

PSYCHOLOGY OF PARENTING

ALISA BEYER



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ABOUT THE CONTRIBUTORS

This open textbook is a work in progress. This book has materials remixed from other OERs published. This book was adapted from Lang's OER text on Parenting and Family Diversity Issues and sections of Beyer & Lazzara's Lifespan Development OER textbook.

Portions of this manuscript's references and content organization were assisted by Perplexity AI (v 3.2.0, March-April, 2025) to improve formatting and clarity.

I started this book while on sabbatical. I am a faculty member at Chandler-Gilbert Community College who teaches a variety of courses including introduction to psychology, lifespan development, psychology of parenting, introduction to statistics and research methods. I created this book for the psychology of parenting course for Maricopa Community Colleges. If you adopt or adapt/remix this book, please let me know! If you have suggestions or feedback, please also reach out. Alisa.Beyer@cgc.edu. Please take a minute to fill out the [contact form](#).

PART I.

INTRODUCTION TO PARENTING

INTRODUCTION

Parenting, child-rearing, care-giving, and parenting education are key concepts that can impact child outcomes. Therefore, it is imperative to provide definitions of each concept before learning about “parenting.” I invite you to critically think about each concept and analyze how the information within this book can be applied to each of these words.

Parenting is a process of raising, promoting, and supporting the physical, emotional, social, and cognitive development of a child to adulthood and across the lifespan.¹

Child-rearing is oftentimes defined interchangeably with parenting. However, there are many non-parental figures (e.g., society, day care providers, teachers, governments) who offer similar types of care without being a child’s legal “parent.”²

Care-giving is the act of assuming the main responsibilities for someone who cannot provide all basic needs for oneself. Examples might include a parent, day care provider, trained professional, or family member.³

Parenting education is a process that can help caregivers (and prospective caregivers) understand how to provide developmentally-appropriate care in a safe, loving, nurturing, and stable environment that contributes to a child’s positive health



Figure 1. A family celebrating graduation.

1. Brooks, J. B. (2012). *The process of parenting: Ninth edition*. McGraw-Hill Higher Education.
2. Abrahan, H. (2017). A family is what you make it? Legal recognition and regulation of multiple parents. *American University Journal of Gender, Social Policy & the Law*, 25(4) <https://ssrn.com/abstract=2925886>
3. US Legal. (n.d.). *Primary-caregiver doctrine law and legal definition*. Retrieved from <https://definitions.uslegal.com/p/primary-caregiver-doctrine/>

and well-being. Successful parenting education provides participants with individualized, culturally-relevant knowledge, resources, strategies, tools, networking support, and guidance regarding best-practice approaches to child-rearing. The goals of parenting education include caregivers learning and implementing this information to facilitate a child's long-term, positive, emotional, social, physical, and cognitive development.⁴

Research continually shows that parenting practices can influence a child's social, emotional, and intellectual development, especially during the early years.⁵ Studies also demonstrate that parenting practices can impact a child's behavioral health, ability to focus (attention), and enhanced sense of security.⁶

Further, parenting processes and outcomes can be influenced by factors such as personality, biology, temperament, and the unique experiences of a parent and a child. Therefore, these processes should be examined within the contexts of social, economic, historical, and psychological factors related to individuals, families, communities, and cultures.⁷

Across the world, a variety of definitions exist for many topics concerning "parenting" and "family." For instance, the European Court of Human Rights jurisprudence recommends that "family" be defined on culturally-sensitive and case-by-case bases by giving consideration to the personal ties between the persons concerned.⁸

Further, it is fairly-well agreed upon that those who work with children and families embrace, respect, and understand that subjective definitions of these concepts (a) exist within and between individuals, cultures, and organizations (e.g., UNICEF, U.S. Census Bureau, etc.), (b) can change over time, and (c) are based on personal experiences, views, values, beliefs, historical time and place, culture, etc.⁹

**Throughout this entire book, it should be assumed that
the following terms are defined as follows:**

Parent: The words, "family member," "primary caregiver," and/or "parent" will be used interchangeably to denote the diverse groups of individuals who are primarily responsible for

4. Child Welfare Information Gateway. (2019). Parent Education to Strengthen Families and Prevent Child Maltreatment. *Issue Briefs* <https://www.childwelfare.gov/pubs/issue-briefs/parented/>

5. National Academies of Sciences, Engineering, and Medicine. (2016). *Parenting Matters: Supporting Parents of Children Ages 0-8*. Washington, DC: The National Academies Press. <https://doi.org/10.17226/21868>.

6. Child Welfare Information Gateway. (2019). Parent Education to Strengthen Families and Prevent Child Maltreatment. *Issue Briefs* <https://www.childwelfare.gov/pubs/issue-briefs/parented/>

7. Child Welfare Information Gateway. (2019). Parent Education to Strengthen Families and Prevent Child Maltreatment. *Issue Briefs* <https://www.childwelfare.gov/pubs/issue-briefs/parented/>

8. UNICEF. (2016) Refugee and Migrant Crisis in Europe: The Right of the Child to Family Reunification. Advocacy Brief. Retrieved from https://www.unicef.org/eca/sites/unicef.org/eca/files/ADVOCACY_BRIEF_Family_Reunification_13_10_15.pdf

9. <https://courses.lumenlearning.com/wm-introductiontosociology/chapter/defining-family/>

rearing a child. These terms can include, but are not limited to, extended family members, guardians, fictive kin, foster families, close friends, those bonded by legal and/or biological ties, etc.

Family: Similarly, the words, “family” and “families” will be used to signify the diverse social and cultural constructions that may be derived from (a) values, beliefs, or relationship bonds (e.g., cohabitation), (b) blood, marriage, or legal ties (e.g., adoption), (c) social bonds (e.g., fostering, nurturing, or economic ties), and (d) decision-making related to day-to-day functioning¹⁰ Therefore, “family” may include, but is not limited to, extended family members, guardians, fictive kin, foster families, close friends, those joined by legal or biological ties, etc.

Fictive kin: A fictive kin relationship is one that a child has with “an individual who is not related by birth, adoption, or marriage to a child, but who has an emotionally significant relationship with the child.”¹¹

10. Sharma R. (2013). The family and family structure classification redefined for the current times. *Journal of Family Medicine and Primary Care*, 2(4), 306–310. <https://doi.org/10.4103/2249-4863.123774>

11. American Legislative Exchange Council. The Kinship Care and Fictive Kin Reform Act, 2017.

PARENTING: ROLES & RESPONSIBILITIES

ALISA BEYER

WOULD YOU APPLY FOR THIS POSITION?

Caregiver Role: Full-Time (Lifetime Contract)

Seeking a highly motivated individual to fill the role. This is a lifelong, 24/7 commitment requiring unparalleled dedication, patience, and love. The successful candidate will be responsible for nurturing, guiding, and supporting one or more small humans from birth through adulthood (and beyond). Responsibilities evolve over time, transitioning from diaper duty and bedtime stories to life coaching and emotional support for fully grown adults. This is a 24/7 position with no end date. You will be responsible for shaping lives while juggling countless roles such as caregiver, teacher, confidant, and disciplinarian.

WANTED

THE ULTIMATE CAREGIVER

FULL-TIME (LIFETIME CONTRACT)

SEEKING A HIGHLY MOTIVATED INDIVIDUAL TO FILL THE ROLE. THIS IS A LIFELONG, 24/7 COMMITMENT REQUIRING UNPARALLELED DEDICATION, PATIENCE, AND LOVE. THE SUCCESSFUL CANDIDATE WILL BE RESPONSIBLE FOR NURTURING, GUIDING, AND SUPPORTING ONE OR MORE SMALL HUMANS FROM BIRTH THROUGH ADULthood (AND BEYOND). RESPONSIBILITIES EVOLVE OVER TIME, TRANSITIONING FROM DIAPER DUTY AND BEDTIME STORIES TO LIFE COACHING AND EMOTIONAL SUPPORT FOR FULLY GROWN ADULTS.

THIS IS A 24/7 POSITION WITH NO END DATE. YOU WILL BE RESPONSIBLE FOR SHAPING LIVES WHILE JUGGLING COUNTLESS ROLES SUCH AS CAREGIVER, TEACHER, CONFIDANT, AND DISCIPLINARIAN.

PERKS & BENEFITS: A LIFETIME OF MEMORIES THAT WILL MAKE YOU LAUGH UNTIL YOU CRY. OCCASIONAL MOMENTS OF UNSOLICITED APPRECIATION THAT MAKE IT ALL WORTH IT. THE KNOWLEDGE THAT YOU PLAYED A PIVOTAL ROLE IN CREATING SOMEONE AMAZING. OPPORTUNITIES FOR PERSONAL GROWTH IN PATIENCE, EMPATHY, AND MULTITASKING.

NO MONETARY BENEFITS INCLUDED.

While this ad might not get many applicants, this is the role of a parent!

Universal Tasks of a Parent

Below are some agreed upon fundamental tasks of parenthood that extend across many cultures (Bradley, 2007):

- **Safety and sustenance:** ensuring adequate food, housing, clothing, medical care, and protection from harm in a multitude of contexts (e.g., neighborhood, household structure)
- **Socioemotional support:** providing warm and positive responsiveness, affection, communication, expectations, affirmations, encouragement, emotional regulation, guidance, discipline, and modeling of appropriate behaviors
- **Stimulation/instruction:** encouraging achievement and learning through exposure to developmentally-appropriate and culturally-enriching experiences
- **Supervision:** monitoring whereabouts, communications, activities; collecting information from various sources; maintaining ongoing, reciprocal communications with children
- **Structure:** facilitating organized environments and activities via routines, rituals, scaffolding, and time management
- **Socialization:** supporting connections with communities, relatives, friends, peers, and institutions (Laukkanen et al, 2014)



Figure 1. A parent feeding their child exhibits the “providing sustenance” task of parenting. (Photo Credit: [Andrea Piacquadio](#), [Pexels License](#))

While these are common tasks, there are contextual factors and varied goals associated with parenting, and some roles and responsibilities of parenthood are derived from national and international laws, policies, research, and practice.

Legal Definition of the Parenting Role

The legal definition of being a parent in the United States is multifaceted and can vary somewhat between states. It's important to note that while these general principles apply across the United States, specific laws and definitions can vary by state, and courts may interpret parenthood differently based on individual circumstances.

Generally, legal definitions of being a parent encompasses the following key aspects:

Biological and Legal Relationships

A parent is typically defined as the mother or father of a person, whether through biological means or legal processes[1][4]. This includes:

- Biological parents who conceive and give birth to a child
- Adoptive parents who legally adopt a child
- Legal guardians who have been granted parental rights by a court

Parental Rights and Responsibilities

Being a parent legally entails certain rights and responsibilities:

Rights:

- Making decisions about the child's upbringing, education, and healthcare
- Having physical custody of the child
- Passing property through inheritance

Responsibilities:

- Providing for the child's basic needs (food, shelter, clothing)
- Ensuring the child receives proper education and medical care
- Protecting the child from harm and abuse
- Supporting the child financially until they reach adulthood (usually 18 years old)

Legal Presumptions

In some cases, parenthood is legally presumed: A marital presumption exists in every state, where both spouses are presumed to be the child's legal parents when a child is born during their marriage or within 300 days of divorce[1][13].

Expanding Definitions

Changing family structures have led to evolving definitions of parenthood. For example, 21 states in the U.S. recognize "psychological" or "de facto" parents who have acted in a parental role with the consent of the legal parent (Spiezia, 2013). With social diversity and the growing prevalence of nontraditional family forms, the de facto and psychological-parent legalities and their application to parental rights will continue to evolve. Additionally, modern reproductive technologies have challenged legal definitions of parenting. In cases of assisted reproduction, donors may not be considered legal parents, while intended parents may be granted legal status.

Termination of Parental Rights

Parental rights can be terminated voluntarily or involuntarily if a parent is deemed unfit or unable to care for their child. This typically occurs through a legal process and may lead to the child being placed for adoption.

Beyond responsibilities and legal roles

Beyond the legal obligations and parenting responsibilities is a dynamic process that profoundly

impacts the parents themselves. As we delve deeper into the parenting experience, we discover that raising children is not just about caregiving—it's also an opportunity for parents to evolve and develop in unexpected ways. This transformative dimension of parenting reveals how the act of nurturing a child simultaneously nurtures the parent's own development.

The process of raising children offers numerous opportunities for personal growth and development. Parents often find themselves developing new skills, gaining deeper emotional intelligence, and experiencing profound shifts in their perspectives and priorities. One key area of growth is in emotional regulation and patience. The challenges of parenting frequently test one's ability to remain calm and composed, leading to improved self-control over time. Additionally, parents often report enhanced empathy and understanding, not just towards their children but in all their relationships. Parenting also fosters creativity and problem-solving skills. From finding innovative ways to encourage a picky eater to navigating complex social situations on behalf of their children, parents constantly engage in creative thinking and adaptive problem-solving. Moreover, the experience of parenting can lead to a deeper sense of purpose and self-reflection. Many parents report that raising children prompts them to reevaluate their own values, beliefs, and life choices, often leading to personal and professional growth.

Parenting as a Chance for Personal Growth (Messina, 2018)

Dr. Messina offers an excellent perspective for how parenting can lead to self-growth.

- **Our children constantly show us in which areas we need to grow:** why does a certain behavior from our child bother us so much? Why does the same behavior is not as bothersome for another parent? Most times, *there is something in that behavior triggering difficult thoughts and emotions in us*. If we analyze these thoughts and emotions, we realize that they are not caused by our child, but they have their roots in previous experiences we had. This explains why for one parent it is easy to deal with their child's angry outburst, but they cannot cope with their child's sadness, while for another parent it could be the opposite. In my **research on attachment**, I observed how the experiences people have with their caregivers have a powerful influence on the way they react while parenting their children. Sometimes we are aware of this influence, but other times we are not. If we try to change our reactions to our children's difficult behaviors, and we try to understand what is really behind our reactions, we take a step towards developing greater self-awareness. **Children are one of the ways we can learn to recognize our blind spots.**
- **Raising children is a continuous effort to accept that others are different from us.** From the time they are babies to when they become adults, children show us that they often are not what we expect and that they will not make the same choices we would make. In the effort of being sensitive parents, we come to terms with the fact that our children are not a smaller copy of us, but *they are new different human beings*. This at times can be difficult to accept for a parent. In learning to overcome whatever disappointment we may have and to embrace who our child really is, we also learn to fully accept others.
- **Children offer us the chance to accept ourselves.** Just like we learn that our kids may have bad days, and make poor choices, but this does not mean they stop deserving our love and understanding, the same applies to us. **The effort we make in giving unconditional love to our children can also teach us to unconditionally accept and value ourselves.**
- **Children remind us to “stop and smell the roses”.** Children are living proof of the passing of time. Seeing them growing helps us focus on what is really important in our life, which values we want to transmit and how we express these values in our everyday life.

Key Takeaways

- There are universal tasks as parents. The Ss: safety, sustenance, socioemotional support, stimulation, structure, supervision, socialization.
- There are legal obligations as parents
- Being a parent is a dynamic process that can lead to personal growth

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FAMILY SYSTEMS

While understanding the legal and practical definitions of parenting provides a foundation, it's crucial to recognize that parenting doesn't occur in isolation. Let's consider family to understand parenting. The theories in this section examine the family as a complex machine where every family member is a crucial cog. Using a broader perspective, family systems theory offers a comprehensive framework for understanding how families function as interconnected units. By examining parenting through family systems lens, we identify factors that influence parenting behaviors and outcomes.

Family Systems Theory

The **Family Systems Theory** assumes that a family is understood best by examining the family as one whole system. This one system is a complex, deeply-connected changing collection of parts, subsystems and family members, where each member has a known purpose or function (Hammond et al, 2005).

Other key concepts within the Family Systems Theory include:

- **boundaries** (e.g., who is a member of the system),
- **equilibrium** (e.g., during stressors or crises, the system attempts to return to its original state wherein members are functional and comfortable), and
- **bidirectional** (e.g., a change with one member will impact at least one other member, and hence impact the whole system).

Based on this theory, individuals experiencing a crisis or problem are best-served by assessments that include other members of the system as opposed to examining only one family member (Bowen, 1978).

This theory also assumes that families can examine their own processes and set deliberate goals. Change can occur when a family system acknowledges that a particular family pattern is dysfunctional and identifies new processes that support the family's goals. Resettlement is one example of a large change that a family system may choose or be forced to make.



Figure 1. Doctors ask patients medical questions during a visit to a family practice clinic in Vietnam. (Photo Source: [U.S. Air Force photo/Capt. Timothy Lundberg](#))

In order to assess patterns of adjustment in families that have resettled into a new country, we must examine the *structure* of the family unit and the *processes* that occur within that family system.

For example, one study collected data from parents and their children who immigrated to the United States from Vietnam and Cambodia to assess the role of family processes in disagreements over cultural values. The researchers found that cultural clashes were linked to parent-child conflict, which in turn was linked to reduced parent-child bonding, both of which increase adolescent behavioral problems (Choi et al, 2008). This demonstrates one family pattern related to resettlement that is best

understood at the family system level.

Systemic Family Development Theory

The **Systemic Family Development Theory** asserts that families are (a) *complex*, (b) *extremely diverse related to the types, numbers, and timing of transitions and stressors*, and (c) *multigenerational systems*. It also assumes that families share common processes through their development, but the processes must take into account intergenerational influences and variations within and between all families. No two families are alike (Laszloffy, 2002).

INTERGENERATIONAL TRANSMISSION OF PARENTING

Many studies have shown that patterns of family interactions are similar within families across generations (Kovan et al, 2009; Conger et al, 2009). The concept of **intergenerational transmission of parenting** refers to the tendency for parenting styles and behaviors to be passed down from one generation to the next. This phenomenon has been widely studied and documented in various cultural contexts. Research indicates that there is a moderate degree of continuity in parenting styles across generations. For instance, individuals who experienced authoritative parenting in their childhood are more likely to adopt a similar approach with their own children. However, it's important to note that this transmission is not deterministic; many individuals consciously choose to parent differently from how they were raised. Factors influencing this transmission include not only direct modeling of parental behavior but also the development of internal working models of relationships during childhood. These models shape an individual's expectations and behaviors in future parenting roles. Interestingly, studies have shown that the intergenerational transmission of



Figure 1. Extended family members of multiple generations celebrating at an event. (Photo Source: [Lee Hnetinka, Pexels License](#))

parenting is not limited to positive practices. Negative parenting behaviors, such as harsh discipline or neglect, can also be transmitted across generations, highlighting the importance of interventions to break negative cycles. We will discuss more about the specifics of parenting styles in future chapters, for now, knowing that parents may impact one's parenting style, the behaviors don't have to be repeated if there were negative parent-rearing strategies.

Key Takeaways

- A family is a whole, complex, single system; each member's behaviors can impact another member.
- Key concepts for family system theory—boundaries, equilibrium, bidirectional, patterns, roles, and functions.
- Key term – Systemic Family Development Theory – families are complex, diverse, and multigenerational.
- Families share common processes through their development, but there are intergenerational influences and variations between the number and types of crises, transitions, and stressors.
- Family interactions are typically similar across generations (intergenerational).
- Key term – intergenerational transmission of parenting – passing down parenting strategies between generations

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This text is taken from [Family Theories: A New Direction for Research with Resettled Populations](#) by Jaime Ballard, Elizabeth Wieling, Lekie Dwanyen, and Catherine Solheim, used under a [CC BY NC 4.0 license](#).¹ Bowen, M. (1978). *Family therapy in clinical practice*. Jason Aronson.

SOCIAL CONTEXT & FAMILY DEVELOPMENT

Family life and development have been subjects of extensive study and theorization over the years. One traditional framework in this field is Duvall's family development theory, which proposed a series of predictable stages that families typically progress through over time. Duvall's model provided a structured approach to understanding family life cycles, from the formation of a couple to the later years of life. However, as society has evolved, so too have our perspectives on family dynamics. Contemporary views of family life and development recognize a much broader range of family structures and experiences. These modern approaches acknowledge the diverse forms families can take, including single-parent households, blended families, same-sex parent families, and multigenerational households.

DUVALL'S FAMILY DEVELOPMENT THEORY

According to Duvall's Family Development Theory (1988), families move through stages in a particular order across time after members successfully master tasks for each stage.



Figure 1. A set of parents smile at their toddler and new baby. (Photo Source: [Pixabay](#))

This theory was different from other theories during this time because:

“(a) its family life cycle dimension that provides a basis for study of families over time; (b) its emphasis on the developmental tasks of individual family members and of families at every stage of their development;

(c) its built-in recognition of family stress at critical periods in development; and (d) its recognition ever since 1947 of the need for services, supports, and programs for families throughout their family life cycles.”¹

It is important to note that this theory is based on the traditional, nuclear, intact family, which is evidenced by the following stages (Laszloffy, 2004):

Table 1. Stages and tasks of family development

STAGE	TASKS
Married couple without children	Navigating how to live together. Adjusting relationships with families-of-origin and social networks to include a partner.
Childbearing families with the oldest child between birth and 30 months.	Preparing and adjusting the family system to accommodate children. Developing roles as parents. Redefining roles with extended families.
Families with preschool children.	Socializing, educating and guiding children. Assessing and adjusting parenting roles as children age and more children join the family.
Families with school-age children.	Providing guidance to children while collaborating with outside resources (e.g., school, extracurricular activities).
Families with adolescents.	Adjusting parent-child relationships with adolescents to provide more independence with safe limits. Tending to parents’ midlife relationship and career issues.
Launching families (first to last child is leaving home).	Navigating adult-to-adult relationships with children. Resolving midlife issues. Caring for aging family members.
Middle-age families (“empty/spacious nest” to retirement).	Adjusting to being a couple without children living at home. Caring for aging family members.
Aging families (retirement to death of both spouses).	Learning new roles related to retirement, becoming grandparents, losing a partner, and health-related changes.

Diversity in Family Life & Family Development

Duvall’s theory offers a roadmap for family progression, but does it account for the family diversity we see today? As society has evolved, so too have the models we use to conceptualize family development. Moving beyond the traditional nuclear family model, current approaches recognize the diverse forms of family structures and the complex interplay of factors that shape family life. These newer perspectives acknowledge the bidirectional influences between parents and children, the impact of sociocultural contexts, and the role of technology in family dynamics. By bridging Duvall’s classic theory with more recent insights, we can gain a more comprehensive and nuanced understanding of family development in today’s rapidly changing social landscape.

Forms of Family Life

In contemporary society, the concept of family has expanded beyond the traditional nuclear model to encompass a diverse range of structures. These various forms of family life reflect changing social norms, economic factors, and personal choices.

1. Duvall, E. M. (1988). Family development’s first forty years. *Family Relations*, 37(1) 127-134.

Nuclear Families

The nuclear family, consisting of two parents and their children, remains a common family structure. However, it's no longer considered the only "normal" or ideal family type.

Extended Families

Extended families, which include relatives beyond the immediate family unit such as grandparents, aunts, and uncles, continue to play a significant role in many cultures. These families often provide additional support systems and resources for child-rearing.

Diverse Family Structures

Contemporary society recognizes a wide array of family structures, including:

- Single-parent families
- Same-sex parent families
- Blended or step-families
- Adoptive families
- Foster families

Each of these family types brings its own unique dynamics and challenges to the parenting experience. Multigenerational Families Multigenerational households, where three or more generations live together, are becoming increasingly common. This arrangement can offer benefits such as shared childcare responsibilities and stronger intergenerational bonds.

Living Arrangements in Contemporary Families

The living arrangements of contemporary families have evolved significantly in recent decades, reflecting broader societal changes:

1. Cohabitation: Many couples choose to live together and raise children without formal marriage.
2. Shared custody arrangements: In cases of divorce or separation, children may split their time between two households.
3. Communal living: Some families opt for intentional communities or co-housing arrangements, sharing resources and childcare responsibilities.
4. Transnational families: With increased global mobility, some families maintain close ties across national borders, using technology to stay connected.
5. Grandparents as primary caregivers: A growing number of grandparents are taking on primary caregiving roles for their grandchildren.

These diverse living arrangements reflect the adaptability of family structures to changing economic, social, and personal circumstances.

Key Takeaways

- Duvall's theory is based on the traditional, nuclear, intact family. Families will move through each stage in order across time. A family will move from one stage to the next after all members successfully master the tasks within a stage.
- Family structures have diversified beyond the traditional nuclear model, encompassing a wide range of arrangements including single-parent, same-sex parent, blended, adoptive, and foster families.
- Extended and multigenerational families continue to play significant roles in many cultures, offering additional support systems and resources for child-rearing.
- Contemporary living arrangements reflect societal changes, with trends such as cohabitation, shared custody, communal living, and transnational families becoming increasingly common.

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INFLUENCES ON PARENTING

ALISA BEYER; DIANA LANG; AND MARISSA L. DIENER

Parenting is a rich and multifaceted journey that unfolds uniquely for every family. In today's diverse society, we celebrate the myriad ways in which parents and children form bonds, grow together, and shape one another's lives. This dynamic interplay between parents and children reflects the complexity of family relationships.

In this section, we will explore how various factors contribute to different parenting behaviors and practices that we may observe across and within families. A starting point to understanding parenting is to recognize that parent characteristics play a significant role in shaping the parenting experience. These individual traits and experiences that parents bring to their role form the foundation upon which the parent-child relationship is built.

PARENT CHARACTERISTICS

Parents bring unique traits and qualities to the parenting relationship that affect their decisions as parents. These characteristics include a parent's age, gender identity, personality, developmental history, beliefs, knowledge about parenting and child development, and mental and physical health. Parents' personalities also affect parenting behaviors. Parents who are more agreeable, conscientious, and outgoing are warmer and provide more structure to their children. Parents who are more agreeable, less anxious, and less negative also support their children's autonomy more than parents who are anxious and less agreeable (Prinz et al, 2009). Parents who have these personality traits appear to be better able to respond to their children positively and provide a more consistent, structured environment for their children.

Parents' developmental histories, or their experiences as children, can also affect their parenting strategies. Parents may learn parenting practices from their own parents. Fathers whose own parents provided monitoring, consistent and age-appropriate discipline, and warmth are more likely to provide this constructive parenting to their own children (Kerr et al, 2009). Patterns of negative parenting and ineffective discipline also appear from one generation to the next. However, parents who are dissatisfied with their primary caregivers' approach may be more likely to change their parenting methods when they have children.

CHILD CHARACTERISTICS

Parenting is bidirectional. Not only do parents and caregivers affect their children, but children influence their parents/primary caregivers as well (Diener, 2005). Child characteristics, such as gender identity, birth order, temperament, and health status, can affect child-rearing behaviors and roles. For example, an infant with an easy temperament may enable caregivers to feel more effective, as they are easily able to soothe the child and elicit smiling and cooing. On the other hand, a cranky or fussy infant can elicit fewer positive reactions from caregivers and may result in parents feeling less effective in the role. (Eisenberg et al, 2008). Over time, parents of more difficult children may become more punitive and less patient with their children (Clark et al, 2000; Kiff et al, 2011). Many parents who have a fussy, difficult child can be less satisfied with their relationships and have greater challenges in balancing work and family roles (Hyde et al, 2004). Thus, child temperament is one of the child characteristics that influences how caregivers behave with their children.

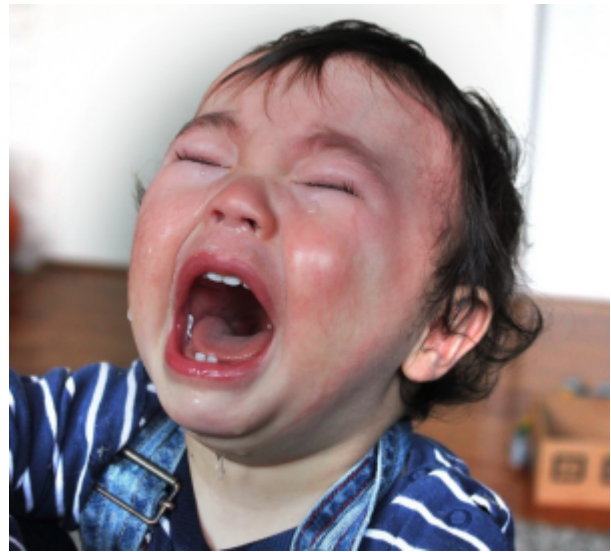


Figure 1. A child with a difficult temperament can have a significant impact on a parent. (Photo Credit: [Harald Groven](#), [CC BY-SA 2.0](#))

Another child characteristic is the child's gender identity. Some parents assign different household chores to their children based on their child's gender identity. For example, older research has shown girls are more often responsible for caring for younger siblings and household chores, whereas boys are more likely to be asked to perform chores outside the home, such as mowing the lawn (Grusec et al, 1996). Research has also demonstrated that some parents talk differently with their children based on their child's gender identity, such as providing more scientific explanations to their sons and using more emotion words with their daughters (Crowley et al, 2001).

BIDIRECTIONAL INFLUENCES

We recognize that the parent-child relationship is a two-way street, with both parents and children actively contributing to each other's growth and development. This bidirectional perspective acknowledges the reciprocal nature of parenting, where parents influence their children and children, in turn, impact their parents. We recognize that parenting involves bidirectional influences where the children also plays an active role in shaping their parents' behavior, and the overall parent-child relationship. **Bidirectional influences** of parenting refer to the reciprocal relationship between parents and children, where both individuals affect and shape each other's behaviors, attitudes, and development. This concept highlights that parenting is not a one-way process but rather a dynamic interaction between caregivers and their children.

What are some key aspects of bidirectional influences?

- Parent Characteristics: A parent's unique traits and qualities to the parenting relationship

that affect their decisions as parents.

- These characteristics include a parent's age, gender identity, personality, developmental history, beliefs, knowledge about parenting and child development, and mental and physical health.
- Child Characteristics: A child's unique traits, such as temperament, gender identity, birth order, and health status, can affect parenting behaviors and roles.
- Parental Response: Parents may adjust their parenting strategies based on their child's characteristics and behaviors.
 - Imagine a parent with two children – one who is naturally outgoing and another who is shy. The parent might encourage the shy child to participate in social activities more often, while allowing the outgoing child more independence in social situations. This adjustment in parenting strategy based on each child's unique characteristics is an example of parental response.
- Mutual influence: Both parents and children affect each other's behaviors, emotions, and development.
 - Consider a situation where a child consistently throws tantrums when it's time to leave the playground. Over time, the parent might start giving a 5-minute warning before it's time to go, which helps reduce the child's tantrums. In turn, the child's calmer behavior might lead the parent to feel less stressed about playground visits. This cycle of behavior change illustrates how parent and child influence each other.
- Reciprocal interactions: Parent-child interactions are dynamic and evolve based on each individual's responses.
 - Picture a bedtime routine where a parent reads a story to their child. The child asks questions about the story, and the parent responds. The child's interest encourages the parent to be more animated in their storytelling, which further engages the child. This back-and-forth exchange, with each person's actions affecting the other's responses, exemplifies reciprocal interactions.
- Transactional processes: The ongoing exchanges between parents and children contribute to long-term developmental outcomes.
 - Think of a child who shows an early interest in music. The parents, noticing this, provide music lessons and instruments. This encouragement leads the child to practice more and develop their skills. As the child's abilities grow, the parents invest more in their musical education, perhaps taking them to concerts or buying better instruments. Over time, these ongoing exchanges between the parents' support and the child's increasing interest and skill contribute to the child's long-term development as a musician.

Understanding bidirectional influences has important implications for parenting:

- Parenting education: Parents can be taught to recognize how their children's behaviors influence their parenting practices and vice versa, leading to more mindful and

adaptive parenting. Bidirectional perspective of parenting emphasizes the active role children play in parenting.

- Intervention strategies: Recognizing the reciprocal nature of parent-child interactions can inform more effective intervention programs that target both parent and child behaviors.
- Research methodologies: Studying bidirectional effects requires sophisticated longitudinal designs and statistical analyses to capture the complex interplay between parents and children over time.

Expert's Corner

Watch Dr. Dan Siegel describe how [caregivers can impact brain development](#) while sharing about parenting with compassion and connection in the digital age (Wisdom 2.0, 2015).

Here are some takeaway messages from the video:

- Parenting shapes the child's developing mind through patterns of energy and information flow. The mind emerges from interactions within the body and between people.
- Communication and experiences are forms of energy and information flow that parents can use to shape their child's development.
 - Where neurons fire, they wire; parents can strengthen brain connections by directing their child's attention.
 - Making repairs after ruptures in connection is crucial for maintaining a healthy relationship.
- Parents should help strengthen their child's regulatory processes by:
 - Improving monitoring skills (stability, depth, detail, and focus)
 - Teaching modification towards integration
 - Reflective dialogues help children become aware of their internal states, improving self-regulation.
 - Integration involves linking different parts while honoring differences, promoting resilience.
- In the digital age, parents should remind children of the importance of non-verbal communication and face-to-face interactions. Encourage children to realize they are interconnected beings, fostering a sense of purpose, meaning, and connection in their lives.

Drs. Siegel & Hartzell (2004) emphasize the need for parents to live in the present moment; to look beyond child's external factors to understand internal ways the child thinks and feels; and to appreciate experiences with child while choosing to meet the child's basic needs.

CONTEXTUAL FACTORS AND SOCIOCULTURAL CHARACTERISTICS

The parent-child relationship does not occur in isolation. Sociocultural characteristics, including

economic hardship, religion, politics, neighborhoods, schools, and social support, can also influence parenting. Parents who experience economic hardship tend to be more easily frustrated, depressed, and sad, and these emotional characteristics can affect their parenting skills (Conger & Conger, 2004). Culture can also impact parenting behaviors in fundamental ways. Although promoting the development of skills necessary to function effectively in one's community, to the best of one's abilities, is a universal goal of parenting, the specific skills necessary vary widely from culture to culture. Thus, parents have different goals for their children that partially depend on their culture (Tamis-LeMonda et al, 2007). For example, parents vary in how much they emphasize goals for independence and individual achievements and goals involving maintaining harmonious relationships and being embedded in a strong network of social relationships.

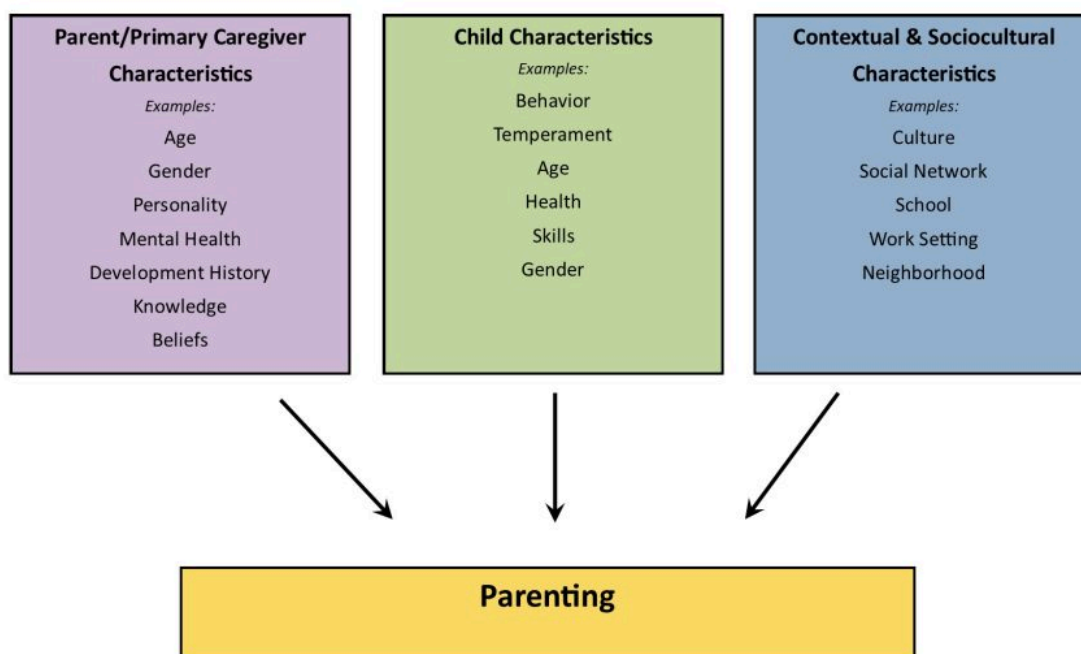


Figure 2. Influences on parenting can stem from internal factors such as the parent or child's characteristics or external, sociocultural characteristics.

These differences in parental goals can also be influenced by culture and immigration status. Other important contextual characteristics, such as the neighborhood, school, and social networks, can affect parenting, even though these settings do not always include both the child and the parent. For example, Latina mothers who perceived their neighborhood as more dangerous showed less warmth with their children, perhaps because of the greater stress associated with living in a threatening environment (Gonzalez-Backen et al, 2011).

Contexts for parenting: updated ecological system model

Urie Bronfenbrenner's ecological systems theory (1978, 1989, 1994) expanded our understanding of human development by emphasizing the critical role of environmental contexts. Bronfenbrenner conceptualized development as occurring within a complex network of nested systems, ranging

from immediate surroundings to broader societal influences. This theory is particularly relevant to parenting as it highlights how child-rearing practices and outcomes are shaped by multiple interconnected systems.

At the core of Bronfenbrenner's model is the *microsystem*, encompassing the child's immediate environment and direct interactions with family, peers, and school. Surrounding this are further contexts: the *mesosystem* (connections between microsystems), *exosystem* (indirect environmental influences), *macrosystem* (broader cultural and societal contexts), and *chronosystem* (dimension of time and environmental changes).

Bronfenbrenner's Ecological Model

Examples of each level:

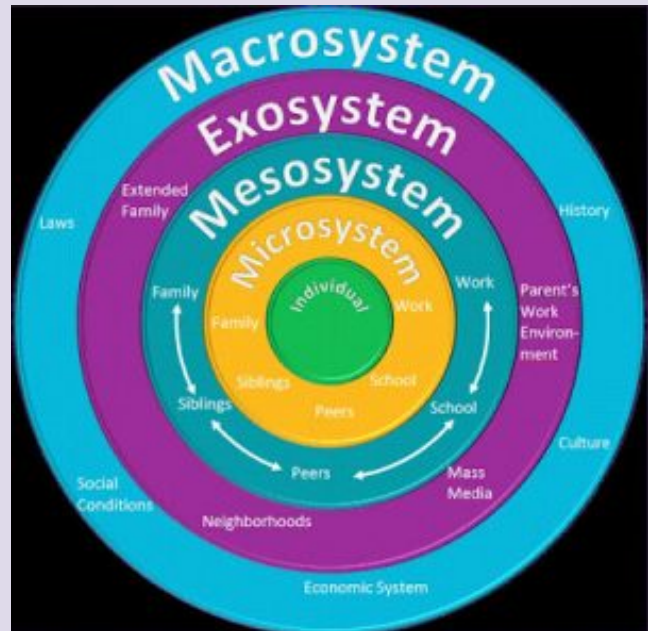


Figure 3. Bronfenbrenner's Ecological Framework

Microsystem	Home life Parents School Friends Siblings Neighborhood Childcare
Mesosystem	Interaction between kids, teachers, and parents Interaction between friends and siblings Interaction between neighborhood and family Interaction between daycare and family
Exosystem	Extended family members Mass media Social services Local government Parents' workplace Family friends
Macrosystem	Laws and legal systems Ideologies Political systems and policies Nationality
Chronosystem	Historical events Environmental changes Parents employment status Societal economic changes Changes in family structure

Bronfenbrenner later refined his theory into the bioecological model, introducing the **Process-Person-Context-Time (PPCT) framework** (Bronfenbrenner & Morris, 2006). This revision placed greater emphasis on proximal

processes – the reciprocal interactions between individuals and their environments – as the primary drivers of development.

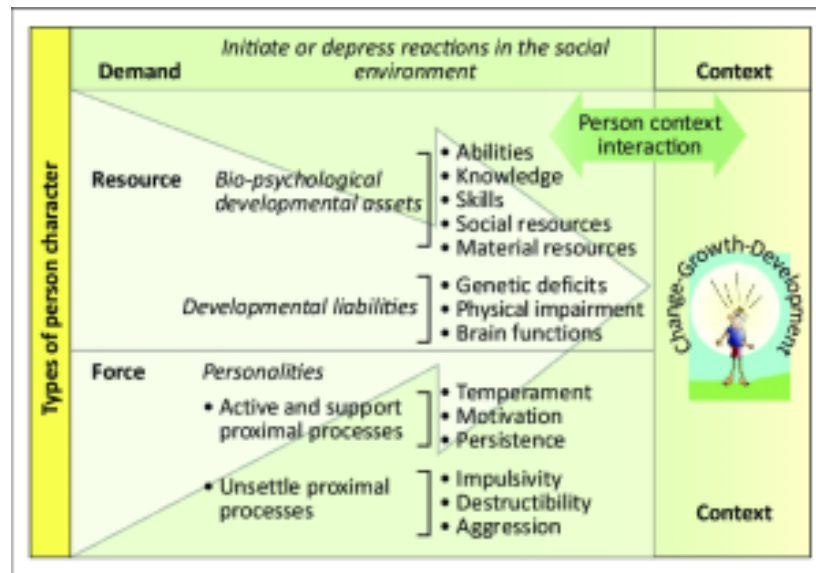


Figure 4. Explanation of Proess-Person-Context-Time (PPCT) Framework

Expanding Bronfenbrenner's Work

Recent researchers have extended Bronfenbrenner's ecological systems theory in several important ways to address the realities of child development in an increasingly globalized and technologically-connected world:

- Culture is more complex and seen in the microsystem as well as more variation in the macrosystem. Culture can define and organize microsystems and is part of the central processes of human development (Vélez-Agosto et al, 2017). Vélez-Agosto and colleagues identify culture is an ever-changing system composed of the daily practices of social communities (families, schools, neighborhoods, etc.) and the interpretation of those practices through language and communication. Additionally, Dr. Gail Ferguson and colleagues (2017) introduce the concept of "remote acculturation," which examines how children and families are influenced by and adapt to cultures they are not in direct contact with. This expands Bronfenbrenner's macrosystem to include global cultural influences that can affect child development and parenting practices from a distance.
- The addition of digital reality. Building on Bronfenbrenner's bioecological model, researchers like Navarro and Tudge (2022) have proposed neo-ecological theory, which introduces the concept of virtual microsystems to account for online interactions and their unique features such as constant availability, publicness, and synchronicity. Dr. Ferguson's research emphasizes the role of technology and digital media in shaping parent-child relationships (Ferguson et al, 2017). This provides a modern lens through which to view Bronfenbrenner's ecological systems, particularly the microsystem and mesosystem, by considering how digital interactions and virtual environments impact development. Further,

Ferguson highlights the importance of parental mediation in children's media use. This can be seen as an extension of Bronfenbrenner's focus on proximal processes within the microsystem, now applied to digital contexts.

These adaptations of Bronfenbrenner's work reflect the need to consider multiple levels of influence when studying or supporting parenting practices, from individual family dynamics to broader societal and global contexts, while also accounting for the pervasive influence of technology in modern life.

Example Process-Person-Context-Time (PPCT) framework: Parent-Child Reading

This involves the parent and child engaging in repeated interactions of reading together. As they read regularly over time, the child develops language skills, comprehension, and an appreciation for reading.

PERSON

The child's personal characteristics influence this process:

- **Demand characteristics:** The child's age and attention span affect how long they can engage in reading.
- **Resource characteristics:** The child's existing vocabulary and cognitive abilities shape their understanding of the story.
- **Force characteristics:** The child's curiosity and enthusiasm for reading impact their engagement and persistence.

CONTEXT

The reading activity occurs within multiple contextual layers:

- **Microsystem:** The immediate home environment, including the availability of books and the parent's own reading habits.
- **Mesosystem:** The connection between home and school, where teachers might encourage parents to read with their children.
- **Exosystem:** The parent's work schedule, which may influence the time available for reading.
- **Macrosystem:** Cultural values placed on literacy and education.

TIME

The temporal aspect is crucial:

- **Microtime:** The frequency and duration of reading sessions.
- **Mesotime:** The consistency of reading over weeks, months, and years.
- **Macrotime:** How changing societal attitudes towards literacy over generations might influence the importance placed on reading to children.

The proximal process of reading is influenced by the child's characteristics, occurs within multiple environmental contexts, and unfolds over time. As the parent and child engage in this activity regularly, the child's language and cognitive skills develop, showcasing how proximal processes drive development through reciprocal interactions between individuals and their environments

SUMMARY: MANY FACTORS CAN INFLUENCE PARENTING AND CHILD OUTCOMES

Parenting factors include characteristics of the primary caregiver, such as gender identity and personality, as well as characteristics of the child, such as age and temperament. Parenting styles provide reliable indicators of parenting functioning that predicts child well-being across a wide spectrum of environments and diverse communities. Caregivers who consistently engage in high

responsiveness and appropriate demandingness with children are linked to more “quality” outcomes for youth.

The interaction among all these factors creates many different patterns of parenting behaviors. For instance, parenting influences a child’s development as well as the development of the parent or primary caregiver. And, as parents face new challenges, they change their parenting strategies and construct new aspects of their identities. Furthermore, the goals and tasks of parents may change over time as their children develop.

Updated perspectives for explaining contexts show the complex interplay of immediate environments, remote cultural influences, and technological factors in shaping developmental outcomes. It underscores the importance of considering multiple levels of influence when studying or supporting parenting practices, from individual family dynamics to broader societal and global contexts. These additions highlight the need for parents to be aware of digital, local, and global cultural influences on their children’s development.

Key Takeaways

- **Bidirectional influences** in parenting highlight the reciprocal nature of parent-child relationships, where both parties affect each other’s behaviors and attitudes.
- Parent characteristics, such as personality traits and parenting knowledge, contribute to the unique dynamics of each parent-child relationship.
- Child characteristics, including temperament and gender identity, elicit different responses from parents and shape parenting strategies.
- The **person-process-context-time framework** provides a comprehensive approach to understanding the complex interplay of factors in child development and parenting.
- Sociocultural characteristics, like economic hardship and cultural values, significantly influence parenting goals and practices across different contexts.
- Modern research has expanded on traditional ecological models to include the impact of globalization and technology on parenting and child development.

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PART II.

EFFECTIVE COMMUNICATION IN FAMILIES

Picture this: A family dinner table where smartphones are buzzing, the TV is blaring in the background, and everyone seems to be speaking a different language. Maybe this sounds familiar? In today's digital age, effective communication within families has become both more challenging and more crucial than ever before.

As we dive into aspects of parenting, let's first explore how we can transform that chaotic dinner scene into a table full of connection and understanding. Effective communication isn't just about talking; it's about creating energy flows and information that shape the very essence of our family relationships.

In this section, we'll uncover best practices for effective family communication and parenting strategies. We will also examine best practices for disciplinary strategies. Effective communication lays the foundation for successful disciplinary strategies. When parents establish open, respectful dialogue with their children, it creates an environment where discipline can be implemented more effectively. As we shift our focus to disciplinary approaches, it's important to remember that clear communication remains at the heart of these strategies.

ACTIVE LISTENING

Active listening is a type of communication strategy between two or more people that consists of paying attention to what someone is saying and attempting to understand what is being said. Clinical research studies demonstrate that active listening can be a catalyst in one's personal growth. For example, children are more likely to listen if someone else allows them to speak and successfully convey their message (Rogers et al, 2015).

Learning how to actively listen takes time, practice, and full commitment. Once achieved, it can build a strong foundation for positive communication resulting in a strong caregiver-child relationship by building trust throughout the lifespan. This strategy also tends to improve the quality of conversations by connecting with others on a deeper level, which can lead to more positive and healthy relationships (Rogers et al, 2015).

How to use this method:

- Caregivers should be on the child's level and listen in an attentive, nonjudgmental, non-interrupting manner.
- Listeners should pay close attention to possible hidden messages and meanings contained in the verbal communication and should note all non-verbal communication from the child (Yarn, 2002).
- It is important to remember that you are not giving your opinion and thoughts regarding what the child relays to you; you are paraphrasing what the child said and expressing back to the child the emotions the child conveyed.

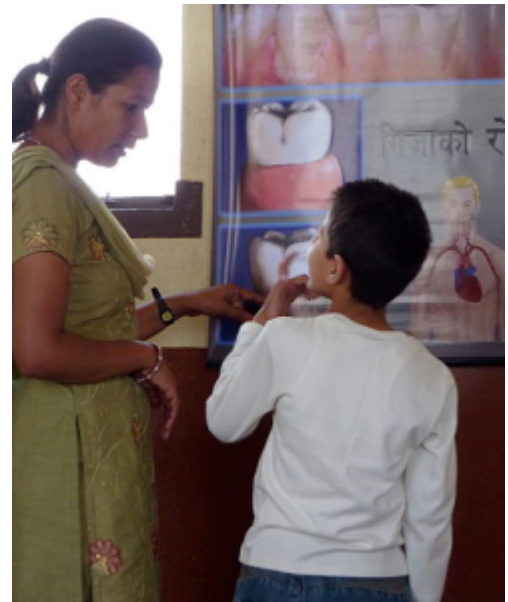


Figure 1. A doctor stops and listens to a child explain how they feel. (Image Source: [Latrobebohs](#), CC by-SA 3.0)

Examples – further resources

- The Center for Disease Control and Prevention's website provides [useful information about active listening](#).

CDC (2019). *Active Listening*. <https://www.cdc.gov/parents/essentials/communication/activelisting.html>.

- The Cleveland Clinic provides more information about active listening including its benefits and 7 Ways To Improve Your Active Listening Skills.

Cleveland Clinic (2023). *7 Ways To Improve Your Active Listening Skills*. <https://health.clevelandclinic.org/active-listening>

Key Takeaways

- Active listening is paying attention and attempting to understand what someone else is saying.
- It is important to note hidden messages in verbal and non-verbal communications.
- It is important to refrain from giving opinions while paraphrasing what the other person is saying.

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CALM

The CALM method is a technique for parents to use to communicate with their children, whether that be talking through a conflict or just sharing about what happened that day. The goal of this method is to give children a voice and help them feel heard. The “best-practice” way to utilize this method would be to implement it every time your child wants to have a one-on-one conversation with you.

- Connect
- Affect
- Listen
- Mirroring

How to use this method:

CONNECT. The first step in the CALM method is connecting with the child. This means putting aside any and all distractions in order to give your full and undivided attention to what the child says to you.

AFFECT. The second step is affect, which is emotion. This means you want to share and show your emotions and feelings with your children and let them know that you have the same emotions as they do. Through this, they can see that you understand and empathize with what they are going through or telling you.

LISTEN. The third step is listening to the child by repeating what is said back to you or asking for clarifications to help the child feel listened to and heard.

MIRRORING. The fourth and final step is mirroring. This is when you (a) make sure you fully understand what the child is telling you, (b) clear up any questions or misunderstandings by paraphrasing (back to the child) what the child said, and (c) share in your child’s thoughts and feelings.



Figure 1. Parents often have to juggle giving attention to multiple children, which may lead to outbursts if one child feels neglected. In these cases, the CALM method may be of help. (Photo Source: [Anna Shvets](#), [Pexels License](#))

Example and Video

Your daughter, Deidre, came to you upset because she didn't win a contest at school.

First, you would *connect* by removing all of your distractions (putting away phone, stopping what you are doing), turning your attention to her, and making eye contact with her.

Next, you would show how her actions *affected you* by having an upset look on your face and tone in your voice to show you understand her emotions.

After this, you would *listen* to what she tells you and then clarify details to show Deidre you are invested in the conversation.

Lastly, you would *mirror* the interaction back to Deidre by paraphrasing what she told you to show you care about her thoughts and feelings.

By using this technique, children will be able to see and feel that you are listening, caring, and involved in what they are telling you. You want them to feel that they can come to you and trust you about anything going on in their life, big or small.

Watch [this video](#) from Jennifer Kolari (Connected Parenting, 2020) for an overview of the CALM technique.



Figure 2. A parent comforts their crying child. (Photo Source: [codewan](#), [CC0](#))

Key Takeaway

- CALM: A framework for communication – Connect – Affect -Listen – Mirroring

Reference

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I-MESSAGES

I-messages are effective communication techniques to use when talking with another person. The goals of I-messages are to keep interactions positive, and avoid blame, guilt, judgment, and shame. I-messages express your own feelings, while “you” messages place assumptions or judgments onto the person with whom you are speaking. A “you” message would sound like, “You need to pay more attention!” or “You shouldn’t be acting like that” (Eastman et al, 2006).



Figure 1. A child playing with blocks (Photo Source: [Tatiana Syrikova](#), [Pexels License](#))

Here is an example of turning a “you” message into an I-message. The “you” message might be something like, “You always disobey our rules and do whatever you want!” However, turning it into an I-message might sound more like this, “I feel angry when you disobey the rules we’ve laid out for you because I feel disrespected. I like it when you obey the rules, guidelines, and boundaries we have in this family because it makes me feel like you care about me, yourself, and the whole family.”(AAP, 2015).

How to use this method:

- “I feel ____
- When ____
- Because ____
- I like ____”

This outline expresses how you feel about a given situation, action, or behavior by explaining what you feel, why you feel that way, and what you would like the desired behavior to be (Heath, 2013).

Examples

I-messages can be used in a variety of contexts. Here are a few examples.

- Expressing concern about safety: “I feel worried and anxious when it is one hour past the time you were to be home and I have not heard from you because I fear something bad has happened. I like it when you keep in touch with me if you might be late. I need you to contact me if you will be late.” “I feel worried when I see you climbing so high on the playground equipment because I’m afraid you might fall and get hurt.”
- Communicating appreciation for helpful behavior: “I feel grateful when you help set the table for dinner because it makes preparing our family meal much easier.”
- Addressing disruptive behavior: “I feel frustrated when you interrupt me while I’m on the phone because it’s difficult for me to focus on my conversation.”
- Expressing positive emotions about achievements: “I feel proud when I see your improved grades because I know how hard you’ve been working on your studies.”
- Addressing household responsibilities: “I feel overwhelmed when toys are left scattered around the living room because it makes it challenging for me to keep our home tidy and welcoming.”

Key Takeaway

- I-messages start with the word “I,” express your own feelings to keep communication positive, and help avoid blame and judgment onto the other person.

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CONSTRUCTIVE CHOICES

Constructive choices are a child-rearing strategy where parents provide the child with options for the child when making decisions. This allows children to be involved in making choices in their everyday activities, while still maintaining choices that are positive and safe.

This strategy can help children learn how to make decisions, and it teaches and guides children about how to analyze their decision-making abilities so they can eventually make decisions on their own (NASEM, 2016).



Figure 1. A child playing with toy vehicles. (Photo Source: [Pxfuel](#), [DMCA](#))

How to use this method:

- Limit the number of times you give a child a choice,
- Limit the number of choices you give a child (two to four choices work well),
- Provide developmentally-appropriate choices that keep the child safe and healthy,
- Support the child's decision, and
- Help children think about their choices and the reasoning behind making each decision.

Example

- A caregiver may give a child a choice to keep playing with their toys inside or to clean up the toys and go play outside.

Key Takeaway

- Constructive Choices: Caregivers provide specific options to help guide children's activities and decision-making abilities.

References

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ANTICIPATORY STRUCTURE



Figure 1. A parent talking to their child at their height can help remove stress from a situation. (Photo Source: [Josh Willink](#), [Pexels License](#))

Anticipatory structure is a strategy where caregivers share plans and provide forewarnings to children regarding upcoming transitions between activities. This can help establish routines and facilitate more smooth changes in routines. It also allows time for children to prepare for changes, which can heighten their cooperation when the change happens.

Anticipatory structure is most effective when caregivers provide multiple forewarnings before transitions, give reasoning for what the child is being asked to do, and use age-appropriate language that the child can understand (Bigner & Gerhardt, 2019).

It is helpful for parents to provide praise or compliments for their children as they follow each step and meet the end goal.

Examples

- **Bedtime routine for a toddler:**
A parent tells their 3-year-old, “In 15 minutes, it will be time to start getting ready for bed. We’ll read two stories, brush teeth, and then it’s lights out.” The parent then gives a 5-minute warning and finally announces when it’s time to begin the bedtime routine.
- **School-to-home transition for an elementary student:**
A teacher informs the class, “We have 10 minutes left before the school day ends. Let’s start cleaning up our desks and packing our backpacks.” The teacher then provides a 5-minute and 2-minute warning before the final bell rings.
- **Ending screen time for a teenager:**
A parent reminds their 15-year-old, “Remember, your video game time ends in 30 minutes. After that, we’ll have dinner together and then you can start your homework.” The parent follows up with a 10-minute warning and a final 5-minute countdown.

Key Takeaway

- Anticipatory structure provides forewarnings to changes in activities and can help establish routines and cooperation.

Reference

Bigner, J. J., & Gerhardt, C. (2019). *Parent-child relations: An introduction to parenting* (10th ed.). New York, NY: Pearson

STRUCTURE (WITH FLEXIBILITY): ROUTINES, RULES, DIRECTIONS

Children (and most people of all ages) thrive in flexibly-structured environments. For children, the sense of knowing what to expect typically elicits feelings of safety and security. Caregivers can help children reduce feelings of chaos by providing flexible, but consistent:

- Routines,
- Rules, and
- Concrete, explicit directions with easy-to-understand expectations.

Rules and Routines

In order to maintain consistent routines (e.g., bedtimes, traditions) and rules (e.g., not eating food in certain areas of the house, curfews, wearing a helmet while riding a bicycle) it is important to facilitate and adhere to them as much as possible. Expectations should be developmentally-appropriate and communicated in a manner that can be easily understood.

For instance, perhaps family meals are at 6:30 p.m. because this is the time that everyone gets home from work and school activities. This expectation and all moderations should be communicated with all members on a daily basis but also remain flexible. Exceptions that may change a family mealtime might include attending a school-related activity or having a large family gathering every Sunday at 1:30 p.m.



Figure. Setting routines is particularly important at bedtime.
(Photo Source: [Staff Sgt. Russ Scalf](#))

Video Example

Watch [this YouTube video](#) about creating structure (CDC, 2015).

Directions

Specific, warm, concrete, understandable directions and expectations can improve behaviors, prevent dangerous circumstances, reduce caregivers' frustrations, and foster children's learning of appropriate behaviors. It is most effective to tell children exactly what behaviors you desire.

Here are some further tips:

- **Establish Consistent Routines:** Create predictable daily routines for activities such as mealtimes, bedtimes, and homework. These routines provide a sense of stability and help children understand what to expect. However, be prepared to adjust these routines when necessary, such as during holidays or special events.
- **Set Clear Rules and Expectations:** Communicate rules and expectations clearly and in an age-appropriate manner. Ensure that rules are consistent but can be adapted as children grow and develop new skills. For example, curfews might be adjusted for older teenagers to reflect their increasing maturity and responsibility.
- **Provide Specific Directions:** Give concrete, understandable directions to improve behaviors and prevent misunderstandings. Instead of vague instructions, use specific language that clearly outlines the desired behavior. For instance, say "Please use your walking feet in the library" rather than "Stop that!"
- **Implement Flexible Consistency:** Maintain consistency in core family values and expectations while being willing to adjust how they're implemented based on individual needs or circumstances. This "flexible consistency" approach allows for adaptation while preserving important family principles.
- **Encourage Problem-Solving:** Involve children in decision-making processes and teach them problem-solving skills. This empowers them to navigate challenges and adapt to changing situations, fostering resilience and flexibility.
- **Balance Structure and Individual Needs:** Recognize that each child is unique and may require different approaches. Adjust your parenting style to accommodate individual temperaments, strengths, and challenges while maintaining overall consistency in core values.
- **Foster Open Communication:** Create an environment where children feel comfortable expressing their thoughts and feelings. Regular family check-ins or meetings can be valuable for discussing what's working and what needs adjustment.

Consistency, Consistency, Consistency with Warmth



Figure 2. Children playing together comfortably. (Image Source: [Caitlin Guinazu](#))

Research shows that children’s abilities to anticipate change, use appropriate behaviors, and develop independence are fostered by warm, safe, stable, nurturing, caring, compassionate caregiving on a consistent basis! Warmth and responsiveness is showing love, affection, and emotional support. This means that routines, rules, directions, expectations, and consequences should be responded to or applied every time in a nurturing, warm, consistent manner (CDC, 2019).

Examples

- Watch [this YouTube video](#) to learn how to provide quality directions (CDC, 2015).
<https://youtu.be/zUSosdCjefo>
- Sometimes it can be hard to transition. This [short YouTube video](#) from Todd Sarner (Transformative Parenting with Todd, 2024) that shares Collect and Direct technique.
<https://youtu.be/915Vf5rmaNI>

Key Takeaways

- Providing a warm, close, nurturing, and openly-communicative environment with consistent routines, directions, and rules with reasonable flexibility are key for eliciting feelings of predictability and security (APA, 2014).
- It is not too late to learn, teach, and reinforce these skills for caregivers and youth. However, it may take time and practice to elicit changes.

References

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FOUR PLUSES AND A WISH

Four Pluses and a Wish is a parenting strategy aimed at creating cooperation and motivation for children to comply with parental requests (Heath, 2013). Along with leading to better behavior outcomes, it also works to foster healthy communication and is a good example of parental supportive speech. Four Pluses and a Wish involves the parent providing three pluses, which are positive actions toward their child, before making a request. This helps the child feel more respected by their parents and therefore more likely to comply with parental wishes and requests. There are four steps to follow for this strategy.



Figure 1. A parent works with their child to create a gingerbread dessert. (Photo Source: [Alan Wat](#), CC by 2.0)

How to use this method:

Plus 1

Smile: The parent approaches the child with a smile and a happy facial expression to show the child that nothing is wrong.

Plus 2

Relaxed body language: The parent displays a relaxed body and uses a friendly voice to communicate friendliness and acceptance toward the child.

Plus 3

Say the child's name: For children, hearing a parent say their name feels more personal, is affirming, and helps make them feel included and respected in the communication.

Plus 4

Compliment the child: Make a positive comment on something the child is doing, wearing, etc., to make the child feel appreciated.

The Wish

Make the request: After providing four pluses for the child, the parent can then make a request (the wish).

Examples

Here are examples of how to implement this strategy:

Example 1: Bedtime Routine

1. Plus 1 (Smile): Parent approaches the child with a warm, genuine smile.
2. Plus 2 (Relaxed body language): Parent kneels down to the child's level, maintaining an open and relaxed posture.
3. Plus 3 (Say the child's name): "Sasha,"
4. Plus 4 (Compliment): "I love the beautiful artwork you created today."
5. The Wish: "It's time to start getting ready for bed. Can you please put away your crayons and we'll head upstairs to brush your teeth?"

Example 2: Cleaning Up Toys

1. Plus 1: Parent enters the room with a friendly expression.
2. Plus 2: Parent sits down next to the child, showing a calm demeanor.
3. Plus 3: "Rashad,"
4. Plus 4: "Wow, what an amazing fort you built! How did you make it?"
5. The Wish: "It's almost dinnertime. Could you please clean up your toys and wash your hands?"

Example 3: Homework Time

1. Plus 1: Parent approaches with an encouraging smile.
2. Plus 2: Parent stands nearby with a relaxed stance.
3. Plus 3: "Royce,"
4. Plus 4: "I noticed how focused you were while playing your video game. That's impressive!"
5. The Wish: "It's time to switch gears now. Can you please turn off the game and get started on your homework?"

Example 4: Helping with Chores

1. Plus 1: Parent enters with a cheerful expression.
2. Plus 2: Parent leans casually against the doorframe.
3. Plus 3: "Teagan,"
4. Plus 4: "I really appreciate how you've been keeping your room tidy lately."
5. The Wish: "Would you be willing to help me fold the laundry for about 15 minutes?"

Key Takeaways

Four Pluses and a Wish

- Three positive actions are made toward the child before making a request.
- This method promotes cooperation and compliance with requests.

References

Heath, P. (2013). *Parent-child relations: Context, research, and application* (3rd Ed.). Pearson.

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POSITIVE LANGUAGE

POSITIVE LANGUAGE

The manner in which parents communicate with their child can largely determine the child's own communication methods and language development and can affect the child's vocabulary and speaking skills over time. Using positive language can greatly support and encourage the child as they get older (Feldman, 2019).

How to use this method:

- Respond quickly and kindly to a child's needs.
- Provide a listening ear or advice even at inconvenient times.
- Be responsive and consistent.
- Use positive and encouraging words when speaking with a child.
- Set a good example of how to talk to other people in public as well as at home by using manners and respect, such as saying "please," "thank you," and "I'm sorry."
- Avoid sarcasm or ill-willed teasing.
- Use positive, communicative forms of guidance and avoid any form of violent discipline such as spanking.
- Spend time alone with each child, even at a young age. Quality time coupled with open communication encourages the child to feel safe and comfortable with their parents and creates a reliable relationship (AAP, 2019).



Figure 1. Communicating on a child's level can remove stress from an otherwise concerning situation. (Photo Source: [Taryn Elliott, Pexels License](#))

Examples

- Peter and Dan's mother always says, "Thank you for picking up your toys" after they put away the toys in their playroom.
- Kaila returns home from school and says that she has had a bad day at school. Kaila's dad asks her what had made it a bad day and listens to Kaila explain what had happened.

Positive Discipline Techniques

Extending beyond positive language is using **positive discipline techniques**. The next set of strategies covers are aimed to teach and guide children rather than simply punish them. These strategies focus on:

1. Setting clear expectations
2. Providing consistent consequences
3. Reinforcing positive behaviors
4. Teaching problem-solving skills

Effectiveness and Long-term Benefits

Positive discipline techniques are often more effective in shaping behavior and promoting long-term development compared to punitive approaches. These methods:

- Foster self-discipline and intrinsic motivation in children
- Teach valuable life skills such as problem-solving and emotional regulation
- Promote a growth mindset, encouraging children to learn from mistakes

Strengthening Relationships

One of the key advantages of positive discipline is its impact on parent-child relationships:

- It maintains a connection between parent and child, even during challenging moments
- Builds trust and mutual respect
- Encourages open communication, making children more likely to confide in parents

Emotional and Psychological Well-being

Positive discipline techniques contribute to better emotional and psychological outcomes:

- Reduce anxiety and stress in both children and parents
- Boost children's self-esteem and confidence
- Minimize the risk of negative emotional impacts associated with harsh disciplinary methods

Teaching Responsibility

These techniques are particularly effective in fostering responsibility:

- Encourage children to take ownership of their actions
- Promote critical thinking about consequences
- Involve children in problem-solving, leading to better decision-making skills

Adaptability and Flexibility

Positive discipline offers a flexible framework that can be adapted to various situations and developmental stages:

- Can be tailored to individual children's needs and personalities
- Evolves as children grow and mature
- Applicable in diverse cultural and family contexts

Modeling Positive Behavior

By using positive discipline techniques, parents model important social skills:

- Demonstrate respectful communication and conflict resolution
- Show how to manage emotions effectively
- Illustrate the importance of empathy and understanding

Key Takeaway

- Using phrases such as, "I'm sorry," "please," "thank you", and "I love you" often for children of all ages are recommended!
- Positive discipline techniques are aimed to teach and guide children rather than simply punish them.

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REWARD-ORIENTED PARENTING AND POSITIVE REINFORCEMENT

REWARD-ORIENTED PARENTING AND POSITIVE REINFORCEMENT

There are many ways to increase the likelihood of children exhibiting desirable behaviors by using positive reinforcements and rewards. Positive reinforcements and rewards are based on operant conditioning. **Operant conditioning** is a learning method where behaviors are modified through consequences. It was developed by psychologist B.F. Skinner and is based on the idea that we tend to repeat behaviors that lead to positive outcomes and avoid behaviors that lead to negative outcomes. For these parenting strategies, we are focused on building off of rewards. Below is a reminder of promoting positive behaviors in operant conditioning.

Positive Types of Consequences

Positive Reinforcement: *Adding a desirable stimulus to increase a behavior*

Example: Praising a child for cleaning their room

Negative Reinforcement: *Removing an unpleasant stimulus to increase a behavior*

Example: Turning off an annoying alarm when a child wakes up on time

Application

In parenting, understanding these concepts can help in shaping children's behavior effectively and positively. It's important to note that reinforcement (both positive and negative) is generally more effective in the long term than punishment for encouraging desired behaviors.

Parents or teachers may wish to reinforce children for:

- Listening attentively;
- Using appropriate manners (e.g., saying "please," "you are welcome," and "thank you");
- Moving and talking in a manner appropriate for the environment (e.g., using "library voices;" "walking feet");
- Playing nicely;
- Completing tasks without reminders; and
- Calling or texting if they will be late.

Examples of Reinforcement

- Complimenting a child's **behavior** (e.g., "I really like the way you put all of your clothes away in your room");
- Praising a child's **actions** (e.g., "I am proud of how hard you studied for your spelling quiz.");
- Giving additional privileges;
- Clapping or cheering;
- Thanking them for behaving a certain way (e.g., "Thank you very much for asking such a detailed question;" "I really appreciate you using your inside voice while we were at the museum.");
- Making sure they overhear you telling someone else about their positive behavior;
- Smiling at them; and
- Giving tangible rewards (e.g., stickers, incentives).

Examples from Centers for Disease Control and Prevention. (2019). *How to use rewards*. Retrieved from <https://www.cdc.gov/parents/essentials/consequences/rewards.html>

Incentives

In order for these methods to be effective, rewards or incentives

- be important or valuable to the child,
- occur immediately after the desired behavior, and
- consistently be implemented.

To learn how to create a reward program, visit [the CDC's website](#) for information.



Figure. A child panicking in public. (Photo Source: [pxfuel](#), [DMCA](#))

Examples to consider

Unfortunately, without realizing it, we can unintentionally reward inappropriate behavior. Take this example:

Here is a common example of (unintentionally and positively) rewarding **inappropriate** behavior: An aunt provides candy to her nephew every time he throws a tantrum in the store because he wants candy at the checkout lane. *The aunt reinforces the poor behavior (e.g., a tantrum) by providing reinforcers (e.g., candy and attention) every time he throws a tantrum at the grocery store.*

Here is an example of *positively rewarding* the same child to *stop* the tantrums: Now that this child throws a tantrum with his parents when they go to the grocery store, his parents provide their son with candy only when he does not throw a tantrum in the store. *His parents reinforce the appropriate behavior (e.g., not throwing a tantrum) by providing reinforcers (e.g., candy and attention) every time they go to the grocery store and he refrains from throwing a tantrum.*

Positive Opposites

Alan Kazdin's concept of "positive opposites" is a powerful tool based on behaviorist principles in child behavior management and parenting. This approach focuses on reinforcing desired behaviors rather than punishing unwanted ones, making it an effective strategy for promoting positive change in children. **Positive opposites** are instructions or directions given by parents that avoid using negative words like "stop," "no," or "don't." Instead, they provide clear, specific guidance on what the child should do. This method is part of Kazdin's Parent Management Training (PMT) program.

Key Principles

1. **Focus on Desired Behavior:** Rather than emphasizing what a child shouldn't do, positive opposites direct attention to the behavior parents want to see.
2. **Clear Communication:** Instructions are short, specific, and framed positively, leaving no room for misinterpretation.
3. **Immediate Reinforcement:** As soon as the child begins to follow the instruction, parents are encouraged to provide immediate, specific praise.

Examples of Positive Opposites

- Instead of "Stop interrupting," say "Please wait your turn."
- Rather than "Don't leave your shoes in the hallway," use "Please put your shoes in the closet."
- Instead of "Stop screaming," say "Please make your voice quieter."

Implementation

To effectively use positive opposites:

1. **Identify the Unwanted Behavior:** Determine what behavior you want to change.

2. **Define the Positive Opposite:** Clearly articulate the behavior you want to see instead.
3. **Create Opportunities:** Provide chances for your child to practice the desired behavior.
4. **Reinforce Consistently:** Use praise and rewards to reinforce the positive behavior when it occurs.

Benefits

Positive opposites:

- provide clear goals for children, reducing confusion about expectations.
- focus on skill-building rather than punishment, promoting long-term behavioral change.
- create a more positive parent-child interaction, potentially reducing conflict

Example

Here is a short 5- minute [You Tube video](#) from Dr. Jaqcue that shares more about positive opposites (Doctor Jacque, 2022).



One or more interactive elements has been excluded from this version of the text. You can view them online here: <https://open.maricopa.edu/psyparent/?p=181#oembed-1>

Key Takeaways

- **Positive Reinforcement:** Adding a desirable stimulus to increase a behavior (e.g., praising a child for cleaning their room).
- **Negative Reinforcement:** Removing an unpleasant stimulus to increase a behavior (e.g., turning off an annoying alarm when a child wakes up on time).
- **Effective Reinforcement:** Rewards or incentives must be valuable to the child, occur immediately after the desired behavior, and be consistently implemented.
- **Unintentional Reinforcement:** Parents can accidentally reward inappropriate behavior (e.g., giving candy to stop a tantrum).
- **Positive Opposites:** Alan Kazdin's concept of providing clear, specific guidance on desired behaviors rather than focusing on unwanted behaviors (e.g., "Please wait your turn" instead of "Stop interrupting").

References

Centers for Disease Control and Prevention. (2019). *How to use rewards*. Retrieved from <https://www.cdc.gov/parents/essentials/consequences/rewards.html>

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INDUCTION

Inductive discipline (induction) is a parenting approach that focuses on guiding children through reasoning, explanation, and open communication. Induction can be used to help youth develop empathy (Krevans & Gibbs, 1996), guide their behaviors, take ownership of their actions, learn acceptable behaviors, and understand how their actions may impact themselves (self-centered induction) and others (other-oriented induction) (Heath, 2013).

Key Aspects of Inductive Parenting

1. **Explanation of Rules:** Parents explain the reasons behind rules and expectations rather than simply imposing them.
2. **Empathy Development:** Inductive discipline encourages children to consider how their actions affect others, fostering empathy and prosocial behavior.
3. **Problem-Solving:** This approach empowers children to find solutions to issues independently.
4. **Positive Reinforcement:** Parents use praise and encouragement to reinforce good behavior.

How to use this method:

When you have a child's full attention:

- Explain how one's actions can affect themselves and others (positively and negatively).
- Use a child's actions as an example to discuss and recommend expectations for acceptable behavior.
- Model desired behaviors for a child to imitate.
- Use others' actions as examples to discuss and assess how behaviors can impact others' feelings.
- Encourage, discuss, and reward desired behaviors.
- Explain and discourage undesirable actions.
- Be consistent and proactive by communicating expectations, discussing outcomes, and identifying feelings related to behaviors on an ongoing basis.



Figure. Riding a bicycle in the road can be dangerous, but explaining that to a child requires patience and understanding. (Photo Source: [Pixabay](#), [Pixabay License](#))

Children reared in an environment that uses this approach tend to have higher moral reasoning, internalized standards for behaviors, prosocial skills, and resistance to external influences when compared to their peers who have not been exposed to this technique (Bannon, 20100).

Examples

- Toddlers and Preschoolers
 - Explain safety rules simply: “Don’t touch. It’s hot. You’ll get burned.”
 - Offer choices within limits: “Would you like an apple or banana for snack?”
- School-Age Children
 - Discuss the importance of completing homework: “Finishing your homework helps you understand the subject better and prepares you for tests.”
 - Explain social rules: “We use indoor voices in the library so everyone can concentrate on reading.”
- Teenagers
 - Collaborate on curfew rules: “Let’s agree on a reasonable time for you to be home, considering your safety and our need for sleep.”
 - Discuss responsible social media use: “Let’s talk about how your online posts might affect your future opportunities and relationships.”
 - Here is a short YouTube video (1-min) on Induction for teens (NewsNet, 2020):
<https://youtu.be/rLxk-pR6VVg?si=FgM2dWDnGpqvR4hW>

Key Takeaway

- Induction is used to help children understand how their behaviors affect themselves and others, take ownership of their actions, and guide them to engage in acceptable behaviors.

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NATURAL AND LOGICAL CONSEQUENCES

Caregivers can use both natural and logical consequences for children to learn better behaviors. Both natural and logical consequences encourage children to take responsibility for their actions and behaviors, but in different ways (Matthews, 2017).

Natural consequences occur as a direct result of a child's behavior or choices, without any interference from parents or caregivers. For example, Sofia leaves her favorite hair styling doll outside overnight. It rains on Sofia's doll and ruins its hair. Now Sofia's doll is ruined and she is no longer able to style the doll's hair. Natural consequences allow children to learn from the natural outcomes of a situation and logical consequences allow the parent to set the consequences of a child's undesired actions or behaviors (Morin, 2019; Allen & Boelter, 2016).

Logical consequences are directly related to the child's behavior and are designed to help them learn from their actions. Unlike punishments, logical consequences are not meant to be punitive or shame-inducing. Instead, they provide a learning opportunity for the child to understand the impact of their choices. Logical consequences work best when consequences are immediate and consistent. It is also important to talk with the child about the behavior and to discuss what alternative behaviors would be better to use (Wise, 2019). For example, General example: Juan hits a baseball into his neighbor's yard and breaks the neighbor's window. Juan's parents require Juan to apologize to the neighbor and to complete chores around their own home in order to pay for the neighbor's broken window. When implementing logical consequences, parents should follow the "3 R's": *Related*: The consequence should be directly connected to the behavior. *Respectful*: It should be communicated and enforced in a kind manner. *Reasonable*: The consequence should be appropriate for the child's age and understanding.

When Not to Use Natural Consequences

While natural consequences can be effective, they are not appropriate in all situations. Parents should intervene when:

1. The child's safety is at risk
2. The consequence may harm others
3. The child is too young to understand the connection between their action and the consequence



Figure 1. A young girl plays with a toy doll. (Photo Source: [Graham Crumb/Imagicity.com](https://www.imagicity.com/), CC BY-SA 3.0)

When Not to Use Logical Consequences

Logical consequences are most effective when:

1. Natural consequences are not sufficient or appropriate
2. The child is old enough to understand the connection (typically age 2 and above)
3. The consequence can be consistently enforced

Examples

Natural consequences examples

Toddlers and Preschoolers (Ages 2-5)

- Refusing to eat lunch: Natural consequence – feeling hungry later
- Not putting toys away: Natural consequence – toys may get lost or broken

Elementary School (Ages 6-11)

- Forgetting homework: Natural consequence – receiving a lower grade
- Not wearing a raincoat: Natural consequence – getting wet in the rain

Teenagers (Ages 12-18)

- Staying up late: Natural consequence – feeling tired the next day
- Overspending allowance: Natural consequence – not having money for desired activities

Logical consequence examples

Toddlers and Preschoolers (Ages 2-5)

- Behavior: Throwing toys
- Logical consequence: Toys are removed for a short period

Elementary School (Ages 6-11)

- Behavior: Not completing homework
- Logical consequence: No TV time until homework is finished

Teenagers (Ages 12-18)

- Behavior: Missing curfew
- Logical consequence: Earlier curfew for the next outing

For definitions and examples of natural and logical consequences see the [Dreikurs](#) chapter.

For [short YouTube video](#) on natural and logical consequences, watch Quick Tips for Families: Natural and Logical Consequences (TBSP Memphis, 2021). <https://youtu.be/2JUk1ipMmMk?si=ALPtxRoajWmWqrgW>

Key Takeaways

- Natural consequences are when a child learns from and experiences the natural outcomes of situations.
- Logical consequences are when parents set the consequences of a child's behaviors.
 - This works best when the consequences are immediate and consistent.

References

Allen, R. A., & Boelter, L. A. (2016). *Using natural and logical consequences*. Retrieved from <https://extension.umn.edu/encouragingrespectful-behavior/using-natural-and-logical-consequences>

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NO-LOSE METHOD

The **No-lose Method** is a democratic approach that results in caregivers and children resolving conflict in a manner in which all parties are satisfied with the solution. The No-lose Method, also known as Method III or collaborative problem-solving, is a parenting strategy that aims to resolve conflicts between parents and children in a way that satisfies both parties' needs. This approach, developed by Dr. Thomas Gordon as part of Parent Effectiveness Training (P.E.T.), emphasizes mutual respect, cooperation, and finding solutions that work for everyone involved.

How to use this method:

- **Define:** All parties communicate their perspectives of the “problem”.
- **Brainstorm Solutions:** All parties list all possible solutions to resolve the issue.
- **Assess Solutions:** All parties decide and discuss how they feel about all of the solutions.
- **Best Solution:** All parties decide upon and agree to implement the best solution.
- **Plan in Action:** All parties put the best solution into practice.
- **Follow-Up:** Adult(s) proactively discuss the problem and solution with the child(ren) to revisit the situation.

Key Principles of the No-Lose Method

Equal Power: Both parent and child have equal say in finding a solution.

Mutual Acceptance: The solution must be acceptable to both parties.

Participation: Involving children in decision-making increases their motivation to follow through.

Critical Thinking: Encourages both parent and child to think creatively about solutions.

Reduced Hostility: Eliminates the need for power struggles and promotes positive relationships.

Tips to Implement No-Lose Method

Let children know that you'll be trying a new approach to solving problems together where everyone's needs are considered and no one loses. For younger children, you might say something like, “We're going to try a new way of solving problems where we all work together to find solutions that make everyone happy.” Create a positive environment for problem-solving: Choose a calm moment to introduce the concept, not during a conflict. Sit down with your children at their level to avoid appearing intimidating. Use a neutral or positive tone when discussing the method. You may wish to demonstrate the process outlined above. You might want to practice with a simple, non-contentious issue first to help them understand the process. For younger children, consider using visual aids to make the process more engaging: Create a “solution book” where you write down or draw ideas or use a whiteboard or large paper to list problems and solutions. It is also good to model the behavior by using the method by applying it to your own conflicts or decisions. Finally, invite children to contribute their ideas and solutions. This involvement increases their motivation to

follow through on the agreed-upon solutions. It is important to be patient and consistently use the approach to reinforce its importance, and praise the process. Acknowledge your children's efforts in using the no-lose method.

Challenges and Considerations

- **Time Investment:** Initially, this method may take more time than other positive parenting approaches.
- **Consistency:** Parents need to consistently apply the method for it to be effective.
- **Age Appropriateness:** Adapt the complexity of discussions based on the child's developmental stage.
- **Flexibility:** Be prepared to revisit solutions if they're not working as intended.

Example

- **Define:** The "problem" is that siblings are fighting over a book.
- **Brainstorm Solutions:** The children can take turns reading the book; each child can read a different book; both children can read with each other at the same time with that book; a parent can remove the book so both children need to find different books.
- **Assess Solutions:** Both children want to read the book together.
- **Best Solution:** The children and parent agree that the children will read the book together as long as the children do not fight. If they fight while reading the book, the parent will remove the book and both children will need to take a break.
- **Plan in Action:** The children read the book together and do not fight.
- **Follow-Up:** Later that same day, the parent asks if they both enjoyed reading that book together. Both children agreed it was an enjoyable time. The parent praised them for not fighting and for solving the issue.



Figure 1. Siblings. (Photo Source: [AnukEvo](#), [CCby-SA 4.0](#))

Here is a [short YouTube video](#) from Dr. Gordon (ParentEffectiveness, 2018). In this video, Dr. Thomas Gordon, the developer of Parent Effectiveness Training (P.E.T.), discusses different parenting styles and introduces the no-lose method of resolving conflicts between parents and children. (Note we will be learning about parenting styles in later chapter of this book). <https://youtu.be/TpAY3Bz5M6w?si=WIKuBIWXMP79NoJv>

Key Takeaways

- This method is used to resolve conflict where every party involved discusses their perspective on the problem and possible solutions.
- Steps include: Define the problem clearly. Brainstorm possible solutions. Evaluate the solutions together. Choose a mutually acceptable solution. Implement the decision. Follow up to check if it's working.
- A solution that satisfies all parties is decided and agreed upon.
- This strategy can take time. Be consistent, follow the process, and be consistent.

References

- Gordon, T. (1970). *Parent effectiveness training: The no-lose program for raising responsible children*. P. H. Wyden.
- Heath, P. (2013). *Parent-child relations: Context, research, and application* (3rd Ed.). Pearson.

PROBLEM OWNERSHIP

Problem ownership is an important tool to utilize when caregivers are communicating with children because it can help avoid blaming and arguing. This is when caregivers take time to reflect on an issue and think, “Whose problem is this? Who is actually upset about this?” Sometimes we may think the child is the one with the problem when actually *we* are the ones getting upset. In reality, the child is just fine – *we* are the ones that have a problem. This is when a caregiver should own the problem.

If a caregiver owns the problem, it is a perfect opportunity to utilize effective communication strategies such as *I-Messages* to express one’s thoughts and feelings regarding the problem.

If, however, the child owns the problem, caregivers can use this as a chance to practice adult-child interaction techniques such as active listening and the *CALM method* to connect with the child concerning the problem.

Problem ownership helps caregivers determine which problems they need to figure out themselves, and which problems they should allow their children to figure out. This provides a learning experience to gain responsibility for one’s actions that can be utilized in other relationships as well.

Example

Third-grader tells his dad, “Caleb is not my friend anymore!”

Dad: (active listening) “So, I hear that you are upset. What happened?”

Third-grader: “Caleb knocked down our entire snow fort during recess today! It took us three entire recesses to build it!”

(Dad feels sad for his son and wants to advocate for his son. Dad contemplates calling the teacher or Caleb’s parents. After reflecting, Dad asks himself, “Whose problem is this? It’s my son who is upset. I need to help him navigate this and let him know he can talk to me about these types of issues.” Dad decides to ask open-ended questions and use active listening to learn more about the entire situation.)

Dad: Why don’t you tell me what happened.

Third-grader: Well... (child has the opportunity to retell the incident and decide for himself, with his dad’s nurturing and understanding support, what to do about the problem).

This type of interaction allows a parent to provide support while assisting the child with ways to resolve or work through a problem.



Figure 1. An elaborate snow fort. (Photo Source: [brothersforever](https://www.brothersforever.com))

Key Takeaways

- Problem ownership is when an issue is reflected upon and analyzed to determine who is upset and who owns the problem in a situation.
- A solution can be determined based on who owns the problem.

References

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REDIRECTING

DIANA LANG; JACK MAASS; AND ALISA BEYER

Redirection: Verbal and Physical

Redirection in parenting is a communication technique that guides a child's behavior from an undesirable action to a more appropriate one. Verbal and physical redirection helps promote desirable behaviors by directing children's attention to a different activity, toy, or behavior. These strategies help teach *appropriate behavior*, prevent injuries, reduce punishments, remove children from situations, and promote learning and exploration. The goal is to provide children with easy-to-understand alternative actions (verbally and/or physically) instead of using threats, punishments, or telling children what not to do.

How to Use Verbal and Physical Redirection

1. Maintain eye contact and come down to the child's level. Let children know that the act they are performing is unacceptable by using a firm, nurturing voice.
2. Explain why the behavior is unacceptable in a clear, consistent, developmentally appropriate manner. This will help children associate these words with the undesirable action.
3. Encourage children to practice the desired outcome immediately. For example, instead of telling children not to stand on chairs, verbally explain that they need to sit down while gently touching them to help them sit down carefully.
4. Use physical and verbal redirection to foster children's curiosity. For instance, encourage them to participate in desired acts that they will undoubtedly want to join.
5. Positive language is important. Rather than emphasizing what not to do, redirection highlights what the child should do instead.
6. Provide positive reinforcement and praise for completing the act in a desirable manner.
7. An important part of redirection is validating the child's emotions before suggesting an alternative action

Verbal redirection is effective without physical redirection, but physical redirection is not effective without verbal redirection. As in most forms of child-rearing, communication is a pivotal component of effective parenting strategies. Physical redirection tends to be more effective with younger children because they are still developing their language comprehension. As children develop additional cognitive and language skills, physical redirection should be used less frequently and verbal redirection should be used more often. An extremely important part of effective physical redirection is adding a gentle, nurturing touch simultaneously with the verbal redirection.

Benefits of Redirection

1. Teaches problem-solving skills
2. Reduces the need for punishment
3. Maintains a positive parent-child relationship
4. Encourages appropriate behavior through modeling

Examples

Correct and incorrect examples of redirection are shown below.

VERBAL REDIRECTION

Incorrect

1. "Stop running in the kitchen, you'll split your head open!"
2. "I like your jacket, but don't leave it laying on the ground."
3. "Stop standing on the chair, you are going to get hurt!"

Correct

1. "The kitchen is not a place to run, walk when you are in here, please."
2. "I like your jacket, please hang it up after you take it off."
3. "We do not stand on chairs. Let's go outside and play in your tree house."

PHYSICAL REDIRECTION (WITH VERBAL REDIRECTION)

Incorrect

4. Grab the child's arm to make him stop running.
5. Throw the child's jacket at her after she leaves it laying on the chair.
6. "Stop standing on the chair, you are going to get hurt!"

Correct

4. "The kitchen is not a place to run, please walk when you are in here," while gently touching the child's arm to slow him down to a walking pace.
5. "I like your jacket, please hang it up when you take it off." Gently touch the child's arm to guide her to the jacket and then to the coat hook.
6. "We do not stand on chairs, we sit on them," while gently and immediately, touching the child's leg and arm to help her get to a seated position.

Common Mistakes in Using Redirection

Overusing Redirection

1. Using it as a go-to response for all behaviors
2. Relying on redirection instead of addressing underlying issues
3. Employing it too frequently, potentially confusing the child

Poor Implementation

1. Not explaining the reason for redirection
2. Failing to acknowledge the child's feelings before redirecting

3. Redirecting to an unrelated activity rather than a similar, more appropriate one

Inconsistency

1. Not following through with redirection consistently
2. Applying redirection differently among siblings or in various situations
3. Mixing redirection with punitive measures, sending mixed messages

Ineffective Communication

1. Using negative language instead of positive phrasing
2. Not providing clear, age-appropriate explanations
3. Neglecting to model the desired behavior

Timing and Approach

1. Attempting to redirect when the child is highly emotional or dysregulated
2. Not taking the time to connect with the child before redirecting
3. Rushing the redirection process without allowing for reflection

Lack of Follow-up

1. Failing to discuss the incident after the child has calmed down
2. Not recognizing efforts and achievements in positive behavior
3. Missing opportunities to reinforce learning from the redirection

Key Takeaways

- Verbal redirection should always include explanations of the correct action that a child can understand while using a gentle, nurturing voice.
- Avoid using threats and telling children what not to do.
- Physical redirection should always be used in combination with verbal redirection.
- Consistent language is key for effective redirection so children associate the same words with undesirable actions.
- It is important to use the same steps and words if children repeat the same behavior. Consistency is key when reinforcing positive behaviors and deterring negative behaviors.

References

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TIME-INS AND TIME-OUTS



Figure 1. A parent talking to their child. (Photo Source: [piqsels](#), [CC0](#))

Time-ins are a positive child guidance strategy in which the caregiver stays with the child until they are both calm and can communicate about the issue at hand. When using a time-in the caregiver should stay with the child, and listen to the child and what they are feeling. Once the child has calmed down then the caregiver and child can discuss the child's behavior and what needs to be changed. Time-ins allow for children to not feel threatened and learn in a positive way. The caregiver and child are able to connect reducing power struggles since everyone's feelings and needs are considered (Siegel & Bryson, 2016).

A more common and somewhat opposite approach is the use of time-outs. **Time-outs** are a less positive approach and can be less effective compared to time-ins. Time-outs are where a child is left to sit alone somewhere away from the caregiver for a set amount of time. Time-outs aims to stop undesirable behavior by withholding attention or interaction. Time-outs are sometimes used as a consequence of specific behaviors (e.g., hitting). To learn about time-outs, such as how and when to use them, visit the [CDC's tips for time-out](#) and [CDC's steps for effective time-out](#).

Example

Watch [this video from the CDC](#) to learn about using time-outs.

Time-in or Time-out?

Both time-ins and time-outs are used to:

- stop undesirable behavior,
- help children learn better coping skills, and
- give parents and children a chance to calm down.

Research shows that time-out can be effective for managing challenging behaviors in children aged 3–7 when used appropriately (Evertt et al, 2010). It is important to understand that children at this age do not learn well from explaining, lecturing or appealing to a sense of logic. They are at a “show me” developmental stage, not an “explain it to me” stage. (For younger children, it's best to ignore the

bad behavior. Avert your gaze, put them down or leave the room.) The American Academy of Pediatrics and Centers for Disease Control encourage the use of time-out as a best practice behavior management strategy within the context of a strong, positive parent-child relationship.

“A well-implemented time-out occurs in the context of a warm and supportive parenting relationship that includes a high level of positive parental attention, including specific or labeled praises for appropriate child behavior” (Enneking, 2020). Time-outs work best when paired with positive reinforcement strategies and implemented in a calm, consistent manner. For timeouts to be effective, they must be balanced with “time in” — in other words, giving your child the attention he or she craves when behaving well. Children crave the attention of their parents or caregivers. Parents can fill their “attention tanks” in response to good behavior, they’ll be less likely to seek attention by acting out. Time-in is increasingly favored in positive parenting approaches due to its focus on emotional connection. Time-ins be particularly effective for children who are overwhelmed by emotions and need guidance to process their feelings.

Key Takeaways

- Time-outs work best when paired with positive reinforcement strategies and implemented in a calm, consistent manner.
- Time-outs should be used with a strong, positive parent-child relationship.
- Threats and punishments (e.g., time-outs) are often less effective than positive parenting strategies (e.g., time-ins) for changing behaviors.
- Time-outs are most effective for children 3-7 years old.
- Time-ins can reduce power struggles and calm brains.

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RELATIONSHIP SAVORING (PARENT ACTIVITY)

RELATIONSHIP SAVORING

Savoring is the practice of intentionally extending and deepening the positive emotions that arise from meaningful or joyful experiences. By focusing on and reliving these moments, individuals can boost their emotional well-being and overall satisfaction with life. While much of the research on savoring has centered on personal achievements or individual pleasures, less attention has been paid to savoring positive experiences shared with others—a process known as *relational savoring* (Burkhart et al, 2015).

Relational savoring specifically invites parents to reflect on warm, connected moments with their children. For example, a parent might recall comforting their child after a fall at the playground, focusing on the feelings of closeness, care, and significance that arose in that moment. This practice is more than simply reminiscing; it involves actively engaging with the emotions and meanings embedded in these shared experiences, recognizing the importance of being present and supportive for one's child. Relational savoring has been shown to improve parents' mood and to enhance their satisfaction and closeness with their relationship with their children.

The following guidelines are some simple instructions you can use to engage in the practice of relational savoring (Borelli, 2025; Burkhart et al, 2015).

Activity (courtesy of Borelli, 2025)

First, you will need to select a memory that you would like to savor. Pick a memory where you felt close or in sync with your child. You may wish to savor a memory of a time when you found joy in helping your child grow, or a time when your child needed you and you were there for him/her. It may be a time when you felt like you comforted, soothed, protected, or supported your child. Feel free to choose something that you felt was a milestone or something simple that happens on a daily basis.

Using the memory you have chosen, follow these steps:

1. Bring the memory to mind at a time when you are feeling calm and are able to reflect deeply on it.
2. Recall all of the details of the experience – Where were you? What were you wearing? What was your child wearing? What was the air like? What smells did you notice? What was the temperature like? What happened in that moment that made it special – what did your child say or do? What did you say or do? What about the connection between you and your child allowed that special moment to happen?
3. Next turn your attention to how you felt at the time. What kinds of things were you feeling in

your body? Were you feeling happy and excited, or were you deeply calm and relaxed? Think about where in your body you felt these emotions and try to feel them again.

4. Then try to recall what your thoughts were at the time the memory occurred. For example, were you thinking, “My child really needs me right now. My child feels really close to me.” Or were you thinking “I feel so close to my child at this moment. I feel comfortable being my child’s parent.” Then take a moment to reflect upon what your thoughts are about the memory now.

5. Finally, turn your focus to the future. Focus on how close you felt to your child at the time the memory occurred. How will the bond that you have together affect your relationship in the future? What positive things can you imagine happening as a result of your bond to one another?

In order to have memories to savor, you will find that you need to pay attention to these moments of close connection as they occur between you and your child throughout the day, which requires being emotionally present in the moment.

Example

Prompt: “So now, let’s dive into a moment together. Sit back, relax and get comfortable. We would like you to think about a positive emotional experience you have had with your child. This could be something as simple as going to the park together or laughing over a funny joke, or it could be something as major as taking a vacation or accomplishing a big task together. Try to focus on a single memory of a time when things seemed at their best between you two. We are especially interested in hearing about a time when you found joy in helping your child grow, or a time when your child needed you and you were there for him/her. It may be a time when you felt like you comforted, soothed, protected, or supported your child. Feel free to choose something that you felt was a milestone or something simple that happens on a daily basis.”

Prompt	Example Participant Response
Using as much detail as possible, describe what happened.	“I walked in the door after working night shift and [CHILD] was playing in the living room (I couldn’t see her initially). As soon as I came in the door and said hello, I could hear her start yelling and crawl over to me as fast as she could with a big smile on her face and then pop up on her knees when she reached me and held her hands up to be picked up”
What was the air like? What was the weather like?	“The air was warm and it was a beautiful sunny morning.”
What time of day did the moment occur?	“Morning”
What were you wearing?	“Scrub pants, clogs, a t-shirt”
What was your child wearing?	“A rainbow striped short sleeve onesie and navy shorts that she was wearing for the first time and was a hand-me-down from my 3-year-old.”
How did you feel at the time? Where did you feel those feelings in your body? How did you think your child felt at the time? What thoughts did you have at the time? What were you thinking about your child? About your relationship? What thoughts are you having now about your child and about your relationship? How will the connection you have with your child impact them and you in the future?	“Relaxed, relieved to be home after work, loved, excited to see my kids and husband” “Excited, comforted, loved” “I was excited and happy that she was so excited to see me, I love being a safe place for her, I love that she wants me to hold her all the time and that I am able to comfort her and keep her calm and happy.” “I am so thankful for her and that she is alive and well and that our relationship is so close despite all the challenges we faced in pregnancy and at the beginning of her life.” “I can imagine that it will create a great foundation for a deep and meaningful relationship as she grows into an adult.”

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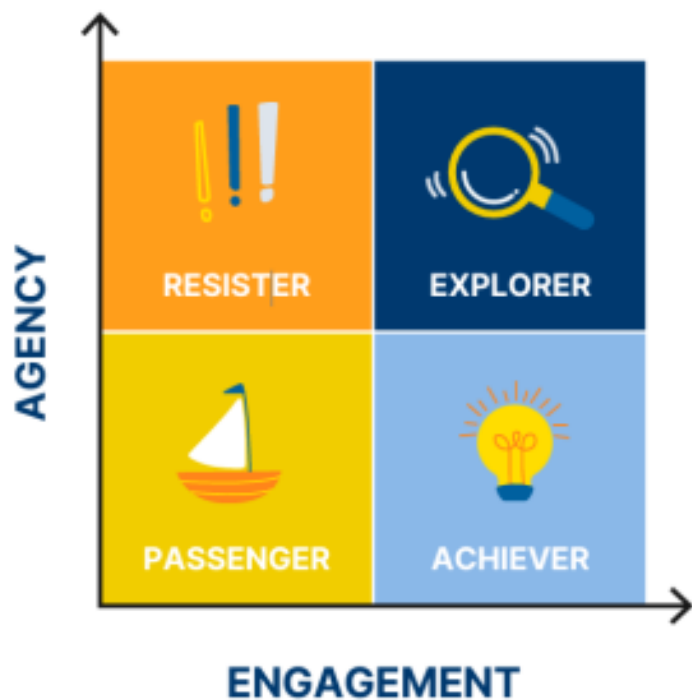
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ENGAGEMENT TOOLS FOR OLDER CHILDREN/TEENS AROUND LEARNING

This section highlights tips and explanations from *The Disengaged Teen* by Andersson and Winthrop. These are to build more engaged students.

Four Modes of Engagement

Andersson and Winthrop identify four distinct modes of engagement that adolescents often cycle through as they navigate school and learning. These modes-Resister, Passenger, Achiever, and Explorer-offer a nuanced framework for understanding how teens relate to their education and what underlying needs or motivations might be at play.



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4 modes of engagement (Andersson & Winthrop, 2025)

Resister

- Teens in Resister mode actively or passively avoid learning and schoolwork. This might look like ignoring assignments, skipping class, acting out, or feigning illness.
- Underneath these behaviors are often deep feelings of inadequacy, invisibility, or disconnection. Rather than being “problem kids,” Resisters are usually kids with problems-struggling silently and signaling that something isn’t working for them.
- With support and understanding, Resisters can often shift quickly to more engaged modes, especially if their underlying issues are addressed.

When working with a resister: Approach with empathy and curiosity, not judgment. Assume underlying struggles, not defiance. “Get in the trenches” with them; offer support side-by-side rather than confrontation. Focus on building trust and safety before addressing academics.

Questions to ask include: “What’s feeling hard for you right now?” “Is there something at school that’s making things tougher?” “How can I support you, even if it’s just listening?” “If you could change one thing about school, what would it be?”

Passenger

- Passengers are the most common group. These students do the bare minimum to get by, often coasting through school without real engagement or enthusiasm.
- They may get decent grades but find classes pointless, boring, or disconnected from their lives. This disengagement puts them at risk of not developing strong learning habits or intrinsic motivation.
- Passengers need help making connections between school content and their own interests, skills, or future goals.

When working with a passenger: Stop nagging-nagging reduces autonomy and motivation. Help them connect school to their interests and real-world relevance. Encourage exploration of personal passions, even if they’re outside your preferences. Give them space to pursue their own interests and support those interests without judgment.

Questions to ask include: “What’s something you’re really passionate about right now?” “How do you feel about your classes—are any of them interesting or useful to you?” “If you could learn anything, in or out of school, what would it be?” “What would make school feel more meaningful for you?”

Achiever

- Achievers appear highly engaged: they show up, complete all assignments, and often earn top grades.
- However, their motivation is largely external-focused on meeting expectations, earning praise, or avoiding failure. Their self-worth can become tied to achievement, making them risk-averse and vulnerable to anxiety or burnout.
- Achievers may lack self-awareness and creativity, focusing only on what the system values rather than what personally excites them. They benefit from encouragement to take risks, explore new interests, and value themselves beyond grades.

When working with an achiever: Encourage healthy risk-taking and learning for its own sake, not just for grades. Help them see that mistakes and discomfort are part of growth. Support their well-being and remind them their value isn’t tied to achievement. Model and discuss self-compassion and balance.

Questions to ask include: “What’s something you’d like to try, even if you might not be the best at it?” “How do you feel when things don’t go as planned?” “What’s something you learned recently that surprised you?” “What do you enjoy about learning, separate from grades or awards?”

Explorer

- Explorer mode is considered the ideal. Explorers are driven by internal curiosity and a sense of agency. They ask questions, pursue topics that matter to them, and persist through challenges.
- These teens are resilient, self-aware, and able to reflect on the meaning and purpose of what they're learning. They are proactive, adaptable, and develop skills that help them thrive both academically and personally.
- Explorer mode is rare-less than 10 percent of students experience it regularly in school-but it is the goal for fostering lifelong learning and well-being.

When working with an explorer: Nurture curiosity and agency; let them pursue deep interests and self-directed projects. Celebrate their initiative and help them connect learning across subjects and to the real world. Offer resources and encouragement, but avoid micromanaging.

Questions to Ask: "What's the most interesting thing you've learned lately?" "What questions do you have about the world right now?" "How can I support your interests or help you go deeper?" "Is there a project or topic you'd like to explore further?"

Learning Cycles

Andersson and Winthrop also describe two contrasting cycles that shape how teens approach schoolwork: the procrastination cycle and the learning-to-learn cycle. These cycles illustrate the difference between patterns that reinforce disengagement and those that foster deeper, self-driven learning. Andersson and Winthrop note that moving from the procrastination cycle to the learning-to-learn cycle requires patience and a shift in adult behavior. For example, instead of sitting beside a teen to "make sure" they do homework, a parent might simply work alongside them, modeling focus and creating a supportive environment without pressure. This subtle change can help teens feel more in control and less defensive, making it easier for them to experiment with new strategies and take ownership of their learning.

The Procrastination Cycle

The procrastination cycle-sometimes called the "nagging-procrastination loop from hell"-is a common dynamic in families with disengaged teens. It unfolds as follows:

- A teen puts off starting their schoolwork, often due to anxiety, boredom, or a sense of overwhelm.
- As deadlines approach, parents become anxious and begin to nag, reminding or pressuring the teen to get started.
- The teen, feeling more stress and possibly resentment, continues to avoid the task or only does the bare minimum, often at the last minute.
- The cycle repeats, with each round increasing frustration, undermining motivation, and reinforcing negative feelings about learning and school.

This loop is exhausting for both teens and parents. It rarely leads to genuine engagement or improved learning habits; instead, it can deepen a teen's sense of inadequacy and erode their confidence in their ability to manage schoolwork independently.

The Learning-to-Learn Cycle

The learning-to-learn cycle is a more productive and empowering pattern. It centers on helping

teens build skills and strategies for managing their own learning, rather than relying on external pressure. Key features include:

- Teens are encouraged to reflect on what helps them learn best, experimenting with different study methods, routines, and environments.
- Parents and educators shift from nagging to supporting autonomy, offering guidance only when requested or clearly needed.
- Teens experience small successes, which build their confidence and sense of agency.
- These positive experiences reinforce a willingness to try new approaches, persist through challenges, and take initiative in their learning.

This cycle is self-reinforcing: as teens develop more effective learning habits and experience genuine progress, their motivation and engagement grow. Over time, this can move them toward the Explorer mode, where curiosity and self-direction drive their learning.

Basic Important Tips

- The 4 modes of engagement are not fixed identities; students can move between them depending on circumstances, support, and environment. Recognizing which mode a student is in can help parents and educators tailor their support, whether that means offering *more autonomy, helping them reconnect to their interests, or providing reassurance and encouragement to take risks*. To move students to the path of the Explorer mode is through understanding, patience, and helping teens build self-awareness and intrinsic motivation, rather than simply pushing for achievement or compliance.
- Parents and educators can work to:
 - Listening First: Students are more likely to open up if they feel heard and understood, not judged or immediately corrected.
 - Validating Emotions: Acknowledging a teen's frustration or apathy (without minimizing or dismissing it) helps them feel respected.
 - Curiosity Over Criticism: Asking open-ended questions about their experiences at school (rather than interrogating or blaming) invites honest discussion.
 - "what is your plan for doing homework? vs why aren't you doing your homework?"
 - Problem-Solving Together: Instead of prescribing solutions, parents can invite teens to brainstorm ways to address challenges, fostering ownership and motivation.
 - Consistency and Patience: Change is gradual. Regular, low-pressure check-ins are more effective than sporadic, high-stakes conversations.

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ENDING TECH WARS: BOOST REAL ENGAGEMENT

Technology today is changing the way we live: more time in front of screens, less time sleeping, cyberbullying, devices stay with one all of the time (unless phones are banned for specific situations or in schools) (Andersson & Winthrop, 2025; Mark, 2003). We can limit technology when it drives disengagement and support ways that technology can foster engagement (Andersson & Winthrop, 2025).

Opportunity Costs

Opportunity cost refers to what children miss out on when they spend time on screens instead of engaging in other activities. Research highlights that excessive tech use can displace critical developmental experiences, such as sleep, physical activity, face-to-face socialization, creative play, and time spent with family. For example, children who spend more than the recommended 1-2 hours per day on screens may sacrifice time that could otherwise be spent on homework, reading, or outdoor activities—each of which is essential for their academic, social, and emotional development (Muppalla et al, 2023). Multiple years of National Survey of Children's Health (NSCH) data (2018-2021) show that preschoolers (ages 3-5) who use screens for two hours or more per day have lower psychological well-being compared to those with less screen time (Kwoh et al, 2024). This includes lower odds of “flourishing,” a measure of positive mental health and social functioning (Kwoh et al, 2024). Over time, these lost opportunities can result in poorer health, weaker social skills, and diminished creativity.

Give Children the Power to Stop

Empowering children to have agency over their tech use is a key strategy for reducing conflict and building self-regulation skills. When children learn to recognize their own patterns and practice stopping on their own, they gain a sense of control and responsibility. This can be fostered by having open conversations about tech habits, encouraging self-reflection on how tech use makes them feel, and collaboratively setting goals for balanced use. When kids see themselves as capable of making healthy choices, they are less likely to resist parental guidance.

Set Limits

Evidence shows that clear, consistent boundaries around screen time are effective in reducing excessive use and its negative effects (Muppalla et al, 2023). The CDC and American Academy of Pediatrics recommend specific daily limits based on age, such as 1-2 hours for school-aged children. Setting limits is most successful when parents explain the reasons behind them, involve children in the process, and enforce them consistently. Limits should also be accompanied by encouragement to engage in alternative activities, such as sports, reading, or family time.

Don't Make Exceptions for Homework

Allowing extra tech time under the guise of “homework” can undermine boundaries and blur the line

between productive and recreational screen use. Studies show that increased screen time—even for educational purposes—often leads to multitasking and distractions, resulting in incomplete assignments and lower academic performance. Establishing a clear distinction between tech used for homework and tech used for entertainment helps reinforce healthy habits and prevents overuse.

Model Healthy Tech Use

Children are highly influenced by the behaviors they observe in adults. Research consistently finds that parents who model balanced, mindful tech use—such as putting devices away during meals or family time—have children who are more likely to adopt similar habits (Muppalla et al, 2023).

Modeling also includes demonstrating how to take breaks, engage in offline activities, and use tech intentionally rather than reflexively.

Articulate How Big Tech Is Monetizing Them (Children)

It's important for children to understand that many platforms and apps are designed to capture their attention and monetize their data. Explaining concepts like targeted advertising, persuasive design, and data mining in age-appropriate ways can help kids become more critical consumers of technology. For instance, you might discuss how social media feeds are engineered to keep users scrolling, or how their online activity is tracked and sold to advertisers. Raising awareness empowers children to make more informed choices and resist manipulative features.

Try Choosing the Time vs. Killing Time

Encourage children to use technology with intention—choosing activities that align with their interests or goals, rather than using screens simply to fill time. Research suggests that active, purposeful tech use (such as creating digital art, coding, or connecting with friends) is associated with better outcomes than passive consumption (like endless scrolling or binge-watching). Help your child plan tech time in advance, focusing on activities that are enriching or meaningful.

Checking In: Is Tech Bringing Them Up or Bringing Them Down?

Regularly invite your child to reflect on how their tech use affects their mood, energy, and overall well-being. Prompt questions such as, “Do you feel better or worse after using your device?” can foster self-awareness and help children distinguish between tech that recharges them and tech that drains them. This practice also opens the door for ongoing dialogue about mental health, online experiences, and personal boundaries.

Tech to Recharge

Not all screen time is detrimental—technology can be a tool for relaxation and self-care when used thoughtfully. Activities like listening to music, watching a favorite show, or playing a calming game can help children unwind and recharge, especially after a busy day. The key is to ensure that tech use for recharging is balanced with other forms of rest and relaxation, such as reading, creative hobbies, or spending time outdoors.

Tech to Connect

Technology can also foster meaningful social connections, especially when used to communicate

with friends and family or to participate in shared interests. Video calls, collaborative games, and social platforms (when used safely and appropriately) can help children maintain relationships and feel less isolated. Encourage your child to use tech as a bridge to real-world connection, such as planning in-person meetups or joining online communities that reflect their passions and values.

Resources

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PROMOTING POSITIVE PARENTING: EVIDENCE-BASED, BEST-PRACTICE RECOMMENDATIONS

ALISA BEYER

Many caregivers seek or need information, education, and/or assistance in rearing children. “It takes a village” is a common mantra used concerning parenting and child-rearing. This means that entire communities of people help shape children’s development and can foster safe, healthy environments and positive child outcomes. Programs, educational institutions, community organizations, and those who work with children and families can also support children’s healthy growth and development within the family by creating continuity between primary caregivers and the “village.” For optimal outcomes, it is important for all members of the “village” to find, assess, analyze, and implement high-quality, up-to-date, evidence-based, best-practice recommendations to strengthen children and families.

Evidence-based parenting programs and practices are supported and well-documented by up-to-date scientific research. Key indicators must demonstrate that practices have strengthened families, prevented youth and/or family problems, and/or promoted family and child well-being via validated research studies.

Examples

Community Involvement

Community Involvement

The videos within this link depict strength-based family engagement approaches that promote positive relationships and outcomes for children and families.

[Best Practices in Family & Community Engagement Video Series](#) (Office of Headstart, 2023)

Web address: <https://headstart.gov/community-engagement/article/best-practices-family-community-engagement-video-series?redirect=eclkc>

Examples

Parent-Child Interactions

Parent-Child Interactions

This next set of videos are examples focused on parent and child interactions:

1. Good Inside with Dr. Becky Kennedy. Dr. Kennedy offers practical, evidence-based parenting advice and strategies to help parents navigate challenges and build strong, positive relationships with their children.
Web address: https://www.youtube.com/channel/UCQcifo_12x84Uji6h1TVmKg
2. Evidence-Based Parenting Programs for the Treatment of Kids. Dr. Charles Cunningham provides a description of the components common to evidence-based parenting programs.
Web address: https://www.youtube.com/watch?v=Ssq3-_F_Ngs
3. Parent-Child Interaction Therapy (PCIT) Webinar from the National District Attorneys Association. The presentation focuses on ways that PCIT can help parents who are struggling to address their child's problem behavior (including justice-involved families), reduce youth victimization (particularly physical abuse and neglect by caregivers), and keep children in their homes, in their communities, and out of system involvement.
Web address: https://www.youtube.com/watch?v=talob_tfJoY
4. UNICEF Parenting Programmes to Reduce Violence against Children and Women.
Web address: <https://www.youtube.com/watch?v=eZYWw719vFM>

Best-practice recommendations are methods, approaches, or techniques that are regarded as superior to other alternatives because research demonstrates they produce the most favorable outcomes when compared with other methods, approaches, or techniques.

Links to best-practice approach recommendations

1. HealthyChildren.org (<https://www.healthychildren.org/>)
Comprehensive, evidence-based parenting information from the American Academy of Pediatrics.
2. Center for Disease Control's (CDC) Parenting Portal (<https://www.cdc.gov/parents/>)
Reliable, science-based guidance on child health and development from the Centers for Disease Control and Prevention.
3. The American Family of Pediatrics shares best practices for Gentle Parenting Strategies in [this handout](#) (Kavan et al, 2010).
4. CDC's vaccination recommendations (<https://www.cdc.gov/vaccines/schedules/index.html>)
5. Children and Screens (<https://www.childrenandscreens.org/>)
Children and Screens is an organization dedicated to advancing research, promoting best practices, and providing resources on the impact of digital media on child development, with a focus on topics like online advertising, screen time, and digital well-being.
6. Raising Children Network (<https://raisingchildren.net.au/>)
Australian website offering comprehensive, evidence-based parenting information for children of all ages. Easily searchable with a variety of topics.
7. Everyday Parenting (<https://www.coursera.org/learn/everyday-parenting>)
Free online course developed by Dr. Alan Kazdin, offering evidence-based parenting techniques.
8. Infoaboutkids.org (<https://infoaboutkids.org/>)
Clearinghouse of behavioral science information on children and adolescents, developed by a consortium of APA divisions.

Twenty-First Century Support for Parents

In this digital age, parents have access to resources and support systems to help them navigate the challenges of raising children. This support comes from various sources, including technology platforms, non-profit organizations, and government agencies at state, national, and international levels.

Technology-Based Support

Technology has revolutionized parenting support, offering accessible and convenient resources:

- Online platforms such as [Common Sense Media](#) and [Children and Screens](#) offer guidance on media and technology use for children.
- Numerous non-profits provide online materials dedicated to supporting parents and promoting child well-being:
 - The [National Family Support Network](#) champions quality family support practices and policies.

- [ConnectSafely.org](https://connectsafely.org) educates families about online safety, privacy, and security.
- The [Center for Parent Information and Resources](https://parentinformation.org) provides a wealth of information for parents of children with disabilities.
- Government agencies provide information as well online. You will see the Center for Disease Control website links in this book as a resource. Additionally, the [Office of Child Support Services \(OCSS\)](https://ocss.org) helps connect families with local child support programs. The [Administration for Children and Families](https://acf.hhs.gov) provides resources on a wide range of parenting topics. There are also state agencies that provide online education and materials.
- Globally, several organizations work to support parents and children: [The World Health Organization \(WHO\)](https://www.who.int) provides evidence-based guidelines on parenting interventions. UNICEF offers resources and support for parents worldwide. The [Organisation for Economic Co-operation and Development \(OECD\)](https://www.oecd.org) conducts research on modern childhood and parenting challenges.
- Virtual parent meetings and support groups have become increasingly popular, using different social media platforms. There are qualified parenting coaches, psychologists, and social workers on social media sharing best practices and evidence-based parenting tips and strategies.
- Mobile apps like the [CDC's Milestone app](https://www.cdc.gov/milestones) or ParentPowered provide information connected to parenting with evidence-based parenting tips and activities.

Technology Caution: Best Practices and Evidence-Based Approaches

While the abundance of parenting resources is beneficial, it's crucial to prioritize evidence-based practices:

- Be wary of trendy parenting advice that lacks scientific support.
- Consider the source of information and prioritize guidance from reputable organizations and experts in child development.
- Look for programs and advice backed by rigorous research, such as those listed in the [California Evidence-Based Clearinghouse](https://evidencebasedclearinghouse.org).

Parents should seek out interventions and programs that have been proven effective through empirical research. Evidence-based parenting programs, such as [Triple P](https://www.triplep.org) (Positive Parenting Program) and [The Incredible Years](https://www.incredibleyears.org), have demonstrated positive outcomes for both parents and children. By leveraging these 21st-century support systems while prioritizing evidence-based practices, parents can access valuable resources to help them raise healthy, well-adjusted children in today's complex world.

Examples of reliable social media accounts connected to parenting

Here's a list of a few qualified psychologists on social media who share free parenting tips:

- **Dr. Becky Kennedy** of @drbeckyatgoodinside. Clinical psychologist focusing on parenting strategies for children ages 0-18. Founder of Good Inside, bestselling author, and parenting expert. She has a YouTube page as well.
- **Dr. Cara Goodwin** of @parentingtranslator. Cara is a child psychologist translating scientific research into practical parenting advice. Cara references the research (and often multiple sources) right on the front page of her posts. Her summaries of evidence-based parenting practices are practical and engaging topics that any parent would find useful at some point in their parenting journey. She has a Ph.D. in Clinical Psychology, is a bestselling author, and mother of four. Dr. Goodwin specializes in child development and evidence-based parenting strategies.
- **Dr. Siggie Cohen** of @dr.siggie. Clinical psychologist helping parents feel more empowered and less stressed. Offers practical tools for parenting children of all ages.
- **Dr. Ann-Louise Lockhart** of @dr.annlouise.lockhart. Pediatric psychologist specializing in parenting advice and child development. She has a Psy.D. in Clinical Psychology, and is Board Certified in Clinical Child and Adolescent Psychology. Focuses on evidence-based strategies for managing child behavior and emotions
- **Dr. Brian Erasmus** of @drbrianeramus. Clinical psychologist specializing in child and adolescent mental health with a Ph.D. in Clinical Psychology. Dr. Erasmus provides evidence-based parenting tips and strategies for managing child behavior.
- **Dr. Cindy Hovington** of @curious_neuron digs into the research and summarizes her findings for you. The content is research boiled down into simple summaries that busy parents will find easy to consume and implement right away. The topics covered are wide-ranging from birth through adolescence.
- **Dr. Jenicka** of @drjenicka is a no-nonsense psychologist who is aimed at providing evidence-based information and debunking many of the parenting myths that are out there. She isn't afraid to call out parenting content on social media that is simply not true or deceiving. Dr. Jenicka has also has created a 'safe list' of other social media accounts that she and a group of colleagues vetted and put together to help parents cut through the noise on social media.

Further Reading

Read this PDF to learn more about evidence-based, best-practice approach recommendations regarding specific programs, competencies, and the key elements of effective parenting education programs:

Child Welfare Information Gateway. (2019). [*Parent education to strengthen families and reduce the risk of maltreatment \[pdf\]*](#). Washington, DC: U.S. Department of Health and Human Services, Children's Bureau.

PART III.

PARENTING PATHWAYS: UNDERSTANDING PARENTING APPROACHES AND THEIR EFFECTS

Parenthood is a journey unlike any other, filled with joy, challenges, and countless decisions. As you embark on this adventure, you'll discover there is not a one-size-fits-all approach to raising a child.

Picture a family dinner table – this can show examples of parenting in action. One parent firmly insists their child finish their vegetables, while another negotiates playfully. A third remains silent, letting their child make their own choices. Finally, we might have another where there is no interaction during dinner. These seemingly simple interactions reflect deeper parenting philosophies that can shape a child's life.

In this section, we'll explore the fascinating world of parenting styles, uncover their far-reaching effects, and equip you with strategies to create a positive, nurturing environment for your child's growth and development. Whether you're a new parent, a seasoned caregiver, or simply curious about human development, prepare to examine the art and science of raising children.

BAUMRIND'S PARENTING STYLES

JOEL A MURACO; WENDY RUIZ; REBECCA LAFF; ROSS THOMPSON; AND DIANA LANG

The way we raise our children can ripple through generations, influencing not just our immediate family but society as a whole. Further, specific parenting practices are less important in predicting child well-being than examining broader patterns of parenting. Most researchers who attempt to describe broader approaches to parenting use Diana Baumrind's concept of parenting style.

Cultural Considerations

Culture can impact broader parenting perspectives. In collectivist cultures, such as India, the emphasis is on group harmony, interdependence, and the greater good of the community. In these cultures, parenting practices frequently place the demands of the family and community before those of the individual. On the other hand, individualistic cultures place more value on autonomy, independence, and self-expression. Although Baumrind's approach has been studied around the world, the development of the parenting styles was based on Westernized culture.

Diana Baumrind's Parenting Styles

Diana Baumrind, a clinical and developmental psychologist, coined the following parenting styles: **authoritative, authoritarian, and permissive/indulgent**. Baumrind's initial parenting styles were meant to describe normal variations in parenting. In other words, Baumrind did not include deviant parenting, such as might be observed in abusive or neglectful homes. Later, Maccoby and Martin (1983) added the **uninvolved/neglectful style**.

It is beneficial to evaluate the support and demandingness of a caregiver to determine which style is being used and how to effectively use it. The four parenting styles are categorized according to level of support and demand.

Support refers to the amount of affection, acceptance, and warmth a parent provides to a child. **Demandingness** refers to the degree a parent controls a child's behavior.

Authoritative Parenting

In general, children tend to develop greater competence and self-confidence when parents have high reasonable, and consistent expectations for children's behavior, communicate well with them, are warm and responsive, and use reasoning rather than coercion to guide children's behaviors. This kind of parenting style has been described as **authoritative** (Baumrind, 2013). As shown in Figure 1, **authoritative parenting** is characterized by high support and high demandingness. This style combines warmth, responsiveness, sensitivity, and the setting of clear limits. Parents who use this style are supportive and show interest in their kids' activities but are not overbearing and allow children to make constructive mistakes. This "tender teacher" approach is deemed the most optimal parenting style to use in Western cultures. While authoritative parenting is generally considered optimal across many cultures, its implementation can vary. In Western cultures, particularly the United States, authoritative parenting often emphasizes individual autonomy and open communication (Bornstein, 2013). In some Asian cultures, authoritative parenting may include more direct guidance and structure while still maintaining warmth (Zhang et al, 2017).

Authoritarian Parenting



Figure 3. Authoritarian parenting called "rigid ruler" in part because wooden rulers were often used for capital punishment in the 20th century.

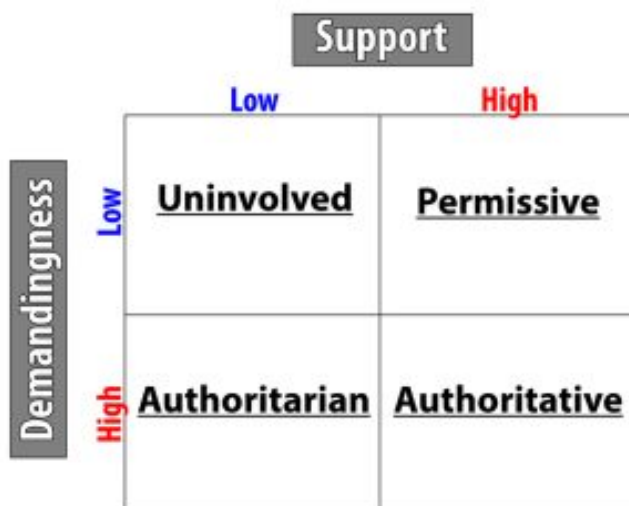


Figure 1. Comparison of Four Parenting Styles based on Demandingness and Support

Parents using the **authoritarian** ("rigid ruler") approach are low in support and high in demandingness (see Figure 1). The **authoritarian parenting style** is characterized by high demand/control and low support, with strict rules and expectations. These parents expect and demand obedience because they are "in charge" and they do not provide any explanations for their orders (Baumrind, 1991). Parents also provide well-ordered and structured environments with clearly stated rules. An example of an extreme authoritarian style in the media might be Harry Potter's harsh aunt and uncle (Rowling, 1997), and Cinderella's vindictive stepmother. The impact of authoritarian parenting

can vary across cultures: In some Asian and African cultures, authoritarian parenting is more common and may be viewed as a sign of parental care and involvement (Zhang et al, 2017).

Permissive Parenting

Parents who are high in support and low in demandingness are likely using the **permissive parenting style**, also called the indulgent-style. Parents using this approach are lenient, do not expect their children to adhere to boundaries or rules, and avoid confrontation (Baumrind, 1991). Permissive parents are loving, nurturing, and communicative but struggle with discipline because few rules or boundaries are enforced. Permissive parenting lacks the structure and clear rules children need to navigate social expectations. Permissive parents avoid confrontation and may bribe children to manage their behavior instead of using consistent discipline. Permissive parenting lacks clear expectations for children's behavior, such as cleaning up after themselves. Children are allowed significant freedom and autonomy. With permissive parenting, children are more likely to have problems with authority. An example of an extremely permissive parenting style in the media might be Sonny parenting Julian in *Big Daddy* (1999) or Regina's mother in *Mean Girls* (2004).

The prevalence and perception of permissive parenting vary across cultures: It is more common in some Western societies, particularly in the United States, where individual expression is highly valued. In collectivist cultures, permissive parenting is less common and may be viewed as neglectful (Sahithya et al, 2019).

Uninvolved Parenting

Uninvolved parenting style is characterized by being low in both support and demand. *Children reared by parents who are low in both support and demandingness tend to rank lowest across all life domains, lack self-control, have low self-esteem, and are less competent than their peers.* Uninvolved parenting style (neglectful) shows a lack of supervision and affection towards children. Uninvolved parents do not utilize any particular disciplinary methods. There is no structure, guidance, or support. Communication between the parent and child is limited, and nurturing behavior is absent. Uninvolved parents are disengaged and have little expectations for their child's behavior, academic performance, or personal development, leading to an environment where the child feels unwanted and unvalued. Parents using this approach are sometimes referred to as indifferent or neglectful as they can be neglectful or rejecting of their children and do not provide most, if any, necessary parenting responsibilities.

While uninvolved parenting is generally considered harmful across cultures, its manifestation can differ: In some cultures, what might be perceived as uninvolved parenting could be a result of economic hardship or cultural norms that emphasize community involvement in child-rearing rather than solely parental responsibility (Bornstein, 2012).

Video Examples

Watch [this You Tube video](#) about Baumrind's parenting styles (PscExamReview, 2019).

Here is another [YouTube video](#) that reviews the 4 parenting styles plus 1 more (Sprouts, 2022).

Parenting Styles and Outcomes for Children

Research emphasizes the importance of considering cultural context when evaluating parenting styles as the effects of different parenting styles may be moderated by cultural norms and values (e.g., Sahithya et al, 2019). Support for the benefits of authoritative parenting has been found in countries as diverse as the Czech Republic, India, China, Israel, and Palestine (e.g., Sahithya et al, 2019, Dmitrieva et al, 2004, Carson et al, 1999, Pilgrim et al, 1999, Punamaki et al, 1997, Zhang et al, 2019). Some studies suggest that certain aspects of authoritarian parenting may be less detrimental in some cultural contexts. For example, while many children reared in European-American cultures fare poorly with too much strictness (authoritarian parenting), however, children reared in Chinese cultures often perform well, especially academically. Chinese culture views strictness in parenting as related to training, which is not central to American parenting beliefs (Chao, 1994). Indeed, researchers are increasingly recognizing the need for culturally sensitive approaches to understanding parenting styles and their impacts (Bornstein, 2012). For example, researchers studying Chinese parents categorized styles to be authoritative, authoritarian, average-level undifferentiated, and strict-affectionate parenting styles (Zhang et al., 2017).

Within specific cultures studied, parenting style has been found to predict child well-being in the domains of social competence, academic performance, psychosocial development, and problem behavior. In general, parental responsiveness tends to predict social competence and psychosocial functioning, while parental demandingness is typically associated with instrumental competence and behavioral control (e.g., academic performance and deviance).

Parenting Styles Impact (in the U.S.)

In the United States, authoritative parenting yields positive outcomes across multiple domains:

- Improved cognitive development and academic performance
- Enhanced social-emotional skills, including empathy and emotional regulation
- Fewer behavioral issues and better self-regulation
- Higher self-esteem and self-confidence
- Better future-oriented thinking skills.

Research in the United States, based on parent interviews, parent self-reports, child reports, and parent observations consistently finds children and adolescents whose parents use the authoritative style typically rate themselves and are rated by objective measures as more socially and instrumentally competent than those whose parents do not use the authoritative style.

Authoritarian parenting has been linked to children having:

- Immediate compliance but potential long-term issues
- Higher levels of anxiety and depression
- Lower self-esteem and poorer social skills
- Potential for aggressive behavior or rebellion in adolescence

Children and adolescents reared in households using the authoritarian style (high in demandingness, but low in responsiveness) tend to perform moderately well in school and be uninvolved in problem behavior, but tend to have poorer social skills, lower self-esteem, and higher levels of depression when compared to their peers who are reared in households using the authoritative approach. These findings relate to the authoritarian parenting style may hinder children's ability to develop independence and emotional regulation.

Psychologists generally do not recommend the permissive parenting style due to its lack of control and structure necessary for children to learn and adapt to the rules of society. Research has shown children from permissive parents have:

- Mixed outcomes in social skills and self-esteem
- Potential for behavioral problems due to lack of structure
- Difficulties with self-discipline and following societal norms
- Possible issues with academic performance

Research in the United States consistently finds children and adolescents whose parents are uninvolved typically perform most poorly in all domains. Impact on children raised in this style include:

- Significant deficits in cognitive and emotional development
- Higher risk of behavioral problems and poor academic performance
- Difficulties in social relationships and emotional regulation
- Potential for failure to thrive in severe cases

Uninvolved parenting negatively affects a child’s development due to the lack of parental guidance and affection. Children raised with the uninvolved parenting style are at a higher risk of seeking inappropriate role models and struggle with forming healthy relationships. The absence of boundaries and supervision of uninvolved parenting increases the risk of children experiencing abuse or engaging in risky behaviors.

Bi-directional parenting & parenting styles

Bidirectional parenting recognizes that children are not passive recipients of parental influence but active participants in shaping their family dynamics. As children mature, parent-child relationships should naturally adapt to accommodate developmental changes. As children grow and develop, their changing needs, abilities, and behaviors elicit different responses from parents, which in turn influences the parenting style adopted. By recognizing the bidirectional nature of parenting and consciously adjusting parenting styles to meet the changing needs of their children, parents can foster more positive, enduring relationships. Parent-child relationships that do not adapt to a child’s abilities can lead to high parent-child conflict and ultimately a reduced parent-child relationship quality (Muraco, 2025).

Key Takeaways

- There are 4 parenting styles defined by Baumrind and colleagues based on levels of support and demand: authoritative, authoritarian, permissive, and uninvolved.

Table 1. Four parenting styles: authoritative, authoritarian, permissive, and uninvolved.

Support (Low)		Support (High)
Demand (Low)	<i>Uninvolved</i>	<i>Permissive</i>
Demand (High)	<i>Authoritarian</i>	<i>Authoritative</i>

- The authoritative (the “tender teacher”) approach is the most optimal style for use in the U.S. In reviewing the literature on parenting styles, authoritative parenting style is associated with both instrumental and social competence and lower levels of problem behavior at all developmental stages for youth in the United States. The benefits of using the authoritative parenting style and the detrimental effects of the uninvolved parenting style are evident as early as the preschool years and continue throughout adolescence and into early adulthood.
- While authoritative parenting generally yields the most positive outcomes across cultures, the specific implementation and effects of each parenting style can vary based on cultural context. This underscores the importance of considering both universal principles of effective parenting and cultural nuances when studying and applying parenting practices.
- How parents rear children can have lifelong impacts on children’s development.

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ADDITIONAL PARENTING STYLES

Progressive and Authoritarian Parenting Attitudes

Bornstein and colleagues (2012) differentiated parenting attitudes towards childrearing between progressive and authoritarian. Those with **progressive attitudes** encourage independent thinking and open communication in children, fostering a democratic parent-child relationship (Okagaki & Frensch, 1998). Conversely, parents with **authoritarian attitudes** prioritize obedience, respect for authority, and strict discipline (Dornbusch, Ritter, Liederman, Roberts, & Fraleigh, 1987). While both perspectives acknowledge the importance of child agency, progressive parents tend to grant more autonomy to their children compared to those with authoritarian views. These differing attitudes likely lead to distinct socialization practices, with parents presumably shaping their children's attitudes through their behaviors and parenting styles.

Bornstein and colleagues (2012) collected information from over 1000 mothers and fathers in 9 different countries of 7- to 10-year-olds in 9 countries (China (from Jinan and Shanghai), Colombia (from Medellín), Italy (from Rome and Naples), Jordan (from Zarqa), Kenya (from Kisumu), the Philippines (from Manila), Sweden (from Trollhättan/Vänersborg), Thailand (from Chiang Mai), and the United States (from Durham, NC). On average parents from all countries (except Kenya) held more progressive than authoritarian parenting attitudes. However, across 9 countries, the researchers found both country and parent gender variations in parents' childrearing attitudes, highlighting the complexities in examining cultural, societal, and individual factors that shape parenting approaches. This diversity in parenting attitudes reflects not only broad cultural differences but also the nuanced ways in which mothers and fathers within each culture may approach childrearing differently.

Alternative Parenting Styles

Researchers have identified additional parenting approaches that extend beyond Baumrind's styles, definitions, or outcomes. Below is an overview of three of these approaches—overindulgent parenting, helicopter parenting, and traditional parenting.

Overindulgent Parenting

Overindulgent parenting is providing children with too much of what “looks good, too soon, too long. (Clark et al, n.d.)”. Oftentimes, it appears that parents implement these strategies to fulfill their own unmet needs or feelings of neglect from their own childhood.

Examples include giving children an overabundance of:

- things or experiences that are not developmentally appropriate for the child,
- family resources that appear to meet the child's needs but do not,
- anything that actively harms or prevents a child from developing and achieving one's full

potential, and

- freedom with minimal boundaries and limits that are developmentally-inappropriate for the child (Clark et al, n.d.).

Studies have shown that overindulgent parenting can lead to negative outcomes in children and adults. Cui et al (2023) linked childhood overindulgence to parenting stress and well-being problems in parents later on.

Risks of Overindulgence

To learn 12 risks of overindulging a child, visit the Overindulgence website's [Resources for Parents page](#).



Figure 1. An overindulged child might become prone to outbursts or tantrums when faced with limitations (Photo Source: [Mohamed Abdelgaffar](#) on Pexels)

Many negative outcomes have been linked to overindulgent parenting, which include, but are not limited to, children who exhibit:

1. extreme self-centeredness,
2. excessive degrees of a sense of entitlement,
3. poor decision-making and coping skills, and
4. stifled developmental growth as a result of not experiencing or learning “necessary” life lessons.

Video Example

Learn more in [this short video about overindulgent parenting](#).

Helicopter Parenting

Helicopter parenting is characterized by caregivers who are *extremely overinvolved in their child's life* due to the belief that they can protect their child's physical and/or emotional well-being. Caregivers using this approach appear overbearing and overprotective due to the close attention they pay to all of their child's problems and successes. Parents "hover overhead" by constantly overseeing or being excessively interested in every aspect of their child's life. Some contend that cell phones are "the world's longest umbilical cord" which is contributing to this phenomenon (Swann, 2014).

Recent research has examined the effects of helicopter parenting. Love and colleagues (2020) found that helicopter parenting was associated with decreased psychological well-being and increased use of prescription medication for anxiety or depression among college students. Vigdal and Brønnick (2022) conducted a systematic review to examine the relationship between helicopter parenting and symptoms of anxiety and depression. In reviewing 38 studies, the majority of studies found a direct (but not causal) relationship between helicopter parenting and symptoms of anxiety and depression. They also found no high-quality longitudinal studies to determine if helicopter parenting precedes anxiety and depression outcomes.



Figure 2. Helicopter parents don't literally ride in helicopters, but their hovering, overwatch mentality is similar. (Photo Source: [Army Staff Sgt. Roberto Di Giovine](#))

Many negative outcomes have been linked to helicopter parenting, which may include, but are not limited to, children and adults who exhibit:

1. stifled developmental growth as a result of not experiencing or learning “necessary” life lessons,
2. long-term mental health problems,
3. rebellious behaviors in adolescence,
4. a lack of independence coupled with poor decision-making, motivational, and coping skills.

Traditional Parenting Style



Figure 3. A family eating a large meal. (Photo Source: [National Cancer Institute](#))

The **traditional parenting style** is more commonly used in families with non-Western cultural values. Parents using this approach expect their children to respect and obey authority (e.g., parents, elders, etc.) and comply with their cultural beliefs and values without questions. Parents using this approach are high in demandingness, warmth, and responsiveness, similar to the authoritative approach, however, they do not engage in democratic discussions (Chao, 2001). This style was created because many parenting styles in non-Western cultures do not meet the criteria for authoritarian (due to expressing warmth) or authoritative (due to lack of communication).

For example, many families who self-identify as Asian Americans and Latino Americans engage in

high demandingness and expect respect and obedience of their children. However, these caregivers also value closeness and love which is different from the authoritarian parenting style. Adolescents who grow up in families using traditional parenting style characteristics tend to show higher academic achievements and lower behavioral and psychological problems when compared to their peers who are reared by caregivers using the authoritarian approach. These positive outcomes may be related to the closeness and love shown to children, which is different from the “cold” or “distant” characteristics consistent with the authoritarian style (Chao, 2001).

Outcomes for this (and other parenting styles) can vary based on individual circumstances, cultural contexts, and the specific ways in which parents implement these approaches. Additionally, many parents may not fit neatly into one category but rather use a combination of approaches.

Lemasters and Defrain Parenting Styles

Lemasters and Defrain (1989) proposed an alternative model of parenting that focuses on the motivations behind parenting styles rather than just their observable characteristics. Their approach suggests that parenting styles often stem from parents’ psychological needs rather than solely addressing children’s developmental requirements.

Table 1. Lemasters and Defrain Parenting Styles

Style	Description	Possible Outcomes
Martyr	Will do anything for the child; even tasks that the child should do for himself or herself; may use all they do for the child to guilt the child into compliance	Child learns to be dependent and manipulative
Pal	Wants to be the child’s friend; lets children do what they want and focuses mostly on being entertaining and fun; sets few limits	Child may have little self-discipline and may try to test limits with others
Police officer/drill sergeant	Focuses primarily on making sure that the child is obedient and that the parent has full control of the child; may scold or punish child for not doing things right; struggles to allow child to grow and learn to make decisions independently	Child may have a lot of resentment toward parent that is displaced on others
Teacher-counselor	Pays a lot of attention to expert advice on parenting and who believes that as long as all of the steps are followed, the parent can rear a perfect child	Puts all responsibility of outcomes on parent
Athletic coach	Helps the child understand what needs to happen in certain situations and encourages and advises the child about how to manage these situations; does not intervene or do things for the child; sets consistent and objective rules	Child is supported and guided while they learn firsthand how to handle situations

While the Lemasters and Defrain model offers an interesting perspective on parenting motivations, it’s important to note that there is limited empirical research supporting its effectiveness or long-term outcomes. Unlike Baumrind’s widely studied parenting styles, this model lacks extensive validation through rigorous scientific studies. Therefore, caution should be exercised when applying these concepts without further research to support their impact on child development.

Key Takeaways

- Parenting styles have evolved over time, with researchers identifying approaches beyond Baumrind's styles.
- Parents with progressive attitudes believe that children should be encouraged to think independently and verbalize their ideas, and these parents generally approach the parent-child relationship out of a democratic framework. By contrast, parents with authoritarian attitudes emphasize strictness, respect for authority, and obedience.
- Overindulgent parenting is when parents over-provide things which are typically not developmentally-appropriate for their child.
- Helicopter parenting is when parents are over-involved in their child's life, many times as a way to protect their child.
- Traditional parenting is when parents expect their children to respect and obey authority, as well as comply with their cultural beliefs and values.
- Lemasters and Defrain model explains parenting based on parenting motivations, but it's important to note that there is limited empirical research.

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CHILD-REARING AND GUIDANCE

Parents and caregivers have a responsibility to guide and promote positive socialization strategies for children in their care. These activities are known as discipline or guidance—two words that are often used interchangeably in parenting education. **Discipline** is defined as “ongoing teaching and nurturing that facilitates self-control, self-direction, competence, and care for others” (Sege et al, 2018). It is recommended that caregivers utilize a comprehensive disciplinary approach for guiding children’s behaviors (review some strategies in Effective Communication in Families section).

Caregivers should proactively teach children how to regulate their own behaviors by using age- and developmentally—appropriate strategies that enhance:

- positive, supportive, and nurturing caregiver-child relationships,
- safety, permanency, and consistency,
- acceptable behavioral patterns by removing reinforcements to eliminate undesired behaviors and providing positive reinforcements to strengthen desired behaviors, and
- cognitive, socioemotional, and executive functioning skills.



Figure 1. A family teaching a child to ride a bicycle with support. (Photo Source: [Agung Pandit Wiguna, Pexel License](#))

For optimal outcomes, all of the above components must consistently function well in an individualized manner for each child, and within the context of youth, feeling loved, safe, and secure. Recommended child-rearing strategies are outlined in upcoming chapters divided by phases of child development.

Preview of what's to come (upcoming section covering different areas of development/age groups)

Examples of caregivers' guidance by stage:

- Newborns: recognize and respond flexibly to infant's needs while providing generally structured daily routines.
- Infants and toddlers: use limitations, protection, and structure to create safe spaces for play and exploration.
- Early childhood: utilize creative and individualized strategies to guide children's desirable behavior patterns to become their "typical interactions".
- School-age: increase children's own responsibility for self-control via the integration of previously-developed internalized rules of conduct.
- Adolescence: change strategies to foster more autonomy, self-regulation, and responsibility while guiding teens' safety and positive decision-making skills.

For more information about positive parenting strategies by ages and stages, visit the [CDC website](#).

Review: Communication Strategies

Let's take a moment to review some of the suggested strategies from Effective Communication with Families section (for more details refer to that strategy in the previous section). Remember that positive language focuses on using affirmative and empowering words when communicating with children, emphasizing what they should do rather than what they shouldn't. By replacing negative phrases with positive alternatives, parents can create a more supportive environment that promotes cooperation and builds self-esteem in their children. Consistently using positive language, such as "Please walk" instead of "Don't run," can help children understand expectations more clearly and make them more willing to comply with parental guidance.

Active Listening: Giving full attention to your child, making eye contact, and showing genuine interest in their words. This technique helps children feel heard and respected, improving communication and strengthening the parent-child bond.

CALM: An approach focused on managing strong-willed children without power struggles. It emphasizes understanding the child's perspective, staying calm, and providing clear expectations and consequences.

I-Messages: A communication technique where parents express feelings without blaming or criticizing. Typically follows the format: "I feel [emotion] when [situation] because [reason]".

Constructive Choices: Giving children limited, age-appropriate options to help them feel more in control and learn decision-making skills. It involves offering 2-4 acceptable choices and supporting the child's decision.

Anticipatory Structure: Preparing children for upcoming transitions or changes in routine to reduce anxiety and improve cooperation. It involves providing advance notice, explaining reasons, and offering multiple reminders.

Four Pluses and a Wish: A technique to increase cooperation by creating a positive interaction before making a request. It involves smiling, using relaxed body language, saying the child's name,

giving a compliment, and then making the request.

Reinforced Rewards: Using reinforcement to increase desired behaviors. It involves providing immediate feedback and using a variety of reward types, while gradually reducing reliance on external rewards.

Induction: Explaining the reasons behind rules and consequences of actions to develop empathy and moral reasoning. It focuses on how behavior affects others and encourages perspective-taking.

Natural Consequences: Allowing children to experience the direct results of their actions without parental intervention. This approach can be effective for teaching responsibility when safe and appropriate.

Logical Consequences: Parent-imposed consequences directly related to the child's behavior. They should be respectful, relevant, and reasonable, aiming to teach children about the impact of their choices.

Redirecting: Shifting a child's attention from an undesirable behavior to a more appropriate activity. This technique can be particularly effective with younger children and helps avoid power struggles.

Time-Out: Briefly removing a child from a problematic situation to a designated quiet area. When used appropriately (infrequently, calmly, and with clear explanation), it can be an effective tool for managing challenging behaviors.

Time-In: An alternative to time-out where parents stay with the child during a cooling-off period. It focuses on connection and helping the child regulate their emotions.

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ADAPTING PARENTING STYLES

Exercise: Check your learning

See if you can identify the parenting style described for each scenario. Options include: helicopter parenting, permissive Style, authoritative style, authoritarian style, neglectful style, traditional, and a cultural take on authoritative style.

1. Maria and Carlos, first-generation immigrants, struggle to set boundaries for their energetic 2-year-old son, Miguel. They often give in to his demands to avoid tantrums, believing this approach shows love and understanding of the challenges he faces in a new country.
2. Single father James, a military veteran, enforces strict rules and schedules for his 8-year-old daughter, Sophia. He emphasizes obedience and discipline, believing this will prepare her for future success, but rarely explains the reasoning behind his rules.
3. Lisa, a busy executive, and her partner Sam, a freelance artist, have a hands-off approach with their 15-year-old son, Alex. They provide little guidance or supervision, assuming Alex is old enough to make his own decisions and handle consequences.
4. Aisha and David, an interracial couple, use a balanced approach with their 6-year-old biological daughter and 12-year-old adopted son. They set clear expectations while remaining responsive to each child's unique needs, adapting their communication style based on age and personality.
5. Wei and Mei, recent immigrants from China, are highly involved in their 4-year-old daughter Ling's life. They show warmth and set rules but struggle to grant autonomy, often intervening in Ling's play and social interactions due to concerns about safety and cultural differences.
6. The Johnson family, headed by Robert and Sarah, adheres to traditional values in raising their 10-year-old son, Michael, and 13-year-old daughter, Emily. They emphasize respect for authority, clear gender roles, and strict discipline. Chores are divided along gender lines, with Emily learning household tasks and Michael focusing on yard work. The parents make most decisions for the children, expecting obedience without question. They prioritize academic achievement and extracurricular activities that align with their values, such as religious education and community service.
7. Lisa and Tom are highly involved in every aspect of their 7-year-old daughter Olivia's life. They constantly monitor her academic progress, often completing homework assignments alongside her to ensure perfection. During playdates, they hover nearby, intervening at the slightest sign of conflict. They've installed tracking apps on Olivia's devices and frequently contact her teachers for updates. Lisa and Tom manage Olivia's schedule meticulously, filling it with enrichment activities they believe will give her a competitive edge. They struggle with allowing Olivia to experience failure or disappointment, often stepping in to solve problems before she has a chance to try.

Check your answers [here](#)!

Factors of Parenting Styles

In earlier sections, we discussed different factors that impact parenting practices. These same aspects also influence parenting styles. Let's take some time to review:

- Family upbringing, parenting knowledge, cultural background, socioeconomic status, personal characteristics, psychological factors, stress, goals, and expectations.
- Child characteristics such as gender identity, birth order, temperament, and health status.
- Parents' developmental histories and experiences as children.
- Parent's psychological factors including mental status, self-efficacy, parenting stress, perfectionism, and personality traits.
- Cultural values and beliefs, which permeate parents' worldviews and practices.

Self-reflection and Self-Awareness of Parenting Styles

Developing self-awareness and adapting parenting styles to meet children's unique needs is crucial to effective parenting. Understanding one's parenting style and its influences can lead to more positive outcomes for both parents and children.

Self-Awareness in Parenting

Self-awareness in parenting involves recognizing one's own beliefs, values, and behaviors in relation to child-rearing. This awareness is essential for several reasons:

- It helps parents understand the origins of their parenting approach, often rooted in their own upbringing.
- It allows parents to identify potential biases or automatic responses that may not serve their children's best interests.
- It enables parents to make conscious choices about their parenting strategies rather than reacting instinctively.

Research by Naumburg (2014) suggests that self-aware parents are more likely to behave in ways that align with their intentions and values in parenting. This alignment leads to more consistent and effective parenting practices.

Identifying Your Parenting Style

Parents can reflect on their behaviors and attitudes to determine which style they most closely align with. Some questions to consider include:

- How do you typically respond to your child's emotional needs?
- What are your expectations for your child's behavior?
- How do you enforce rules and discipline?
- How much autonomy do you allow your child?

Adapting Parenting Styles

To adapt one's parenting style effectively:

- Assess your child's unique needs: Consider their temperament, age, and developmental stage.
- Evaluate the effectiveness of your current approach: Reflect on how your child responds to your parenting and whether it's fostering the desired outcomes.
- Incorporate elements of positive language and aspects of authoritative parenting: This might involve increasing warmth and responsiveness while maintaining clear boundaries.
- Practice flexibility: Schwall (2024) emphasizes the importance of adapting parenting approaches based on the child's changing needs and specific situations. "Effective parenting takes flexibility, which involves adapting our approach to meet our child's individual needs without compromising on key values like respect, empathy, and responsibility" (Schwall, 2024).
- Seek support and education: Parenting programs and resources can provide valuable guidance in developing more effective strategies.

Overcoming Challenges in Adaptation

Changing ingrained parenting behaviors can be challenging. Research by Domenech Rodríguez and colleagues (2009) highlight the importance of considering cultural context when adapting parenting styles.

Parents may need to:

- Address personal triggers and emotional reactions
- Work on stress management and self-regulation
- Practice new communication techniques
- Be patient with the process of change

Keep your tank fueled

The analogy of keeping your tank fueled is a powerful way to think about maintaining your energy and capacity as a parent. Just as a car needs fuel to run efficiently, parents need to replenish their emotional, mental, and physical resources to be at their best for their children.

1. Just as a car can't run on an empty tank, parents can't effectively care for their children when they're depleted.
2. Regular maintenance (self-care) prevents breakdowns (burnout) and ensures smoother operation (better parenting).
3. Different terrains (life challenges) require different amounts of fuel. Be aware of when you need extra refueling during stressful times.
4. Ignoring the fuel gauge (signs of stress or fatigue) can lead to getting stranded (inability to meet your child's needs).
5. Premium fuel (high-quality self-care) leads to better performance and longevity.
6. Refueling is not selfish; it's necessary for the journey of parenting to continue successfully.

Finding Your Manifesto for Parenting

As we reflect on our parenting styles and the complex factors that shape our approaches to raising children, it's important to remember that parenting is not just about techniques or strategies—it's about the heart and soul we bring to this profound journey. Dr. Brené Brown, renowned researcher and author, offers a powerful perspective that can help us transcend the limitations of rigid parenting categories and connect with the deeper purpose of our role as parents.

The Wholehearted Parenting Manifesto

Above all else, I want you to know that you are loved and lovable. You will learn this from my words and actions—the lessons on love are in how I treat you and how I treat myself. I want you to engage with the world from a place of worthiness. You will learn that you are worthy of love, belonging, and joy every time you see me practice self-compassion and embrace my own imperfections. We will practice courage in our family by showing up, letting ourselves be seen, and honoring vulnerability. We will share our stories of struggle and strength. There will always be room in our home for both. We will teach you compassion by practicing compassion with ourselves first; then with each other. We will set and respect boundaries; we will honor hard work, hope, and perseverance. Rest and play will be family values, as well as family practices. You will learn accountability and respect by watching me make mistakes and make amends, and by watching how I ask for what I need and talk about how I feel. I want you to know joy, so together we will practice gratitude. I want you to feel joy, so together we will learn how to be vulnerable. When uncertainty and scarcity visit, you will be able to draw from the spirit that is a part of our everyday life. Together we will cry and face fear and grief. I will want to take away your pain, but instead I will sit with you and teach you how to feel it. We will laugh and sing and dance and create. We will always have permission to be ourselves with each other. No matter what, you will always belong here. As you begin your Wholehearted journey, the greatest gift that I can give to you is to live and love with my whole heart and to dare greatly. I will not teach or love or show you anything perfectly, but I will let you see me, and I will always hold sacred the gift of seeing you. Truly deeply seeing you.

This manifesto invites us to shift our focus from perfection and control to vulnerability and authenticity, encouraging us to parent from a place of worthiness and love. As we explore the psychology of parenting further, let this manifesto inspire you to examine your parenting values and aspirations. Consider how these principles align with or challenge your current parenting style. This reflection can open new pathways for growth, helping you to parent not just from a place of knowledge, but from a place of wholehearted engagement with your children and yourself.

Key Takeaways

- Parenting styles vary and are shaped by a complex set of factors, including cultural background, personal experiences, socioeconomic status, and individual child characteristics.
- Understanding these influences is crucial for parents to develop self-awareness and adapt their approaches to meet their children's unique needs effectively.
- Developing self-awareness and adapting parenting styles is an ongoing process that requires reflection, effort, and patience. By understanding their own parenting style and its impacts, parents can make informed decisions to better meet their children's needs and strengthen the parent-child relationship. This adaptive approach not only benefits the child's development but also enhances the parent's sense of efficacy and satisfaction in their role.

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PART IV.

PARENTING IN THE EARLY YEARS

The first two years of a child's life are a whirlwind of growth and discovery, transforming a helpless newborn into a curious, mobile toddler with a budding personality. This chapter delves into the fascinating journey of early childhood development and provides practical, evidence-based strategies for parents navigating this exciting yet challenging period.

During this time, children undergo a remarkable amount of growth in all developmental domains. Physical abilities evolve from reflexive movements to purposeful action. Cognitive skills blossom, with babies progressing from wide-eyed observers to active explorers with early problem-solving abilities. Language emerges, from coos and babbles to first words and simple sentences while simultaneously there is growth in social and emotional capacities. This process is unique to each child, yet follows predictable patterns that parents can nurture and support. Understanding these milestones empowers caregivers to create enriching environments and responsive interactions that foster optimal growth. As we explore the landscape of early childhood development, we'll uncover more specific parenting strategies designed for this age range.

THE FIRST FEW YEARS: RAPIDLY DEVELOPING BRAIN AND BODY

Neuroplasticity and Sensory Capacities

Neuroplasticity

Neuroplasticity, the brain's ability to form and reorganize neural connections, is particularly pronounced in children aged 0-2 years. During this critical period, the brain develops at an astounding rate, with approximately one million new neural connections forming every second. These early experiences and stimulations play a crucial role in shaping the brain's architecture, laying the foundation for future learning and development. The brain undergoes a process of pruning, where frequently used pathways are strengthened while unused connections are eliminated. Parents can positively impact their child's brain development by providing a rich, stimulating environment with diverse sensory experiences, play opportunities, and responsive caregiving. While neuroplasticity continues throughout life, the first two years offer a unique window where interventions and learning experiences can have a significant and lasting impact on a child's developmental trajectory.

Sensory development

Understanding these aspects of infant sensory development can guide parents in creating appropriate environments and interactions that support their baby's growth and learning.



Newborns possess remarkably developed sensory and perceptual abilities, which form the foundation for their early interactions with the world.

- Vision is the least developed sense at birth, with newborns typically seeing only 8-16 inches away and having blurry vision. By about 6 months, infants' visual acuity improves and approximates adult 20/25 acuity. Parents can support visual development by using high-contrast toys and images, as babies respond better to these in the early months.

Figure 1. Carefully holding an infant.
(Photo Source: [Pikrepo](#), [DMCA](#))

- Hearing is well-developed at birth, with infants able to distinguish between similar sounds and recognize familiar voices. The infant's sense of hearing is very keen at birth, and the ability to hear is evidenced as soon as the 7th month of prenatal development. Reading and talking to babies, even prenatally, can have a lasting impact on their auditory preferences and language development.
- Newborns are highly sensitive to touch and pain, emphasizing the importance of gentle handling and considering pain management for medical procedures.
- Recognizing and responding to a baby's sensory preferences and sensitivities can help parents create a more comfortable and engaging environment for their child.
- Babies show innate preferences for certain tastes and smells, particularly favoring sweetness and their mother's scent.
- Infants can perceive the world through multiple senses simultaneously (intermodal perception), which parents can support through varied sensory experiences. Parents can enhance their baby's sensory development by providing a rich, stimulating environment with diverse textures, sounds, sights, and smells.



Figure 2. Infants are particularly sensitive to touch and pain.
(Photo Source: [Pikist](#), [DMCA](#))

Physical Growth and Development: From Reflexes to Intentional Movements

The average newborn in the United States weighs about 7.5 pounds (between 5 and 10 pounds) and is about 20 inches in length. For the first few days of life, infants typically lose about 5 percent of their body weight as they eliminate waste and get used to feeding. This often goes unnoticed by most parents but can be cause for concern for those who have a smaller infant. This weight loss is temporary, however, and is followed by a rapid period of growth. By the time an infant is 4 months old, it usually doubles in weight and by one year has tripled the birth weight. By age 2, the weight has quadrupled, so we can expect that a 2-year-old should weigh between 20 and 40 pounds. The average length at one year is about 29.5 inches and at two years it is around 34.4 inches. Another dramatic physical change that takes place in the first several years of life is the change in body proportions. The head initially makes up about 50 percent of our entire length when we are developing in the womb. At birth, the head makes up about 25 percent of our length, and by age 25 it comprises about 20 percent of our length.

Sleep

Children's sleep patterns evolve significantly from birth to 2.5 years old. Newborns sleep 14-17 hours in short bursts throughout the day and night, while by 3 months, babies start developing day-night sleep patterns. Between 6-12 months, infants typically sleep 12-15 hours, including 10-11 hours at night and 2-3 naps during the day. Toddlers aged 1-2.5 years need 11-14 hours of sleep, usually with one daytime nap. Throughout this period, night wakings are common and normal. Parents can support healthy sleep habits by establishing consistent bedtime routines, creating a calm

sleep environment, and responding to their child's tired signs. It's important to maintain regular sleep schedules, even on weekends, and to avoid overstimulation before bedtime. For toddlers resisting sleep, offering a comfort object and being patient yet firm can help. Remember that every child is different, and sleep patterns may vary

Safe Sleeping Early On

A primary concern for parents as they support their child's development is ensuring their safety, and this is particularly crucial when it comes to sleep practices for infants. In 2022, in the United States, there were about 3,700 **Sudden Unexpected Infant Deaths** (SUID) (CDC, 2024). These deaths occur among infants less than one-year-old and have no immediately obvious cause (CDC, 2024). The American Academy of Pediatrics released safe sleep recommendations, which advocated that infants be placed for sleep on their backs (nonprone position), a flat, firm surface, and free of other objects. Is it okay to bed-share?

Research shows a higher risk of death for infants younger than 4 months to be bed-sharing. Colvin, Collie-Akers, Schunn, and Moon (2014) analyzed a total of 8207 deaths from 24 states during 2004–2012 that were contained in the National Center for the Review and Prevention of Child Deaths Case Reporting System, a database of death reports from state child death review teams. The results indicated that younger victims (0-3 months) were more likely to die by bed-sharing and sleeping in an adult bed/on a person. Carpenter et al. (2013) compared infants who died of SIDS with a matched control and found that infants younger than three months old who slept in bed with a parent were five times more likely to die of SIDS compared to babies who slept separately from the parents, but were still in the same room. The two studies discussed above were based on American statistics. What about the rest of the world? Co-sleeping occurs in many cultures, primarily because of a more collectivist perspective that encourages a close parent-child bond and interdependent relationship (Morelli et al, 1992). In countries where co-sleeping is common, however, parents and infants typically sleep on floor mats and other hard surfaces which minimizes the suffocation that can occur with bedding and mattresses (Nelson et al, 2000).



Figure 3. An infant holding onto their parent. (Photo Source: [Pikrepo, DMCA](#))

Toilet Training

Toilet training is an important self-care milestone in early childhood development, typically occurring between 18 and 36 months of age. Some children show interest before the age 2, but others may not be ready until months later. The average age for girls to be toilet trained is 24-29 months and for boys it is 26-31 months, and 98% of children are trained by 36 months (Schum et al, 2002; Boyse & Fitzgerald, 2010). The child's age is not as important as his/her physical and emotional readiness. If started too early, it might take longer to train a child. Caregivers should look

for the following signs that their child may be ready for toilet training (Mayo Clinic, 2024; Raising Children, 2023):

- Staying dry for longer periods (2 hours or more)
- Communicating the need to use the bathroom
- Showing interest in the bathroom or toilet
- Hiding to have a bowel movement
- Following simple instructions
- Ability to sit still for short periods

Note that not all these signs need to be present to start toilet training. If a child resists being trained or is not successful after a few weeks, it is best to take a break and try again later. Most children master daytime bladder control first, typically within two to three months of consistent toilet training. However, nap and nighttime training might take months or even years.

Motor Development

In the first few months, infants begin to develop control over their movements, progressing from involuntary arm waving to intentional reaching by about 4 months. Gross motor skills develop concurrently, with babies learning to control their head, torso, and limbs. Motor development occurs in an orderly sequence as infants move from reflexive reactions (e.g., sucking and rooting) to more advanced motor functioning. For instance, babies first learn to hold their heads up, then to sit with assistance, then to sit unassisted, followed later by crawling, pulling up, cruising, and then walking. Fine motor skills involve small, precise movements of the fingers, toes, and eyes, while gross motor skills involve larger movements of major muscle groups.

As motor skills develop, there are certain developmental milestones that young children should achieve. For each milestone, there is an average age, as well as a range of ages in which the milestone should be reached. The textbox below shares motor milestones from 2 months to 2.5 years old. For parents, understanding this developmental progression is key to providing appropriate support and stimulation. Offering safe objects for grasping, creating opportunities for tummy time, and engaging in activities that encourage reaching and manipulation can all foster motor skill development. It's important to remember that each child develops at their own pace, and providing a supportive, patient environment is crucial for healthy motor skill acquisition.

Motor Developmental Milestones (CDC, 2024)

At 2-months:

- Holds head up when on tummy
- Moves both arms and both legs
- Opens hands briefly

At 4-months:

- Holds head up when on tummy
- Moves both arms and both legs
- Opens hands briefly

At 6-months:

- Rolls from tummy to back
- Pushes up with straight arms when on tummy
- Leans on hands to support herself when sitting

At 9-months:

- Gets to a sitting position by herself
- Moves things from one hand to her other hand
- Uses fingers to “rake” food towards himself
- Sits without support

At 1-year:

- Pulls up to stand
- Walks, holding on to furniture
- Drinks from a cup without a lid, as you hold it
- Picks things up between thumb and pointer finger, like small bits of food

At 15-months:

- Takes a few steps on his own
- Uses fingers to feed herself some food

At 18-months:

- Walks without holding on to anyone or anything
- Scribbles
- Drinks from a cup without a lid and may spill sometimes

- Feeds himself with his fingers
- Tries to use a spoon
- Climbs on and off a couch or chair without help

At 2-years:

- Kicks a ball
- Runs
- Walks (not climbs) up a few stairs with or without help
- Eats with a spoon

At 30-months:

- Uses hands to twist things, like turning doorknobs or unscrewing lids
- Takes some clothes off by himself, like loose pants or an open jacket
- Jumps off the ground with both feet
- Turns book pages, one at a time, when you read to her

For more information and videos, go to the [CDC Developmental Milestones website](#)

Key Takeaways

- Early experiences impact neuroplasticity.
- Newborns have well-developed sensory abilities, with vision improving rapidly in the first 6 months and keen hearing from birth.
- Infants' sleep patterns evolve significantly from birth to 2.5 years, with total sleep time decreasing and night-time sleep consolidating.
- Safe sleep practices, including placing babies on their backs and keeping the sleep area free of soft objects, are crucial to reduce SIDS risk.
- Motor development progresses from reflexive reactions to intentional movements, following a predictable sequence from head control to walking.
- Parents can support development by providing diverse sensory experiences, establishing consistent sleep routines, and offering opportunities for motor skill practice.
- Each child develops at their own pace, and providing a supportive, patient environment is crucial for healthy development across all domains.

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BUILDING BLOCKS OF UNDERSTANDING

Social and Emotional Development

Attunement and responsiveness are foundational elements of effective parenting for children, particularly during this developmental period. This sensitive caregiving approach sets the stage for healthy social and emotional development during the critical early years. The textbox below offers a summary of milestones for social and emotional development in the first few years.

In the first few months of life, infants begin to develop a sense of security through consistent, nurturing interactions with their caregivers. They start to offer smiles and communicate through gaze and basic vocalizations, signaling their readiness for social engagement. As they approach 6 to 9 months, babies become eager explorers, learning to solve simple problems and developing object permanence – understanding that people and things exist even when out of sight. Between 1 and 2.5 years, toddlers experience significant growth in their social and emotional capacities. They begin to play interactively with peers and engage in pretend play, which is crucial for developing language, thinking, and social skills. During this period, children also start to explore and express a wider range of emotions, becoming more independent in meeting their needs. They learn to form early friendships, communicate their feelings, and develop a basic sense of empathy. Throughout this developmental journey, responsivity and attunement play a vital role in nurturing a child's development. Having positive early relationships contributes to the child's ability to regulate emotions, develop trust, and build a foundation for future social interactions (Bandon et al, 2010).

Social/Emotional Developmental Milestones (CDC, 2024)

At 2-months:

- Calms down when spoken to or picked up
- Looks at your face
- Seems happy to see you when you walk up to her
- Smiles when you talk to or smile at her

At 4-months:

- Smiles on his own to get your attention
- Chuckles (not yet a full laugh) when you try to make him laugh
- Looks at you, moves, or makes sounds to get or keep your attention

At 6-months:

- Knows familiar people
- Likes to look at self in a mirror
- Laughs

At 9-months:

- Is shy, clingy, or fearful around strangers
- Shows several facial expressions, like happy, sad, angry, and surprised
- Looks when you call her name
- Reacts when you leave (looks, reaches for you, or cries)
- Smiles or laughs when you play peek-a-boo

At 1-year:

- Plays games with you, like pat-a-cake

At 15-months:

- Copies other children while playing, like taking toys out of a container when another child does
- Shows you an object she likes
- Claps when excited
- Hugs stuffed doll or other toy
- Shows you affection (hugs, cuddles, or kisses you)

At 18-months:

- Moves away from you, but looks to make sure you are close by

- Points to show you something interesting
- Puts hands out for you to wash them
- Looks at a few pages in a book with you
- Helps you dress him by pushing arm through sleeve or lifting up foot

At 2-years:

- Notices when others are hurt or upset, like pausing or looking sad when someone is crying
- Looks at your face to see how to react in a new situation

At 30-months:

- Plays next to other children and sometimes plays with them
- Shows you what she can do by saying, “Look at me!”
- Follows simple routines when told, like helping to pick up toys when you say, “It’s clean-up time.”

For more information and videos, go to the [CDC Developmental Milestones website](https://www.cdc.gov/developmental-milestones/)

Emerging awareness and early cognition

Cognitive development in children from birth to 2.5 years is a remarkable journey of rapid growth and learning. This period lays the foundation for future cognitive abilities and is characterized by significant neurological changes. The first two years of life are marked by extraordinary brain development. By age 2, a child’s brain has about 80% of its adult volume. This growth is driven by a process called synaptogenesis, where the number of connections (synapses) between brain cells doubles, giving 2-year-olds twice as many synapses as adults. This abundance of neural connections enables faster learning during this critical period.

Piaget described children’s cognitive development during this timeframe as sensorimotor for much learning is connected to growth in sensory and motor skills. Newborns begin by focusing on objects 8-16 inches away, recognizing familiar voices and smells, and responding to changes in tone of voice. By 3-6 months, infants start exploring objects with their mouth, developing color vision, and responding to music and singing. From 6-12 months, babies begin to understand object permanence, imitate basic actions and gestures, and manipulate objects. Between 12-18 months, toddlers start using single words, help undress themselves, and drink from a cup. By 18-24 months, children begin to say sentences with 2-4 words, sort shapes and colors, and play simple make-believe games. From 24-30 months, toddlers can follow 2-step instructions, name most familiar things, and work toys with moving parts. The textbox below summarizing major cognitive milestones. In addition to cognition connected to sensory and motor experiences, this time frame also includes understanding and learning language, problem-solving, symbolic thinking, and memory development. As described in a previous section, language involves learning rapid vocabulary growth, with toddlers typically saying about 50 words by 18 months with an even larger comprehension vocabulary. Problem-solving skills emerge around 18 months, with toddlers beginning to use simple strategies to achieve goals. Symbolic thinking develops between 18-24 months, enabling children to use objects

symbolically in pretend play. Memory development progresses with children forming short-term and long-term memories, recognizing familiar people and objects.

Parents can support cognitive development by providing a stimulating environment with age-appropriate toys and activities. Engaging in frequent conversations, and using descriptive language during play and routines, helps language development. Reading books, singing songs, and reciting nursery rhymes further support linguistic skills. Offering opportunities for safe exploration and movement encourages learning through sensory experiences. Playing games that support cognitive skills, such as hide-and-seek for object permanence or sorting games for categorization, can be beneficial. Maintaining consistent routines helps children understand sequences and predict events. Ensuring adequate nutrition and sleep is crucial for brain development. It's important to remember that every child develops at their own pace, and while these milestones provide a general guide, it's essential to celebrate each child's unique developmental journey.

Cognitive Developmental Milestones (CDC, 2024)

At 2-months:

- Watches you as you move
- Looks at a toy for several seconds

At 4-months:

- If hungry, opens mouth when he sees breast or bottle
- Looks at her hands with interest

At 6-months:

- Puts things in her mouth to explore them
- Reaches to grab a toy she wants
- Closes lips to show she doesn't want more food

At 9-months:

- Looks for objects when dropped out of sight (like his spoon or toy)
- Bangs two things together

At 1-year:

- Puts something in a container, like a block in a cup
- Looks for things he sees you hide, like a toy under a blanket

At 15-months:

- Tries to use things the right way, like a phone, cup, or book
- Stacks at least two small objects, like blocks

At 18-months:

- Copies you doing chores, like sweeping with a broom
- Plays with toys in a simple way, like pushing a toy car

At 2-years:

- Holds something in one hand while using the other hand; for example, holding a container and taking the lid off
- Tries to use switches, knobs, or buttons on a toy
- Plays with more than one toy at the same time, like putting toy food on a toy plate

At 30-months:

- Uses things to pretend, like feeding a block to a doll as if it were food
- Shows simple problem-solving skills, like standing on a small stool to reach something
- Follows two-step instructions like “Put the toy down and close the door.”
- Shows he knows at least one color, like pointing to a red crayon when you ask, “Which one is red?”

For more information and videos, go to the [CDC Developmental Milestones website](https://www.cdc.gov/developmental-milestones/)

Individual Differences

Infant Temperament

Perhaps you have spent time with several infants. How were they alike? How did they differ? How do you compare with your siblings or other children you have known well? You may have noticed that some seemed to be in a better mood than others and that some were more sensitive to noise or more easily distracted than others. These differences may be attributed to temperament. **Temperament** is the innate characteristics of the infant, including mood, activity level, and emotional reactivity, noticeable soon after birth.

In a 1956 landmark study, Chess and Thomas (1996) evaluated 141 children’s temperament based on parental interviews (hess & Thomas, 1996). Referred to as the New York Longitudinal Study, infants were assessed on 9 dimensions of temperament including: Activity level, rhythmicity (regularity of biological functions), approach/withdrawal (how children deal with new things), adaptability to situations, intensity of reactions, threshold of responsiveness (how intense a stimulus has to be for the child to react), quality of mood, distractibility, attention span, and persistence. Based on the infants’ behavioral profiles, they were categorized into three general types of temperament:

- **Easy Child** (40%) who is able to quickly adapt to routine and new situations, remains calm, is easy to soothe, and usually is in a positive mood.
- **Difficult Child** (10%) who reacts negatively to new situations, has trouble adapting to routine, is usually negative in mood, and cries frequently.
- **Slow-to-Warm-Up Child** (15%) has a low activity level, adjusts slowly to new situations and is often negative in mood.

The percentages listed above do not equal 100% as some children were not able to be placed neatly



Figure 6. A happy infant. (Image Source: [Noba Project](#), licensed [CC 0](#)).

into one of the categories. Think about how you might approach each type of child in order to improve your interactions with them. An easy child will not need much extra attention, while a slow-to-warm-up child may need to be given advance warning if new people or situations are going to be introduced. A difficult child may need to be given extra time to burn off their energy. A caregiver's ability to work well and accurately read the child will enjoy a **goodness-of-fit**, meaning their styles match and communication and interaction can flow. Parents who recognize each child's temperament and accept it, will nurture more effective interactions with the child and encourage more adaptive functioning. For example, an adventurous child whose parents regularly take her outside on hikes would provide a good "fit" to her temperament. Remember that parenting and child-rearing is bidirectional; both caregivers and children influence each others behaviors. Revisit the [Influences on Parenting](#) section in Part I. Key Concepts to review this information.



Figure 7. A parent smiling at their child. (Photo Source: [Miranda Simpson](#))

Temperament does not change dramatically as we grow up, but we may learn how to work around and manage our temperamental qualities. Temperament may be one of the things about us that stays the same throughout development. In contrast, **personality**, defined as an individual's consistent pattern of feeling, thinking, and behaving, is the result of the continuous interplay between biological disposition and experience.

Personality also develops from temperament in other ways (Thompson et al, 2010). As children mature biologically, temperamental characteristics

emerge and change over time. A newborn is not capable of much self-control, but as brain-based capacities for self-control advance, temperamental changes in self-regulation become more apparent. For example, a newborn who cries frequently doesn't necessarily have a grumpy personality; over time, with sufficient parental support and an increased sense of security, the child might be less likely to cry.

In addition, personality is made up of many other features besides temperament. Children's developing self-concept, their motivations to achieve or to socialize, their values and goals, their coping styles, their sense of responsibility and conscientiousness, and many other qualities are encompassed into personality. These qualities are influenced by biological dispositions, but even more by the child's experiences with others, particularly in close relationships, that guide the growth of individual characteristics. Indeed, personality development begins with the biological foundations of temperament but becomes increasingly elaborated, extended, and refined over time. The newborn that parents gazed upon thus becomes an adult with a personality of depth and nuance.

Temperament and Goodness of Fit

Goodness of fit refers to how well a child's temperament matches their environment, particularly their caregivers' parenting style. It's about adapting the environment and caregiving approaches to suit the child's unique temperamental characteristics. Each infant has a unique temperamental style, which may include traits like activity level, adaptability, and emotional intensity. Parents should

adjust their caregiving strategies to match their child's temperament. For example, a highly active toddler may benefit from more physical activities, while a slow-to-warm-up infant might need extra time to adjust to new situations. As infants grow and develop, their needs may change. Parents should remain flexible and adjust their strategies accordingly. Modifying the home environment to suit the child's temperament can promote better outcomes. This might involve providing a stimulating environment for curious babies or creating calm spaces for easily overwhelmed infants. As children get older, parents can also gently encourage adaptability and self-regulation skills appropriate for the child's age.

Key Takeaways

- For cognitive development from 0-2 years, parents should provide a stimulating environment with diverse sensory experiences and engage in responsive interactions, as infants progress from basic sensorimotor explorations to early symbolic thinking and problem-solving.
- In social and emotional development, caregivers should consistently respond to infants' cues with warmth and sensitivity, fostering secure attachments and helping toddlers navigate early emotions and social interactions.
- Parents should recognize their child's unique temperamental traits (such as activity level, adaptability, and emotional intensity) and adjust their parenting approach accordingly to achieve a good "fit" between their style and their child's innate characteristics. Understanding and working with a child's temperament can help parents provide more effective support and reduce potential conflicts, ultimately promoting positive development across all domains.

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COMMUNICATION AND CONNECTION IN THE FIRST FEW YEARS

Communication and Language Development

An important aspect of cognitive development is language acquisition. The order in which children learn language structures is consistent across children and cultures (Hatch, 1983). Language development begins before birth, with fetuses able to perceive and differentiate between languages as early as 24-30 weeks gestation. Newborns show a preference for their mother's voice and the rhythms of their native language, demonstrating that prenatal exposure shapes early language processing in the brain. Parents can support this early development by regularly talking, reading, and singing to their unborn baby, providing a rich linguistic environment that lays the foundation for future language acquisition.

Even before language development, there is communication. Pre-language newborns and infants communicate their thoughts and needs with body posture (being relaxed or still), gestures, cries, and facial expressions. A person who spends adequate time with an infant can learn which cries indicate pain and which ones indicate hunger, discomfort, or frustration. Children communicate information through gesturing long before they speak. Most infants shake their head "no" around 6–9 months, and they respond to verbal requests to do things like "wave bye-bye" or "blow a kiss" around 9–12 months. Children also use contextual information, particularly the cues that parents provide, to help them learn language. Children learn that people are usually referring to things that they are looking at when they are speaking, and that the speaker's emotional expressions are related to the content of their speech (Baldwin, 1993).

Intentional Vocalizations to Use of Language

Intentional vocalizations mark a crucial milestone in a baby's language development, setting the stage for spoken communication. This journey begins with cooing, typically emerging in the first three months of life. Babies produce one-syllable sounds combining consonants and vowels, often mirroring the tones of their native language. These early vocalizations serve as practice and self-entertainment, laying the groundwork for more complex speech. As infants reach four to six months, their vocalizations become more elaborate. They begin to produce a wider range of sounds, including those from various languages, preparing them for the specific sounds of their native tongue. This experimentation with different sounds is a critical step in developing the ability to articulate the phonemes of their language. Babbling emerges around seven months, characterized by repetitive consonant-vowel sequences like "ma-ma-ma" or "da-da-da". By the time babies reach their first birthday, their babbling primarily uses sounds from their native language. This stage is crucial not only for sound production but also for understanding the social and communicative function of language. Between 12 and 13 months, most children begin using their first words or partial words. This stage, known as holophrastic speech, involves using single words or sounds to convey entire thoughts or requests. Parents and caregivers often become adept at interpreting these early

utterances, understanding that “ju” might mean “juice” or represent a request for a bottle. The textbox below identifies key language and communication milestones for the first two years.

Language/Communication Developmental Milestones (CDC, 2024)

At 2 months:

- Makes sounds other than crying
- Reacts to loud sounds

At 4 months:

- Smiles on his own to get your attention
- Chuckles (not yet a full laugh) when you try to make him laugh
- Looks at you, moves, or makes sounds to get or keep your attention

At 6 months:

- Takes turns making sounds with you
- Blows “raspberries” (sticks tongue out and blows)
- Makes squealing noises

At 9 months:

- Makes a lot of different sounds like “mamamama” and “bababababa”
- Lifts arms up to be picked up

At 1-year:

- Waves “bye-bye”
- Calls a parent “mama” or “dada” or another special name
- Understands “no” (pauses briefly or stops when you say it)

At 15-months:

- Tries to say one or two words besides “mama” or “dada,” like “ba” for ball or “da” for dog
- Looks at a familiar object when you name it
- Follows directions given with both a gesture and words. For example, he gives you a toy when you hold out your hand and say, “Give me the toy.”
- Points to ask for something or to get help

At 18-months:

- Tries to say three or more words besides “mama” or “dada”
- Follows one-step directions without any gestures, like giving you the toy when you say, “Give it to me.”

At 2-years:

- Points to things in a book when you ask, like “Where is the bear?”
- Says at least two words together, like “More milk.”
- Points to at least two body parts when you ask him to show you
- Uses more gestures than just waving and pointing, like blowing a kiss or nodding yes

At 30-months:

- Says about 50 words
- Says two or more words together, with one action word, like “Doggie run”
- Names things in a book when you point and ask, “What is this?”
- Says words like “I,” “me,” or “we”

For more information and videos, go to the [CDC Developmental Milestones website](#)

Caregivers’ Role in Language & Communication Development

Parents play a crucial role in fostering their child’s language development from the earliest stages. Engaging in frequent conversations with your baby, even before they can speak, helps them learn the rhythm and turn-taking of conversation. Using a sing-song type of intonation and exaggeration when talking to children can help grab infant’s attention. This represents a universal tendency and is known as **Infant-directed Speech**. Infants are frequently more attuned to the tone of voice of the person speaking than to the content of the words themselves and are aware of the target of speech. Werker, Pegg, and McLeod (1994) found that infants listened longer to a woman who was speaking to a baby than to a woman who was speaking to another adult. It may be to clearly articulate the sounds of a word so that the child can hear the sounds involved. It may also be because when this type of speech is used, the infant pays more attention to the speaker and this sets up a pattern of interaction in which the speaker and listener are in tune with one another. Responding positively to your baby’s vocalizations encourages them to continue practicing and experimenting with sounds. When speaking to your baby, use clear, simple language to help them associate words with objects and actions. Reading to your baby regularly exposes them to a variety of words and sentence structures, supporting their language development. It’s important to be patient with pronunciation errors and simplified words, as these are normal parts of language development. Using gestures along with words can help reinforce meaning and support communication. Consistently exposing your child to your native language(s) helps them develop the specific sounds and rhythms of their language(s). Narrating your actions and describing objects in your child’s environment builds vocabulary and helps children connect words with their meanings. Singing songs and reciting nursery rhymes support phonological (sound) awareness and language rhythm. Lastly, be aware of cultural influences on language development. Understand that the emphasis on nouns versus verbs may vary based on your language and culture. By incorporating these practices into your daily interactions with your child, you create a rich linguistic environment that nurtures their developing communication skills.

Responsive caregiving and emotional attunement

As soon as an infant is born, emotional communication begins. Interactions between caregivers and infants form the foundation for future relationships and emotional development. Our understanding of infant emotions has evolved, recognizing that infants are highly sensitive to their environment and engage in complex emotional exchanges with their caregivers.

Responsive caregiving is a parenting approach that involves consistently and promptly meeting a child's physical and emotional needs in a developmentally appropriate manner. This practice builds on social back-and-forth interactions between caregiver and child, fostering trust and emotional security. Responsive caregiving is being attentive to the child.

This includes

- Promptly responding to a child's cues and signals
- Providing emotionally supportive interactions
- Engaging in activities such as talking, reading, and playing with the child
- Creating a safe environment for exploration and learning

Part of responsive caregiving is emotional attunement. Emotional attunement refers to a caregiver's ability to recognize and respond appropriately to a child's emotional needs and moods. This process is largely non-verbal, relying on cues such as tone of voice, facial expressions, gaze, and body language. When caregivers communicate positively and respectfully, it promotes a sense of safety and well-being in the child, fostering their ability to form positive connections with others.

Emotional attunement may involve:

- Recognizing the emotional state of the child
- Meeting the child at their emotional level
- Joining the child in their feelings, whether positive or negative
- Using facial expressions, tone of voice, and body language to communicate understanding

Why is this important?

An infant's nervous system is particularly sensitive to environmental stimuli. Their brain-mind-body system interprets experiences as either "safe" or "dangerous," influencing their emotional and physiological responses. This sensitivity underscores the importance of caregivers being mindful of their own emotional states and reactions when interacting with infants. Responsive and attuned communication allows children to feel seen, understood, and not alone. This process is crucial for building joy, learning to self-soothe, and developing the ability to return to a state of relational joy from distress. This process is part of building a secure attachment.

Secure attachment

More generally, attachment is the emotional bond formed between a child and their primary caregiver(s). Secure attachment is a direct result of consistent responsive caregiving and emotional

attunement. It provides children with a sense of safety and security, which is essential for healthy emotional, social, and behavioral development.

Secure attachment is a healthy emotional bond formed between a child and their primary caregiver(s) that develops during the first few years of life. This attachment style is characterized by a child feeling safe, supported, and understood, which allows them to explore their environment confidently while knowing they have a reliable base to return to when needed. Parents who have secure attachment with child validate the child's emotions, helping them develop emotional awareness and regulation skills. Securely attached children seek comfort from their caregivers when upset, reflecting the trust built through responsive and attuned caregiving. Children with secure attachments feel confident exploring their environment, knowing their caregiver is emotionally available and responsive when needed. A characteristic of secure attachment relationships is having open emotional communication, allowing children to express their feelings freely. When caregivers consistently respond to a child's needs promptly and appropriately, it builds trust and predictability, key components of secure attachment.

Aspects of a child with secure attachment include:

- Preference for caregiver: The child shows a clear preference for their primary caregiver over strangers, especially in stressful situation.
- Comfort-seeking behavior: When upset or distressed, the child actively seeks comfort from their caregiver and is easily soothed by their presence.
- Exploration with confidence: The child feels comfortable exploring their environment when the caregiver is present, using them as a secure base
- Positive reunion behavior: After a brief separation, the child expresses joy upon the caregiver's return, either by approaching them or showing happiness from a distance.
- Emotional regulation: Securely attached children can better manage their emotions and show resilience in the face of stress or challenges.
- Trust in caregiver availability: The child demonstrates confidence that their caregiver will be available and responsive when needed (including discipline).
- Balanced need for autonomy and closeness: Securely attached children can comfortably seek independence while also maintaining a close relationship with their caregiver.
- Empathy and prosocial behavior: These children often show concern for others and engage in sharing and helping behaviors.

Researchers have identified important connections with early experiences when securely attached:

- Brain Development: Responsive caregiving and emotional attunement stimulate neural connections in the rapidly developing infant brain. This secure base allows children to explore their environment confidently, knowing they have a safe haven to return to when needed. The first three years are a sensitive period for brain development, with the brain doubling in size in the first year and tripling by age three. See the textbox below for more information.
- Emotional Regulation: Through responsive interactions and attunement, children learn to

manage their emotions effectively. This helps in developing self-regulation skills and resilience.

- **Social Competence:** Children who experience responsive caregiving and emotional attunement learn essential social skills by observing and mimicking their caregivers' behaviors. This forms the basis for future positive relationships.
- **Stress Buffering:** Responsive relationships act as a buffer against stress, potentially protecting children from negative health outcomes in adulthood.
- **Communication Skills:** The back-and-forth interactions involved in responsive caregiving and emotional attunement help develop a child's communication skills, both verbal and non-verbal.
- **Cognitive Development:** The stimulation provided through responsive caregiving enhances cognitive abilities, including language development and problem-solving skills.

Brain Development and Attachment

The right hemisphere of the brain undergoes rapid development during the first two years of life (Schor, 2001). This period is crucial for establishing the neurobiological basis of emotional regulation and social connection. For parents, this means that their interactions with their infant during this time have a profound impact on their child's developing brain. The right brain is responsible for processing emotional and social information, making it central to the attachment process (Schor, 2001). When parents engage in face-to-face interactions, mirroring their baby's expressions and responding sensitively to their cues, they directly influence the growth and organization of their child's right brain structures.

In secure attachment, there is "interactive regulation" (Schor, 2001). In a secure attachment relationship, the caregiver intuitively attunes to the infant's emotional states, helping to regulate both positive and negative emotions. This process teaches the child how to manage their own emotions over time.

For parents, this means:

- Responding promptly and appropriately to your baby's cries and other signals
- Consistent, nurturing physical contact with your baby
- Maintaining eye contact and engaging in infant-directed speech
- Engaging in playful, joyful interactions to generate positive emotions
- Helping your baby calm down when they're upset or overstimulated

These interactions create what Schor calls a "growth-facilitating environment" for the infant's developing right brain (Schor, 2001). Through these interactions, secure attachment can help lay the foundation for good mental health. Young children who experience consistent, attuned caregiving develop better stress management abilities, greater emotion regulation skills, greater capacity for social connection and empathy, and resilience in the face of challenges.

Key Aspects of Building Secure Attachment

Parenting is a journey filled with both joyous moments and challenges, and it's important for

caregivers to understand that perfection is not the goal. Mistakes and missed interactions are a natural part of the parenting process, but what matters most is how we respond to these moments and work to maintain a strong emotional connection with our children.

Maintaining Connection

Even when faced with challenging behaviors or difficult situations, caregivers should aim to preserve an attuned and accepting emotional bond with their child. This doesn't mean always agreeing with or allowing problematic behavior, but rather maintaining a supportive presence regardless of circumstances.

Here are some tips:

1. Practice active listening, giving your child your full attention when they speak.
2. Validate your child's feelings, even if you don't agree with their behavior.
3. Use positive touch, like hugs or gentle pats, to reinforce your connection.
4. Engage in activities your child enjoys, showing interest in their world.

Repairing Ruptures

Breaks in emotional connection are inevitable, but how we repair these ruptures is crucial for building a secure attachment.

Here's guidance on effectively repairing these moments:

1. Acknowledge the rupture: Recognize when a disconnection has occurred.
2. Take responsibility: If you've made a mistake, admit it to your child.
3. Express empathy: Show understanding for your child's feelings about the situation.
4. Offer warmth: Use a gentle tone and open body language to convey acceptance.
5. Be curious: Ask about your child's experience without judgment.
6. Inject playfulness: When appropriate, use humor or playful interactions to reconnect.
7. Make amends: If necessary, apologize and discuss how to make things right.
8. Move forward: After addressing the issue, engage in a positive activity together.

Remember, the goal is not to avoid all ruptures, as they provide opportunities for children to learn about conflict resolution and emotional repair. Instead, focus on consistently working to rebuild connection when breaks occur. This process teaches children that relationships can withstand difficulties and emerge stronger, fostering resilience and emotional security. By maintaining connection and repairing ruptures, caregivers create a nurturing environment where children feel safe to express themselves and navigate the complexities of emotions and relationships. This approach supports healthy emotional development and strengthens the parent-child bond over time.

Other Attachment Styles

Researchers can classify attachment styles based on observing interactions between the parent and child. Early on, most of this research was with mothers as the primary caregiver. A classic research paradigm was the Strange Situation. In this set up the parent and child interact in different separation and reunion scenarios with a stranger component. A child with a **secure attachment style** usually explores freely while the caregiver is present and may engage with the stranger. The child will typically play with the toys and bring one to the caregiver to show and describe from time to time. The child may be upset when the caregiver departs but is also happy to see the caregiver return.

While a child is not showing signs of secure attachment, there may be indicators to classify in an insecure attachment style. Researchers have identified two insecure attachment styles.

- The **insecure avoidant style** is marked by insecurity, but this style is also characterized by a tendency to avoid contact with the caregiver and with others. This child may have learned that needs typically go unmet and learns that the caregiver does not provide care and cannot be relied upon for comfort, even sporadically. An insecure avoidant child learns to be more independent and disengaged.
 - In the Strange Situation, a child with an **avoidant attachment style** will avoid or ignore the mother, showing little emotion when the mother departs or returns. The child may run away from the mother when she approaches. The child will not explore very much, regardless of who is there, and the stranger will not be treated much differently from the mother.
- The **insecure disorganized/disoriented style** represents the most insecure style of attachment and occurs when the child is given mixed, confused, and inappropriate responses from the caregiver. For example, a mother who suffers from schizophrenia may laugh when a child is hurting or cry when a child exhibits joy. The child does not learn how to interpret emotions or to connect with the unpredictable caregiver. This type of attachment is also often seen in children who have been abused. Research has shown that abuse disrupts a child's ability to regulate their emotions (Main & Solomon, 1990).
 - In the Strange Situation, a child with a **disorganized/disoriented attachment style** seems to have an inconsistent way of coping with the stress of the strange situation. The child may cry during the separation, but avoid the mother when she returns, or the child may approach the mother but then freeze or fall to the floor.

Research suggests that while secure attachment is the most common type across cultures, there are variations in the distribution of attachment styles (Rothbaum et al, 2010). For example, individualistic cultures tend to have higher rates of avoidant attachment, while collectivist cultures show higher rates of anxious attachment, reflecting differences in parenting practices and cultural values. For example, German parents value independence and Japanese mothers are typically by their children's sides. As a result, the rate of insecure-avoidant attachments is higher in Germany and insecure-resistant attachments are higher in Japan. These differences reflect cultural variation rather than true insecurity, however (Van Ijzendoorn & Sagi, 1999).

Caregiver Interactions and the Formation of Attachment

Consistent caregiving is crucial for healthy infant development and attachment. This can be compromised in settings with high staff turnover or inadequate care, such as some daycares or institutions. However, research shows that even children who lack early attachment opportunities can form secure attachments later, though they may face emotional challenges like depression or indiscriminate friendliness (McMullen, 2018, O'Conner et al, 2003). Severe deprivation of parental attachment can lead to serious developmental problems, including failure to thrive and attachment disorders. Children who experience social neglect, frequent changes in primary caregivers, or are raised in institutional settings may struggle to form stable attachments. Recent research emphasizes the role of responsive caregiving in promoting secure attachment and positive developmental outcomes (Lobo et al, 2023). Interventions focusing on improving caregiver-child interactions and providing stable, nurturing environments can help mitigate the effects of early neglect or inadequate care.

Key Takeaways

- Language acquisition is a crucial aspect of cognitive development, following a consistent order across children and cultures. This process begins prenatally, with fetuses able to perceive and differentiate languages as early as 24-30 weeks gestation, and continues after birth with newborns showing preferences for their mother's voice and native language rhythms. Pre-language communication in infants involves body posture, gestures, cries, and facial expressions, gradually evolving into intentional vocalizations like cooing, babbling, and eventually, first words, marking significant milestones in a child's journey towards spoken language.
- Attachment is the emotional bond formed between a child and their primary caregiver(s), with secure attachment resulting from consistent responsive caregiving and emotional attunement, while insecure attachment (including avoidant, anxious, and disorganized styles) develops when caregiving is inconsistent, unresponsive, or unpredictable.
 - Attachment styles, classified through observing parent-child interactions in scenarios like the Strange Situation, can be categorized as secure or insecure (avoidant or disorganized/disoriented), with cultural variations influencing the distribution of these styles across different societies.
- Maintaining a strong emotional connection with children is crucial in parenting, even during challenging moments. This involves actively listening, validating feelings, using positive touch, and engaging in activities the child enjoys. When ruptures in the emotional bond occur, effective repair is essential. This process includes acknowledging the disconnection, taking responsibility for mistakes, expressing empathy, offering warmth, being curious about the child's experience, using playfulness when appropriate, making amends, and moving forward positively. These practices teach children that relationships can withstand difficulties and emerge stronger, fostering resilience and emotional security.
- Responsive caregiving, emotional attunement, and secure attachment are interconnected processes that lay the groundwork for a child's lifelong emotional, social, and cognitive well-being. By consistently responding to a child's needs, attuning to their emotional state, and fostering a secure attachment, caregivers provide the optimal environment for healthy development during the critical first 2.5 years of life.

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PART V.

PARENTING DURING CHILDHOOD

Our learning will first focus on the physical, cognitive, and socioemotional development during the ages from two to six, referred to as early childhood. Early childhood represents a time period of continued rapid growth, especially in the areas of language and cognitive development. Those in early childhood have more control over their emotions and begin to pursue a variety of activities that reflect their personal interests. Parents continue to be very important in the child's development, but now teachers and peers exert an influence not seen with infants and toddlers.

Then we will connect to parenting approaches and child development during middle to late childhood. Middle and late childhood spans the ages between early childhood and adolescence, approximately ages 6 to 11 years. Children gain greater control over the movement of their bodies, mastering many gross and fine motor skills that eluded the younger child. Changes in the brain during this age enable not only physical development, but contributes to greater reasoning and flexibility of thought. School becomes a big part of middle and late childhood, and it expands their world beyond the boundaries of their own family. Peers start to take center-stage, often prompting changes in the parent-child relationship. Peer acceptance also influences children's perception of self and may have consequences for emotional development beyond these years.

FOSTERING PHYSICAL AND COGNITIVE MILESTONES IN EARLY CHILDHOOD

Supporting Physical Development in Early Childhood

Children between the ages of two and six years tend to grow about 3 inches in height and gain about 4 to 5 pounds in weight each year. Just as in infancy, growth occurs in spurts rather than continually. The 3-year-old is still very similar to a toddler with a large head, large stomach, and short arms and legs. By the time the child reaches age 6, however, the torso has lengthened and body proportions have become more like those of adults. This growth rate is slower than that of infancy and is accompanied by a reduced appetite between the ages of 2 and 6.

This change can sometimes be surprising to parents and lead to the development of poor eating habits. However, children between the ages of 2 and 3 need 1,000 to 1,400 calories, while children between the ages of 4 and 8 need 1,200 to 2,000 calories (Mayo Clinic, 2022). During this time, offer a variety of foods from all food groups. Kids may need to try something 10-15 times before knowing if they like it or not! Have consistent mealtimes and snack times to create structure around eating. Make family meals a priority, as they promote better nutrition and eating habits. Involve children in meal planning and preparation to increase their interest in trying new foods. Avoid using food as a reward or punishment, and let children listen to their own hunger and fullness cues. Be mindful of portion sizes and limit less nutritious options for age-appropriate recommendations go [here](#). Model healthy eating habits yourself, as children often mimic their parents' behaviors.



Figure 1. Children sitting on a staircase. (Image Source: [Samer Daboul](#), [Pexels](#))

Dinnertime Life Hack

We want children to be healthy and to develop good eating habits. Yet many parents and caregivers insist that children “finish what’s on their plate” before leaving the table or having dessert. This message supports the idea that children shouldn’t listen to their own bodies when they are full, and that they should necessarily overeat. If children decide they’re no longer hungry or don’t want a particular item (that they usually didn’t choose anyway), that is normally okay. Children are quite good at regulating their own eating habits if offered healthy choices and allowed to consume the amount that feels right to them.

Dinnertime is a perfect opportunity to provide a variety of healthy options and allow children to choose the right amount to eat. Many caregivers become anxious that children will “starve” if they don’t immediately begin to eat what is served. Instead, adults should be patient and calm to avoid making meals into a power struggle. Consider these tips:

- Don’t get frustrated. If children elect not to try the lentils or cantaloupe one night, it doesn’t mean they’ll never enjoy them.
- Avoid providing alternatives like pizza and fried chicken. These are fine to consume in moderation, but they reinforce picky eating when they become a frequent substitute for less-processed options.
- Speak in a matter-of-fact tone: “That’s fine; if you don’t want the green beans tonight, you can eat more carrots instead.”
- Enjoy your own healthy meals! If children observe others taking pleasure in a variety of foods, they’ll eventually try other options themselves, especially if they aren’t offered less-healthy alternatives.
- Be aware of food allergies or intolerances. If a particular food like dairy products or nuts consistently causes distress, it might indicate a health issue that is best addressed with a physician.

Self-Care Abilities

Self-care abilities for children aged 3-6 years foster independence, confidence, and responsibility. At this stage, children are capable of mastering a variety of self-care skills, such as dressing themselves, brushing their teeth, washing their hands, feeding themselves with utensils, and helping with simple chores like tidying up toys. Parents should set realistic expectations based on their child’s developmental level; for example, by age 4, many children can dress independently with some assistance for more complex tasks like buttons or zippers, while by age 5 or 6 they may begin learning to tie their shoes. Encouraging these skills has numerous benefits, including improved fine motor coordination, a sense of accomplishment, and readiness for school routines. To support self-care development, parents can use strategies such as modeling tasks step-by-step, breaking them into smaller manageable parts, and incorporating visual aids like picture charts to guide routines. Making self-care activities fun—such as turning cleanup into a game or singing songs during handwashing—can also motivate children to participate. Providing opportunities to practice these skills regularly and allowing room for mistakes under safe conditions are key to building competence and confidence. Through patience and consistent encouragement, parents can help their children develop essential self-care abilities that will serve them well throughout life.

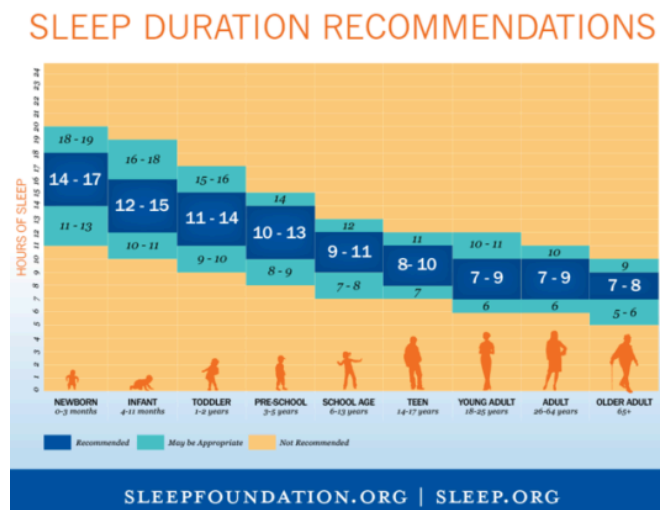


Figure 2. As we age, the amount of sleep recommended for our health decreases steadily.

During early childhood, there is wide variation in the number of hours of sleep recommended per day. For example, two-year-olds may still need 15-16 hours per day, while a six-year-old may only need 8-9 hours. The National Sleep Foundation's 2015 recommendations include 10-13 hours (including nap time) for preschoolers and 9-11 hours for school-aged children (Hirshkowitz et al, 2015). Sleep plays a crucial role in the development and well-being of children aged 3-6 years. Adequate sleep supports cognitive function, emotional regulation, and physical growth. To promote healthy sleep habits, parents should establish a consistent bedtime routine lasting about 20 minutes, which may include activities like

bathing, reading stories, or singing lullabies. It's important to maintain a regular sleep schedule, even on weekends, to support the child's natural biological clock. Creating a sleep-friendly environment with a dark, quiet, and comfortable bedroom can also enhance sleep quality. Parents should limit screen time before bed and avoid caffeine-containing foods and drinks in the afternoon. Implementing these strategies can lead to numerous benefits, including improved mood, better behavior, enhanced learning capabilities, and overall family well-being (Mindell & Williamson, 2018).

Motor Development and Self-Care Milestones (CDC, 2024)

At 3-years old:

- Strings items together, like large beads or macaroni
- Puts on some clothes by himself, like loose pants or a jacket
- Uses a fork

At 4-years-old:

- Catches a large ball most of the time
- Serves herself food or pours water, with adult supervision
- Unbuttons some buttons
- Holds crayon or pencil between fingers and thumb (not a fist)
- Children can put on simple clothing items like elastic waist pants, and they start to manage zippers with some help. They can also undress themselves with minimal assistance.
- By this age, children can use a fork and spoon effectively and drink from an open cup without much spilling.
- They can wash and dry their hands independently and begin to brush their teeth with supervision.

at 5-years-old:

- Buttons some buttons
- Hops on one foot
- Children should be able to dress and undress themselves, including managing buttons, zippers, and snaps.
- They can handle most foods with utensils and are able to pour liquids into a cup.
- Children can brush their teeth with minimal supervision, wash their face, and start to comb their hair.

For more information and videos, go to the [CDC Developmental Milestones website](https://www.cdc.gov/developmental-milestones/)

Supporting Language Development

A child's vocabulary expands between the ages of two to six from about 200 words to over 10,000 words. This "vocabulary spurt" typically involves 10-20 new words per week and is accomplished through a process called fast-mapping, where words are easily learned by making connections between new words and concepts already known. Parents and caregivers can support early literacy by reading to children regularly, supporting a text-rich environment with books and writing materials, and engaging in conversations and activities like storytelling and singing that promote language development. The repetition found in books and songs reinforces semantics, syntax, and grammar, and will promote a positive attitude towards reading. Reading books also furthers

children's exposure to a wider range of vocabulary than they might hear in everyday speech and conversations.

Supporting Cognitive Development

During early childhood, children's rapidly developing language skills enable them to engage in rich imaginative play, such as directing an imaginary ocean of whales from a cardboard hovercraft. This symbolic representation marks a significant cognitive leap, allowing children to think in more sophisticated ways. However, parents should be aware of egocentrism, a characteristic of this stage where children struggle to differentiate their thoughts from others'. Egocentrism means children assume everyone sees, thinks, and feels as they do. For instance, a 3-year-old might choose a toy for an older sibling based on his own preferences, not realizing others have different interests. Parents can help children develop perspective-taking skills by encouraging role-play and asking questions about others' feelings.

Egocentric thinking can lead to amusing situations, like a child believing the moon is following them or that objects have feelings. Parents might notice their child talking to toys as if they're alive or wanting to punish a tricycle after falling. While these behaviors are normal, parents can use these moments as opportunities to gently introduce the concept of different perspectives. Pretend play becomes a favorite activity during this stage. Children use objects creatively, turning a teddy bear into a baby or a queen. Children may also treat inanimate objects as if they have emotions and thoughts, just like themselves. For example, a child may talk to a teddy bear as if it were a living being with feelings (Figure 3). Pretend play reflects changes in their conceptions or thoughts as well as learning. Parents can support this development by providing open-ended toys and participating in imaginative scenarios, which helps children explore different roles and emotions.



Figure 3. Children learn to use pretend play to model behaviors they have observed and to devise scenarios they haven't encountered.

Importantly, play is crucial for children's mental health and well-being. It acts as a natural stress reliever and aids in emotional regulation. Parents should prioritize unstructured free play time, recognizing its role in building self-esteem and confidence. The United Nations even recognizes play as a fundamental human right for children, underscoring its significance in healthy development (UN, 1989). By understanding these developmental characteristics, parents can create an environment that nurtures their child's cognitive and emotional growth while fostering creativity and social understanding.

Executive Function

Executive function skills develop rapidly in children aged 3-6 years old, playing a crucial role in their cognitive, social, and emotional growth. Executive function refers to a set of mental skills that help children manage their thoughts, actions, and emotions. These skills allow children to:

- Focus their attention and ignore distractions
- Remember and follow instructions
- Control impulses and think before acting
- Switch between tasks and adapt to new situations
- Plan and organize their activities

During this period, children's mental ability to temporarily hold and manipulate information (working memory), improves significantly, with children progressing from holding two rules in mind at age 3 to remembering and following multi-step instructions by ages 5-6. Inhibitory control also advances, as children move from struggling with impulse control at age 3 to showing more consistent self-control by age 6. Cognitive flexibility emerges as well, with 3-year-olds having difficulty switching between tasks, while 5-6 year-olds can adapt to changing rules and consider different perspectives.

Parents can support the development of these executive function skills through various strategies. Providing opportunities to practice these skills through games and activities is essential. Breaking tasks into smaller steps and offering clear, simple instructions can help children manage complex tasks. Establishing consistent routines supports self-regulation, while modeling and teaching strategies for emotional regulation, such as deep breathing, can help children manage their emotions. Engaging in pretend play fosters creativity and flexible thinking, and offering choices within appropriate limits encourages decision-making skills. It's important for parents to praise effort and process rather than just results, creating a supportive environment that allows for gradual development of independence. It is crucial to remember that executive function skills continue developing into adolescence, and each child's developmental journey is unique.

Attention and Memory

In addition to language, symbolic thinking, and executive function, children's attention skills also undergo significant development during this period. Children aged 3-4 typically have an attention span of about 8-12 minutes, which increases to 14-20 minutes by ages 5-6. Parents can support children's developing attention span by: Breaking tasks into smaller, manageable chunks, providing clear, simple instructions, minimizing distractions during focused activities, and offering praise for sustained attention.

Children also make significant strides in their ability to recall experiences, focus on tasks, and understand the world around them. One of the key milestones in this age range is the emergence of autobiographical memory. Autobiographical memories are long-term memories of individual life experiences and events. Development of this type of memory can help children recall past experiences, develop self-knowledge, and shape their growing sense of identity over time (Ross et al., 2020; Habermas & Reese, 2015).

Parents can actively support the development of autobiographical memory through engaging in past-talk conversations through scaffolding. When caregivers engage in past-talk conversations, such as helping a child remember a recent family gathering or event, children show improved autobiographical memory, socioemotional skills, and self-regulation (Levy et al., 2019; Wu &

Jobson, 2019). For instance, a parent might help their 4-year-old recall a recent family event by asking, “Remember when we went to the zoo last week? What was your favorite animal we saw?” Prompts like this can help children improve their autobiographical memory and better remember. These conversations not only enhance memory skills but also contribute to improved socioemotional development and self-regulation.

Cognitive and Communication Developmental Milestones (CDC, 2024 & Zubler et al, 2022)

At 3-years old:

- Talks with you in conversation using at least two back-and-forth exchanges
- Asks “who,” “what,” “where,” or “why” questions, like “Where is mommy/daddy?”
- Says what action is happening in a picture or book when asked, like “running,” “eating,” or “playing”
- Says first name, when asked
- Talks well enough for others to understand, most of the time
- Draws a circle, when you show him how
- Avoids touching hot objects, like a stove, when you warn her

At 4-years-old:

- Says sentences with four or more words
- Says some words from a song, story, or nursery rhyme
- Talks about at least one thing that happened during her day, like “I played soccer.”
- Answers simple questions like “What is a coat for?” or “What is a crayon for?”
- Confidently knows their age, recites their first and last name, and describes who lives with them
- Uses full sentences of at least five words and can be understood most of the time
- Names a few colors of items
- Tells what comes next in a well-known story
- Draws a person with three or more body parts
- Understands rudimentary number concepts and names colors and shapes
- Can organize objects by size and shape
- Copies letters and shapes
- Follows a story and predicts what happens next
- Demonstrates awareness of past and present

at 5-years-old:

- Tells a story she heard or made up with at least two events. For example, a cat was stuck in a tree and a firefighter saved it
- Answers simple questions about a book or story after you read or tell it to him
- Keeps a conversation going with more than three back-and-forth exchanges
- Uses or recognizes simple rhymes (bat-cat, ball-tall)
- Producing words that rhyme, matching some spoken and written words,

- Writing some letters and numbers
- Counts to 10
- Names some numbers between 1 and 5 when you point to them
- Uses words about time, like “yesterday,” “tomorrow,” “morning,” or “night”
- Pays attention for 5 to 10 minutes during activities. For example, during story time or making arts and crafts (screen time does not count)
- Writes some letters in own name
- Names some letters when you point to them
- Recites caregivers’ names and contact information
- Tells linear stories using complete sentences
- Counts to ten or more
- Understands basic concepts of time
- Recognizes and writes their own name
- Recognizes letters of the alphabet
- Describes events that happened to them in the past

At 6-years-old:

- Vocabulary expands to about 10,000 words
- Uses verb tenses accurately for past, present, and future
- Engages in multi-turn conversations and stays on topic
- Takes turns in conversations
- Listens to others while they are speaking
- Understands that single words can have different meanings based on context
- Sounds out or decodes unfamiliar words
- Recognizes short, high-frequency words in text (e.g., the, in, on, is)
- Relates people to others, such as “Dad’s sister”
- Speaks using correct grammar most of the time
- Performs simple addition and subtraction
- Understands simple jokes and has a sense of humor
- Writes sentences, though spelling may be incorrect
- Reads simple stories
- Describes full episodes of entertainment programs

For more information and videos, go to the [CDC Developmental Milestones website](https://www.cdc.gov/developmental-milestones/)

Key Takeaways

- **Physical Growth and Nutrition:** Children grow about 3 inches and gain 4-5 pounds annually, with a slower growth rate than infancy. Parents should offer varied foods from all groups, maintain consistent mealtimes, involve children in meal planning, and model healthy eating habits. Be mindful of age-appropriate calorie needs and portion sizes.
- **Self-Care:** Encourage independence in self-care tasks like dressing, teeth brushing, and simple chores. Support development through modeling, breaking tasks into manageable parts, and making activities fun.
- **Sleep:** Ensure adequate sleep (10-13 hours for preschoolers, 9-11 hours for school-aged children) to support cognitive function, emotional regulation, and physical growth.
- **Symbolic Thinking and Egocentrism:** Children develop more sophisticated thinking, but struggle with egocentrism. Parents can foster perspective-taking skills through role-play and discussions about others' feelings.
- **Pretend Play and Imagination:** Pretend play becomes crucial for cognitive and emotional development. Parents should provide open-ended toys and participate in imaginative scenarios to support this growth.
- **Attention Span Development:** Children's attention span increases from 8-12 minutes (ages 3-4) to 14-20 minutes (ages 5-6). Parents can support this by breaking tasks into manageable chunks, providing clear instructions, and praising sustained attention.
- **Autobiographical Memory:** Children begin developing long-term memories of experiences. Parents can enhance this through "past-talk" conversations, helping children recall and discuss past events to improve memory and socioemotional skills.

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EARLY CHILDHOOD PARENTING: NURTURING SOCIAL, EMOTIONAL, AND PERSONAL GROWTH

Supporting Social Development

Children aged 3 to 6 undergo significant social and emotional development, marked by increased engagement with peers and a growing sense of independence. During this period, they begin to engage in interactive and cooperative play, moving beyond parallel play to more complex social interactions. This shift allows children to develop important social skills such as turn-taking, sharing, and following simple rules, although these skills may still require practice and guidance from adults (Family, 2022). The development of social skills during this period extends to an increased understanding and adherence to social rules. Children begin to show greater politeness in their interactions, using words like “please” and “thank you” more consistently (Raising Children Network, n.d.). Parents and caregivers can support this development by providing opportunities for cooperative play and modeling positive social behaviors.

As children approach 6 years old, they become more aware of others’ perceptions and feelings, which marks an important step in their social-emotional development. This increased awareness allows them to better understand and respond to social cues, leading to more sophisticated social interactions (Child Mind Institute, 2024). By age 6, children are becoming more aware of others’ perceptions and feelings, marking an important step in their social-emotional development. They also start to develop problem-solving skills in social situations, learning to navigate conflicts with peers and find solutions to interpersonal challenges (Kids First, 2024). This growth in social cognition is crucial for building positive relationships and succeeding in group settings. Parents can support this development by encouraging empathy, discussing emotions, and providing opportunities for children to practice perspective-taking. By fostering these skills, parents can help their children build a strong foundation for future social success and emotional well-being.



Figure 1. Children sitting on a staircase. (Image Source: [Charles Parker](#), Pexels)

As children progress through early childhood, they typically demonstrate a desire for independence in various aspects of their lives. According to Erikson, the trust and autonomy of previous stages develop into a desire to take initiative or to think of ideas and initiate action (Erikson, 1992). This includes a growing ability to separate more easily from caregivers, which is an important milestone in their emotional development (Child Mind Institute, 2024). Children in this age group often take pride in completing simple self-care tasks independently, such as dressing themselves or brushing their teeth. Children may want to build a fort with the

cushions from the living room couch or open a lemonade stand in the driveway or make a zoo with their stuffed animals and issue tickets to those who want to come. Or they may just want to get themselves ready for bed without any assistance. To reinforce taking initiative, caregivers should offer praise for the child's efforts and avoid being critical of messes or mistakes. Placing pictures of drawings on the refrigerator, purchasing mud pies for dinner, and admiring towers of legos will facilitate the child's sense of initiative.

Caregivers can help to facilitate positive development towards initiative by attending to and responding to children's interests and desires for social connection. For example, if a five-year-old asks to play with a friend but it's a busy week, the caregiver could reassure the child that they can have a playdate next week and follow through in arranging the event. This will help the child feel more confident in their ability to seek out social opportunities. Similarly, if a child is struggling to figure out how to use their new car seat, empowering them to take responsibility and learn how to get situated alone will promote initiative. In contrast, criticizing them for taking too long might increase their feelings of guilt. So if they ask to pour their own juice, let them, but maybe have a towel handy in case of messes: after all, it's all part of learning and growing.

Personality Development and Parenting

At about age three, young children do not yet have a strong sense of self. Although they can identify themselves in mirrors and photos, their self-concept is limited (Harter, 1999). The term self-concept refers to an abstract, cognitive idea of who you are, including all the beliefs you have about yourself. Typically, a self-concept for a three-year-old will include basic vital facts such as their name, gender, and age, and perhaps their relation to another person, such as an older sibling. In comparison, an eight-year-old will often include evaluative components such as hobbies they are good at, and psychological components such as personality traits.

Around age four, children may start to include new information in their self-concept, such as their interests and hobbies. One child may say they like Batman and coloring books, whereas another may mention dancing and the color yellow. However, at age four, these components are based on concrete, factual statements and are not evaluative. Starting around age five or six, some children might start to evaluate their skills internally, but expressing this view outwardly as part of their self-concept is still rare and will usually start later in childhood (Putnick et al., 2020).



Figure 2. Man and boy looking at each other (Image Source: [Pxhere](#))

Although young children may not have the skills to reflect on and articulate their psychological individuality, their uniqueness is obvious to others. Biologically-based patterns of behavior, known as temperament, can describe individual characteristics in a newborn, infant, and toddler. Often, temperament refers to outwardly observable actions, such as activity level, sensitivity, perceived emotional intensity, and perseverance (Goldsmith et al., 1987). Some young children prefer to sit quietly and work on puzzles, look at picture books, and avoid novel situations and loud places. Other preschoolers might prefer active play such as playgrounds and tumble mats, and may enjoy meeting new people and trying new food.

By age five, elements of personality begin to emerge. In contrast to temperament, personality contains more internal attitudes, cognitions, and preferences. Personality traits are also stable characteristics that appear across contexts. Children at this age are just beginning to develop a stable personality. For example, a child may appear moderate in extraversion overall because they are outgoing and outspoken at times, and shy and quiet at other times. A child who is moderate in conscientiousness may be neat and organized at times but careless and messy at other times.

As children approach age six, their personality development becomes increasingly influenced by their social environment and experiences. The family environment plays a crucial role in shaping a child's personality. Secure attachment formed with primary caregivers in early childhood lays the foundation for emotional development, leading to higher self-esteem and better social functioning. By providing a nurturing environment, encouraging exploration and independence, modeling positive behaviors, and offering consistent, supportive guidance, parents can help foster the development of positive personality traits and a strong sense of self in their young children.

Developing Self-Esteem

Along with understanding *who* they are, young children begin to assess *how well* they perform certain tasks and skills at around ages three and four. By this point, most young children base their self-esteem on the feedback they receive from their parents and caregivers. The term self-esteem refers to a personal evaluation of the self, expressing whether you hold yourself in high regard or feel critical about yourself. Children who experience love, support, and encouragement from their parents tend to develop relatively high levels of self-esteem in early childhood. Research shows that parental affection, encouragement, and responsiveness contribute significantly to a child's sense of

self-worth (Krauss et al, 2020). Parents should focus on providing a nurturing environment that communicates to the child that they are worthy of attention and love. Two important factors in the development of self-esteem are social comparisons and self-conscious emotions.

Parents should be aware that around age four, children often have an inflated sense of their abilities. When asked about their performance in activities like running, coloring, singing, or dancing compared to other children, most four-year-olds rate themselves as performing better than others (Marsh et al., 2002; Orth et al., 2018). This is because, at this age, children struggle to objectively compare themselves to others, instead focusing on their own perspective and satisfaction with their abilities. As children approach five years old, parents may notice a shift towards greater self-consciousness. This often coincides with the start of formal education in many countries, including the United States. In school settings, children begin to compare themselves more accurately to their peers, realizing they may not excel at everything. Parents should be prepared for potential changes in their child's self-esteem during this first year of formal education. Children may rely less on parental praise and more on peer comparisons (Pinto et al., 2015). Parents should praise efforts rather than just results, and to provide specific, honest feedback. For example, instead of general praise, parents could say, "I'm proud of you for practicing piano — you've really stuck with it." It's normal for self-esteem to slightly decline as children develop more realistic self-perceptions.

Supporting Emotional Development

As children develop between ages 3-6, they begin to acquire crucial self-regulation skills that are essential for their social and emotional growth. Around age five, children also start to express more mature self-conscious emotions like guilt, shame, and sympathy. Parents play a crucial role in shaping how children express these emotions. Research shows that parental responses to emotions like shame can significantly influence a child's future emotional expressions (Cole et al., 2006). Parents should respond supportively when children display these emotions. Additionally, cultural and gender differences in parental encouragement of emotions like pride can impact children's emotional development (Poharnok & Lang, 2021). Parents should be mindful of how they respond to their child's emotions and strive to provide supportive, balanced feedback that encourages healthy emotional growth.

Moreover, early childhood is a time when children start to think about their emotions and reflect on them. Thinking about our internal emotional state is an aspect of metacognition, or thinking about thinking, including about our memory, cognition, and emotions. Reflecting on behavior that made us feel guilty, dwelling on how nervous we are around others, and considering the way a friend's struggle is making us feel are all new experiences in early childhood. Parents can support their children's development of these skills by providing a nurturing environment, offering consistent guidance, and modeling appropriate behaviors. For example, parents can teach calming techniques

like deep breathing or counting to ten when a child is upset, encourage perspective-taking by discussing characters’ feelings in stories, and practice assertive communication through role-playing. By fostering these skills, parents help their children build a strong foundation for emotional regulation, social competence, and overall well-being.

The following table outlines key self-regulation skills that children develop during early childhood:

Skills	Description
Attentional control	Looking away or walking away from something that is tempting or irritating, to decrease desire or irritation. Coping strategies can include distractions such as using fidget toys, twirling hair, and wiggling toes.
Calming of emotions	Breathing deeply, stretching, closing eyes to calm down and lower the level of emotionality, counting to ten, taking a drink of water, and using muscle relaxation.
Planning and goal-directed behavior	Focusing on a future goal to stay on task by completing a chore, complying with a rule, or avoiding distractions.
Perspective-taking	Understanding the desires, wants, and motivations of other people.
Empathy	Feeling the affective emotional state of others and offering consolation and comfort.
Assertive communication	Being able to communicate needs, desires, and struggles to ask for assistance and help.

Table 1. Regulatory and Interpersonal Skills in Early Childhood (adapted from OpenStax, 2024)

Social/Emotional Developmental Milestones (CDC, 2024)

At 3-years-old:

- Notices other children and joins them to play
- Engaging in imaginative and make-believe play
- Showing affection for friends without prompting
- Copying adults and friends
- Showing concern for a crying friend
- Displaying a wide range of emotions
- Calming down within 10 minutes after a parent leaves
- Expressing wants and needs verbally
- Beginning to understand the concept of sharing, though may still struggle with i

At 4-years-old:

- Engaging in cooperative play with peers and forming friendships
- Developing a sense of independence while still seeking balance with dependence
- Expressing a wider range of emotions verbally
- Comforts others who are hurt or sad, like hugging a crying friend
- Avoids danger, like not jumping from tall heights at the playground
- Likes to be a “helper”
- Changes behavior based on where she is (place of worship, library, playground)

At 5-years-old:

- Follows the rules or takes turns when playing games with other children
- Sings, dances, or acts for you
- Does simple chores at home, like matching socks or clearing the table after eating
- They are generally less frustrated and angry, though they may still express strong emotions at times.
- They have an improved grasp of right and wrong, though their concept may still be somewhat black and white

At 6-years-old:

- Show more independence from parents and family
- Pay increased attention to friendships and teamwork
- Want to be liked and accepted by friends
- Engage in more complex pretend play with peers

- Learn adult social skills like giving praise and apologizing
- Show improved ability to control behavior and emotions
- Cope better with winning, losing, and playing fair
- Express themselves more clearly through words
- Distinguish between reality and imagination

For more information and videos, go to the [CDC Developmental Milestones website](https://www.cdc.gov/developmental-milestones/)

Fostering emotional and social development: parent strategies and support

Parents play a crucial role in supporting the social and emotional development of children aged 3 to 6, while also managing behaviors and fostering a strong parent-child relationship. Throughout this age range, it's essential to balance the encouragement of independence with providing a secure base. For younger children, this might involve offering simple choices and praising attempts at self-care, while older children can be given more complex responsibilities.



Figure 3. Family togetherness. (Image Source: [Keira Burton](#), Pexels)

Fostering social skills is key across these ages. For 3-year-olds, this might involve supervised playdates and modeling basic social interactions. As children grow, parents can introduce more complex social situations, group activities, and discussions about friendships and cooperation. Praise should focus on effort rather than just results across all ages, helping to build resilience and a growth mindset.

Emotional intelligence development is crucial throughout this period. With younger children, parents should focus on naming and validating

emotions. Throughout these years, parents should encourage empathy and perspective-taking. This can start with simple discussions about others' feelings with 3-year-olds and progress to more complex scenarios and moral dilemmas with 6-year-olds. Parents can use everyday situations and storytelling to help children understand different perspectives and develop empathy. Reading together remains valuable throughout this period, with discussions becoming more complex as children grow. Additionally, engaging in play with children not only supports their social-emotional development but also strengthens the parent-child relationship. As children mature, parents can engage in more nuanced conversations about feelings and teach strategies for emotional regulation, such as deep breathing or taking a break when upset. It's important for parents to model appropriate emotional responses and provide a supportive environment for children to express their feelings.

Parents and other caregivers can play an essential role in promoting emotional intelligence and emotion regulation in children. Adults can model and encourage healthy development through emotion coaching, which supports emotion development, rather than by dismissing or disapproving. **Emotion**

coaching strategies include: paying attention to and recognizing a child's emotions and emotional expressions as learning opportunities, listening to and validating their emotions with empathy and kindness, and helping children identify and regulate their emotions (Gottman, 2024). In contrast, emotion-dismissing and emotion-disapproving approaches dismiss, deny, or are negatively judgmental of a child's emotions, which can lead children to struggle with developing healthy emotion regulation. All in all, emotion coaching parenting techniques have been shown to promote higher emotional competence in children (Perry et al., 2020).

Tips for Children's Self-Regulation

Designed for parents, this [YouTube video](#) is about tips for helping children with self-regulation when children may need help learning to control their emotions or behavior (Child Mind Institute, 2024).

Consistent discipline strategies are important across this age range, adapting as children develop. For younger children, this might involve simple rules and immediate consequences, while older children can understand more complex rules and delayed consequences. Parents should set clear expectations for behavior and use positive reinforcement for desired behaviors. Techniques such as time-outs and time-ins, when used correctly, can be effective in managing challenging behaviors.

By providing a nurturing environment that balances support with age-appropriate opportunities for growth, parents can help their 3 to 6-year-olds develop the social and emotional skills they need to thrive. It's important to remember that each child develops at their own pace, and parenting strategies should be adjusted to meet the individual child's needs and developmental stage. Consistent, supportive, and responsive parenting forms the basis for secure attachment, which is associated with positive social and emotional outcomes in children.

Key Takeaways

- Social development progresses from parallel play to cooperative interactions, with children learning important skills like turn-taking and sharing.
- Children develop a stronger sense of self and begin to form more complex self-concepts and self-esteem.
- Emotional regulation skills emerge, allowing children to better manage their feelings and respond to others' emotions.
- Parental support is crucial in all areas of development:
 - Providing opportunities for social interaction
 - Encouraging independence while maintaining a secure base
 - Modeling and teaching emotional regulation strategies
 - Offering consistent, positive discipline
 - Engaging in emotion coaching to promote emotional intelligence
- Each child develops at their own pace, requiring parents to adapt their strategies to meet individual needs.
- A nurturing, supportive environment with responsive parenting forms the foundation for positive social and emotional outcomes in children.

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MIDDLE AND LATE CHILDHOOD PARENTING: PHYSICAL & COGNITIVE DEVELOPMENT

Supporting Physical Development in Middle Childhood

Rates of growth generally slow during these years. As kids grow from grade-schoolers to preteens, there continues to be a wide range of “normal” regarding height, weight, and shape. Kids tend to get taller at a pretty steady pace, growing about 2.5 inches (6 to 7 centimeters) each year, and kids gain about 4–7 lbs. (2–3 kg) per year until puberty starts (Gavin, 2019). They also tend to slim down and gain muscle strength and lung capacity making it possible to engage in strenuous physical activity for longer periods. The beginning of the growth spurt, which occurs before puberty, begins two years earlier for females than males. The mean age for the beginning of the growth spurt for girls is nine, while for boys it is eleven. Children of this age tend to sharpen their abilities to perform both gross and fine motor skills. This is also a time when kids start to have feelings about how they look and how they’re growing. Try to help children understand that the important thing is not to “look” a certain way, but rather to be healthy.

During this period, children’s physical coordination and motor skills continue to improve significantly. Fine motor skills become more refined, allowing for better handwriting, drawing, and the ability to manipulate small objects with increased precision. Gross motor skills also advance, enabling children to participate in more complex physical activities and sports. Parents should encourage regular physical activity, as it not only supports healthy growth but also contributes to cognitive development and emotional well-being. It’s important to note that children may experience periods of clumsiness as they adjust to their changing bodies, especially during growth spurts. This is normal and usually temporary. Additionally, this is a crucial time for developing healthy habits related to nutrition, sleep, and physical activity. Parents should model and encourage these behaviors, as patterns established during this period often persist into adolescence and adulthood. As some children may begin to show early signs of puberty towards the end of this stage, parents should be prepared to discuss these changes openly and supportively, addressing any concerns or questions their children may have about their developing bodies.



Figure 1. Boy on log fishing (Image Source: Image by [Muhamad Suhkry Abbas](#) from Pixabay)

Physical Activity

Designed for parents with children ages 6–12, this [YouTube video about physical activity for children](#) discusses the importance of regular physical activity, how much physical activity children need, and how to get children moving (Middle Childhood Matters Coalition Toronto, 2020).

Brain Development

Along with the body, the brain experiences a growth spurt early in middle childhood and reaches 95 percent of its adult size between seven and eight years of age (Thompson et al., 2020). Although there is very little change in the number of neurons from infancy to adulthood, the brain develops in very important ways during childhood. During this stage of development, new synaptic connections continue to form between areas of the brain that are responsible for sensory and motor skills, and myelination increases (Buyanova & Arsalidou, 2021). The continued development of myelin across early and middle childhood partially explains why children show increased efficiency in reaction times and information processing abilities (Chevalier et al., 2015; Scantlebury et al., 2013). As a result, children will be able to perform tasks that require faster reaction times such as catching a ball, playing a musical instrument, or finally winning family game night.

The human brain consists of left and right hemispheres, joined by a bundle of nerve fibers called the corpus callosum, which continues to mature during middle childhood. During childhood, children are increasingly able to coordinate functioning across the two hemispheres of their brain, a process called lateralization. This process is important for the development of skills that are

lateralized, such as language. As the brains of children develop, their left hemisphere, which is responsible for language production and comprehension, and their right hemisphere, which is responsible for intonation and understanding emotional nuances in language, begin to work together more effectively. This integration can be observed when children start to use more advanced language structures, such as longer sentences and more sophisticated vocabulary. Moreover, children become more capable of expressing and comprehending nuanced emotions through language, indicating a greater coordination between linguistic and emotional processing across both hemispheres. Two major brain growth spurts occur during middle/late childhood. Between ages 6 and 8, significant improvements in fine motor skills and eye-hand coordination are noted. Then between 10 and 12 years of age, the frontal lobes become more developed and improvements in logic, planning, and memory are evident. Children in middle to late childhood are also better able to plan, coordinate activity using both left and right hemispheres of the brain, and to control emotional outbursts. Paying attention is also improved as the prefrontal cortex matures (Markant & Thomas, 2013). The location of the most significant changes in brain development is the prefrontal cortex, the most forward portion of the frontal lobe (Kolk & Rakic, 2022). This area is

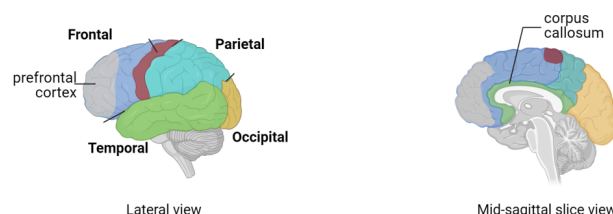


Figure 2. Image of 2 viewpoints for brain showing 4 lobes and cerebral cortex (Image Source: [COpenStax](#))

responsible for tasks such as logic, planning, memory, and attention. As you have learned, various environmental experiences play a role in shaping brain development.

Cognition

Children aged 7 to 12 undergo significant cognitive development. According to Piaget, during this period, their thinking becomes more logical, organized, and flexible when dealing with concrete information. They develop the ability to classify objects, understand the conservation of matter, and grasp concepts like reversibility. Their attention spans increase, allowing them to focus on tasks for longer periods. Working memory improves, enabling them to hold and manipulate more information simultaneously. Problem-solving skills advance as children learn to consider multiple aspects of a situation and use logical reasoning.

School becomes a very important component of children's lives during middle and late childhood, and parents and the culture contribute to children's experiences. We will discuss parenting and education in a later section of the book.



Figure 1. Girl looking up from reading. (Image Source: [Akshaya Patra Foundation](#), Pixabay)

Families and peers are also important influences for cognitive development during middle childhood. For example, parents play an important role in providing a stimulating environment for their children by interacting with them verbally and providing structured activities that allows them to explore their world. Relatively new research has also shown that fathers, as well as mothers, play an important role in the cognitive development of their children by engaging with them through reading, the use of language during interactions, and responsive parenting (Varghese & Wachen, 2016). Whereas mothers tend to use words that are familiar to

children, fathers tend to use a larger variety of words, which helps develop the vocabulary of their children (Vernon-Feagans et al., 2010). Fathers also tend to use more affirmations and action directives than mothers (Tamis-LeMonda et al., 2012). Of course, as discussed in other chapters, there are many individual differences in families, caregivers, and the roles caregivers may play in fostering healthy cognitive development.

Metacognition

Parents should be aware of the growing importance of metacognition during middle childhood, as children between 7 and 12 years old experience significant developments in their ability to think about their own thinking processes. During this stage, children's metacognitive skills become more sophisticated, allowing them to reflect on and regulate their learning and problem-solving strategies more effectively. As children progress through elementary school, they become increasingly capable of monitoring their own comprehension, evaluating their performance, and adjusting their approach to tasks when necessary (Narengaowa, 2024). One key aspect of metacognitive development during this period is the improvement in children's ability to recognize what they don't understand. This self-awareness is crucial for effective learning, as it enables children to seek clarification or

additional information when needed. Another important metacognitive skill that emerges during these years is the ability to plan and organize their approach to tasks. Children become more adept at breaking down complex problems into manageable steps and selecting appropriate strategies to achieve their goals. As children's metacognitive abilities mature, they also become more proficient at self-regulation and cognitive flexibility. This allows them to adapt their thinking and behavior in response to changing situations or new information.

Neuroscience and Parenting: Fostering Self-Regulation

An [article from Greater Good Magazine](#) titled “How Neuroscience Can Help Your Kid Make Good Choices” by Diana Divecha discusses key insights on parenting and brain development.

The article highlights:

- The importance of self-regulation versus self-control in children’s development.
 - Self-regulation is proactive and aims to address the root causes of problematic behaviors or emotions. It involves recognizing stressors, managing stress levels, and developing coping strategies to reduce the occurrence of challenging impulses or reactions. Self-regulation involves using empathy, creativity, and self-control to respond thoughtfully to situations.
 - Self-control is reactive and focuses on restraining impulses or emotions after they have already arisen. It relies on willpower to override immediate urges or reactions.
- Neurological processes like synaptogenesis, pruning, and myelination shape children’s developing brains.
 - Synaptic pruning becomes more targeted during this period, refining neural connections based on experience and learning. This process enhances the efficiency of brain networks, particularly in areas responsible for higher-order thinking, language, and social skills.
 - Myelination progresses in important brain regions, including the corpus callosum and subcortical areas. This process increases the speed and efficiency of information transmission between different parts of the brain.
 - The prefrontal cortex, crucial for executive functions like planning and impulse control, undergoes significant development. This contributes to improvements in cognitive abilities, decision-making, and emotional regulation.
 - These neurological changes support the development of more advanced cognitive skills, including abstract thinking, problem-solving, and improved information processing.
- Parents can support this development by providing enriching experiences, encouraging learning, and fostering social interactions that challenge and engage their child’s growing cognitive abilities.
- Parents can support self-regulation through scaffolding, modeling, and encouraging autonomy.
 - Specific strategies include:
 - Providing glucose for better emotional control
 - Equalizing power dynamics among siblings
 - Exposing children to diverse experiences and friendships

The article emphasizes that empathy, creativity, and self-control are learnable skills that contribute to lifelong well-being when taught with respect for a child’s autonomy.

Parents can support this cognitive growth in several ways. Providing opportunities for hands-on learning experiences can help children develop their logical thinking skills. Encouraging reading and engaging in discussions about books can enhance language development and comprehension. Introducing strategy games and puzzles can promote critical thinking and planning abilities. Parents should also foster independence by allowing children to make age-appropriate decisions and solve problems on their own. Creating a structured environment with routines can help children develop time management and organizational skills. Additionally, engaging children in conversations about abstract concepts and encouraging them to express their thoughts and opinions can further stimulate cognitive development. For metacognitive skills, parents can provide opportunities for children to practice decision-making and problem-solving in various contexts, and by encouraging them to consider alternative perspectives or solutions. Parents can ask their children to articulate areas of confusion by modeling their own thought processes when tackling challenges (Narengaowa, 2024). Parents can also guide their children through the process of setting clear objectives, creating action plans, and reflecting on the effectiveness of their chosen strategies (Narengaowa, 2024).

Parents need to remember that while there are general milestones, each child develops at their own pace. Parents need to recognize that cognitive development occurs gradually and can vary among children. Providing a supportive, stimulating environment and offering praise for effort rather than just results can help children build confidence in their cognitive abilities. By understanding and supporting these cognitive developments, parents can play a crucial role in fostering their child's intellectual growth during these formative years.

Key Takeaways

- Physical growth slows but steadies: Children grow about 2.5 inches and 4-7 pounds per year, with girls starting their growth spurt around age 9 and boys around age 11.
- Brain development enhances cognitive abilities: The brain reaches 95% of adult size by age 7-8, with increased myelination and synaptic connections improving reaction times, information processing, and lateralization.
- Encourage healthy habits: Focus on promoting overall health rather than appearance, and provide opportunities for physical activities that develop both gross and fine motor skills.
- Logical thinking advances: Children's thinking becomes more organized and flexible when dealing with concrete information. They develop abilities such as object classification, understanding conservation of matter, and grasping reversibility concepts.
- Cognitive skills improve: Attention spans increase, allowing for longer focus on tasks. Working memory enhances, enabling better information manipulation. Problem-solving skills advance as children learn to consider multiple aspects of situations and use logical reasoning.
- Metacognition develops: Children become more aware of their own thinking processes, allowing them to reflect on and regulate their learning and problem-solving strategies more effectively. They improve in recognizing what they don't understand and in planning and organizing their approach to tasks.

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MIDDLE AND LATE CHILDHOOD PARENTING: SOCIAL AND EMOTIONAL CONSIDERATIONS

Social and Emotional Development

According to Erikson, children in middle and late childhood are very busy or industrious (Erikson, 1982). Industry, in the context of psychosocial development, refers to a child's capacity for hard work and goal achievement. During middle and late childhood, children experience a significant increase in independence and strive to develop competence in various areas, including athletics, music, social relationships, and academics. This period is characterized by heightened social comparison, as children spend more time with peers both in and out of school, allowing them to evaluate their skills and achievements against those of others. As children navigate this stage, they begin to recognize their strengths and weaknesses, realizing that certain skills and talents are more valued than others. The development of a sense of industry is crucial during this time. When children feel capable of mastering their skills and receive encouragement for their efforts, they cultivate a positive sense of industry. Conversely, if they experience repeated failures or lack of success, they may develop feelings of inferiority, believing they are inadequate in certain areas. This stage is marked by increased assertiveness in social interactions and play. Children are constantly engaged in activities, planning, playing, socializing, and striving for achievement. Their successful navigation of this stage lays a strong foundation for Erikson's fourth stage of psychosocial development: industry versus inferiority. During this time, children construct their sense of success and accomplishment in work tasks. Erikson believed that if children can experience success in their industrious endeavors, they will develop a sense of confidence that will serve them well in future challenges. However, if they consistently fall short of their goals or face repeated setbacks, a pervasive sense of inferiority may develop, potentially impacting their self-esteem and confidence throughout middle and late childhood and beyond.

Social Skills



Figure 1. Hands painted red making a heart shape. (Photo Credit: Image by [Pexels](#) from [Pixabay](#))

Children are also now learning important emotional and social skills. Those who are proficient in their interactions with peers or feel they have valuable talents will develop pride in their abilities and develop self-confidence (Triwiratman et al., 2023). A child who feels they are not as competent as other children may develop feelings of inadequacy. At home, children can contribute to their household while completing chores and other family responsibilities. This opportunity helps develop important life skills, and positive feedback from parents and other family members can reinforce

their sense of competence in their abilities. Erikson's theory is one of the few to consider various cultural and contextual factors in identity development (Syed & Fish, 2018). Some research indicates middle childhood's focus on industry can be fostered in a variety of settings including through home environments and household work, school and peer interactions, in in more agricultural cultures through community farming work (Döring et al., 2015).

Richard Lavoie's Social Skills Autopsy is an innovative approach to helping children develop social competence (Lavoie, 2005). This technique involves a structured analysis of social errors or missteps, conducted jointly by an adult and child. The process aims to help children understand the cause-and-effect relationship between their behavior and others' reactions, fostering improved social skills. In a social autopsy, the child is guided through several steps: explaining what happened, identifying the mistake made, determining the actual social error, and creating a plan to prevent similar errors in the future. This approach is not punitive but rather a supportive, problem-solving technique that actively involves the child in the learning process. By conducting social autopsies regularly and in various settings, children can internalize social skills and generalize them to different situations.

Social Skills Autopsy

The following is an excerpt from Lavoie (2005):

The strategy is based upon three basic tenets.

- 1. Most social skill errors are unintentional. It is universally accepted that a primary need of all human beings is to be liked and accepted by other human beings. Therefore, if a child conducts himself in a manner that causes others to dislike or reject him, can we not assume that these behaviors are unintentional and far beyond the child's control? Why would a child purposefully defeat one of his primary needs?
- 2. If you accept the premise that the offending behavior is unintentional, it becomes obvious that punishing a child for social skill errors is unfair, inappropriate, and ineffective.
- 3. Traditional approaches to social skill remediation are not effective.

The success of this strategy lies in the fact that it provides the child with the four basic steps in any effective learning experience: practice, immediate feedback, instruction, positive reinforcement. This strategy is not about scolding, reprimanding, and punishing, it does not use any of these elements.

Example:

"It's Tom!" Chip bellowed. "Yesterday I bought a brand-new tube of toothpaste. Tonight, Tom borrowed it and lost it!" I turned to Tom and said, "Let's autopsy this!" I began by asking Tom to tell me what had happened. He explained that he was unable to find his own toothpaste. He borrowed his roommate's tube, although he was unable to locate Chip in order to get his permission. He went down the hall to brush his teeth in the bathroom. As he was brushing, Jim (a mutual friend of Chip's and Tom's) entered the bathroom and asked Tom if he could borrow the toothpaste. Jim passed it on to yet another student and its current whereabouts was now unknown. The following dialogue took place:

- LAVOIE: "Okay, Tom, I understand what happened. What do you think your mistake was?"
- TOM: "I know, Mr. Lavoie. I won't make that mistake again. I promise. I never should have borrowed Chip's toothpaste."
- LAVOIE: "No, Tom, that wasn't your mistake. It's okay for you and Chip to borrow things from each other occasionally. You are roommates and friends. You borrow his stuff and he borrows yours. That's not a problem."
- TOM: "Oh, okay. I've got it now. I know my mistake. I shouldn't have lent Jim the toothpaste. I should have told him, 'No.'"
- LAVOIE: "Nope, that's not your mistake, either. Chip and Jim are good friends, too. Chip surely would not have minded you lending an inch of toothpaste to his friend Jim. Try again!"
- TOM: "I've got it! I shouldn't have let go of the tube. I should have squeezed the toothpaste onto Jim's brush and then returned the tube to Chip!"
- LAVOIE: "Bingo, Tom, you've got it! Our social lesson for the day is not 'Do not borrow,' it's not 'Do not lend.' Rather, our lesson is 'When you borrow something from someone, it is your responsibility to be sure that it is returned. You cannot give that responsibility to anyone else.' Got it?"
- TOM: "Yup, I've got it!" LAVOIE: "Okay, let's make sure. Suppose you stuck your head into my office and said, 'Mr. Lavoie, all the kids are playing catch and I don't have a baseball glove. Can I borrow the baseball glove

that you keep in your closet?’ I say ‘yes’ and toss you the glove. While you are playing catch, your dorm counselor comes over and tells you to return to the dorm to finish some chores. As you head off the field, one of the kids asks to borrow the glove because you won’t be using it. What are you going to say?”

- TOM: “I’d say, ‘Sorry, but it’s not my glove, so I can’t lend it to you. It belongs to Mr. Lavoie. Why don’t you come with me while I return it to his office? Then maybe you can ask him to borrow it.’ ”
- LAVOIE: “Great! Now, Tom, I want to give you a little social homework. Today you learned that it is important to return what you borrow and that you can’t give that responsibility to anyone else. Sometime this week, I want you to use that skill. I will check in with you on Friday and you can tell me how and when you did it!”

The Social Skill Autopsy has five basic and separate stages:

1. Ask the child to explain what happened. You will want to have him start at the beginning, if possible. However, some children give a more accurate and complete accounting of an incident if encouraged to begin with the climax of the event and work backwards. Don’t interrupt or be judgmental. You want his clear recollections.

2.. Ask the child to identify the mistake that he made . This is an important and interesting part of the Autopsy process. Many times, the child will be unable to determine when and where the error occurred or his interpretation is inaccurate. Tom initially felt that borrowing the toothpaste was his error. It wasn’t. Had I merely punished Tom (“Give Chip three dollars for a new tube of toothpaste”), Tom would have erroneously felt that his mistake involved borrowing the toothpaste. Often, a child will get in trouble with an authority figure, but the child will have no idea what he has done wrong. “I got in trouble at practice today.” “What did you do?” “I dunno. But I got the coach mad!” How can a child stop repeating a social error if he is unable to determine or understand what the error is?

3. Assist the child in determining the actual social error that he made. Discuss the error and alternate social responses. At this point in the discussion, the adult should avoid using the word should. (“You should have waited your turn,” “You shouldn’t have asked the principal if he wears a toupee.”) Rather, use the word could: “You could have asked if you could take your turn next because Mom was coming to pick you up early,” “You could have asked the principal about his new car or complimented his ties.” This strategy underscores the concept that children have options in social situations.

4. The scenario is the part of the process wherein the adult creates a brief social story that has the same basic moral or goal as the social faux pas. The scenario should have the same basic solution as the incident. It should require the child to generate a response to the fabricated situation that demonstrates his ability to generalize and apply the target skill.

5. Social homework is strongly recommended by Syracuse University psychologist Arnold Goldstein as a strategy to ensure the mastery and application of the target skill. This step requires the child to use the target skill in another setting and report back to the adult when this had been done. This technique causes the child to seek out opportunities to apply the social skill that he has learned. In the toothpaste scenario, I assigned Tom the task of using the skill of appropriate borrowing. A few days later, he excitedly told me that the dormitory counselor had lent him her large snowman mug when the dorm students had cocoa on a wintry night. As Tom was rinsing out the mug, another student asked if he could borrow it. Tom told him that he was not at liberty to lend the mug, but encouraged his dormmate to ask the counselor if he could use it. Tom’s application of the “borrowing concept” demonstrated that he is well on his way to mastering this skill.

Self

By middle childhood, the sense of self is more realistic than it was during early childhood as a more

complex self-concept has emerged. While in early childhood, self-descriptions tend to be focused on physical characteristics and might include the child's hair color, gender, and age, by middle childhood, self-concept is increasingly abstract, multifaceted, and evaluative. Specifically, children in middle childhood start to move from thinking in concrete terms ("I have brown hair") to more abstract qualities ("I am a good friend"; "I'm persistent"). They begin to understand and describe themselves using internal characteristics and psychological traits. They now start to consider their hobbies and interests—whether a genre of music, sports, or art activities—as part of their self-concept. They also include personality characteristics, such as funny, kind, smart, quiet, or brave. Finally, they might consider their abilities such as proclaiming themselves to be good at gymnastics, bad at writing, and/or okay at math. This rich development in self-concept continues into adolescence.

During middle childhood, children's sense of self is influenced by peers and family members, as well as societal messages they receive, such as through the media (Collins & Madsen, 2019). Children in middle childhood become hyperaware of themselves and how others perceive them. Starting in the early elementary grades, they notice the way classmates and other children react to them, and they begin to reflect on and monitor their self-projection, or the way they are portraying themselves around different audiences such as new classmates, close friends, teachers, parents, and other family members (Howe et al., 2022). A child may be more polite and restrained around potential new friends—for instance, funnier and more outgoing around already-close friends, yet serious and intellectual around teachers, and more emotional and dependent around parents. Achieving this requires a sophisticated level of social competence, a skill we use to understand and respond to the differing expectations of various contexts and audiences.



Figure 2. Boy smiling (Image Source: [Alisa Dyson](#), Pexels)

During middle to late childhood, children face increasingly complex social and emotional challenges. As their world expands beyond the family, they encounter a cascade of new experiences that can trigger intense emotions (De Raeymaecker & Dhar, 2022). Children in this age group are developing more sophisticated cognitive abilities, allowing them to better understand cause-and-effect relationships and anticipate future outcomes. However, they may still struggle to regulate their emotions effectively, especially when faced with multiple stressors or disappointments¹. Parents play a crucial role in helping children navigate these cascading events and emotions. By providing a supportive environment and teaching coping strategies, parents can help children build resilience and emotional intelligence. Encouraging open communication, validating feelings, and modeling healthy emotional responses are key parenting strategies during this period.

Although self-efficacy may seem similar to self-esteem, the distinction between them is important. Self-esteem describes how much value a child places on themselves as a worthy individual, while self-efficacy is their belief in their ability to work effectively and achieve in various areas (academics, sports, the arts, relationships, etc.) of their lives. Notably, self-efficacy influences self-esteem (Han &

Park, 2020). For example, a child who believes they can be successful in school (high academic self-efficacy) is more likely to work hard to be successful. That achievement can then increase self-esteem, but only if performing well academically is important to the child. In other words, children's self-esteem is most positively impacted by achieving success in the areas that are important to them.

Building Resilience

Designed for parents with children ages 6–12, this [YouTube video about well-being and resilience](#) for children discusses the four elements of well-being, how to build your child's resilience, and the importance of your own well-being as a parent (Middle Childhood Matters Coalition Toronto, 2020).

Parenting Tasks in Middle to Late Childhood

Parenting during middle to late childhood involves a range of important tasks aimed at supporting children's growing independence while providing necessary guidance and structure.

- One key task is fostering autonomy by involving children in family decision-making and allowing them to take on age-appropriate responsibilities.
- Parents should also focus on nurturing their children's self-esteem and sense of competence, which are crucial for healthy development during this period. Another vital task is supporting children's academic growth and encouraging a love for learning. This can involve helping with homework, communicating with teachers, and providing enriching experiences outside of school.
- Parents must also navigate the changing social landscape of their children's lives, helping them develop and maintain healthy peer relationships. This includes teaching conflict resolution skills, discussing social situations, and providing opportunities for positive peer interactions.
- Parents play a critical role in promoting healthy lifestyle habits, including proper nutrition, regular exercise, and adequate sleep. As children approach adolescence, parents should begin preparing them for the physical and emotional changes ahead, maintaining open lines of communication about puberty and body image.

Throughout this period, consistency in discipline and setting clear expectations remain important parenting tasks. However, discipline strategies should evolve to match children's growing cognitive abilities, incorporating more explanation and reasoning. Finally, parents should strive to create a warm, supportive family environment that serves as a secure base for children as they explore their expanding world. This involves spending quality time together, showing interest in children's activities and thoughts, and providing emotional support during challenging times.

Key Takeaways

- **Industry vs. Inferiority:** During middle and late childhood, children strive to develop competence in various areas, including academics, athletics, and social relationships. Success leads to a sense of industry, while repeated failures may result in feelings of inferiority.
- **Social Comparison and Self-Evaluation:** This period is marked by increased social comparison, as children spend more time with peers and evaluate their skills and achievements against those of others, recognizing their strengths and weaknesses.
- **The dramatic changes happening in the development of self-concept during middle childhood** provide a unique opportunity for caregivers to help children develop positive self-esteem and self-efficacy by providing warmth, support, realistic and constructive feedback, and an emphasis on growth rather than achievements.
- **Importance of Encouragement and Success:** Children who receive encouragement and experience success in their endeavors develop self-confidence and a positive sense of industry, which serves as a foundation for future challenges and overall psychosocial development.
- **Self-concept becomes more complex and abstract:** Children transition from describing themselves using concrete physical characteristics to incorporating abstract qualities, internal traits, interests, and abilities. This multifaceted self-concept is influenced by peers, family, and societal messages, leading to increased self-awareness and the development of social competence in adapting to different social contexts.
- **Balance support and independence:** Parents should foster autonomy while providing guidance, focusing on nurturing self-esteem, supporting academic growth, helping navigate social relationships, promoting healthy habits, and maintaining consistent discipline. This approach creates a supportive environment that allows children to explore their expanding world while feeling secure in their family base.

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PART VI.

PARENTING DURING ADOLESCENCE & BEYOND

There are remarkable changes in their physical, emotional, and social development. This period offers unique opportunities to deepen a parent-child relationship. During adolescence, a child is further developing their own identity, values, and goals. During adolescence, a parent's role evolves from primary caregiver to mentor and confidant. Parents will navigate conversations about identity, values, and future aspirations. It's a time to foster open communication, build trust, and provide a supportive environment for one's teen to explore their growing autonomy. Parents will find new ways to support their independence while still offering guidance when needed. As one's children enter young adulthood, their relationship continues to transform. A parent's role shifts to that of a trusted advisor onward past the teen years. From helping them make important life decisions to celebrating their achievements, your influence remains vital in their journey to adulthood. There will be a balance with guidance while respecting their independence.

In this section, we'll explore aspects of development during adolescence as well as parenting perspectives that can help build strong, lasting parent-child relationships as the child moves into adulthood ensuring they feel supported, respected, and empowered along the way.

PARENTING ADOLESCENTS

Physical changes during adolescence and parenting

As a parent, it's important to understand the physical changes your child will experience during adolescence. This period transforms a child's body into an adult one, and can be accompanied by some temporary discomfort. Your child may experience aches and pains, particularly between ages 4 and 14, which is normal and usually temporary. You might notice your teen becoming temporarily clumsy as they adjust to their changing body.

Both boys and girls will see increases in muscle mass, fat tissue, and height. However, the distribution typically differs: boys tend to develop broader shoulders and a thinner waist, while girls often experience wider hips relative to their shoulders and waist. These differences can lead to variations in strength, endurance, and athletic abilities. These sex-based differences are largely genetically and biologically based, although cultural and social expectations about the activities children participate in likely come into play too (Beltran-Valls et al., 2019; Courtright, et al., 2013; Hyde, 2005).

Children's height and weight can also vary based on racial and ethnic background. Generally, children from African countries are a bit taller than those of European or North American descent, who in turn are a bit taller than those of Asian descent (Roser et al., 2021). Additionally, environmental factors such as access to good nutrition, clean air, and water can affect your child's growth. Children in less polluted areas tend to be taller and have better skeletal development.

Remember, while these patterns are common, there's wide individual variability in physical growth. Each child develops at their own pace, influenced by a combination of genetic and environmental factors.

Physical Activity

Your teenager's interest in physical activity can be influenced by various factors. They might be motivated by competition, social recognition, challenges, friendships, fun, or overall well-being. However, be aware that issues like body image concerns, social anxiety, or lack of time can sometimes discourage participation. It's important to note that social factors can affect your teen's engagement in physical activities. For instance, research has shown that girls aged 13-15 may stop participating in sports due to concerns about their appearance. Further studies have found that teasing and body image issues can contribute to reduced physical activity among girls aged 12-16. As a parent, you play a crucial role in guiding and supporting your teen's physical activity. Be mindful of potential barriers and work with your child to find activities they enjoy. Remember, your teen's participation in physical activities can be influenced by various factors, including access to exercise programs and their individual interests and abilities.

The brain undergoes dramatic changes during adolescence. Although it does not get larger, it matures by becoming more interconnected and specialized (Giedd, 2015). The myelination and development of connections between neurons continues. This results in an increase in the white matter of the brain, and allows the adolescent to make significant improvements in their thinking and processing skills. The corpus callosum, which connects the two hemispheres, continues to thicken allowing for stronger connections between brain areas. Additionally, the hippocampus becomes more strongly connected to the frontal lobes, allowing for greater integration of memory and experiences into our decision making.

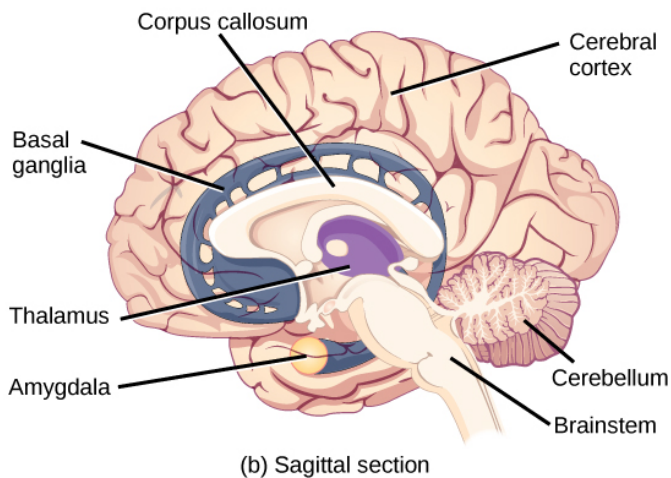


Figure 1. The Limbic System.

The limbic system, which regulates emotion and reward, is linked to the hormonal changes that occur at puberty. The limbic system is also related to novelty seeking and a shift toward interacting with peers. In contrast, the prefrontal cortex which is involved in the control of impulses, organization, planning, and making good decisions, does not fully develop until the mid-20s. According to Giedd (2015) the significant aspect of the later developing prefrontal cortex and early development of the limbic system is the “mismatch” in timing between the two. The approximately ten years that separates the development of these two

brain areas can result in risky behavior, poor decision making, and weak emotional control for the adolescent. When puberty begins earlier, this mismatch extends even further.

As a parent, it's important to understand why your teen might be more prone to taking risks and why a teen might seek out exciting, and sometimes risky, experiences. Research shows that teenagers weigh risks and rewards differently than adults do (Dobbs, 2012). This is due to changes in their brain chemistry:

- Dopamine sensitivity: During adolescence, the brain becomes more sensitive to dopamine, a neurotransmitter involved in reward circuits. This means that for teens, the potential rewards of an action often seem to outweigh the risks.
- Social rewards: Teens are particularly responsive to social rewards and prefer the company of their peers. This is partly due to the influence of oxytocin, a hormone that facilitates bonding and makes social connections more rewarding.

However, it's not all negative. Novelty-seeking and risk-taking can also lead to positive outcomes, such as meeting new people and adapting to new situations. These behaviors play a role in helping your teen separate from the family and develop independence, which is an important part of growing up.

A parent's role is to provide guidance and support, helping your teen navigate these changes safely

while allowing them the space to grow and develop. Parents must balance concerns for the adolescent's safety with support for the adolescent's autonomous decision-making. Supporting autonomy requires the parent to distinguish between aspects of the adolescent's life where continued rules, guidance and supervision are necessary and areas where the adolescent can be trusted to make independent decisions.

Video Connections

Watch Dr. Dan Siegel describe [adolescent brain development in 4.5 minutes \(Random Acts of Kindness, 2019\)](#).

Watch the CDC's 2-minute YouTube video on [Understanding and Adapting to the Teens Years](#) (CDC, 2024).

Adolescent Sleep

As a parent of a teenager, it's crucial to understand the importance of sleep for your child's well-being. The National Sleep Foundation (NSF) recommends that adolescents need about 8 to 10 hours of sleep each night to function at their best (NSF, 2023). However, recent findings from the 2024 Sleep in America Poll show that less than 2 out of 10 teens are actually achieving this recommended sleep duration on both school nights and weekends.

The impact of inadequate sleep on teens is significant. Almost 75% of teens reported that their emotional well-being suffers when they sleep less than usual. Those who get the NSF-recommended amount of sleep on school nights show significantly lower depressive symptoms compared to those who don't. Lack of sleep can lead to various issues for your teen, including:

- Feeling excessively tired or sleepy
- Being cranky or irritable
- Falling asleep in school
- Experiencing depressed mood
- Increased consumption of caffeinated beverages (NSF, 2024)

Moreover, sleep-deprived teens are at higher risk for substance abuse, car crashes, poor academic performance, obesity, and a weakened immune system (Weintraub, 2016).

You might wonder why teens struggle to get enough sleep. While environmental and social factors like homework, technology use, and socializing play a role, there's also a biological factor at play. During puberty, your teen's circadian rhythms shift, causing them to naturally feel sleepy later in the evening (Weintraub, 2016). This biological change makes it challenging for teens to fall asleep early and wake up early, potentially affecting their school performance. When teens are awake too early, their brain function isn't optimal, which can lead to problems with attention, behavior, and academic achievement, as well as increased tardiness and absenteeism.

Cognitive Development

The cognitive development during adolescence marks a significant shift in how teenagers think and process information, bringing about profound changes that shape their worldview and decision-making abilities. One of the most notable advancements is their newfound capacity to grasp abstract concepts without the need for physical references. This ability allows teens to delve into complex ideas such as love, freedom, and morality, enabling them to engage in deeper, more philosophical discussions and contemplations.

Alongside this, adolescents develop hypothetical-deductive reasoning, a skill that enhances their problem-solving abilities and scientific thinking (Crain, 2005). This development manifests in various ways, such as a teenager methodically testing different study techniques to find the most effective one for their learning style, or a young aspiring chef experimenting with various ingredient combinations to create the perfect recipe.

As teens grow cognitively, they begin to exhibit improved metacognitive abilities, allowing them to reflect on their own thinking processes and adjust their learning strategies accordingly. This development enables adolescents to become more efficient and effective learners, as they can now analyze and modify their approach to different cognitive tasks.



Figure 2. Hand on phone while driving.
(Photo Credit: [Abdulvahap Demir](#))

Another crucial aspect of adolescent cognitive development is the emergence of adolescent egocentrism, a concept expanded upon by David Elkind (1967). This phenomenon often results in an intensified self-focus, partly due to the physiological changes occurring during this period. One manifestation of this egocentrism is the “imaginary audience,” where teens believe others are as acutely aware of their appearance and behavior as they are themselves (Schwartz et al., 2008). For instance, a teenager might spend an inordinate amount of time perfecting their outfit for a school dance, convinced that every detail will be scrutinized by their peers. Similarly, the concept of a “personal fable” emerges, where adolescents perceive themselves as uniquely special and invulnerable to harm. This belief might lead a teen to engage in risky behaviors, such as experimenting with substances, under the misguided notion that negative consequences won’t apply to them.

As adolescents continue to grow cognitively, they develop remarkable new abilities that enhance their social and emotional intelligence. One such skill is their improved capacity for perspective-taking, which allows them to understand and empathize with diverse viewpoints more effectively. This newfound ability plays a crucial role in developing their moral reasoning and deepening their empathy, fostering more meaningful relationships and a broader worldview.

Furthermore, their enhanced abstract thinking opens up exciting possibilities for long-term planning and goal-setting. While teens may sometimes struggle with impulse control as they work to execute these plans, this challenge presents valuable opportunities for growth and learning. With

proper guidance and support, adolescents can harness these emerging cognitive strengths to navigate their world more effectively and prepare for future success. It's also worth noting that while these cognitive developments are generally universal, their expression can vary based on cultural context and individual differences. The adolescent brain remains highly plastic during this period, allowing for significant learning and adaptation. This plasticity underscores the importance of supportive environments and experiences in shaping cognitive development.

These cognitive shifts pave the way for increased introspection and idealism. Teens may find themselves deeply pondering their place in the world and engaging in passionate advocacy for causes they believe in. For example, a teenager might become ardently committed to environmental causes, insisting on eco-friendly practices at home. However, this idealism can sometimes lead to apparent hypocrisy, as teens may hold others to standards they themselves struggle to meet (Dolgin, 2011).

As adolescents progress through their teenage years, their executive functions—such as attention span, working memory, and cognitive flexibility—continue to develop and improve. However, self-regulation, particularly the ability to control impulses, may still be a challenge, especially when faced with high-stress situations or significant mental demands (Luciano & Collins, 2012). This discrepancy can lead to seemingly contradictory behaviors, where a teen might excel in complex academic tasks but struggle with impulse control in social situations. For instance, a teenager might demonstrate exceptional problem-solving skills in a complex academic project, yet struggle with impulse control in social settings. This contrast is partly due to the ongoing neurological changes in the adolescent brain, which can make teens more susceptible to risky decision-making under pressure. While it's true that even adults may find their self-regulatory abilities taxed in highly stressful situations, the still-developing teenage brain is particularly vulnerable to such challenges.

The adolescent brain's remarkable plasticity during this period facilitates significant learning and adaptation, highlighting the crucial role of supportive environments and experiences in shaping cognitive development. While these cognitive advancements are generally universal, their expression can vary considerably based on cultural contexts and individual differences, with the pace and specific manifestations of these changes differing from one teen to another. This variability underscores the importance of recognizing and nurturing each adolescent's unique developmental journey. Positive influences and growth opportunities can profoundly impact an adolescent's cognitive trajectory, emphasizing the need for parents, educators, and teens themselves to understand and support this critical developmental phase. By acknowledging the plasticity of the adolescent brain and the diverse ways in which cognitive changes may manifest, we can better provide the continued support and guidance necessary for developing robust cognitive and self-regulation skills across various life situations, ultimately fostering healthy adolescent development.

Here are some tips for supporting your adolescent's cognitive development:

- Encourage critical thinking: Engage your teen in discussions about abstract concepts and hypothetical scenarios to exercise their new cognitive abilities.
- Validate their feelings: Remember that your teen's heightened emotions and sense of uniqueness are part of normal development.
- Provide perspective: Help your teen understand that while their experiences feel unique,

others have gone through similar situations.

- Discuss risk-taking: Address the concept of invulnerability and help your teen understand potential consequences of risky behaviors.
- Foster independence: Allow your teen to make decisions and solve problems on their own when appropriate, supporting the development of their reasoning skills.
- Be patient with criticism: Understand that your teen's newfound idealism may lead to increased criticism of others, including you.

Understanding these cognitive changes is crucial for parents and caregivers in supporting adolescents through this transformative period. By recognizing the underlying processes at work, adults can better empathize with teens' experiences and provide guidance that nurtures their developing cognitive abilities while helping them navigate the challenges that come with this new way of thinking and perceiving the world.

Emotions

The part of the brain involved in decision-making and managing emotions is still under construction during adolescence. This developmental stage often leads to teens experiencing more mood fluctuations and having difficulty managing emotions compared to adults (CDC, 2024). As a parent, it's crucial to observe your teen's emotions carefully, looking for clues in their facial expressions, voice, and body language (CDC, 2024). Work together to build a shared vocabulary for describing different emotions, and be patient as you both learn to identify and express these feelings.

When interacting with a teenager, practice pausing before responding to avoid reacting negatively (CDC, 2024). This might involve taking deep breaths, shifting your attention, or even briefly stepping away from the situation (CDC, 2024). Remember, pausing is a skill that requires practice, so be kind to yourself as you develop this habit. Once you're calm, you can better support the teen with their emotions. Approach these moments as opportunities to connect and strengthen your relationship. Listen actively, ask open-ended questions, and express empathy without judgment (CDC, 2024). These practices can create a safe space for your teen to explore and understand their emotions, fostering emotional intelligence that will serve them well into adulthood.

When supporting an adolescent through emotional challenges, resist the urge to immediately offer advice. Teens often prefer to work through issues independently and may become defensive if they feel you're telling them what to do (CDC, 2024). Instead, focus on listening and understanding their perspective. If the teen wants your input on solutions or problem-solving, they'll likely ask for it. This approach respects their growing autonomy and encourages them to develop their own problem-solving skills. Remember, parents can be a supportive presence, ready to offer guidance when they seek it, rather than imposing solutions.

Exercise: 4 plus and wish revisited

We are revisiting a communication strategy, the 4 plus a wish. The traditional “4 plus and wish” feedback method evolves significantly when applied to teenagers, requiring a more sophisticated and nuanced approach that honors their developing autonomy and complex thinking abilities.

When using this approach, think about when was the last time you had a meaningful conversation with your teen? What aspects of your teen’s development have surprised you recently? How do you typically deliver feedback or criticism?

Identify a situation you would like to talk about. Write down a recent situation with your teen and draft: 4 positive observations, and 1 wish statement. Consider observe your teen for 24 hours. Then, note 4 specific behaviors that demonstrate maturity with one area for growth

Remember to choose moments when teens are receptive to feedback, and frame discussions during relevant activities or natural transitions. Use a conversational tone rather than lecture-style Incorporate active listening and follow-up questions. Reference specific examples of their behavior. Connect observations to their personal goals. Maintain consistency in recognizing growth

- Use more sophisticated language: Instead of simple compliments, offer more nuanced observations about their behaviors, skills, or character traits.
 - “I noticed how you diplomatically handled that conflict in your friend group”
 - “The way you’ve been managing your part-time job while maintaining your grades demonstrates excellent time management”
- Focus on their interests and goals: Tailor your compliments and requests to align with their personal interests, academic pursuits, or future aspirations.
- Respect their autonomy: Frame your “wish” as a suggestion or collaborative decision rather than a direct command.
 - Instead of: “I wish you would clean your room”
 - Try: “I appreciate your independent living style, and I think organizing your study space could enhance your academic focus”
- Engage in dialogue: Use the strategy as a starting point for a more in-depth conversation about their thoughts and feelings.
- Acknowledge their maturity: Recognize their growing responsibilities and decision-making abilities in your interactions.

Some examples:

Academic Situation: Teen struggling with calculus homework

- “I admire your persistence in tackling these complex problems”
- “Your willingness to seek additional resources shows academic maturity”
- “You’ve developed effective study strategies for other subjects”

- “Your questions demonstrate deep mathematical thinking”
- Wish: “Have you considered forming a study group with peers who share your analytical strengths?”

Social Situation: Teen managing social media presence

- “Your awareness of digital footprint implications is impressive”
- “You show good judgment in your online privacy settings”
- “Your ability to balance virtual and real-world friendships is noteworthy”
- “You demonstrate emotional intelligence in your online interactions”
- Wish: “Consider how we might collaborate on guidelines for screen time that align with your social and academic goals”

Personal Growth Situation: Teen exploring career options

- “Your research into different career paths shows initiative”
- “You’re asking insightful questions about various professions”
- “Your self-reflection about your strengths is mature”
- “You’re thinking critically about long-term implications”
- Wish: “Would you be interested in exploring internship opportunities that align with your interests?”

Individual Identity Development within the Family Context

When parenting teenagers, it’s important to understand how family dynamics influence identity formation. An individual’s identity forms in part from being a member of a family. In other words, an individual’s personal identity emerges within the context of the family. Recall the definition of family from the [key concepts](#) at the beginning of this book, that family can include various people who have relationship with an individual beyond just legal or biological ties.

Here are key points to consider:

- Family context shapes identity: Your teen’s personal identity develops within the family environment, which is not neutral but can significantly impact their development (Scabini & Manzi, 2011). Remember that “family” can include various people with meaningful relationships to your teen, beyond just biological or legal ties.
- Family as a unique social group: Unlike most social groups, families typically have a past, present, and future, making them distinct and influential in identity formation (Scabini & Manzi, 2011).
- Family systems and subsystems: Your family is a system made up of subsystems (e.g., couple relationships, sibling relationships, parent-child relationships) that inform individual identity

(Scabini & Manzi, 2011). Each family member has both an individual identity and a shared identity within these subsystems. (visit the [family systems chapter](#) for more information)

- **Interconnected role identities:** Your teen's various role identities (e.g., sibling, child) are interdependent. Your own experiences as a child can influence your parenting role, which in turn affects your teen's identity development (Cigoli & Scabini, 2006).
- **Parenting style's impact:** Your parenting approach can significantly influence your teen's identity development. For instance, research shows that teens who experience significant family abuse may struggle to develop a clear identity compared to those who don't (Hasana et al, 2019).

Praise a Teen (CDC, 2024)

Praising an adolescent effectively can strengthen your relationship and boost their self-esteem. Here are some positive approaches:

1. **Celebrate their growth:** Recognize and appreciate your teen's efforts in developing new skills, forming relationships, and exploring their interests.
2. **Stay engaged:** Take an active interest in their daily life, listen attentively, and familiarize yourself with what's important to them.
3. **Be specific:** When praising, describe exactly what you admire about their actions or behaviors. This helps reinforce positive conduct.
4. **Use various forms of praise:** Combine verbal encouragement with appropriate physical affection (if comfortable for your teen) and nonverbal cues like smiles.

Developing identity

As a parent, understanding your adolescent's journey through identity development is crucial. Erik Erikson posited that the primary psychosocial task of adolescence is establishing an identity, with teens grappling with the question "Who am I?" (Erikson, 1967). This exploration encompasses various aspects of their lives, including appearance, career aspirations, education, relationships, sexuality, political and social views, personality, and interests. Erikson described this period as one of confusion and experimentation, where teens experience a psychological moratorium, temporarily suspending commitment to an identity while exploring options (Côté, 2006).

Identity development in adolescence spans multiple areas. Religious and political identities often mirror family beliefs, though teens may question specific aspects. Vocational identity takes longer to develop in today's world, as many jobs require specialized skills and education. Gender identity formation is becoming more complex as societal norms evolve. Gender identity becoming an increasingly prolonged task as attitudes and norms regarding gender keep changing. The roles appropriate for males and females are evolving. Some teens may foreclose on a gender identity as a way of dealing with this uncertainty, and they may adopt more stereotypic male or female roles (Sinclair & Carlsson, 2013).

Ethnic identity formation, particularly important for minority teens, involves resolving feelings about one's own and other ethnic groups (Phinney, 2006). According to the U.S. Census (2024) more than 53% of Americans under the age of 18 are from ethnic minorities. Phinney's model of ethnic identity formation, based on Erikson's and Marcia's work, outlines three stages: unexamined ethnic identity, ethnic identity search, and achieved ethnic identity (Phinney, 1990).

- **Unexamined Ethnic Identity:** Adolescents and adults who have not been exposed to ethnic identity issues may be in the first stage, unexamined ethnic identity. This is often characterized by a preference for the dominant culture, or where the individual has given little thought to the question of their ethnic heritage.
- **Ethnic Identity Search:** Adolescents and adults who are exploring the customs, culture, and history of their ethnic group are in the ethnic identity search stage.
- **Achieved Ethnic Identity:** Those who have actively explored their culture are likely to have a deeper appreciation and understanding of their ethnic heritage, leading to progress toward an achieved ethnic identity

The process of ethnic identity formation can be influenced by various factors, including exposure to diverse environments and personal experiences with prejudice or cultural recognition. For multiracial or bicultural adolescents, identity formation can be particularly complex. Bicultural identity means the individual sees oneself as part of both the ethnic minority group and the larger society. Those who are multiracial, that is whose parents come from two or more ethnic or racial groups, may have a more challenging task. In some cases their appearance may be ambiguous. This can lead to others constantly asking them to categorize themselves. Phinney (2006) notes that the process of identity formation may start earlier and take longer to accomplish in those who are not mono-racial (Phinney, 2006). They may need to navigate multiple cultural identities, potentially starting the process earlier and taking longer to achieve a sense of self (Phinney, 2006).

As a parent, you can support your teen's identity development by encouraging exploration, providing diverse experiences, and offering a safe space for questioning and discussion. Remember that identity formation is an ongoing process that may extend into young adulthood, and periodic reexamination is normal (Grotevant, 1987). By understanding and supporting this crucial developmental phase, you can help your adolescent build a strong foundation for their future self.

Taking care of yourself and being a positive role model

Parenting teens often involves lots of energy and patience. Your teen may show strong emotions, sudden mood changes, and uncertainty about what they want to do. Taking the time to take care of your physical, emotional, and social needs will give you the resources you need to raise a teen. You can be a positive role model for your teen by taking care of yourself.

Parental mindfulness involves parents maintaining awareness of their own and their teen's thoughts and feelings. This practice can lead to more positive parenting and fewer behavioral problems in teens. For instance, a mindful parent might notice their own frustration rising during an argument with their teen and take a moment to breathe and calm down before responding. They might also be more attuned to subtle changes in their teen's mood or behavior, allowing them to offer support before small issues escalate. Mindful parents are better equipped to respond thoughtfully rather than react impulsively to challenging situations.

It is also important to acknowledge challenges that can impair the ability to parent well. Parental stress, for example, can make it difficult for parents to remain patient and responsive. A parent dealing with work-related stress might find it harder to engage positively with their teen or might be more prone to overreacting to minor issues. Economic disadvantage can limit resources for family activities or create additional stressors that affect parent-child interactions. Past adversity, such as trauma or difficult childhood experiences, might influence a parent's ability to form secure attachments or manage their own emotions effectively. Recognizing these challenges is crucial for parents to seek support and develop strategies to overcome them, ensuring they can provide the best possible care for their adolescents (Moretti & Peled, 2004).

Parents/Caregivers and Teens: Autonomy and Attachment

As teenagers grow, they naturally seek more independence and spend less time with their parents or primary caregivers (Smetana, 2011). This shift can be challenging for parents, who may feel a sense of loss or underappreciation. However, it's crucial to understand that this desire for autonomy is a normal and necessary part of adolescent development. While your teen may be spending more time away from family, your relationship remains vital to their well-being. The key is to strike a balance between respecting their growing independence and maintaining a supportive family connection. This transition prepares teenagers for adulthood by allowing them to establish relationships outside the family while still having a strong familial foundation. As a parent, this can be viewed as a positive step in your teen's development rather than a rejection. Encourage their independence while keeping lines of communication open and finding new ways to connect. Remember, your ongoing support and guidance continue to play a crucial role in helping your teen navigate this important life stage and grow into a healthy, productive adult.



Figure 3. Mom and teen girl in grape field (Photo Credit: Image by [P Zen Chung](#).)

As your teen grows, it's important to encourage their independence while maintaining a strong connection. Children in middle and late childhood are increasingly granted greater freedom regarding moment-to-moment decision making. This continues in adolescence, as teens are demanding greater control in decisions that affect their daily lives. This can increase conflict between parents and their teenagers, often centering on chores, homework, curfew, dating, and personal appearance.

Teens report more conflict with their mothers, as many mothers believe they should still have some control over many of these areas, yet often report their mothers to be more encouraging and supportive (Costigan et al, 2007). As teens grow older, more compromise is reached between parents and teenagers (Smeta, 2011). In addition, culture and ethnicity also play a role in how restrictive parents/caregivers are with the daily lives of their children (Chen et al, 2013).

Having supportive, less conflict-ridden relationships with primary caregivers benefits teenagers. Research on attachment in adolescence find that teens who are still securely attached to their parents have less emotional problems (Rowatll et al, 2015), are less likely to engage in drug abuse and other criminal behaviors (Meeus et al, 2004) and have more positive peer relationships (Shomaker & Furman, 2009).

Support your teen's exploration of hobbies and activities outside the home, as these experiences help develop new skills and foster personal growth. Create regular opportunities for quality time together through shared meals or planned activities, providing chances for open communication and allowing you to offer guidance when needed. When setting expectations for behavior, involve your teen in the process to increase their investment in following these guidelines. Be consistent with your expectations, but also be prepared to adjust them as your teen matures. Regular discussions about their experiences, emotions, and decisions can help them understand the link between their actions and consequences, ultimately supporting their development into responsible adults.

Health Risks

The most common sleep disorders in adolescents include delayed sleep-wake phase disorder, insomnia, and obstructive sleep apnea (Moore & Meltzer, 2014). As a parent, it's important to recognize that sleep disruption can significantly impact your teen's physical and mental health. Sleep disorders can affect their ability to focus in school, regulate emotions, and maintain overall well-being. If your teen is struggling with sleep, consider consulting a healthcare professional to address potential underlying issues.

With all the rapid changes that occur during adolescence, it's no surprise that mental health challenges may arise. The *Youth Risk Behavior Survey Data Summary and Trends Report* showed a dramatic increase in adolescents reporting poor mental health from 2011 to 2021 (CDC, 2024). According to the National Institute of Mental Health (NIMH), approximately 50 percent of adolescents have a mental health disorder, with prevalence increasing from around 45 percent in ages thirteen to fourteen years to 56.7 percent in ages seventeen to eighteen years (NIMH, 2023). Depression and anxiety are among the most common mental health disorders in adolescence, with approximately 31.9 percent experiencing an anxiety disorder and 40.6 percent having at least one major depressive episode (NIMH, 2017). It's also crucial to be aware that 50% of mental illnesses

begin by age 14, and 75% by age 24 (Giedd, 2015). As a parent, it's crucial to be aware of these statistics and watch for signs of mental health struggles such as changes in mood, behavior, or academic performance. Early intervention and open communication about mental health can make a significant difference.

One reason anxiety and depression are more prevalent during adolescence than childhood is the increased disruptions in emotion regulation typical of this stage of development (Young et al., 2020). Adolescents' brains are still developing, particularly in areas responsible for regulating emotions. Additionally, teens with a greater number of adverse childhood experiences (ACEs) are at higher risk for anxiety and depression (Lee et al., 2020). As a parent, creating a supportive environment where your teen feels safe discussing their emotions is vital. Encouraging healthy coping strategies and seeking professional help when needed can help address these challenges early.

Without adequate support, teens facing mental health challenges may turn to unhealthy coping mechanisms such as substance use or self-harm. Research shows that mental health struggles often co-occur with substance use during adolescence (Halladay et al., 2020). Self-harm behaviors, which include deliberate physical harm to oneself, may be nonsuicidal or suicidal in nature. Adolescents who have experienced childhood abuse or neglect are at the highest risk for self-harm behaviors, followed by those with psychological issues such as personality disorders, depression, and anxiety (McEvoy et al., 2023). As a parent, it's essential to stay attuned to your teen's behavior and seek professional support if you notice signs of self-harm or substance use. Early intervention can prevent these behaviors from escalating into more severe outcomes.

Suicide is an especially urgent concern during adolescence, as it is the second leading cause of death among youth aged ten to twenty-four years in the United States (CDC, 2023). In 2023, more than one in five high school students reported contemplating suicide, and one in ten attempted suicide (CDC, 2024). Females and LGBTQ+ youth are at an even higher risk due to factors such as healthcare disparities, increased victimization risks, and fewer protective factors (Gaylor et al., 2023). As a parent, fostering an environment of acceptance and support is critical. Ensuring equitable access to healthcare and promoting socioemotional well-being can help reduce risk factors for suicide. Research emphasizes the importance of suicide prevention efforts that focus on reducing disparities and providing comprehensive mental health support for all adolescents (Gaylor et al., 2023; Wasserman et al., 2021). While strides have been made in prevention efforts, continued research and advocacy remain necessary.

Parenting Approach: Sensitive Attunement

Sensitively attuned parenting involves adapting parenting practices to meet the evolving needs of adolescents (Kobak et al, 2017):

- **Positive engagement:** This component focuses on maintaining mutual respect, positive interactions, and family routines (Moretti & Peled, 2004). For example, parents might establish a weekly family game night or regular shared meals to foster connection. They could also make an effort to show interest in their teen's hobbies or activities, such as attending their sports events or discussing their favorite music.
- **Supervision and guidance:** Parents provide clear rules while gradually increasing

opportunities for autonomous decision-making (Moretti & Peled, 2004). For instance, a parent might start by allowing their teen to choose their own bedtime on weekends, then progress to giving them more freedom in managing their homework schedule. This gradual increase in autonomy helps teens develop decision-making skills while still having parental support.

- **Open communication:** This involves actively listening, empathizing, and responding flexibly to the adolescent’s verbal and non-verbal signals (Moretti & Peled, 2004). For example, a parent might notice their teen seems withdrawn and ask open-ended questions about their day, listening without judgment and offering support if needed. They might also pay attention to non-verbal cues like body language or tone of voice to better understand their teen’s emotional state.
- **Parent mindfulness:** Parental mindfulness, or the capacity to be aware of both their own and their teenager’s thoughts and emotions, can foster collaborative communication and support the development of adolescents’ self-regulation skills and independent decision-making abilities. (Kobak et al, 2017).
- **Individual differences** play a crucial role in effective parenting (Moretti & Peled, 2004). Parents should consider their teen’s unique characteristics when implementing parenting practices. For example, a teen with a more introverted temperament might need more alone time to recharge, while an extroverted teen might thrive on more social interactions. A teen who is highly sensitive to parenting practices might require a more gentle approach to discipline, while another might respond better to clear, direct communication. Biological vulnerabilities, such as a predisposition to anxiety or ADHD, may necessitate additional support or specific parenting strategies tailored to these needs.

Parenting Practices	Markers	Challenges	Adolescent Outcomes
<i>Positive Engagement</i>	Mutual respect/positive feeling	Attending to the adolescent Maintaining Family Routines	Trust in parent’s availability Self-confidence
<i>Supervision & Guidance</i>	Clear rules and expectations for safety/wellbeing	Balancing concerns for adolescent’s safety/wellbeing with support for autonomy	Internalizing inhibitory controls Autonomous decision-making
<i>Open Communication</i>	Cooperative negotiation of goal-conflicts	Respecting adolescent’s views Maintaining a mindful stance	Perspective-taking Communication skills

Table 1. Aspects of Sensitive Attunement (adapted from Kobak et al, 2017)

Key Takeaways

- Adolescence is a period that begins with puberty and ends with the transition to adulthood.
- Changes happen at different rates in distinct parts of the brain and increase adolescents' propensity for risky behavior.
- Cognitive changes include improvements in complex and abstract thought.
- As teens grow, learning to understand and manage their emotions is an essential life skill that contributes to their overall well-being, success, and happiness. Responding to your teen's emotions calmly and with empathy will help them to model those behaviors in their own lives.
- As a parent, being aware of these factors can help you create a supportive environment for your teen's identity formation. Encourage open communication, respect their growing independence, and be mindful of how your own experiences and parenting style may influence their development.
- Adolescents' relationships with parents go through a period of redefinition in which many adolescents become more autonomous. As your teen gets older, remember that your parenting plays an important role in how they grow and make decisions. Encourage your teenager to engage in activities or pursue their interests outside the home, and learn new skills while letting them know that you are there for them.
- Peer relationships are important sources of support, but companionship during adolescence can also promote problem behaviors.
- Identity formation occurs as adolescents explore and commit to different roles and ideological positions.
- Adolescence is a critical time for addressing sleep and mental health challenges, as issues like sleep disorders, anxiety, and depression can significantly impact teens' well-being. Parents can play a key role by fostering open communication, creating a supportive environment, and seeking professional help when needed to address concerns such as sleep disruption, emotional struggles, or risky behaviors like self-harm or substance use.
- Sensitive attunement in parenting teens involves being emotionally responsive, adaptable, and empathetic, recognizing that adolescents require a dynamic approach that balances guidance with increasing autonomy while remaining attuned to their unique developmental needs and individual characteristics.

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PARENTING AFTER ADOLESCENCE: NAVIGATING THE CHANGING LANDSCAPE OF YOUNG ADULTHOOD

ALISA BEYER

Neurological and Cognitive Development

Brain maturation and adult cognition continue to evolve well into adulthood, with significant developments occurring throughout the twenties and beyond. The final stages of neural development, particularly in the frontal lobes, extend into the mid-twenties, challenging previous assumptions about brain maturation being complete by puberty (Steinberg et al., 2009). This prolonged development of executive functions, such as planning and impulse control, has implications for decision-making and behavior during early adulthood. Peak cognitive abilities are typically reached in the late twenties to early thirties, with fluid intelligence peaking around age 25 and crystallized intelligence continuing to grow throughout adulthood (Hartshorne & Germine, 2015).

Despite these cognitive advancements, risky behavior remains a concern in early adulthood. The ongoing maturation of the prefrontal cortex, responsible for impulse control and decision-making, means that young adults may still engage in risky activities. This is particularly evident in areas such as substance use, sexual behavior, and driving habits. Research has shown that risk-taking behaviors often peak in late adolescence and early adulthood, gradually declining as individuals progress through their twenties. The combination of increased independence, social pressures, and still-developing impulse control can create a perfect storm for risky decision-making during this period. Understanding this continued vulnerability to risk can help inform interventions and support systems for young adults as they navigate this critical developmental stage.

Young Adult Risky Behaviors

There are risks associated with emerging adulthood, such as substance abuse. Alcohol and substance abuse remain significant concerns for young adults transitioning into early adulthood, with implications for both individuals and their parents (Substance Abuse and Mental Health Services Administration [SAMHSA], 2023). According to the 2023 National Survey on Drug Use and Health, 28.7% of young adults aged 18 to 25 reported binge drinking in the past month, the highest rate among all age groups (SAMHSA, 2023). Additionally, 36.5% of young adults in this age range used marijuana in the past year, again leading all age groups (National Institute on Drug Abuse [NIDA], 2023). Parents play a crucial role in addressing substance use during this period. While young adults may have less direct parental supervision, maintaining open communication and providing support remain essential. The consequences of substance abuse in early adulthood can be severe. Alcohol use is strongly associated with an increased risk of sexual assault on college campuses (American College

Health Association, 2023). Moreover, 1 in 7 young adults has a substance use disorder, highlighting the prevalence of addiction in this age group (SAMHSA, 2023). Parents can support their young adult children by discussing the risks of substance use, encouraging healthy coping mechanisms for stress, and helping them access resources if needed. Recognizing that 1 in 10 young adults has an alcohol use disorder underscores the importance of parental awareness and intervention (NIDA, 2023).

Risky Behaviors and Mental Health

While supporting our adult children through risky behaviors, it's also important to recognize the potential underlying mental health issues that may be contributing to these behaviors. Identifying these signs early can help us provide more comprehensive support.

Risk behaviors such as substance abuse, self-harm, and unsafe sexual practices often serve as entry points for identifying underlying mental health challenges. These behaviors frequently co-occur with mental disorders, as individuals may engage in risky actions to cope with emotional distress or untreated symptoms (National Institute of Mental Health [NIMH], 2024; Substance Abuse and Mental Health Services Administration [SAMHSA], 2025). For example, substance use disorders (SUDs) and mental health conditions like anxiety or depression share bidirectional relationships: substance use may exacerbate psychiatric symptoms by altering brain structure and function, while mental health disorders increase vulnerability to substance misuse through self-medication attempts (NIMH, 2024; National Institute on Drug Abuse [NIDA], 2024). Adolescents exposed to adverse childhood experiences (ACEs), such as abuse or household dysfunction, show higher rates of smoking, alcohol misuse, and suicidal ideation, with cumulative ACEs correlating strongly with poor mental health outcomes (Centers for Disease Control and Prevention [CDC], 2024). Key mental health issues linked to risk behaviors include:

1. Depression, which predicts suicidal ideation and substance misuse as individuals seek relief from emotional pain (Wu et al., 2024; WebMD, 2011)
2. Anxiety disorders, where chronic worry drives alcohol or drug use to manage symptoms (SAMHSA, 2025)
3. Bipolar disorder, associated with a 40%–60% lifetime prevalence of SUDs due to impulsivity during manic episodes (Greenhouse Treatment Center, 2024)
4. Post-traumatic stress disorder (PTSD), linked to high-risk sexual behaviors and opioid misuse as trauma survivors avoid triggers (CDC, 2024)
5. ADHD, which elevates stimulant misuse risk due to shared neural pathways affecting impulse control (NIDA, 2024).

Early identification of these conditions is critical. School-based screenings and primary care assessments can detect emerging mental health symptoms before risk behaviors escalate (National Alliance on Mental Illness [NAMI], 2024). For instance, adolescents reporting low school connectedness or bullying victimization show heightened vulnerability to self-harm and substance use (PMC, 2020). Interventions like family counseling and emotion regulation training reduce risk behaviors by 16%–34% when implemented during early adolescence (PMC, 2011; CDC, 2024). Comprehensive care models that integrate behavioral therapy, medication management, and

trauma-informed support improve outcomes for co-occurring disorders (SAMHSA, 2025; NIDA, 2024). By addressing root causes rather than isolated behaviors, caregivers and clinicians can disrupt cycles of dysfunction and promote long-term resilience.

Emerging Adulthood

This extended period of development and risk-taking aligns with the concept of emerging adulthood, a distinct developmental stage proposed by psychologist Jeffrey Arnett. Emerging adulthood, typically spanning from the late teens through the twenties, is characterized by five key features:

1. Identity exploration
2. Instability
3. Self-focus
4. Feeling in-between
5. Age of possibilities

This stage recognizes that the transition to full adulthood is often prolonged in contemporary societies, with individuals taking longer to achieve traditional adult milestones such as marriage, parenthood, and stable careers. During emerging adulthood, individuals navigate complex personal and social challenges while their brains are still developing. This can lead to a unique set of experiences and behaviors that set this stage apart from both adolescence and full adulthood. The combination of increased independence, ongoing neural plasticity, and the exploration of various life paths creates a period of both opportunity and vulnerability for young people. Emerging adulthood, a period typically spanning from the late teens to mid-twenties.

Understanding these characteristics provides valuable context for parents as they support their adult children through this transitional period. It's a time of optimism and potential, where young adults can change directions and shape their futures, but it also presents unique challenges.

Milestone Changes in Parenting Young Adults

Recent research from the Pew Research Center (2024) highlights significant changes in key milestones for young adults compared to 30 years ago. These shifts, when viewed through the lens of emerging adulthood, have important implications for parenting in the post-adolescent years:

- **Education and Career Exploration:** Young adults today are more likely to pursue higher education, with women making particularly significant gains. This aligns with the identity exploration aspect of emerging adulthood. Parents often continue to play a supportive role, with 11% of young adults receiving financial help for education in the past year.
- **Financial Independence and Instability:** While young adults are more likely to work full-time and earn higher wages than their counterparts in 1993, they also face increased financial responsibilities. Only 45% of young adults report being completely financially independent from their parents. This financial instability is characteristic of emerging adulthood and suggests a need for parents to foster financial literacy while being prepared to offer support.
- **Debt and Financial Planning:** The increased likelihood of substantial student loan and mortgage debt among young adults today emphasizes the need for early discussions about financial planning. This relates to the self-focus aspect of emerging adulthood, as young adults navigate their financial futures.
- **Delayed Traditional Milestones:** As young adults navigate the complex landscape of emerging adulthood, they often find themselves in a state of transition, feeling “in-between” adolescence and full adulthood. This period, characterized by identity exploration, instability, and self-focus, is marked by delayed milestones such as marriage and parenthood[4][8]. According to Erik Erikson’s theory of psychosocial development, young adulthood is the time when individuals focus on establishing intimate relationships, a process crucial for avoiding social isolation (Erikson, 1968). During young adulthood, Erikson (1968) highlights the importance of forming meaningful connections with others. However, achieving this intimacy can be challenging if one is still grappling with identity issues. In today’s context, where identity exploration extends well into emerging adulthood, it’s common for young adults to delay forming long-term romantic relationships until they have a clearer sense of self. This delay in achieving traditional adult milestones, such as marriage, is a reflection of this ongoing identity development process. Parents should be prepared for their children to reach these milestones later in life. This might mean that adult children need ongoing support as they navigate their identities and relationships. Understanding these dynamics can help parents provide more effective support and guidance during this critical phase of development.
- **Living Arrangements and Family Dynamics:** More young adults are living with their parents compared to 30 years ago. This trend illustrates the instability and extended exploration period of emerging adulthood. As young adults transition into independent adulthood, they face a myriad of responsibilities that are often not fully anticipated by either parents or the young adults themselves. There is a notable gap between how parents and young adults



Figure 2. Marriage and parenthood are occurring later in life for today's young adults, reflecting the “feeling in-between”

perceive preparation for independent adulthood. While 86% of parents believe they have done a great deal or a fair amount to prepare their children, only 66% of young adults agree. This discrepancy underscores the importance of explicit discussions about adult responsibilities and expectations.

Key Adult Responsibilities:

The following list highlights key adult responsibilities and expectations that parents should discuss with their children to ensure a smooth transition. By recognizing these responsibilities, parents can better prepare their children for the challenges and opportunities of adulthood.

1. Financial Management:

- Paying bills on time (e.g., rent, utilities, car payments)
- Budgeting and saving for emergencies and long-term goals
- Managing credit and maintaining a good credit score

2. Health and Wellness:

- Maintaining a healthy diet and regular exercise routine
- Scheduling regular health check-ups and vaccinations
- Managing stress and mental health

3. Time Management and Productivity:

- Balancing work, leisure, and personal responsibilities
- Setting and achieving long-term goals
- Prioritizing tasks and managing time effectively

4. Interpersonal Relationships:

- Developing and maintaining strong friendships and romantic relationships
- Building professional networks and maintaining workplace relationships
- Communicating effectively with family members

5. Community and Social Responsibilities:

- Contributing to the community through volunteering or civic engagement
- Being aware of and adhering to social norms and laws
- Participating in environmental sustainability efforts



Figure 3. Young adults find companionship in both friend groups and prospective partners. (Photo Source: [Pikrepo](#), [DMCA](#))

While the concept of emerging adulthood was initially based on research in the United States, we can examine cultural variations globally, particularly in Organization for Economic Co-operation and Development (OECD) countries. OECD countries include 38 member countries committed to democracy and market economy variations.

In Europe, emerging adulthood is often the longest and most leisurely. European countries typically have:

- Median ages for marriage and parenthood near 30
- Generous social welfare systems supporting education and employment
- A cultural emphasis on self-development and leisure

In contrast, developed Asian countries like Japan and South Korea show a different pattern:

- Similar delayed entry into marriage and parenthood
- Generous social welfare systems
- A stronger emphasis on collectivism and family obligations

Recognizing emerging adulthood as a distinct life stage can help parents understand and support their adult children more effectively. These cultural differences highlight the importance for parents to understand and adapt their approach based on their specific cultural context. For example, emerging adults in areas of Europe, Japan, and South Korea enjoy the benefits of living in affluent societies with generous social welfare systems that provide support for them in making the transition to adulthood, including free university education and substantial unemployment benefits. While supporting independence and self-exploration remains crucial, the extent and nature of this support may vary depending on cultural expectations and societal structures.

Parenting Role Transition

In early adulthood, the parent-child relationship has to transition toward a relationship between two adults. This involves a reappraisal of the relationship by both parents and young adults. One of the biggest challenges for parents/caregivers, especially during emerging adulthood, is coming to terms with the adult status of their children. Aquilino (2006) suggests that parents who are reluctant or unable to do so may hinder young adults' identity development (Aquilino, 2006). This problem becomes more pronounced when young adults still reside with their parents. Arnett (2004) reported that leaving home often helped promote psychological growth and independence in early adulthood.

Parent Communication during this period

Young adults frequently seek advice from their parents on various aspects of their lives, particularly during major life transitions. Here are the key points for parents of young adults from Pew Research Center report (2024):

- Top advice topics: Young adults most commonly seek parental advice on finances (68%), career or job situations (67%), parenting their own children (66%), and physical health (62%).

- Age differences: Those aged 18-24 are most likely to seek parental advice, with 79% asking about finances and 77% about careers. This tendency decreases as young adults age.
- Communication frequency: 61% of young adults text their parents at least a few times a week, with 23% doing so daily. 46% talk or video chat at least a few times weekly. 73% of parents text their adult children at least a few times a week, with 31% doing so daily, maintaining close contact during this transitional period.
- Gender differences: Young women communicate more frequently with parents than young men, with 70% of women texting at least a few times a week compared to 49% of men.
- Satisfaction with involvement: 69% of young adults feel their parents are appropriately involved in their lives, while 22% wish for more involvement. Similarly, 67% of parents feel they are appropriately involved in their adult children's lives, suggesting a generally healthy balance in parent-child relationships.
- Knowing parents beyond parenting: Interestingly, the report reveals that many adult children have limited knowledge of their parents' lives beyond their parenting role:
 - Only 33% of parents say their adult children know them very well as a person; 40% say their children know them somewhat well, and 26% report that their children don't know them too well or at all well.

The parent-child relationship during adulthood is evolving. As young adults gain independence and develop their own identities, there's an opportunity for grown children to see their parents in a new light – as individuals with their own histories, interests, and complexities beyond their parenting role. For parents, this suggests that while maintaining a supportive role is crucial, there's also value in sharing more about themselves as individuals. This can lead to a more balanced, adult-to-adult relationship as their children mature. It may involve sharing personal stories, discussing their own challenges and triumphs, or involving adult children in aspects of their lives that weren't previously shared. For emerging adults, this data indicates an opportunity to deepen their understanding of their parents, potentially leading to richer, more multifaceted relationships as they navigate adulthood together. Engaging in conversations about their parents' lives, experiences, and perspectives beyond parenting can contribute to personal growth and strengthen family bonds.

Attachment in Young Adulthood

As we navigate changes in parent roles and boundaries, understanding how attachment styles from earlier years influence our adult relationships can provide some insights into why some adult children transitions are smoother than others. Adult attachment styles are thought to reflect individuals' cognitive-affective "working models" (i.e., mental representations) of self and other and resulting behavioral orientations toward close relationship partners. Remember that the formation of attachment styles is a dynamic process that begins in early childhood and continues to evolve throughout life. Early experiences with caregivers play a crucial role in shaping internal working models of relationships, which influence future attachment behaviors (Dinero et al, 2009). However, attachment styles are not fixed and can change over time due to significant life experiences, self-awareness, and intentional efforts to modify attachment-related behaviors.

Bartholomew (1990) suggested that adult attachment was best described as varying along two dimensions; attachment related-anxiety and attachment-related avoidance. Attachment-related anxiety refers to the extent to which an adult worries about whether their partner really loves them. Those who score high on this dimension fear that their partner will reject or abandon them (Fraley et al, 2015). Attachment-related avoidance refers to whether an adult can open up to others, and whether they trust and feel they can depend on others. Those who score high on attachment-related avoidance are uncomfortable with opening up and may fear that such dependency may limit their sense of autonomy. Attachment anxiety is associated with worries about partner availability and responsiveness, while attachment avoidance relates to discomfort with closeness and dependency on others (Yang et al, 2024).



Figure 4. Group of adults with hands in air (Photo Credit: [Min An Pexels](#))

Key points connecting attachment in adulthood include its influence on romantic relationships, mental health, and overall well-being. Higher anxiety correlates with fear of abandonment, while avoidance predicts discomfort with intimacy. Recent meta-analyses confirm linkages between adult attachment styles and key life outcomes, including romantic relationships, mental health, and well-being. For example, Zhang et al. (2022) synthesized 224 studies ($N = 79,722$) and found that higher attachment anxiety and avoidance strongly predicted poorer mental health outcomes (depression, anxiety) and were correlated with reduced life satisfaction and self-esteem. For romantic relationships, attachment anxiety and avoidance predicted conflict escalation and reduced emotional intimacy. Avoidant individuals often withdraw during disagreements, while anxious partners exhibit hypervigilance to rejection, perpetuating cycles of dysfunction (Van IJzendoorn, 1995; Verhage et al., 2020).

Longitudinal work reveals attachment styles are moderately stable but malleable; supportive relationships and therapy can shift avoidant and anxious patterns (Fraley et al., 2013; Gillath et al., 2008). Additionally, romantic relationships can recalibrate attachment: a study found 30% of adults shifted styles over 4 weeks, often due to corrective emotional experiences (Baldwin & Feeney, 2008). They define corrective emotional experiences as positive relational interactions that contradict prior negative expectations (e.g., receiving consistent support from a partner after years of emotional neglect). This study also shows that repair can happen as changes often occurred when participants encountered relationships that provided safety, trust, or validation, reshaping their beliefs about themselves and others and intentional efforts can drive shifts in attachment.

Implications for Parenting

1. **Breaking Intergenerational Cycles:** Parents with unresolved trauma or insecure attachment (e.g., avoidance, anxiety) are three times more likely to raise insecurely attached children (Verhage et al., 2020). Parents with unresolved trauma or insecure attachment (e.g., avoidance, anxiety) should seek therapy to mitigate risks of transmitting dysfunctional patterns to their children. Interventions like mentalization-based therapy can help parents reframe relational

patterns, reducing risks of emotional neglect or overprotection (Newman et al., 2021).

2. **Modeling Secure Behaviors:** Demonstrate trust in your child's autonomy while offering consistent support (e.g., "I'm here if you need advice, but I respect your choices"). Securely attached parents tend to use authoritative parenting—combining warmth with boundaries (e.g., "You can attend the party after homework")—which fosters child autonomy and emotional regulation (Pinquart, 2023).
3. **Cultural Sensitivity:** Parenting strategies should align with cultural norms—e.g., in collectivist societies, emphasize familial interdependence while respecting autonomy. In collectivist societies, paternal emotional availability critically impacts family harmony. Fathers with avoidant attachment may need targeted support to engage in emotionally responsive caregiving (Chen et al., 2021).
4. **Seek Growth and Support:** Therapy or mindfulness practices can mitigate insecure patterns, improving intergenerational relationships (The Wave Clinic, 2025). Encouraging parents to cultivate social networks and seek support during stressors (e.g., parenting classes, peer groups).

Relationships with Siblings during Adulthood

Sibling relationships represent one of the longest-lasting familial bonds, yet their dynamics in adulthood remain understudied compared to other family ties (Campbell et al., 2023). Sibling relationships evolve dynamically across the lifespan, shaped by shared history, life transitions, and conscious effort. For parents navigating their children's transition to adulthood, understanding these dynamics can help foster meaningful sibling connections.



Figure 5. Hand on phone while driving. (Photo Credit: [cottonbro studio](#), [Pexels](#))

What is known is that the nature of these relationships changes, as adults have a choice as to whether they will maintain a close bond and continue to be a part of the life of a sibling. Siblings must make the same reappraisal of each other as adults, as parents have to with their adult children. Research indicates that sibling relationships follow a U-shaped trajectory across the lifespan: closeness often declines in early adulthood as siblings prioritize careers and partnerships, but rekindles in midlife, particularly during shared caregiving for aging parents or grandchildren (Voorpostel & Blieszner, 2022). By later adulthood, siblings

frequently reconnect, leveraging shared histories to combat loneliness and provide emotional security (Gilligan et al., 2020). A decline in the frequency of interactions between siblings during early adulthood happens, as presumably peers, romantic relationships, and children become more central to the lives of young adults.

Warm sibling relationships buffer against mental health challenges, fostering resilience and life satisfaction (Gilligan et al., 2020). Warm sibling bonds in adulthood also correlate with lower rates of depression and anxiety, while unresolved conflicts or perceived parental favoritism can negatively

impact mental health decades later (Jensen et al., 2021; Sutor et al., 2020). Conversely, sibling hostility correlates with symptoms of depression, anxiety, and loneliness, while unresolved childhood rivalries can resurface in adult relationships (Bedford et al., 2000; APA, 2022). For example, siblings who collaboratively navigate caregiving for aging parents often experience strengthened bonds, though this dynamic can also strain relationships if boundaries are unclear (Voorpostel & Blieszner, 2022).

Gender significantly shapes these dynamics. Sister-sister pairs typically maintain the closest emotional bonds and highest contact frequency, whereas brother-brother relationships tend to emphasize instrumental support over emotional intimacy (Conger & Little, 2023). Mixed-gender siblings often balance both forms of support, though geographic distance rarely diminishes emotional closeness when intentional communication persists (White & Riedmann, 2021). Modern challenges, such as LGBTQ+ siblings facing reduced contact due to family discrimination, underscore the need for parental advocacy to foster inclusive family norms (Reczek, 2022).

For parents navigating relationships with adult children, three strategies emerge from the research:

1. **Model conflict resolution:** Siblings who observe parents addressing disagreements constructively are better equipped to manage adult conflicts (Kramer & Kowal, 2022).
2. **Avoid comparative language:** Even subtle parental comparisons in childhood predict perceived favoritism and sibling tension in later life (Pillemer et al., 2020).
3. **Facilitate shared rituals:** Joint family experiences during adolescence, such as collaborative projects or vacations, create positive memories that buffer against adult estrangement (Feinberg et al., 2023).

Difficult: Mothering Challenging Adult Children Through Conflict and Change

Judith Smith's book, *Difficult: Mothering Challenging Adult Children Through Conflict and Change*, explores the complex and often hidden challenges faced by mothers of adult children struggling with issues like mental illness, addiction, and chronic unemployment. Through eight years of research and interviews with 50 mothers, Smith reveals the emotional, financial, and social burdens these mothers endure, often feeling isolated and judged. Her work provides a compassionate perspective and practical guidance for navigating these difficult relationships.

A Mother's Unending Journey

Judith Smith shares the stories of mothers who, despite their children reaching adulthood, find themselves once again shouldering parental responsibilities. These mothers often feel trapped between their desire to support their children and the need to reclaim their own lives. One common thread among these stories is the sense of duty and guilt that drives mothers to continue caregiving, even when it impacts their own well-being.

For example, many mothers interviewed by Smith had reopened their homes to adult children struggling with mental health issues or substance abuse. These women, often in their later years, had expected to focus on themselves but instead found their lives framed by renewed parental responsibilities. The emotional toll is significant, with feelings of shame, helplessness, and isolation common among these mothers.

Smith's work emphasizes the importance of recognizing these challenges and seeking support. By acknowledging the complexity of these relationships and providing resources for self-care and change, mothers can begin to navigate their roles more effectively and find a path towards reclaiming their independence.

Aging Parent Considerations

As parents support their adult children through emerging adulthood, they must simultaneously confront their own aging process and the evolving dynamics of intergenerational caregiving. It's also important to look ahead and consider how roles might change as we age. This dual focus—nurturing adult children while preparing for shifting family roles—creates both challenges and opportunities for building resilient family systems. Aging parents often face compounding needs, including managing chronic health conditions, maintaining social connections to combat isolation, and ensuring financial security for retirement and potential caregiving costs. These priorities intersect with adult children's growing responsibilities, particularly for those in the “sandwich generation” who balance caring for aging parents while still supporting their own children.

Mutual support within families is becoming increasingly important as adult children take on caregiving roles for their aging parents. This role reversal underscores the importance of reciprocity in family relationships. While adult children provide care, they also benefit from the wisdom, experience, and emotional support of their aging parents. This exchange strengthens family bonds and enhances overall well-being.

Navigating the transition to intergenerational caregiving requires deliberate preparation and collaborative family strategies. Central to this process is initiating open, ongoing dialogues between

parents and adult children about evolving needs and expectations. These conversations should address three pillars: **caregiving responsibilities** (daily tasks, medical support), **financial planning** (retirement savings, shared expenses), and **living arrangements** (aging in place vs. assisted living). Addressing these topics proactively—before urgent needs arise—enables families to explore options thoughtfully, from in-home care solutions to long-term facility placements, while respecting personal preferences and autonomy. Equally crucial is establishing concrete safeguards through legal and financial preparations. Creating advance directives, updating wills, and designating powers of attorney provide clarity during health crises, reducing decision-making burdens for adult children. Simultaneously, developing a shared financial roadmap that accounts for potential care costs and legacy goals helps prevent resource depletion across generations. These practical steps form a safety net that preserves dignity and reduces uncertainty during role transitions. The reciprocity inherent in multigenerational support systems offers unexpected strengths. While adult children may assist with physical care and logistics, aging parents often contribute emotional wisdom, family history preservation, and childcare support for grandchildren. This symbiotic relationship, when balanced with clear boundaries, can deepen intergenerational bonds and foster collective resilience. However, maintaining this equilibrium requires regular check-ins to adjust support levels and prevent caregiver burnout—a critical consideration given that 40% of sandwich-generation caregivers report chronic stress.

Ultimately, successful navigation of this life stage hinges on reframing caregiving as a collaborative journey rather than a unilateral responsibility. By combining practical preparations with emotional attunement, families can transform challenges into opportunities for growth. Mental health professionals play a vital role in guiding these dynamics, offering tools to manage role ambiguity, grief over changing relationships, and the complex emotions surrounding dependency shifts. Through intentional planning and mutual respect, families can cultivate caregiving models that honor autonomy while sustaining connection across generations.

Key Takeaways

- Brain development continues well into the mid-twenties, particularly in areas responsible for executive functions like decision-making and impulse control, which helps explain why young adults may still engage in risky behaviors despite their cognitive maturation. This extended period of neural development, combined with increased independence and social pressures, creates a critical window where young adults are especially vulnerable to substance abuse and mental health challenges, highlighting the importance of continued support and early intervention during this transitional period.
- Parenting after adolescence requires adaptability, open communication, and a delicate balance between offering support and fostering independence. By understanding the changing milestones of young adulthood within the framework of emerging adulthood, parents can better guide their children through this critical life stage, helping them explore possibilities and navigate the instabilities characteristic of this period.
- The Pew Research Center findings emphasize the changing landscape of young adulthood and the evolving role of parental support, both financially and in preparing children for independence. Parents should be prepared for potentially extended periods of support while also fostering financial independence and responsibility in their adult children.
- The transition to adulthood involves mastering key responsibilities across multiple domains – from financial management and health maintenance to interpersonal relationships and civic engagement – with the specific expectations and support systems varying significantly across different cultural contexts. While OECD countries share common trends of delayed marriage and extended education, cultural variations between Western and Asian societies demonstrate how family obligations, social welfare systems, and cultural values uniquely shape the emerging adult experience and the parental support needed during this transition.
- Adult attachment styles, shaped by early experiences but malleable throughout life, significantly influence how individuals navigate relationships and transitions, with secure attachment fostering healthier parent-child dynamics while anxious or avoidant patterns may require intentional effort and therapeutic support to modify for better relational outcomes.
- This holistic view of the parent-child relationship during emerging adulthood emphasizes the importance of evolving dynamics, ongoing support, and the potential for deeper mutual understanding as both generations navigate this transitional period.
- Sibling relationships evolve significantly throughout adulthood, with early adulthood often seeing a natural decline in closeness as individuals focus on careers and partnerships, but these bonds can strengthen later in life through shared experiences and intentional maintenance, particularly when supported by parents who model healthy conflict resolution and avoid comparative treatment.
- As parents navigate supporting their adult children through emerging adulthood, they must simultaneously prepare for their own aging journey and shifting family dynamics, creating a complex interplay of caregiving responsibilities that requires proactive planning, open communication, and the development of mutual support systems across generations.

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PART VII.

PARENTING: EDUCATION & EVERYDAY

SIBLINGS

Sibling Relationships

In the US, approximately 82% of children under age 18 live with at least one sibling (Donifon et al, 2017). Children with siblings spend about half of their discretionary time engaged with their siblings (Donifon et al, 2017). Siblings spend a considerable amount of time with each other and offer a unique relationship that is not found with same-age peers or with adults. Siblings play an important role in the development of social skills. Cooperative and pretend-play interactions between younger and older siblings can teach empathy, sharing, and cooperation (Pike et al, 2005), as well as, negotiation and conflict resolution (Abuhatum & Howe, 2013). Siblings serve as unique agents of cognitive development, often more influential than peers. Research has demonstrated that children are more likely to imitate, observe, and consult their older siblings compared to their peers, leading to enhanced verbal skills, motor skills, and creativity (Hill & Palacios, 2019; Knoester & Plikuhn, 2016; Nagar et al., 2019).

Studies have shown that positive sibling relationships can lead to better mental health, psychological well-being, and social relationships throughout life (Buist et al., 2021; Stein et al., 2020; Stocker et al., 2020). During childhood, the quality of sibling relationships has been linked to various positive outcomes, including peer acceptance, social competence, academic engagement, and educational attainment (McHale et al., 2012). Children who engage in positive and friendly play with siblings exhibit more prosocial behaviors, regardless of birth order (Cirelli et al., 2020; Pike & Oliver, 2017). These interactions contribute to the development of social-emotional skills that can be applied to other relationships throughout life (Kramer, 2022). It's important to note that while positive sibling relationships offer numerous benefits, negative or conflicted relationships can increase the risk of anxiety, depressive symptoms, and antisocial behavior in adolescence (Kramer, 2022). This underscores the importance of fostering positive sibling dynamics from an early age.

Siblings and Family Dynamics

The quality of sibling relationships is intricately linked to the broader family dynamics, particularly the parent-child relationship and the individual psychological adjustment of each child. Research by Pike et al. (2005) has shown that these factors often mediate sibling interactions. For instance, Brody et al. (1994) found that families with poor parent-child communication patterns tend to experience more negative interactions between siblings. Additionally, children with emotional and behavioral problems are more likely to have conflictual relationships with their siblings, although it's important to note that a child's psychological adjustment can sometimes reflect the quality of the parent-child relationship.

Given this interconnectedness, parents play a pivotal role in shaping sibling relationships. Consistent modeling of positive interactions and effective conflict resolution is essential for fostering healthy sibling dynamics. Frienberg et al. (2012) demonstrated that parenting styles significantly impact

sibling relationship quality, with harsh and authoritarian parenting linked to more conflictual sibling exchanges. Conversely, studies by Ram and Ross (2008) and Abuhatum and Howe (2013) have shown that children who employ non-coercive strategies are more likely to achieve successful resolutions in sibling conflicts, often resulting in mutually satisfactory compromises.

By actively teaching and reinforcing these constructive conflict resolution skills, parents can guide their children towards developing stronger, more harmonious sibling relationships. This involves not only addressing sibling interactions directly but also nurturing positive parent-child relationships and supporting each child's emotional well-being. These positive sibling bonds, cultivated through intentional and mindful parenting, have the potential to provide lifelong support and companionship, contributing significantly to the overall well-being of individual family members and the family unit as a whole.

Sibling Bonds Through Different Life Stages

In early childhood, sibling interactions are often characterized by frequent conflicts, particularly over possessions. Dunn and Munn (1987) found that more than half of sibling disputes at this age revolve around property rights. However, even young children demonstrate emerging conflict resolution skills, with younger siblings often asserting their autonomy through arguments about legitimacy (e.g., "You're not the boss"). During this stage, parents can lay the foundation for strong sibling bonds by encouraging cooperative play, shared activities, and empathy. Creating family rituals and traditions that involve all siblings can also strengthen their connections from an early age.



Figure 1. Siblings playing together (Photo Source: [Pikrepo](#), [DMCA](#))

As children enter middle childhood, the nature of sibling conflicts shifts. Howe et al. (2002) observed that disagreements tend to focus more on control over social situations, such as deciding on games to play, settling differences in opinions, or addressing rude behavior. Conflict resolution strategies also become more sophisticated during this period. Abuhatum and Howe (2013) found that while coercive strategies (e.g., threats) were still common in property disputes, older siblings were more likely to use reasoning, especially in conflicts about social control. Parents can support this development by teaching and modeling effective conflict resolution

skills, encouraging individual interests while maintaining family connections, and organizing shared activities that allow siblings to collaborate and support each other.

Adolescence brings a new set of challenges and opportunities for sibling relationships. As teenagers seek independence, maintaining strong sibling bonds requires a different approach. Research indicates that siblings can serve as important sources of support and guidance during this transitional period. Parents can facilitate positive sibling interactions by encouraging open communication, creating opportunities for siblings to spend quality time together without parental interference, and involving older siblings in mentoring or tutoring younger ones.

The long-term benefits of positive sibling bonds extend well into adulthood (**more about this in X section-LINK**). Strong sibling relationships have been associated with improved physical health, longer lifespans, greater happiness, and career success (Caspi, 2024). Siblings with close bonds are better equipped to cope with difficult situations, such as parental divorce, demonstrating increased resilience (Caspi, 2024). Furthermore, positive sibling relationships in childhood have been linked to better cognitive health in old age, with more frequent sibling contact in adulthood associated with better cognitive outcomes (Psypost, 2024). Sibling relationships provide a unique context for developing empathy, prosocial behavior, and conflict resolution skills.

Understanding Sibling Dynamics

Factors such as birth order, age spacing, and temperament can interact in complex ways to shape the dynamics between siblings. Firstborns, for instance, may naturally step into caretaking roles, nurturing their younger siblings. In contrast, the youngest children sometimes benefit from a more relaxed approach to parenting, enjoying a bit more freedom. However, keep in mind that these effects are not set in stone; they can vary significantly depending on the unique dynamics within each family.



Figure 2. Two sisters looking at each other smiling. Photo by [nappy, Pexels](#)

In recent decades, the landscape of sibling relationships has been shifting. The space between siblings has been stretching – literally. From 1967 to 2017, the average age gap between siblings in the United States grew by about nine months each year, reaching 4.2 years (Waters, 2024). This widening gap creates interesting dynamics: siblings spaced further apart (4+ years) often develop mentor-like relationships with less conflict, while those closer in age might share stronger bonds but also more competitive spirits (Water, 2024).

Like puzzle pieces, siblings with similar temperaments often fit together more smoothly, experiencing more harmonious relationships (Stoneman & Brody, 1993). For instance, when both siblings are naturally calm, their relationship tends to be more peaceful. However, when both are high-energy, the potential for conflict increases. Interestingly, older siblings' temperaments can act as a buffer, influencing how family dynamics affect their younger siblings (Brody et al, 1996).

Sibling Conflict

While parents want positive interactions between their children, conflicts are going to arise, and some confrontations can be the impetus for growth in children's social and cognitive skills. Personality differences and temperamental clashes can exacerbate conflicts. Siblings with contrasting temperaments—such as one being outgoing and the other introverted—may struggle to relate to each other (Sedona Sky Academy, 2024; MedicineNet, 2021). Additionally, developmental stages also play a role in conflict; preschoolers may lack social skills to manage conflicts without aggression, while school-age children are more focused on fairness and equity (MedicineNet, 2021).

Parental behaviors such as comparisons, inconsistent discipline, or neglect can further intensify rivalry (Linar, 2021; Sedona Sky Academy, 2024).

Sibling rivalry

Some degree of sibling rivalry is normal and can even foster the development of essential social skills, such as negotiation and conflict resolution. Sibling rivalry often arises from competition for parental attention and resources, perceived favoritism, jealousy, and differences in how parents treat each child (Whiteman et al, 2011). Differential treatment by parents can fuel increased conflict and reduce warmth between siblings, particularly if children perceive these differences as unfair (Howe et al, 2023). Siblings who perceive unequal treatment show less warmth and more hostility toward one another (Gilligan et al, 2013). Children may feel jealous when they perceive unequal treatment or favoritism, even if unintentional. For example, the arrival of a new sibling can trigger feelings of displacement in older children, causing them to act out for attention (Sakti, 2021; MedicineNet, 2021).

To address sibling rivalry effectively, it is crucial to understand its root causes. The perception of unfairness is one of the most significant triggers. Research shows that even minor differences in parental treatment can lead to resentment if not explained or perceived as justified (USU Today, 2024). Additionally, rivalry often reflects deeper emotional needs. Children may compete for validation or recognition from their parents when they feel insecure or undervalued (Imperfect Families, 2024; Sedona Sky Academy, 2024).

Creating a Supportive Family Environment

By implementing these research-based strategies, parents can help foster positive sibling relationships and create a supportive family environment that benefits all children.

- *Avoiding comparisons and favoritism:* Statements like “Why can’t you be more like your sibling?” can foster resentment and feelings of inadequacy (MedicineNet, 2021; Sedona Sky Academy, 2024). Instead, parents should highlight each child’s unique strengths and contributions to the family (Imperfect Families, 2024). Perceived favoritism is associated with lower self-esteem, increased conflict, and poorer mental health outcomes for both favored and unfavored children (Jensen et al., 2013). Parents should strive to treat children equitably and avoid overt comparisons.
- *Encouraging individual identities:* Supporting each child’s unique interests and talents is crucial for healthy development. Research indicates that siblings who feel their individuality is respected tend to have more positive relationships (McHale et al., 2012). Parents can foster this by providing opportunities for children to pursue their own interests and praising their individual accomplishments. Furthermore, providing individual attention is another effective strategy. Spending dedicated one-on-one time with each child helps them feel valued and reduces the need to compete for parental approval (Imperfect Families, 2024).
- *Establishing family traditions and rituals:* Family rituals and traditions contribute significantly to family cohesion and children’s sense of belonging. Studies have found that regular family activities, such as shared meals or holiday traditions, are associated with better emotional well-being and stronger family bonds (Fiese & Kline, 1993). These rituals provide stability and create shared experiences that strengthen sibling relationships.
- *Assigning joint chores and responsibilities:* Collaborative tasks can promote cooperation and teamwork among siblings. Structured activities that promote teamwork—such as collaborative games or shared projects—can help siblings see themselves as partners rather than competitors (Penn State Program on Sibling Conflict Resolution, 2017). Research suggests that children who engage in household chores together develop better problem-solving skills and learn to work cooperatively (Grusec et al., 2017). Parents should assign age-appropriate tasks that require siblings to work together, fostering a sense of shared responsibility.
- *Encouraging siblings to support each other’s activities:* Promoting mutual support among siblings can enhance their relationships and individual development. Studies show that siblings who attend each other’s events and celebrate each other’s achievements tend to have closer, more positive relationships (Kramer, 2010). Parents can encourage this by modeling supportive behavior and creating opportunities for siblings to cheer each other on.
- *Creating opportunities for shared experiences:* Shared leisure activities can significantly impact sibling relationship quality. Research indicates that greater diversity in shared sibling leisure is associated with higher levels of affective and cognitive relationship quality, particularly for sister-sister dyads (Willoughby et al.,



Figure 3. Large family hugging. Photo by [August de Richelieu, Pexels](#)

2019). Parents should facilitate a variety of shared experiences, from family outings to collaborative projects, to strengthen sibling bonds. Finally, creating opportunities for shared bonding experiences strengthens sibling connections. Activities such as family game nights or volunteering together foster positive memories and mutual respect (Imperfect Families, 2024; UNM Health Sciences Center, 2019).

- *Model health communication:* Demonstrate active listening and respectful problem-solving during family conflicts (Sedona Sky Academy, 2024; Cleveland Clinic, 2025). Establishing clear family rules about acceptable behavior—such as no physical or verbal aggression—can also create a safer environment for resolving disputes (Cleveland Clinic, 2025).

Promoting Empathy and Understanding Between Siblings

Fostering empathy between siblings is key to building stronger relationships. Research highlights the reciprocal influence siblings have on each other's development of empathy. Jambo and colleagues (2019) in a comprehensive study of 452 Canadian sibling pairs found that both younger and older siblings positively contributed to each other's empathy development over 18 months, and the children who displayed kind and supportive behaviors influenced their siblings to act similarly. Further, older siblings who model kindness and understanding can encourage younger siblings to develop similar traits over time (Tel Aviv University Study, 2024). Further longitudinal research examining siblings from ages 7 to 14 demonstrated that at times when siblings reported more warmth and less conflict than usual, they also showed higher levels of empathy (Lam et al, 2012). Parents can also encourage empathy through open communication. Teaching children to express their feelings using "I" statements helps them articulate their emotions without blaming others (Sedona Sky Academy, 2024). Reflective listening—where siblings repeat back what they heard from each other—can further enhance mutual understanding (Cleveland Clinic, 2025). Additionally, praising acts of kindness and cooperation reinforces positive interactions between siblings (Raising Children Network, 2023).

Key Takeaways

- Parents and caregivers should recognize the significance of these relationships and actively promote positive interactions among siblings to support their children’s overall development and long-term well-being.
- Sibling relationships evolve significantly across different developmental stages, with each phase presenting unique challenges and opportunities for fostering positive connections. Understanding these age-related dynamics can help parents navigate and support their children’s relationships more effectively.
- Sibling relationships are shaped by a complex interplay of factors including birth order, age spacing, temperament, and family dynamics. Understanding these influences can help parents and professionals support positive sibling relationships and mitigate potential conflicts. As family structures continue to evolve, with trends such as increasing age gaps between siblings, it’s important to continue researching and adapting our understanding of these crucial familial bonds.
- Sibling rivalry is a natural part of family dynamics but can be managed effectively through intentional parenting strategies. Understanding its root causes—such as competition for attention or personality differences—allows parents to address underlying issues constructively. By reducing competition through fairness and individual attention and fostering empathy through modeling and shared experiences, parents can help their children build strong bonds that endure into adulthood.
- Parents can create stronger sibling bonds and a nurturing family environment by implementing evidence-based strategies that focus on individual attention, shared experiences, and emotional support. Research demonstrates that avoiding comparisons, fostering individual identities, and promoting empathy through structured activities and clear communication leads to more harmonious sibling relationships and better developmental outcomes for all children.

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TECHNOLOGY AND PARENTING: NAVIGATING THE DIGITAL LANDSCAPE

In today's digital age, technology has become an integral part of family life, presenting both opportunities and challenges for parents. This chapter explores the intersection of technology and parenting, providing evidence-based guidance for fostering healthy digital habits and promoting responsible online behavior in children.

Introduction to Technology and Online Safety



Figure 1. Mom and daughters each on own devices. Photo by [Tiger Lily, Pexels](#)

As children increasingly engage with digital devices and online platforms, parents must understand the potential risks and benefits associated with technology use. According to the American Academy of Pediatrics (AAP), while digital media can offer educational and social benefits, excessive or inappropriate use may negatively impact children's physical, cognitive, and emotional development. Open communication, active involvement in children's digital lives, and setting clear expectations for online behavior are essential for online safety.

Common online safety concerns include cyberbullying, exposure to inappropriate content, privacy breaches, and online predators. To address these issues, organizations like ConnectSafely.org recommend that parents establish open communication with their children about online experiences and implement age-appropriate safety measures, such as privacy settings and parental controls. Regardless of the specific platforms or technologies children use, Common Sense Media recommends that parents stay informed about current trends in social media and emerging technologies like generative AI.

For further technology considerations, don't forget to take each child's stage of development (or age) into account. For example, children under 18 months really shouldn't use screens at all, and, though it's difficult during these unusual times, parents should also limit screen time for children between the ages of 2-5 (AAP, 2023). For older children, prioritize what they must use screens for—schoolwork and connecting with peers—and then agree on an appropriate amount of time for entertainment. Keep in mind that social media (e.g., TikTok, Snapchat) require users to be at least 13 to sign up. Tailor guidelines to your children's ages. For younger children, consider stricter limits and more parental oversight, while older teens may have more autonomy with continued guidance.

Children and technology – Statistics & Facts from Statista, 2024

The section below is from Statista (2024). The hyperlinks shared are data gathered from Statista for various topics related to children and technology.

With technology playing a major role in people's lives, children are becoming exposed to and learning how to use it at increasingly younger ages. In most societies around the world, children use electronic devices daily; for instance, when they watch TV or [videos](#), play video games on gaming consoles, or [surf the internet](#) on smartphones or PCs. On the one hand, children's use of technology has its [advantages](#), such as the development of digital literacy skills and multitasking, as well as the ability to connect with family and social groups sharing the same interests. However, it is known that the use of certain technologies by children can also have negative effects. For example, health and social interaction issues, [exposure to harmful content](#), and [cyberbullying](#). For these reasons, [parents](#) should try to create a healthy and safe digital environment for their children.

Consumption in the United States

In the United States, children and teens have [access to all kinds of electronic devices in their homes](#), such as smart TVs and video game consoles. Subscription streaming devices and VR headsets have been gaining in popularity in recent years and have become more common in American households. Moreover, [almost all children between the ages of 13 and 18 own a smartphone](#), while most of them have also a tablet or PC. American children engage in many [media activities on electronic devices](#), such as watching TV and online videos, playing games, and video chatting. In 2021, over 62 percent of them watched TV daily, while 30 percent surfed the internet every day. YouTube has emerged as the dominant platform for children's content consumption in the United States, according to recent surveys. Among children aged two to 12, YouTube was the most frequently mentioned platform, with 81 percent of respondents indicating they had [recently watched content](#) on the site. In May 2024, children spent an average of one hour and 48 minutes per day dedicated to YouTube viewing. Social media platforms play a large role in American children's lives, with [TikTok and Snapchat](#) being the most popular platforms, in 2023, children spent around 99 and 84 minutes respectively each day on average. In May 2024, TikTok, garnered 44 percent of responses from children who reported watching it lately, with an [average daily viewing time](#) of one hour and 34 minutes.

Consumption in Europe

Like in the United States, children have access to many electronic devices in Europe. For instance, in 2020, [90 percent of British children](#) and [99 percent of German children](#) had internet-enabled devices at home, such as PCs and laptops, and smartphone ownership is common among children aged five or six and upwards in the [United Kingdom](#) and [Germany](#). In Italy, most kids use their smartphones or tablets even when in the company of others, while [less than half of French kids use smartphones](#). In Europe, watching videos, playing video games, browsing websites, and using social media are children's main activities on electronic devices. For instance, watching TV is one of [German children's favorite media activities](#), while Italian kids use these devices to [play online games and watch cartoons](#). By contrast, British children, most of whom [have a social media profile](#), spend quite some on social platforms, as do French children, who use them mostly to [communicate with their family and friends](#). Indeed, given how relevant the internet is in young people's lives, it is important to guarantee a safe experience and prevent [negative online interactions](#) as much as possible.

The 3 Ss framework for technology

Using the framework of the three Ss – healthy socialization, effective self-regulation, and overall safety – is a solid structure to develop collaborative solutions with your child (Homayoun, 2017). Healthy socialization encourages children and teens to opt-in to energizing experiences online and in-real-life, and opt-out of toxic or draining ones, and parents can help kids identify the difference. Effective self-regulation is all about developing and implementing rituals and strategies to encourage positive, pro-social use and avoid incremental slide into overuse. Overall safety looks at not just physical safety, but social and emotional wellness as well. It also looks at data and privacy issues, and allowing kids the autonomy to make choices about how and where they will participate and share online.

Ana Homayoun's framework of the three Ss – Socialization, Self-regulation, and Safety

Healthy socialization in the digital age involves:

- Encouraging positive online interactions that foster genuine connections
- Teaching children to recognize and engage in energizing experiences both online and offline
- Helping kids identify and avoid toxic or draining digital interactions
- Promoting a balance between online and in-person social activities
- Guiding children to use social media as a tool for enhancing real-world relationships rather than replacing them

Parents can assist by:

- Discussing the qualities of healthy online friendships
- Modeling positive social media use
- Encouraging participation in offline activities and hobbies
- Teaching children to critically evaluate their online experiences

Developing effective self-regulation skills is crucial for managing digital use. This involves:

- Creating and implementing daily routines for technology use
- Setting clear boundaries and time limits for screen time
- Developing strategies to manage distractions and maintain focus
- Learning to recognize signs of overuse or addiction
- Practicing mindfulness and self-awareness in relation to technology use

Parents can support self-regulation by:

- Establishing family media agreements
- Creating tech-free zones or times in the home
- Teaching time management skills
- Encouraging regular digital detoxes
- Modeling healthy tech habits themselves

Safety in the digital world encompasses:

- Physical safety: protecting against real-world dangers that may arise from online interactions
- Social and emotional wellness: safeguarding mental health and fostering positive self-esteem
- Data and privacy protection: understanding and managing personal information online
- Digital citizenship: behaving ethically and responsibly in online spaces

To promote overall safety, parents can:

- Educate children about online privacy and security measures
- Discuss the permanence of digital footprints and potential consequences of online actions
- Teach critical thinking skills to identify misinformation and scams
- Encourage open communication about online experiences
- Empower children to make informed decisions about their online presence

Balancing Screen Time with Other Activities

Research indicates that excessive screen time can interfere with essential childhood activities, including sleep, physical activity, and face-to-face interactions. The AAP (2023) suggests creating a family media plan that establishes screen-free zones, device curfews, and designated times for unplugged activities. Parental control settings on devices are helpful, but in order to be effective, they need to be accompanied by direct supervision and active engagement, as well.

Discuss limits on screen time with children when you have their full attention, and seek their input when creating the rules. Give children a 5-15 minute warning before they need to turn off their devices, and if they fail to log off at the appropriate time, decrease their screen limits for the next day as a consequence. Children may react poorly or with tantrums in the short term, but if parents are firm and stick to their limits, this behavior will improve. – *Paul Weigle, MD, Child and Adolescent Psychiatrist and Chair of the Media Committee of the American Academy of Child and Adolescent Psychiatry as cited by Children and Screens (2020)*

Children and Screens (2025) recommends prioritizing human interaction and using digital media to supplement it. Screens or digital media do not incorporate immediate feedback and responsiveness. Human interaction builds stronger communication skills, social-emotional competencies, and hopefully healthier attitudes towards technology use. The emphasis on prioritizing human interaction while using digital media as a supplement aligns with research findings on the impact of social media on well-being. While screens and digital media lack the immediate feedback and responsiveness of face-to-face interactions, human connections foster stronger communication skills, social-emotional competencies, and healthier attitudes towards technology use. This perspective is further supported by empirical evidence from recent studies examining the effects of social media usage on mental health and overall well-being.



Figure 2. Boy on phone with girl on phone in the background. Photo by [Ron Lach, Pexels](#)

In 2018, Hunt and colleagues ran an experimental study aiming to examine impact of social media on aspects of well-being. For a week social media useage was track and then half the the undergraduates were randomly assigned (important consideration for experimental design) to limit social media use to 30 minutes per day (and usage was verified). This experimental design (using random assignment) allowed for an examination of the causal effects of reduced social media consumption. Here is what they found out: The limited-use group showed significant reductions in loneliness and depression over three weeks compared to the control group. Both groups showed significant decreases in anxiety and fear of missing out over baseline, suggesting a benefit of increased self-monitoring.

These findings have important implications for parents navigating the digital landscape with their children. The study suggests that limiting social media use to about 30 minutes per day can lead to significant improvements in mental health, highlighting the potential negative impact of excessive social media consumption. Parents should be aware of the pressure children may feel to constantly check social media to stay connected, and address the concept of Fear of Missing Out (FOMO) with their children. Talk to your children about the (FOMO). FOMO was identified as a significant factor in social media's impact on well-being. FOMO is a lack of being present; yet a virtual presence is not being in the moment. No one can be missing out if they are fully present in the reality they are currently a part of at the moment at hand versus what is missing online. The study also highlighted that social comparison on social media platforms can lead to decreased well-being. Parents should understand that pre-teens and teens may be particularly vulnerable to negative self-comparisons; this can be exacerbated by influencers and celebrities' heavily curated feeds. It is important to note that individual differences exist: the impact of social media use varies among individuals, and some children may be more susceptible to negative effects than others. Their experiences will differ based on things like maturity level, mental health, and personality.

Consider the context, quality of content, and ways children are using technology (Livingstone & Blum-Rose, 2020). Children and Screens (2025) recommend determining *how* children are using digital devices, in addition to how long. Consider the content: what are your children watching? Do you think it has value? Do they? Consider the context: are kids engaging with a screen to avoid their schoolwork, or to relax during free time? Lastly, consider the social connections: are your children using technology to sustain valued relationships or not? Livingstone and Blum-Ross (2020) stress the significance of open communication within the family about online interactions. Parents should strive to create an environment where children feel comfortable discussing their digital relationships. It's crucial to help children balance their online and offline connections, emphasizing the value of in-person relationships alongside digital ones.

Common Sense Media emphasizes the importance of modeling healthy tech habits, encouraging outdoor play, and promoting alternative activities that support children's overall development. Model responsible social media use by limiting your own screen time and being fully present during family interactions. Promote physical activities and outdoor exploration as alternatives to screen

time which supports physical health and creativity. By striking a balance between screen time and other enriching experiences, parents can help their children develop a well-rounded lifestyle.

Social Media and Family Dynamics

The rise of social media platforms has significantly impacted family relationships and communication patterns. Studies have shown that social media use can both strengthen and strain family bonds, depending on how it is integrated into family life. Children and Screens (2020) reports that while social media can facilitate family connections, especially for geographically dispersed relatives, it may also lead to decreased face-to-face interactions and increased family conflicts. To promote positive family dynamics, experts recommend establishing family social media guidelines, engaging in shared online activities, and prioritizing in-person family time.

Here are some considerations:

- For developing social media guidelines consider [American Academy of Pediatrics' family media plan](#) to set household rules around social media use (AAP, 2023). Co-create media rules with children using a mindful and thoughtful approach (Children and Screens, 2025).
- Children and Screens also offer a handbook for parents, the [Handbook of Children and Screens](#).
- [Recommendations for screentime](#) from the American Academy of Child and Adolescents Psychiatry.
- Another good resource is the National Association for Media Literacy [Parent's Guide!](#)
- Plan and commit to weekly or daily family activities that don't involve screens, such as game nights, outdoor adventures, or cooking together.
- Engage in family-friendly online games or activities that promote teamwork and bonding. This can be a fun way to connect while teaching responsible online behavior.
- Learn about the games and apps children like, show interest in them, and participate whenever possible.
- Co-viewing educational content with an engaged adult can be a positive learning experience. Co-view and co-play with children through at least age 8.
- Employ technology to connect with distant family members through video calls.
- Explore online together: Engage in shared viewing or browsing experiences to model how to assess content quality and discuss what makes certain content valuable or problematic.
- Using digital media to facilitate shared activities or creative projects.
- Develop a list of fun, screen-free activities that everyone wants to try, and work through them together. This encourages anticipation and excitement for offline family time.
- Explain social media following and have conversations with your children. Following actual



Figure 3 Parent and child on couch holding devices. Photo by [Ivan Samkov, Pexels](#)



Figure 4. Cover of *Handbook of Children and Screens*

friends on social media is correlated with lower levels of depression and loneliness, but following strangers is correlated with just the opposite. It's hard to remember that influencers and celebrities' heavily curated feeds don't reflect reality, which can leave you feeling bad about your own life.

- Parents can remind their children that they can declutter their social media feeds by unfriending or unfollowing people whose posts and messages are insulting or unkind. We can go even farther by empowering kids to question the curated versions of their friends' lives they see and to challenge opinions and perspectives shaped by modern marketing strategies. – *David Bickham, PhD Center on Media and Child Health, Boston Children's Hospital as cited by Children & Screens (2020)*

Guiding Responsible Digital Citizenship

Parents play a crucial role in shaping their children's digital citizenship skills. The AAP (2023) emphasizes the importance of teaching children about online etiquette, critical thinking, and responsible content creation. Parents should also encourage critical thinking skills, helping children evaluate the credibility of online information and understand the potential biases of AI-generated content. ConnectSafely.org suggests that parents engage in ongoing conversations about digital ethics, privacy, and the potential long-term consequences of online actions. By fostering a sense of digital responsibility, parents can empower their children to navigate the online world safely and respectfully.

- In their book *Parenting for a Digital Future*, Livingstone and Blum-Ross (2020) offer valuable insights for parents navigating the digital landscape with their children. When it comes to content quality, parents are encouraged to foster critical thinking skills by teaching children to evaluate the credibility and purpose of online information. Discuss media representation: Help children understand how different groups are portrayed in digital media and the potential biases or stereotypes that may be present. Discussing media representation and exploring digital content together can help children develop a discerning eye for valuable versus problematic material.
- Regarding the context of content, Livingstone and Blum-Ross (2020) emphasize the importance of helping children understand the broader implications of digital media. It is also important to discuss the concept of digital footprints and encourage children to consider multiple perspectives on online topics. Parents should guide their children to think about the social, cultural, and economic factors that shape the digital content they encounter. The authors also highlight the importance of teaching digital citizenship, helping children understand how their online actions affect others and the need for respectful behavior in digital spaces.
- Explain how online actions and content can have long-lasting implications and the importance of considering the context before posting or sharing.
- It's critical to have a conversation with your teen about healthy social media use before they get their own smartphone or start using social media. Discuss what they'll do (and what you'll do) if they experience conflict online (e.g., cyber-bullying or pressure to send photos or messages) or if their social media use appears to be interfering with their normal functioning.

Two questions I find helpful to ask teens are: (1) “How will we know if your social media use becomes problematic?” and (2) “What can you do to make sure social media is something enjoyable (and not stressful)?” Don’t worry if your teen already uses social media and has their own phone—it’s never too late to talk about how social media engagement is contributing to their wellbeing. – Sarah E. Domoff, Ph.D., licensed psychologist as cited by *Children & Screens* (2020)

Key Takeaways

- In today’s digital age, children are exposed to technology at increasingly younger ages, with both positive and negative impacts, necessitating parents to create a healthy and safe digital environment that balances the benefits of digital literacy and connectivity with the potential risks of excessive screen time, harmful content exposure, and cyberbullying.
- By maintaining a supportive and adaptive approach, parents can guide their children through the ever-evolving digital landscape. Utilize tools like the AAP family media plan and three Ss framework – healthy socialization, effective self-regulation, and overall safety.
- The integration of social media into family life presents both opportunities and challenges. While platforms can strengthen connections, especially for geographically dispersed families, they may also reduce face-to-face interactions and increase conflicts.
- Parents play a crucial role in developing their children’s digital citizenship skills. Parents can help their children navigate the digital world safely, respectfully, and mindfully, while maintaining strong family relationships and fostering critical digital literacy skills.

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STRESS MANAGEMENT FOR PARENTS AND CHILDREN & HEALTHY HABIT BUILDING

Stress is an inevitable part of family life, affecting both parents and children in various ways. Stress is a process where an individual perceives and responds to events they appraise as overwhelming or threatening to their well-being (Openstax, 2021). Recognizing the signs of stress in oneself and family members is crucial for effective management. Parents may experience irritability, fatigue, or difficulty concentrating, while children might exhibit behavioral changes, sleep disturbances, or physical complaints (LaTouche Pediatrics, 2024). By understanding these stress indicators, families can take proactive steps to address and mitigate their effects. Common sources of stress for families include financial pressures, work-life balance challenges, academic expectations, and interpersonal conflicts. These stressors can significantly impact family dynamics, leading to increased tension, communication breakdowns, and emotional distress.



Figure. Partner surprised spits out drink. Photo credit: [Mikhail Nilov, Pexels](#)

Stress Management

Establishing consistent routines is fundamental in building family resilience against stress. Regular schedules for meals, bedtimes, and daily activities provide a sense of stability and predictability, which can be particularly comforting during challenging times (Flais, 2024). Encouraging regular physical activity not only improves physical health but also serves as a natural stress reliever, releasing endorphins and promoting overall well-being (Depend, 2024). Fostering healthy eating habits supports both physical and mental health, while creating time for relaxation and fun activities strengthens family bonds and provides necessary breaks from daily stressors.

Sleep

Promoting good sleep hygiene is essential for both parents and children, as adequate rest enhances emotional regulation and cognitive function. Sleep hygiene is crucial for children's overall health and development, and age-appropriate techniques can help parents establish healthy sleep habits for their kids. For infants and toddlers, consistency is key. Establishing a predictable bedtime routine that includes calming activities like a warm bath, reading a story, or gentle lullabies can signal that it's time to wind down (Sutton, 2021). It's important to put infants to bed drowsy but still awake, allowing them to learn to fall asleep independently (Seattle Children, 2025). For preschoolers and school-age children, maintaining a consistent sleep schedule, even on weekends, helps regulate their internal clock (Sleep Foundation, 2023). Parents can introduce relaxation techniques such as deep

breathing or visualizing calming scenes to help children unwind (Sutton, 2021). Limiting screen time before bed is crucial, as the blue light emitted by electronic devices can suppress melatonin production (Sleep Foundation, 2023). As children enter their teenage years, sleep hygiene becomes even more critical. Encouraging regular exercise during the day can promote better sleep at night (Sleep Foundation, 2023). Implementing a “screen curfew” at least an hour before bed can help teens wind down more effectively (Sleep Foundation, 2023). For all age groups, it’s beneficial to associate the bed with sleep, avoiding non-sleep activities in bed like homework or playing video games (Sutton, 2021).

Stress Management Techniques

In addition to healthy habits, parents can benefit from various stress management techniques to maintain their own well-being and model healthy coping strategies for their children. Practicing mindfulness and meditation can help reduce anxiety and improve emotional regulation (Welshman, 2024). Deep breathing exercises offer a quick and effective way to calm the nervous system during stressful moments. Engaging in self-care activities, such as pursuing hobbies or taking time for personal interests, is crucial for maintaining parental well-being. Setting realistic expectations for oneself and family members can alleviate unnecessary pressure and stress. Additionally, seeking support from friends, family, or professionals when needed is a sign of strength and can provide valuable perspectives and assistance in managing family stress (Salamon, 2024).

Equipping children with age-appropriate stress management skills is essential for their long-term emotional well-being. Teaching relaxation techniques, such as guided imagery or progressive muscle relaxation, can help children learn to self-soothe during stressful times. Helping children identify and express their emotions builds emotional intelligence and improves communication within the family. Encouraging problem-solving skills empowers children to tackle challenges independently, fostering resilience and self-efficacy. Promoting positive self-talk helps children develop a growth mindset and cope with setbacks more effectively. Introducing mindfulness activities for kids, such as mindful breathing or body scans, can enhance their ability to stay present and manage stress (Kelley, 2024).

Mindfulness

Mindfulness is a practice that involves paying attention to the present moment without judgment. For children, it can be a powerful tool to enhance self-awareness, emotional regulation, and overall well-being. Mindfulness is a skill that develops over time, so patience and regular practice are key to helping children reap the benefits of this powerful practice. Introducing mindfulness to kids requires a playful and accessible approach that makes the concept relatable and engaging. Parents can introduce mindfulness activities to their children by starting with simple, age-appropriate exercises. For younger children, activities like “Breathing Buddies” where they place a stuffed animal on their belly and watch it rise and fall as they breathe, or “Bubble Breaths” using actual bubbles to visualize their breath, can be effective. The “Belly Breathing” technique, where children focus on expanding their belly as they inhale and contracting it as they exhale, is particularly effective for younger kids. As children grow older, more complex techniques can be introduced, such as guided imagery or progressive muscle relaxation (Royal Children’s Hospital, 2007). For older children and teens, mindful listening exercises or nature observation can help cultivate present-moment awareness. Parents should practice these techniques alongside their children, modeling the behavior

and creating a shared experience. Additionally, creative activities like mindful coloring or walking a chalk maze can make mindfulness practice more engaging for children. Resources like the Mindful.org website offer guided audio practices specifically designed for different age groups, from preschoolers to teenagers. By consistently introducing and practicing these techniques, parents can help their children develop valuable tools for managing stress, improving focus, and fostering emotional well-being.

The Power of Co-Regulation

Co-regulation is a supportive, interactive process through which caregivers help children and teens learn to manage their emotions effectively (Salamon, 2024). “At its heart, co-regulation is connecting with a child who’s in distress and being able to evaluate what that child needs in the moment to help calm themselves.” (Marchette, as cited by Salamon, 2024). It involves adults connecting with a child who is in distress and evaluating what that child needs in the moment to help calm themselves.

The key aspects of co-regulation include:

1. Adults regulating their own emotions first
2. Validating the child’s feelings
3. Observing the child’s response
4. Deciding how to respond verbally and nonverbally

Before a parent or trusted adult can help a child, they need to understand — and possibly expand — their own emotional skills and limitations. Emotions are often contagious, whether a person is upset or sharing a sense of calm. “The tricky part of co-regulation is that adults have to recognize how they’re feeling and be able to regulate their own emotions in difficult moments so they can help children to gain these same skills,” Marchette says. “But this will be so important for kids to develop healthy relationships over time, and affects how people do in school, work, and life in general.” (Marchette, as cited by Salamon, 2024).

By consistently practicing co-regulation, parents and other trusted adults foster these crucial emotional skills in young people. This process enables children to eventually learn how to handle stress, resist immediate gratification, make informed decisions, adapt to challenges, and take healthy risks (Salamon, 2024). Co-regulation helps children and teens develop important self-regulation skills such as:

- Emotional awareness and literacy
- Self-soothing techniques
- Perspective-taking abilities
- Social skills like turn-taking and patience
- Attention and focus
- Problem-solving capabilities
- Flexible thinking

- Time management
- Goal-setting

The benefits of developing strong self-regulation skills through co-regulation may extend into adulthood. Some research suggests that better self-regulation is associated with positive life outcomes, including higher income and lower rates of substance use and violence (Salamon, 2024). While co-regulation can benefit all children, it may be especially important for those experiencing challenging family situations such as economic hardship, substance abuse, or divorce (Salamon, 2024). By investing in co-regulation practices, adults can help children and teens build resilience and emotional intelligence that will serve them well throughout their lives.

Co-Regulation Resources

The [Administration for Children and Families](#) offers a free [Co-Regulation in Action](#) video series. And some therapists — especially those who specialize in behavioral parent training or cognitive behavioral therapy — can help parents who feel their skills need a boost.

It's worth noting that it can be hard to have sufficient resources — emotional, financial, and other supports — to practice co-regulation consistently. Those who wish to try should give themselves some grace as they learn the process. “Even parents who are thinking their own self-regulation skills aren’t where they want them to be should realize this is a muscle they can strengthen,” Marchette says. “It’s important to have that growth mindset.”

Family-Based Stress Reduction Strategies

Families can work together to develop stress reduction strategies. Implementing family meetings to address concerns provides a structured forum for open communication and collaborative problem-solving. Engaging in shared relaxation activities, such as family yoga or meditation sessions, can create a collective sense of calm. Planning regular family fun time, whether through game nights, outdoor activities, or creative projects, strengthens family bonds and provides much-needed stress relief.



Figure. Mom hugs child for flowers.

Photos Credit: [Anastasia Shuraeva](#),
[Pexels](#)

Practicing gratitude as a family shifts focus to positive aspects of life, fostering resilience and optimism. The Greater Good Science Center offers a wealth of information and activities, including a strengths-based gratitude curriculum for tweens and teens that provides structured lessons to help students understand and practice gratitude in their daily lives. This curriculum includes interactive activities such as the Gratitude Journal, Good Week Reflection, and the Gratitude Challenge, encouraging individuals to reflect on positive experiences and acknowledge the kindness of others. Another excellent resource is from the Social Worker's Toolbox (2025) which has a Family Positivity and Gratitude Activity Pack, which offers engaging activities designed to help children appreciate their families, express gratitude, and build positive relationships. This pack includes exercises like drawing family portraits, listing unique family traits, and practicing acts of kindness through affirmations and compliments. The Social Workers Toolbox also has a Gratitude Family Challenge is another tool that encourages families to practice gratitude together, based on the four steps of gratitude: Notice, Think, Feel, and Do. This challenge

includes a gratitude chart with prompts that encourage family members to reflect on people, experiences, and small everyday moments they are thankful for. Camp Kindness Counts from Greater Good Science Center is another valuable resource that provides opportunities for families to practice and nurture character strengths, including gratitude, through Family Service Events, camps, parenting workshops, and online resources. Additionally, their Kind World Explorers initiative offers research-based activity guidebooks and enrichment opportunities for families globally.

Community

Connecting with other parents through support groups, community events, or online forums can provide valuable emotional support and practical advice. Utilizing community resources, such as family counseling services, parenting workshops, or recreational programs, can offer additional support and stress management tools. Knowing when to seek professional help is crucial; persistent family stress, significant behavioral changes, or inability to cope may indicate the need for professional intervention (Salamon, 2024).

Maintaining Long-Term Stress Management

Regularly reassessing family stress levels allows for timely adjustments to stress management strategies. Adapting these strategies as children grow ensures they remain relevant and effective throughout different developmental stages. Celebrating successes in stress management, no matter how small, reinforces positive behaviors and motivates continued efforts in maintaining family well-being (Life Way Families, 2023).

Regularly reassessing family stress levels is crucial for maintaining a healthy family dynamic. Dr. Scott recommends conducting regular check-ins with children to identify areas of stress and listen

carefully to their emotions and experiences (Children's Health, n.d.). This proactive approach allows parents to address potential stressors before they become overwhelming. Families can use tools like stress journals or weekly family meetings to track and discuss stress levels, ensuring open communication and early intervention when needed.

Adapting strategies as children grow is essential for effective stress management. As children develop, their sources of stress and coping mechanisms evolve. For younger children, strategies might include using simple relaxation techniques like deep breathing or guided imagery. As children enter adolescence, more complex approaches may be necessary. For instance, teaching teenagers time management skills to balance schoolwork and extracurricular activities can help reduce stress. Additionally, as children mature, parents can involve them more in problem-solving discussions, fostering independence and resilience (Ruffin, 2024).

Celebrating successes in stress management is a powerful tool for reinforcing positive behaviors and building family resilience. Recognizing and acknowledging small victories in managing stress can boost morale and encourage further progress. This could involve praising a child for using a learned coping strategy during a stressful situation or celebrating a family's collective effort in maintaining a calm household during a busy week. Celebrations don't need to be elaborate; simple acknowledgments or small rewards can be effective.

Key Takeaways

- Stress is a process where individuals respond to overwhelming events, affecting both parents and children through physical symptoms, behavioral changes, and emotional responses.
- Effective stress management relies on consistent routines, including proper sleep hygiene, regular physical activity, and healthy eating habits, which help build family resilience.
- Mindfulness and co-regulation are essential tools for families, with co-regulation helping children develop crucial emotional skills through adult guidance and support.
- Family-based stress reduction strategies should include regular family meetings, shared relaxation activities, and gratitude practices to foster positive relationships and emotional well-being.
- Long-term stress management requires regular reassessment of family stress levels, adaptation of strategies as children grow, and celebration of successes to maintain effective coping mechanisms over time.

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PARENTING AND WORKING

Working parents face unique challenges in balancing career and family responsibilities. In 2023, 91.9% of families with children had at least one employed parent, with both parents working in 67% of married-couple families (Bureau of Labor Statistics, 2024). Mothers' labor force participation rate increased to 74%, while fathers' participation reached 93.4% (BLS, 2024). Notably, 18% of stay-at-home parents are now fathers, up from 11% in 1989, reflecting changing family dynamics and roles (Pew Research, 2024).

Global Considerations

The United States lags behind other economically competitive nations in family support policies. While every other competitive economy guarantees paid maternal leave and most provide paternal leave, the U.S. only guarantees breastfeeding breaks. Successful work-family policies in other nations demonstrate the possibility of better support systems. These include: paid maternal and paternal leave, flexible work arrangements, affordable childcare options, breastfeeding breaks and support, annual leave, and weekly rest periods. Countries like Norway lead in parental support, offering generous leave policies and affordable childcare, demonstrating that family-friendly policies can coexist with economic success. Norway's parental leave is 306 days (61 weeks) at reduced pay or shorter duration at full pay with independent rights for fathers/co-mothers to 8 weeks of parental allowance. Furthermore, childcare is affordable as families pay no more than 7% of their income for care. Denmark offers up to 52 weeks of paid parental leave (Investvisa, 2025).

Employer Impact

Employers can play a role in providing optimal work-family balance. Some companies provide parental leave, childcare support, and wellness programs. Companies with family-friendly policies report higher employee satisfaction and retention (Daipuria & Kakar, 2024). Organizations can improve work-life balance by offering flexible schedules and work-from-home options. Other options include onsite daycare, **childcare subsidies**, and flexible spending accounts. According to the Nielsen Remote Workers Consumer Survey (2020), 52% of consumers expressed a desire to continue working from home in the future, with 25% preferring to do so exclusively. This shift has allowed many to achieve a better balance between professional and personal life.

Work and family Spillover

Work-family spillover represents a complex bidirectional relationship where experiences from one domain significantly impact the other. Research indicates that spillover can be both negative and positive, affecting employees' well-being, job satisfaction, and family life.

Negative work-to-family spillover occurs when workplace demands and stress interfere with family responsibilities, often exacerbated by long working hours and overtime. Work spilling over outside of work can occur when work demands deplete personal resources, hampering performance at home. This spillover can manifest through increased time pressure and emotional exhaustion, even burnout. Studies show that negative spillover between work and family negatively influences employee job satisfaction, family satisfaction, mental health, and psychological well-being (Sirgy et al, 2020). The work culture can contribute to this if there is an “always on” work culture with digital connectivity.



Figure. Dad is on computer, and mom is holding baby in the background—Photo credit: [William Fortunato, Pexels](#).

Working parents face significant stress, with 66% reporting parental burnout (Gawlik & Mazurek Melnyk, 2022). This was from a survey of 1,285 parents with children under 18 living at home, which revealed several key findings: lower rates of burnout for males than females (68% versus 42%), burnout increased in households with 2-3 children, plateaued with 4-5 children, and increased again with 6+ children, and 77% of parents with personal anxiety history reported burnout (Gawlik & Mazurek Melnyk, 2022). Their findings also say that burnout strongly correlates with depression, anxiety, and increased alcohol consumption. Burnout increased the likelihood of punitive parenting practices, and parental burnout was associated with children's internalizing, externalizing, and attention behaviors (Gawlik & Mazurek Melnyk, 2022).

Likewise, family life can spill over and impact work. This happens when family responsibilities interfere with work performance. Even housework can increase work fatigue, which in turn affects work-family conflict and marital satisfaction. Working-from-home situations may increase home spillover due to boundary blurring. It can affect work engagement and productivity. Employees with dependents or facing personal crises experience higher levels of negative spillover, leading to increased physical symptoms of stress and decreased job commitment. There can also be positive spillover (home-to-work enrichment) (Bölingen et al, 2023). More work-from-home hours lead to more difficulty separating work and home life (Bölingen et al, 2023). When work-from-home having high-quality work equipment at home reduces negative spillover effects, and having a dedicated home office space helps maintain boundaries (Bölingen et al, 2023).

Transitioning between work and home

Shifting between work and home mode can be challenging, especially when working parents juggle responsibilities in both areas. Having a structured routine to signal the shift from work to home mode helps your brain reset. Here are some ideas for transitioning out of work:

- For office workers: Listening to a favorite podcast, changing into casual clothes, or taking a short walk before heading home.
- For remote workers: Shutting down your laptop, putting work items out of sight, or playing a particular song when logging off.
- For both: Doing a “mind dump” by writing down unfinished tasks so you don’t mentally carry them into family time.

Childcare considerations

The financial strain of childcare significantly impacts family stress levels. Average daycare fees worldwide rose 6 percent in 2023, while costs in the U.S. jumped by 9 percent (Gonzalez, 2024). Recent data shows families spend approximately 24% of their household income on childcare, far exceeding the U.S. Department of Health and Human Services’ recommendation of 7% as an affordable rate (Gonzalez, 2024). This financial burden has forced many parents to make difficult choices, with 31% taking on second jobs, 26% reducing work hours, and 21% leaving the workforce entirely to manage childcare costs (Care.com, 2025). This stress of childcare can affect both work performance and family relationships.

Costs of childcare can be expensive. “Within the first five years of their child’s life, parents are being forced into a financial hole that is nearly impossible to climb out of,” Brad Wilson, CEO of Care.com (Care.com, 2025). According to the Care.com report, more than one-third of parents who responded to their survey (34 percent) have turned to family and friends to help manage the cost of child care. Moreover, 91 percent of respondents—or their partner or spouse—had to make at least one major change to their work, life, or finances to afford child care in 2023, such as working multiple jobs or reducing hours at work.

What to look for in care



Figure. Child building blocks. Photo by [cottonbro studio, Pexels](#)

The adult-child ratio is crucial for ensuring adequate attention, particularly for younger children. Infants need a ratio of 1:4, while preschoolers can manage with 1:10 (Child Care Aware of America, 2017). Environment and safety are important considerations. Look for clean, organized facilities with proper disinfection protocols, and safe playground equipment and outdoor spaces. Regular handwashing and health procedures should be observed. For educational programming, well-defined curriculum incorporating age-appropriate activities that focus on social, emotional, physical, and intellectual development. There should also be structured daily routines including learning, rest, and play. Identify staff qualifications: verified certifications and experience with ongoing professional development. Observe positive interactions with children at eye level. Check in about communication practices: look for clear policies on emergencies, medication, and discipline, ask about frequency of updates on child development and policies for parent visits. For selecting childcare, research licensing and accreditation status, schedule visits to observe interactions and

environment, check references available from current families, and review all policies and contracts thoroughly.

Even once school starts, juggling care can be challenging. Although in parts of the U.S. (Arizona and Georgia), the academic year in July, but school start dates vary significantly by region with dispersed breaks. Arranging childcare during the school year can significantly impact productivity. Afterschool Alliance (2020) reports that lapses in after-school care can result in parents losing up to eight days of work annually. “The schedule misalignment of traditional school hours and the traditional workday is a silent killer of workplace productivity that employers cannot afford to ignore. Once that last school bell rings, working parents are suddenly distracted and sometimes absent from work as they are forced to quickly shift from work mode to parent mode,” explains Wes Burke, CHRO of Care.com (as cited by Carter, 2024).

Tips for Working Parents to find Work-Family Balance

- **Establish Boundaries for Work Time with a Schedule for Personal, Family, and Work Time**

(Daipuria & Kakar, 2024)

Setting clear boundaries between work and personal life is essential to maintaining balance. Create a structured schedule that designates specific hours for work, family time, and self-care. If working from home, consider having a dedicated workspace and setting clear start and end times for work. Communicate your availability to your employer and colleagues so they understand when you are and aren't accessible. Similarly, let your family know when you need focused work time but ensure they also get your undivided attention outside of those hours.

- **Learn to Say No**

It's easy to feel pressure to say yes to every work request, social event, or school activity, but overcommitting can lead to burnout. Prioritize what truly aligns with your responsibilities and values, and practice saying no to tasks that do not serve your goals or well-being. A simple but firm response, such as "I appreciate the opportunity, but I can't take that on right now," can help maintain your boundaries without guilt.

- **Take Advantage of Technological Advancements and Digital Tools for Efficiency** (Daipuria & Kakar, 2024)

Use technology to streamline tasks and free up time. Productivity apps, digital calendars, and automation tools can help with scheduling, meal planning, and managing family responsibilities. Features like auto-pay for bills, grocery delivery apps, and shared family calendars can help reduce mental load. For work, consider time-tracking apps, email filters, and project management tools to stay organized and efficient.

- **Have a Good Support System** (Daipuria & Kakar, 2024)

Surround yourself with people who can support you in both your personal and professional life. This might include a reliable childcare provider, a co-parenting partner, family members, or trusted friends who can help in times of need. Connect with other working parents who understand the challenges and can offer advice, encouragement, or even practical help. If available, utilize workplace benefits like parental leave, flexible schedules, or employee assistance programs.

- **Set Realistic Expectations and Give Yourself Grace for Imperfections**

Striving for perfection in all areas of life is unrealistic and can lead to frustration. Accept that some days will go smoothly while others may not, and that's okay. Adjust your expectations based on what's feasible, and remind yourself that you're doing your best. If a work deadline means ordering takeout for dinner instead of cooking, or if laundry piles up for a few extra days, let go of guilt and recognize that balance is about flexibility, not perfection.

- **Focus on Your Values When Trying to Prioritize**

When deciding where to invest your time and energy, let your core values guide you. If family time is a priority, protect it by limiting unnecessary work obligations. If career growth is important, look for ways to delegate household tasks or set aside focused time for professional development. Regularly reflect on what truly matters to you so that your time is spent in alignment with those priorities rather than being pulled in too many directions.

- **Make Time to Pursue Personal Interests**

Taking time for yourself is not selfish—it's essential. Engaging in hobbies, exercise, creative outlets, or personal development activities helps reduce stress and brings a sense of fulfillment beyond work and parenting. Whether it's reading, painting, running, learning a new skill, or joining a club, carve out time for activities that bring you joy. Even small moments, like listening to a podcast while commuting or setting aside 15 minutes before bed for a hobby, can make a difference in maintaining personal identity and overall well-being.

Self-care considerations

Working parents tend to prioritize their work and family needs over their own well-being, which leads to burnout. Although self-care can sometimes seem frivolous when you have so many things to do, recharging your batteries, having some “me time”, can make a difference to your mental and emotional well-being, as well as your performance. Working parents can benefit from implementing stress management techniques, like those discussed in previous section, including: establishing consistent routines, practicing mindfulness, engaging in regular physical activity, and maintaining healthy sleep habits.



Figure. Working at desk space. Photo credit: [Mikhail Nilovk Pexels](#)

Working Parent Guilt

Working parent guilt is a pervasive emotional response that significantly impacts both career and family life. Research shows that 50% of working parents have considered quitting their jobs due to parental guilt, with 54% feeling they are failing both as parents and professionals (Avilio, 2024). This guilt often stems from perceived inability to meet idealized parenting standards while maintaining career commitments. To manage these feelings, parents can implement several evidence-based strategies: First, identify specific guilt triggers and challenge negative thought patterns through cognitive reframing. Second, set realistic expectations and boundaries between work and family time. Third, practice self-compassion and acknowledge that perfect parenting is neither possible nor necessary. Fourth, focus on quality rather than quantity of time with children. Finally, build a strong support system and utilize available resources for childcare and household management (Roskam et al., 2021). Research indicates that mothers experience more guilt than fathers when work affects family life, particularly those with strong implicit gender stereotypes (Borelli et al., 2017).

Key Takeaways

- Working parents face significant challenges, with recent statistics showing 91.9% of families with children having at least one employed parent and 66% of working parents reporting burnout.
- The U.S. lags behind other nations in family support, while countries like Norway and Denmark offer comprehensive benefits including extensive paid parental leave and affordable childcare.
- Childcare costs create significant financial strain, with U.S. families spending about 24% of household income on childcare, forcing many to take second jobs or reduce work hours.
- Work-family spillover occurs bidirectionally, with work stress affecting home life and family responsibilities impacting work performance, particularly in work-from-home situations.
- Successful work-family balance requires setting clear boundaries, establishing support systems, and prioritizing self-care through consistent routines and stress management techniques.

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EDUCATION

From the critical preschool years—where selecting nurturing environments and managing separation through collaborative parent-teacher introduction models fosters emotional security (Nebraska Early Development, 2025)—to navigating K–12 systems, caregivers play a pivotal role in advocating equitable support. Addressing academic accommodations, being an advocate for your child, navigating social-emotional challenges, and fostering resilience during school transitions are all important roles parents play in children’s education. This chapter will explore each educational phase for parents.

Preschool Transition

The transition to preschool can sometimes mark a child’s first formal separation from caregivers, often triggering anxiety for both parents and children. Research shows that elevated cortisol levels in children during this period reflect the stress of adapting to new environments and routines (Ahnert et al., 2004). To ease this adjustment, parents should prioritize gradual exposure: visiting the classroom with their child, establishing consistent goodbye rituals, and discussing daily schedules to demystify the preschool experience (Technical Assistance Partnership for Transition, 2022). Active parental participation in introductory activities, such as joint play sessions with teachers, strengthens family-professional partnerships and fosters trust (Lang et al., 2020). For children with disabilities, individualized transition plans that incorporate sensory-friendly practices (e.g., visual schedules) can reduce overwhelm (Sands & Meadan, 2023). Parents should also seek peer support networks to share strategies for managing separation anxiety (Fontil et al., 2020).

Recommendations for High-Quality Programs

To set criteria for designation as a high-quality preschool, the National Association for the Education of Young Children (NAEYC, 2016) identifies specific standards. NAEYC-accredited programs adhere to rigorous standards prioritizing relational, curricular, and structural quality. Key criteria include:

- **Safety and Qualifications:** Examining safety protocols are followed, staff are qualified and the center is licensed. This also includes:
 - The health and nutrition of children are promoted, while they are protected from illness and injury.
 - Indoor and outdoor physical environments are safe and well-maintained.
 - Leadership and management personnel are well qualified, effective, and maintain licensure status with the applicable state agency.
 - Teachers possess the educational qualifications, knowledge, and commitment to promote children’s learning.

- **Low Teacher-Child Ratios:** Optimal ratios ensure individualized attention. For preschoolers, NAEYC recommends 1:10 with a maximum class size of 20 (NAEYC, 2018). Smaller groups allow teachers to scaffold learning and address developmental needs effectively.
 - Positive relationships among all children and adults are promoted.
- **Evidence-Based Curriculum:** Programs must implement curricula promoting social-emotional, cognitive, and physical growth.
 - Play-based learning and sensory exploration form the cornerstone of early childhood development, fostering cognitive, social-emotional, and physical growth (NAEYC, 2019). Play-based approaches align with the NAEYC standards, which emphasize the importance of hands-on, experiential learning for young children (NAEYC, 2019). Play-based can include sensory learning that engages touch, sight, sound, smell, and taste. Research demonstrates that sensory-rich environments enhance language development by encouraging children to describe textures, smells, and sounds (EOCDC, 2023). For example, tactile activities like playdough manipulation strengthen fine motor skills, while sensory bins filled with rice or sand promote problem-solving and spatial reasoning (SplashLearn, 2025; Brightwheel, 2023). Music and movement activities, such as creating DIY sound shakers or dancing to rhythmic patterns, improve auditory processing and rhythm recognition while fostering creativity (SplashLearn, 2025). Outdoor exploration, including nature walks and gardening projects, further connects children to scientific concepts like life cycles and ecological systems (EOCDC, 2023).
 - Early numeracy and literacy skills develop not through formal instruction but through purposeful daily interactions embedded in play and routine. NAEYC standards highlight the value of integrating mathematical language into everyday contexts, such as comparing quantities during snack time or discussing spatial relationships during block play (NAEYC, 2019). For instance, cooking activities introduce measurement concepts (e.g., “half a cup”) and procedural sequencing, while setting the table reinforces one-to-one correspondence (Lillio, 2022; Raising Children Network, 2023). Literacy skill building might include dialogic reading—a method where caregivers ask open-ended questions during storytime—strengthens narrative comprehension and vocabulary (Purpura & Lonigan, 2016). Similarly, “math walks” encourage children to identify shapes in their environment, count steps, or compare building heights, fostering geometric reasoning and observational skills (Lillio, 2022). Research underscores the interconnectedness of early numeracy and literacy; children with strong number sense often exhibit advanced phonological awareness, as both domains rely on pattern recognition and symbolic representation (Frontiers in Psychology, 2021; IU Blogs, 2024). For example, sorting



Figure. Preschool students learning in class.

objects by color or size builds classification skills foundational to both math and reading (Arthurwears, 2023). NAEYC recommends that teaching approaches that are developmentally, culturally, and linguistically appropriate and that there are assessments of children's progress to provide information on learning and development.

- There should also be a social-emotional focus. Teachers model conflict resolution, emotional labeling, and cooperative play. Classrooms cultivate a sense of community through shared decision-making and collaborative projects (NAEYC, 2019).

Evaluating Preschool Program Quality

Primary caregivers should review preschool programs using the NAEYC criteria as a guide and template for asking questions that will assist them in choosing the best program for their child. Selecting the right preschool is also difficult because there are so many types of preschools available. Zachry (2013) identified Montessori, Waldorf, Reggio Emilia, High Scope, Parent Co-Ops, and Bank Street as types of preschool programs that focus on children learning through discovery where teachers guide and create activities based on the child's developmental level. Parents should identify if the preschool is state-licensed and may wish to identify as NAEYC-accredited. Considerations for selection for preschool could include whether classrooms:

- Provide diverse sensory materials (e.g., water tables, textured collages) and open-ended play opportunities (Brightwheel, 2023).
- Use formative assessments to track developmental progress and communicate findings to families (NAEYC, 2019).
- Maintain inclusive partnerships with families, respecting cultural and linguistic diversity (Kids Care Club, 2023).

Education Accommodations

Some children may benefit from education accommodations, which can go into effect as early as 3 years old. In the U.S., the Individuals with Disabilities Education Act (IDEA) and Section 504 of the Rehabilitation Act of 1973 establish critical frameworks for ensuring equitable educational access for students with disabilities in the United States. These laws mandate the creation of Individualized Education Programs (IEPs) and 504 Plans, respectively, which provide tailored accommodations, services, and goals to address students' unique needs. IEPs and 504 Plans operate under separate federal mandates with distinct eligibility criteria and procedural requirements. IEPs are governed by IDEA, which guarantees a free appropriate public education (FAPE) to children aged 3–22 who meet one of 13 disability categories and require specialized instruction. Examples include autism, specific learning disabilities, and emotional disturbances. In contrast, Section 504—a civil rights law—protects individuals with disabilities that substantially limit major life activities, such as learning or self-care, ensuring they receive accommodations to participate equally in school programs. For instance, a student with diabetes might receive a 504 Plan allowing frequent snack breaks, while a child with dyslexia could access text-to-speech software through an IEP. While IEPs focus on specialized instruction for students requiring significant academic modifications, 504 Plans emphasize accessibility adjustments to minimize barriers in general education settings (U.S.

Department of Education, 2023). Critically, IDEA requires parental consent for evaluations and services, whereas Section 504 mandates only notification, creating differing levels of family involvement in decision-making. For parents, understanding these legal distinctions, advocating effectively during planning meetings, and navigating systemic challenges—such as disparities in district resources—are essential steps toward securing optimal support for their children.

Parent Support and Involvement

Parental involvement in education is crucial for student success, but the level of engagement can vary significantly. Teachers often report difficulties in engaging parents/caregivers in their child's education (Pew Research, 2024). To address this, schools employ various techniques to keep parents informed about daily and overall progress, such as behavior charts, websites, and newsletters. However, it's essential to consider other factors that influence parental involvement, including how parents are received when they enter the school with concerns about their child.

Research has revealed that teachers may unconsciously seek a particular type of involvement from specific types of parents. Horvat (2004) found that teachers were most receptive to support, praise, and agreement from parents who shared similar racial and social class backgrounds. Parents with higher levels of income, occupational status, and other socially favored qualities possess what is termed “family capital,” which can be leveraged to improve a child's education. Conversely, caregivers without these qualities may find it more challenging to be effectively involved.

Recent research has also highlighted the significant impact of parental implicit bias on children's educational experiences and outcomes. Parents' unconscious biases can shape their interactions with teachers, influence their children's attitudes towards school, and affect their involvement in their child's education. A study by Cespe (2025) found that parents' implicit biases can manifest in differential expectations for their children's academic performance based on race or ethnicity, potentially reinforcing stereotypes and limiting opportunities. Furthermore, Katsoulas (2025) noted that these biases might lead to misunderstandings, reduced communication, and decreased parental involvement in school activities, creating barriers to effective parent-teacher collaboration.

Addressing these biases is crucial for improving parent-teacher relationships and student outcomes. Santa Maria (2024) revealed that providing parents with personalized feedback about their implicit biases can lead to significant changes in behavior. Parents who received information about their own biases were more likely to adjust their interactions with teachers and support their children's education in more equitable ways. Despite these challenges, a recent survey shows that most teachers (65%) say parents show appreciation for their efforts at least sometimes, with 24% saying this happens frequently (Pew Research, 2024). Fewer than half say parents at least sometimes communicate in a disrespectful way (40%) or that parents contact them to express support for (37%) or disagreement with (24%) what they're teaching or things discussed in class (Pew Research, 2024). These findings suggest that while there is room for improvement, many parents and teachers are working towards positive and constructive relationships in support of student education.

Parental Advocacy and Collaboration for Accommodations

Proactive parental engagement is fundamental to developing effective IEP/504 Plans. Parents should request formal evaluations if their child exhibits persistent academic, social, or behavioral challenges.

During IEP meetings, multidisciplinary teams—including parents, teachers, and specialists—draft measurable goals aligned with the student’s present levels of academic and functional performance (Zirkel, 2022). For example, a goal might state, “By May 2026, the student will solve multi-step word problems with 80% accuracy using graphic organizers and extended time.” Accommodations like preferential seating, modified assignments, or assistive technology must be explicitly documented. Parents should inquire about progress monitoring methods, asking, “How frequently will data be collected to assess goal mastery? In under-resourced districts, families may need to leverage external advocates or legal support to ensure adequate services, particularly for students from marginalized communities facing systemic inequities (Trainor, 2017).

IEPs go through a child’s 22nd birthday or when granted a high school diploma before age 22. Beginning at age 16, IEPs must include transition plans addressing post-secondary education, employment, and independent living skills (IDEA, 2004). These plans identify measurable goals, such as completing a vocational training program or mastering public transportation navigation. For a student with autism, objectives might involve practicing job interview skills or using assistive communication devices in workplace settings. Schools must invite students to transition meetings, fostering self-advocacy and ownership of their goals. Collaboration with community agencies—e.g., vocational rehabilitation services—is critical to bridging school-based support and adult services. Parents should ask, “What experiential learning opportunities (e.g., internships, community college courses) will be provided to build career readiness?”

Parent-Teacher Conference Preparation

Effective parent-teacher conferences are crucial for fostering collaborative relationships and supporting student success. To maximize these meetings, parents and teachers should engage in proactive planning and preparation. Parents can start by scheduling conferences well in advance through school-provided online portals or direct communication with teachers. Prior to the meeting, parents should review their child’s recent work, grades, and assessment data, while also engaging their child in discussions about their perceived strengths and challenges. Parents are encouraged to draft a prioritized list of questions addressing their most pressing concerns, such as their child’s collaboration skills or strategies for reinforcing learning at home. For families navigating post-divorce dynamics, coordinating with co-parents to establish unified goals is essential.

During the conference, teachers typically begin by highlighting the student’s strengths before discussing areas for improvement. Parents should share relevant observations from home to provide context for their child’s classroom performance. The goal is to engage in a two-way conversation focused on student growth. Conferences should conclude with co-created action plans, including targeted strategies and adjustments to support the student’s learning. Schools increasingly emphasize culturally responsive practices in these plans. Post-conference follow-ups help maintain accountability and allow for adjustments to support as needed.

A special case for educational meetings is IEP meetings. These meetings often involve complex discussions about services, placements, and progress. Preparation is key: parents should review draft documents, compile questions, and bring relevant medical or private evaluation reports. Sample questions include: “How will accommodations be implemented in elective classes or extracurricular

activities?"; "What evidence supports the proposed intervention strategies?" If disagreements arise, parents may invoke "stay put" rights under IDEA to maintain current services during disputes.

Elementary School Transition: Cultivating Academic and Social Confidence

Moving from preschool to elementary school introduces structured academic expectations and complex peer dynamics. Parents can mitigate challenges by rehearsing school routines—such as lunch preparation and homework organization, weeks before the first day (Miracle Recreation, 2024). Collaborative partnerships with teachers are essential; attending orientation sessions and discussing learning accommodations (e.g., extended time for assignments) (U.S. Department of Education, 2023). Research highlights the value of "parent coaching" during this phase: instead of solving problems directly, guide children to articulate needs to teachers and resolve conflicts independently (Erlanger Turner, 2024). Schools may provide translated materials and culturally responsive transition workshops for culturally diverse families to address systemic barriers (Technical Assistance Partnership for Transition, 2022). Multilingual families may face additional barriers in understanding IEP terminology or accessing translated materials. Culturally responsive practices—such as involving interpreters or community liaisons in meetings—promote equitable participation.

As students transition into middle school, the parent-child relationship is important. A strong parent-child relationship directly enhances adolescents' learning engagement by providing emotional stability and reducing anxiety (Shao & Kang, 2022). Parents should promote open communication. Adolescents who feel heard and understood by their parents are more likely to express their academic challenges and aspirations openly (Shao & Kang, 2022). Simple practices like active listening (e.g., asking, "What was the most interesting part of your day?") build trust and reinforce emotional safety. Negative interactions, such as criticism or punitive responses to academic struggles, correlate with lower classroom engagement (Shao & Kang, 2022). Instead, adopt a collaborative problem-solving approach (e.g., "Let's figure this out together") to maintain a constructive dynamic. Nurturing intrinsic motivation is also connected to deeper learning (Shao & Kang, 2022). Adolescents with intrinsic motivation (e.g., curiosity-driven exploration) show deeper engagement than those motivated by external rewards like grades (Shao & Kang, 2022). Studies show that parents who frame challenges as opportunities foster resilience and a growth mindset in children (Hamovitz & Dweck, 2017). Academic self-efficacy—the belief in one's ability to succeed—is the strongest predictor of learning engagement (Shao & Kang, 2022). This can be facilitated by recognizing effort over outcomes (e.g., "I noticed how hard you worked on that project") to reinforce persistence. Adolescents with high self-efficacy view difficulties as surmountable challenges rather than threats (Shao & Kang, 2022). Parents can also encourage their students to break complex tasks into manageable steps (e.g., "Let's tackle one math problem at a time") to build confidence. Research indicates that parental scaffolding improves executive functioning, problem-solving skills, and autonomy (Stern & Hertel, 2022; Hanlin & Zou, 2024).

Bullying

A strong parent-child relationship and parental involvement in education are crucial foundations for supporting children's overall well-being and academic success. These factors also play a significant role in addressing and preventing bullying, which is a serious issue affecting many students' school

experiences. A research study found that middle school students who perceive their parents as more involved in their education experience fewer mental health problems resulting from bullying victimization, including reduced suicidal thoughts and behaviors (Wang et al, 2019). This highlights the importance of maintaining strong parent-child communication and engagement with the school environment, especially during the challenging middle school years when bullying often becomes more prevalent.

Bullying is defined as unwanted, aggressive behavior among school-aged children that involves a real or perceived power imbalance and is repeated or has the potential to be repeated (U.S. Department of Health & Human Services, 2023). It can take various forms, including verbal, social, physical, and cyberbullying. Cyberbullying, which involves electronic technology. Examples of cyberbullying include sending mean text messages or emails, creating fake profiles, and posting embarrassing pictures, videos, or rumors on social networking sites. Children who experience cyberbullying have a harder time getting away from the behavior because it can occur at any time of day and without being in the presence of others. Additional concerns of cyberbullying include that messages and images can be posted anonymously, distributed quickly, and be difficult to trace or delete. Children who are cyberbullied are more likely to experience in-person bullying, be unwilling to attend school, receive poor grades, use alcohol and drugs, skip school, have lower self-esteem, and have more health problems (Nixon, 2014; Delgado et al, 2019; Extremera et al, 2018). Some steps to prevent bullying include:

- Open Communication: Establish regular, open conversations with your child about their school experiences (Pew Research, 2024)
- School Involvement: Spend time at school, especially during less structured periods like recess, to observe and support positive peer interactions (Pew Research, 2024)
- Model Positive Behavior: Demonstrate respectful communication and conflict resolution in your own interactions (Oaks Integrated Care, 2025)
- Teach Anti-Bullying Skills: Coach children on appropriate behaviors and how to respond to bullying situations (Oaks Integrated Care, 2025)
- Promote Empathy: Encourage understanding and respect for differences among peers (Cespe, 2025)
- Monitor Online Activity: Establish clear rules for technology use and discuss cyberbullying prevention strategies (Children's Wisconsin, 2024)

Research indicates that certain groups are at higher risk of being bullied, including LGBTQ+ youth, students with disabilities, and those who are socially isolated or perceived as different (Earnshaw et al., 2018). Contrary to popular belief, many bullies have high self-esteem and social status but lack empathy (Volk et al., 2015).

Parents should be aware of warning signs that may indicate their child is being bullied. These can include:

- Unexplainable injuries
- Lost or destroyed possessions

- Changes in eating or sleeping patterns
- Declining school grades
- Reluctance to attend school
- Loss of friends
- Decreased self-esteem
- Self-destructive behaviors

It's important to note that many children do not report bullying to adults due to fear of retaliation or embarrassment (Bauman et al., 2020). If your child experiences bullying: Listen attentively and validate their feelings (Katsoulas, 2025). Document incidents and gather evidence, especially for cyberbullying (Children's Wisconsin, 2024). Collaborate with school staff to address the issue (Santa Maria, 2024). Teach coping strategies and assertiveness skills (Daipuria & Kakar, 2024). Consider professional support if bullying significantly impacts your child's well-being (Oaks Integrated Care, 2025). For cyberbullying, there are unique challenges due to its pervasive nature. Parents should establish clear guidelines for online behavior and technology use. Educate children about the potential risks and consequences of online interactions. Monitor online activities and maintain open communication about digital experiences. Teach children to save evidence of cyberbullying and report incidents to trusted adults or platform administrators (Children's Wisconsin, 2024).

Aligning Academics with Postsecondary Goals

High school transitions require balancing rigorous coursework with postsecondary planning. Under IDEA, IEP teams must develop transition plans by age 16 that outline college, career, or independent living goals (IDEA, 2004). Parents should collaborate with guidance counselors to align course selections with vocational interests—such as enrolling in Career and Technical Education (CTE) programs—and facilitate internships or job-shadowing opportunities (Technical Assistance Partnership for Transition, 2022). For neurodivergent students, assistive technologies like speech-to-text software and digital organizers promote academic independence (Edyburn, 2020). Families from marginalized backgrounds may face systemic inequities in accessing college-prep resources; partnering with community organizations or legal advocates ensures equitable postsecondary planning (Trainor, 2017). Encouraging adolescents to lead IEP meetings and articulate their goals strengthens self-determination and prepares them for adult decision-making (Hirano & Rowe, 2016).

After high school, IEPs no longer apply under the Americans with Disabilities Act (APA, 2024). Parents should coach students to disclose disabilities to campus accessibility offices, request accommodations (e.g., note-taking services), and manage healthcare independently (Coburn, 2009). Research underscores the importance of “scaffolded independence”: gradually reducing financial oversight while maintaining emotional support through weekly check-ins (Schiffrin et al., 2020). For students with intellectual disabilities, dual-enrollment programs and partnerships with vocational rehabilitation agencies bridge skill gaps (Mazzotti et al., 2016). Culturally responsive transition practices—such as connecting first-generation students with affinity groups—counteract feelings of isolation (Technical Assistance Partnership for Transition, 2022).

Resources for Educational Support

Preschool Selection & Early Education

- **Born Ready: Pre-K Parent Resources**

<https://bornready.org>

Features video series and guides to ease transitions into Pre-K, with strategies for fostering independence, addressing developmental milestones, and collaborating with educators.

IEPs & Special Education Advocacy

- **Wrightslaw: Parent Rights & IEP Process**

<https://www.wrightslaw.com>

Comprehensive legal guides for IEP meetings, procedural safeguards, and dispute resolution. Includes checklists for drafting goals, understanding parental rights, and preparing for due process hearings.

- **U.S. Department of Education IEP Guide**

<https://www2.ed.gov>

Official federal resource outlining IEP requirements, evaluation processes, and accommodations under IDEA. Clarifies parental roles in developing and monitoring IEPs.

- **PACER Center: Parent Tips for Transition Planning**

<https://www.pacer.org>

Offers a downloadable PDF with strategies for aligning IEP transition plans with post-secondary goals, emphasizing student-led advocacy and community partnerships.

Educational Transitions

- **FCSN: A Family Guide to Transition Services**

<https://fcsn.org>

Focuses on Massachusetts-specific transition planning but includes universal strategies for post-secondary goals, vocational training, and self-determination skills.

- **Technical Assistance Partnership for Transition**

<https://osepartnership.org>

Provides national guidelines for K–12 transitions, including templates for IEP goal-setting, family-teacher collaboration, and accessing adult disability services.

Bullying Prevention & Support

- **Nationwide Children's Hospital: Bullying Information for Parents**

<https://www.nationwidechildrens.org>

Includes evidence-based techniques for discussing bullying with children, role-playing scenarios, and collaborating with schools to implement anti-bullying policies.

- **DoDEA: For Parents**

<https://www.dodea.edu>

Offers resources for teaching children conflict resolution, reporting bullying incidents, and fostering empathy. Highlights strategies for monitoring online behavior.

General Parent Advocacy & Skill-Building

- **Education.com: Pre-K Resources**

<https://www.education.com>

Free worksheets, games, and lesson plans to reinforce early literacy, math, and social skills at home. Aligns with Common Core standards for school readiness.

- **Federation for Children with Special Needs (FCSN): TIPS Brochures**

<https://fcsn.org>

Brochures covering transition assessments, self-advocacy, and IEP meeting preparation. Available in multiple languages, including Vietnamese.

Key Takeaways

- High-quality early childhood experiences lay the foundation for lifelong learning. By embracing play-based and sensory-rich environments, caregivers nurture curiosity and resilience. Daily interactions that weave numeracy and literacy into routines prepare children for academic success while fostering joy in discovery. When selecting preschools, prioritizing NAEYC's standards ensures access to environments where children thrive socially, emotionally, and cognitively. As research affirms, these investments yield dividends in children's executive functioning, self-regulation, and creative problem-solving abilities (PMC, 2016; Frontiers in Psychology, 2021).
- IEP and 504 Plans empower students with disabilities to achieve academic and lifelong success through personalized support. By mastering legal frameworks, advocating collaboratively, and leveraging assistive technologies, parents can ensure their children receive meaningful accommodations. Transition planning and culturally competent practices further enhance post-school outcomes, particularly for historically underserved populations. Ongoing communication with educators, coupled with strategic use of external resources, remains central to navigating this complex landscape.
- A strong parent-child relationship and parental involvement in education are crucial for supporting children's well-being and academic success.
- Bullying, including cyberbullying, can have serious consequences for children's mental health, academic performance, and overall well-being. Parents can help prevent and address bullying by maintaining open communication with their children, collaborating with school staff, teaching anti-bullying skills, and monitoring online activity, while also being aware of warning signs that may indicate their child is being bullied. Simply by engaging in meaningful conversations at home about the prevention and effects of bullying, families reported seeing a difference in their children's responses to it.
- Successful educational transitions require proactive collaboration between parents, educators, and students. By aligning strategies with developmental needs—from fostering preschool separation resilience to coaching college self-advocacy—parents empower children to navigate academic milestones with confidence. Culturally sustaining practices, individualized accommodations, and gradual autonomy-building remain central to mitigating systemic inequities and promoting lifelong success.

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ASSOCIATED FAMILY PROCESSES

Family processes and functions must be assessed in order to understand the role family members have in child outcomes (Hammond et al, 2015).

Family Processes

“Family processes” are the ways in which families internally function to navigate cognitive, social, and emotional events. Examples include how families adapt, communicate, cope, problem solve, parent, rear children, make decisions, plan, and lead (Pasley & Perten, 2015).

Family Functions

Many “family functions” are similar to parenting tasks, goals, and responsibilities. However, it is important to understand how “family functions” and parenting tasks impact each other. The following is a list of somewhat universal family functions (e.g., almost all families in all countries worldwide have some of these in common):

- **Economic support:** providing basic needs, such as food, shelter, clothing, etc.
- **Emotional support:** providing love, comfort, intimacy, companionship, nurturing, belongingness, etc.
- **Socialization of children:** rearing children, parenting, helping children function to the best of their abilities within their society.
- **Control of sexuality:** defining and managing when and with whom (e.g., marriage) sexuality occurs.
- **Procreation:** contributing to the continuation of society and offspring.
- **Ascribed status:** providing a social identity (e.g., social class, race, ethnicity, kinship, religion, etc.) [



Figure. This infant getting immunization shots is being provided for in ways that not all families can afford. (Photo Credit: [Maria Immaculata Hospital, CC BY-SA 4.0](#))

Associated Family Processes

Racism

- [Information on the intersection between racism and health.](#)
- Talking to kids about racism can be tough. For more information, visit [this article with advice for talking about racism](#) and [this article for parents addressing racial bias](#).

Gender Identity

- [Gender-Diverse & Transgender Children – HealthyChildren.org](#)
- [Healthy Gender Development and Young Children](#)

Family Media Plan

[How to create a family media plan.](#)

The Importance of Family Meal Time

- [A video about family relationships.](#)
- [The importance of family dinners.](#)
- [The benefits of family dinners.](#)
- [How to have a healthy family table \[pdf\]](#)

Rituals

To learn more, [read this article about family rituals.](#)

Pornography, Sex Trafficking, and Human Trafficking

- [Safeguarding children from pornography.](#)
- [The Impact of Pornography on Children \[pdf\]](#)
- [2018 Statistics from the National Human Trafficking Hotline \[pdf\]](#)
- [Human trafficking in Iowa.](#)
- [Recognizing the signs of human trafficking.](#)

Sextortion

- [Tips on Protecting Youth From Sextortion \[pdf\]](#)
- [A video about sextortion](#)

A comprehensive list of other topics can be found [here](#).

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PART VIII.

CONTEMPORARY PARENTING STRUCTURES

TEEN PREGNANCY AND PARENTING

Adolescent Pregnancy

Teen parenting refers to individuals under the age of 19 who give birth to and elect to parent a child. Adolescent pregnancy rates vary significantly across the United States and around the world. In the US, teenage birth rates have reached historic lows, with 13.5 births per 1,000 females aged 15-19 in 2022 (CDC, 2023). This continues a long-term trend, as teen birth rates in the U.S. have been continuously declining since 1991, with the exception of slight increases in 2006 and 2007 (CDC, 2023). Although adolescent pregnancy rates have declined since 1991, teenage birth rates in the United States are higher than in most developed countries. Globally, the adolescent birth rate has decreased from 64.5 births per 1,000 women aged 15-19 in 2000 to 41.3 births per 1,000 in 2023 (WHO, 2024).

Consequences of Adolescent Pregnancy

Most adolescent pregnancies are unintended, though an increasing number of pregnant adolescents choose to continue the pregnancy and become parents. Mothers younger than 17 years have an increased risk of preterm delivery, low birth weight infants, and neonatal deaths compared to older teenage mothers (AAP, 2021). Physical immaturity can lead to a wide range of complications (e.g. endometriosis, systemic infections, preterm delivery, etc.). Babies born to teen mothers also have a greater risk of health complications, including digestive, respiratory, cognitive, and other problems (WHO, 2024).

Teen parents face unique challenges as they navigate multiple simultaneous transitions. They must adjust to changes in their family relationships during adolescence, adapt to physical and cognitive developments, and manage shifts in their social reality—all while taking on the responsibilities of parenthood. This creates a series of competing developmental tasks that increase the likelihood of stress. Teen mothers are significantly more likely to be single compared to older mothers (Diabelková et al, 2023).

Educational attainment remains a critical challenge for both teen moms and teen dads. Only 40% of teenage mothers graduate high school (Ney, 2021). A longitudinal analysis of the National Longitudinal Study of Adolescent Health found that adolescent fathers face a 15% reduction in high school graduation rates compared to their non-parenting peers, but an increase in GEDs (11% higher) (Fletcher & Wolfe, 2012). In the US, teenage parents usually do not obtain a degree, or they do it significantly later than their peers (CDC, 2023). Many teen parents drop out of school due to

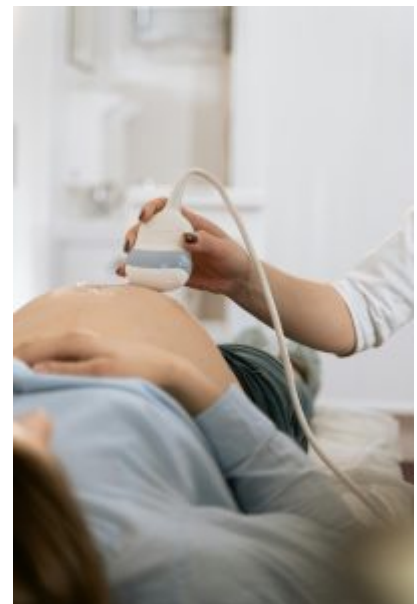


Figure. Pregnant teen getting ultrasound.
Photo Credit: Photo by [MART PRODUCTION, Pexels](#).

pregnancy or childbirth, which can limit their career possibilities and result in lower lifetime earnings (Diabelková et al, 2023). They enter low-skilled labor markets to meet immediate financial obligations. While 32% of all single mothers earn \$40,000 or more annually, and 10% earn \$80,000+, teen mothers typically fall into lower income brackets (CPS, 2022). Additionally, teen mothers continue to face high poverty rates, with approximately 31.3% of single-mother families living in poverty, nearly five times higher than families with married parents (CPS, 2022). For teenage mothers who don't live with their parents, the poverty rate is even more severe, with 67% living in poverty (Ney, 2021). However, recent research has added nuance to our understanding of these relationships, suggesting that the “opportunity cost” of teen mothers varies by socioeconomic background. Teen mothers from higher socioeconomic backgrounds face greater opportunity costs because they have more to lose in terms of educational and economic opportunities (Wolfe et al, 2024). Conversely, for teen mothers from lower socioeconomic backgrounds, childbirth might not be the primary barrier to college graduation if they were already facing significant financial obstacles to higher education (Wolfe et al, 2024). For teen dads, 56% of teenage fathers in the Pittsburgh Youth Study reported strained relationships with their partners' families due to an inability to provide financially, which frequently resulted in restricted access to their children (Makhavhu, 2023). Additionally, research shows a potential cycle of educational challenges with children of teen parents. For example, children of teenage fathers are 43% less likely to earn high grades in school and 33% more likely to repeat a grade (Research Review: The Fatherhood Project at MGH, 2014).

Despite these challenges, with appropriate support, teen parents can achieve healthy development and pursue positive life paths. Pediatricians can serve as primary care providers for both teens and their children while connecting them to community resources for transportation, medical insurance, housing, and food access (AAP, 2021). Support from family, friends, school, and community services is crucial for helping teen parents navigate challenges and help their children thrive.

Key Takeaways

- Health risks for teen mothers and their babies: Adolescent mothers, especially those younger than 17, face increased risks of complications during pregnancy and childbirth, including preterm delivery and low birth weight infants. Their babies are also at higher risk for various health issues, such as digestive, respiratory, and cognitive problems.
- Educational and economic challenges: Teen parenthood significantly impacts educational attainment, with only 40% of teenage mothers graduating high school. This educational setback often leads to limited career opportunities and lower lifetime earnings, resulting in higher poverty rates among teen mothers.
- Multifaceted developmental challenges: Teen parents face unique challenges as they navigate multiple simultaneous transitions, including adolescent development, changing family dynamics, and the responsibilities of parenthood. This combination of competing developmental tasks increases the likelihood of stress and requires comprehensive support systems to help teen parents and their children thrive.

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FOSTERING & ADOPTION

Fostering

Foster parenting represents a critical intervention in the lives of vulnerable children, offering temporary stability while addressing complex systemic and emotional needs. Foster parenting is a challenging yet rewarding experience that plays a crucial role in providing temporary care and support for children who cannot remain with their biological families. In 2022, there were 368,530 in foster care in the United States (Davi, 2024). Foster parents are tasked with creating a safe and nurturing environment for children who have often experienced trauma, abuse, or neglect (Kohl et al., 2022). This responsibility comes with unique challenges and opportunities for personal growth and positive impact on a child's life.

Becoming a foster parent

The process of becoming a foster parent involves multiple phases designed to ensure readiness for this transformative role. Prospective caregivers must first complete pre-service training covering trauma-informed care, child development, and legal frameworks, followed by a comprehensive home study evaluating their capacity to provide safety and emotional support (TFI Family, 2023). Licensing requirements vary by state but universally emphasize the need for stable environments capable of nurturing children who have often experienced neglect or abuse (CAFO, 2025). Prospective parents should research state requirements, attend orientations, and assess family readiness. For each state, typically, there are training and certification requirements and a home study. This is where caseworkers conduct home visits to evaluate safety, space, and family dynamics. Simultaneous tasks include fingerprinting, financial audits, background checks, and medical clearance. Based on 2022-2025 procedural requirements and recent operational timelines, the licensing phase typically spans 3–9 months, with specific factors accelerating or delaying completion (FosterUSKids, 2025).

Challenges and Rewards

One of the primary challenges foster parents face is navigating the complex emotional landscape of their foster children. Many children in foster care carry emotional baggage from their past experiences, which can manifest as behavioral issues, attachment difficulties, or mental health concerns (Davi, 2024). Foster parents must be prepared to provide emotional support and create an environment where children can feel secure and begin to heal from past traumas. This often requires patience, understanding, and a willingness to adapt to the child's needs (National Council for Adoption, 2023).



Figure: Smiling adults using hands to form a house with a girl standing between them. Photo credit: [Kindel Media, Pexels](#).

Another significant aspect of foster parenting is managing family dynamics. Introducing a foster child into the home can affect existing family relationships and routines. Foster parents must ensure that all family members are prepared for the changes and understand the importance of welcoming the foster child as a new family member (National Council for Adoption, 2023). Family dynamics often shift as existing household members adapt to new routines and relationships, a process requiring open communication and collective commitment to the child's well-being (Debra Corn Foster Care, 2023). This may also involve setting clear expectations and helping biological children adjust to sharing their parents' attention and resources. Additionally, foster parents must navigate complex interactions with biological families, social workers, and court systems—a responsibility that demands patience and advocacy to uphold the child's best interests during reunification efforts or transitions to adoption (National Council for Adoption, 2024).

Foster parents also face the challenge of working with the child welfare system and, in many cases, maintaining relationships with the foster child's biological family. This can include facilitating visitations, attending court hearings, and collaborating with social workers and other professionals involved in the child's case (Sullivan County NY, 2004). While these responsibilities can be time-consuming and emotionally taxing, they are essential for supporting the child's overall well-being and potential reunification with their biological family.

Despite these challenges, foster parenting can be an incredibly rewarding experience. Foster parents have the opportunity to make a significant positive impact on a child's life, providing stability, love, and support during a critical time. Caregivers frequently describe the fulfillment of witnessing a child's emotional and developmental progress, particularly when providing consistency to those who have experienced instability (FosterUSKids, 2023). The role also cultivates personal growth, as foster parents gain insights into systemic inequities and develop skills in trauma recovery and cultural competency (Roszia & Maxon, 2019). Educational advocacy emerges as a critical component, with foster parents collaborating with schools to address learning gaps exacerbated by placement disruptions (Texas Education Agency, 2022). For many children, the support of a dedicated foster family becomes the foundation for resilience, with studies showing improved long-term outcomes in education, employment, and relational health when caregivers remain actively engaged (CAFO, 2025; The UP Center, 2025).

To thrive as foster parents, individuals must be prepared for the emotional and practical adjustments that come with caring for a child in foster care. This includes building trust with the child, navigating potential behavioral concerns, and fulfilling legal and administrative requirements (The UP Center, 2025). Foster parents should also be willing to seek support and training to effectively address the specific needs of children in their care. Additionally, caregivers often experience grief when children reunify with biological families or transition to adoptive homes, a process underscoring the bittersweet nature of temporary caregiving (FosterUSKids, 2023). Agencies increasingly emphasize

ongoing training and peer support networks to help foster parents process these emotions while maintaining boundaries (TFI Family, 2023).

Adoption

Adoption of children is one of many ways in which families are formed. Adoption, the legal transfer of parental rights of a child to another person, can occur in many ways and elicit a wide variety of family types. In the United States, statistics for the total number of all types of adoptions are not compiled on a regular basis and statistics are not at all compiled for some adoption types. Adoption statistics and estimates are based on U.S. Census data and other sources. It is estimated that approximately 2-4% of all Americans are adopted. In 2020, 95,306 children were adopted, including step-parent adoptions (though adoptions could be impacted by COVID-19) (Kohl et al, 2022).



Figure. Small Chalk board with “family” next to child. Photo Credit: [Kindel Media, Pexels.](#)

Each year there are more than 100,000 youth (with an average age of 7 years) are waiting to be adopted from foster care (National Council Adoption, 2023). Approximately 60% of prospective adoptive families wish to adopt a child 5 years old or younger (Harris Poll, 2022). Foster care adoption and private infant adoption remain the most common types of adoptions with around 1500 children being adopted from international locations each year. It is also estimated that *fewer* than 20,000 babies are voluntarily placed for adoption each year in the United States. For example, in 2020 there were 19,700 infant adoptions (Kohl et al, 2022). In the U.S., for private adoptions, it is common for birth parents to choose their baby’s adoptive parents, and in some cases, adoptive and birth family members can maintain some contact with each other. It is important to note that infants who are voluntarily placed are typically taken home immediately from the birthing location by their adopting family. Research has shown that placing a baby for adoption can serve as a preventive option for child abuse and neglect for individuals who are not ready to parent, able to parent, or willing to parent (Van IJzendoorn & Juffer, 2006; Van IJzendoorn et al, 2005; Van IJzendoorn & Juffer, 2005). It is best-practice approach that individuals experiencing unplanned or unwanted pregnancies be provided the most accurate information concerning their options for parenting, adoption, the processes associated with all options (Gallagher & Rycraft, 2014). Fewer children may end up in foster care if their parents were advised of their options for adoption and parenting.

Family Types From Adoption

There are numerous adoptive family types. Below is a brief definition of each family type.

- **Infant/newborn/domestic:** A child who is born in a country and who is adopted shortly after birth (within the same country).
- **Transnational/Intercountry/International:** A child who is born in one country and is

adopted by a family who lives in another country. Often, the child is orphaned. For statistics and information about intercountry adoptions [visit this website](#).

- **Kin:** Children adopted by a relative such as an aunt, uncle, sister, brother, grandparent, or other relative.
- **Foster care:** Children who are no longer able to be cared for by their primary caregiver(s) who are adopted by another family member.
- **Stepparent:** Children adopted by one parent's spouse; the spouse agrees to take full responsibility for the child.

Below are some of the more commonly-used terms associated with adoption and the legal process.

- **Adoption Triad:** Birth parents, adoptive parents, and the adopted child(ren).
- **Disrupted Adoption:** An adoption agreement that ends before finalization.
- **Dissolution of Adoption:** An adoption that ends after finalization.
- **Interstate Compact on the Placement of Children:** A law that requires written notice and prior approval of the placement of a child for adoption or foster care from one state with a family in another state.
- **Kinship care:** The full-time nurturing of a child by someone related to the child by family ties or by prior relationship connection (fictive kin).
- **Reunification:** The returning of foster children to the custody of their parent(s) after placement outside the home.
- **Relinquishment/Termination of Parental Rights:** The legal step necessary for parents to voluntarily or involuntarily have their parental rights terminated to allow their child to be adopted by adoptive parents; sometimes referred to as a surrender or as making an adoption plan for one's child.
- **Special Needs:** Children with physical, behavioral, or mental impairments, children with siblings in need of adoption, and at-risk children.

Assisted Reproductive Technology

Assisted reproductive technology (ART), including in vitro fertilization (IVF), surrogacy, and embryo donation, has reshaped modern family-building while intersecting with adoption in unexpected ways. These technologies enable individuals and couples to pursue biological parenthood, yet they also create pathways for non-traditional adoption-like arrangements. Approximately 60,000 babies are born annually in the U.S. via ART, with many families storing surplus embryos for future use or donating them to others (National Council for Adoption, 2024; ASRM, 2023).

ART challenges traditional notions of parenthood by enabling family formation through genetic, gestational, and social bonds. The following forms of adoption are a result of assisted reproductive technology (methods that utilize medical technology to achieve conception and birth). In most U.S. states, these forms require the legal transfer of parental rights to another parent(s).

- **Embryo:** Families can adopt an embryo produced from the sperm and egg of one couple.

Clinics and agencies help match donating families and recipient/adopting families. Embryo donation—where individuals transfer unused IVF embryos to others—blurs lines between biological and adoptive parenting. Most states treat embryos as a property transfer and medical organizations emphasize that embryos are not legal persons and should not be subject to adoption frameworks (ASRM, 2023; Snyder Law Firm, 2025). Typically embryo donation is governed by contractual agreements that transfer parental rights preemptively, often without post-birth adoption proceedings (Purl Adoptions, 2023). These arrangements allow recipients to experience pregnancy, creating unique parent-child bonds distinct from conventional adoption (Carrot Fertility, 2023).

- **Surrogacy:** A surrogate mother carries a fertilized egg in utero. After the birth of the child, the intended parent(s) adopt(s) the child. ART families using surrogates must navigate complex parental rights. Contracts often stipulate the irrevocable termination of donors' rights, yet legal disputes arise when donors later seek involvement (Berkman Law, 2023). Such cases underscore the need for standardized legislation to protect all parties, particularly children born through these technologies.

Levels of Openness/Degrees of Contact

Before and after the legal transfer of parental rights, families can decide how they may stay in contact after the child is no longer a legal member of the birth family. This decision is referred to as “levels of openness” or “degrees of contact.”

Non-identifying information: Information that allows the members of the adoption triad to know about each other, but without identifying information. First names, physical descriptions, occupation, education, personality characteristics, hobbies, interests, religious affiliation, and medical information are examples of non-identifying information.

Semi-open adoption: An adoption in which a child's birth parents and adoptive parents may exchange primarily non-identifying information. After the child is placed in the adoptive home, contact with the birth family may involve letters or pictures or other communications sent through the intermediary of the adoption agency or the attorney who assisted in the placement.

Closed adoption: An adoption that involves total confidentiality and sealed records; contact does not exist between any members of either family.

Identifying information: Information concerning birth parents which discloses their identities.

Open adoption: An adoption that involves some amount of initial and/or ongoing contact between birth and adoptive families, ranging from sending letters through the agency, to exchanging names, and/or scheduling visits.

Resources

To learn more about becoming a foster parent, based on each state, [click here](#).

To learn how to educate parents about the option of placing their baby for adoption view this pdf, [Adoption: Considering Your Options and Making a Plan](#)

Appropriate Terminology

Using accurate adoption language can stop the spread of adoption-related misconceptions and educate others about adoption. For instance, the phrase “choosing to place your child for adoption” has a much more positive connotation than “giving up your baby.” “Choosing to place your child for adoption” focuses on the fact that parents most likely considered options and chose the option they felt was best for the child. It is important to use appropriate terms so that accurate language may someday be the norm. Below is a list of “accurate adoption terminology.”

Table: Adoption terminology, accurate and inaccurate language

Accurate Language	Inaccurate Language
Child in foster care/has experienced foster care	Foster child
Child under state guardianship	Ward of the state
Birthparent, first parent	Real parent, natural parent, biological parent
My child	Adopted child
Choosing an adoption plan	Giving away/giving up your child
Finding a family to parent your child	Putting your child up for adoption
Deciding to parent the child	Keeping your baby
To parent	To keep
Child in need of a family/parent	Adoptable child; Available child
International or intercountry adoption	Foreign adoption
Child who has special needs	Handicapped child, hard to place
Child from another country	Foreign child
Was adopted	Is adopted

Key Takeaways

- Adoption is a legal transfer of parental rights of a child
- There are many types of adoption and ways to build a family
- Families can negotiate how they wish to communicate after the adoption process is completed
- Using appropriate adoption terminology is very important

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SINGLE-PARENT FAMILIES, DIVORCED AND BLENDED FAMILIES

Family Structures

The family is central in children's lives because it is through experiences with their families that children learn about themselves and the world around them. "Family member" is used here to define the people who are primarily responsible for a child, including parents, extended family members, guardians, and foster families.

"Family structures" delineate household members who are related by blood or legal ties; this concept typically assumes there is at least one child younger than 18 years of age residing in the household. Specific structures include two-parent, one-parent, and "living with neither parent" (e.g., grandparents or other relatives rearing a child, families providing foster care, and children living in institutionalized settings), blended families, single-parent plus partner families (cohabiting couples, for example), multigenerational families, binuclear families, and adoptive families.



Figure. A family with two parents and two children. (Photo Credit: [Emma Bauso](#), [Pexels License](#))

The U.S. Census Bureau (2019) utilizes these definitions of "family structures":

- **Nuclear family:** a child lives with two married biologically-related parents and with only full siblings, if siblings are present.
- **Cohabiting families:** a child's parent lives with at least one opposite-sex, non-related adult. This additional adult may or may not be the biological parent of the child.
- **Same-sex cohabiting/married families:** a child's parent lives with at least one same-sex, non-related adult. The additional adult may or may not be the biological parent of the child.
- **Stepfamilies and blended families (terms used interchangeably):** children who live in a household formed through remarriage resulting in children living with one or no biologically-related parents. The presence of a stepparent, stepsibling, or half-sibling designates a family as blended.

Divorce & Separation

Separation and divorce, while emotionally challenging, can be navigated in ways that prioritize both parental well-being and children's long-term adjustment. Contemporary research underscores the importance of cooperative conflict resolution, structured communication, and evidence-based

support systems to mitigate the psychological impacts of marital dissolution. The U.S. divorce rate was 2.4 per 1,000 population in 2022 (CDC, 2024; 45 states reporting). According to CDC (2024), divorced individuals average 45.8 years old, with 63.3% employed and 11.9% below the poverty line. Approximately 37% of marriages end in divorce with nearly half of all children experiencing parental separation before adulthood (US Census, 2019).

It's estimated that 73% of couples get divorced because of a lack of commitment. 56% of couples get divorced because they argue too much. 55% of people say they get divorced because of cheating. <https://csw.osu.edu/research/>

Children's reactions to divorce

Children's responses to parental divorce vary significantly based on their developmental stage, temperament, and pre-existing psychosocial functioning. Young children often exhibit transient regressive behaviors. Infants may become fussier and experience sleep disturbances, while toddlers often exhibit separation anxiety and developmental regression (AAP, 2016). Preschool-aged children may struggle to understand the permanence of separation, often blaming themselves and experiencing nightmares (AAP, 2016). School-aged children frequently display mood and behavior changes, with declining school performance and feelings of abandonment (AAP, 2016). Behavioral issues peak when parental separation occurs between ages 7–14, a period marked by heightened social and academic pressures. Adolescents may struggle with identity formation amid familial fragmentation. Adolescents, despite better understanding the situation, may still struggle to accept it, potentially leading to aggressive behavior, substance abuse, or poor academic performance (AAP, 2016). Notably, suicidal ideation is more prevalent among junior high school-aged boys with separated mothers and men from divorced families (AAP, 2016).

Parent reactions to divorce

Parents also experience negative effects from separation and divorce. Mothers often face increased stress, humiliation, and are more likely to use alcohol and seek mental health services compared to divorced fathers (AAP, 2016). These issues can persist long after the divorce. Fathers, on the other hand, may feel alienated, less accepting of their children, and are prone to depression, anxiety, and substance abuse (AAP, 2016). The quality of relationships between grandparents and grandchildren may also suffer, particularly when custody arrangements favor the ex-in-law (AAP, 2016). Nonresidential fathers often perceive themselves as more involved with their children than the custodial mother believes, but they may also experience a more negative change in their relationship with the children over time (AAP, 2016).

Moderating factors of the impact of Divorce

Several factors can influence the impact of divorce on families. Financial considerations play a significant role, with low-income families more likely to separate and experience decreased supportive co-parenting. The disparity in financial resources between divorced parents often leads to increased child poverty (AAP, 2016). A history of child abuse in the family is associated with a higher incidence of conduct disorder, post-traumatic stress disorder, and suicide attempts in children (AAP, 2016). Family conflict levels also significantly affect outcomes, with children from high-conflict families reporting more depression and wariness regarding relationships later in life.

(AAP, 2016). Positive moderating factors include interventions that foster improved mother-child relationships and consistent discipline practices, which have shown to increase coping efficacy in children (AAP, 2016). Additionally, the supportive environment provided by military service appears to protect families from divorce-related stresses, highlighting the importance of comprehensive family support systems (AAP, 2016).

Emotional Management and Cooperative Frameworks for Divorce

The dissolution of a marriage often triggers intense emotional responses, including grief, anger, and anxiety, which can impede rational decision-making. Psychological studies emphasize self-compassion as a foundational practice for divorcing parents, as individuals who approach their circumstances with kindness demonstrate greater resilience in managing daily stressors (APA, 2013). Structured mediation emerges as a pivotal alternative to adversarial legal proceedings, with research indicating its efficacy in preserving emotional well-being, fostering amicable post-divorce relationships, and addressing children's needs more effectively than litigation (APA, 2013). Research shows that children exposed to prolonged parental conflict face elevated risks of behavioral disorders and social difficulties, whereas cooperative co-parenting correlates with improved developmental outcomes (APA, 2013). By reframing divorce as a collaborative process rather than a conflict, parents reduce the risk of rekindling marital disputes during negotiations.

Child-Centered Transitioning

Approximately 21% of American children reside in single-parent households, predominantly headed by mothers (CDC, 2024), underscoring the necessity of deliberate transition planning. Contrary to popular assumptions, longitudinal studies suggest most children adapt successfully within two years post-divorce, provided parents maintain low conflict and stable routines (APA, 2013). Critical to this adjustment is joint decision-making: presenting unified plans about living arrangements, schooling, and visitation schedules reinforces children's sense of security. Open dialogue tailored to developmental stages helps children process changes, with age-appropriate honesty reducing feelings of blame or instability (CDC, 2024).

Timing and consistency prove equally vital. Sudden disruptions, such as abrupt relocations or unexplained parental absences, exacerbate childhood anxiety. Experts advise providing advance notice for major changes and preserving familiar environments—such as keeping children in the same school district—to buffer against upheaval (APA, 2013). Maintaining strong relationships with both parents remains paramount; data indicate that children with strained parental bonds post-divorce face heightened risks of academic underperformance and emotional distress (APA, 2013). Parent education programs, which teach conflict de-escalation and child-centered communication, have demonstrated particular efficacy in strengthening these relationships (APA, 2013).

Divorce and Child Custody

Divorce and child custody are complex issues that can significantly impact the well-being of both parents and children. Parents should be aware that divorce may lead to psychological distress, including depression, loneliness, isolation, and self-esteem difficulties (APA, 2016). It's crucial to recognize that parental divorce can also negatively affect the psychosocial adjustment of children and adolescents (APA, 2013). Child custody refers to the care, protection, and supervision of a child.

After divorce or separation, a court may grant custody to one or both parents following a child custody evaluation (APA, 2016). When it comes to child custody, which involves the care, protection, and supervision of a child, courts may grant custody to one or both parents after a thorough evaluation (APA, 2016). Parents should prioritize their children's needs during this process, seeking professional help if necessary to navigate the emotional challenges and ensure the best possible outcomes for their family's mental health and overall well-being.

Self-Care and Support

Divorcing parents frequently neglect self-care amidst logistical and emotional demands, yet personal well-being directly influences familial stability. Engaging social support networks—including friends, family, and structured support groups—alleviates isolation and provides practical assistance (APA, 2013). Physical health practices, such as balanced nutrition and regular exercise, mitigate stress-related physiological impacts, while rekindling hobbies or exploring new interests fosters positive identity reconstruction beyond the marital role (APA, 2013). Psychologists play a dual role in this process, offering therapeutic spaces for emotional processing and facilitating reflective analyses of marital dynamics to prevent repetitive negative patterns in future relationships (APA, 2013).

Single parents

- <https://www.apa.org/topics/single-parent>

Tips for Single Parents

The Mayo Clinic resource offers valuable advice for single parents to thrive (Klass et al, 2022). Key recommendations include building a strong support network, finding quality child care, maintaining stable routines, and prioritizing self-care. The article emphasizes the importance of creating family time, staying organized, and providing opposite-sex role models for children. It also encourages single parents to focus on the positive aspects of their situation, maintain a sense of humor, and seek professional help if feeling overwhelmed. By implementing these strategies, single parents can create a nurturing environment that supports both their own well-being and their child's healthy development.

Blended families

Step-families

- <https://www.apa.org/topics/stepfamily>

Key Takeaways

- Healthy divorce transcends mere conflict avoidance—it demands proactive strategies to preserve parental well-being, prioritize child development, and adapt to evolving societal trends. By integrating psychological research with pragmatic planning, families can transform dissolution into an opportunity for growth rather than trauma.

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OTHER CHANGING FAMILY STRUCTURES

OTHER FAMILY STRUCTURES AND ASSOCIATED PROCESSES

LGBTQ+ families

Parenting within the LGBTQ+ community presents both unique challenges and opportunities. For LGBTQ+ parents, creating a supportive and inclusive environment is crucial. This involves fostering open communication about identity, ensuring access to LGBTQ+-friendly resources, and navigating societal biases. Children of LGBTQ+ parents may face questions or misunderstandings from peers, so it's important to prepare them with confidence and pride in their family structure. For parents of LGBTQ+ children, supporting their child's identity is paramount. This includes maintaining open communication, learning about LGBTQ+ issues, and advocating for their child's safety and well-being. Organizations like PFLAG and the Family Equality Council offer valuable support and resources for navigating these situations. Organizations like PFLAG and the Family Equality Council offer valuable support and resources for navigating these situations. By embracing diversity and promoting understanding, LGBTQ+ families can thrive and provide a loving, accepting home for their children.

- **John Hopkins**
<https://www.hopkinsmedicine.org/diversity/resources/lgbtq-resources.html>
- **Family Equality Council**
[Website](#)
Provides expert advice, databases, and information on laws and policies affecting LGBTQ+ families.
- **PFLAG**
[Website](#)
Provides in-person and virtual support for LGBTQ+ individuals and their families, including resources for parents of LGBTQ+ youth.
- **LGBTQ+ Healthcare Directory**
[Website](#)
A searchable database for finding queer-friendly healthcare providers.
- **Mombian**
[Website](#)
A blog offering resources and stories for lesbian moms and LGBTQ+ families.
- **Family Equality Council**
[Website](#)

Offers expert advice, databases, and information on laws and policies affecting LGBTQ+ families.

- **The Trevor Project**

[Website](#)

Provides crisis intervention and suicide prevention services for LGBTQ+ young people under 25.

- **COLAGE**

[Website](#)

Supports children of LGBTQ+ parents through education, advocacy, and peer networks.

- **Strong Family Alliance**

[Website](#)

Offers support and resources for parents of LGBTQ+ children, helping them navigate the coming-out process.

Military Family Parenting Resources

Military families face distinct challenges, particularly when it comes to parenting. Frequent moves, deployments, and the stress of military life can impact children's stability and emotional well-being. Parents in military families must be adaptable and resilient, ensuring their children feel secure despite these changes. Communicating openly about deployments and moves is essential, as is maintaining routines and connections with extended family and friends. Resources like the Military Child Education Coalition and the American Academy of Child & Adolescent Psychiatry provide guidance on managing these transitions and supporting children through challenging times. By fostering a strong family bond and leveraging available support systems, military families can navigate these unique circumstances effectively.

- **Military Child Education Coalition**

[Website](#)

Provides resources to support military children through life changes like deployments and moves.

- **American Academy of Child & Adolescent Psychiatry (AACAP)**

[Website](#)

Offers insights on talking to kids about deployments and managing stress.

- **Military Family Support 360 Center**

[Website](#)

Assists military families with children who have disabilities.

- **Military OneSource**

[Website](#)

Provides 24/7 support for military families, including resources on parenting, child care, education, relocation, financial and legal concerns, and more

- **National Military Family Association**

[Website](#)

Offers education and information on rights, benefits, and services for military families, advocating for their needs.

- **Blue Star Families**

[Website](#)

Provides free resources and services to support military families, bridging gaps between military communities and the general public.

- **Military Child Education Coalition**

[Website](#)

Advocates for military children, helping them cope with frequent school transfers and other challenges.

- **FOCUS (Families OverComing Under Stress)**

[Website](#)

Offers support and tools for military families dealing with stress and deployments.

- **Operation Homefront**

[Website](#)

Provides emergency financial assistance to military families, including those of wounded warriors.

- **American Red Cross**

[Website](#)

Delivers support services to military families, including emergency communications and financial assistance.

- **ZERO TO THREE**

[Website](#)

Offers resources specifically designed for military and veteran families, focusing on early childhood development.

- **Tragedy Assistance Program for Survivors (TAPS)**

[Website](#)

Provides support for families grieving the loss of a military loved one.

Grandparents Rearing Grandchildren

For grandparents who take on a primary caregiving role for their grandchildren, parenting can be both a rewarding and challenging experience. This role, often referred to as “kinship care,” requires grandparents to balance their own life stage with the needs of raising children again. It’s important to seek support from organizations like AARP and Generations United, which offer resources on legal, financial, and educational issues. Grandparents should also prioritize their own well-being to ensure they can provide the best possible care. By embracing this new role and leveraging community resources, grandparents can create a loving and stable home for their grandchildren, bridging generations with love and wisdom.

- U.S. Census data (2019) on [Grandparents and the opioid crisis](#).
- **AARP GrandFamilies Guide**
[Website](#)

Offers advice and resources for grandparents raising grandchildren, covering legal, financial, and educational issues.

- **Generations United**

[Website](#)

Provides information and advocacy for grandparents raising grandchildren.

- **ZERO TO THREE**

[Website](#)

Offers workshops and resources for grandparents caring for infants and toddlers.

- **Grandfamilies.org**

[Website](#)

Provides legal resources and policy information for grandparents raising grandchildren.

- Here is a resource on the topic (2005): [Grandparents Raising Grandchildren \[pdf\]](#)

PART IX.

PARENTING CHILDREN WITH SPECIAL NEEDS

Parenting a child with exceptionalities presents unique challenges that extend beyond typical parenting experiences. Parents often navigate a complex emotional journey beginning with diagnosis, while simultaneously developing specialized parenting approaches and building essential support systems. Research indicates that parents of children with exceptionalities experience significantly elevated stress levels, with some studies showing stress hormone levels comparable to soldiers in combat (Boston University, n.d.). This introduction examines the multifaceted aspects of raising children with exceptionalities, focusing on emotional and psychological dimensions, effective parenting approaches, support systems, and daily living strategies.

The emotional journey begins with diagnosis, where parents often experience a range of feelings including grief, guilt, anxiety, and anger as they reconcile their expectations with new realities (Scirp, 2021). This period requires substantial emotional processing as parents adjust to changing family dynamics and future plans. Beyond the initial diagnosis, parents face ongoing stressors related to daily caregiving demands, financial pressures, and concerns about their child's future development and independence. Developing emotional resilience becomes crucial, with mindfulness-based interventions showing promise in reducing parental stress by up to 30% in some studies (NSUWorks, 2020).

Research consistently demonstrates that an authoritative parenting style—combining clear expectations, consistent rules, and emotional responsiveness—proves most effective for children with exceptionalities (Blossom, 2025). This approach provides the structure and predictability many children with special needs require while avoiding the pitfalls of overly permissive parenting that can lead to learned helplessness. Effective behavior management strategies include establishing clear routines, using positive reinforcement, and implementing visual supports to enhance communication and understanding (Orbrom, 2025). Parents must also develop specialized communication techniques tailored to their child's specific needs, whether through sign language, visual aids, simplified language, or assistive technology (UNICEF, n.d.).

Building strong support systems represents another critical component for families navigating exceptionalities. Parent support groups offer valuable emotional connection and practical guidance from others with similar experiences (Special Olympics, 2017). These groups can reduce isolation

while providing opportunities to share resources and strategies. Educational advocacy becomes an essential skill as parents learn to navigate complex educational systems and ensure appropriate accommodations for their children (American University, 2020). Within the family unit, parents must balance attention among siblings while fostering a collective family identity that incorporates the child with special needs as an integral family member (Greater Good Berkeley, 2019)

Daily living with a child with exceptionalities benefits from structured routines that provide predictability and security (LinkedIn, 2023). These routines help children understand expectations and reduce anxiety around transitions. Activities that promote independence—such as cooking, self-care tasks, and age-appropriate chores—build confidence and essential life skills when broken down into manageable steps (Inclusive Teach, 2020). Physical activity opportunities must be thoughtfully designed with both universal and tailored approaches to ensure equitable access (ACSM, 2025). Throughout this challenging journey, parental self-care remains paramount; parents must prioritize their own physical and mental wellbeing to sustain the energy and patience required for effective caregiving.

This section gives an overview of various circumstances for parenting children with special needs.

AUTISM SPECTRUM DISORDER

AUTISM SPECTRUM DISORDER

Autism Spectrum Disorder (ASD) is a neurodevelopmental condition characterized by significant disturbances in social interaction, communication, and repetitive patterns of behavior or interests. These symptoms appear early in life and can cause serious impairments in functioning. The term “spectrum” reflects the wide range of severity and symptoms among individuals with ASD.

Parenting a child with Autism Spectrum Disorder (ASD) requires a supportive and structured environment. Children with ASD often exhibit significant disturbances in social interaction, communication, and repetitive behaviors, which can present challenges in daily life (American Psychiatric Association, 2013). Early intervention is crucial, and evidence-based treatments focus on behavioral therapies and educational support. ASD is not the same as intellectual disability, although these conditions can co-occur (American Psychiatric Association, 2013). The prevalence of ASD has increased over the years, with current estimates indicating that about 1 in 36 children in the US are affected (Centers for Disease Control and Prevention, 2020). The disorder is more common in boys than girls, with a ratio of approximately 4:1 (Centers for Disease Control and Prevention, 2020). Parents should seek resources from organizations like the Autism Society and Autism Speaks (provided below), which offer guidance on managing ASD symptoms and advocating for their child’s needs. It’s essential to maintain open communication with healthcare providers and educators to ensure comprehensive support. By understanding and adapting to their child’s unique needs, parents can help create a nurturing environment that fosters growth and development.

Symptoms of ASD

Children with this disorder show signs of significant disturbances in three main areas: (a) deficits in social interaction, (b) deficits in communication, and (c) repetitive patterns of behavior or interests. These disturbances appear early in life and cause serious impairments in functioning (APA, 2022). The child with autism spectrum disorder might exhibit deficits in social interaction by not initiating conversations with other children or turning their head away when spoken to. These children do not make eye contact with others and seem to prefer playing alone rather than with others. In a certain sense, it is almost as though these individuals live in a personal and isolated social world others are simply not privy to or able to penetrate. Communication deficits can range from a complete lack of speech, to one word responses (e.g., saying “Yes” or “No” when replying to questions or statements that require additional elaboration), to echoed speech (e.g., parroting what another person says, either immediately or several hours or even days later), to difficulty maintaining a conversation because of an inability to reciprocate others’ comments. These deficits can also include problems in using and understanding nonverbal cues (e.g., facial expressions, gestures, and postures) that facilitate normal communication.



Figure 6. Dr. Temple Grandin, an advocate for individuals with autism.

Repetitive patterns of behavior or interests can be exhibited a number of ways. The child might engage in stereotyped, repetitive movements (rocking, head-banging, or repeatedly dropping an object and then picking it up), or she might show great distress at small changes in routine or the environment. For example, the child might throw a temper tantrum if an object is not in its proper place or if a regularly-scheduled activity is rescheduled. In some cases, the person with autism spectrum disorder might show highly restricted and fixated interests that appear to be abnormal in their intensity. For instance, the child might learn and memorize every detail about something even though doing so serves no apparent purpose. Importantly, autism spectrum disorder is not the same thing as intellectual disability, although these two conditions can occur

together. The DSM-5 specifies that the symptoms of autism spectrum disorder are not caused or explained by intellectual disability.

The qualifier “spectrum” in autism spectrum disorder is used to indicate that individuals with the disorder can show a range, or spectrum, of symptoms that vary in their magnitude and severity: Some severe, others less severe. The DSM-5 introduced severity levels for ASD, ranging from Level 1 (requiring support) to Level 3 (requiring very substantial support), which helps in creating more personalized support plans based on the specific needs of the individual (American Psychiatric Association, 2022). Some individuals with autism spectrum disorder, particularly those with better language and intellectual skills, can live and work independently as adults. However, most do not because the symptoms remain sufficient to cause serious impairment in many realms of life.

The DSM-5-TR, released in 2022, emphasized the need to consider cultural and contextual factors when diagnosing ASD, highlighting that ASD can present differently in females and stressing the importance of recognizing these differences to avoid underdiagnosis or misdiagnosis in girls and women (American Psychiatric Association, 2022). Autism, Asperger’s syndrome, and childhood disintegrative disorder are no longer considered distinct diagnoses, and medical or genetic disorders that may be associated with ASD, such as Rett’s syndrome, are identified only as specifiers of the disorder.

Prevalence, Early Detection, & Possible Causes

Over the past two decades, the prevalence of ASD has increased significantly. In the US, ASD affects approximately 1 in 36 children aged 8 years (Centers for Disease Control and Prevention, 2020). This rise is attributed to improved diagnostic practices, increased awareness, and expanded definitions of ASD. Recent studies indicate that diagnosis rates have increased more rapidly among

young adults, females, and certain racial and ethnic minority groups compared to other demographics.

Understanding the causes of Autism Spectrum Disorder (ASD) is complex and involves both genetic and environmental factors. Here's a summary of what is currently known:

- **Genetic Influence:** ASD is strongly influenced by genetics, with over 100 genes associated with the disorder (American Psychiatric Association, 2013; National Institute of Environmental Health Sciences, 2025). Twin studies show a high concordance rate for identical twins, indicating a significant genetic component (Autism Genome Project Consortium, 2007).
- **Genetic Variations:** Both rare mutations and common genetic variations contribute to ASD risk (Autism Speaks, 2025).
- **Prenatal Exposures:** Factors such as prenatal exposure to certain chemicals (e.g., valproic acid), air pollution, and maternal infections during pregnancy may increase the risk of ASD (Autism Speaks, 2025; National Institute of Environmental Health Sciences, 2025).
- **Parental Age:** Advanced parental age, particularly paternal age, has been linked to a higher risk of ASD (Autism Speaks, 2025; National Institute of Environmental Health Sciences, 2025).
- **Birth Complications:** Premature birth, low birth weight, and complications during delivery may also be associated with ASD (National Institute of Environmental Health Sciences, 2025).
- **Vaccines:** There is *no scientific evidence* linking vaccines to the development of ASD (Centers for Disease Control and Prevention, 2024; DeStefano et al., 2013). Indeed, a study compared the vaccination histories of 256 children with autism spectrum disorder with that of 752 control children across three time periods during their first two years of life (birth to 3 months, birth to 7 months, and birth to 2 years) (DeStafano et al, 2013). At the time of the study, the children were between 6 and 13 years old, and their prior vaccination records were obtained. Because vaccines contain immunogens (substances that fight infections), the investigators examined medical records to see how many immunogens children received to determine if those children who received more immunogens were at greater risk for developing autism spectrum disorder. The results of this study clearly demonstrated that the quantity of immunogens from vaccines received during the first two years of life were **not at all** related to the development of autism spectrum disorder.
- **Parenting Style:** ASD is not caused by parenting style or mental health disorders; it is a neurological condition (Autism Speaks, 2025).

Parenting a child with ASD

Recent research has focused on early detection and intervention, with advancements in using artificial intelligence and brain biomarkers to identify autism risk at younger ages (American Psychological Association, 2023). AI systems are being developed to diagnose ASD more accurately and earlier in life. For instance, a new AI system can diagnose children between 24 and 48 months old with an accuracy rate of 98.5% by analyzing specialized brain MRIs (Inside Precision Medicine, 2023). The diffusion tensor MRI (DT-MRI) detects how water travels along white matter tracts in

the brain and thus indicates the level of connectivity between brain regions. The team's machine learning algorithm compares the marker patterns in the brains of children with autism to those of the normally developed brains. Brain biomarkers, including those derived from neuroimaging techniques like functional MRI (fMRI) and diffusion tensor MRI (DT-MRI), are crucial for early detection. These biomarkers help identify abnormal brain connections that contribute to ASD symptoms (Inside Precision Medicine, 2023). By using AI to analyze these biomarkers, researchers can more accurately predict ASD risk and guide early intervention. This technology identifies deviations in brain connectivity patterns that are associated with ASD symptoms, such as impaired social communication and repetitive behaviors.

Reputable Resources for Autism Support:

- **Autism Society**
[Website](#)
Provides resources, advocacy, and support for individuals with autism and their families.
- **Autism Speaks**
[Website](#)
Offers information on autism research, advocacy, and family services.
- **Centers for Disease Control and Prevention (CDC) – Autism**
[Website](#)
Provides data, statistics, and resources on autism diagnosis and management.
- **National Institute of Mental Health (NIMH) – Autism**
[Website](#)
Offers updates on autism research and treatment options.
- **Autism Self Advocacy Network (ASAN)**
[Website](#)
Advocates for the rights and inclusion of autistic individuals.
- **Raising Children**
[Website](#)
Shares parenting information for parenting a child with ASD.
- **American Psychological Association (APA) – Autism**
[Website](#)
Offers updates on autism research and treatment options.

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INTELLECTUAL EXCEPTIONALITIES

INTELLECTUAL EXCEPTIONALITIES

How are individuals placed as gifted, or having an intellectual developmental disorder (disability)? A measure of intelligence is an IQ score, intelligence quotient score. It is a measurement of intelligence based on a standardized test that is distributed in the population in the form of a Normal Distribution (or bell curve), which is the pattern of scores usually observed in a variable that clusters around its average. In a normal distribution, the bulk of the scores fall toward the middle, with many fewer scores falling at the extremes. The normal distribution of intelligence shows that on IQ tests, as well as on most other measures, the majority of people cluster around the average (in this case, where $IQ = 100$), and fewer are either very smart or very dull (see Figure below). Because the standard deviation of an IQ test is about 15, this means that about 2% of people score above an IQ of 130, often considered the threshold for giftedness, and about the same percentage score below an IQ of 70, often being considered the threshold for an intellectual disability, now called an intellectual developmental disorder. Giftedness is generally defined by an IQ score of 130 or higher (Terman & Oden, 1959). Gifted individuals often excel academically and professionally, though they may face unique social challenges (Lubinski & Benbow, 2006).

Although the figure below presents a single distribution, the actual IQ distribution varies by sex such that the distribution for men is more spread out than is the distribution for women. These sex differences mean that about 20% more men than women fall in the extreme (very smart or very dull) ends of the distribution (Johnson et al, 2009). For example, boys are about five times more likely to be diagnosed with the reading disability dyslexia than are girls, and are also more likely to be classified as having an intellectual developmental disorder. However, boys are also about 20% more highly represented in the upper end of the IQ distribution (Harper, 2009).

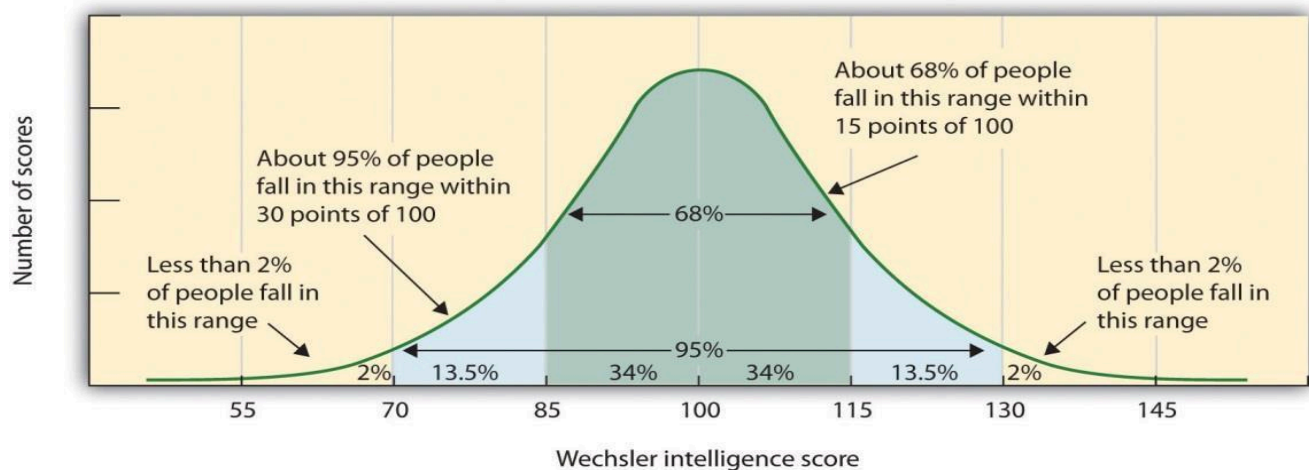


Figure. Distribution of IQ Scores in the General Population The normal distribution of IQ scores in the general population shows that most people have about average intelligence, while very few have extremely high or extremely low intelligence. One end of the distribution of intelligence scores is defined by people with very low IQ.

Parenting Children with Exceptionalities

Evaluation and diagnosis can be the first step in helping provide children with disabilities the type of instruction and resources that will benefit them educationally, but diagnosis and labeling also have social implications. It is important to consider that children can be misdiagnosed and that once a child has received a diagnostic label, the child, teachers, and family members may tend to interpret actions of the child through that label. The label can also influence the child's self-concept. Consider, for example, a child who is misdiagnosed as learning disabled. That child may expect to have difficulties in school, lack confidence, and because of these expectations experience trouble. This self-fulfilling prophecy calls our attention to the power that labels can have whether or not they are accurately applied. It is also important to consider that children's difficulties can change over time; a child who has problems in school may improve later or may live under circumstances as an adult where the problem (such as a delay in math skills or reading skills) is no longer relevant. That person, however, will still have a label as learning disabled. It should be recognized that the distinction between abnormal and normal behavior is not always clear; some abnormal behavior in children is fairly common.

Parenting children with exceptionalities, whether they have intellectual disabilities or are gifted, requires a tailored approach to meet their unique needs. Parents should advocate for their child's rights and ensure they receive appropriate educational and social support. Organizations like PACER provide resources to help families navigate educational services (PACER, n.d.).

- **Academic Environment:** Finding the right academic environment is crucial. Parents should seek programs specifically designed for gifted children to ensure they are challenged appropriately (Davidson Institute, n.d.).
- **Social-Emotional Skills:** Developing strong social and emotional skills is vital for gifted children. Parents can foster these skills by creating opportunities for social interaction and emotional regulation (Davidson Institute, n.d.).

- **Advocacy:** Parents must advocate for their child's educational needs, ensuring they receive appropriate challenges and support (National Association for Gifted Children, n.d.).

Intellectual developmental disorders

Intellectual disabilities, now referred to as **intellectual developmental disorders**, are characterized by significant limitations in both intellectual functioning (typically defined by an IQ score below 70) and adaptive behavior, which covers a range of everyday social and practical skills (American Psychiatric Association, 2013). Approximately 1% of the U.S. population meets the criteria for this condition, with males being more frequently diagnosed (Greenspan et al., 2001). An intellectual developmental disorder is assessed based on cognitive capacity (IQ) and adaptive functioning. The severity of the disability is based on adaptive functioning, or how well the person handles everyday life tasks. About 1% of the United States population, most of them males, fulfill the criteria for intellectual developmental disorder, but some children who are given this diagnosis lose the classification as they get older and better learn to function in society. A particular vulnerability of people who have a low IQ is that they may be taken advantage of by others, and this is an important aspect of the definition of intellectual developmental disorder (Greenspan et al, 2001).

One cause of intellectual developmental disorder is **Down syndrome**, a chromosomal disorder caused by the presence of all or part of an extra 21st chromosome. The incidence of Down syndrome is estimated at approximately 1 per 700 births, and the prevalence increases as the mother's age increases (CDC, 2022). People with Down syndrome typically exhibit a distinctive pattern of physical features, including a flat nose, upwardly slanted eyes, a protruding tongue, and a short neck.

Fortunately, societal attitudes toward individuals with intellectual disabilities have changed over the past decades. We no longer use terms such as "retarded," "moron," "idiot," or "imbecile" to describe people with intellectual deficits, although these were the official psychological terms used to describe degrees of what was referred to as mental retardation in the past. Laws such as the Americans with Disabilities Act (ADA) have made it illegal to discriminate on the basis of mental and physical disability, and there has been a trend to bring people with mental disabilities out of institutions and into our workplaces and schools.

Giftedness

Giftedness refers to children who have an IQ of 130 or higher. Having extremely high IQ is clearly less of a problem than having extremely low IQ, but there may also be challenges to being particularly smart. The Terman Study helped establish that gifted children are generally normal, well-adjusted individuals, challenging the stereotype of the socially awkward genius. Lewis Terman's Genetic Studies of Genius, later known as the Terman Study of the Gifted, stands as the oldest and longest-running longitudinal study in psychology. Beginning in 1921 at Stanford University, Terman selected approximately 1,500 California children with IQs above 135 (the top 1%) to explore how exceptional intelligence influenced life outcomes. These participants, affectionately nicknamed "Termites," were studied to disprove the then-prevalent belief that gifted children were sickly, socially inept, and poorly adjusted. Based on extensive data collected between 1921-1922, Terman concluded that gifted children suffered no more health problems than average (except slightly more myopia), were typically social and well-adjusted, performed better academically, and were even taller than their peers. Despite their uniformly high intelligence, the

Termites exhibited considerable variation in career outcomes. The study continued for seven decades.

Many gifted children experience asynchronous development—their intellectual abilities may be far ahead of their social-emotional development. This can create difficulties in peer relationships, as they may be “college age intellectually but still 12 in terms of their social skills,” making it challenging to find friends who share their interests or to express themselves appropriately in group settings. Gifted children may develop social-emotional difficulties due to boredom and non-challenging curriculum.

Parenting gifted and talented (G/T) children presents unique challenges that differ significantly from raising typically developing children. Parents of gifted children often experience heightened stress and anxiety regarding their child’s development and education, particularly when the child’s abilities differ from their own. Research indicates that ecosystem moderators—including parents, family, and school environment—are critical psychosocial variables in transforming a child’s ability into extraordinary achievement (Papadopoulos, 2021). Authoritative parenting styles that provide autonomy and self-motivation have been shown to significantly determine G/T children’s personal growth, while authoritarian parenting negatively impacts children’s well-being and mental health¹.

A common challenge for parents of gifted children is underachievement, which often occurs when children become disengaged because schoolwork is beneath their abilities or disconnected from real-world issues. Signs of underachievement include lack of interest in achieving good grades despite demonstrated ability, resistance to repetitive work, and authority struggles with teachers. Effective strategies include connecting schoolwork to the child’s passions, implementing approaches that have worked previously, and facilitating self-advocacy. Additionally, parents should consider yearly assessments of their child’s educational environment, explore acceleration options, and provide opportunities for their child to meet like-minded peers through gifted programs.

Resources for Children who have Exceptionalities

- The Office for Civil Rights provides this article on [protecting children who have special needs](#).
- Learn about children who are academically-gifted, [by reading this article on academically gifted children](#) and [giftedness more generally](#).
 - The National Association for Gifted Children (NAGC) [Family Tips Sheets](#)
 - [Download Gifted 101 \[pdf\]](#)
 - [Raising Children’s video resources for parenting gifted children ages 5 to 15](#)
- Children who have developmental variations: [1 in 6 children in the U.S. have one or more developmental disabilities or delays \[pdf\]](#)
- The CDC has information about [children who have birth defects](#)

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PHYSICAL DISABILITIES & SENSORY IMPAIRMENTS

PARENTING CHILDREN WITH PHYSICAL DISABILITIES AND SENSORY IMPAIRMENTS

Parenting a child with physical disabilities or sensory impairments presents unique challenges that extend beyond typical parenting experiences. These children may have mobility limitations, visual or hearing impairments, or sensory processing difficulties that affect how they experience and interact with the world. Research indicates that parents of children with physical disabilities experience significantly higher stress levels than other parents (Savari et al, 2023). However, with appropriate support strategies and resources, parents can help their children thrive while maintaining their own well-being.

Understanding Physical Disabilities and Sensory Impairments

Physical disabilities may include conditions that affect mobility, such as cerebral palsy, spina bifida, or muscular dystrophy, while sensory impairments involve vision or hearing loss or sensory processing disorders. Sensory processing difficulties occur when a child's brain has difficulty interpreting and responding to sensory input, such as sound, touch, or movement. These challenges can significantly impact a child's daily functioning, affecting their behavior, emotions, and ability to engage socially or academically. Research shows that up to 1 in 6 children experiences sensory processing difficulties, and approximately 90-95% of children with Autism Spectrum Disorder experience sensory processing issues (Elsayed et al, 2022).

Cerebral Palsy

Cerebral palsy (CP) is the most common childhood motor disability in the U.S., affecting approximately 1 in 323 children (cerebralpalsy.org). It results from damage to the brain before, during, or after birth, with most cases being congenital (present at birth). CP does not worsen over time, though symptoms may change as a child grows. The most common type is spastic cerebral palsy, affecting 75-85% of people with CP. Physical symptoms include muscle stiffness, poor coordination, difficulties swallowing or sucking, drooling, involuntary movements, and problems with balance. Neurological symptoms may include hydrocephalus (fluid buildup in the brain), behavioral problems, delayed motor skill development, speech difficulties, and sensory impairments.

Children with CP often show signs of motor delay before age two, though formal diagnosis typically occurs around ages 2-3. Associated conditions include seizures, vision and hearing problems, learning disorders, respiratory issues, gastrointestinal problems, and bone abnormalities such as scoliosis and hip dysplasia.

Spina Bifida

Spina bifida is a birth defect where a baby's backbone (spine) does not form normally before birth⁵.

There are several types: Spina bifida occulta: A gap in the spine's bones without protrusion of the spinal cord or meninges. Another type is meningocele: a sac containing spinal fluid pushes through the gap in the spine. Another type is myelomeningocele: this is the most serious type, where a sac containing meninges, spinal fluid, and part of the spinal cord pushes through the gap in the spine and skin.

Symptoms depend on the type and location on the spine. Some children have few problems, while others experience weakness, loss of bladder control, or paralysis. Complications may include hydrocephalus, Chiari malformation, meningitis, tethered spinal cord, sleep-disordered breathing, skin problems, and latex allergies

Muscular Dystrophy

Muscular dystrophy is a genetic disorder that weakens muscles over time. The two most common types are: Duchenne and Becker. Duchenne muscular dystrophy (DMD): The most common and severe form, affecting boys more often than girls. Symptoms typically begin between ages 2-3, with muscle weakness affecting walking and climbing stairs. Most boys need a wheelchair by age 12, and breathing muscles and heart muscle may weaken in the teen years. Becker muscular dystrophy: Similar to Duchenne but progresses more slowly, with symptoms usually beginning during the teen years.

Early symptoms include trouble climbing stairs, clumsiness, frequent tripping and falling, toe walking, leg pain, weak muscles, and large calves. As the condition progresses, children may develop scoliosis, heart problems, breathing difficulties, and eventually lose the ability to walk.

Sensory Processing Disorders

Sensory processing disorder (SPD) involves problems processing information from the senses, making it difficult to respond appropriately to sensory input. Children with SPD may have one or more senses that either react too much (hypersensitive) or too little (hyposensitive) to stimulation.

Signs of hypersensitivity include:

- Dislike of certain textures in fabrics, foods, or grooming products
- Discomfort with normal sounds, lights, or temperatures
- Withdrawal when touched
- Oversensitivity to odors
- Discomfort with certain movements like swinging or sliding

Signs of hyposensitivity include:

- Sluggishness and lack of responsiveness
- Constant motion or sensory-seeking behaviors
- Fidgeting and impulsiveness
- Craving loud, disturbing noises

Children may also show sensorimotor problems (slow, uncoordinated movements or poor handwriting) and sensory discrimination problems (frequently dropping things).

SPD is often seen in children with autism spectrum disorder, ADHD, and other developmental disabilities, but can also occur independently. The exact cause is unknown, though research suggests it may be inherited and related to irregular brain function.

Parenting strategies

Establishing Predictable Routines

Having predictable routines can make any child feel safe and secure but is especially important for children with disabilities². Aim to feed, bathe, and play with your child at around the same time each day whenever possible. Visual and verbal cues can let children know what is coming up and how they should move from one activity to another. Additionally, if a child is over- or under-responsive to sensory input, regular sensory breaks can help them stay balanced. Check that there is plenty of time for transitions between activities for children with mobility or physical challenges.

Working with Professionals

Collaborate with healthcare providers, therapists, and educators to ensure comprehensive support for your child. Talk with your child and their family about the child's unique strengths, preferences, and needs, including areas they need extra help in and the best methods of communication. Professionals can help child develop self-regulation skills by teaching calming strategies like deep breathing, counting to calm down, or using sensory tools like stress balls or fidget devices. Work with occupational therapists to develop a personalized "sensory diet" – a tailored schedule of sensory activities that help your child maintain an optimal level of arousal and attention throughout the day. Working together with various health professionals can lead to a shared understanding of the child, their goals, and strengths-based strategies that are consistent across other environments like home and the community.

Managing Family Dynamics

When raising a child with a disability, it's important to consider the needs of other family members as well. Set aside time for one-on-one engagement with each of your other children to give them your undivided attention. Encourage open dialogue where children can express any issues they have, including feelings of jealousy or frustration with the amount of special attention their sibling with a disability receives.

Resources

- Helpguide.org offers [guidance for parenting child with disability](#) [PDF]
- [Parent to Parent USA](#) is a group that matches each parent with a fellow parent who has a child with the same special healthcare need, disability or mental health concern, allowing each parent or family to have a contact for sharing information, receiving support and creating new friendships.
- With the mission that each child, youth, and young adult with all disabilities — along with their families — can reach their highest potential, [PACER](#) is a comprehensive "parent training

and information center.”

- [The M.O.R.G.A.N. Project](#) stands for Making Opportunities Reality Granting Assistance Nationwide. This group, established by parents Robert and Kristen Malfara, supports families in their journey of raising a child with special needs, be that child biological, adopted or within the foster care system. In addition to having a large library of resources and information on their website, the group also assists families with travel expenses for medical treatments and gifts of medical equipment that aren’t covered by insurance, such as wheelchairs.
- The [Federation for Children with Special Needs](#) is a national organization that provides information, support and assistance to parents of children with disabilities, their professional partners and their communities.
- [Family Voices](#), which, according to the Parenting Advocacy Network, “aims to achieve family-centered care” for all children with special needs. Family Voices provides families with the “tools to make informed decisions” about healthcare and education, build partnerships between families and their service providers and serve as a trusted resource on healthcare. They also help families learn to advocate for improved policies to best serve children with special needs.
- Disability Resources on the Internet. This comprehensive guide from Disability Resources Monthly includes a link on Parents with Disabilities. www.disabilityresources.org

Cerebral Palsy Resources

- **CP NOW Foundation:** Provides comprehensive information about diagnosis, treatment decisions, and resources for daily life.
- **Child Neurology Foundation — Family Support and Empowerment Program:** Offers support to parents and caregivers of children with neurologic diagnoses.
- **Child Neurology Foundation — Respite Care Notebook:** Provides printable forms for families to use for respite care.
- **United Cerebral Palsy (UCP):** A national organization with state and local chapters offering support services, advocacy, and resources.
- **Mommies of Miracles:** A large online support group for mothers of children with disabilities including cerebral palsy.
- **The Weinberg Family Cerebral Palsy Center:** Provides research, patient care, and educational resources.

Spina Bifida Resources

- **Spina Bifida Association:** Offers comprehensive guidelines for care throughout the lifespan and various educational materials.
- **Shine Charity:** Provides resources including “What is Spina Bifida?” information sheets, New Parents Pack, and the “Spina Bifida and Me” Card.

- **Children’s National Hospital Spina Bifida Program:** Offers resources including school guidelines, new patient packets, and information on common medications.
- **Bella Bear Books:** Children’s books that help explain spina bifida through engaging stories.

Muscular Dystrophy Resources

- **Muscular Dystrophy Association (MDA):** Provides healthcare support, research funding, summer camps, and educational resources.
- **Parent Project Muscular Dystrophy (PPMD):** Focuses on Duchenne muscular dystrophy with care checklists and resources for families.
- **Muscular Dystrophy Family Foundation:** Offers financial assistance and support services.
- **CureDuchenne:** Provides resources to bridge promising research from lab to human trials.
- **Myotonic Dystrophy Foundation:** National advocacy organization for people with myotonic dystrophy.

Sensory Processing Disorder Resources

- **SPIRAL Foundation:** Offers a free “Guide to Sensory Integration for Parents” in multiple languages and educational presentations.
- **Lamp Post Therapy:** Provides resources for parents of children with sensory processing disorders, including equipment suppliers and parenting workshops.
- **Southpaw Enterprises, Abilitations, Therapro:** Suppliers of sensory equipment and tools.
- **Weighted Wearables:** Provides specialized clothing and accessories for sensory needs.
- **Joyful Parenting Workshop:** Helps parents develop specialized skills for children with sensory processing disorders.

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LEARNING DISABILITIES

Learning Disabilities

A **Learning Disability** (or LD) is a specific impairment of academic learning that interferes with a specific aspect of schoolwork and that reduces a student's academic performance significantly. An LD shows itself as a major discrepancy between a student's ability and some feature of achievement: The student may be delayed in reading, writing, listening, speaking, or doing mathematics, but not in all of these at once. A learning problem is not considered a learning disability if it stems from physical, sensory, or motor handicaps, or from generalized intellectual impairment. It is also not an LD if the learning problem really reflects the challenges of learning English as a second language. Genuine LDs are the learning problems left over after these other possibilities are accounted for or excluded. Typically, a student with an LD has not been helped by teachers' ordinary efforts to assist the student when he or she falls behind academically, though what counts as an "ordinary effort", of course, differs among teachers, schools, and students. Most importantly, though, an LD relates to a fairly specific area of academic learning. A student may be able to read and compute well enough, for example, but not be able to write. LDs are by far the most common form of special educational need, accounting for half of all students with special needs in the United States and anywhere from 5 to 20 percent of all students, depending on how the numbers are estimated (Ysseldyke & Bielinski, 2002). Students with LDs are so common, in fact, that most teachers regularly encounter at least one per class in any given school year, regardless of the grade level they teach.

These difficulties are identified in school because this is when children's academic abilities are being tested, compared, and measured. Consequently, once academic testing is no longer essential in that person's life (as when they are working rather than going to school) these disabilities may no longer be noticed or relevant, depending on the person's job and the extent of the disability.

Learning disabilities encompass several distinct conditions:

- **Dyslexia:** Difficulties with reading, word recognition, and decoding
- **Dyscalculia:** Challenges with understanding mathematical concepts and operations
- **Dysgraphia:** Problems with writing, handwriting, spelling, and organizing thoughts on paper
- **Language Processing Disorder:** Difficulty understanding and using spoken or written language

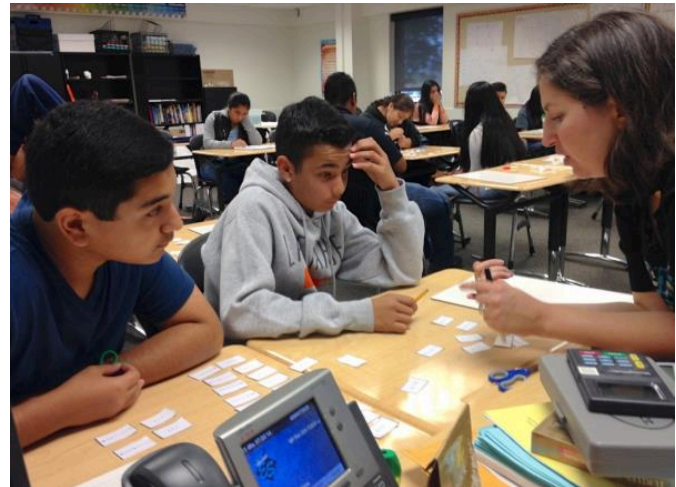


Figure. Two students receive assistance in the classroom.

- **Non-Verbal Learning Disabilities (NVLD):** Affects social skills, spatial awareness, and visual-motor processing
- **Executive Functioning Disorder:** Challenges with planning, organization, time management, and self-regulation.

Dyslexia is one of the most commonly diagnosed disabilities and involves having difficulty in the area of reading. This diagnosis is used for a number of reading difficulties. Common characteristics are difficulty with phonological processing, which includes the manipulation of sounds, spelling, and rapid visual/verbal processing. Additionally, the child may reverse letters, have difficulty reading from left to right, or may have problems associating letters with sounds. It appears to be rooted in neurological problems involving the parts of the brain active in recognizing letters, verbally responding, or being able to manipulate sounds. Recent studies have identified a number of genes that are linked to developing dyslexia (NINDS, 2016). Treatment typically involves altering teaching methods to accommodate the person's particular problematic area.

Learning disabilities can significantly affect students in several ways:

1. **Difficulty with transitions:** Students may struggle with organizing materials, managing time, or sustaining attention during class transitions.
2. **Challenges keeping up with work:** Students may require more time to complete assignments and often have incomplete classwork.
3. **Decreased self-esteem:** Repeated academic struggles despite increased effort can negatively impact a student's self-worth and confidence.
4. **Barriers to academic success:** Students face obstacles due to lack of proper funding, intensive intervention, accommodations, and resources.

Parenting a Child with a Learning Disability

When parenting children with learning disabilities, traditional approaches have focused on mitigating the negative effects of the disability to help children reach grade-level performance. However, a more effective approach recognizes that these children have unique strengths alongside their challenges. Parents should work closely with educators to identify specific areas of difficulty and develop targeted interventions that address these challenges while building on the child's strengths.

Promoting self-awareness is crucial for children with learning disabilities as they mature. Parents should encourage open communication about frustrations and concerns in one-on-one sessions and discuss coping tools and strategies. Providing these children with mentors who have successfully navigated similar challenges can help model self-aware strategies for optimal lifelong learning. With the right encouragement and support, children with learning disabilities can develop effective compensatory strategies and become confident, successful learners who understand how to advocate for their needs in educational and professional settings.

Here are some specific strategies to support their development and build their confidence:

Create a Supportive Environment

- Establish a structured, predictable environment with clear routines
- Emphasize effort and progress rather than just achievements
- Provide consistent positive reinforcement and celebrate small successes
- Identify and encourage your child's strengths and interests
- Break tasks into manageable steps with clear, concise instructions

Effective Communication and Discipline

- Set clear rules and predictable consequences using communication methods appropriate for your child's disability
- Be consistent with rules and consequences to foster predictability
- Offer abundant praise to encourage good behavior
- Help your child understand their diagnosis and learning profile
- Teach them language to describe their strengths and challenges

Support Social Development

- Coach children through social situations and provide practice in anticipating social scenarios
- Role-play appropriate responses to common interactions
- Help them learn to read facial expressions, gestures, and appropriate conversational topics

Collaborate with Educators

- Maintain open communication between parents, teachers, and healthcare providers
- Develop a shared understanding of your child's needs and goals
- Jointly create and monitor progress plans
- Utilize available resources like Individualized Education Programs (IEPs), assistive technology, and specialized educational programs

Self-Care for Parents

- Find support for yourself to balance your energy output with caring input
- Remember that your child's grades do not reflect your parenting abilities
- Treat each school year as a fresh start
- Incorporate humor and laughter to relieve stress
- Model healthy behaviors and self-care for your child

With appropriate support at home and school, children with learning disabilities can develop effective coping strategies, build on their strengths, and achieve success in their academic and personal lives.

Legislation for Learning Disabilities

Since the 1970s political and social attitudes have moved increasingly toward including people with disabilities into a wide variety of “regular” activities. In the United States, the shift is illustrated clearly in the Federal legislation that was enacted during this time. Three major laws were passed that guaranteed the rights of persons with disabilities, and of children and students with disabilities in particular. The third law has had the biggest impact on education.

Rehabilitation Act of 1973, Section 504

This law, the first of its kind, required that individuals with disabilities be accommodated in any program or activity that receives Federal funding (Public Law 93-112, 87 Stat. 394). Although this law was not intended specifically for education, in practice it has protected students’ rights in some extra-curricular activities (for older students) and in some child care or after-school care programs (for younger students). If those programs receive Federal funding of any kind, the programs are not allowed to exclude children or youths with disabilities, and they have to find reasonable ways to accommodate the individuals’ disabilities.

Americans with Disabilities Act of 1990 (or ADA)

This legislation also prohibited discrimination on the basis of disability, just as Section 504 of the Rehabilitation Act had done (Public Law 101-336, 104 Stat. 327). Although the ADA also applies to all people (not just to students), its provisions are more specific and “stronger” than those of Section 504. In particular, ADA extends to all employment and jobs, not just those receiving Federal funding. It also specifically requires accommodations to be made in public facilities such as with buses, restrooms, and telephones. ADA legislation is therefore responsible for some of the “minor” renovations in schools that you may have noticed in recent years, like wheelchair-accessible doors, ramps, and restrooms, and public telephones with volume controls.

Individuals with Disabilities Education Act (or IDEA)

As its name implied this legislation was more focused on education than either Section 504 or ADA. It was first passed in 1975 and has been amended several times since, including most recently in 2004 (Public Law 108-446, 118 Stat. 2647). In its current form, the law guarantees the following rights related to education for anyone with a disability from birth to age 21. The first two influence schooling in general, but the last three affect the work of classroom teachers rather directly:

- Free, appropriate education: An individual or an individual’s family should not have to pay for education simply because the individual has a disability, and the educational program should be truly educational; i.e., not merely care-taking or babysitting the person.
- Due process: In case of disagreements between an individual with a disability and the schools or other professionals, there must be procedures for resolving the disagreements that are fair and accessible to all parties, including the person himself or herself or the person’s representative.
- Fair evaluation of performance in spite of disability: Tests or other evaluations should not assume test-taking skills that a person with a disability cannot reasonably be expected to have, such as holding a pencil, hearing or seeing questions, working quickly, or understanding and

speaking orally. Evaluation procedures should be modified to allow for these differences. This provision of the law applies both to evaluations made by teachers and to school-wide or “high-stakes” testing programs.

- Education in the “least restrictive environment”: Education for someone with a disability should provide as many educational opportunities and options for the person as possible, both in the short term and in the long term. In practice, this requirement has meant including students in regular classrooms and school activities as much as possible, though often not totally.
- An individualized educational program: Given that every disability is unique, instructional planning for a person with a disability should be unique or individualized as well. In practice, this provision has led to classroom teachers planning individualized programs jointly with other professionals (like reading specialists, psychologists, or medical personnel) as part of a team.

Twice Exceptional Children

Twice exceptional children (2e) are both gifted and have a learning disability, such as dyslexia. These students require a “dually differentiated program” that addresses both their giftedness and learning disabilities (National Association for Gifted Children, n.d.). Many highly gifted children also have special needs such as learning disabilities, ADHD, Asperger Syndrome, or sensory integration disorders, making them “twice-exceptional.” This presents significant challenges in both identification and educational planning, as gifted children often use their giftedness to partially compensate for their special needs, making both conditions harder to discover. Twice-exceptional children may demonstrate inconsistent performance—able to complete tasks when rested or engaged in preferred subjects but struggling when tired or disinterested. They may also learn that performing well can be problematic when they’re subsequently held to standards they can’t consistently maintain.

When parenting twice-exceptional children, it’s vital to focus on developing their gifts rather than solely addressing their disabilities. Parents should tap into the child’s strengths, passions, and interests while creating activities that circumvent weaknesses. Signs that underachievement stems from twice-exceptionality include large achievement gaps between subjects, avoidance or defensiveness about specific subjects, and organizational challenges affecting grades. Effective strategies include using a strengths-based approach, establishing appropriate accommodations through IEPs or 504 plans, understanding the child’s learning profile through comprehensive assessment, and supporting the development of executive functioning skills.

Resources for Children who have LDs

- The Office for Civil Rights provides this article on [protecting children who have special needs](#).
- Information on the Individuals with Disabilities Education Act can be found in [government websites](#) and [independent publications](#).
- Children who have developmental variations: [1 in 6 children in the U.S. have one or more developmental disabilities or delays \[pdf\]](#)

- **Center for Parent Information and Resources (CPIR)** www.parentcenterhub.org
CPIR provides a comprehensive hub of information for parents navigating learning disabilities. It offers step-by-step guides on special education, Individualized Education Programs (IEPs), accommodations, and practical tips for supporting children at home and in school. The site also connects families to Parent Training and Information Centers across the U.S., offering direct support and advocacy.
- **LD Online** www.ldonline.org
LD Online is a leading resource for information on learning disabilities and ADHD. It features articles, expert advice, and practical strategies for parents and teachers. The site also offers forums and a community for sharing experiences and support
- **Learning Disabilities Association of America (LDA)** <https://ldaamerica.org>
LDA provides resources, advocacy, and support for parents and individuals with learning disabilities. Their website includes detailed guides on understanding learning disabilities, navigating school systems, legal rights, and connecting with local support groups.
- **Yale Center for Dyslexia and Creativity** www.dyslexia.yale.edu
This center offers research-based information, inspiring stories, and practical resources for parents of children with dyslexia. The website includes guidance on early identification, intervention strategies, and fostering self-esteem in children with dyslexia.
- **HelpGuide: Learning Disabilities** <https://www.helpguide.org>
Description: HelpGuide offers accessible, research-backed advice for parents on supporting children with learning disabilities at home and school. Topics include understanding learning challenges, building self-esteem, and effective communication with educators.
- **Learning Foundations – Free Resources** <https://www.learningfoundations.com/free-resources>
This curated collection includes links to reputable organizations, assistive technology tools, advocacy groups, and recommended books. It's designed to help parents better understand and support their child's learning needs.
- **Wrightslaw** www.wrightslaw.com
Wrightslaw is a trusted source for information about special education law, education advocacy, and children's rights. It provides free articles, legal resources, and advocacy tips to help parents secure appropriate services for their children.

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ATTENTION DEFICIT HYPERACTIVITY DISORDER (ADHD)

ADHD

ADHD is a neurodevelopmental disorder that affects executive functions like focus, organization, and impulse control, while learning disabilities specifically impact academic skills such as reading, writing, or math. A child with **Attention Deficit Hyperactivity Disorder** (ADHD) *shows a constant pattern of inattention and/or hyperactive and impulsive behavior that interferes with normal functioning* (APA, 2022). Some of the signs of inattention include great difficulty with, and avoidance of, tasks that require sustained attention (such as conversations or reading), failure to follow instructions (often resulting in failure to complete schoolwork and other duties), disorganization (difficulty keeping things in order, poor time management, sloppy and messy work), lack of attention to detail, becoming easily distracted, and forgetfulness. Hyperactivity is characterized by excessive movement, and includes fidgeting or squirming, leaving one's seat in situations when remaining seated is expected, having trouble sitting still (e.g., in a restaurant), running about and climbing on things, blurting out responses before another person's question or statement has been completed, difficulty waiting for one's turn for something, and interrupting and intruding on others. Frequently, the hyperactive child comes across as noisy and boisterous. The child's behavior is hasty, impulsive, and seems to occur without much forethought; these characteristics may explain why adolescents and young adults diagnosed with ADHD receive more traffic tickets and have more automobile accidents than do others their age (Thompson et al, 2007).



Figure. Children may be hyperactive or exceptionally quiet when exhibiting signs of ADHD. Symptoms tend to display differently in girls.

ADHD occurs in about 5% of children (APA, 2013). Boys (15%) were more likely to be diagnosed with ADHD than girls (8%) (CDC, 2022); however, such findings might reflect the greater propensity of boys to engage in aggressive and antisocial behavior and thus incur a greater likelihood of being referred to psychological clinics (Barkley, 2006). Children with ADHD face severe academic and social challenges. Compared to their non-ADHD counterparts, children with ADHD have lower grades and standardized test scores and higher rates of expulsion, grade retention, and dropping out (Loe & Feldman, 2007). They also are less well-liked and more often rejected by

their peers (Hoza et al, 2005).

ADHD can persist into adolescence and adulthood (Barkley et al, 2002). A recent study found that 29.3% of adults who had been diagnosed with ADHD decades earlier still showed symptoms

(Barbarese et al, 2013). Somewhat troubling, this study also reported that nearly 81% of those whose ADHD persisted into adulthood had experienced at least one other comorbid disorder, compared to 47% of those whose ADHD did not persist. Additional concerns when an adult has ADHD include Worse educational attainment, lower socioeconomic status, less likely to be employed, more likely to be divorced, and more likely to have non-alcohol-related substance abuse problems (Klein et al, 2012).

Treatment for ADHD

Recommended treatment for ADHD includes behavioral interventions, cognitive behavioral therapy, parent and teacher education, recreational programs, and lifestyle changes, such as getting more sleep (Clay, 2013). For some children medication is prescribed. For an overview of treatments options for a variety of ages, please visit [this link](#) to the the CDC website. Also visit [this site](#) to learn about evidence-based treatment options.

Is the prevalence rate of ADHD increasing?

An estimated 7 million (11.4%) U.S. children aged 3–17 years have ever been diagnosed with ADHD, according to a national survey of parents using data from 2022 (CDC, 2024). In 2022, an additional 1 million U.S. children aged 3-17 years had ever received an ADHD diagnosis compared to 2016 (CDC, 2024). ADHD may be over-diagnosed by doctors who are too quick to medicate children as a behavior treatment. There is also greater awareness of ADHD now than in the past. Nearly everyone has heard of ADHD, and most parents and teachers are aware of its key symptoms. Thus, parents may be quick to take their children to a doctor if they believe their child possesses these symptoms, or teachers may be more likely now than in the past to notice the symptoms and refer the child for evaluation. Further, the use of computers, video games, iPhones, and other electronic devices has become pervasive among children in the early 21st century, and these devices could potentially shorten children's attention spans. Thus, what might seem like inattention to some parents and teachers could simply reflect exposure to too much technology.

Resources for Children who have ADHD

- **Center for Disease Control:** The CDC has information about children with [Attention Deficit/Hyperactivity Disorder \(ADHD\)](#). For a more general overview of children's mental health, [visit this children's mental health webpage from the CDC](#).
- **CDC's National Resource Center on ADHD (NRC)** <https://www.cdc.gov/ncbddd/adhd/nrc.html>
The NRC, funded by the CDC and operated by CHADD, serves as a national clearinghouse for evidence-based information on ADHD. It offers fact sheets, toolkits, and direct support for families, with materials available in multiple languages. These resources are widely recognized for their reliability, evidence-based information, and accessibility, making them excellent starting points for parents and caregivers seeking guidance and support for children with ADHD.
- **CHADD (Children and Adults with Attention-Deficit/Hyperactivity Disorder)** <https://chadd.org/for-parents/adhd-and-school-a-toolkit-for-parents/>

CHADD is a leading nonprofit organization dedicated to supporting people with ADHD. Their parent toolkit includes practical strategies for school success, routines, homework stations, and home-school communication. CHADD offers customizable charts, sample letters for special education services, and information about students' legal rights. The organization also provides local support groups, webinars, and a national conference, making it a central hub for ADHD education and advocacy.

- **ADDitude Magazine – ADHD Resources for Parents** <https://www.additudemag.com/adhd-resources-for-parents-expert-recommendations/>

ADDitude Magazine is a trusted online resource with a vast library of free articles, expert Q&A, webinars, and downloadable guides for parents. Topics cover diagnosis, treatment, school accommodations, parenting strategies, and emotional support. Their webinars feature leading ADHD experts, and the site's active community forums allow parents to connect and share experiences.

- **The Children's Hospital of Philadelphia (CHOP) – ADHD Resources** <https://www.chop.edu/conditions-diseases/attention-deficithyperactivity-disorder-adhd/resources>

CHOP offers a curated set of free ADHD resources for parents, including articles, videos, and practical guides on topics such as executive functioning, school success, and behavior management. The site features expert advice from psychologists and clinicians, as well as information on local support services and advocacy.

- **The REACH Institute – ADHD Awareness Month Resources** <https://thereachinstitute.org/adhd-awareness-month-free-resources-for-parents-caregivers-providers/>

The REACH Institute offers free webinars, articles, and downloadable materials for parents and caregivers. Topics include new ADHD treatments, managing comorbidities, school accommodations (IEPs and 504s), and transitioning to college. Their resources are updated regularly and feature expert-led video content.

- **Children's National Hospital – ADHD & Learning Differences Family Resources** <https://www.childrensnational.org/get-care/departments/adhd-and-learning-differences-program/family-resources>

Children's National provides guides, videos, and handouts for parents, including strategies for organization, behavior management, and school collaboration. The site also links to national organizations, support groups, and expert-led webinars.

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EMOTIONAL AND BEHAVIORAL DISORDERS BEYOND ADHD

EMOTIONAL AND BEHAVIORAL DISORDERS BEYOND ADHD

Emotional and Behavioral Disorders (EBD) are conditions characterized by behavioral or emotional responses that differ significantly from age-appropriate norms, negatively affecting a child's educational performance, social relationships, and personal development. These disorders can manifest in various ways, from disruptive behaviors to withdrawn emotional states. Early identification and intervention are crucial for helping children with EBD develop appropriate coping mechanisms and social skills.

Oppositional Defiant Disorder (ODD)

Oppositional Defiant Disorder is characterized by a persistent pattern of angry mood, defiant behavior, and vindictiveness toward authority figures. Children with ODD often lose their temper, argue with adults, actively defy rules, deliberately annoy others, and blame others for their mistakes or misbehavior (Centers for Disease Control and Prevention, 2024). For a diagnosis, these symptoms must be present for at least six months and cause significant impairment in the child's functioning.

ODD usually starts before 8 years of age but no later than around 12 years. Children with ODD are more likely to act oppositionally around people they know well, such as family members, regular care providers, or teachers. While all children test limits sometimes as part of healthy development, children with ODD show these behaviors more frequently than their peers, and their behavior negatively impacts daily functioning and relationships.

Conduct Disorder (CD)

Conduct Disorder involves a more severe pattern of behavior that violates the basic rights of others or major age-appropriate societal norms. Children with CD exhibit persistent aggressive behavior, destruction of property, deceitfulness, theft, and serious violations of rules. These behaviors are often categorized into four main types: aggression toward people and animals, destruction of property, deceitfulness or theft, and serious rule violations.

Children with CD may break major rules such as skipping school or breaking curfew, show aggression through bullying or cruelty to animals, lie, steal, or intentionally damage others' property (MedicineNet, 2022). CD is more common in boys than girls and can develop into antisocial personality disorder in adulthood if left untreated.

Anxiety Disorders

Anxiety disorders in children involve excessive fear, worry, or anxiety that interferes with daily activities. Common types include generalized anxiety disorder, separation anxiety disorder, social anxiety disorder, and specific phobias. Children with anxiety disorders may experience physical

symptoms such as stomachaches or headaches, have trouble sleeping, avoid certain situations, or face difficulty performing at school or in social settings.

The most common type is panic disorder, characterized by extreme episodes of dread that occur without any type of stimulus or trigger (MedicineNet, 2022). Anxiety disorders often co-occur with other emotional and behavioral disorders and may persist into adulthood without appropriate intervention.

Depression

Childhood depression is more than just sadness; it's a persistent feeling of sadness, hopelessness, and irritability that affects a child's thinking, behavior, and overall well-being. Children with depression may lose interest in activities they once enjoyed, experience changes in appetite or sleep patterns, have low energy, feel worthless or guilty, and have difficulty concentrating.

About 5% of children in the general population suffer from depression at any given point in time, with a higher prevalence among girls (54%) (Ogundele, 2018). Depression in children can lead to academic difficulties, social withdrawal, and in severe cases, thoughts of suicide, making early intervention essential.

Obsessive-Compulsive Disorder (OCD)

OCD in children is characterized by unwanted and intrusive thoughts (obsessions) that lead to repetitive behaviors (compulsions) aimed at reducing anxiety. Common obsessions include fears of contamination, harm, or not having things in a particular order, while compulsions may involve excessive handwashing, checking, counting, or arranging items in a specific way.

Children with OCD may engage in activities such as continual washing and cleaning, repeating mantras or prayers, adhering to rigorous schedules, desiring symmetry and order, repeatedly counting and checking things, or showing excessive worry about germs (MedicineNet, 2022). OCD can be debilitating and may lead to additional issues such as bipolar illness, depression, and anxiety if not properly addressed.

Impact on Families and Parenting Strategies

Parenting a child with emotional and behavioral disorders can be challenging and exhausting. Parents often experience high levels of stress, which can lead to depression and burnout if not properly managed. Understanding that your child's behavior is not a reflection of your parenting skills but rather a manifestation of their disorder can help put things in perspective.

Effective Parenting Approaches

Research indicates that an authoritative parenting style—combining clear expectations, consistent rules, and emotional responsiveness—is most effective for children with EBD. This approach provides the structure and predictability many children with special needs require while avoiding overly permissive parenting that can lead to learned helplessness (Behavioral Collective, 2023).

Key strategies include:

- **Positive reinforcement:** Recognize and praise positive behaviors as close to the time you see them as possible. Be specific in your praise.
- **Consistent discipline:** Set clear limits and use consistent, reasonable consequences. Discuss these limits during calm times, not during conflicts.
- **Structured routines:** Develop regular daily schedules that provide predictability and security.
- **Clear communication:** Use clear, easy-to-follow instructions and avoid long lectures or threats.
- **Modeling appropriate behavior:** Demonstrate the behavior you want your child to have through your own actions.
- **Avoiding power struggles:** Pick your battles and focus on the most important issues.

Treatment Approaches

Early intervention is key. If you notice concerning patterns in your child's behavior or emotional state, consult with healthcare professionals who can provide proper assessment and guidance. With appropriate support and intervention, children with emotional and behavioral disorders can develop the skills they need to thrive. Effective treatment for emotional and behavioral disorders typically involves a multi-disciplinary approach:

Behavioral Parent Training

Parent training programs have shown significant effectiveness in reducing child behavior problems. These programs typically involve weekly sessions where parents learn to identify problem behaviors, reinforce positive behaviors, and implement consistent discipline strategies. Programs like Parent-Child Interaction Therapy (PCIT), Parent Management Training (PMT), and the Positive Parenting Program (Triple P) have demonstrated success in improving child behavior and reducing parental stress (Ogundele, 2018).

Child-Focused Psychological Interventions

Cognitive Behavioral Therapy (CBT) is one of the most widely used treatments for children with emotional disorders. CBT helps children identify negative thought patterns and develop healthier ways of thinking and behaving. For anxiety and depression, CBT has shown strong evidence of effectiveness (Ogundele, 2018).

Other approaches include:

- Social skills training to improve peer relationships
- Self-esteem building strategies
- Emotion regulation techniques
- Play therapy for younger children

Medication

While medication is not typically the first-line treatment for emotional and behavioral disorders, it may be recommended in some cases, particularly when symptoms are severe or when other

approaches have not been effective. Medications should always be prescribed by a qualified healthcare provider and used in combination with psychological and behavioral interventions.

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PART X.

PARENTING THROUGH TRAUMATIC EVENTS

Parenting can be fraught with unexpected difficulties and heart-wrenching experiences. This chapter delves into the complex intersection of trauma and parenting, exploring how various forms of adversity can impact both parents and children. We'll examine the double ABC-X stress model to understand how families cope with crises and investigate the long-lasting effects of Adverse Childhood Experiences (ACEs) on development and well-being. From the devastating impact of serious illnesses and death to the widespread consequences of natural disasters, we'll explore how these traumatic events reshape family dynamics. Additionally, we'll confront the harsh realities of child abuse, neglect, and the foster care system, shedding light on the challenges faced by vulnerable children and their caregivers. This chapter aims to provide insights, strategies, and hope for families navigating the turbulent waters of trauma, emphasizing resilience and healing in the face of life's most daunting challenges.

THE DOUBLE ABC-X MODEL OF FAMILY STRESS

JAIME BALLARD; ELIZABETH WIELING; CATHERINE SOLHEIM; DIANA LANG; AND ALISA BEYER

The Double ABC-X Stress Model

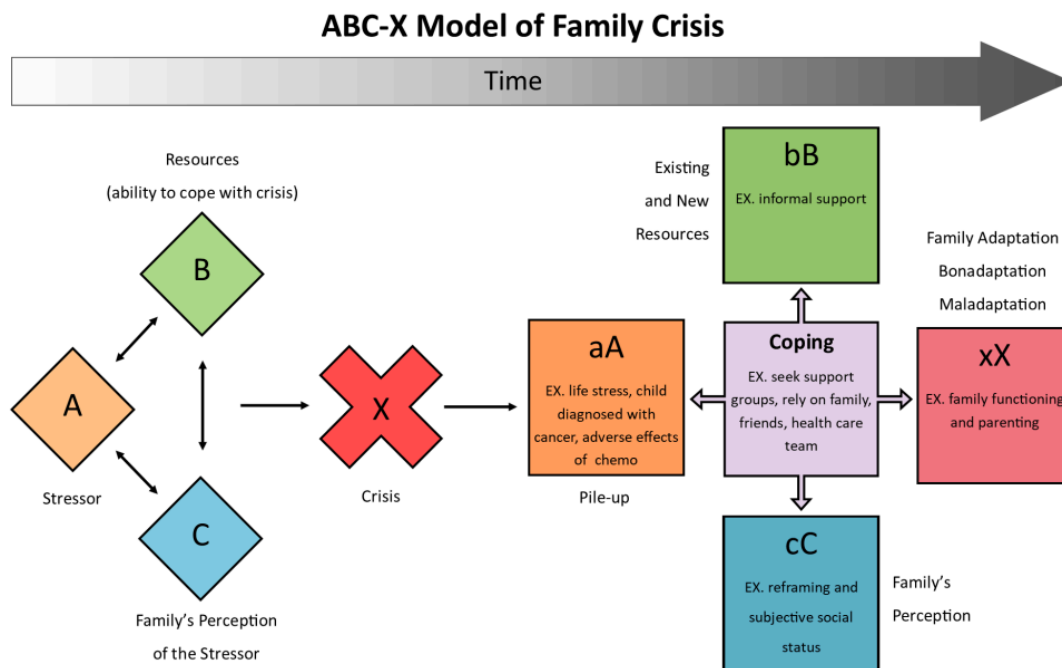


Figure. The image above is an adaptation of the ABC-X model by McCubbin, H. I., & Patterson, J. M. (1983). The family stress process: The Double ABCX Model of family adjustment and adaptation. In H. I. McCubbin, M. Sussman, & J. M. Patterson (Eds.), *Social stress and the family: Advances and developments in family stress theory and research* (pp. 7-37). Haworth.

The Double ABC-X model describes the impact of crises on a family. It states that the combination of stressors (A), the family's resources (B), and the family's definition of the event (C) will produce the family's experience of a crisis (X) (McCubbin & Patterson, 1983).

- A Factor: Stressor Event. In parenting, the stressor event (A) could be a traumatic experience such as child abuse, neglect, or a serious illness affecting a child. The Double ABC-X model helps parents understand how these initial stressors can accumulate over time. Recognize that multiple stressors can accumulate over time, such as caregiving responsibilities, financial strain, and emotional challenges. Use tools like stressor checklists to track these demands.

- **B Factor: Family Resources.** Parenting resources (B) include financial support, social networks, and emotional resilience. These resources are crucial for coping with traumatic situations and can significantly influence how well a family adapts. Leverage existing support networks, such as family, friends, and community groups, and seek out additional resources like counseling, support groups, and educational opportunities to enhance coping capabilities.
- **C Factor: Family Definition of the Event:** How parents perceive and define a traumatic event (C) can greatly affect their coping strategies. A positive definition might lead to resilience, while a negative one could exacerbate stress. Focus on personal growth, resilience, and the value of caregiving, and develop adaptive coping strategies that evolve to manage stress effectively.
- **X Factor: Crisis Experience.** The crisis (X) experienced by a family is the direct result of the interaction between the stressor, resources, and perception. In parenting, managing this crisis effectively is key to maintaining family stability. Implement flexible coping strategies to manage the ongoing impact of caregiving stressors. This might involve role adjustments, seeking professional help, or redefining family goals.
- **Pile-Up Effect.** The Double ABC-X model highlights the “pile-up” effect, where multiple stressors accumulate over time. For parents, this could mean dealing with ongoing trauma, such as repeated instances of abuse or chronic illness, which can lead to a more severe crisis (Double X).

The Double ABC-X stress model provides a comprehensive framework for understanding how families, particularly those involved in parenting, cope with traumatic situations. This model extends the original ABC-X model by considering the accumulation of stressors over time, which can lead to a “pile-up” effect, exacerbating the family’s crisis experience. The family’s multiple environments influence each component of the model, consistent with the human ecology framework. The Double ABC-X suggests that there are multiple paths of recovery following a crisis, and these paths will be determined by the family’s resources and coping processes, both personal and external.

Practical Implications for Parenting

- **Resource Management:** Parents should focus on building and utilizing resources effectively to mitigate stress.
- **Positive Perception:** Encouraging a positive perception of traumatic events can help families cope better.
- **Adaptation Strategies:** Developing flexible coping strategies is essential for adapting to the cumulative effects of stressors.



Figure. An impoverished home along a roadside.

This model is relevant to families that come from another country (e.g., those who self-identify as immigrants or refugees) and live in a new country, as many families experience significant transitions in the process of resettlement. Whether or not this transition, or the events that precipitate it, are interpreted as crises will depend on the family's other stressors, such as employment, housing, healthcare, and family conflict; family meaning-making (cultural and family values), and resources (socioeconomic, family support, community).

Key Takeaway

- The Double ABC-X Model uses environmental and biological perspectives to describe how a crisis affects a family.

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The Double ABCX Stress Model section is an adaptation of [Family Theories: A New Direction for Research with Resettled Populations](#) by Jaime Ballard, Elizabeth Wieling, and Catherine Solheim, used under a [CC BY NC license](#).



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TRAUMA AND ACES

TRAUMA

Being able to overcome challenges and successfully adapt is resiliency. Even young children can exhibit strong resiliency to harsh circumstances. Resiliency can be attributed to certain personality factors, such as an easy-going temperament. Some children are warm, friendly, and responsive, whereas others tend to be more irritable, less manageable, and difficult to console, and these differences play a role in attachment (Gillath et al, 2008; Seifer et al, 1996). It seems safe to say that attachment, like most other developmental processes, is affected by an interplay of genetic and socialization influences.

Receiving support from others also leads to resiliency. A positive and strong support group can help a parent and child build a strong foundation by offering assistance and positive attitudes toward the newborn and parent. In a direct test of this idea, Dutch researcher van den Boom (1994) randomly assigned some babies' mothers to a training session in which they learned to better respond to their children's needs (van den Boom, 1994). The research found that these mothers' babies were more likely to show a secure attachment style in comparison to the mothers in a control group that did not receive training.

Adverse Childhood Experiences (ACEs)



Figure. The ACEs pyramid

The term Adverse Childhood Experiences (ACEs) is defined as a traumatic experience that happens to someone before the age of 18 years that the person “recalls” as an adult (CDC, 2025). ACEs can include sexual, psychological, or physical abuse. These experiences include household dysfunction such as substance abuse, mental illness, incarceration of a household member, and parental separation or divorce. (CDC, 2021) ACEs have been linked to premature death and various health conditions and risks (Harvard, 2018).

Parenting and ACEs

Parents who experienced ACEs themselves may face challenges in providing a stable and nurturing environment for their children (Rowell & Neal-Barnett, 2021). These challenges can arise from increased parenting stress and irritability, as well as difficulties in emotional availability and effective discipline strategies. (Yamaoka & Bard, 2019). Parents who experience Adverse Childhood Experiences (ACEs) may face challenges in being emotionally available to their children. This difficulty often arises from unresolved distress

stemming from childhood adversity, which can impair their social and emotional functioning (Moran et al., 2008). As a result, their interactions with their children may be marked by increased disengagement, intrusiveness, and hostility, while also showing decreased responsiveness, sensitivity, and structure (Fuchs et al., 2015).

ACEs score

To determine your own ACEs score, visit [this website](#)

Consistent research shows an ACE count is negatively related to both social-emotional well-being and development in early childhood (Jones et al, 2024; Novoa, 2020). ACEs have been linked to a variety of negative outcomes across the lifespan, including increased risks of mental health disorders, substance abuse, and chronic diseases like cardiovascular disease and diabetes (Oasis Education, 2025). The stress response triggered by ACEs can disrupt the development of the nervous, immune, and metabolic systems in children, leading to long-term health consequences. Several studies have shown that ACEs are associated with health-related risk factors such as substance abuse, risky sexual behavior, obesity, cardiovascular disease, cancer, and diabetes (Ximenes et al, 2019). Having multiple ACEs is an important risk factor for several unfavorable health outcomes, including early death. The research suggests that the impact of these adverse experiences in childhood on adult health status is strong and cumulative (Ximenex et al, 2019).

For children experiencing ACEs, positive parenting practices (PPPs) demonstrated robust protective effects. Yamaoka and Bard found that PPPs had protective effects even after controlling for ACEs. While ACEs can increase the risk of intergenerational transmission, interventions focused on positive parenting and stress management can help break this cycle. Supportive relationships, stress management techniques, and access to mental health resources are crucial for parents with ACEs to create a healthier environment for their children.

Best-practice recommendations for preventing ACEs entail reducing child abuse and neglect by:

- Strengthening economic supports to families,
- Supporting parents via education about positive parenting techniques,
- Providing high-quality care and education immediately following a child's birth,
- Improving parenting skills to enhance healthy child development and well-being, and
- Providing early interventions to reduce adverse effects and to prevent future risks

Video Examples

Watch Dr. Bruce Perry talk about [reducing the effects of trauma](#).

Additional video examples can be viewed on the [CDC's YouTube channel](#).

Watch Dr. Dan Siegel discuss [the brain's ability to repair after trauma](#).

Further Reading

Center for Disease Control and Prevention: [Adverse Childhood Experiences website](#)

Harvard University Developing Child: [ACEs website](#)

ACEs Aware: [Resources website](#)

PBS ACEs Toolkit for Educators: [website](#)

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ILLNESS, DEATH, DISASTER

Navigating serious illness, disaster, and death can be incredibly challenging for families. Serious illness, disaster, and death can disrupt family dynamics, causing emotional turmoil and uncertainty. It's crucial for parents to understand the impact of these events on their children and to tailor their responses accordingly. Children's reactions can vary significantly based on their age, understanding, and individual personality. These situations require parents to be prepared, informed, and adaptable to support their children effectively. This chapter will explore how to communicate these difficult topics to children of different ages, provide emotional support, and maintain stability during crises.

Serious Illness

- **Understanding Illness:** Explain how to communicate illness to children, considering age and understanding (Collins & Nathan, 2016). See the section below for age-appropriate suggestions.
- **Coping Strategies:** Provide strategies for children to cope with a parent's illness, including emotional support and maintaining routines.
 - Children need emotional support and stability during a family member's illness. Here are some strategies:
 - **Maintain Routines:** Keep daily routines consistent to provide a sense of normalcy.
 - **Encourage Expression:** Allow children to express their feelings through talking, drawing, or writing.
 - **Seek Support:** Consider counseling or support groups for both children and parents.
- **Role of Technology:** Discuss the use of technology in explaining illness and supporting children (Collins & Nathan, 2016).

Disaster

- **Immediate Response:** Follow evacuation plans and stay informed through reliable sources. Outline steps for immediate response and safety during disasters.
- **Emotional Support:** Discuss how to provide emotional support to children post-disaster, focusing on reassurance and stability (New York University Child Study Center, 2006). Reassure children that they are safe and loved. Encourage them to express their feelings and fears (New York University Child Study Center, 2006).
- **Long-term Recovery:** Engage in activities that promote healing and recovery, such as community service or creative expression. Address long-term recovery strategies, including seeking professional help if needed.

Death

When communicating serious illness or death to children, it's crucial to consider their age and understanding. Young children may struggle to grasp the concept of death and might act out or regress due to confusion and fear. Use simple, clear language to explain that death means the person won't come back but will always be remembered and loved (Cancer.org, 2022). School-age children need more detailed explanations and reassurance about their feelings and future care. Provide more detailed explanations, emphasizing that death is a natural part of life but doesn't happen to everyone at the same time. Teenagers benefit from open discussions and involvement in decision-making processes. Engage in deeper discussions about death, grief, and how to honor the deceased. It's important to be honest and use clear language, avoiding euphemisms like "pass on" or "go to sleep." Children should be kept informed as the situation progresses, and plans for their care should be shared to reassure them. Encouraging children to express their feelings and involving them in activities with the ill parent can help create lasting memories. Additionally, respecting their privacy and involving school staff can provide additional support during this challenging time. Spiritual or religious beliefs can also offer comfort and help children process their emotions. Offer guidance on explaining death to children, emphasizing honesty and age-appropriate language (Cancer.org, 2022).

Talking with children about death and grief can be challenging. Here are some resources for adults to use, both with children and for themselves.

- "Sesame Workshop": This website [provides resources and videos on how to talk to children about the loss](#) of a loved one.
- National Public Radio: NPR's "Life Kit" series discusses [how to have difficult conversations](#) with your child.
- UNICEF: UNICEF Parenting offers [advice and tips on how to talk to children and teenagers](#) about death.
- The Cove Center for Grieving Children: Read these [FAQs about grieving children](#) for more information on what to expect from a grieving child.

Grief Support

Provide resources for supporting children through grief, including counseling and community support (Winston's Wish, n.d.). Professional counseling can provide children with a safe space to express their feelings and process their grief. Trained therapists can help children understand and manage their emotions, reducing the risk of long-term psychological distress (Dyregrov, 2008). Additionally, community resources, such as support groups and bereavement centers, offer a network of peers and professionals who understand the grieving process. Organizations like Winston's Wish provide guidance and support tailored to children's needs, helping them navigate their emotions and find ways to honor their loved ones (Winston's Wish, n.d.). Finally, informing school staff about a child's loss can ensure they receive additional support in the educational setting.

Teachers and counselors can monitor the child's behavior and provide necessary accommodations to help them cope with their grief (New York Life Foundation, as cited in Speaking Grief, 2022).

Planning for the Future

Discuss planning for future care arrangements and reassuring children about their well-being. Parents should make clear plans for who will care for their children if they are no longer able to do so. This can involve discussing options with family members, friends, or social services. Sharing these plans with children in an age-appropriate manner can help alleviate their fears about the future (Collins & Nathan, 2016). It's also important to reassure children that they will always be loved and cared for, regardless of the parent's health status. This can involve explaining that there are people who will support them and ensure their needs are met (Collins & Nathan, 2016). Older children may benefit from being involved in discussions about future care arrangements. This can help them feel more secure and involved in the decision-making process (Collins & Nathan, 2016).

Developmental Consideration

Young Children (2-6 Years)

- **Simple Explanations:** Use straightforward language to explain the illness. For example, “Mommy is sick and needs to rest” (AboutKidsHealth, n.d.; AAP Publications, 2010).
- **Reassurance:** Emphasize that they did not cause the illness and that it is not contagious (AAP Publications, 2010).
- **Emotional Support:** Provide emotional support through consistent routines and open communication.
- **Visual Aids:** Use simple drawings or pictures to help them understand (PCC4U, n.d.).

School-Age Children (7-12 Years)

- **Understanding and Coping:** Discuss how children in this age group can understand and cope with serious illness and death, including expressing emotions and asking questions (Winston’s Wish, n.d.).
- **Detailed Information:** Provide more specific details about the illness and its treatment. For instance, “Daddy has cancer. It means there are bad cells in his body that need treatment” (AAP Publications, 2010).
- **Encourage Questions:** Allow them to ask questions and express their feelings (KidsHealth, n.d.).
- **Address Misconceptions:** Clarify any misconceptions they might have, such as the illness being contagious (SickKids, n.d.).
- **School Support:** Emphasize the role of schools in providing additional support and resources.

Teenagers (13+ Years)

- **Open Communication:** Encourage open communication about feelings and concerns related to illness and death. Engage in detailed discussions about the illness, including its causes and treatment options (AboutKidsHealth, n.d.).
- **Reassurance and Stability:** Emphasize maintaining routines and providing reassurance to children during crises.
- **Involvement in Care:** Involve them in decision-making processes related to care and support (PCC4U, n.d.).
- **Emotional Support:** Offer emotional support and validate their feelings (Health Harvard, 2020)

Additional Help

- **Seeking Professional Help:** Highlight the importance of seeking professional help if children exhibit prolonged distress or behavioral changes.
- **Community Resources:** Provide information on community resources available for support, such as counseling services and support groups.

Arizona Resources

1. **Hospice of the Valley** www.hov.org
Provides pediatric hospice and palliative care, as well as bereavement support for families.
2. **Hospice of the West** www.hospicewestaz.com
Offers bereavement support groups and resources for families in Phoenix.
3. **Tu Nidito (Tucson)** www.tunidito.org
Provides free grief support services for children, teens, and families.
4. **Phoenix Children's Hospital** www.phoenixchildrens.org
Offers bereavement support for families with terminally ill children.
5. **Azorna Hospice & Palliative Care** www.azorna.com
Provides bereavement support for families and caregivers.

National Resources

1. **The Dougy Center** www.dougy.org
Offers grief support for children, teens, and families.
2. **Hospice Foundation of America** www.hospicefoundation.org
Provides education and resources on hospice care and bereavement.
3. **National Hospice and Palliative Care Organization (NHPCO)** www.nhpco.org
Offers resources and support for families dealing with serious illness and bereavement.
4. **The Compassionate Friends** www.compassionatefriends.org
Supports families who have experienced the death of a child.
5. **Tragedy Assistance Program for Survivors (TAPS)** www.taps.org
Provides support for families grieving the death of a military loved one.
6. **Caring Connections (NHPCO)** www.caringinfo.org
Offers resources on end-of-life care and bereavement.
7. **The Grief Toolbox** www.thegriefftoolbox.com
Provides a comprehensive collection of grief resources.

Key Takeaways

- Resilience and Support: Emphasize the importance of resilience and seeking support for both parents and children.

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CHILD ABUSE, NEGLECT, AND FOSTER CARE

DIANA LANG AND WIKIMEDIA CONTRIBUTORS

Child abuse takes many forms. Children can be physically or sexually assaulted, and they may also suffer from emotional abuse and neglect of many different forms. Whatever form it takes, child abuse is a serious problem.

It is especially difficult to know how much child abuse occurs. Infants obviously cannot talk, and toddlers and older children who are abused usually do not tell anyone about the abuse. They might not define it as abuse, they might be scared to tell a trusted adult, they might blame themselves for being abused, or they might not know with whom they could talk about their abuse. Whatever the reason, children usually remain silent, thus making it very difficult to know how much abuse takes place. Up-to-date statistics on the different types of child abuse in the United States can be found at the [U.S. Children's Bureau website](#).

Abuse

Abuse can occur in multiple forms and across all family relationships. Breiding, Basile, Smith, Black, and Mahendra (2015) define the forms of abuse as:

- **Physical abuse**, the use of intentional physical force to cause harm. Scratching, pushing, shoving, throwing, grabbing, biting, choking, shaking, slapping, punching, and hitting are common forms of physical abuse;
- **Sexual abuse**, the act of forcing someone to participate in a sex act against the person's will. Such abuse is often referred to as sexual assault or rape.
- **Psychological abuse**, aggressive behavior that is intended to control someone else. Such abuse can include threats of physical or sexual abuse, manipulation, bullying, and stalking (Breiding et al, 2015).
- See [CDC Youtube](#) defining each type of abuse.

Abuse between partners is referred to as intimate partner violence; however, such abuse can also occur between a parent and child (child abuse), adult children and their aging parents (elder abuse), and between siblings (Breiding et al, 2015).

The most common form of child abuse is neglect. **Child neglect** is a deficit in meeting a child's basic needs, such as failure to provide adequate nutrition, supervision, health care, clothing, or housing, as well as other physical, emotional, social, educational, and safety needs. All societies have established necessary behaviors a caregiver must provide in order for a child to develop well within the domains

of physical, social, and emotional development. Causes of neglect may result from caregivers experiencing problems associated with mental disorders, unplanned pregnancy, substance abuse, unemployment, over-employment, domestic violence, and, in special cases, poverty.

Child neglect depends on how a child and society perceive the caregivers' behaviors; it is not how parents or caregivers believe they are behaving toward their child.¹ Caregiver's failure to provide for a child, when options are available, is different from failure to provide when options are not available. Poverty and lack of resources are often contributing factors that may prevent caregivers from meeting children's needs, when they otherwise would be able to meet those needs.

There are various types of child neglect which include:

- Physical neglect is the failure to provide a child with basic necessities of life such as adequate food, shelter, and clothing.
- Medical neglect is the failure of caregivers to meet a child's basic health care needs. Examples include not brushing teeth on a daily basis, not bathing a child, and/or taking children to doctor visits when needed.
- Emotional neglect is the failure to provide emotional support such as emotional security and encouragement (love, nurturance, etc.).
- Educational and developmental neglect include the failure to provide children with experiences necessary for normative growth and development. These may include failing to ensure children receive adequate education or experiences that help foster normative, developmental standards.
- Depending on the laws and child protective policies in one's area, leaving a young child unsupervised may be considered neglect, especially if doing so places the child in danger.

All types of abuse are complex issues, especially within families. There are many reasons people may become abusers, such as poverty, stress, and substance abuse are common characteristics shared by abusers, although abuse can happen in any family.

Children who experience any type of abuse may "act out" or respond in a variety of unhealthful ways. These may include acts of self-destruction, withdrawal, and aggression, and struggles with depression, anxiety, and academic performance. Researchers have found that abused children's brains may produce higher levels of stress hormones. These hormones can lead to decreased brain development, lower stress thresholds, suppressed immune responses, and lifelong difficulties with learning and memory (Middlebrooks & Audage, 2008). Abused children are much more likely than children



Figure. While physical abuse might be the easiest to see, neglect is much more common. (Photo Source: [US Air Force](#))

1. Barnett, W. S., & Belfield, C. R. (2006). Early childhood development and social mobility. *The Future of Children*. Princeton University. 16(2). 73–98. doi:10.1353/foc.2006.0011

who are not abused to end up with various developmental, psychological, and behavioral problems throughout their life course. In particular, they are more likely to be aggressive, to use alcohol and other drugs, to be anxious and depressed, and to get divorced if they marry (Laff & Ruiz, 2019).

Children who experience abuse or neglect are at risk of developing lifelong social, emotional, and health problems, particularly if neglected before the age of two years. This is consistent with what we learned about ACEs. However, it is important to note that not all children who experience abuse and neglect will have the same outcomes. As we learned, there are many ways in which we can foster stable, permanent, safe, secure, nurturing, loving care for children who have been associated with reduced effects of ACEs.

It is extremely important to understand the ways in which child abuse and neglect can be prevented, such as those listed in [this infographic from the CDC](#).

Shaken Baby Syndrome

Shaken Baby Syndrome (SBS), also known as Abusive Head Trauma (AHT), is a severe form of child abuse that occurs when an infant or young child is violently shaken, often by a frustrated caregiver (Johns Hopkins Medicine, n.d.; Mayo Clinic, 2025). This violent shaking can cause the baby's brain to bounce back and forth inside the skull, leading to bruising, swelling, and bleeding, which may result in permanent brain damage or death (Johns Hopkins Medicine, n.d.; Cleveland Clinic, 2025).

Symptoms of SBS include: breathing problems, convulsions or seizures, extreme irritability or lethargy, poor feeding, vomiting, pale or bluish skin, difficulty staying awake, decreased muscle tone, rigidity, no smiling or talking, and trouble sucking (WebMD, 2022; Johns Hopkins Medicine, n.d.). Physical signs may not always be apparent but can include: retinal hemorrhages, subdural hemorrhages, skull fractures, rib fractures, soft spot on the head that appears bulging, different-sized pupils, and favoring one arm or leg over another (WebMD, 2022; Cleveland Clinic, 2025).

Prevention efforts focus on educating caregivers about the dangers of shaking and providing strategies to manage stress and soothe crying babies (Cleveland Clinic, 2025). New parent education classes and public awareness campaigns are crucial in preventing SBS (Mayo Clinic, 2025). SBS typically occurs when a caregiver, often frustrated by a crying baby, shakes the child violently. This can happen in moments of stress or frustration, and it is not limited to intentional abuse; sometimes, the caregiver may not intend to cause harm (Johns Hopkins Medicine, n.d.; Mayo Clinic, 2025). Risk factors include unrealistic expectations of babies, stress, and unstable family situations (Mayo Clinic, 2025).

Click here to learn more about [shaken baby syndrome](#).

Corporal Punishment

Worldwide initiatives have recommended banning the use of corporal punishment with or in children of all ages. According to the Global Initiative to End all Corporal Punishment of Children, corporal punishment is defined as “any punishment in which physical force issued and intended to

cause some degree of pain or discomfort, however light” (Worlairch et al, 1998). Examples include shaking, kicking, forcing ingestion (e.g., soap, hot sauce), and “smacking,” “slapping,” or “spanking” with any object or a hand. Nonphysical forms of punishment (e.g., verbal and emotional abuse) include activities that are intended to cause shame to a person such as humiliation, threats, ridicules, etc.

Vast amounts of research have consistently demonstrated strong correlations between youth who experienced harsh punishment (e.g., spanking) by their parents and increased risks of:

- changes in brain physiology that show on MRI studies,
- mental health disorders such as depression or anxiety,
- elevated cortisol levels,
- cognitive problems,
- aggressive behaviors,
- unhealthy caregiver-child relationships,
- suicide attempts,
- moderate-to-heavy drinking,
- substance use disorders,
- misconduct, and
- adverse outcomes that extend into adulthood.

Foster Care

In the United States and in some other countries, another way to immediately protect children from further abuse is to remove them from their primary caregivers and place them into foster care or with family members. **Foster care** is a temporary living arrangement designed to protect children from further abuse or neglect by removing them from their primary caregivers and placing them in a more stable setting. Foster care is a system in which a minor is placed into a group home (residential child care community, treatment center, etc.), or private home of a state-certified caregiver, referred to as a “foster parent,” or with a family member approved by the state. Alternatively, children may be placed with family members who have been approved by the state. The placement of the child is normally arranged through the government or a social service agency. The institution, group home, or foster parent is typically compensated for expenses unless the child is placed with a family member.

On any given day, over 400,000 children are living in foster care in the United States (Kohornen, 2025). More than 100,000 of these children are eligible for adoption because their parents have lost permanent legal rights and custody (NCFA, 2024). The average age of children waiting to be adopted from foster care is around eight years old (NCFA, 2024). Notably, adopting a child from foster care typically does not involve significant financial costs, as the process is often subsidized by the state. This means that these parents have lost permanent legal rights and custody of their children, leaving their children without any permanently legal caregivers (the government assumes this responsibility until someone adopts the children). The average age of youth waiting to be adopted from foster care

is eight years old. Contrary to popular belief, it typically *does not* cost any money to adopt a child from foster care. For more information about becoming a foster parent or adopting from foster care, visit: www.adoptuskids.org. For additional statistics about adoption and foster care visit [the Adoption and Foster Care Statistics website](#).

Key Takeaways

- Child abuse encompasses various forms, including physical, sexual, and emotional abuse, as well as neglect, which is the most common form and involves failing to meet a child's basic needs such as nutrition, healthcare, and emotional support. The prevalence of child abuse is difficult to determine due to underreporting, as children often remain silent about their experiences, making it challenging to gather accurate statistics on the extent of the problem.
- Corporal punishment is **not** an effective method for teaching or changing performance. Corporal punishment has been linked to many negative outcomes.
- Shaken Baby Syndrome (SBS), also known as Abusive Head Trauma (AHT), is a severe form of child abuse caused by violent shaking, often by frustrated caregivers, leading to potential brain damage or death, with prevention efforts focusing on education and stress management strategies.
- In the United States, foster care serves as a temporary protective measure for children by removing them from abusive or neglectful situations and placing them in stable environments, such as foster homes or with approved family members

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PART XI.

HISTORICAL CONTEXTS OF PARENTING ...

Parenting practices have evolved significantly throughout human history, reflecting changing societal values, cultural norms, and scientific understanding of child development. This section explores the historical aspects of parenting from the 1600 through the 1980s. By examining how childrearing approaches have transformed over the centuries, we gain insights into the complex interplay between parenting styles and societal progress.

Understanding the historical context of parenting can not only illuminate how far we've come, but also challenge us to critically examine current practices. As we explore the triumphs and missteps of past generations, we can better appreciate the complexities of modern parenting and the ongoing evolution of parent-child relationships.