have the opportunity to hear and interact with the world's leading experts in the field of childhood obesity research. Spaces are limited. For more information, visit www.obesityconference.ca.

SEPTEMBER

27-29

Thunder Bay, Ontario

Association of Early Childhood Educators, Ontario (AECEO) Provincial Conference For their 57th year, the AECEO will be presenting a southern and northern provincial conference in Ontario. This northern edition follows the southern conference held in Kingston from May 31 to June 2. For more information, visit www.aeceo.ca.

RESOURCES

Supporting Indigenous Children's Development (2006)

This book, by Jessica Ball and Alan Pence, tells the story of an unexpected partnership between an Aboriginal tribal council and the University of Victoria's School of Child and Youth Care. Together they created a new approach to professional education, in which community leaders are co-constructors of the curriculum and implementation proceeded only if both parties are present and engaged. For more information, visit the University of Washington Press website: www.washington.edu/uwpress.

Cultural Adaptations of Nutrition Resources (2006)

The Nutrition Resource Centre, in collaboration with the Best Start Resource Centre, have created Chinese. Puniabi and Vietnamese adaptations of two nutrition resources: "How

to Build a Healthy Preschooler," a 4-page colour pull out that offers the Canada Food Guide alongside tips for use with preschool age children, and "How to Feed Your Growing Child," a lowliteracy resource that provides information on feeding children from age one to five. For more information, visit the Best Start website at www.beststart.org.

Canadian Early Intervention Research

Created by researchers of the Canadian Early Intervention Research Project at McGill University, this website (www.earlyinterventioncanada.com) offers information about early intervention for young children with developmental delays/ disabilities for researchers, policy makers, practitioners, parents, families and other stakeholders across Canada. The site provides an extensive list of publications and websites related to early intervention, a description of early intervention professionals with links to their related associations and journals and a step-by-step guide for parents on developing an effect service plan for their child. [French version of the site is under construction1

We're Not Robots: The Voices of **Daycare Providers**

This fascinating book by Enid Elliot presents the stories of infant/toddler caregivers and their work to illustrate the complexity of balancing relationships with babies, families, coworkers, and self, yet remaining emotionally present and mindfully engaged. Enid Elliot explores the inevitable tensions of working within these various relationships and demonstrates how proficient caregivers can develop strategies for achieving this delicate balance. In the process, she raises provocative questions about how we care for babies, and how to provide education and support for their caregivers. For more information, visit the State University of New York Press website: www.sunypress.edu.

Your Child's Best Shot: A parent's guide to vaccination (3rd edition)

With so much information on immunization available and public concern about vaccine safety on the rise, it's easy to get overwhelmed or confused about the facts.

First published by the Canadian Paediatric Society in 1997, Your Child's Best Shot is the definitive source of information on vaccines and immunization programs for parents nationwide. Revised, expanded and updated, this userfriendly edition of Your Child's Best Shot, written by Ronald Gold, MD, MPH, is the best general guide on vaccines for parents and health care professionals alike. For more information, visit the Canadian Paediatric Society's website at www.cps.ca. [also available in French]