Dimensions
of Early Childhood

**Special Issue
RESILIENCY**

SECA

In this Issue

MILESTONES
A Resource Devoted to Infants & Toddlers

Departments

Continuing Resilient Leadership in 2021

Debbie Ferguson

Maybe. But you, along with other Southern ECE professionals, are worth that risk. We want you to know that you are valued and we long for a time that we can celebrate all the new things we have learned as we have become resilient leaders!

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La resiliencia se define como la capacidad para recuperarse o adaptarse ante el cambio o situaciones difíciles. Algunos dicen que en la educación temprana hemos aprendido durante el pasado año a ser más flexibles y resilientes, pero ¿acaso no lo hemos sido siempre? Indistintamente de nuestro rol como educadores de la edad

Resilience can be defined as an ability to recover from or adjust easily to misfortune or change. Some say the field of early childhood education (ECE) has certainly learned to become more resilient over the past year, but haven't we always been flexible and resilient? Many of us have been practicing resilient leadership regardless of the role we play as an early educator. There are some vital skills needed to achieve resilience: building trusting relationships, accepting change, embracing learning opportunities, establishing boundaries, being accountable, having the ability to reflect, seeking feedback, and taking risks.

As I look at this list it is apparent that our SECA Board of Directors have guided this association with immense resilient leadership. When we made the decision to transition our 2021 Annual Conference to a virtual model, we were trusting that you would understand and accept this change. Our goal is to continue to provide you with an amazing professional development experience as we all embrace learning in a different format. We will establish some boundaries and only choose to offer you sessions where presenters feel they are at their best virtually. We will be accountable to insure there are numerous topics available with sessions that are dedicated to those who teach different age groups or serve as administrators. We will seek your feedback and reflect on your responses so that we can continue to serve you as you devote your effort and passion to the well-being of children across the South. Was it risky to change our traditional conference model?

temprana, muchos de nosotros hemos estado practicando un liderazgo resiliente. Hay varias destrezas que son vitales para ser resilientes: ormar relaciones confiables, aceptación del cambio, valorar las oportunidades de aprendizaje, establecer limites, ser responsable, saber reflexionar, solicitar comentarios, y tomar riesgos.

Al repasar esta lista no hay duda de que la junta directiva de SECA ha lidereado la asociación con una inmensa capacidad de resiliencia. Al tomar la decisión de cambiar la Conferencia Anual del 2021 a una de forma virtual, confiábamos en que ustedes comprenderían y aceptarían este cambio. Nuestra aspiración es seguir ofreciendo esta especial oportunidad de desarrollo profesional para continuar valorando las experiencias de aprendizaje. Estableceremos limites y seleccionaremos sesiones donde los presentadores consideren ser exitosos de forma virtual. Seremos responsables de asegurar que los tópicos de las sesiones sean para aquellos que enseñan diferentes edades o para los administradores. Solicitaremos sus comentarios y reflexionaremos sobre los mismos a fin de continuar sirviéndoles mientras ustedes dedican sus esfuerzos por el bienestar de los niños en el Sur. ¿Acaso fue un riesgo cambiar nuestro modelo tradicional de celebrar la conferencia? Tal vez, pero por ustedes, así como todos los demás profesionales de la educación temprana bien vale tomar ese riesgo. ¡Queremos que sepan cuanto les valoramos y que esperamos por el momento en que podamos celebrar todo lo que hemos aprendido según hemos crecido como líderes resilientes!

Empowering Lessons From a New Reality

Beverly Boals Gilbert and Dina Costa Treff

As Guest Editor for this Special Edition of *Dimensions*, I am inspired by the stories, the research, and the messages shared by the authors of the articles, which provide practical guidance and scholarly documentation to support the growth and development of young children and their families. As I reflect on 2020, the "year of the pandemic and COVID-19," and the hardships encountered by the early care and education profession, the word "resilience" dominates. My personal experiences are from the perspective of higher education at Arkansas State University, where we prepare teachers for entry level and advanced level program positions. The challenges of our early childhood students often mirror those encountered by children and families where the theme of strength and resilience is demonstrated in this adverse environment. These challenges continue with issues such as limited wi-fi, unaffordable internet, the use of cell phones to attend classes, loss of employment, working from home while caring for young children or tutoring school-age children needing assistance with online instruction. The articles in this issue provide guidance and support as we continue to preserve and change to better meet the needs of our children, students, and families.

– Beverly Boals Gilbert, EdD

Putting together a journal is a tedious process and one that requires great attention. I am forever grateful for this experience for *Dimensions of Early Childhood* and the opportunity to work with authors and contributors of such valuable information. When I volunteered to be a co-guest editor for this issue on resilience, I had no way of knowing what we were all about to face as a country. We were just wrapping up our SECA 2020 Annual Conference. That was the last time my life felt "normal." The Coronavirus crisis in the United States had not taken shape. The U.S. had its first confirmed case of COVID-19 in January 2020. The first confirmed death from the virus was February 29th. Two weeks later, here in Georgia and across the country, we were ordered to shelter in place. Over the next four months I would learn just how resilient my Preschoolers are, surprisingly much more able to bounce back than myself.

I spent the summer meeting with my team and Preschoolers through Zoom. We read books, held scavenger hunts, and did afternoon art sessions together. During this time, we teachers were trying to grasp the magnitude of all that was happening around us. COVID-19 cases were soaring, especially here in the South. We juggled the logistics of being at home with our own families and meeting their digital learning needs. We also grew weary of all the social and racial injustices happening in our country. Meanwhile, my virtual preschoolers kept my spirits up over the next four months and helped me see just how much they loved learning, regardless of the method.

– Dina Costa Treff

Child Resilience in a Global Pandemic

Ellen McKenzie

Children's development worldwide is threatened by trauma and the lived experiences of disasters, war, famine, terrorism, poverty, climate change, displacement, political violence, and pandemics (Abramson, 2020; Masten, 2013; Sciaraffa et al., 2018). Exposure to adverse childhood experiences [ACEs] – traumatic childhood events resulting from ongoing and long-term exposure to stressful life situations (Sciaraffa et al.; Spenrath et al., 2011;) –threatens the basic health and mental well-being of children (Abramson, 2020; Masten & Barnes, 2018). The 21st century has seen a vast array of traumatic events: Hurricanes Katrina and Rita, the BP Oil Spill, the 2008 earthquake in China, the 9/11 terrorist attacks, SARS, H1N1 flu, the tsunami in Southeast Asia, the Fukushima nuclear power plant melt-down (Masten, 2013), the Beirut port explosion, and current and ongoing, the Coronavirus pandemic. Unlike most crises, COVID-19 reaches every corner of the earth, making outside supports impossible for communities to attain. Another anomaly with COVID-19 is the indefinite nature of the virus, uncertainty about how it is spread, what population or age group it affects most, and what will end the ongoing trauma.

On January 9, 2020, the Chinese news media released information that researchers in China had identified a new strain of the infectious disease that was rapidly spreading – the infectious disease caused by the most recently discovered coronavirus, soon to be known worldwide as merely COVID-19 (Li et al., 2020; WHO, 2020). By the end of January, the World Health Organization [WHO] had declared the COVID-19 outbreak a Public Health Emergency of International Concern (WHO), declaring it by March 11, 2020, as a worldwide pandemic.

How Tragedy Impacts Children and Child Development

In previous catastrophic events and the current COVID-19 pandemic, children's safety, cognitive development, and mental health are at risk (Abramson, 2020; Felitti et al., 1998; Golberstein et al., 2020; Masten, 2013; Sciaraffa et al., 2017; Spenrath et al., 2011). The American Psychological Association [APA] stresses the possible negative impacts of social isolation during the pandemic, citing loneliness, anxiety, depression, and post-traumatic stress disorder [PTSD] as possible outcomes of quarantine (APA, 2020). The WHO (2020) released papers detailing concerns over the pandemic's mental health and psychosocial consequences, stating that self-isolation and quarantine orders issued in countries around the world have disrupted families' normal activities, incomes, and daily routines. These factors increase depression, alcohol abuse, drug use, self-harm, and potential suicide (WHO, 2020).

Risks stemming from these stressors are compounded for the young and developing child (Felitti et al., 1998; Spenrath et al., 2011). Felitti et al. found that long-term exposure to ACEs without the support of a caring adult can severely impact the young child's developing brain and potentially lead to challenges for long-term learning, behavior, and mental and physical health. Other potential outcomes for the young child include language and attention deficits, delayed development of executive functioning and reasoning skills, lack of self-regulation, poor impulse control, oppositional behaviors, extreme emotional reactions, aggression, poor physical health, defensiveness, and difficulty processing new information (APA; Sciaraffa et al.). Early childhood professionals have long been aware of and concerned about the effects of trauma on the developing child, their consequences on the healthy, normal development of young learners, and the role developmentally appropriate practices play in supporting children through crises (Copple & Bredekamp, 2009; Pizzolongo & Hunter, 2018).

What is Resilience?

How will our youngest and most vulnerable children overcome the impacts of trauma like the COVID-19 pandemic? Resilience is the "capacity of a dynamic system to adapt successfully to disturbances that threaten system function, viability, or development" (Masten, 2013, p. 2). Resilience is the ability to overcome, to bounce back – toughness. It applies to living and non-living systems, including forests, economies, micro-organisms, and children and families (Gunderson et al., 2010). Many fields have adopted the term to describe how "complex systems anticipate, adapt, recover, and learn in the context of major threats, surprises, and disasters" (Masten, 2013, p. 2). Research on child resilience began as early as 1943 when Freud and Burlingham studied the psychological impacts of children affected by World War II. Their findings suggested that children

adjusted to the horrors of war with less trauma when supported by a parent during adversity (Freud & Burlingham, 1943). These findings have been corroborated by subsequent research on the impacts of ACEs on children and youth (Belsky & Feron, 2002; Bronfenbrenner, 2005; Masten; McGoron et al., 2012; Tharner et al., 2012).

Resilience has been studied widely across disciplines like psychology, psychiatry, pediatrics, and education (Masten & Barnes, 2018), identifying a multitude of individual, family, and social influences linked to disaster outcomes in children (APA, 2020; Felitti et al., 1998; Masten, 2013; Noffsinger et al., 2012; Sciaraffa et al., 2018; Spenrath et al., 2011). These findings overwhelmingly suggest that a young child's development and ability to adapt to ACEs are biological and psychological processes that happen within a series of interconnected groups, systems, and communities (Bronfenbrenner & Morris, 2006; Noffsinger et al., 2012; Walker, 2001). When coupled with the child's family, it constructs the child's ecology (Bronfenbrenner & Morris; Noffsinger et al.; Walker). These overlapping systems inform, support, or deteriorate the child's social ecology, implying that a breakdown of one system drastically impacts other systems and, ultimately, the child (Noffsinger et al.).

Searching for Answers

In light of the challenges, this article seeks to answer the following question: "how has the COVID-19 pandemic impacted young children within social resilience frameworks, and what developmentally appropriate strategies can educators undertake to support the whole child as school systems continue to adapt?"

The Effects of the COVID-19 Pandemic

As the COVID-19 pandemic spread across the planet, each person's life on earth was dramatically changed. Countries moved to lockdown situations whereby people were not allowed to leave their homes except to buy essential needs. People underwent mandatory and self-selected quarantines. Countries declared States of Emergency, and in most cases, all but essential needs were shut down. Schools were locked, places of worship shuttered, community centers shut down, pools vacated, lessons canceled, stores boarded up, planes grounded, and events postponed indefinitely (Golberstein et al., 2020). One of the most significant changes was the closure of school campuses, with teaching and learning moved to online formats (Decker et al., 2020). By April 2020, 188 countrywide closures were seen worldwide, and 1,576,021,818 learners were impacted by the spread of the novel Coronavirus (Xie et al., 2020).

Students and teachers were thrust into Distance Learning Models [DLM] (Decker et al., 2020; Golberstein et al., 2020). Even the youngest children learned online via various modalities. Children across the planet were removed from their school communities and classrooms without warning – plunged and plugged into online learning (Decker et al.). Children lost their human connection in classrooms, both with their classmates

Children worldwide began learning at home via technology.

and teachers. They lost playtime and story time; many lost daily lunch and breakfast. Others lost playgrounds and play and often lost their stability and routines. School closures disrupted the lives of children and their families worldwide (Abramson, 2020; APA, 2020).

Learning at Home During Quarantine

From the introduction of distance learning in March 2020 until the end of the academic year, educators and principals began to use and learn new teaching technologies, striving (and often struggling) to deliver high-quality online instruction. When educational delivery took this drastic turn to online formats, teachers quickly learned to deliver instruction via technology (Decker et al., 2020). In hopes of minimizing school disruptions during distance learning, teachers spent countless hours designing digital instruction, answering emails, and responding to online student posts. Teachers were scrambling to provide a continuity of education for students. Schools worked relentlessly to provide services, including passing out food bags to students on free or reduced lunch programs (Decker et al.). School nurses made calls to families to check on student and family health and well-being. Principals held coffee talks with parents online to distribute information, quell fears, and answer questions. School counselors reached out to families and sent out positive coping strategies for children. Principals in some states put mobile Wi-Fi on school buses and sent them into neighborhoods so that children could access online learning modules. Schools provided laptops and devices to students who did not have access to them in their homes.

During school closures, educators and parents worldwide have been concerned with the academic progress of students during DLMs, but there looms a more considerable concern. The American Academy of Pediatrics (2020) warns of potential anxiety and depression in children during home quarantines. Perhaps with this rush to ensure learning, we neglected our primary concern as early childhood teachers – reaching, nurturing, and teaching the whole child and supporting their social ecology. While

academic learning is undoubtedly a crucial, central, and critical focus of education, our students' mental health and well-being should play an equally important role. The young child's emotional well-being should be a top priority when learning online, just as when the child is physically in a school setting.

Psychologists caution that the COVID-19 pandemic may exacerbate already existing mental health challenges – warning that we may see more depression and anxiety in children due to fears about their health and that of their families, exposure to negative messages from the media, social isolation, and family financial issues due to economic recession (Abramson, 2020; APA, 2020). All these factors converge to increase the child's risk for mental and emotional abuse (APA; Felitti et al., 1998; Golberstein et al., 2020; Masten, 2013; Noffsinger et al., 2012; Sciaraffa et al., 2018; Spenrath et al., 2011). Therefore, educators and administrators must find ways to help children and families stay emotionally connected to their peers, teachers, classrooms, and the broader school community. Early childhood educators and caregivers should consider the potentially harmful physical and emotional effects that school closures have on the developing child while finding ways to mitigate these impacts on children.

Developmentally Appropriate Classrooms Foster Resilience

Early childhood educators can take many approaches to help the young child develop protective factors (Mortensen & Barnett, 2016; Pizzolongo & Hunter, 2011), like supporting the child's capacities, helping them form secure attachments to nurturing caregivers, and giving them a sense of belonging in a nurturing community. In so doing, we can help the child develop protective skills and, ultimately, support and bolster the health and well-being of our young students living in crisis. Early childhood teachers can help the young child develop a protective barrier by incorporating developmentally appropriate practices to bolster the young child's resilience (Copple & Bredekamp, 2009; Pizzolongo & Hunter).

A Child's Protective Barrier

Developmentally appropriate practices (DAP) are sensitive to children's individual needs and focus on teaching the whole child (Copple & Bredekamp; McKenzie, 2013). In a DAP classroom, the child has a strong, positive relationship with teachers, and the environment is safe, stimulating, and emotionally proactive. Teachers are nurturing, caring, and model appropriate relationships. Engagement in DAP classrooms provides a foundation for early learning that can help the young child form the protective factors of self-regulation, self-expression, and self-assertion, key to building a child's resilience (Mortensen & Barnett, 2016; Pizzolongo & Hunter).

In classrooms where DAP is embraced, children are taught self-regulation skills (Copple & Bredekamp, 2009). Early childhood educators help children learn how to recognize their feelings, express them appropriately, and regulate them in healthy and appropriate ways (Colker, 2018; Pizzolongo & Hunter).

Teachers practicing DAP are sensitive to the child's emotional needs and support the child with the self-expression of emotions, providing a safe emotional space for all feelings the child may be feeling. We understand that different children express emotions differently, and we know our students. Early childhood educators are honest about emotions and provide safe ways for children to express themselves. We provide predictable schedules so that children feel safe in their environment, leading to better self-regulation skills (Pizzolongo & Hunter). DAP classrooms are safe spaces where appropriate ways to self-soothe are modeled, and the child's emotions are taken seriously (Colker; Pizzolongo & Hunter). All of these strategies ultimately help the developing child grow in self-regulation skills and fortify their resilience (Pizzolongo & Hunter; Sciaraffa et al, 2018.).

Colker states that caring and nurturing teachers in DAP classrooms help children express their feelings in acceptable ways and exhibit self-control even in the face of strong emotions. Classrooms are safe spaces for children to talk about how they feel with trusted adults, and teachers in DAP classrooms offer children myriad ways to express emotions and support them with sharing their feelings. According to Colker, nurturing teachers help students find the words they are looking for when they are upset, and they offer children tools to help find their feelings such as puppets, charts of feelings, safe places to calm down, warmth, and security. Teachers serve as role models to facilitate the child's socio-emotional development. When children can safely express their emotions and name their feelings, they build up their protective factors (Colker, 2018; Pizzolongo & Hunter; Sciaraffa et al., 2018).

Normal, healthy development includes a child standing up for their thoughts, beliefs, and ideas. Teachers who embrace developmentally appropriate practices are patient when the young child asserts themselves (Copple & Bredekamp, 2009). The developing child needs a range of safe choices, a sense of agency in learning, and to know their opinions matter (Colker; Pizzolongo & Hunter). A DAP learning environment helps the child learn to be self-assertive, whereby materials, books, and toys are presented at their level. The child can build independence in material selection and at clean-up time. By helping our young learners assert themselves in developmentally appropriate ways, early childhood educators can help young children strengthen their ability to bounce back from adversity.

Secure Attachments and Nurturing Caregivers

Research on resilience in children overwhelmingly supports the idea that a secure connection with one primary caregiver helps a child rebound from tragedy. Bronfenbrenner (2005) posited that a child's resilience depends on at least one caring, supportive adult. Competent, caring caregivers are instrumental in the child's physical and mental safety and emotional well-being (Colker; Pizzolongo & Hunter). A young child's secure emotional attachments can significantly diminish the impacts of parental stress (Tharner et al., 2012), extreme deprivation (McGoron et al., 2012), and the adverse effects of living through traumatic situations (Belsky &

Fearon, 2002). Teachers who embrace DAP understand that we teach the whole child within the construct of their family.

Sense of Belonging in a Safe Community

Teacher connection to the young child is vital, implying that teachers and caregivers should make themselves available to students to establish and maintain a connection. This connection is especially crucial during quarantines when the child may feel most disconnected from their school and classroom community. Teachers who foster resilience in their young students are accessible, available, and approachable. They listen to their students, engage them in conversations and learning, advocate for their students, show empathy in the face of crisis, and provide psychosocial support to their students in both peaceful times and when they are facing traumatic experiences (Theron et al., 2014; Ungar et al., 2013).

Threats to the Child's Social Ecology During Quarantine

During distance learning, many students struggled while others adapted more easily. Four-year-old preschoolers figured out new technologies; five-year-old children checked email for lessons; six-year-old students met their classes on Zoom and Google Meet. They showed up eating breakfast. They showed up with uncombed hair. They showed up in warm and cozy pajamas. But they showed up. They showed up ready to learn.

How can young children show such strength and determination in the face of crisis? What makes a child resilient? For years it was held that resilience is an inherent trait: you have it or you don't (Masten, 2013). In contrast, research suggests that a child does not develop and grow within a vacuum. Instead, it develops within a series of interconnected systems – much like Russian nested dolls – featuring interconnected groups and communities and the child's family relationships, to form the child's social ecology (Bronfenbrenner, 1979). These systems, beginning with the child and moving outward, are the micro-, exo-, meso-, and macrosystem as outlined by Bronfenbrenner.

Masten and Barnes (2018) outlined vital supports that help a young child survive crises and bounce back from disaster. Deemed necessary to the child's healthy development and ability to cope with stress during a tragedy, these include caring, nurturing, and skilled caregivers; a sense of belonging; close familial relationships; family routines and rituals; personal agency and motivation to adapt; problem-solving and executive functioning skills; self-regulation; self-efficacy; positive self-identity; and hope and faith (Masten & Barnes, 2018; Sciafarra et al., 2012). Each of these supports takes place within the child's social ecology. During the COVID-19 crisis and subsequent school closures, we have seen threats to every area of the child's ecological system. Using Bronfenbrenner's Ecology Theory (1979), we can look at the many influences that support or inhibit a child's ability to build resilience and spring back from traumatic experiences (Masten, 2013; Noffsinger et al., 2012). A crisis like the COVID-19 pandemic threatens the child's ecological system.

At the Microsystem level, the family plays the most influential role in a child's ability to recover from disaster (Masten; Noffsinger et al.). The child's home setting, along with the people and groups with whom the child directly interacts – parents, friends, teachers, and role models – are critical for meeting the child's basic needs and preparing children to adapt to disaster (Noffsinger et al.). During the COVID-19 quarantine, parents faced a multitude of physical and mental health concerns, job security, loss of connections to family members, isolation, stress, and potential for an increase in substance abuse, domestic violence, and child abuse (APA, 2020; Golberstein et al.; Prime et al., 2020). Such crises put parental mental health at risk, often leading to irritability, marital stress, depression, financial strain, and decreased parenting efficacy (Prime et al.; Noffsinger et al.). Children of all ages suffered losses during quarantine: they lost their human connections in their familiar classroom environments – with classmates, friends, and teachers. Children lost mental and physical health care. Further compounding the young child's loss during quarantine, many families lacked the necessary supports for online learning including high speed internet, broadband or Wi-Fi connections, and adequate access to devices for connecting to online learning. They lost connections to their school community during the quarantine.

Quarantine can sever families from the supports they need, which schools and communities provide (Pfefferbaum et al., 2012). At the Mesosystem level, children and families lost the ability to visit grandparents and extended family. They lost social support groups, social engagement, and access to resources and materials. Loss of peer groups and direct interaction between children and families with teachers, other families, and school personnel was also experienced. Children lost sports, lessons, playgroups, outings, and recreational activities. Meanwhile, families lost transportation systems, communication channels, integration within the neighborhood and community, ties with other families, employment, access to healthcare, and loss of income. They faced unemployment, housing disruption, the collapse of economic markets, exposure to negative media coverage. Negative impacts on the adults in the child's life cause severe disruptions to the child's social ecology.

At the Exosystem level, families experienced disruptions or the loss of transportation systems, communication channels, integration within the neighborhood and community, ties with other families, employment, and income. They faced and continue to face unemployment, housing disruption, the collapse of economic markets, exposure to negative media coverage. Indirect negative impacts on the adults in the child's life cause severe disruptions to the child's social ecology.

At the Macrosystem level, disaster responses and recovery efforts can, directly and indirectly, impact the child and the family through social, economic, cultural, and political structures and processes (Prime et al. 2020; Noffsinger et al. 2012). Schools can connect families with national-level socio-political, cultural, and environmental systems and programs that support disaster relief (Pfefferbaum et al., 2012).

Threats and Supports for Children

In order to adapt Bronfenbrenner's (2005) social ecology systems theory to the COVID-19 context, this author synthesized the threats and supports detailed above into a matrix. The child's social ecology systems, threats at each level, and supports needed for the child and family are detailed in *Table 1*.

Supporting Families with a System of Care

As early childhood educators, we have the potential and duty to mitigate many of the issues that arise from ACEs for our young learners. Early childhood teachers, schools, and childcare facilities can fortify the child's social ecology at every level, as shown in the supports listed in Table 1. Schools and childcare centers are encouraged to develop a comprehensive system of care (SoC) (Pfefferbaum et al. 2012; Stroul et al., 2010): a holistic network of programs that serve children and families. This SoC avails services, including physical and mental health, support, welfare, justice, education, community support, and access to spiritual resources (Stroul et al.). Specifically, a SoC is an organized, coordinated network that builds partnerships with families and children and addresses their needs to help families function better at home, in school, in the community, and throughout life. SoCs are child-guided, family-driven, community-based, and culturally appropriate (Stroul et al.).

Research has shown that schools play an integral role in building a child's resilience (Anderson et al., 2004), serving as the hub for a child's access to a wide range of resources. Thus, schools have the unique potential to help a child build resilience in the face of ACEs (Anderson et al.; Liebenberg et al., 2016). Schools can potentially facilitate a child's resilience in the face of risks, with virtual school sites serving to counteract the loss of resilience resources that are missing for the child (Liebenberg et al., 2016; Theron et al.; Ungar et al., 2013). During crises, and especially during quarantines when face-to-face services are unavailable, this system of care can be delivered through a centralized, online service and support delivery portal, such as a webpage with links, information, and access to services. This article concludes by proposing supports that such a SoC could offer through an integrated portal format.

At the Microsystem level, schools can support young learners during a quarantine by providing online access to teachers, counselors, and peers. We can encourage online playdates and help parents navigate the technology to help children meet with friends. Teachers can plan lessons with built-in choice and voice for our students and ask for (and use) their feedback about online lessons. Early childhood teachers can help young learners create spaces for learning at home and establish new routines. We can help students express emotions by having daily emotional check-ins built into our learning, giving them developmentally appropriate ways to express joy, fears, concerns, loneliness, and other feelings. Schools can provide licensed school counselors with access to help students and families navigate the unfamiliar territory of home learning. Early childhood teachers can find older peer mentors for students and build connections across grade

levels. We can teach our students to use therapeutic activities to help rebuild during a crisis.

At the Mesosystem level, we can help mitigate the challenges families face during pandemics by helping children and families connect with other families. We can help parents by distributing information about the crisis and connecting families to service providers they need outside of the school setting. Schools can offer and arrange parent support groups, help families connect through parent coffee hour or other virtual get-togethers. Schools can connect families to support systems outside of the school and help families make connections within the broader community. We can connect families to a myriad of resources, including mental health services, crisis information, healthcare, and special interest groups like health and wellness and sports forums. During quarantines, schools can help arrange parent play dates and help parents find or create exercise and wellness groups. By helping the child cope with a crisis, we help to fortify the family and teach our children (and parents) to be resilient.

At the Exosystem level, schools can offer parent support and health and wellness groups. We can give parents resources for health care and mental health services outside of school. Schools can offer resources for crisis information. Teachers can connect parents to special interest groups such as online sports activities, virtual fitness classes, learning online opportunities, based on the interests, cultures, and needs of families. Educators can help parents connect to community and religious institutions, like places of worship or cultural centers. Schools can mediate many of the issues facing families during a global pandemic by offering access to available supports. These are especially crucial during quarantine and the multitude of issues a family faces during isolation.

Framing Pfefferbaum's (2012) emergency System of Care network model within Bronfenbrenner's (2005) social ecology system's theory, this author proposes a comprehensive system of care during a crisis detailed in *Figure 1*.

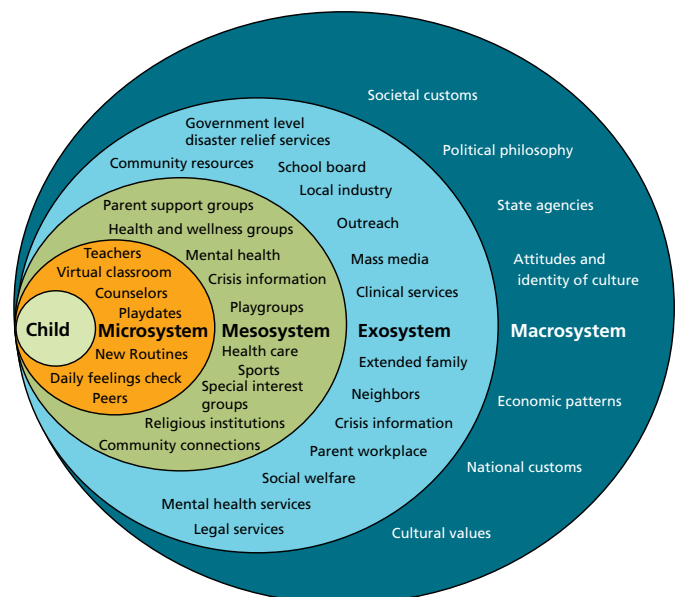**Figure 1 System of Care During a Crisis**

Table 1. Matrix of Threats and Supports to the Child's Social Ecology During Quarantine

Child's Ecological System	Threats	Supports
Microsystem: encompasses the child and the child's home setting, along with the people and groups with whom the child directly interacts; parents, friends, teachers, role models	• Human connection • Isolation • Parent anxiety • Job loss • Substance abuse • Domestic violence • Child abuse • Parental mental health • Loss of routines • Marital stress • Irritability and depression • Financial strain • Decreased parenting efficacy • Child behavior problems • Loss of peer interactions • Displaced parents • Fear • Loss of loved ones • Home confinement • Sibling issues • Lack of access to technology and limited or lacking devices; Weak or no internet connection	• Access to teachers • Access to peers • Online play dates • Maintain the child's sense of agency in learning experiences • Choice in online learning • Teacher office hours • Teacher talk time • New routines • Daily emotional check-ins • Developmentally appropriate expressions of worries, fears, and concerns • Access to licensed school counselors • Peer mentors • Restorative activities • Internet access • Access to technology
Mesosystem: children, parents, teachers, other adults, members of faith-based organizations, school, and faith-based activities	• No extended family visits • Loss of sports and lessons • Loss of social support groups • Loss of social engagement • Loss of access to resources and materials • Loss of peer groups • No direct interaction between child and family with teachers, other families, and school personnel • Loss of access to mental health care; physical health care • Loss of spiritual activities	• Parent play times • Access to licensed school counselors • Parent coffee hour • Parent support groups • Exercise and wellness groups • Connecting to support systems outside of the school • Well-functioning school • Community connections • Mobile mental health and wellness units • Mobile access to healthcare
Exosystem: the child's neighborhood, mass media, places of work, special agencies, and things that impact adults in the child's life	• Institutions, structures networks state and federal agencies • Transportation systems • Communication channels • Families social integration within the neighborhood and community • Ties with other families • Social networks • Loss of employment • Exposure to negative media coverage • Social network disruption • Unemployment • Loss of income • Housing disruption • Collapse of economic markets	• Government-level-disaster relief and mental health services • Distribute information to parents • Outreach • Clinical services • Connections to resources
Macrosystem: disaster responses and recovery efforts which impact the child and the family directly and indirectly through social, economic, cultural, and political structures and processes	• Social, economic, and political structures • Prejudice • Discrimination • Lack of social support • Cultural values	• Connect families with national sociopolitical, cultural, and environmental programs

Living with a Pandemic

We know very little about the long-term impacts of the COVID-19 pandemic and potential future quarantines. However, we do know that adverse childhood experiences threaten the developing child and the concentric social systems in which they live (Noffsinger et al., 2012). Uncertainty surrounds the pandemic: how long it will last, when it will end, when family life will return to normal, whether parents laid off due to the pandemic will return to the workforce, when relatives separated by travel bans will be united, and the long-term mental and physical health impacts on society. We do know that COVID-19, and its effects on children and families, will be here for a while.

At the time of writing, several COVID-19 vaccine candidates received approval and distribution began in many places. However, it remains unclear when a vaccine will be openly available to the general population, implying that there is yet no definitive end in sight for the disease to stop spreading. As we adjust to the new normal, schools, teachers, families, and healthcare providers play crucial roles in supporting the systems necessary for young children to build resilience in adverse life experiences (Masten & Barnes, 2018). Researchers need to continue to study the impacts of this worldwide dilemma on the young and developing child, including longitudinal studies on the effects of quarantine and home learning. Further research on virtual supports for families enduring crises would prove beneficial. It is our charge and our duty as early childhood educators to protect our children from the physical dangers of disasters and to bolster them emotionally to help them build resilience to survive this pandemic, thrive in this new world, and develop tools to use in future adverse life experiences.

Ellen McKenzie PhD, is a writer, researcher, peer reviewer, and early childhood educator. After teaching as an early childhood educator for ten years in Louisiana's public schools, she has lived abroad, teaching Kindergarten in the Middle East and, more recently, Japan. Dr. McKenzie has also taught undergraduate and graduate coursework at the University of New Orleans. Her most recent research addresses international mindedness and culturally appropriate education, informed by teaching practice in both culturally diverse settings in the U.S. and the international baccalaureate school context. Her recent research also returns to the topic of crisis and resilience in the COVID-19 context, examining how adaptations to virtual learning and social distancing in classrooms pose various threats to children, early childhood education, and developmentally appropriate practices.

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Fostering Resilience through Executive Functions

Nicole Pearce and Jill Davis

allows a child to have an adaptive response to hardships even when exposed to a toxic environment or adversity. Resilience is the interplay between a child's positive environment and adaptive and coping skills outweighing risk factors and adverse experiences to create a positive outcome. Risk factors and adverse experiences that can impede a child's resilience include internal predispositions (temperament) and external experiences such as:

- lack of supportive relationships and environment in building resilience
- parent divorce
- death of a loved one especially a parent

Suzanne (all names in this article are pseudonyms) sat on the rug in the library center with two peers reading a book together. "It's my turn," stated Suzanne as she reached for the book. Caty moved the book behind her back and said, "I am not finished reading this page." Suzanne's face reddened and scrunched up as her hands balled into fists then pushed Caty on her back and began a quarrel. Caty began to cry. When the teacher approached, she told Suzanne to go to the cozy area so she could calm down with the chart with strategies to scaffold Suzanne in regulating emotions and behaviors and basket of items for stress relief which included squeeze balls, Rubik's cubes, a Tangle (small connected tubes that can be twisted and turned), miniature stuffed animals, and fidget spinners. Suzanne did go to the cozy area and put the basket in her lap, but then proceeded to throw the items across the room.

- exposure to violence
- conflict, abuse, neglect, or maltreatment

(Center on the Developing Child at Harvard University, 2015; National Scientific Council on the Developing Child, 2018).

Even when bombarded with multiple risk factors, a child with strong resilience will be able to counterbalance negative experiences with adaptive responses to cope through the negative experiences. It is important to point out that some stressors are not toxic and can be handled by children even serving as teachable moments with support from adults enhancing coping skills for obstacles and hardships in life.

This conflict in the library center could have been resolved with the teacher guiding the children through conflict resolution and problem solving steps. Suzanne lacks the resilience, or adaptive skills, needed for circumstances like the scenario above to resolve in positive outcomes. Instead, negative outcomes such as not being able to regulate her behavior and emotions pursued. Fortunately, Suzanne has the potential to build resilience with the right strategies.

In a brief summary on resilience, the Center on the Developing Child at Harvard University (2018) compared resilience to a seesaw with negative outcomes on one end and positive outcomes on the other end. This analogy demonstrated that resilience is only tangible when a child's positive outcomes (health and development) outweigh the negative outcomes given a considerable amount of risk factors and stressors. Even though risk factors impede a child's resilience, strategies can promote healthy development and responses even in the face of adversity.

Resilience

A key factor in a child's healthy development is resilience, which

Resilience necessitates at least one supportive, reliable, and nurturing relationship with an adult. This relationship breaks the path of a child's unhealthy development and evolves healthy development through experiences that support healthy development. Support and responsiveness to a child in a positive learn-

ing environment cannot alone enhance resilience. Adults need to scaffold strategies to help the child demonstrate resilience such as planning, self-regulation, adaptability to change. The skills align with executive functions which encompass inhibitory control, working memory, and cognitive flexibility. The tables below define the three components of executive functions and explains benefits of executive functions.

Executive Functions

Executive Functions strengthens a child's resilience, creating a suit of armor to triumphantly face the challenges of everyday life. A child is not born with executive functions. The potential to gain executive functions and promote resilience is present from infancy. However, many children lack the environment and experiences during these early years to foster executive functions resulting in a thin suit of armor against challenging situations. Then, how can adults support these children's in developing executive functions to build resilience?

Early childhood encompasses the essential years for the development of executive functions which ensure school readiness. Executive functions increase cognitive, social and emotional, language, pre-reading and pre-mathematics skills (Liew, 2012;

Shaul & Schwartz, 2014). In general, executive functions empower children to perform goal-oriented behaviors by tuning out distractions and controlling impulsive or inappropriate behaviors (Diamond, 2013; Garon, Bryson, & Smith, 2008). During the early childhood years, attention span increases, enabling children to focus for longer period of times in both free play and structured tasks (Garon et al., 2008). Attention is the infrastructure in executive functions and linked to the three components of executive functions: inhibitory control, working memory, and cognitive flexibility. Although each component entails a different conceptual definition, development or lack thereof in one area influences functioning of the other two areas (Diamond, 2013).

Inhibitory control enables children to manage their own behaviors, thoughts, or emotions. As a result, children can hold back inappropriate responses for more appropriate ones, referred to as delay of gratification. A child is playing a game on the computer, and the teacher announces it is time to stop and transition to the next activity. The child is able to stop even though it is the middle of a game the child loves. This is an example of a child with inhibitory control. A non-example of inhibitory control involves the child continuing to play the game and not stopping. Inhibitory control leads to improved academic outcomes. These outcomes result from children's capability to successfully engage in complex tasks with multiple steps involving the recall and application of knowledge stored in memory. This could involve solving a multi-step word problem. When solving a word problem, the child is able understand what information is needed to solve the word problem and how to solve the problem (Diamond, 2013; Garon et al., 2008; Obradovic et al., 2012).

Working memory entails the ability to remember and manipulate information regardless of distractions. During the early childhood years, children hold more items in memory, as well as modifying and adjusting this knowledge as needed. More specifically, working memory enables a child to sequence events, follow instructions, think mathematically, reason, and make plans and decisions. Inhibitory control and attention influences a child's working memory (Diamond, 2013). An example of how the working memory influences the child is when a group of children

Table 1. Three Components of Executive Functions

Component	Description
Inhibitory Control	Thinking before you act or speak; resisting temptations
Working Memory	More than memory; recall and application
Cognitive Flexibility	Figuring out a way to move past a roadblock; being able to problem solve Adjusting thinking to new situations and being able to switching between tasks

Table 2. Benefits of Executive Function Skills

Area	Benefits
Mental Health	Increases attention span, focus, and task completion Decreases addictions, symptoms of depression and OCD tendencies
Physical Health Quality of Life	Decreases obesity/overeating, substance abuse, and chance of being a victim of abuse Increases motivation to eat healthy and exercise
School Readiness	Better predictor of school readiness than IQ or foundational reading and math skills
Educational Success	Increases math and reading competence throughout the school years
Career Success	Increases chances for finding and keeping a job, as well as productivity and career advancement
Harmony in relationships	Easy to get along with others; dependable; supportive;
Citizenship and safety	Decreases social problems including crime, violence, and rule/law breaking

Source: Diamond, 2013

are listening to a read-aloud. The teacher stops and asks the group of children a question about the story. Some children are moving around on the carpet and one or two are talking. But, most children raise their hand to respond. A child with strong working memory skills will be able to think about the question and respond appropriately regardless of distractions or having to wait to be called on. Working memory is exhibited when a child is called on then states, "Oh, I forgot" (Mahy, Moses, & Kliegel, 2014).

Cognitive flexibility is the ability to comprehend a different opinion or perspective. It also involves being able to think of alternate solutions to a problem and think outside of the box. Cognitive flexibility emerges during the later early childhood years and builds on working memory and inhibitory control (Diamond, 2013: Garon et al., 2008). A child is painting a picture of his house. The child goes to the shelf to get more green paint, so he can paint the leaves of the tree. He tries to squeeze some out onto his palate but realizes the bottle is empty. After staring back at his picture for a minute, he goes back to the shelf and gets orange and yellow paint. He begins painting orange and yellow leaves on the tree. His teacher approaches and asked, "Oh Levi, I thought you said you wanted a tree in your picture with green leaves." Levi replies, "No green paint, so I am painting them like fall leaves." This is an example of cognitive flexibility. A non-example of cognitive flexibility would transpire if Levi realized that the green paint bottle was empty, got frustrated, crumpled up his paper and threw it on the floor.

Children do not acquire executive functions innately. Instead, executive functions emerge through experiences that support growth in inhibitory control, working memory, and cognitive flexibility (Wiebe et al., 2012). Many factors hinder a child's development of executive functions such as low socioeconomic status, mental and health illnesses and deficits including lack of sleep, loneliness, and lack of exercise. For the adults in children's lives, it is imperative to understand the benefits of executive functions in a child's resilience and success navigating through life experiences for optimal outcomes. More important is the knowledge that a child's development of executive functions can be hindered or enhanced throughout the early childhood years (Diamond, 2013). Supporting children's development of executive functions should be a focus for the parents, caregivers, and teachers of children in the early childhood years.

Strategies to Support Development of Executive Functions that Foster Resiliency

Executive functions can increase through learning experiences that include teacher instruction and modeling, followed by opportunities for guided and independent practice (Diamond, 2013). Contextual influences that enhance executive functions and build resiliency are secure attachments, positive guidance, autonomy, school and family support system, creativity, physical exercise, mindfulness, and emotional understanding. Additionally, visual aids, private speech, dramatic play, advanced planning and goal setting benefit children's development of executive functions (Obrodavic et al, 2012). Adults can model executive

functions through self-talk and parallel talk and also through visual schedules, cues, and reminders. Teachers can guide children's cognitive flexibility skills through visual schedules, visual and verbal cues and reminders, routines, and efficient transitions, in addition to providing children with specific feedback and avoiding abstract rules (Garon et al., 2008). Table 3 lists strategies to support executive functions:

Concluding Thoughts: A Success Story for Suzanne

Suzanne was a student in a first grade classroom embarking on a collaboration between her teacher and a researcher. The researcher had reached out to Mrs. Keldonfield about participating in her study exploring the influence of a classroom pet on supporting development of executive functions. Mrs. Keldonfield instantly recognized the possible benefits for her group of first graders. She reflected on the challenges she faced in her classroom and made connections to the components of executive functions. The teacher wasn't focusing on the situation with Suzanne. She recently met with Suzanne's mom, a diagnostician, the behavior specialist, and the principal to make a plan to support Suzanne's behaviors in the classroom. As the research study progressed, instant improvements in the social and academic success of the students emerged. These improvements included: productive group tasks, strong social interactions among peers, adaptability to changes, and an overall decrease in behavior challenges such as adaptability to change and regulation of behaviors and emotions. Activities intentionally implemented to support executive functions included:

- Games like Simon Says, Red Light, Green Light, "I'm going on a Picnic," memory/matching games.
- A long term project in which students engaged in an inquiry process to create dioramas for a guinea pig.
  - ° Including a planning stage and continual reflection on what worked and what didn't work, as well as problem-solving to overcome road blocks.
- Visual cues to scaffold behaviors like how to focus.
  - ° Which would transform from more concrete to abstract like using an actual flashlight to signify who or what is the focus to using the phrase, "flashlight focus on…" as a reminder.
- Collaborative group work
  - ° With intentional instruction of strategies on functional and dysfunctional group dynamics, roles for each group member to take on, and how to plan and execute a group task.
- Setting goals and monitoring through journaling.
- Organizing a chart with class jobs to support responsibility and teamwork.

Before the intervention, Suzanne often instigated conflict in the classroom. These instances faded as the intervention progressed and Suzanne's executive functions skills developed and supported her resilience. Previously Suzanne would often get very upset and angry, because she wanted to do another person's job. Now she began looking at the class job chart and seeing when she would be able to do that job instead of jumping in to do a

Table 3. Strategies to Support Executive Functions

Age Span	Overview	Specific Strategies
6 to 18 months	Infants develop foundational executive functions through interactions with supportive, responsive adults. The infant's interests guide which activities and the length of engagement in activities which encourage infant's focus and attention, working memory, and basic self-control skills.	• Lap games that are predictable and involve repetition like Pat-a-Cake. • Hiding games like hiding a toy under a cloth, hide-and–seek with the adult verbally communicating while looking • Imitation games in which the infant watches the adult's actions, remember, wait, then recall and imitate ranging from simple gestures to organizing toys into patterns. • Finger plays with songs or chants like Eensy Weensy Spider. • Conversations around things or objects that have captured the infant's attention like naming things to having back and forth exchanges about the objects.
18-36 months	Language influences development in executive functions as children are more cognizant of their thoughts and actions, begin planning, and can understand more complex rules.	• Physical challenges that require toddlers to focus and attention on a goal, control impulses, and problem-solve when a first attempt fails and can include sports equipment like a ball, imitation games like Follow the Leader, inhibition games like freeze dance, songs with choreographed movements, and chants with hand gestures. • Engagement in conversations and storytelling about shared events and feelings. • Matching/sorting games and puzzles requiring children to remember rules and follow the rules. • Imaginary play with plots like cooking in the dramatic play area.
3 to 5 years old	Children are learning rules and structure with guidance from adults and transitioning to not needing guidance from adults to follow rules and structure.	• Imaginary play mimicking events from their own lives using provided props or props they made. Imaginary play transitions from solitary play to parallel play to cooperative play with assigned roles and complex ideas. • Storytelling in groups with complex and organized plots told orally or acted out. • Movement challenges such as an obstacle course or yoga poses, dancing by mimicking the rhythm of songs singing songs that repeat with additions to each repetition, song games like Ring Around the Rosy. • Complex sorting and matching games, puzzles, and activities like cooking that require following instructions.
5 to 7 years old	Children engage in more challenging games with multiple rules that are not too difficult. Adults initially provide guidance with new games and then step back as children play independently but still providing support for conflict resolution.	• Card games like Go Fish and Concentration which require children to remember and track cards. • Board games that children to remember rules, make plans, adapt strategies like Sorry or Battleship. • Physical activities and games that require focus, decisions, switching actions, and quick responses like Red Light, Green Light, Four Square, Simon Says. • Movement and song games where participants have to remember model's actions, singing in rounds like Row, Row, Row Your Boat, and complex clapping rhythms like Miss Mary Mack. • Games that require logic and reasoning such as puzzles, brain teasers, Mastermind, Guess My Rule, and I Spy.

Source: Center on the Developing Child at Harvard University (2014)

peer's job for them. If she noticed it would not be her turn for a few weeks, she would ask her peer if she could help them with the job instead of just taking over. At first other children would say "no", more than likely because her lack of inhibitory control would lead to more than just helping. Eventually Suzanne began to not only receive a "yes" from her peers, but also was sometimes asked by a classmate to help if the child knew it was one of Suzanne's favorite jobs.

Becoming more resilient

The teacher began to hear Suzanne doing "think-alouds" as she talked herself into choosing the appropriate behaviors. For example, she wanted to engage in the storytelling table but it was already at the limit of participants. She said to herself, "I am just going to see if I can get some things from the table and take to my desk." Suzanne asked the teacher if this plan was alright.

After the teacher said yes, Suzanne approached the storytelling table, communicated what she was doing to her peers, and re-trieved her needed materials. Suzanne still had moments of little inhibitory control. However, with guidance from the teacher and her new toolbox of executive functions, Suzanne would regain control of her behaviors and emotions. This was a far cry from the reactive responses she resorted to before the intervention, like throwing items in the cozy area across the room, screaming at the teacher, or hitting her peers. The strategies implemented by the teacher helped Suzanne build the coping skills necessary to support her resilience.

Nicole Pearce, PhD is an assistant professor at Texas A & M in Commerce, TX. She teaches early childhood and reading courses in the Curriculum & Instruction department. Ad-ditionally, Nicole teaches and supervises students during their pre-clinical and clinical teaching semesters.

Jill M. Davis, PhD is an associate professor in the Depart-ment of Curriculum and Instruction at the University of Central Oklahoma. She works with students majoring in Early Childhood and Elementary Education. Her research focuses on advocacy, teacher education, early childhood mathematics, and diversity in children's literature.

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Apoyando la Resiliencia a través de las Funciones Ejecutivas

Nicole Pearce y Jill Davis

situaciones difíciles y cuando expuestos a ambientes tóxicos o adversos. Hay factores de riesgo que pueden impedir la resiliencia en los pequeños que incluyen predisposiciones internas (temperamento) y las experiencias externas como las siguientes:

- Falta de relaciones y un ambiente que apoye el desarrollo de la capacidad de resiliencia.
- Separación y divorcio de los padres
- Perdida de un familiar especialmente uno de los padres.
- Exposición a la violencia
- Situaciones de conflicto, abuso, negligencia y maltrato

Suzanne estaba en la biblioteca sentada en la alfombra junto a dos compañeros leyendo un libro. "Es mi turno," dijo Suzanne mientras trataba de alcanzar el libro. Colocando el libro detrás de su espalda, Caty dijo, "Aún no termino de leer esta página." Suzanne enrojeció y su cuerpo se contrajo mientras hacía un puño con sus manos y empujando a Caty comenzó una disputa. Caty comenzó a llorar. Cuando la maestra se acercó, le pidió a Suzanne que fuera al área tranquila para que se calmara junto al cartel con estrategias para ayudarla a regular sus emociones y donde también había una cesta con objetos para manejar el estrés como pelotas de goma para presionar, cubos Rubik ©, muñecos de peluche y juegos dactilares. Suzanne fue al área de serenidad y colocando la cesta en su falda, comenzó a lanzar los objetos por todo el salón.

El conflicto en el área de la biblioteca pudo resolverse con ayuda de la maestra guiando a los niños a través del proceso de resolución de conflictos y de solución de problemas. Suzanne carece de resiliencia o de las destrezas de adaptación necesarias para resolver situaciones de forma positiva como las del escenario que leímos al comenzar. Cuando esta capacidad falta, ocurren resultados negativos como el no poder regular sus emociones y conducta. Afortunadamente, Suzanne tiene el potencial para desarrollar su resiliencia con las debidas estrategias.

Resiliencia

La resiliencia es un factor clave en el buen desarrollo del niño, la cual permite que el niño posea respuestas de adaptación ante

Aun cuando enfrenten múltiples factores de riesgo, los niños con una sólida capacidad de resiliencia podrán superar las experiencias negativas con respuestas que le permiten manejar la situación. Es importante mencionar que algunos estresores no son tóxicos y que pueden ser manejados por los niños, que con el apoyo de los adultos se convierten en momentos de aprendizaje logrando así aumentar la capacidad de estos para enfrentar obstáculos y dificultades en la vida.

Resumiendo lo que sabemos sobre la resiliencia, el Centro para el Desarrollo del Niño de la Universidad de Harvard (2018), comparó la resiliencia con un balancín, con experiencias negativas en un extremo y resultados positivos en el otro. Esta analogía muestra que la resiliencia es solo tangible cuando los resultados positivos sobrepasan los negativos dado el considerable número de factores de riesgo y de estresores que puedan existir. Aunque los factores de riesgo impidan la capacidad de resiliencia, el uso de estrategias ayuda a promover un desarrollo saludable aun cuando existan situaciones adversas. La resiliencia necesita de al menos una relación de apoyo, confiable y estimuladora con un adulto. Esta relación rompe la trayectoria de desarrollo negativo transformándola en una de desarrollo positivo a través de experiencias que contribuyen a superar las dificultades. El apoyo y respuesta que se ofrece en el ambiente del aula no es suficiente para estimular la resiliencia. Es necesario que los adultos proporcionen sostén por medio de estrategias concretas que ayuden al niño a demostrar su resiliencia como la planificación, autorregulación, y adaptabilidad al cambio. Estas destrezas cor-

Tabla 1. Tres Componentes de las Funciones Ejecutivas

Control inhibitorio	Pensar antes de actuar o hablar; resistir las tentaciones.
Memoria de trabajo	Mucho más que la memoria; Recordar y aplicar.
Flexibilidad Cognitiva	Buscar maneras de superar obstáculos; tener la capacidad de resolver problemas. Adaptar la manera de pensar en nuevas situaciones y poder hacer cambios entre actividades.

Tabla 2. Beneficios de las Funciones Ejecutivas en el Desarrollo Individual

Salud Mental	Aumenta la capacidad de atención, concentración y completar tareas. Reduce adicciones, síntomas de depresión y tendencias obsesivas.
Salud Mental Calidad de vida	Reduce la obesidad/ sobrealimentación, abuso de substancias y riesgo de ser víctima de abuso. Aumento de motivación para buena nutrición y ejercicio.
Apresto escolar	Mejor factor para predecir el apresto escolar que el cociente intelectual o las destrezas de lectura y matemáticas.
Éxito educativo	Aumento de competencia en matemáticas y lectura a través de los años escolares.
Éxito profesional	Aumenta las oportunidades para encontrar y mantener empleo, así como para la productividad y mejoramiento.
Relaciones armoniosas	Facilita las relaciones con otros; es confiable y ofrece apoyo.
Civismo y seguridad	Reduce problemas sociales incluyendo actos de violencia y de transgresiones a las leyes.

Fuente: Diamond (2013)

cognitivas, socioemocionales, el lenguaje, prelectura y matemáticas (Liew, 2012; Shaul & Schwartz, 2014). En general, estas empoderan a los niños a actuar con propósito al evitar distracciones y controlando las conductas impulsivas o inapropiadas (Diamond, 2013; Garon, Bryson, & Smith, 2008). Durante la edad temprana, la atención aumenta capacitando a los niños a centrar su atención por periodos más largos tanto en el juego espontáneo como en las tareas estructuradas (Garon et al., 2008). La atención sirve de infraestructura para las funciones ejecutivas y está relacionada con los tres componentes de estas: control inhibitorio, memoria de trabajo y flexibilidad cognitiva. Aunque cada componente implica una definición conceptual diferente, el desarrollo o carencia de uno de estos impacta en el funcionamiento de los otros dos (Diamond, 2013).

responden con las funciones ejecutivas del cerebro las cuales incluyen el control inhibitorio, la memoria de trabajo y la flexibilidad cognitiva. A continuación, las tablas que siguen definen los componentes de las funciones ejecutivas (Tabla 1) y explican sus beneficios (Tabla 2).

Funciones Ejecutivas

Las funciones ejecutivas fortalecen la capacidad de resiliencia en los niños creando una armadura o capa de protección que les permite enfrentar con triunfo los retos cotidianos. No se nace con las funciones ejecutivas. El potencial para desarrollarlas y promover resiliencia está presente desde la infancia. Sin embargo, muchos niños carecen durante la edad temprana del ambiente y de las experiencias que apoyan el desarrollo de las funciones ejecutivas lo cual resulta en una muy débil capa de protección. Entonces, ¿cómo pueden los adultos apoyar a estos niños para que desarrollen las funciones ejecutivas que propician la resiliencia?

La edad temprana, el momento ideal

La edad temprana es el momento esencial para el desarrollo de las funciones ejecutivas que aseguran la resiliencia y apoyan el apresto escolar. Las funciones ejecutivas aumentan las destrezas

El componente de *control inhibitorio* capacita a los niños a manejar sus propias conductas, pensamientos o emociones. Como resultado, los niños pueden controlar las respuestas inapropiadas y sustituirlas por aquellas que son aceptables. Un niño está jugando en la computadora y su maestra anuncia que es momento de terminar y pasar a otra actividad. Al niño le es posible dejar de jugar a pesar de estar justo a mitad de un juego que le gusta. Este escenario es un ejemplo de la capacidad que ofrece el control inhibitorio. Un ejemplo de cuando esta capacidad falta es que el niño continuaría jugando sin detenerse. El control inhibitorio propicia un mejor aprovechamiento académico. El éxito es el resultado de la habilidad que tienen los niños para realizar tareas complejas con múltiples pasos donde se utiliza el recordar y aplicación del conocimiento que se tiene en la memoria. Esto podría incluir tareas como la resolución de problemas verbales con múltiples pasos. Al resolver problemas verbales, el niño sabe cuál es la información que se necesita y cómo resolver el problema (Diamond, 2013; Garon et al., 2008; Obradovic et al., 2012).

La *memoria de trabajo* describe la habilidad para recordar y manipular la información a pesar de cualquier distracción, un factor clave en la conducta resiliente. Durante la edad temprana, los niños guardan muchos más datos en su memoria, así como ajustan y modifican los mismos según es necesario. Específica-

así como la falta de sueño, soledad y de ejercicio. Es vital que los adultos en las vidas de los niños comprendan los beneficios de las funciones ejecutivas en la capacidad de resiliencia de los pequeños y que les permite enfrentar con éxito las diferentes experiencias y así alcanzar resultados óptimos. Aún más importante es que los adultos sepan que el desarrollo de las funciones ejecutivas puede afectarse negativamente o propiciarse a través de la edad temprana (Diamond, 2013). Apoyar el desarrollo de dichas funciones debe ser un área de primordial atención para los padres, familias, y maestros de los niños durante toda la infancia.

mente, la memoria de trabajo capacita al niño a establecer la secuencia de eventos, seguir instrucciones, pensar matemáticamente, razonar y planificar y tomar decisiones. El control inhibitorio y atención influyen en la memoria de trabajo de los niños (Diamond, 2013). Esto lo vemos en un grupo de niños que escuchan la lectura de un cuento. La maestra se detiene y hace una pregunta al grupo sobre el cuento. Algunos niños seguirán moviéndose en la alfombra y tal vez uno o dos estarán hablando. Sin embargo, la mayoría de los niños alzarán la mano para contestar. La memoria de trabajo se demuestra cuando al llamar a un niño para que conteste, este exclama "Oh, se me olvidó" (Mahy, Moses, & Kliegel, 2014).

La *flexibilidad cognitiva* es la habilidad para comprender una opinión o perspectiva que es diferente. También incluye el pensar soluciones alternas para un problema o fuera de lo convencional. Esta habilidad surge durante los últimos años de la edad temprana y es apoyada por la memoria de trabajo y control inhibitorio (Diamond, 2013: Garon et al., 2008). Pensemos que vemos a un niño coloreando un dibujo de su casa. El niño va al anaquel a buscar más pintura verde para pintar las hojas del árbol. El trata de sacar la pintura del frasco, pero se da cuenta de que el mismo está vacío. Luego de mirar su dibujo, regresa al anaquel y toma la pintura anaranjada y amarilla. Comienza entonces a pintar las hojas del árbol de color amarillo y anaranjado. Su maestra se acerca diciéndole, "Oh, Levi, pensé que ibas a pintar el árbol con las hojas verdes". Levi le contesta, "No hay pintura verde así que estoy pintando las hojas como las del otoño." Este ejemplo describe la flexibilidad cognitiva. La falta de esta se advertiría si, al Levi ver que el frasco de pintura estaba vacío, se hubiera frustrado, arrugando y tirando el papel al piso.

Las funciones ejecutivas no son innatas en los niños. En su lugar, estas emergen a través de experiencias que apoyen el crecimiento del control inhibitorio, memoria de trabajo y flexibilidad cognitiva (Wiebe et al., 2012). Existen muchos factores que afectan el desarrollo de las funciones ejecutivas como lo son el bajo nivel socioeconómico, enfermedades físicas y mentales, milias, y maestros de los niños durante toda la infancia.

Estrategias que Apoyan el Desarrollo de las Funciones Ejecutivas y Propician la Resiliencia

Las funciones ejecutivas pueden aumentar a través de las experiencias de aprendizaje con los maestros, así como con el modelaje seguido por oportunidades de práctica guiadas o independientes (Diamond, 2013). Existen factores contextuales que influyen en el desarrollo de las funciones ejecutivas y que contribuyen a la resiliencia como los son: el apego seguro, guía positiva, sentido de autonomía, un sistema de apoyo de la familia y escuela, la creatividad, el ejercicio físico, la toma de conciencia y capacidad del niño. Otros factores que contribuyen a su desarrollo son el uso de las ayudas visuales, el juego dramático, y la planificación de metas (Obrodavic et al, 2012). Los adultos pueden modelar las funciones ejecutivas por medio del uso de la conversación paralela, uso de visuales como el calendario de actividades y recordatorios. Los maestros pueden guiar el desarrollo de la flexibilidad cognitiva de los niños a través de las rutinas y transiciones efectivas, además de apoyarlo con sus comentarios y evitando las reglas abstractas (Garon et al., 2008). La tabla que aparece a continuación incluye una serie de estrategias que apoyan el desarrollo de las funciones ejecutivas.

Conclusiones: Una historia con éxito para Suzanne

Suzanne, a quien conocimos en el escenario al comienzo de este artículo, era una estudiante en un salón de primer grado donde la maestra colaboraba con un investigador. El investigador había invitado a la maestra, la señora Keldonfield , a participar en un estudio sobre la influencia del aula en el desarrollo de las funciones ejecutivas. La señora Keldonfield reconoció los posibles beneficios para su grupo de primer grado. Ella reflexionó sobre los retos en su salón conectando los mismos con la resiliencia y los componentes de las funciones ejecutivas. La maestra no centraba entonces su atención en la situación de Suzanne. Re-

Tabla 3. Estrategias que apoyan el desarrollo de las funciones ejecutivas

Edad	Descripción	Estrategias Especificas
6 - 18 meses	Los infantes desarrollan los fundamentos para las funciones ejecutivas a través de interacciones con adultos que les apoyan y responden. Los intereses del niño guían las actividades y el tiempo de interés lo cual estimula la atención del infante, memoria de trabajo y destrezas básicas de autocontrol.	• Juegos de falda que son predecibles y repetitivos como tortillitas. • Juegos de esconder como esconder un objeto debajo de un paño, esconder y buscar con el adulto comunicando verbalmente dónde buscar. • Juegos para imitar donde el infante observa las acciones del adulto, las recuerda, espera, recuerda e imita que van desde gestos simples hasta organizar los juguetes en patrones. • Juegos dactilares con canciones como La arañita (*Eensy Weensy Spider*). • Conversaciones sobre objetos que llamen la atención del infante como nombrar cosas para tener juegos de intercambio.
18-36 meses	El lenguaje influye en el desarrollo de las destrezas ejecutivas al estas el niño más consciente de sus pensamientos y acciones, comenzando a planificar y a entender reglas más complejas.	• Retos físicos que requieren de los niños situar su atención en una meta, controlando los impulsos y que llevan a la solución de problemas cuando se falla al primer intento como juegos con pelotas, juegos de imitación como Sigue el líder, juegos de inhibición como baila y congélate (*Freeze dance*), canciones con movimiento corporal y cantos con gestos. • Participación en conversaciones y narración de cuentos sobre eventos en común y sentimientos. • Juegos para clasificar y que llevan al niño a recordar y seguir reglas; juegos imaginativos como cocinar en el área de juego dramático.
3 a 5 años	Los niños están aprendiendo reglas y con la ayuda de los adultos y aprendiendo a hacer transiciones sin la ayuda de los adultos.	• Juego imaginario imitando sucesos de sus vidas con el uso de manipulativos u objetos que ellos han hecho. Su juego imaginario transiciona del juego solitario al paralelo y al cooperativo con roles asignados e ideas más complejas. • Narración de cuentos en grupo con tramas complejas de forma oral o representadas. • Actividades de movimiento como obstáculos, posiciones de yoga, baile con mímicas siguiendo el ritmo de la música, cantando canciones con repeticiones, juegos musicales como *Ring Around the Rosy*. • Juegos de clasificación y sorteo, rompecabezas y actividades como cocinar que donde se siguen instrucciones.
5 a 7 años	Los niños participan en actividades más retadoras y juegos con múltiples reglas. los adultos les guían al comienzo y luego les dejan jugar de forma independiente mientras le apoyan en la resolución de conflictos.	• Juegos de cartas como *Go Fish* y *Concentration* que requieren que el niño recuerde y busque las cartas. • Juegos de mesa donde se siguen reglas, se planifica, adaptan estrategias como *Sorry y Battleship*. • Actividades físicas y juegos que requieren atención, toma de decisiones, cambio de acciones y respuestas rápidas como *Red Light, Green Light, Four Square, Simón dice*. • Actividades de movimiento corporal y con canciones donde hay que recordar acciones, canto en rondas como *Row, Row, Row Your Boat* y dar palmas para seguir el ritmo de canciones como *Miss Mary Mack*. • Juegos que requieren de la lógica y razonamiento como los rompecabezas.

Fuente: Center for the Developing Child at Harvad University (2014)

cientemente, ella se había reunido con la madre de Suzanne, un evaluador, el especialista de conducta y el director del plantel para crear un plan de apoyo para la niña.

Según avanzaba la investigación, la maestra observaba mejoramiento social y académico en los niños. Se observo mejoramiento en: actividades de grupo, mejor interacción social entre pares, mejor adaptabilidad a los cambios y una reducción en general de conductas retadoras tales como ajuste al cambio y regulación de conductas y emociones. Las actividades intencionalmente

implementadas para apoyar las funciones ejecutivas incluían las siguientes:

- Juegos como Simón dice, Red Light, Green Light, Vamos de Picnic, juegos de memoria y aparejar.
- Un proyecto donde los estudiantes participaban en un proceso de investigación para crear dioramas sobre un conejillo. Incluía una etapa de planificación y reflexión continua sobre que funcionaba así como la resolución de problemas para vencer obstáculos.
- Uso de claves visuales para apoyar conductas como la de centrar la atención. Esto iba desde algo más concreto a lo abstracto como el usar frases para significar quién o qué era el punto focal como "Punto de luz sobre …" como manera de recordatorio.
- Trabajo colaborativo en grupo para intencionalmente enseñar estrategias sobre dinámica de grupo con roles para cada miembro del grupo, como hacer planes y llevar a cabo una tarea grupalmente.
- Establecer de metas y monitoreo de las mismas por medio de un diario.
- Uso de un cartel organizativo con las tareas para afirmar el sentido de responsabilidad y de trabajo en equipo.

Antes de la intervención, con frecuencia Suzanne instigaba conflictos en el aula. Estos comenzaron a desaparecer según la intervención progresaba y Suzanne desarrollaba sus funciones ejecutivas y aumentaba su capacidad de resiliencia. Antes de la intervención, solía estar muy molesta y enojada porque quería hacer lo que otro hacía. En cambio, ella comenzó a revisar el cartel de tareas de la clase y a identificar lo que podía hacer en lugar de tomar la tarea que otro realizaba. Si no era su turno para hacer algo que gustaba, le preguntaba al compañero si podía ayudar en lugar de tomar control. Al principio, algunos niños se negaban porque, al ella carecer de buen control inhibitorio, en lugar de ayudar, tomaba control de la actividad. Eventualmente, Suzanne comenzó a no que sólo sus compañeros dijeran que "si" sino que en ocasiones alguno pedía que ayudara cuando sabían era alguna de sus actividades favoritas.

Progresando en su capacidad de resiliencia

En poco tiempo, la maestra comenzó a escuchar como Suzanne pensaba en voz alta mientras hablaba con si misma sobre por qué actuar con conductas apropiadas. Un ejemplo fue cuando ella quiso participar en la mesa de narración de cuentos que ya había llegado a su cupo de participantes. Fue entonces cuando se dijo a sí misma, "Solo voy a ver si puedo buscar algunas cosas de la mesa y me iré a mi lugar." Suzanne le preguntó a la maestra si su plan era lo correcto. Luego de que su maestra dijera que lo era, Suzanne se acercó a la mesa y dejando saber a sus compañeros lo que quería hacer, tomo los materiales y se fue a su lugar. Aunque aún tenía momentos de poco control inhibitorio, con el apoyo de su maestra, Suzanne sabía como retomar control de sus acciones. Poco a poco comenzó a ser más resiliente. Esto era algo muy distinto a sus respuestas y reacciones antes de la intervención cuando lanzaba objetos, gritaba a la maestra o agredía a sus compañeros. Las estrategias que implementó la maestra ayudaron a Suzanne a desarrollar sus destrezas para enfrentar retos y a apoyar su progresiva capacidad de resiliencia.

Nicole Pearce, PhD is an assistant professor at Texas A & M in Commerce, TX. She teaches early childhood and reading courses in the Curriculum & Instruction department. Additionally, Nicole teaches and supervises students during their pre-clinical and clinical teaching semesters.

Jill M. Davis, PhD is an associate professor in the Department of Curriculum and Instruction at the University of Central Oklahoma. She works with students majoring in Early Childhood and Elementary Education. Her research focuses on advocacy, teacher education, early childhood mathematics, and diversity in children's literature.

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Play and Trauma in Young Children During a Pandemic

Ruth V. Guirguis and Jennifer M. Longley

what happens to play and processes/skills it supports, when schools are closed and social settings are not an option? What happens to scaffolding play when teachers are behind a computer, and parents become stay-at-home educators? Moreover, what happens to play and to children when we are isolated? What does play look like during a pandemic? Looking at the type of play and how to support play to avoid further trauma from isolation is a time-sensitive topic. Sutton-Smith (2016) states that play is a representation of human challenges and the behaviors needed for survival. Furthermore, play is not just a mechanism for supporting academic achievement in young children, but also a form of supporting emotional survival during a crisis (Sutton-Smith, 2016).

Children learn through play and it is because of this optimal relationship that exists between the two that has categorized play and development as a complex phenomenon. Johnson, Christie and Wardle (2005) write that "play provides vital functions, such as general and skill learning strategies, as well as creative thinking, positive self-esteem and divergent thinking" (p. 199). The term play is hard to define and articulate because play is abstract and has multiple meanings for different groups and individuals. According to Vygotsky (1978), play was a vehicle for the child to behave beyond their chronological age. Vygotsky (1978) describes play as having three main components, one being the ability for a child to create an imaginary situation, the second taking on and acting out roles, and the third, following a set of rules that were determined by the roles children took on during play during social or group settings. Hence, supporting much needed social skills and processes that foster a positive social development. The ambiguities of play, specifically the intricate functions between what play entails and the aligned developmental outcomes of play, makes defining play challenging. Sutton-Smith (1997) defines the ambiguities of play as a progressional function through seven rhetorics: developmental play, risky play, sports play, cultural play, imaginary play, solitary play, and frivolous play. Moreover, play is existential, simple, complex, and "characterized by dualities that are genetic, affective, performative, experiential, and culturally relative" (Sutton-Smith, 2008, p.118).

Play in the lives of children is a form in which children learn to interact with one another in ways that are acceptable in social contexts established by society and history. It is the extent of the social competence that a preschool child holds that is used as an indicator for school readiness (Mathieson & Banerjee, 2010). But,

Play and Resilience

Imperative to the interrelation between play and psychological underpinning, is the development of resilience. Resilience is better defined as overcoming challenges and one's adaptability to adversity that lead to positive developmental outcomes. Play allows children to reduce many of the stresses that they face while learning new skills. Specifically, play allows children to problem solve manage strong feelings, express thoughts, and feelings both verbally and non-verbally, and develop confidence in their abilities (UNESCO, 2019).

Hence, building a playful pathway towards resilience in children requires active engagement and scaffolding from educators and primary caregivers. More importantly, this playful pathway will allow young children to develop a sense of efficacy and control over their immediate environment. Building resiliency in children is a form of a "mediating process, that address a functional domain in a child's development and enhances it. A pathway to resilience can be described as a process that is supportive of a child's healthy holistic development" (UNESCO, 2019, p. 15).

Play as a pathway to resilience provides young children with active play participation from adults, adult modeling of positive social behaviors, a sense of autonomy, independence, and the ability to regulate their stress, and reduce toxic stress enabling

the ability for children to regulate their stress (UNESCO, 2019). Moreover, play as a pathway to building resilience will restore self-empowerment in children by giving them the opportunity to develop life skills they need to thrive as adults.

Play and Trauma During Isolation

Research has revealed that children who are in isolated environments, with reduced physical contact among peers of their own age, tend to have lower levels of academic achievements, and are more susceptible to long term psychological stress as they get older (Ammermueller, 2012; Lacey, Kumari & Bartley, 2014). Specifically, the trauma of isolation affects both the social and cognitive domains of development among preschoolers. Isolation, also takes a toll on the type of play children can engage in. The lack of play during a pandemic prevents children from feeling a sense of joy and familiarity. Creating a greater risk of trauma in young children. During play, children let out many feelings related to current anxieties over change they do not understand and emotions of sadness that they can best express through play scenarios. Much of a child's creativity takes place during play time which offers children a sense of being connected to others through the inclusive aspect of play.

Play's therapeutic role
Play is therapeutic as it allows children to mimic and engage in shared experiences. When young children are not able to play, their behaviors and emotions change. Often, aggressive behavior and/or lack of impulse control is observable in preschool children. The role that trauma, in conjunction with the lack of opportunity to play, influences the severity of the experience children go through (Weissbecker et al., 2008). Commonalities in symptoms of traumatized children range from repetitive behavior, fears, and negative attitudes about their environments (De Bellis & Van Dillen 2005). This leads young children to be anxious in new situations, have more challenges during unplanned times or transitions, and leads them to sense a lack of stability. While these effects can be the result of trauma in isolation, play can support young children's level of resilience. Play takes on a mediating role between adversity and resilience. Through different play forms, children process and understand their environmental adversities and develop resilience to function through a crisis. It is this concept of play and more accurately the type of play during a pandemic that is of key importance to building resilience and grit.

Play Behaviors During a Crisis

While young children engage in both structured and unstructured play in school settings, during unstable times, and when required to be at home while social distancing, the type of play children carry out serves as a vehicle children use to navigate their thoughts, fears, and to work through each feeling. Consequently, the focus of play as a means of expressing and coping during a crisis should be a continuum effort between the school and home setting. Adjusting when, how, and who can scaffold children's play during challenging times is imperative to create and develop a safe space for play, along with the processes and skills it supports. Preschool children who participate in associative and cooperative play will divert back to a form of independent play.

Accordingly, it is important that during independent play aspects of both dramatic and pretend play are embedded and emphasized in order for young children to learn to process through some of the emotions. Dramatic and pretend play can support key emotional processes children need to manage within a different environment and when faced by anxieties and fears.

Play serves as a mechanism for survival during times of crisis (Sutton-Smith, 2016). Specifically, play and the six distinct play forms proposed by Sutton-Smith (2016) allow for children to convey emotions. This allows children to modify their emotional state to meet the demands set by the current environment. Sutton-Smith (2016) framework suggests that shock, fear, loneliness, happiness, anger, and disgust align with six main play forms. Those play forms respectively being the following: teasing and hazing, games of risk taking, festivals, peak experiences, contests, nonsense and profanity. These play formats create a platform for specific types of play behavior to be displayed by young children. The functions of these behaviors have positive and real world application to young children's current living environments. For example, Sutton-Smith (2016) suggests that behaviors such as teasing allow for the development of resilience, risk taking allows for a sense of courage to be developed, contests can lead to vigilance. These processes allow young children to adapt and thrive during isolation and unfamiliar circumstances. These key skills can be observed in dramatic and pretend play.

Dramatic play allows young children to express their thoughts in feelings in ways that they are able to do without having to rely on their expressive vocabulary to communicate their needs and concerns. Dramatic play during a crisis can foster young children to make sense of their current home situations by understanding what is happening. Children can create a narrative and engage in the cause and effects of being at home without the ability to see and play with classmates. As a result, it is important that this type of play is supported by engaging children through art, puppets, story time, and role playing. Younger children often find it easier to work with their anxieties and emotions symbolically as this is a form of communication that is familiar to them. According to Korat, et al. (2003) most researchers of children's pretend play have linked social competence, socially appropriate behaviors and mental processes through role play (Roskos & Christie, 2001; Tsao, 2008; Vygotsky 1978). Children imitate behaviors and feelings that they observe. This process of observation and imitation is a result of the child acquiring contextual meaning through play, which is then needed in the development of metacognition. Contextual meaning influences how the metacognitive skills, how children begin to think about their thinking, is therefore understood and interpreted during times of crisis by young children.

Barriers for Play During a Crisis

Understanding the function play has on alleviating levels of toxic stress is as important as understanding some of the barriers that prevent the creation of optimal play scenarios during isolation. Acknowledging the challenges and barriers during a crisis, can help families accommodate for appropriate places and spaces for play. Fostering dramatic and pretend play requires caregiv-

ers and families to provide an uninterrupted setting for various themes and props that support each theme (Pratt Prairie, 2013). Finding a space during a crisis to allow for uninterrupted play is not necessarily feasible. The themes and props may also not be something families have access to or familiarity with on how to set up thematic play spaces.

Taking time to plan for play is perhaps more important than the play itself. The process of play planning develops representational skills as well as cognitive control (Pratt Prairie, 2013). Cognitive controls allow children to follow and comply with rules, manage emotions and carry out problem solving tasks on their own (Bronson, 2000). These skills are of particular importance to young children entering formal schooling. Yet, planning may be a factor that is difficult for many families faced with many responsibilities. Planning, themes, and materials for play are just a few barriers that can challenge the notion of an optimal play scenario. There are external factors that present themselves during a crisis that families and caregivers need to address and optimal play situations are not always feasible. There are many social factors within families and communities that contribute to situations of play inequities among young children.

Space. Defining play areas when families are sheltering in place can be a struggle. Lack of space for children to move and explore can allow young children to disengage in creative play. Sharing common spaces with other parents, siblings, and/or extended family members during shelter in place rules, reduces the freedom of expression and active play which plays a role in impulse control/emotional regulation (Rimm-Kaufman & Wanless, 2012).

Time. Time for play and time to plan for play is also a barrier for pretend and imaginary play. Families, for example, need to focus on issues of safety, shelter, and food for families, as well as financial burdens. These factors limit the time that families can devote to young children's play needs. Therefore, constraining much needed time for co-planning for play and observing play in young children.

Culture. Cultural aspects can also reduce the amount and type of play young children choose to engage in. For example, there are families whose perspective of elicit and active play is messy and loud. When families are sharing spaces, and older members co-exist some play activities that are considered loud or disruptive are discouraged. Religious practices also play a role in the type of play that is encouraged. During times of religious practices, families may choose for the play to cease or take a more structured form of play. Families' perspective on "right" and "wrong" types of play, shape what and how children decide to engage in play and playful activities. Families may consider active play to be wrong when a child is indoors, hence limiting that time young children devote to active play.

Parental involvement. Finally, parental involvement is also based on families' practices and perspective of play. Some families may engage in play with young children, while others delegate the role of play to be carried out by other siblings. Both approaches can allow young children for adult-child interactions and peer-sibling interactions balancing the type of play plan-

ning, skills, and language used during play with different family members. However, it is critical to note the importance of adult interactions to observe and scaffold play.

Creating Optimal Opportunities for Play During a Crisis

The lack of play during isolation can have traumatic effects on young children (De Bellis & Van Dillen 2005). Play functions as a complex interdisciplinary model (Figure 1) with psychological underpinnings (Sutton-Smith, 2008).

Within the discipline of psychology, play, foremost serves a system of communication such that children can express their thoughts and feelings nonverbally. Hence, serving as an emotional outlet to reduce distress. Secondly, it serves as a system of cultural assimilation and understanding; young children can create play situations that resemble their current environments to create meaning and coping skills. Lastly, the dualities of play serve as a system of teaching young children emotional self-regulatory skills through a cause and effect relationships within the six aforementioned play forms (Sutton-Smith, 2008; 2016). Consequently, some environmental factors that can be manipulated to facilitate play constitute around the concepts of time, space, and type of play needed for survival.

- *Making space for play.* Having a physical space where young children can play in during periods of much instability creates a sense or routine and safety. Children identify designated places for play as their personal areas. Leading to a sense of control and freedom to express their feelings in their own spaces.
- *Making flexible times for play.* As families live and work in shared spaces with time schedules, having the flexible times for play rather than set schedules can help children engage in play. Child-initiated play allows children to direct their own learning and understanding through the dramatic, and pretend play.
  ° Play planning is an important factor when nurturing the type of play that is needed for children in crisis. Specifically, as planning the type of play scenario with a child can enhance imaginative play. Through dramatic, and pretend play children acquire coping skills through causational forms of play (Sutton-Smith, 2008)
- *Tools for children to use to stimulate pretend and dramatic play.* Materials and props for children to use during imaginative play can help children enhance their play. Simple props that are versatile can support creative play as it would allow for the materials to take on a multifunctional role. Props can support role play which allows children to build resilience and problem solving skills during critical times. Playing with siblings and/or any member of the family can incorporate some of the social components of socio-dramatic play.

Discussion

Play and the effects on academic achievement have been of recent focus in the field of early and elementary childhood. The present global pandemic and the infringements set on children's freedom to play will need to be observed to gain a greater understanding of the complexities of play and developmental do-

Figure 1: Play as a Complex Interdisciplinary Model
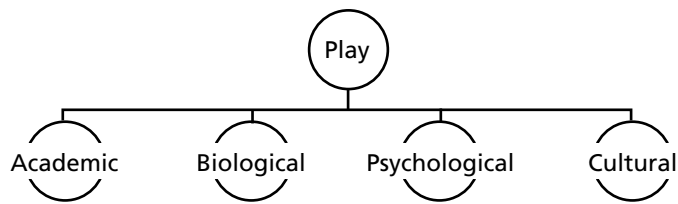
Source: Guirguis & Longley (2020)

mains. The long-term effects of isolation and the time children are in a state of perceived struggle, the greater impact it has on their social and emotional processes and skills.

It is critical that time for play is made so that children learn to acknowledge, identify, and cope with different feelings. This allows young children to problem solve through role play and can reduce the anxieties and toxic stress they face. Conceivably, the significance of play during a crisis, pandemic, or times of adversities is the therapeutic effects it bares on young learners developmental domains. Explicitly, contributing to strengthening a child's resilience through the type of play they engage in. Pretend and dramatic play that involves taking risks, problem solving, coping skills, embracing mistakes, emotional regulation, and developing a sense of self in young learners.

The challenges during a crisis to create play opportunities range from a family's view of play, sharing spaces with other families members, financial burdens, emotional and stress experienced, and death in families. Though these obstacles are just a few that can halt play and the functions that it has on young children, fostering the accessibility to play is the challenge that must be undertaken during a crisis for children's well-being. Time for play planning is essential for creating these play opportunities. As well as the physical space for children to feel free and secure to play in. Finally, having caregivers take some time to facilitate play without over scaffolding is important to gather what and how a child is feeling and/or thinking. While there are many factors that present a challenge for creating safe spaces for play, it is imperative that time is made for play to help children become self-aware and develop both mental adaptability and flexibility. Play during a crisis is a survival mechanism and in the long term, it serves as a support system for the development of resilience.

Ruth Andrade-Guirguis is an associate professor of Teacher Education at BMCC. She holds a Ed.D. In Interdisciplinary Educational Studies from the Long Island University. Her teaching background encompasses early and bilingual education. She has served as a play/curriculum consultant in early childhood. Her research is primarily focused on dual language learners, structure and unstructured Play.

Jennifer M. Longley is a teacher, researcher, and community activist based in Yonkers, NY. Longley worked with infants, toddlers, and families for more than 20 years before receiving her doctorate (2015). Since then, Longley has had the pleasure of teaching and learning from her students and colleagues as an Associate Professor of Early Childhood Education at the Borough of Manhattan Community College of the City University of New York. She has the privilege serving on and collaborating with the diverse members of the Yonkers Basics Advisory Board, Basics Learning Network, Yonkers Pride Foundation, and Yonkers Mayor Michael Spano's LGBTQ+ Advisory Board.

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Building Resilience: Reducing the Impact of Adverse Childhood Experiences

Martha Herndon and Cathy Waggoner

resilience. More than 25 years later, we are still interested in the answers to these questions. Additional research and new technologies have enhanced our understanding of brain development, the role of stress, and the characteristics of human interactions in relation to resilience.

Impact of Stress on Children's Development

The development of young children can be disrupted by repeated stress because stress triggers a response which changes the chemistry of their bodies (National Scientific Council on the Developing Child (NSCDC), 2014). Everyone is susceptible to stress. The body's response is essential to prepare for a fight or to run away (fight or flight response) by increasing the heart rate, blood pressure, and stress hormones. As teachers of young children, we can relate to this response. We face pressures each day and often struggle to maintain self-control in the face of disagreements among children, tense interactions with parents or other staff, and serious health threats. How often do we remember that young children encounter the same stressful situations, yet have fewer resources to manage them?

Shelter chronicles a frightening, stormy night for the animals in a forest (Claire & Leng, 2017). During the night, bears who are newcomers, ask for help and are turned away by the animal families who have hunkered down for the night, but little fox braves the storm to bring a lantern to the strangers. Later, when the fox den collapses, these bears share their shelter with the fox family. *Shelter* was featured by the Southern Early Childhood Association during 2019 and conveys the essence of actions which promote positive relationships. These are the same types of relationships which can promote resilience in early childhood.

Edith Grotberg (1995) reported results of an international resilience study across 14 countries with 589 children aged birth-11 years. Resilience was not a new subject then, she reported. Her definition of resilience was "a universal capacity which allows a person, group or community to prevent, minimize or overcome the damaging effects of adversity" (p 3). The study focused on what parents, caregivers, and children themselves do to promote

Stress can be positive, tolerable, or toxic (Child Welfare Information Gateway, 2015; NSCDC, 2014). Positive stress has a helpful impact on our lives. For example, there is stress involved with entering a new childcare center or school, getting ready for a major life event like a wedding, or meeting a new employer. Such stress is common and, while uncomfortable, resolves in a reasonable time and often results in positive changes. Positive stress helps us grow and develop. Tolerable stress is difficult but does not damage growth and development in the long run. Examples of tolerable stress include the death of a loved one and

accidents or illness which can be healed. Tolerable stress can be endured and is helped by supportive relationships. Toxic stress is stress which is on-going and damages growth and development. Toxic stress results in developmental damage due to the strong, frequent chemical changes brought on by the body's stress response. Examples of toxic stress include child abuse and neglect, lack of safety such as domestic violence or violent neighborhoods, and chronic physical or mental health conditions.

Life experiences alter brain development. Neuroimaging methods such as magnetic resonance imaging have provided biological evidence about how the brain develops. When the brains of healthy children and those neglected are compared, there is a striking difference. Children abandoned in Romanian orphanages showed major differences compared to children placed in foster care or raised in families from birth (Nelson, et al., 2013). When the researchers evaluated brain activity, volume, and composition, they found that the institutionalized orphans had delayed brain development and less volume in both gray and white matter. These children also were found to have lower IQ scores. In another study, researchers at Emory University (Dias & Ressler, 2014) found that a first generation of mice subjected to olfactory fear conditioning had offspring with no conditioning for 2 generations that responded to the smell presented in the first generation. They found changes in the DNA of the mice which appear to carry the fear intergenerationally. These studies help us understand that exposure to toxic stress has long-term negative effects on children's development.

Early brain development is the foundation for later development, health, and relationships. Just as a house is built from the ground up, needing a sturdy foundation, human brains are built from the bottom up (Tennessee Commission on Children and Youth (TCCY), 2020). Without a sturdy foundation in the early years, brain architecture is compromised.

Adverse Childhood Experiences (ACEs) is used to describe stressful or traumatic experiences which threaten children's development. The term was coined by Felitte, et al. (1998) in a study conducted by the Centers for Disease Control and Kaiser Permanente exploring the link between childhood ACEs and later-life health. There were 13,494 Kaiser health plan members who completed standardized medical evaluations during 1995-1996. Participants were mailed a survey after their clinic visit that included questions about their childhood exposure to ACEs. Seven categories of abuse and household dysfunction were included: psychological, physical, and sexual abuse; and household dysfunction, specifically substance abuse, mental illness, mother treated violently, and criminal behavior. In a second wave of data collection, another 13,330 plan members received physicals and were sent a survey after their physicals. In this study eight ACEs were used – with parental separation or divorce added. In all, 17,337 adults returned surveys concerning their childhood exposure to ACEs (Brown, et al., 2009). Further sources have used 10-11 categories of ACEs and a number of ACEs surveys can be found (ACEs Connection Resource Center, 2019). It was discovered that ACEs were common across the population and that as the number of ACEs went up, so did the risk of chronic disease,

risky behaviors, and lost life potential. These studies provide evidence that traumatic stress during childhood is related to behavioral and health problems during adulthood. National and state organizations as well as non-governmental non-profits use the ACEs framework today to promote the importance of early development in lifelong health and take action to reduce toxic stress and promote resilience (Centers for Disease Control and Prevention (CDC), 2020; TCCY, 2020).

Evidence does not support the conclusion that all children exposed to significant early stress will always develop stress-related disorders. The degree to which children are impacted by ACEs varies due to a variety of factors such as age and gender, severity and duration of exposure, and the presence or absence of supportive adults. ACEs create risk but are not fate. However, there is evidence that toxic stress does have the potential to impact a child's future outcomes (Centers for Disease Control Vital Signs, 2019; Tennessee Department of Health, 2015). Brain development is at the highest level during the early years. Stress can be damaging to health and well-being if activated too often or for too long (toxic stress). Adrenaline and cortisol are produced in response to stress and prepare the body to respond to adversity. Sustained or frequent stress can lead to impairment in brain architecture and developing organs affecting learning, memory, and self-regulation (NSCDC, 2014; NSCDC, 2020).

The social and economic outcomes associated with childhood exposure to adverse experiences is immense. A person with 4 or more ACEs is less likely to have health care coverage, and more likely to have a lower income and be out of work than a person with no ACEs. A person with 4 or more ACEs is less likely to graduate from high school and college than a person with 0 ACEs. Also, a person with higher ACE scores is more likely to have depression as well as experience more days of poor physical and mental health than someone with no ACEs (Tennessee Department of Health, 2015). Women and persons from several ethnic minority groups are at higher risk of experiencing ACEs than the general population (CDC, 2020). The social and economic costs to our country are estimated to be hundreds of billions of dollars each year. The impact of ACEs on one generation of parents continues to the next generation of children unless positive change occurs (CDC, 2019).

Building Resiliency

How do we reduce toxic stress and promote resilience for the children and families in our communities? ACEs are preventable. Safe, stable, and nurturing relationships help children reach their potentials and reduce the likelihood and harm linked to ACEs (CDC, 2019). Strategies include strengthening economic supports to families, promoting social values which protect against violence and adversity, ensuring a strong start for children, teaching social-emotional skills, connecting youth to caring adults, and intervening to lessen harm when it already has been experienced by children and families.

Clearly, early childhood professionals have an important role in ACE prevention. Resilience is built by supplying safe environ-

ments, giving caring attention, building trusting relationships, listening to feelings, responding in positive ways, and providing opportunities for success (Pizzolongo & Hunter, 2011). Home visitation programs such as Healthy Families and Nurse-Family Partnership help ensure healthy development and reduce the risk of child maltreatment. High quality childcare and early childhood enrichment programs which involve, and support parents reduce potential harm and promote healthy development. Teaching social-emotional skills helps children and young adults benefit when relationship skills and parenting skills are taught and supported (CDC, 2019).

Though many perceive resilience as solely an internal trait, science tells us environmental factors profoundly influence a child's capacity to be resilient. Resilience is built throughout development when a child consistently has safe, stable nurturing relationships and environments (NSCDC, 2015).

It is easier to get things right the first time by building a strong foundation both for strong houses and strong children than to try to re-build on an unsteady foundation. Supportive relationships and positive experiences during the early years of life are essential in shaping brain architecture, wiring the brain in a manner which allows the development of key abilities such as the ability to plan ahead and to monitor and regulate behaviors (NSCDC, 2015). Several decades of research have helped explain how some people are able to overcome major adversity and others are not. The most common factor for children who do well, despite the stress of adverse experiences, is having at least one stable, supportive relationship. Supportive relationships help children respond to adversity and thrive. Additionally, when caregivers actively help children develop skills to interact with others and to cope with stress, this capacity to manage stress lessens the effect of toxic stress – essentially transforming it to tolerable stress.

Building resiliency

How can we as early childhood professionals build resilience? Children must feel safe and secure, therefore, providing a positive, safe environment, with caring attention and trusting relationships for each child is a vital first step (Grotberg, 1995; Pizzolongo & Hunter, 2011; Sciaraffa, et al.,2018). Safe environments allow caregivers to interact with children using positive attitudes and listening to feelings. Providing responsive care and kindness leads to a trusting relationship. In a trusting relationship, individuals feel their voices are heard and develop the confidence to explore and do things independently. Providing opportunities for children's success can counteract negative experiences.

Infants and toddlers are in a stage of rapid brain development which sets a foundation for life-long relationships and learning. Positive interactions with young children facilitate brain development. Using stories and songs as well as verbally engaging children in routine daily interactions creates the foundation for later learning. The term serve and return is used to describe these back and forth interactions (Tennessee Department of Health, 2015). For example, a baby may serve by smiling or vocalizing

and a caregiver returns by responding with a smile or talking to the child. These interactions continue, much like a dance, creating the foundation for later relationships and learning.

Children's development may be thought of as a scale or a seesaw with two sides, one negative and one positive (NSCCD, 2015). Toxic stress piles up the negative side of the scale and positive experiences on the other side can tip the scale the other way. A fulcrum, on which the scale balances, is set by inheritance. Children start with their fulcrums set in different places on the scale and this influences their responses to the weight of the experiences they have. But the fulcrum is not fixed, it can be shifted by life experiences. One way to move the fulcrum so that the scale is better able to bear the weight of negative experiences is to build the capacities needed to manage stress. Problem solving, regulating behavior, planning, adjusting to changes, and controlling impulses are examples of skills which reposition the fulcrum by loading the positive side of the scale. This can

Early childhood educators are an influential factor in the lives of children. (Photo courtesy of early childhood teacher, Malik Johnson.)

Table 1. How will building resilience look in the classroom for babies and toddlers?

Area of Focus	Daily Activities
Express Love Both physically and verbally	Hold babies when they are being fed, talk with them during diaper changes, notice and name babies' individual characteristics.
Acknowledge Feelings Watch carefully and name feelings	"You are happy, I see you smiling!" or "You are so mad that you have to wait for your turn with the truck!"
Keep Children Safe Monitor their efforts as babies and toddlers explore	Create classroom environments which invite exploration, are secure, and free of hazardous items.

Introduce the concept of rules to older infants and toddlers. Rules make our classrooms safe for everyone.

The toddler who hits to get a toy can be stopped and reminded "Hitting hurts, I want everyone in our class to be safe!" |
| *Model Confidence and Optimism* Create developmentally appropriate challenges for babies and toddlers | Create obstacle courses, and plan activities which present challenges, yet can be done with some effort.

For babies, place a preferred toy nearby, just out of reach, encouraging the child to move to get it. Verbally describe what the child does and how you notice the effort, saying, "You are really reaching your hands out – look at how you have wiggled closer! You have it now; you got that dolly!"

Toddlers love to climb. Create a classroom with climbing opportunities and encourage their climbing efforts. |
| *Encourage Independence* Allow children to make simple choices to promote autonomy | Young babies can make decisions about which toys they enjoy and when they are tired or hungry. Notice their decisions and honor them. For example, "You chose the truck." or "I thought you were sleepy, it looks like you are ready to play!"

Toddlers love to make decisions. Offering limited choices, each of which are appropriate, brings toddlers great joy and provides decision-making practice. Give toddlers choices of books, toys, ways to wait for a turn, e.g.," While you wait for a turn, would you rather watch or play with puzzles?"

Allow toddlers to help with tasks such as holding doors and putting away toys.

Teach the steps for putting on jackets, taking them off, and hanging them up. |

happen throughout our lifetimes, but it is more difficult to shift the fulcrum as children grow older. Therefore, it is important for early childhood educators to understand the incredible influence they can make in the lives of children in their care because they are able to help shift the fulcrum.

Practical suggestions to promote resilience in infant and toddler classrooms are shared in Table 1. Ideas to promote resilience in children ages 3-5 years are presented in Table 2.

The Center on the Social and Emotional Foundations for Early Learning (n.d.) provides resources for teachers, caregivers, and parents including videos, activities, books, and strategies to address challenging behaviors. Many materials are available in Spanish as well as English. Resilient children are problem solvers (Tartakovsky, 2016). Caregivers, teachers, and parents can help

children develop resilience by not accommodating every need and allowing appropriate risks while keeping children safe. Teach children problem solving skills and specific skills to handle certain situations, for example, teaching children strategies to use to join play activities such as, "Can I play?" Be ready to make suggestions in case the child says "No." Use "How" questions rather than "Why" questions, for example, "How can you wait while your friend has a turn?" rather than "Why don't you ride a tricycle while you wait for a turn?" Allow children to come up with ideas rather than providing all the answers. Also, role-model resilience for children. Use problem solving and do your thinking out loud, admit mistakes, and strive to find good solutions as you help children travel through the ups and downs of childhood.

Ellen Galinsky (2020) provides further guidance about moving from trauma-informed care to asset-informed care. Reviewing

Table 2. How will building resilience look in the classroom for 3-5-year-olds?

Area of Focus	Daily Activities
Love and Respect Watch for children's skills and strengths	Acknowledge children with your attention and words. For example, "I noticed you put your puzzle away, thank you." or "You worked hard on that painting, I see 5 different colors." Appreciation for children's presence and being is helpful, for example, "I am so glad you are here today!"
Encourage Independence Create activities children can do with little or no adult help	Remember that preschool-aged children love to help. Find ways they can help with daily routines such as putting their own blankets out at naptime and setting their places and cleaning up after meals and snacks.
Have Reasonable Rules Post rules in the classroom	Remind children of the rules each day and notice when children follow the rules. Make sure that you can provide a short explanation for each rule. If you cannot explain it – do not have it. Rules are all about making the classroom a safe, secure environment for each child.
Empathy Role model empathy	Empathy is the art of understanding how another person may feel. For example, "You look like you are frustrated with that puzzle, let me see if I can help." or "I wonder if you are missing your Nana, you look sad." Read books about feelings to teach words which express feelings. Display pictures of children expressing their feelings at children's height in the classroom. Accept both positive and negative feelings. Help children find ways to express their feelings in appropriate ways; show children what empathy and caring look and sound like.

the effort to help professionals and the public understand the impact of trauma on children, she reminds us that it is possible to recover from the effects of toxic stress, that it is important not to use ACEs to stereotype, to remember the concept of the whole child – that people are more than what happened to them, and that we can do even better. We can do better by building on the assets and strengths of children and families. The route to doing this begins with ourselves. As human beings, caregivers, parents, and teachers, we have the power to change ourselves. Self-knowledge and self-reflection help us respond more thoughtfully to others. Galinsky urges us to observe children's behavior to understand what it is communicating. We cannot change children and families, but we can set up the conditions that allow them to change. Finally, Galinsky recommends that we seek the support we need and help families find resources they need, valuing relationships, helping children understand and regulate their feelings, and supporting children's autonomy. In short, using a collaborative problem-solving process helps children and families build on their strengths.

We can reduce the impact of ACEs and promote resilience. ACEs are not destiny (TCCY,2020). Some children are more susceptible than others to toxic stress. Adults play a buffering role for children against stress. Relationships with caring adults—parents, teachers, and caregivers—support children and promote resilience, tipping the balance of their lifelong development from negative toward positive outcomes.

Visual supports such as a schedule help children with decision making, a key element in becoming resilient.

Martha Herndon (Marti) began working with children in the 1970s. She taught child and family studies at Western Washington University and the University of Tennessee at Martin. She currently is the Research Administrator for the Promethean Foundation, a non-profit program providing childcare scholarships for at-risk children in rural northwest Tennessee. Marti is a member of professional associations including the Southern Early Childhood Association. She is a Certified Family Life Educator, a member of the Building Strong Brains, Tennessee Team, the Northwest Council on Children and Youth, and an active volunteer with agencies serving children and families.

Cathy Waggoner is the Administrator for the Promethean Foundation, a research foundation providing childcare scholarships for at-risk Obion County, Tennessee preschoolers. To promote quality in the early childhood classroom, she has a close working relationship with childcare directors, support agencies, and classroom professionals who care about the growth and development of young children. It also involves opportunities to work directly with families and young children. She formerly served as SECA Representative from Tennessee.

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Listening to Our Teachers:
An Interview with Ashley Kim,
Toddler Teacher at Parker-Chase Preschool

Karen Walker

In 1985, Parker-Chase Preschool in Texas was asked to be part of a pilot credentialing program sponsored by the National Association for the Education of Young Children (NAEYC). This pilot program led to the current NAEYC Accreditation program. Parker-Chase was one of the early schools accredited by NAEYC and has been re-accredited ever since. Using project-based, experiential learning, their toddler teachers encourage independence and offer positive guidance. They recognize that responsive and respectful relationships are key to achieving important toddler developmental milestones. Preschool teacher Ashley Kim recently graduated from the University of Texas-Dallas. She completed her student teaching at Parker-Chase in Plano. She was so successful and professional they offered her a full-time job. Recently, we had an opportunity to interview Ashley, who shared her experiences now as a toddler teacher.

Ashley Kim feels that the most rewarding experience for a toddler teacher is to see children trust her.

Q: How long have you been a Toddler Teacher?
A: *I have been a toddler teacher for 8 months.*

Q: What is the most rewarding part of your job?
A: *The most rewarding part of a toddler teacher is the change in student's behavior in the classroom. I had to earn the student's trust in order to build a relationship with them. After a few weeks, the student indicated that they trust me to be their teacher and came to me when they need help.*

Q: What is the most challenging part of working with toddlers?
A: *The most challenging part for a toddler teacher is the circle time and lunch time when the students have a hard time sitting in one spot for 10 minutes unless the material is interesting for the student. I noticed the student's attention got longer as the time went by in the classroom. Also, I noticed the students started to remember the information from the material that was taught during circle time.*

Q: You went to school to earn a bachelor's degree in Early Childhood Education. Was that helpful?
A: *My four years in university helped me a lot so that I was able to understand and see what the student is going through. Every student is different in a way that they have different learning styles. The information from the college courses helped give me guide-*

lines for what to do on behavior and learning in the classroom.

Q: What would you say to someone who claims what you do is just babysitting?
A: *I would say that it's not just babysitting, that it requires teaching as well. Babysitting and being a preschool teacher is different in that preschool teachers teach fostering children's cognition, communication, fine motor, gross motor, and socioemotional development. The pace of the student is different so it takes patience to see the improvements.*

Q: What advice could you give other teachers and caregivers about working with parents?
A: *I would say, talking to the parents to see what the parents may want to know about their child. The teachers and parents can exchange the information on the student at that point. The perspective of parent and teacher are different and when they come together, that makes it easier to understand on child behaviors. Sometimes the child can act differently at home which can lead to a confusion for a child, teachers, and parents. The teacher and parent can work together to help the student to learn in class and home as well. It could lead to a better outcome if the parents and teacher works together to guide the child in right direction.*

Q: You teach in a NAEYC accredited center? How does this impact your work?
A: *I work at one of the NAEYC accredited centers. The NAEYC provided the training to become a preschool teacher. I like the annual conference of NAEYC where I got to learn new things from different people who have experienced the early childhood field. Sometimes, certain behavior is hard to understand for me in the classroom and that makes me wonder about the cause of the behavior. I would get the answer or understand from the lecture of NAEYC annual conference. It's a great conference where I got to meet a lot of teachers who are in the same field as I am.*

Q: Have you ever had a challenge with a family?
A: *I would say yes, I have faced challenges with a family. I believe that the student gets better in behavior or learning if the parent and teacher work together. The challenge would be when*

the parents expect the teachers to do more than what we are able to do. It's hard to achieve the expectation from the parent because the parenting style is different for each family. The parent will react differently depending on the situation in the classroom. The relationship with the parent(s) is important when it comes to teaching in school.

Q: Is there any advice you would give to teachers during this time of the pandemic?
A: *I would advise the preschool teachers to try their best to teach in the classroom with patience and passion. Education is important for the students so that teachers can make a difference in the students' lives. The teachers can guide the students in the right direction for children's cognition, communication, fine motor, gross motor, and socioemotional growth. Each age is a new stage for the children that they wouldn't know what is right from wrong without the guidance of the teachers in the classroom. Teaching* can be continued online that provides the material for the student to learn at home. Also, patience is an important factor when it comes to teaching in the classroom. It will show the improvement of the student at school and at home.

Karen Walker, Ed.D. is an assistant professor of Child and Family Studies at Northwestern State University in Natchitoches, Louisiana. Her experiences as an early childhood and special educator give her many stories and real-world knowledge to share with her university students. Dr. Walker's research agenda utilizes qualitative methodologies to examine topics such as early literacy and teacher identity. Her current project observes how children with disabilities use technology to develop relationships. She serves as the chair of the SECA Editorial Committee.

Children's Book Review

By Dina Costa Treff

Nursey rhymes have been around for centuries. They play a huge role in early development from literacy and cognitive development to social emotional development. These stories are passed down over the years from generation to generation. Everyone knows the story of Humpty Dumpty and his great fall but what about his time after the fall? His fall from the wall did more that break him physically. Dan Santat's *After the Fall: How Humpty Dumpty Got Back Up Again* (Roaring Brook, 2017), shares a portrayal of the challenges he faces as he conquers his fears. Because of his fall Humpty Dumpty became afraid of heights. This causes him grief as he misses out on experiences he enjoys like being able to see above the city and having a closer look at the birds. As each day passes, he considers climbing the ladder to reach the top of the wall again. He is not ready just yet. He knows that accidents happen, and he is still afraid. Humpty Dumpty finally faces his fear and celebrates his feat. Santat's beautifully illustrated story show's children that despite falling, you can conquer your fears and get back up again. This book is great for children from ages 3-8. The message is clearly one that benefits readers of all ages as we all encounter mishaps in life. We can all get back up again.

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Las rimas infantiles han estado presentes por siglos. Las mismas juegan un importante papel en el desarrollo del lenguaje y desarrollo cognitivo y del desarrollo socioemocional. A través del tiempo, estos cuentos se comparten de generación en generación. Todos conocen la historia de Humpty Dumpty y de su gran caída, pero ¿qué sabemos sobre lo ocurrido después de caer? Su caída tuvo más consecuencias que el romperlo físicamente. Dan Santat, en su libro *After the Fall: How Humpty Dumpty Got Back Up Again*, habla de los retos que este enfrentara mientras superaba sus miedos. Debido a su caída, Humpty Dumpty comenzó a tener miedo a las alturas. Esto le causó una gran pena ya que echaba de menos las experiencias que disfrutaba como mirar la ciudad desde lo alto y ver a las aves mucho más cerca. Según pasaba cada día, él pensaba subir para alcanzar lo alto de la pared una vez más. Pero él no está listo. Sabe que pueden ocurrir accidentes y aún siente miedo. Finalmente, Humpty Dumpty enfrenta su miedo y celebra su victoria. La historia, bellamente ilustrada que escribe Santat, enseña a los niños que, a pesar de caer, uno puede conquistar sus miedos y volver a comenzar. Este libro es apropiado para niños de 3 a 8 años. El mensaje claramente beneficia al lector de todas las edades ya que todos enfrentamos dificultades en la vida. Todos podemos de nuevo volver a levantarnos.

Dina Costa Treff is lead teacher of the Preschool Program at the McPhaul Center, University of Georgia.