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HOW TO WORK WITH CHILDREN FROM SOCIALLY DISADVANTAGED ENVIRONMENT AND THEIR PARENTS

**STRENGTHENING AND SUPPORTING THE EARLY
CHILDHOOD DEVELOPMENT WORKFORCE - ECD PLUS**



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PART 1: PARENTING WITH CONFIDENCE METHODOLOGY

Preface

Parent training is a programme designed to help parents manage the behavioural aspects of their child. The effectiveness of this training has been demonstrated in particular in modifying the most dysfunctional aspects of children's behaviour. Such interventions teach parents to bring about change through the acquisition of behavioural strategies, the application of the principles of social learning and operant conditioning, the development of parental monitoring skills, and the correct use of reinforcement and natural consequences for children's behaviours.

The term 'parenting style' or 'parenting' refers to the set of behaviours that parents use in their relationship with their children. Parenting is a complex construct in which the specific personality traits of the child and the parent play a fundamental role, forming what is known as the parent-child system. A negative parenting style is characterised by the presence of excessively controlling and intrusive behaviours, overly rigid or, on the contrary, absent rules and a tendency to induce feelings of guilt in children; a positive parenting style is characterised by responsiveness, emotional availability, sensitivity and empathy, predictability, ability to connect with the child, encouragement of individuality, self-regulation, and assertiveness, through supportive behaviours.

Parenting support allows you to analyse and change the parenting style and responses that influence children's behaviour.

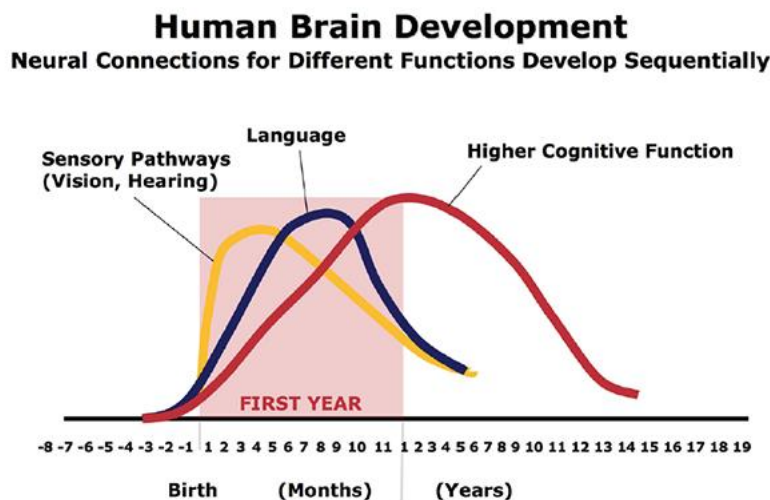
Thus, parent training that works on parents' management and problem-solving skills also ends up strengthening their sense of competence and self-efficacy and promoting the overall well-being of the family.

Therefore, in parent training we work simultaneously on three areas: the child, the parent and the relationship between caregivers and their children.

Early Childhood Years - The first formative years of a child's life require a supportive environment, care and attention

What can be done to leave a better world for future generations? It seems utopian to talk about this today, between the climate crisis and the ongoing wars. But it is precisely with the new generations that we must start again. Science suggests the answer: to intervene in early childhood when the child's brain is in full development. Early childhood, the period up to the age of 8, is fundamental for cognitive, social, emotional, and physical development. During these years, a child's newly developing brain is highly plastic and responsive to change as billions of integrated neural circuits are established through the interplay of genetics, environment, and experience. Optimal brain development requires a stimulating environment, adequate nutrition, and social interaction with responsive caregivers.

(Source UNICEF)



In the process of proliferation and pruning, the simplest neural connections are formed first, followed by more complex circuits. Timing is genetic, but early experiences determine whether the circuits are strong or weak. Source: CA Nelson (2000).

Healthy development in the early years (particularly from birth to age three) provides the foundation for good academic performance, responsible citizenship, good health, future strong communities, and successful parenting in the next generation. How can we help parents cope with this incredibly important time to ensure children have a solid foundation for future development?

Let's try to get more specific.

In this period, the actions of the caregivers and the community closest to the child affect his emotional and character development. Providing tools in this period of life allows the child to build skills to deal with the problems he may encounter from early childhood in a resilient way. Scientists argue that chronic early childhood stress, caused for example by extreme poverty, repeated abuse, or severe maternal depression, can be toxic to the developing brain; in the absence of the buffering protection of adult support, toxic stress is built into the child, while positive stress, i.e. moderate and short-lived physiological responses to unpleasant experiences, is an important and necessary aspect of healthy development. The result is an increase in self-esteem and a reduction in the likelihood of developing physical illnesses such as diabetes and obesity. Better health and education also have a positive impact on society. So intervening in early childhood has a positive effect both individually, strengthening the character of the future adult, and collectively, creating a more cohesive, cooperative, and resilient society.

A Time of Endless Opportunities

Recent advances in early childhood development science provide us with a clearer picture that can improve existing practices and help generate new intervention strategies.

Today we know that the development of children is a highly interactive process, the result of the fusion of genetics and the environment. In addition, although attachment to parents is primary, young children can also significantly benefit from relationships with other responsive caregivers both within and outside the family. In addition, children who have experienced trauma, despite being at increased risk of developing later problems of aggression, can be helped substantially if reliable and encouraging relationships are established as soon as possible with supportive caregivers and if appropriate treatments are provided as needed.

Regardless of the source of difficulties, the most common factor in children's ultimate well-being is the support of at least one stable and committed relationship with a parent, guardian, or other adult. These relationships are the active ingredient in building resilience: they provide the personalised responsiveness, scaffolding and protection that can protect children from developmental disturbances. Relationships also help children to develop key skills, such as the ability to plan, monitor and regulate behaviour and to adapt to changing circumstances, which will enable them to respond better to adversity when they face it. This combination of supportive relationships, development of adaptive skills and positive experiences is the foundation of resilience.

The Idea of Parenting - Parental Wellbeing

The greatest opportunity for a person who is about to become a parent is twofold: the first is that which allows him to lay the foundations for a better future for his sons and daughters; the second, often not taken into consideration because it is too ambitious, is the opportunity to plant the seeds of a better future for the whole of humanity, a little like Warren Buffett's aphorism: "Someone is sitting in the shade today because someone else planted a tree a long time ago." For the opportunity to be such and to be effective in one's life, it is good to start a path on three levels:

- awareness;
- relational;
- competence.

Anyone who imagines becoming a parent has his or her own idea of parenthood, given by the outcome of his or her own experience: it is influenced by his or her own experiences, how he or she reacts to them, and the context in which he or she grew up, from the family, more intimate, to society in the broadest sense.

It's an idea so internalised in us that we often don't realise it.

As Wittgenstein said, "The most important aspects of things for us are hidden by their simplicity and everydayness. We cannot notice them because we always have them in front of our eyes" and in this reflection we can include many of our habits, many behaviours and many ideas that make us who we are and sometimes prevent us from being what we would like to be, and the idea of parenting is a part of this.

Becoming aware of this is a first step, and it is important to do it to give full meaning to us being parents.

Awareness comes from exploring and intercepting our prejudices, those paradigms that have solidified convenient ways of accessing the decoding of reality.

Awareness - Enhancing Communication Skills

Each of us has prejudices. We literally have " prior judgements " (from the Latin *praeiudicium*, composed of *iudicium* " judge " and the prefix *prae* - " before ") about practically everything, about every area of life. Such thought patterns are formed based on our culture, our experiences, our upbringing, our studies and, in the case of parenting, the parents we have had. These thought patterns help us to find immediate answers to life's events. They help us make decisions. We cannot do without them.

It is not a matter of not having them, but of recognising them.

Although in the common sense the word has a strong negative connotation, here it is necessary to use it as a tool of knowledge because prejudices are an inevitable part of each of us. It would be useless and dangerous to pretend to be free of them; on the contrary, it is useful, as parents, to learn to recognise them and to face them with a healthy mental openness that allows us to subject them to scrutiny or to change them if they should become cages that trap our energy.

Precisely because we certainly have within us ideas of 'family', of 'fatherhood', of 'motherhood', of 'son' and 'daughter', the way to greater awareness is to make them explicit, to give them a conscious form, so that they do not automatically condition us, but support us as strong allies.

These ideas have matured over the course of our lives, come from our experiences, our reading, our parents, the parents of our closest friends, and so we have a prior (and automatic) judgement about what a parent does - or should do. - Learning to recognise these prejudices allows us to restructure them if necessary; on the other hand, if we believe them to be correct, it allows us to recognise them and generate better strategies in the expression of our parenting.

So how do we identify the prejudices we hold?

We start by asking questions and writing down the answers, rather than being overwhelmed by the spontaneous doubts that arise in the face of the challenge of parenting. Not random questions, but specific questions. This requires an authentic mindset that is open to possibilities. You have to become an artist of questioning. Literally. We must ask ourselves questions that generate a multiple and complex

narrative; that shift our reflective activity from the need to define, categorise, specify to a more stimulating thinking activity, because it can explore unknown possibilities of our being and often also of our interlocutor or of our children. The questions must lead adults back to the essence of parenthood and challenge the presuppositions of their paradigms, their theories, their expectations. Above all, they must be generative of other questions and, therefore, of new, unpredictable stories, because, if they are asked well, questions can facilitate the changes we wish to see in our lives and help to guide our actions, thanks to their power to make us discover the meaning we give to things.

Here are some powerful questions that can help caregivers reflect:

- What does being a parent mean to you?
- What is your idea of education? What about discipline?
- What is your idea of fatherhood and motherhood?
- What kind of parents did you have?
- What kind of childhood did you have? Were you happy? Why?

Writing the answers to these questions, after taking the necessary time for reflection, can help to bring out the unspoken and those defences of which we are unaware, and which will be activated once the offspring are born.

The ideas we have guide our actions and behaviours. Children also learn to live by what their parents tell them, but by observing their actions, their way of managing relationships.

A powerful question that parents often need to ask themselves is: What do I want for my son or daughter?

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Whatever the answer, the ultimate desire is for their son or daughter to be free, independent, and happy. To help them be free, it is important to help and support them in their choices. To help them be independent, parents need to assess both the

limits necessary for the child's development and their own limits so that they do not invade the child's decision-making space. To enable them to be happy, they need to feel loved and supported for who they are and not for what they do (to please us).

The Relationships of the Caregivers

The environment in which children grow up is made up of their parents and all those who live with them, that is their home, not the walls within which they grow up. The feelings that the child will develop about himself and his interactions with others are formed in the relationships with the parental figures and with their small circle: that formed by the co-parents, if there are any, by the siblings, by the grandparents, by paid helpers and close friends, and by all the most present figures of the reference community.

It is important to be aware of how you behave in these relationships. For example, we could ask parents whether they show gratitude to those closest to them, or whether they tend to take out their anger on them. These family relationships have a significant impact on the personality and mental health of the child, who is both an individual and part of a whole system: the system of the caregiver, whom the child will inevitably inherit. In addition to close kinship relationships, a child's system includes school, friendships, and the wider culture. Taking this system into consideration and working to make it the best possible environment for you and your children is even more important. But don't forget It doesn't have to be perfect because perfection doesn't exist.

Engaging Fathers

Assuming that the family is the basic social unit in which children grow and develop through supportive and caring relationships with competent adults, the sexual orientation of the parents has no influence on the children, since to achieve for optimal socio-emotional and cognitive development, they need safe and lasting relationships with emotionally involved, competent and nurturing adults, regardless of their sexual orientation.

Fathers play a significant role in fostering the socio-emotional, cognitive, linguistic, and motor development of their children, just like mothers and other caregivers closest to the child. Trivially, we tend to think that the father figure is more absent than the mother figure. To date, we can say that, especially in Western countries, it is more a cultural heritage than reality, as research has shown that the value of paternal involvement is determined by the quality of the interaction between fathers and their children, for example, the responsiveness of the father's responsiveness to the child's needs, rather than the amount of time fathers spend with their children (Palkovitz, 1998).

Thus, the focus is definitely not on the sexual orientation of the caregiver, but on the quality of time that the caregiver spends with the child to establish a secure attachment, and not on the type of family structure, which is good news for those who do not live in a conventional family.

The composition can be traditional or not, it doesn't matter. Parents can live under the same roof or separated, in a commune or in a ménage à trois, they can be gay, straight, or bisexual: nothing changes. Studies and research have shown that the structure of the family does not determine the cognitive or emotional development of the child. For example, a study in the UK found that more than twenty-five per cent of children grow up in single-parent households, and about half of these single parents were in a couple's relationship at the time of their child's birth. But these children are no better or worse than those from more traditional family backgrounds, except for other factors such as the parents' financial situation and education.

The people who are part of a child's life make up his or her world, which can be rich and full of love, or a barren field where the seed cannot flourish. Keeping family life from degenerating into the latter option is more important than most adults realize. If children feel tense, insecure, and worried that they are not protected enough, they will not be free to be curious about the outside world. And not being curious has a negative impact on their ability to concentrate, learn and socialise.

As part of a research, adolescent boys and parents were asked whether they shared the following statement: "That parents get along is one of the important conditions for children to grow up happy." Seventy percent of teenagers thought it right, compared to thirty-three percent of adults.

The reason this happens could be that the emotional distress children go through when the relationships of their parents and those in their care are dysfunctional is not visible to those same adults. We probably know how difficult it is for parents to deal with the suffering of young people.

The relationship you have with your son or daughter is the fulcrum of parenthood: it is the soil that receives the seed and supports the tree that will cast a shadow in the future. This medium can either encourage growth or stifle it. Without a relationship one can rely on and from which one can draw strength for oneself (and one day for one's own children), the child's sense of security, also called "attachment", is compromised.

Child Attachment

Attachment is a clinical term used to describe "an enduring psychological connection between human beings" (Bowlby, 1997). In particular, attachment theory emphasizes the importance of a child's emotional bond with his or her primary caregivers. The disruption or loss of this bond can emotionally and psychologically affect a child into adulthood and impact their future relationships.

Only specially trained and qualified professionals should evaluate a child's attachment style. However, it is important that all professionals working in the education sector understand what attachment is and know how to help parents and caregivers get in tune with the child's needs. This can help improve the well-being of the family unit and provide positive outcomes for both the child and their caregivers.

A child's need for attachment is part of the process of seeking safety and protection from their caregiver.

SAFE ATTACHMENT: In safe relationships between caregiver and child, the caregiver is usually sensitive and attuned to the needs of the child. They are able to provide predictably loving, responsive, and consistent care.

Babies who have established a secure attachment may exhibit the following patterns of behaviour during times of stress or exploration:

- Wanting to be close to your primary caregiver
- Return to their primary caregiver for comfort and safety if they feel scared or threatened.
- By treating their primary caregiver as a safety base from which they can explore their surroundings, the child feels safe knowing that he can return to his safe base when needed.
- Feeling anxious in the absence of their primary caregiver. They are upset when their caregiver leaves, but happy to see them and easily comforted when they return.

(Ainsworth et al, 2015)

Children with secure attachments are more likely to develop emotional intelligence, good social skills, and solid mental health. (Howe, 2011)

INSECURE ATTACHMENT: Not receiving comfort and security in the early years can have a negative effect on children's development and neurological, psychological, emotional, and physical functioning; in addition, they may be more likely to develop behavioural problems such as attention deficit hyperactivity disorder (ADHD) or conduct disorder. Indicators that a child may not have a secure attachment to the caregiver, or a role model will emerge over time, particularly during times of distress or exploration.

Children who have attachment problems may have difficulty forming healthy relationships as they grow up while as adults, they are at a greater risk of entering into unstable relationships and having poor parenting skills, behavioural difficulties, and mental health problems.

It is important for anyone who works with children and families to support parents and guardians in building positive relationships with their children. Having positive interaction and playing with caregivers can help a child's brain develop healthily.

See an example of a game to strengthen the bond between the caregiver and the child at the following link: <https://www.nspcc.org.uk/keeping-children-safe/support-for-parents/look-say-sing-play/>

Attachment can therefore not only determine the nature of the relationship between parent and child, which can be functional or dysfunctional, but can also be repeated as an internalised model when the child has his or her own family. In dysfunctional relationships, the following pattern is usually activated: if you react to the child with anger or some other exaggerated emotion, it is probably because as a parent, you have learned to defend yourself in this way from a feeling you experienced when you were a child. Unconsciously, the child's behaviour threatens to trigger past feelings of despair, longing, loneliness, envy or need in the parent. And unconsciously you take the easy way out: instead of empathising, you short-circuit and feel anger, frustration or fear.

Many parents are often frustrated by their emotional reactions and would like to self-regulate better and more for a more effective relationship.

A useful way to build a healthy relationship with your sons and daughters starts with moments of anger. Whenever a parent feels overwhelmed with anger towards their child (or feels another exaggerated feeling), instead of reacting without thinking, they can stop (counting to ten is always a good idea!) And ask themselves:

Does this feeling belong completely to this situation and to my child in the present?

How can I go about looking at it from another point of view?

A good way to refrain from reacting is to say, "I need some time to think about what's going on" and use that time to calm down. Even if the child needs to be guided, there is little point in doing it when angry, because the risk is that he will only perceive the anger of the adult and not what you are trying to tell him.

It is advisable to do the same even in the absence of children by trying to note how often you feel angry or judgmental, indignant or fearful, or perhaps ashamed, despised or out of place. In such cases it is useful to try to identify the recurring pattern in one's reactions.

At this point it becomes useful to think back to when this feeling was first felt in your life, looking for its origin in your childhood and identifying the circumstances in which you began to react in this way: in this way the parent can begin to understand up to what point this reaction became a habit. In this way the power over one's life increases because one understands how the reaction comes from both the habit and the present situation, and healthy and effective relationships with one's children need to get out of the automaticity of the habit.

At this point it is helpful for parents to ask which of the child's behaviours causes them the most negative reaction. What happened when we behaved in the same way as children?

Taking some time with your eyes closed and recalling old memories can be helpful in exploring parenting.

Here are some simple questions that can help adults understand:

What emotion prevails in the memory?

How important can this memory be in relation to who you are today?

To what extent does it influence you as a parent?

All this serves to discover the automatisms of the parent, remembering well that whatever comes to mind during these reflections (for example the fear of feeling ashamed, which in the present translates into wanting to always and rigidly assert one's reasons, perhaps at the expense of the your son or daughter), it is important to feel proud of having identified it, instead of letting yourself be overwhelmed by shame or walking away by remaining on the defensive and persevering in the behaviour you adopt to react to that feeling.

Parents are not born, they are made and become parents within the parental relationship. One is not a parent in a complete, definitive way.

Parenthood is extended from moment to moment because, to paraphrase Heidegger, "everyone is what he does and cares for".

Caring for the children in relationship with them is what distinguishes the father and the mother, or at least the parent we are "creating" through our reflection and our training. Playing with words makes everything simpler and clearer. In the Treccani online dictionary, under the heading "care", we find the following "attentive and thoughtful interest in an object that occupies our soul as well as our business" and immediately after that: "actively taking care of it, providing for its needs, nurturing it". This definition brings us back to the origin of the family bond, to the concrete practice of guarding a body and providing for its needs, of protecting and nourishing it, with which a parent identifies in a practically immediate way. But the care of a father and a mother goes beyond, transcends material needs and also addresses cognitive, aesthetic, social, ethical, and spiritual needs. Caring for sons and daughters means caring for their bodies and their minds, for the time that passes and does not return, for the environment in which all this takes place, for the web of relationships in which we and they thrive, and for the possibilities that they can offer us in ways that are unprecedented even for ourselves.

For this reason, care is expressed in a threefold relational dimension:

- care of the self
- care of the filial relationship

- care of places in order to be a good parent, one should nourish one's children with the greatest teaching: with the direct testimony that it is necessary to care for oneself, to love oneself, to achieve one's full potential, to build on the best parts of oneself, not only as a parent, but also as a person with personal interests and needs. And you can't do it with words because that would create a short circuit. You cannot tell your children to "make their dreams come true" and at the same time live an unfulfilled life because you have chosen to give up on yourself.

It is precisely in taking care of ourselves as men, women, husbands, wives, companions, friends, sportsmen, sportswomen, professionals, artists that we educate our children to cultivate themselves, in autonomy and discernment. As children grow up, they are conditioned by the attitudes, habits, and behaviours of their role models; their brains, from the earliest years of life, tend to mirror those of their parents: and any defect of ours, like any virtue of ours, will also be theirs.

In nurturing the relationship that creates a bond in the dyad, their worldview is exercised and the parent shares with the child one of the many worldviews they will experience as they grow up. Nurturing the filial relationship means caring for the child's needs, because this is where everything begins, and this is where we realise ourselves as parental figures, because the first years of the child's life will be characterised mainly by physical needs, and the bond will be constituted and built through the senses with which they explore the world. In this sensory exploration, the parental figures are one of the main tools with which they can decipher reality. A treatment based on physicality, in which touch, taste, hearing, smell and sight are cultivated, does not just mean taking them to the paediatrician to check that everything is in order, but also putting each sense to the best possible use. So what I touch asks me to approach in a certain way, what I eat asks me for respect and awareness, what I hear comes to inhabit me, what I see forces me to make choices. Taking care of the primary needs of children already places parents in a state of strong ethical and educational responsibility, which must first be thought about and meditated upon. Then, as they grow up, it will be necessary to take care of their talents and their non-material needs, and to accompany them on the path of autonomy and

freedom that will make them happy. Taking care of the social, ethical, and spiritual needs of their children is what characterises the parents as a presence different from all the other fundamental figures in the children's lives. And to be successful, the relationship must necessarily be based on these assumptions. In this relationship, father and mother become responsible for how the sons and daughters will know each other through them.

Home Environment and Safety

In the care of places, however, it is necessary to combine care for oneself with that for the future of both parents and children. With a roof over our heads, we grow and learn the self-confidence that allows us to walk through the door, carrying home and security in our hearts, leaving the nest behind. Without a home that has cared for us, we do not have that security that makes us strong. Instead, we become vulnerable to the insults of the world.

Psychologists, in their not always friendly jargon, call this weakness of the heart "emotional vulnerability." It is possible that this vulnerability is related to real traumatic experiences, a climate in which the person has experienced parents or life experiences as dangerous and a real sense of threat to one's sense of security, as happens to those who come from war zones or who have experienced family violence first hand.

A home is not only a place of shelter, but also a place of love and warmth. And when this is lacking, one feels sad. It is a state of lack of love, in which the protective environment is present and the subject's need to explore is not opposed, but everything is provided in an atmosphere of emotional deprivation, of so-called neglect, of distanced and not warm affection, and in which physical contact is rare and awkward. It may - but does not necessarily - result from the experience of "cold" and emotionally distant parents. The person sees and feels unloved, sad, and empty. In other cases, there is protection and warmth instead, one grows up in a personal environment that is sufficiently safe, warm, welcoming, and reassuring, but a third element, which is also important, is missing. And that is the encouragement to explore, to leave the house, to feel safe outside. Parents were present, protective, and welcoming, but did not provide models for facing the world because they were too fearful and overprotective. Research on family histories has highlighted the possibility of the transmission of fear through the explicit transmission of information ("don't go out, it's dangerous outside!") or indirectly, through the bad example of an attitude that is always alarmed and afraid to leave the house and explore the world.

Finally, there may be a case where the nurturing and protective environment is present, the exploratory functions are not opposed and there is even a certain affective warmth. However, there is also a highly critical, controlling, and oppressive style in which the values of moral self-control are transmitted and lived in a repressive, blaming, and punitive way. The person perceives the parents directly as critical and frustrating, or indirectly through the obligation to adhere to rigid moral norms, and tends to judge himself as incompetent, inferior, stupid, humiliated, morally unworthy, and guilty.

The home therefore has its pains and joys, including psychological ones. Or most importantly the psychological ones: it can be a prison or a comfort place, a source of strength or of weakness, present the principle of freedom or of oppression, teach a critical spirit or submission. If we are lucky, home is a blessing for which we can never be grateful enough. Otherwise, it is better to try and create a better one elsewhere.

Each environment is beyond our control, but this should not scare us: on the contrary, it must activate in us the desire to discover, to challenge, to overcome ourselves and to explore possibilities. A space becomes a place when it is inhabited and takes a name that binds it to its inhabitants. A place, be it a house, a city, a nation, is the story of our presence within it; taking care of it, building it with the bricks of our values, also means making it a fertile ground for sowing trust in others and in the future. The unknown that inhabits every place can be the greatest ally for our development and that of our children.

Each place is a context that shapes our lives and vice versa; remaining passive towards the world around us also means remaining passive in our way of growing and flourishing. On the contrary, taking care of our environment (at every level) means taking care of the context in which we want to stimulate our development.

Therefore, if a parent cannot physically become a parent, he or she can choose him or her through the transmission of his or her values during the history of their relationship. A history in which the parent leads by the hand, shows possibilities, cultivates the child's abilities, passes on knowledge, shares experience, and takes responsibility to correct his or her behaviour. A story in which emotions are the

necessary grammar for the syntax of feelings, and reason is the training field where dreams are nurtured. In this way, places become synonymous with community: a parent is a community builder by deeply engaging and living with others, because these others are the real place that the children will inhabit.

The Competence

We live in a unique historical period: knowledge about child development has reached a level unimaginable fifty years ago. Parents today can no longer ignore this. On the contrary, they have a great opportunity that was not available to those who came before us: to educate in a conscious and varied way. You just need to go to the bookshop, and you will find numerous texts to help parents. In this brief guide, we will concentrate on communication.

Thanks to an infinite number of studies, we know that dialogue between parents and children is the main way of intellectual development from the earliest years of life. Memory, concentration, abstraction, knowledge of the environment, self-control, and language itself need communication to flourish. The child's brain is programmed to learn and acquire all the intellectual skills that are characteristic of human beings, but to do so it needs the stimulus of the parents, and without conversation and interaction it would never be able to develop fully. For this reason, we believe it is useful for parents to be trained in effective communication.

For example, the ability to understand and pronounce words is innate to every human being, yet children cannot develop it on their own. They need adult stimulation to be able to acquire this tool.

Intelligence is another skill that develops mainly thanks to the dialogue between parents and children.

Communicating effectively encourages collaboration, promotes mutual trust, fosters a more organized memory, or helps the child develop positive thinking. More empathic communication reinforces positive behaviours and helps to affectionately set boundaries which can be helpful in helping the child internalize social norms and calm down when he loses control.

A very concrete communication technique, which allows the caregiver to connect with the child's brain more effectively and which has the advantage of favouring the collaboration of the child with the adult relates on cooperative communication.

Try to imagine an everyday situation in which both parents are involved. The kitchen is upside down and it is the turn of one of them to tidy it up, for example the mother.

But she's tired and doesn't really want to tidy up. Now read these two examples and indicate in which of the two cases it is more likely that the two partners will work together to fulfil each other's wishes.

Example 1

“The kitchen is a disaster. I've been waiting for half an hour for you to clean it, but you don't do anything. You sit there and watch television. Go and clean the kitchen immediately”.

Example 2

“Honey, did you notice that the kitchen is dirty? I'm afraid there are no more clean dishes left for dinner anymore. What do you say if we turn off the television and tidy up? Will you help me?”

The first example reflects an inquisitive communication style. The second is an example of what can be defined as "cooperative communication". It is a style of communication that derives from the research of Elaine Reese, Robyn Fivush and other scientists who study dialogue and the relationship between parents and children. Using a cooperative communication style increases the likelihood that the child will collaborate with the adult in whatever task is proposed to him. It can be used when we want the child to sit at the table to eat, tidy up the playroom or simply listen carefully when we explain something. It is a very common communication technique among professionals who work with people with intellectual disabilities and with children who have behavioural problems, attention deficit or cognitive difficulties. The interesting aspect of cooperative communication is that regardless of the communication style that each person has developed over the course of his life, this modality can be learned (and taught) through training. Many professionals do this, and studies have been carried out in which, by training different groups of parents in techniques like these, it has been possible to improve communication between them and their children.

Cooperative communication is not infallible as there is always the possibility that the child does not want to collaborate (these are not tools of manipulation, but of empowerment), but in any case, it greatly favours the relationship between the child and the adult. Its main value, however, is not to get the child to collaborate more willingly, but rather to help him connect with adult thinking.

The effectiveness of cooperative communication consists in soliciting the collaboration of the child and in making any task a team effort, let us remember that children do not have our experience and must be accompanied in every task because for them they are all new things, and they need a sort of coaching. In company, work seems more fun and easier than when you have to do it alone. We are all more willing to face a task that seems difficult to us if we can do it in company and this applies to all ages. If we tell a child to "take off their clothes" this will seem much more difficult and lonelier than a phrase like "now we are undressing". It will not be necessary to both undress, it will just be a saying, but it will present the message to the child so that his brain understands that it will be easy for him. Keeping in mind that any activity can turn into a team effort will make the parent-child relationship better and more meaningful.

Another advantage of cooperative communication is that when the child understands that the adult is asking him for cooperation, the chances of him responding positively increase. The explanation for this phenomenon is very simple: people are social beings. They enjoy being in company, receiving help and offering it to others. As Rosenberg says, "Everyone is happy to contribute if they are free to do so." It is part of our genetic heritage. Studies show that as early as a year and a half, the child feels the urge to help those in need. At that age he is able to take objects and hand them to those who cannot reach them if he sees they are in difficulty. Growing up, then, a child tends to console those who are sad and to help others as soon as possible or when asked. This attitude, of course, is much stronger when addressed to members of the same family. Children want to help their parents; they want to be with them and for this reason they will be more inclined to listen to you if you turn to them asking or offering collaboration. If you want your child to put the toys in order, instead of

ordering him or her to: "Put the toys away!" you can try to ask him: «Will you help me to put them in place? ». They can always turn you down, but the first ordering way is more likely to receive a negative response.

Sometimes children struggle to cooperate simply because they are not thinking the same as their parents. For example: it may happen that the parent notices that it is getting late, his children have not finished dinner yet and has promised to read them a very special story. He may get nervous and ask the children to hurry up, while they are perfectly happy messing with food or being at the table with the caregiver. In these cases, it can be very helpful to express your feelings and draw attention to what concerns the parent. For example: "Listen, it's getting late and if we don't hurry, we won't be able to enjoy the special story I wanted to read to you."

A useful tool is to ask questions that help them put themselves in the parent's shoes, for example:

"How can we finish dinner and get comfortable in bed?" or if a toy breaks "How do you think we will be able to fix it?". Whenever you use the question "What do you think?", it will help the children to articulate complex thoughts. If a parent is able to involve the child in the course of their thoughts, the latter will better understand how the father or mother feels and understand what he needs from him and the chances that he will cooperate will be greater.

As we said at the beginning, a parent wants their children to be happy, independent, and free. But freedom must be trained and promoted.

This may seem crazy to many parents, but the reality is that the child is much more likely to do what we ask if we give them some leeway rather than just telling them what to do. It is inherent in human beings to be able to choose, it is one of the fundamental characteristics of our humanisation, and we get angry when we feel constrained in the cage of duty. It's the same with children. They cooperate more readily when we give them freedom (and so do we adults, let's face it!). Part of the trick is that while they decide what they want to do, they cannot get angry and argue with their parents, but they also cooperate more willingly because by letting them be free we help them to feel respected and valued. Instead of saying, "You have to put

the dirty laundry in the basket and put on your pyjamas," try asking, "Which do you want to do first: put on your pyjamas or put the dirty laundry in the basket?" In this way we turn a demand into a choice, and what is usually a difficult situation for the child becomes a positive moment.

Caring and Empowering

'Children need to be involved in decisions that affect them, according to their age and level of understanding.' (Tassoni, P 2013)

Empowering children means letting adults give children a choice and letting them be able to do different things and try new ones as they grow up. Adults must ensure that children make choices appropriate to their age and stage of development.

The parent can propose to choose whether to eat the soup or the fish first, whether to brush his teeth with his toothpaste or that of the grown-ups, whether to take a bath or shower, whether to choose a pair of shoes or another and a long string of options that will help the child to cooperate more willingly and, moreover, to learn to make his own decisions.

Another fundamental aspect of communication is investing time talking about the things that happen, that have just happened, that have happened during the day and in the previous days. In doing so, parents develop short stories that serve both to capture the child's attention and to organize events in an orderly way. These tales are called "narratives" and are fundamental in the parenting relationship and help children organize memory.

Telling stories is an inherent feature of our species. We cannot do without it. In all tribes parents tell stories to their children and in all cultures, there are tales and legends that are passed down from generation to generation. For years, researchers have been interested in why humans love making up stories. One reason seems to be that it is an effective way to remember the past and imagine the future, but everyone agrees that narrating one's life and telling imaginary stories helps structure and organize childhood memory. In fact, children themselves process their own stories to be able to remember them. Even before the age of two, children tell short stories about facts that have struck them to be able to remember them better. So, if they went to the zoo, when they get back home or before going to bed, they will tell in their own way what they saw and what amazed them. All parents can encourage the natural tendency to invent stories by elaborating with their children stories about what they have experienced together: the birthday party, the visit to the grandparents or the

trip to the supermarket. This way children will learn to remember in a clearer and more organized way. Parents need to be reminded of the importance of setting aside time each day, especially in the evening, to review the day's events, focusing on what has caught their children's attention, but that's not all: it's also important to encourage your children to read in a variety of ways. One of the most effective ways is to demonstrate your love of reading by showing that you are interested in reading and talking about what you are reading. Another way is to make picture books together, which will make going to the bookshop and choosing a book easier and more fun.

Many parents find it difficult to read illustrated books to their children, but it is good to remember that the child is not interested in the technical quality of the reading (which would improve with training anyway), but in the closeness to the parent and the possibility of entering a magical line of thought.

Talking to your children means giving them the opportunity to learn language. Experts agree that the more a child is exposed to new words from an early age, the larger their vocabulary and the better their relationship with themselves and others. But not all parents are equally talkative. Two researchers from the University of Kansas, Betty Hart and Todd Risley, have shown that while some parents exchange around three hundred words per hour with their child, others go up to three thousand. The data is revealing. Women talk to babies much earlier and much more than fathers (although fortunately this is changing).

From birth it is important to talk to your children slowly, but smoothly.

Even if we are dealing with a newborn who cannot interact communicatively, it is possible (and useful) to describe what we see in the room, to tell him what we are cooking, what we have done at work, or simply to explain what is happening in our favourite TV series. What is very effective, even in the first few months, is to stop and describe how you feel that day: enriching the child's vocabulary of emotions will help him develop emotional intelligence.

It is best to speak in front of them, so that they can watch their parents as they speak, because much of the development of speech comes from imitating the position of the lips and tongue. The next time we talk to a child under one year of age, all we have to

do is look at their eyes: they are mainly looking at the mouth in an instinctive attempt to learn how you make those sounds that are so funny that they manage to attract the attention of other people.

It is important not to confine communication to a limited environment. Many parents spend the first few months in a kind of bubble where the child's universe is limited to the four walls of the house, the park, and the supermarket. The child needs to be exposed to different environments and people that will enrich his or her language skills. Exposure to objects and situations other than those found in a safe context such as the home will increase his vocabulary. Whether you are going to the supermarket to buy a carpet or to the bank to solve a financial problem, it is advisable to take your child with you and allow him or her to learn from the parent. Furthermore, decoding the sounds of different people, each with their own accent and pronunciation, will allow the child to improve his ability to integrate the sounds of his own language or even other languages. Expanding your child's social circle will not only improve their ability to understand messages but will also enrich their vocabulary. As Zagrebelsky says, "Few words, few ideas".

To give a trivial but illustrative example of what has been written above, it is possible that in the parents' house one cooks on heat-conducting plates, while in the grandparents' house one cooks on a gas stove. This small difference will give the child the opportunity to hear words like "gas", "match", "lighter" or "stove" every time he visits his grandparents. Contact with other people is a sure source of linguistic enrichment because each person the child meets brings other worlds into the child's linguistic universe.

Another way of expanding his universe is through singing and reading, an effective way of exposing children to new words that they will hear repeatedly from an early age. It is advisable to pick out songs from your childhood and sing them with your child or buy CDs of children's music to listen to at home or in the car. The child will learn the lyrics by heart and expand his vocabulary in a fun way.

Of course, language is not just a question of vocabulary: it is grammar that allows you to combine words to build meaning and it is a slightly more difficult function to

acquire. One of the most interesting aspects of grammar is that, by combining the same words in different ways, you can have completely different meanings.

For example, the phrase "Gaia doesn't want candy because she is angry" has a different interpretation from "Gaia is angry because she doesn't want candy". In the first case, anger is a cause, in the second, a consequence. In case she doesn't want candy because she is angry, the parent will try to comfort Gaia with a hug, while if Gaia is angry because she doesn't want candy, the parent might offer to exchange it for a bag of chips as he/she understands perfectly well that the problem is the candies. Coming to such conclusions requires mastering the rules of language, but it is still accessible to even a four- or five-year-old child. But there is a big difference between understanding the rules of language and being able to use them to construct sentences that express exactly what you want to say.

Children Who Develop Differently

The task of parenting is constantly evolving as the growing needs and abilities of children change over time. There is no "one size fits all" model for parents. What works for one child may not work for another. What worked when children were two may not work when they are four. Adaptability and flexibility are key ingredients for parenting.

Children grow and develop at different paces. Although their developmental paths may vary, most children pass through a series of predictable milestones along the way. It is common for children to experience developmental spurts and slowdowns in different areas of their development over time. If a child is a little ahead or a little behind at a certain age, that's normal. In most cases, all children will eventually recover, and even if they do not, it is important to remember that a diagnostic label does not define an individual and, more importantly, does not limit their ability to achieve their goals. We recall some historical examples such as Stephen Hawking, who suffered from ALS, or Albert Einstein, who learned to read late and was dyslexic. Many parents feel increasingly pressured to "get their parenting right". Others feel increasingly pressured to do a good job of raising their children, who in turn should be successful at school, in their leisure time and at work.

Making mistakes is normal and happens in everyday life; the parent's job is more to help the child get back up and teach them how to do it, rather than preventing them from falling. Sooner or later they too will encounter difficulties and must be prepared to face them. Obviously, it is right to proceed in small steps and according to their age. Worrying about children is normal, but it is not healthy for anyone to obsess over them. According to some scholars, there are some rules that can help children be more independent and keep their anxieties at bay.

-Children need to learn from failure, after making mistakes they understand that it is not the end of the world and there is no need to be afraid of making mistakes.

-If you keep your children locked up inside, they will suffer from depression, obesity, and neurosis.

-It is important to give them the tools to be independent: teach them to cross the road, to swim, not to get into a car with strangers. That way the child will be safe, and the carer will be at peace.

- Sometimes it is necessary not to help your child the first time he or she asks, but to let him or her make decisions and to intervene only when it is really necessary.

To return to the subject of communication, it is important to start enriching the way children express themselves from the age of two by adding adjectives or verbs. For example, if a little girl points to a dog that chases pigeons and says to her father: "A dog", he can reply in a more articulate way by adding a verb, an adjective and an adverb: "Yes! He is a very playful dog". As the child grows, his or her sentences can be extended and the parent can help them add content or build more complex sentences, as in these examples:

Gaia: I saw a butterfly!

Mom: Yes !!! We saw a yellow butterfly flying from one flower to another, didn't we?

Or

Joel: Dad's car broke down.

Dad: Yes, you're right, dad's car broke down and we took it to the mechanic.

Clearly, the father is not pointing out the child's mistakes, he is simply giving him the same message in the correct form. Experts in language acquisition affirm that correcting the child's sentences without explicitly pointing out that he has made a mistake is the best way to help him internalise the correct form and use grammar appropriately, without making him feel insecure about using the language.

In the first years of life, parental skills are linked to play, in the sense that it is highly recommended and useful to play and have fun with your children, and there is a game that we would like to propose to you at the end of this section, which you can learn to play in the parental training sessions.

Following instructions is a little more difficult than we might think, because the brain has to set in motion a complicated mechanism that is essentially the same as when we assemble a piece of furniture. The first step is to understand the different parts of the message. To do this, different meanings must be retrieved from memory. For example, if the assembly instructions say to put the four Skagen screws on the back of the top of a shelf, the brain must go through a complex process. First, it has to locate the Skagen screws and distinguish them from the other screws. Then he'll have to count four, separate them from the rest, and remember where he put them. At this point, remember to identify the top panel and locate its back, following the instructions in the drawing. Only then will he be able to find and insert the aforementioned screws into the wooden board. It can be just as complicated for a one-year-old to understand that he has to put his nappy in the bin as it is for a five-year-old to understand that to make a pizza he has to put the tomato sauce on first, then the cheese, and finally the other sliced ingredients. Little pieces can be just as complicated as assembling the bookcase you have just bought.

Therefore, giving instructions can be a complex and challenging game to improve your child's understanding and ability to work with words. It will be amazing and enriching to experience together how difficult it can be for your child to follow the instructions when setting the table together, when preparing the snack for school or when simply helping to put his toys in order.

A simple sentence like "Put the toy cars in the big box next to your bed" will require all the effort of a two-year-old and a more complex one like "Pour the milk into the cup, put two spoons on the table and take two napkins in the second drawer" will be a real challenge for one of five. In addition to practicing daily activities, the parent can be advised to play and give their children fun instructions such as: "Take a leap, then clap your hands and finish with a somersault. Are you ready?".

In games as in everyday life, the length and complexity of the instructions can be adapted to the skills of the young person and repeated as many times as necessary so that he understands what he has to do. If the educational figures help him to be careful when giving instructions and when they notice that he has not deciphered or

understood the whole message, you will notice that he will make rapid progress. By giving him a hand in following the instructions, you can help improve the ability to focus and mentally work with language. Plus, it's a great way to develop a sense of responsibility and collaboration in housework.

At this point we just have to explore the perception that a parent has of himself.

The Art of Parenting

It is one thing to “be a parent”, another to “become a parent”, and yet another thing is to “feel like a parent”. It is often difficult to distinguish between these three aspects when we are thrown into the all-encompassing dimension of parenthood; on the contrary, making them explicit and relating them to the right virtues to be cultivated allows us to enhance the parental role.

Being a parent calls for the intentionality of one's choice. It is an existential condition that requires discernment and that awareness we have been talking about.

This dimension is intimate, personal and questions the meaning we give to our lives, to the meaningful actions that make the parental role authentic and beyond. Here we are dealing with the history of fatherhood and motherhood, both of which are undergoing radical changes thanks to the emergence of gender equality and a more inclusive society. To be a parent is always to be a subject situated among many other variables, such as origin, social class, beliefs, etc. We cannot read parenthood only in relation to the offspring; we must realise that we are a complex system of interdependent roles. Parents often forget that they are people with many other identities. If you think of yourself only as a parent, you risk trapping your potential in a suffocating cage. The fact remains that it is still an idea, and regardless of whether it is good or bad, we will always experience the frustration of the gap between what we are and what this idea demands of us. We will never be identical to an idea. The monadic parent who tries to resemble that idea runs the risk of turning into the father and mother that society (and therefore the dominant group) demands.

To avoid this scenario you need the ability to change your point of view to keep the condition of active listening alive and transform yourself into a nomadic parent, capable of moving into the territories of change that the growth of a son and daughter impose!

Wherever I shift my attention, new brain connections are made. The new parenting uses the plasticity of the brain to renew itself in a process of constant change. To do this, we start with interest in our son or daughter. The word "interest" has a particular etymology, and we often use it unconsciously, it means "to be in the midst of things"

(inter - them). So you are not only in the middle of something, but you also become the bridge between these things, the link between different, separate, closed worlds. Being between the narrative of parenthood and our direct experience, between our adult world and that of boys and girls, between the masculine that belongs to us and the feminine that we want to take care of, and vice versa.

This dimension answers the questions: What kind of parent am I? What kind of parent do I want to be? Which virtue do I want to cultivate? The virtues to be cultivated are humanity and wisdom. The virtue of humanity is the feeling of love in its double connotation: to love/care for oneself and to love unselfishly (there would also be the feeling of being loved), and trains trying to achieve happiness for everyone: to love/care for oneself and to love selflessly (there would also be the feeling of being loved), and trains one to try to achieve happiness for everyone: oneself, one's family, one's neighbourhood, one's city, and so on. The different levels train and develop through constant kindness (to oneself and to others) and thanks to the social intelligence that allows us to evaluate the best strategies for the well-being of the whole community in which we are inserted, without exception. This virtue alone would be enough to commit oneself not only to one's own children, but to all the daughters and sons of the world.

Wisdom is the virtue linked to the love of knowledge, but not only.

Knowledge is not enough if it is not combined with an open mind that allows us to clearly evaluate our ideas and those of others.

Combined with curiosity, understood as the desire to search and discover new challenges to achieve the best, it also allows us to enhance creativity, as a search for solutions for the collective good. Wisdom is always far-sighted, that is, it reflects on the long-term consequences, it has a unified vision. Thanks to wisdom we can better understand our role and the effects our present actions have on the future.

Promoting parents

Becoming a parent is the dimension of competence, study, commitment, but not only. As the Latins said, *fabricando fabricamur*, by building we build ourselves. It is by doing things that we learn them. By being fathers you become fathers, by being mothers you become mothers, against the rhetoric of quality time. It is obvious that if a parent for various reasons does not have all the time he would like to spend with his sons and daughters, the only possible strategy is to make sure that the moments together are of quality. Often, however, this is an alibi. Many parents take refuge in a performative and neurotic behaviour dictated by the impositions inherent in the role. We become a parent in the relationship, in building a relationship with our sons and daughters. If so, far we have defined the birth of a son or daughter as a great change in a person's life, and we have made it clear that the effort to be our best version of parent is a work on improvement, meeting with our children leads us to consider a new word: transformation, from trans: beyond and form: give shape.

Reshape something that already exists.

To shape new relationships between things, but above all between being a parent and being a son/daughter. Becoming a parent also means activating a new and strong political responsibility, and this is where we become fathers and mothers: in our daily activism, marrying the causes of equality, against gender-based prejudices, fighting for necessary services, for inclusive schools, for a community economy, for a sustainable world. This is possible precisely by taking care of parents and therefore of their children, because for every phase of their life they will encounter obstacles related to their development, their freedom, their autonomy, and their happiness. You become a parent by constantly monitoring the power relations that revolve around your children in every area of life and by sharing your privileges. Such sharing will not lead to an impoverishment of caregivers. On the contrary, it will free them and increase their chances. If as your children grow up and as parents you remain the same, a great opportunity will be missed. If thanks to them parents transform their mindset, their inner world, wonder will be the lifeblood of their parenting.

This dimension answers the following questions: How can I become the parent I want to be? How can I raise my son or daughter in a free and self-determined way? What tools can I use to carry out my family project? The virtues to be trained are courage and justice. Courage is not, in this case, resistance to pain, fearlessness and intrepidity, or a display of masculinity (for fathers!). On the contrary, it is the acceptance of one's own pain, fears, and weaknesses. It is recognising all this in others, caring for it and protecting it as a common good, a good of humanity in all its forms. The courage of parents is not the pursuit of glory, but the support of diversity so that it is not marginalised. And it is expressed in the potential to persevere in the face of difficulties, in a conscious planning and full of trust in one's own goals and in others. It is the courage to be a tender parent, to be involved in the upbringing of sons and daughters by breaking gender stereotypes, and to keep the sexism detector high at work to bring about as much real change as possible. Justice as a parental virtue manifests itself through the potential of citizenship, which develops a sense of belonging to one's community with a strong commitment to the common good; through the potential of impartiality, which allows us to recognise the rules of the game in relationships and how they are beneficial to all and not unbalanced, favouring some over others, as happens, for example, with the gender gap; and finally through the potential of leadership, as an expression of ethical justice through one's role. Parenting is the emotional dimension, in which the possibility of becoming emotionally literate is introduced in order to recognise one's own and those of others. The culture of patriarchy, the competitiveness of capitalism, the technocracy of algorithms have strengthened the ideology of individualism. Feeling like a parent today means giving up the principle of power over others that permeates our culture and our relationships and making room for the principle of acceptance.

Welcoming is a word with a particular etymology, to be *accolligere*, more *colligere*, where the prefix *a* indicates a movement, a bringing inward, towards oneself, while *colligere* has a double meaning: *cum ligare*, to bind together, and *cum legere*, to gather. In any case, in the principle of welcome there is a feeling that opens the space in which the relationship with the other can be built. The parent as the creator of

generativity, that is, the creator of that space of possibility in which the life of the father, the mother and the life of the daughter and the son flourish side by side, in mutual diversity.

In the mutual vocation, we could say.

Welcoming means living parenthood in ever larger concentric circles, from affection to closeness to ecological parenting.

This dimension answers the questions:

Do I feel satisfied with being a parent?

Do I feel like a parent even in the absence of my children?

If so, how? If not, why?

The virtues to be trained are transcendence and temperance: temperance is the most important virtue in this phase of deconstruction because it allows us to bring order to ourselves thanks to the potential of self-regulation, understood not as repressive self-control, but as discernment and the ability to manage impulses in favour of conscious choice. If we understand our values and know how to express them in our lives, we will be able to self-regulate more effectively. Moderation is exercised through humility, understood as a complete knowledge of oneself, one's limitations and one's resources. Humility allows our automatisms not to express themselves beyond our control, in favour of attentive listening to ourselves and others. Moderation requires the exercise of prudence so that our personal history and our vision of the future can dialogue with the context and evaluate the best choices to make based on where we are at any given moment.

The virtue of transcendence allows us to have a vision that goes beyond our perception, directs our desires, and manages our fears through hope. Humour is used to encourage healthy self-criticism as well as to crack the hearts of others, and transcendence uses gratitude to acknowledge one's privilege and put it at the service of others, for we did not inherit our privilege, and it is only when used in this way that it has value. There is no transcendence without a sense of spirituality that connects us with moral beauty and with a desire for not only individual but collective elevation.

Transcendence helps to counteract the category of disgust, with which this society tries to explain everything that deviates from the dominant normativity.

Common Parenting Concerns

We have come to the conclusion and a reflection on "time" could not be missing.

In the first phase of the parenting relationship, particular attention is given to time in its congruent form for the development of children and the management of an effective relationship. Maintaining a time scan that nurtures a healthy mind in one's sons and daughters is the basic opportunity that opens for a future mile. In this regard, I find the list of the "magnificent seven" proposed by Daniel Siegel (2011) very effective.

1. The time of interiority, made up of moments in which one can explore one's thoughts, one's imagination, one's dreams, memories and hopes, letting the images emerge that emerge from silence in a spontaneous way. A time that today seems to be associated with the time of boredom and which instead is the moment of building one's own identity. Because in our interior we listen to that personal voice that tells us who we can be; and if we don't talk to ourselves, that inner voice will have the voice of others and not ours. A conscious parent strives so that their children can experience this time of interiority. Obviously, you cannot say to your children "Stay here an hour and listen to yourself!": It would not make sense and would be ineffective. But you can ritualize moments of silence as a family, to make sense of the week just passed. You can listen to instrumental music together, you can take silent walks in nature, you can give yourself, for fun, a meal where no one has to talk.

2. Sleep time, which in this society of performance is often sacrificed in favour of increasingly higher results. But the time of sleep also invites us to reflect on its quality: how do I fall asleep? Is it continuous? Our children's brains develop in the hours of sleep, especially the memory component. This is why a parent takes care of their children's sleep hours even at the cost of being unpopular in their eyes: planning the sleep necessary for the child's age requires a strong sense of organization and responsibility. Being able to remain constant in the time you have to go to bed, avoiding electronic tools before falling asleep and above all having dinner with adequate foods that do not disturb sleep are some of the necessary characteristics to keep in mind. Creating a rite for falling asleep is very useful: for example, reading a

story or, if the children are older, telling each other about the day sharing the best thing that happened and, why not, the mistake made and how to avoid repeating it in the future. Another useful activity before falling asleep is to keep a written journal.

3. The time of concentration is the most difficult challenge. We live in a complex historical period, full of interference due to the perennial connection that we carry and the false myth of multitasking. In reality, our brains are structured to do one thing at a time, and the more we train ourselves to pay attention to only one thing by focusing on it, the more it improves its abilities. Many parents often do multiple things at the same time, such as replying to chat messages while writing an email or watching a movie. However, this does not allow the brain to learn as it should. For this reason it is necessary to put in the effort first and focus on one thing at a time, educating the children to do the same. A good exercise can be to use a timer and focus on one activity until it rings. In any case, if you find it difficult to focus, it is useful to start focusing on things that we are passionate about and that make us feel good. After that, you can experience healthy discipline by focusing on things we like less but are necessary.

4. The time of idleness, not to be confused with the time of interiority, which is an introspective and intentional moment. The time of idleness is just the opposite of the time of concentration. A time without objectives and without purpose, other than to relax and not spend energy on a demanding task. The time of idleness allows you to recharge, but above all to set boundaries to commitments and stress. It is a free and mind-free time, allowing it to wander without directions. Often, in busy lives such as metropolitan ones, scheduling “the time of boredom in the family” can be healthy and fun.

5. Play time is a time that serves both the parent and the child. Both individually and together. Playing time is not to be underestimated, because, in addition to creating a meaning of family, it stimulates creativity, cooperation and exploration. Game intended as a playful moment, aimed only at having fun and being together without that seriousness that distinguishes the other areas of our life, such as work for parents and school for children. So a non-competitive game and not aimed at results and

victory, but with the possibility of imagining and experimenting and laughing. Games such as free drawing, mime, karaoke, group dancing (just to give examples) are used to build relationships based on laughter that comes from proposing oneself outside the daily duties. It is a necessary time precisely because it is rare in the distribution of the commitments of the day and even of the week. In the game, parents and children give themselves the opportunity to be different and to bond through pleasant emotions. The game also serves to build a memory of the family that will remain in the hearts of all its members.

A useful advice for parents with young children is to let them choose a playful activity and to promise to follow, however absurd, the proposed rules, without intervening and / or proposing changes. It will be nice to get "involved" following the creativity of your children. If the children are older, look for clues about their passions or desires and organize playful weekends.

6. Time of movement is the basis of health. We live inside a body that we must take care of by strengthening it, but not only. Movement increases the plasticity of the brain, improves mood, and prevents many diseases. It is obvious that this is a time that must be thought specifically for each child. Not everyone loves to play sports, and not everyone can do the same sports. This is where the creativity of the parent comes into play to find the best solutions so that there are moments dedicated to body care, the important thing is that there are aerobic components and that it is a time of at least 30 minutes. To find the "movement" you like, it is important to be able to experiment with several things at an early stage, to intercept the right one for the physical and aptitude characteristics of our children.

7. The time of the relationship is a time which cannot be ignored. Trivially, we are social beings, and it is therefore inevitable that our being in the world is linked to that of the other people we meet in our life and to those who live on the planet. Relationship is a term with many meanings: in Italian it indicates a document, a story of something, but if it is between people, it is a bond, from the Latin *religo*, and a moment of reciprocity and reference, as a *refero*. In the relationship I experience the collective mind and I transcend myself, but above all I experience the unpredictability

of life. In the time of the relationship I build and build that story made of memory and symbols that will be my life. The opportunity that parenting offers us and the possibility of investing in relationships and supporting sons and daughters so that they are not looking for the "right people", but the right way to stay in relationships.

The parent, by training their parenting skills, with effort and dedication, helps to be the right person for the other.

How? Reflecting on what we expect from others and shifting the axis on what we expect from us in building the most important bonds of my life.

How generous am I in the bonds I have built?

How much do I care for the well-being of the other?

How and how happy am I with her happiness?

Sometimes it is enough just to ask yourself, in the evening, before falling asleep: "Did I make someone happy today?"

Keeping young children safe from violence, abuse, and neglect

Child abuse is defined as any physical, emotional or sexual harm done to a child, whether through action or inaction. Child abuse is widespread in many different cultures, ethnicities, and income groups. It undermines the parent-child relationship, creating a vicious cycle that takes time and effort to overcome.

People are led to believe that all parents love their children and do the best they can for them. It is psychologically easier to accept the "not bad parent" myth than to believe that some children experience physical or emotional abuse and / or abandonment at the hands of their parents. The lack of maternal or paternal instincts seems unnatural and practically impossible. Also, those who have never been neglected or abused may have a hard time believing that anyone can treat an innocent and defenceless child that way. However, neglect and abuse can occur in every corner of society and need to be recognized as early as possible because the long-term impact of child abuse can be profound.

As abused children grow up, they can experience a range of consequences, such as dysfunctional relationships, emotional distress, an increased risk of anxiety and depression, post-traumatic stress disorder, antisocial personality, and drug and alcohol addiction. Some abused may decide not to have children, even if they really want them, for fear of perpetuating the cycle of violence.

Additionally, some studies have found that in many cases memories of abuse hurt more than actual abuse, regardless of the person's gender or ethnicity: Someone's subjective thoughts about child abuse can help shape a negative self-narrative that doesn't only prolong his suffering. Focusing on the present and rewriting your own self-narrative can help dampen the negative effects of childhood abuse, even if they can't be completely forgotten.

EMOTIONAL ABUSE - The old saying "Sticks and stones can break my bones, but words will never hurt me" is just plain wrong. When it comes to emotional abuse, words can inflict lasting damage that is by no means easy to overcome. Emotional abuse is a repeated pattern of behaviour that generates fear and exerts control over another person, in this case a helpless child. Like other forms of abuse, emotional abuse can

cause both short-term and long-term repercussions. Offensive words from a parent can change the way a child's brain develops: the child not only internalizes negative messages that undermine their self-esteem but can also develop maladaptive coping mechanisms that do nothing but perpetuate the cycle of abuse. Adults with a history of emotional abuse are prone to anxiety, depression, low self-esteem, and also tend to have difficulty forming healthy, committed relationships.

SEXUAL ABUSE - Any action towards a child that is carried out for the sexual gratification of a significantly older adult or child constitutes sexual abuse (Paedophilic Disorder). Forms of sexual abuse include intercourse, harassment, and forms that do not involve physical contact with the abuser.

NEGLIGENCE - Neglect is characterized by a continuing pattern of inadequate care for a child. Parents are usually not negligent on purpose - their child is only low on their priority list. Neglect can be physical, emotional, or even medical. Stressful circumstances, such as illness, divorce, and poverty, are risk factors that can increase the likelihood of parents being negligent. Interventions may be needed to prevent lasting harmful effects.

ABANDONMENT - Child abandonment occurs when caregivers fail to provide for their basic needs: shelter, food, water, clothing, education, medical care, etc. It is characterized by an ongoing pattern of poor care and lack of growth. The abandonment of the child often causes physical and / or psychological damage that can have a permanent impact on the child that it will carry over into adulthood. Some signs of childhood emotional abandonment include self-criticism, anger, shame, fear of rejection, and self-blame. Children who are neglected quickly absorb the lesson that their feelings don't matter and may react by choking or denying their true emotions. Adults who have experienced neglect are at increased risk for depression, anxiety, addiction, and relationship problems.

Working with other services

Today we know that human growth depends on the quality of family and social relationships that children experience throughout their growth. For this reason, the lines developed by the Europe 2020 Strategy regarding innovation and social experimentation as a means of responding to the needs of citizenship invite to implement actions capable of developing positive parenting (REC 2006/19 / EU), so as to "breaking the cycle of social disadvantage "(REC 2013/112 / EU) for children living in families and in adverse social environments, guaranteeing children ample opportunities to participate in the construction of their project (REC 2012/2 / EU).

This Strategy is based on research and experiences that show that it is possible, through a plurality of interventions, to allow almost all parents to become "positive parents", that is, capable of responding to the needs of their children and freeing their human potential, even if they live in a vulnerable situation. Today we know that it is possible to fight the fight against inequalities and build social justice by guaranteeing equal opportunities to children who start in life from different family situations. As new possibilities for intervention emerge, new responsibilities for politics are also emerging.

This responsibility was assumed by the Ministry of Labour and Social Policies which set up a working group with the Regions, the Autonomous Provinces and the Cities reserved for Law 285/1997, the scientific group of the University of Padua which followed the 'implementation of the PIPPI program.

Starting from the data collected in the national experimentation of said Program and from the review of the international literature on the subject, the national guidelines on intervention with children and families in situations of vulnerability were drawn up, approved by the State-Regions Conference. on 21.12.2017.

PIPPI (Intervention Program to Prevent Institutionalization), whose acronym is inspired by the resilience of Pippi Long stocking, as a metaphor for the strength of children in dealing with adverse situations in life, is the result of a collaboration between the Ministry of Labour and of Social Policies and the Research and

Intervention Laboratory in Family Education of the FI.SPPA Department of the University of Padua.

The Program pursues the aim of innovating intervention practices in relation to families in a situation of vulnerability to reduce the risk of maltreatment and the consequent removal of children from the family unit, coherently articulating the various areas of action involved around them. to the needs of children living in such families, taking into consideration the perspective of parents and children themselves in constructing the analysis and response to these needs. The primary objective is therefore to increase the safety of children and improve the quality of their development. It fits into the defined programs area of Preservation Families and Home care intensive intervention, investing in particular on the first thousand days of life. Active since 2011, today the program involves all 20 Italian Regions, about 2500 families included in the experimentation and a community of practices and research made up of more than 6000 operators of social, health and school services, 250 coaches, 130 middle managers and managers as service managers.

This is an example in which a research activity, integrated with the training and intervention of operators in services, has been able to impact and be concretely integrated into national policies.

The intervention devices, that is the set of actions with which to realize the Framework Project shared in the multidisciplinary team, are to be understood as an articulated set of interventions through which a global and intensive accompaniment to the family is made available, aimed at to his emancipation from institutional help and to the reactivation of his internal and external resources, so that the family itself can also gradually make the experience gained in the accompaniment path available to other families.

Some intervention devices are of an institutional type, while others concern actions that make it possible to enhance the recreational, cultural, sporting, artistic, spiritual resources, etc. present in a territory.

- The Home and / or Territorial Education Service (SEDTE), in some local realities defined as Family Education, is the device through which professional educators are regularly present in the context of family life in its living environment, to enhance the resources that manifest themselves there and to accompany the process of constructing positive responses (skills and strategies) to the developmental needs of the child by the parental figures in a progressively more autonomous manner.
- The Day Centre is configured as a semi-residential daytime support service for families, aimed at both children and adolescents, which can be used as a device within the design if the team assesses that some objectives of the Framework Project are pursued in an external environment to the family home.
- Solidarity closeness represents a form of solidarity between families whose purpose is to support a family nucleus through the solidarity of another nucleus or individuals in a logic of support and sharing of resources and opportunities. The solidarity closeness is placed within the continuum of the different forms of family reception.
- Groups with parents and groups with children: This device provides for the organization of moments for discussion and mutual help between parents and between children who meet periodically in groups. The purpose of group activity, thanks to the resource represented by the collective context, is to strengthen and expand the relational and social skills of the participants and in particular the ability of parents to respond positively to the developmental needs of their children, according to what has been shared. in the Framework Project.
- Psychological / neuropsychiatric / psychiatric intervention and other specialized interventions:

According to the multidisciplinary perspective of protection and care, professionals in the psychological / neuropsychiatric / psychiatric area and other specialists in therapy and rehabilitation, possibly involved because of specific needs of this nature of children and / or parents, are members of the team in all the phases of the path of accompanying the child and his family.

- Partnership with educational services and schools Promoting the well-being of children and their families in a perspective of equity and social justice requires a fruitful collaboration between teachers, educators, and professionals of social and socio-health services.
- The economic support that the Municipalities provide to families represents a form of contrasting poverty and the economic, housing, work, and educational deprivation in which many vulnerable families find themselves.

The term "accompaniment path" thus means an integrated and participated intervention process that involves professional and informal resources, which is based on the recognition, enhancement, and activation of resources (personal, family, contextual) that allow the figures parents to respond positively to the growth needs of children. (Source: Ministry of Social Policies).



Handouts for Parents: Training Worksheets - Topics for Group Discussions

Parenting, seen as an opportunity, can also be understood as a training to live well, which translated into values and philosophical terms, is a training to live "the good", as the main source of happiness possible on this earth. The care of one's children (and with them of one's parenting project) can be strengthened by a series of exercises for the development of values that govern choices, decisions, actions, objectives, and skills. Values training is certainly not easy. We are in one of the most complex, neglected and at the same time essential fields of human life.

The following worksheets are designed for both individual, couple and group work to allow future parents to become more aware and effective!

Worksheets on: A) Common Parental Problems - Caring and Empowering

Workout

Take some time for yourself and think about how you want to be as a parent and what you are doing to become the parent you want to be.

Write it down below.

Compare your idea of a parent with the idea of a parent of the other parents in the group by paying attention to how these conceptions of parenting make you feel.

Workout

Take a piece of paper and write how "must be a good parent" and how "must behave a good parent"

Divide into sub-groups, share your "duties", research the skills of an effective parent. Compare them with what you have written and share results and feelings.

Workout

Get a pen and papers. Divide the sheet in half, into two columns: in the first column write at least five adjectives that characterize a "daughter" and in the second column those that characterize a "son".

And now answer these questions: where and when did I learn this distinction?

Where do I find the scientific basis for this distinction?

FEMALE

MALE

1.

1.

2.

2.

3.

3.

4.

4.

5.

5.

Talk to the other parents in the group.

Workout

Train yourself to cuddle your children respecting their needs and their moments.

Answer the following questions:

1. Do I hug, caress, massage my children? If so: how do I do it, when do I do it?

2. If so: how do I do it, when do I do it?

3. If not, why? what's stopping me? how can I start doing it?

4. Do I play with them in silence using only contact, my hands?

5. How do they react to my cuddles?

6. I have never asked my children what their favourite cuddles are.

Compare your answers with those of other parents.

Workout

Take some time to be alone and find a place where you feel peaceful and comfortable.

Answer the following questions:

1. When was the first time you felt like a parent?
2. Choose a significant episode in your life where you experienced the ability to "take care" and write it down.
3. How do I take care of my children? How much time do I invest in their care? (Indicate clear actions you do or will do).
4. And for taking care of myself? (Indicate clear actions you do or will do).

5. Do I take care of the world with them? how? (Indicate clear actions you do or will do)

Workout

Take some time to be alone and find a place where you feel peaceful and comfortable.

Answer the following questions.

1. If your family were a band, what would it be? what music would it play?

2. What dish would each member of your family be? And why would they have those flavours?

3. If you were the Avengers, what would you be? with what powers? And why?

4. Take magazines and with the collage technique together with your children represent your family.

Compare your metaphors with those of other parents and try to exchange them, how does it make you feel?

Workout

Take some time to be alone and find a place where you feel peaceful and comfortable.

Answer the following questions:

1. Today I asked myself what mistakes have I made and why? Did I tell them to my children?
2. Have I reflected on what lessons have I learned from today's mistakes? Have I asked my children what they have learned or how do they plan to avoid making the same mistake again in the future?
3. Did I tell the best thing that happened to me today? Did I ask them? What's the best thing they've done? And why is it the most beautiful?
4. During the story of my children, did I listen or did I often intervene? When and how did I intervene? talking to them

Compare your handling of mistakes with that of other parents and mark the things you can do to improve on this.

Workout

Do the exercise alone, and if you can also with your children:

1. Alone: for a week think about your fear (which can be faced) and everyday ridicule it with your imagination, make it funny. At the end of the week, reflect on how your perception of that fear has changed.
2. With your children: give value and importance to what scared them, tell them what scared you as a child and how you overcame that fear. Convey your presence to them and acknowledge the value of that fear with sincere words.

Compare your fear with that of other parents. Listen without judgment and embrace what they feel.

Workout

Do the exercise alone, and if you can also with your children:

1. Alone: If you have wronged someone, contact them, and apologize, fixing it in some way. you can also write a letter.
2. With your children: choose a good action to do all together for at least a week. At the end of the week tell the impressions, the emotions experienced and the best memories.

Workout

Do the exercise alone and if you can also with your children:

1. Alone: think at the last moment a conflict you had with someone (in family, at work, with friends) and review it by immersing yourself in the perspective of the other.
Add other perspectives to observe the conflict, that is, imagine other possible "characters" present and involved: adopt their possible point of view.
2. With your children: Tell them about a real problem (or possible, if you really can't find one) and share the feelings that this problem arouses in you.
Ask what ideas / solutions they can recommend. listen to their proposals, ask the questions necessary to understand their point of view and with them find the best way to find out where to find the necessary knowledge to evaluate the best options.

Workout

Do the exercise alone, and if you can also with your children:

1. Make a list of three things that make you so angry and three things that excite you a lot and put them in adjacent columns to highlight their polarity: reflect on how you automatically react to these stimuli and how you can take the time to listen to the emotions they arouse in you before acting when these events happen.
2. Stage the most recurring conflicts between you by making them impersonate puppets. During the play, have your character ask how the characters played by your children feel and why they are experiencing those feelings. Let the puppet tell the inner world of your children.

Workout

Do the exercise alone, and if you can also with your children:

1. alone: on the street he observes the faces of passers-by and tries to guess from their expressions the emotions they are feeling, or their thoughts.
2. with your children: If you are with your children have them first guess the emotions on the faces of passers-by and then express your opinion. Tell yourself why, in your opinion, that person is feeling that emotion at that moment: what story is he experiencing at that moment of his life?

Workout

Do the exercise alone, and if you can also with your children:

1. plan for the next week some acts of gratuitous, premeditated, and intentional kindness towards your children and towards a person you know little. Keep a journal of their reactions (expressions and / or gestures) and at the weekends write down how you feel and how the relationship has changed.
2. If your children are small, invent stories of kindness together, verbally, with puppets, dolls, puppets, where words like "thank you", "please", "sorry" are the protagonists. If your child's age permits, volunteer together.

Workout

Are you comfortable with emotions?

This exercise is a good way to start considering your habitual reactions to your and your baby's emotions. Consider, one after another, fear, love, anger, excitement, guilt, sadness, and joy. What feelings are you most familiar with? Which ones make you feel most uncomfortable? Which ones do you manage best? And what happens when they are directed towards you, or when you see them in others?

Emotions are useful, even negative ones. Think of the unpleasant ones as if they were spies on a dashboard. When the fuel warning light signals that you are low, your reaction should not be to remove the bulb so that it stops flashing, but to refuel the car for it to work. The same goes for emotions. In general, we shouldn't let them distract us, but we shouldn't choke them either. Let's try to listen to them and use them to find out what we need, to become aware of our desires and, if possible, try to make them come true.

Worksheet on: B) Child Protection - Safeguard - Keep children safe from violence and abuse

This second time to support parents against possible violence or abuse starts from the assumption that it is necessary first to know the problem: to become literate to be able to recognize it and prevent it.

Maltreatment can be expressed in:

1. Physical abuse.
2. Psychological abuse.
3. Witnessed violence.
4. Sexual abuse.
5. Online abuse.
6. Treatment pathologies (severe neglect / neglect, discuria, hyper-care).
7. Bullying and cyber bullying.

Physical abuse

Physical abuse refers to the intentional use of physical violence against a minor that causes or has a high probability of causing harm to health, survival, development or dignity, such as: assault, corporal or severe punishment attacks on physical integrity, on the life of the child / adolescent.

Due to a culture of punishment for educational purposes, much of the violence against minors takes place within the home and is inflicted by close relatives.

Very young children with disabilities or in need of special care are more vulnerable to the risk of physical abuse, which is often associated with social isolation of the family, lack of support networks, neglect, and psychological violence.

It should be emphasized that physical abuse does not always leave evident marks on the child's body and even when these are present, they may not be easily visible or immediately interpreted correctly.

The lesions can affect different organs and systems, configuring different clinical pictures (fractures, skin lesions, cranial concussion, and deep visceral damage) and pose complex differential diagnostic questions. A particular form of physical abuse is the Shaken Baby Syndrome (SBS), that is the violent shaking of the child (usually less than 24 months old) that causes serious injuries.

Psychological abuse

By psychological abuse we mean an emotional relationship characterized by repeated and continuous psychological pressures, emotional blackmail, indifference, rejection, denigration, and devaluation that damage or inhibit the development of fundamental cognitive - emotional skills such as intelligence, attention, perception, the memory.

It is a very insidious form of violence because it is difficult to detect and can be associated with other forms of mistreatment. This category also includes the involvement of the minor child in highly conflictual marital separations, which involve his active involvement in strategies aimed at denigrating, devaluing, alienating, rejecting a parent.

Over time, psychological abuse profoundly undermines the personality structure in formation, the child's and adolescent's sense of self-esteem, their social skills and, more generally, their representation of the world.

Witnessed violence

Violence witnessed by minors in the family environment means the experience by the child of any form of maltreatment, carried out through acts of physical, verbal, psychological, sexual, and economic violence, against reference figures or other emotionally figures significant adults and minors.

This includes violence carried out by minors on minors and / or other family members, neglect, and mistreatment of pets.

The child can experience such acts mainly in two ways:

- Directly: when they occur in his perceptual field
- Indirectly: when it is aware of and / or perceives its effects

Witnessed violence represents a highly predictive risk factor for other forms of maltreatment. In the most serious situations, mothers and children can be killed, also due to the tendency of the phenomenon to foreshadow itself as an escalation in terms of damage produced and dangerousness.

Sexual abuse

Sexual abuse refers to the intentional and interpersonal involvement of a minor in forced sexual experiences or in any case inappropriate from the point of view of the stage of development.

Such experiences may not involve explicit violence or injury; they can occur without physical contact and / or be experienced as observers.

Depending on the relationship between the child and the abuser, sexual abuse can be divided into:

1. Intra-family, implemented by members of the nuclear or extended family
2. peri-family, carried out by people known to the minor, including those to whom he is entrusted for reasons of care / education. These two forms of abuse are the most frequent.
3. extra-family, if the abuser is a figure extraneous to the family environment and to the minor.

Sexual abuse is rarely a violent act that leaves physical marks. Medical evaluation represents only an often-non-decisive aspect of a complex diagnostic process that must necessarily be multidisciplinary. Faced with the suspicion of sexual abuse, we remind you that in any case the assessment must be made in an extensive and complex way, analysing at least three areas: physical, psychological, social signs as well as spontaneous stories and statements of the alleged victim. In the face of frequent symptomatologic non- specificity, sexualized behaviours inadequate for the age of development are particularly indicative, especially if characterized by compulsiveness and pervasiveness.

Sexual exploitation

A particular type of sexual abuse is represented by sexual exploitation. It is the behaviour of those who receive money or other benefits, by individuals or organized criminal groups, aimed at exercising:

1. child pornography: any representation, by any means, of a minor in specific sexual activities, real or simulated, or any representation of the sexual organs of a minor for primarily sexual purposes;
2. child prostitution: the minor is forced to perform sexual acts in exchange for money or other benefits;
3. sex tourism: a "sex tourist" is defined as someone who, in order to have sex with minors, organizes vacation (or work) periods in countries that not only tolerate child prostitution, but often advertise it to attract tourists and thus collect hard currency.

Abuse "online"

The habitual use by children and young people of new technologies and of the internet, if on the one hand it represents an opportunity to expand the possibilities of experience and relationships, on the other hand it has changed the ways of communicating and revealed the scenario of possible forms of violence, including very serious ones, such as sexual abuse. Recent research has highlighted the extreme diffusion, even in our country, of the use of the internet by the new generations, and how conditions are spreading that expose young people to real situations of risk of sexual victimization.

By "online" abuse we mean any form of sexual abuse of minors perpetrated through the internet and the documentation of images, videos, recordings of explicit, real, or simulated sexual activities.

Forms of online sexual abuse of minors include:

1. off-line sexual abuse documented with videos / images and disseminated online;
2. grooming, occurs when the adult, with manipulative methods, induces the minor to establish a relationship by instigating him to perform sexual acts online and / or to obtain an offline sexual encounter;
3. cybersex, in which the adult and the minor perform sexual actions exclusively via the web;
4. sexting, in which two or more minors produce and consensually exchange messages, images or videos of a sexual nature which, if disseminated by them or by other minors via the internet or mobile phones, can be used by abusive adults. The network allows the diffusion of the images in a huge telematic circuit, the access of the images of the abuse by many people and the possibility of downloading them.

Pathology of care

By pathology of care we mean those conditions in which the parents or the persons legally responsible for the child do not adequately provide for his physical, mental, and emotional needs, in relation to the developmental phase and includes:

1. Severe neglect / neglect

Serious neglect / neglect means any omission produced by a serious inability of the parent to provide for the needs of the child, which entails an imminent and serious risk for the child, such as abandonment, rejection, serious impairment of physical, cognitive, emotional development or other forms of abuse and violence, up to death. It is often undetected and poorly recognized, frequently associated with other forms of maltreatment. Protocols and recommendations produced to combat the phenomenon are still scarce, despite the fact that it is now shared and recognized by the scientific literature that serious neglect can be no less harmful than other forms of mistreatment.

2. Discuria

It occurs when the treatments are provided in a way that is distorted, inappropriate or congruent with the evolutionary moment, such as to induce an anachronism of the treatments, the imposition of early acquisition rhythms, irrational expectations, excessive overprotectivity.

3. Ipercura

It occurs when physical care is characterized by a persistent and excessive medicalization by a parent, generally the mother, and the following forms are distinguished: " Medical Shopping by proxy" is a condition in which one or both parents, very worried about the state of health of the child due to modest signs / symptoms, subject him to unnecessary and excessive medical consultations. " Chemical Abuse " are administered to the child by the parents, on their own initiative, substances or drugs that can be harmful to cause symptoms that attract the attention of health professionals. " Münchausen syndrome by proxy (MPS)" a parent, generally the mother, attributes to the child non-existent diseases, the result of a distorted

belief about their own health, then transferred to the child who subsequently tends to collude with this attitude by simulating the symptoms of diseases. Diagnosis is often difficult and late, thanks to the frequent disbelief and involuntary collusion of doctors, and high mortality.

Bullying and cyberbullying

The term bullying defines those offensive and / or aggressive behaviours that a single individual or more people carry out, repeatedly over time, to the detriment of one or more people with the aim of exercising power or dominion over the victim.

This definition must consider the concept of intentionality on the part of the perpetrator of the offenses, real forms of abuse that create discomfort and physical or psychological damage in the victims. The difference between normal disputes between children or adolescents and actual acts of bullying consists in the predetermination and intentionality that characterize the latter, in the repetition over time, as well as in the satisfaction that the perpetrators of such abuses derive from them, in the imbalance of power between the bully and the victim, with the assertion of the bully's supremacy over the victim in terms of age, physical strength, number, etc ...

The phenomenon of bullying is essentially a group dynamic based on prevarication and is especially evident among classmates in the first classes, that is, when the students do not yet know each other and have to find a way to feel good together. Bullying as such is not a hypothesis of crime provided for in our criminal law but very often the bully commits crimes against the victim (examples: crime of threat, extortion, aggravated violence, etc.) Sharp and Smith (1994) highlight the following forms of bullying depending on the type and intensity of aggressive behaviour:

1. physical (beating, pushing, physical bullying)
2. verbal (insults, blackmail, intimidation, harassment, insults, calling with offensive names),
3. indirect (social manipulation that consists in using others as means rather than attacking the victim in the first person, for example annoying and offensive gossip, the systematic exclusion of a person from group life, etc.).

The misuse of new technologies to intentionally target defenceless people has been called "cyberbullying". It describes an aggressive, intentional act conducted by an

individual or group using various forms of electronic contact, repeated over time against a victim who cannot easily defend himself.

The attacker can act anonymously and can spread the offenses through the web reaching a potentially unlimited audience.

Below we propose some useful cards for parents to deconstruct some of their own attitudes introjected by the dominant culture and, in this way, strengthen the self-determination of the son and / or daughters.

Workout

Sometimes when your daughter or son tells you "No" you tend to use phrases like these:

- "If you loved me ..."
- "If you really loved me ..."
- "Can't you see how you make me feel bad ..."

Phrases like these make the interlocutor feel guilty. In the case of children, in addition to the sense of guilt, there is a risk of developing submissive condescending attitudes that would make them easy victims.

Workout

When your daughter or son doesn't want cuddles:

- Insist?
- Do you cuddle him / her equally by hugging him / her thanks to the disparity of strength ignoring his no?
- When you meet a relative, do you urge your child to say hello by giving or receiving a kiss even if it doesn't go?

It is important to respect children's bodies and get them used to consent by respecting their "no", in this way they will be able to identify independently the times that an adult has exaggerated.



Parenting with confidence – Inspiring practices from the partner countries

“PADRI E FIGLIE. ALLENARSI ALLA PARITA” - ITALY

Fathers and daughters: training for gender equality, a methodology by Girolamo Grammatico, Parental coach

Target groups: Parents and children

Focus: The overall goal is to favour gender equality from an early age

Objectives: What does it mean to educate a little woman? How is gender equality taught in the family? Girolamo Grammatico, expert Coach, since many years, as a writer and trainer helps his trainees (trainers and parents) to reflect together on what it means to be a father today, especially when it must be for a child. His book “Fathers and daughters. Training for gender equality”, is - quoting the same – a “humanistic” coaching book to train the abilities of fathers to make this society a place that welcomes our daughters (and our sons) and allows them to develop their potential, so that each one realizes herself and can be happy, free, and autonomous.

Methodology: Girolamo founds his work on the achievement of a new paternal awareness. Being a father, today, also means carrying on a specific “male model”. A necessary model to educate the young women of the future and, above all, young men. What does this mean? Educating for inclusion and gender equality. Educating for freedom.

Impact: As a dad and coach, Girolamo is daily involved in dealing with other fathers on issues related to women starting from the awareness that we have inherited patriarchal paradigms that we often do not realize. For Girolamo, as a father and as a coach, the study and practice of intersectional feminism was fundamental during the last decades. In this sense, Girolamo has written two very significant books, flanked by an admirable coaching job where he precisely deals with parenting. The books in question are “#esserepadrioggi. Manifesto of the imperfect father” and “Fathers and daughters. Training for gender equality” (Ultra edition).

Conclusion: After a 20-years career, the stereotypes he works against most:

The daughter is seen as a princess to be "embellished" and "protected" by obscuring the possibility of seeing the whole spectrum of alternatives;

the other is to see her as a future mother, framing her in a single role and struggling to consider that this can don't even happen as our daughter's free choice. The challenge is to educate and raise our daughters by allowing them to freely self-determine.

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“ASSO METI” - ITALY

Association for the protection of those who have suffered abuse in childhood	
Target groups:	Parents and children
Focus:	Promotion of a different, emotional information, which transmits what it means for a person and a boy or girl to be subjected to violence.
<p>Objectives: Meti was born from the awareness that the subject of sexual abuse in childhood can no longer remain relegated to the secret of the studies of the specialists in the suffering of the body and soul, or within the trial files of the Courts, but, on the contrary, it must be brought to the sunlight so that everyone can know what it is and, above all, what can be done to prevent the phenomenon from continuing unchallenged.</p> <p>Methodology: The Association works via self-help groups and art therapy. Among the main objectives of the organisation there is the dissemination of information on the topic dealt with, with particular attention to prevention and therapies that can be implemented to overcome the discomfort caused by the traumatic event, through the organization of awareness-raising meetings. It is a series of initiatives aimed at addressing the issue of abuse in childhood and the trauma that derives from it.</p> <p>The programme usually unfolds through 3 or more meetings:</p> <p>The 1st meeting includes the intervention of a psychologist / psychotherapist, who will talk about Post-Traumatic Stress Disorder, to learn to recognize it, talking about the different forms it takes and the discomforts it creates, and to help to know the different possible paths support and care;</p> <p>The 2nd involves the intervention of a sociologist or a lawyer, to illustrate the legislation in force and the rights and duties of citizens, since, often, when a victim decides to undertake a judicial process, he totally relies on institutionally responsible figures, without knowing thoroughly their rights.</p>	

The 3rd meeting foresees the presentation of the A.M.A. and the other activities that Meti proposes to take care of victims of abuse.

Impact: The association collaborates with public and private actors (cooperatives, medical structures, etc.) and every year supports hundreds of children, adults who have suffered violence from young people and relatives of children who have suffered violence.

Conclusion: One of the most difficult goals for an adult victim of childhood abuse to achieve is the courage to show others their scars. It is important that these traumas emerge in time and face them with delicacy and professionalism.

Contact:

Website: <https://www.assometi.org/home>

TOY FOR INCLUSION PLAYHUBS - SLOVAKIA

Toy for Inclusion Play Hubs are well-furnished spaces that provide a safe environment for children to play and learn, and for their parents to socialise and learn about relevant topics whilst at the same time building their trust in the institutional environment

Target groups:	Roma children (0-8) from socially disadvantaged and culturally diverse environments, their parents, local stakeholders (mayors, councillors, community leaders, elderly community members), professionals and paraprofessionals working with Roma children.
Focus:	The overall goal is to combat segregation of young Roma children and families and enhance social cohesion through inclusive community-based ECEC services. The project promotes active involvement of Roma and non-Roma communities in ECEC services through the development of ECEC Play Hubs that provide access to quality non-formal ECEC service.

Objectives: The initiative strives to improve the responsiveness and accountability of local authorities towards marginalised Roma communities, build the capacity of local authorities and Roma community representatives to develop and implement inclusive policies and public services, strengthen Roma families by supporting Roma parents in their efforts at raising children in a safe and caring family environment. It provides parents with information, social skills and knowledge on early childhood development and effective parenting techniques, helps improve communication and understanding between parents and children, and promotes positive parental attitudes towards education. It aims to increase the level of enrolment of Roma children in kindergartens, improve mutual tolerance between Roma and non-Roma parents, broaden the range of educational materials for children from marginalised Roma communities, build trust between all the involved stakeholders, teaches children to meaningfully spend their leisure time, helps Roma parents prepare their children for school, and improves social skills of Roma children and their results, behaviour, and school attendance.

Methodology: The project uses stakeholder mapping, analyses of local needs and challenges, formation of Local Action Teams, training of trainers, training of practitioners, implementation of community-based non-formal educational activities, and a home-visiting programme all realised from the 4 existing Play hubs.

Impact: 200 Roma children (aged 0 – 8 years) and their families (80 families); 100 non-Roma children (aged 0 – 8 years) and their families (60 families); 10 ECEC trainers; 80 educators, ECEC practitioners, volunteers.

Conclusion: The project activities have led to increased self-esteem and pride of children and their families, parents and grandparents have become more confident in their parenting skills and their participation in ECEC services and local community life increased. They helped create better conditions for learning and development in inclusive and welcoming ECEC environments and facilitated better cooperation with families and communities. They reduced segregation of Roma, helped local and national stakeholders to gain knowledge, understanding and skills to be able to enhance social cohesion and combat segregation, led to increased parental and multi-generational involvement through joint activities between Roma and non-Roma families in formal and non-formal ECEC settings, and improved transition experience of children. ECEC professionals acquired new skills and tools to build bridges between different cultures. At the same time, the agency and visibility of members of the Roma community have increased and their voice and needs are now better represented.

Contact:

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PLATFORMA RODÍN DETÍ SO ZDRAVOTNÝM ZNEVÝHODNENÍM – SLOVAKIA



PLATFORMA RODÍN DETÍ SO ZDRAVOTNÝM ZNEVÝHODNENÍM

Short description: in one sentence, what makes this service / approach a good practice?

For children with disabilities, their diagnosis is not the only problem. As a civic association, Platforma has been helping their families since 2016, building relationships with professionals and advocating for changes in the system. In addition to providing the necessary information, they also offer the perspective and support of parents who have experienced a similar situation.

Target groups:

The civic association has been set up to help families of children with disabilities, the target group are parents of these children and the children aged 0 - 18

Focus:

Psychological help, mentoring, coaching, support services, advocacy

Objectives: The Platform of Families of Disadvantaged Children is a civic association with a nationwide scope of activity. Its vision is for all families of children with disabilities to be respected and live a full life in society. It supports families of children with any kind of disability, communicates their needs and advocates for their rights, and sensitises the public to disability.

The organisation was founded in 2016 and helps families because 5.2% of children in Slovakia live with a disability. The life of their families in our country is full of disadvantages. They do not receive adequate support after diagnosis, children's development is not sufficiently supported, children's chances of going to school are low, care and support services are hardly available. One parent usually stays at home with the child, leading to financial and psychological exhaustion for the family. It is in these seemingly hopeless situations that Platform helps. As well as providing information on children's rights, it can also offer insight and support from parents who have been in a similar situation, as they are themselves parents of children with disabilities and have needed help in the past.

Methodology: The platform offers a comprehensive package of services for families of children with disabilities.

- An information portal for parents of children with disabilities and professionals working with them. It is the only portal in Slovakia where you can find all the information about the rights of children with disabilities and their families in one place. The menu of topics includes detailed information with links to specific legal texts and to sample applications and appeals that the parents may need.
- A sub-page outlining the services available to care leavers from Ukraine who are caring for a child with a disability.
- Help from lay counsellors for parents of children with disabilities who need help and advice from someone who has been through similar situations and can guide them correctly, in the form of a telephone helpline and email support. They are also parents of children with disabilities and have valuable experience and knowledge to share. They adhere to a code of ethics and have completed 120 hours of training with professionals to make sure their advice is safe and really helps you. The lay counsellor will refer you to professionals if necessary.
- Information on how parents can develop their children in the home environment, tips for daily activities, parenting tips, webinars.

Impact: Around 500 parents a year contact the organisation with suggestions, mostly about what is missing or not working for them and their children with disabilities.

The organisation carries out more than 150 activities a year to communicate these needs. It has won the Social Action of the Year 2019 and Purple Heart 2020 awards for the support it provides to families.

Conclusion: In its work, the Platform combines the experience of parents, partners, experts, NGOs, and its own mission. It is building a strong organisation that brings together families of children with disabilities, NGOs, and the state for the ultimate goal of bringing the majority population together with people with disabilities and their families.

Website: <https://www.platformarodin.sk/>

DETSTVO DEŤOM - SLOVAKIA



The Detstvo deťom parental centre in Dobšiná is a unique project and an example of a comprehensive approach to ECEC

Target groups: Babies and young children aged 0 - 3 years, pre-schoolers aged 4 - 6, zero graders, younger pupils; girls at risk aged 11 - 15 years (future mothers), young parents (Roma from the socially disadvantaged community), pregnant women, experienced mothers from the community who work as peer-activists and mentors of early intervention in the community and in the home environment of the families

Focus: Domček family centre provides early intervention for Roma children (who speak Romani) from socially disadvantaged backgrounds trapped in the cycle of poverty. It focuses on children, their parents, and the whole family. It helps parents provide an optimal environment for the development of their children and prepares children to start compulsory schooling at the age of 6 and thrive in the school environment.

Objectives: Detstvo deťom civic association was founded by two local teachers - Norika Liptáková and Erika Polgáriová. They opened the Domček parental centre in December 2013. The association strives to ensure that children from socially disadvantaged backgrounds stand a real chance of having a dignified and carefree childhood and acquire the basic skills and habits necessary to lead a successful life.

Methodology: The employees work directly and regularly with children, mothers/parents, and the whole families from the community in both the family centre and their homes. The work is

implemented by experts but women from the local Roma community are actively involved as peer activists and mentors working in the home environment of the families.

The family centre offers a whole range of activities:

- Amalky - direct work with babies, toddlers and preschool children and their mothers in their homes, carried out by “Amalky”- peer activists and mentors from the community
- Mothers' Club - direct work with babies and children up to 3 years of age and their mothers in the family centre, led by a social work student involving mentors from the community
- Montessori club - direct work with children aged 1-4 and their mothers in the family centre
- Montessori activities are led by a certified lecturer, mentors from the community are involved
- Creative Montessori workshops - where mothers make simple toys and teaching aids from commonly available and waste material based on Montessori principles
- Preschoolers' Club - direct work with preschoolers aged 3-5 (6) years and their mothers focusing on the school readiness of children led by a social work student. Mothers from the community are involved.
- counselling for mothers/families with newborns in the family centre and their home environment, with the involvement of mentors from the community
- guidance for minor and teenage first-time mothers with the involvement of more experienced mothers from the community
- Babinec club - direct work with girls at risk aged 11 - 15 years, led by a teacher and a school psychologist; meetings of the club focus on relationships, planned motherhood, and other topics like early care, pregnancy, hygiene, nutrition, building a relationship with the baby.
- Toy for Inclusion Play hub
- educational activities
- preparation of methodological materials
- cooperation with different actors including Early Intervention Centres in Košice and Rožňava, cultural centres in the surrounding towns, the kindergarten and primary school in Dobšiná, field social workers, health educators, and other organisations.

Impact: 230 people/140 children

Quality is measured through regular interventions and testing of the children involved in the long-term activities in cooperation with the Centre for special educational counselling.

Outcomes: The children show progress in all areas, they become more confident preschoolers and successful and confident schoolchildren with better knowledge of the language of instruction. The parents become more independent, confident, competent, responsible, and able to efficiently manage their households and family finances. Women are more empowered, the quality of their life is better, and they show growing interest in the activities, counselling, and information about early childcare.

Conclusion: More positive examples in the community lead to elimination of prejudice, gradual positive changes, respect and acceptance of otherness and diversity in the society.

Contact:

Detstvo deťom, Dobšiná, Slovakia, website: www.dede.sk ;

<https://www.facebook.com/DetstvoDetom>

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ONE PARENT – SLOVAKIA



Short description: in one sentence, what makes this service / approach a good practice?

One Parent supports single-parent families. It strives to improve the lives of single parents and their children through real help and improvement of conditions in the social system of Slovakia and in society.

Target groups:

Single parents and their children

Focus:

Material help, psychological help and support, advocacy

Objectives: This organization was founded in 2018 by parents and people who live the life of a single parent or know how challenging it is for these families. They decided to start the non-profit organization, SINGLE PARENT, because they want to make a positive change for single parents and their children. It is the first and only organization that helps families where only one parent is present when raising children. The other parent has moved away, divorced, and is not equally involved in the upbringing of the children, is not claiming the child or has died. This topic touches a large portion of the society with every fourth child living in a single parent household.

The main objectives are:

- To shorten the difficult period in life so that children and parents can make a new start.
- To improve and enhance the living conditions of single parent households.
- To minimise any negative impact on the lives and well-being of children growing up in single-parent families.
- To establish centres where single parents and their children can seek help and meet regularly.

- To launch an online platform where parents can learn, get information, and download applications.
- To advocate for changes in the welfare system in Slovakia.
- To legally recognise single parents raising one or more dependent children, who deserve increased attention from the state and public institutions due to their increased risk of poverty and social exclusion.

Methodology: The organisation's activities are built on the values of perseverance, trustworthiness, education, fairness, and teamwork. Parents can register with the organisation and registered parents are then provided with specialist services and advice through a comprehensive annual support programme that enables the family to improve their living situation with the help of professionals. In collaboration with its partners, the organisation provides food aid for single parents and their children who find themselves in a difficult life situation.

Interesting information on psychology, health, work, law, finances, child rearing and relationships is available for registered parents.

The parents are provided professional help from the experts:

- a social worker, a psychologist, and a coach to overcome the greatest crisis and fear and to gain the necessary calm, confidence, and willingness to move on and live and raise children to the best of one's abilities.
- a lawyer and a mediator to help communicate with the ex, set rules for childcare, and calm an often tense situation.
- a family financial counsellor to help set up a family budget for a 1-income situation to avoid a possible collapse of family finances and to be able to build up a reserve from even a little.
- a career counsellor to re-discover and re-establish one's strengths, skills, and prepare the clients to find the job and income they and their children need.

Impact: In 2022, the NGO has helped 100 families through their annual comprehensive assistance program. In addition, they have helped more than 600 families with food and humanitarian assistance. For the three years of its existence they have helped more than 2,000 people.

Conclusion: What are the key success factors, resources and requirements needed to replicate this service/ tool/ approach in other organisations at the national and international level?

The non-profit organisation ONE PARENT is developing cooperation with the 3rd sector and businesses to get support for single-parent families and to ease their difficult life situation. It is important to create synergies between individuals and organisations that are interested in helping the target group and who have interesting ideas on how to help the single parents. These people need timely and comprehensive help, and the organisation has been providing it in different forms very successfully.

Website: www.jedenrodic.sk

NÁVRAT - SLOVAKIA

FOR CHILDREN TO GROW UP IN FAMILIES AND LONG LASTING AND SAFE RELATIONSHIPS.

With their own parents or in substitute families.

Target groups:	children, parents, substitute parents
Focus:	Návrat (Return) is a non-profit organization established in 1993, which advocates and supports the return of children from institutional care into families. A child needs to grow up with parents, no matter whether these are biological or adoptive parents.
<p>Objectives: Since 2006, Návrat has been working with families who find themselves in an unfavourable life situation, the so-called family rehabilitation. In close cooperation with the staff of the social protection departments of the Social Welfare Office, the staff of municipal and municipal authorities, children's homes, schools, psychological counselling centres and other interested professionals, it is building services for children and parents to improve their quality of life and to support the relationships and bonds necessary for healthy family functioning. Their services aim at "kick-starting" families into self-help by strengthening and stabilizing family members and activating the family's natural resources. Its team consists of more than 25 professional workers (social workers, special education teachers, psychologists) who offer complex professional services in 6 regional centres. Návrat is active in four main areas: substitute family care, help to families in difficult situations, inspirations for parenting, systematic solutions.</p> <p>Methodology: The organization's long-term goal is to help adjust and restore the family and social situation of children at risk of being removed from their families or children who do not live with their families and are usually in institutional care (in an orphanage, a re-education home, a diagnostic centre or in a professional family). In order to meet this goal, the following services are implemented: Social and socio-legal counselling, Educational counselling, Social and pedagogical guidance of the family, Counselling on how to deal with the family's financial situation, Accompanying the family in contact with institutions, Activating the family's support</p>	

network, Family mediation, Finding and arranging other services for the family (psychological services, psychotherapy, speech therapy, etc.), Networking family services, initiating the creation of multiprofessional family support teams, initiating, organising and conducting case conferences, Advocacy of rights and legally protected interests and, where appropriate, mediation of legal aid, Arranging material assistance in justified cases, Arranging practical help from volunteers (tutoring children, meaningful leisure time, etc.), Specific programmes: touch therapy, filial therapy, ART (aggression replacement training) programme, art therapy, etc.

Návrat also strives to provide services to these families on a continuous basis. An important dimension of these services is their individual nature - the intensity, length of provision and choice of services are tailored to the needs of the family. Quality collaboration is dependent on the trust earned with the family and their willingness to work towards change, so we place an emphasis on building a trusting collaborative relationship with the family. A specific service in the area of family support provides residential activities for children and families. As the problems of children are deeper, it is essential to combine educational programs for children with support programs for parents.

Impact: Návrat is actively searching for new surrogate parents and provides them with accredited preparation. It has found a surrogate family for more than 1000 disadvantaged children (older age, other ethnicity, handicap, health problems, etc.). It provides long-term social, legal and psychological counselling and specialized therapies to more than 500 surrogate and foster families. It has helped more than 350 children from families in crisis across Slovakia and prevented removing the child from the family. Návrat focuses on lobbying activities, takes part in commenting laws and forming practices in the field of children's rights by examples of good practice and training.

Contact:

Návrat, o.z., website: <https://navrat.sk/en/>, Contact person: name - position,
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NTC PROGRAMME – EARLY STIMULATION, ADVANTAGES AND SIGNIFICANCE - SERBIA

The programme is based on the latest findings in neurophysiology. It entails teaching parents and those who work with children up to three years of age. They can utilise the acquired knowledge in daily activities and thus provide the children with precious help in growing up. The programme includes presentation of scientific evidence, positive and negative examples, knowledge and experiences of the author, practical advice, and exercises. All of it affects the participants urging them to apply the new knowledge on their children.

Target groups:	Nursery teachers, Expecting mothers and parents of children up to three years old
Focus:	psychological/mentoring/coaching support services, innovative services/ tools

Objectives: NTC centre started this programme based on the newest research findings in the field of neurobiology and pedagogy. The main goal is to inform and empower parents to understand and make use of the importance and necessity of proper early stimulation for the development of children's motor and cognitive abilities.

Methodology: For the nursery teachers, this is a full two-day training, whilst for the parents and future parents; it is a shortened and simplified one-day training. Only the specialists in the programme do it on an individual, small group or medium-size group level in person. The programme has been implemented in 17 countries in Europe, including Serbia. The programme started in Serbia, it was developed by Dr Ranko Rajovic and then through NTC Centre, it has been adapted for many other countries. It covers the following topics: Development of Child's Potential; A Good Start; The Power of Communication and Through Play into the World.

The main challenges are that this training is mainly done in bigger towns and needs to be paid for.

Impact: The main outcomes are parents much better prepared for positive parenting and they can utilise the acquired knowledge in daily activities and thus provide the children with precious help in growing up.

Conclusion: The programme has been very successful; in seven countries it is accredited by the relevant ministries, and it is very practical.

Website: <http://ntclearning.com/ntc-early-stimulation/>

CARING FOR CAREGIVER - SERBIA

This practice builds on the strengths of the parents to help them better connect with their children. The Caring for the Caregiver package equips frontline workers with tools to help parents and caregivers manage stress, focus on self-care, engage in conflict resolution, organize daily routines, and share parental responsibilities. When their mental health and emotional well-being are supported, parents are better placed to provide nurturing care, engage in playful interactions with their young children, and help their children develop and learn through daily activities filled with love, connection, and joy. By supporting parents, the Caring for the Caregiver package also helps them better connect with and support their children and strengthens the parent-child relationship.

Target groups:	Primary caregivers, patronage nurses, nursery teachers, social workers, parents, children 0-2 years of age
Focus:	Every parent has strengths and talents. The Caring for the Caregiver package focuses on building on these strengths and identifying unique solutions and opportunities to overcome challenges. By empowering parents, it is creating the best start for every child!

Objectives: In accordance with evidence from the Lancet and UNICEF recommendations on Early Childhood Development and Nurturing Care, preventive support for caregiver health and emotional well-being is key to optimal child development. Yet there is currently very little support for caregiver emotional well-being in resource-constrained low- and middle-income countries. To tackle this issue, UNICEF is developing a Caring for the Caregiver (CFC) training module. The CFC aims to build front-line workers' skills in strengths-based counselling to increase caregivers' confidence and help them develop stress management, self-care, and conflict-resolution skills to support their emotional well-being.

Methodology: The training course consisting of different modules for patronage nurses, social workers and nursery teachers has been developed and implemented through training course held either in person or online. They can be delivered through various training methods and adapted to train other service providers. These modules empower home visitors to take a strengths-based approach that promotes nurturing relationships between the caregiver and child as well as contributing to risk

reduction by supporting and referring families to other services when necessary.

The modules are accompanied by several supporting tools. They provide ample opportunity for the learner to be actively engaged in reflection and deliver guidance on the knowledge, skills, attitudes, and practices required for home visitors in their “new and enriched role”. These tools can support home visitors to work in partnership with families, to support parents and caregivers, and empower them to provide the best possible environment for their young children.

Training objectives:

At the end of the training frontline workers should be able to:

1. Establish relationships with caregivers and raise emotional-awareness and coping skills.
2. Strengthen caregivers’ and families’ capacity to problem solve, deal with conflict and access community supports.
3. Demonstrate simple, user-friendly day-to-day activities that engage families and build caregiver confidence.

Impact: Experts working with families now realize that if they take care of parents, they are also taking care of the children. They’re trained to provide support to parents on their parenting journey from the very beginning - from the maternity ward to home visits, during paediatrician appointments, and also when children start attending preschool and other community services.

Conclusion: The programme builds on the parents’ strengths; it promotes sharing of responsibility between parents and also with other broader family members; it helps primary caregivers understand and implement activities that help their own mental health and assists in acquiring skills to balance parenthood with their own needs.

Website: <https://www.unicef.org/serbia/en/stories/supported-parents-help-children-thrive>

FAMILY SKILLS - SERBIA

Short description: in one sentence, what makes this service / approach a good practice?

The training material was realized for full online usability, that includes the use of virtual reality (VR) and augmented reality (AR) techniques: these training delivery techniques have proven to be, according to the scientific literature of the last years, much more effective in terms of achieving learning outcomes, for being experiential, immersive, and influencing the individual's training.

Target groups:

It foresees a specific support and training action addressed to public and private operators (as adult educators) called to organize and manage training courses of parenting skills, and to sensitise parents' orientation and motivation to participate. Focus is on parents to be and parents of children 0-6 years of age.

Focus:

CVET/ CPD (Continuous professional development)/ staff training; psychological/mentoring/coaching support services, innovative VR and AR tools

Objectives: Family Skills project is based on a clear need identified during the planning and design of the intervention activities, of a lack of actions to support positive parenting, based on scientific evidence and innovative learning methodologies, which are considered necessary in the asset of parenting skills. The objectives of the Family Skills project are:

- To help adults (parents, family members, social workers) to acquire the necessary skills to become effective educators;
- To support parents in their children's education through learning pathways and empowerment of parental skills (but also of educators, teachers, and adults in general), characterized by interactive and innovative educational kits, which use virtual and immersive reality to foster skills development.
- Increasing awareness and knowledge of the needs and development of children and families through audio-visuals and ICT materials, with particular emphasis on virtual reality as a tool for experiential learning.

- To promote a public-private network ability of collaboration, to support parenthood through training, social and relational networking, also through the diffusion of self-organizing family models.

Methodology: Three sets of material have been developed and provided: 1. Interactive training path to learn parental skills; 2. Digital tool to self-assess one's own educational styles and parental skills; 3. Designing a path to promote parenting. Initial training for the public and private operators is useful to guide them through the developed material. All the material is available in VR and AR form so that the parents can use them at their own convenience individually or as a couple, and even in small groups. The implementation was at international level, in Italy, Poland, Romania, Poland, Serbia and Greece.

Impact: The impact is better understanding of parents what their educational styles look like, what, and how influences their parental styles and how to address various issues related to positive parenting, disciplining children, exposure of young children to digital environment, and other topics.

Conclusion: The key success factors are related to enabling the parents to self-assess their own knowledge, skills, and parenting styles, to look for the answers to their questions and understand the process of their children's development without being exposed to external judgement or frustration. This makes the resources and a learning path much more accepted and enables wider use of them in different countries.

Website: <https://www.familyskills.eu/en/>

SURE START CHILDREN'S HOUSES AND EDUCATIONAL PROGRAMMES - HUNGARY

<p>Roma children, growing up in disadvantaged and segregated families are in a very difficult situation as low education and unemployment are passed from generation to generation. Efforts to bridge these gaps as early as possible can have a significant impact and positive implications for the educational attainment of Roma children and the Roma population in Hungary.</p>	
<p>Target groups:</p>	<p>The Sure Start Programme focuses on children under seven years old, with particular emphasis on those up to the age of three and their families.</p>
<p>Focus:</p>	<p>Hungary's 'Sure Start' centres offer vital support to vulnerable pre-school-aged children across the country. Specialised centres offer a wide range of services for children aged 0-3 – and their parents – in a safe and friendly environment.</p>
<p>Objectives: In Hungary, most mothers (and in some cases fathers or grandmothers) stay at home until the child is three years old. However, very few services have been provided for them and there have been very few grassroots initiatives for community-based programmes such as mother and baby clubs, toy libraries, play groups, etc. Mothers with young children are at high risk of isolation, although there is very little data on maternal mental health.</p> <p>The expected outcome of the services provided by Sure Start Children's Houses is to prevent or help to catch up with developmental delays, ensuring better opportunities for all children, by supporting parents to learn about the developmental needs of young children and by providing professional support.</p> <p>Methodology: The Sure Start Children's Houses methodology was first introduced in England in 1999 as a service for families with young children, providing a friendly and welcoming environment where parents and children can spend time together. They are also a place where</p>	

families can wash and eat, where parents can meet with professionals who can support them and help them improve their parenting skills, and where they can look for work.

Sure Start Houses provide a range of services to the families who use them. There are bathrooms and washing machines, as many families do not have running water or a bathroom at home. Kitchens allow parents and staff to cook together, prepare healthy food and celebrate holidays, birthdays, and name-days. Computers are available for parents to use in their search for jobs, training opportunities or other information.

Impact: The first Houses were open in Hungary in 2003 and the programme has been running ever since. Since 2013 the programme has been funded by the state whilst the municipalities are responsible for setting up the space. There were 112 Sure Start Houses in operation in 2020. T-Tudok Inc evaluated the performance of Sure Start Houses in terms of the programme's impact on children's development and parent satisfaction. An additional review provided insights into the services and experiences of participants. The research has a territorial, public health and Roma focus and aims to collect good practices from the beneficiaries.

Conclusion: This programme, even though it currently functions a bit differently than originally foreseen, remains a good practice helping to bridge the gap between the Roma and majority population in Hungary with positive effects on the target group.

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PARENTS HOUSE - HUNGARY



15 years, over 100,000 families reached, 150 places for children in family like nurseries, 6 family centres, 20 family like nurseries, over 1000 camp supervisors and volunteers, over 100,000 followers

Target groups:	Parents
Focus:	Parenting training

Objectives: The cultural community innovation of Parents' House was launched by Judit Regős, a social politician, social worker, and counsellor. Her original aim was to help parents and support families who otherwise could not afford such a service. She has created a place where not only children can play, but also their parents can relax.

Methodology: The Parents' House is not just a playhouse, it is a place where parents are welcomed together with their children, and we work with them in a structured way, helping them to become a more cohesive family. Judit saw that many mums were lost in the mass of information, so she tried to help them first and foremost with her expert colleagues. Professional assistance is available on the spot, while children are also looked after.

Impact: The system is about helping the whole family in a complex way, not treating the child and parent separately, but supporting them as a unit, as one big family. It provides a solution for the whole family, giving everyone the support, they need. All this is done according to an individually tailored methodology.

Conclusion: A young (20 years old) organization with a huge success.

Website: <https://szulokhaza.hu/english/#>

Contact person/ Email: szulokhaza@szulokhaza.hu

MESÉD PROGRAM / YOUR STORY PROGRAM - HUNGARY



For preventing school disadvantage, provide support and training for the parents and, in particular, Roma mothers by reading children's story book.

Target groups:	Roma and other disadvantaged mothers
Focus:	Literacy education

Objectives: Meséd is based on the well-established fact that parental engagement is essential for successful pre-primary education and that the academic performance of children is correlated to the attitudes and literacy skills of their parents. To improve the participation of Roma and other disadvantaged people in the educational system at all levels – and thereby increase outcomes of equity – we need to provide support and training for the parents and the mothers who, in most cases, stay at home with the children and have the most influence on them.

Methodology: Every week the mothers, after discussing and practicing reading a new book in a systematic method, are given the book as a gift of the project. Their task begins at home by reading the story to their children every night and using the skills they have learned in discussing the stories with their children. Thus, children become the other immediate and natural beneficiaries of the project.

Impact: They regain and improve their skills of reading and are encouraged to discuss and use the stories in a meaningful manner. In an atmosphere of support and acceptance, mothers begin to enjoy reading and talking about the stories.

Conclusion: One of the goals of Meséd is to eventually motivate and equip mothers to further their own further education.

Website: <https://mesed-yourstory.hu/en/>

Contact person/ Email: mesed@mesed-yourstory.hu

NEMECSEK PROGRAM / HINTALOVON ALAPÍTVÁNY - HUNGARY

The aim of the NEMECSEK Program is to help schools and other child-related organisations to have their own, „bespoke” child safeguarding policy.

Target groups:	Children, parents, and professionals
Focus:	Child safeguarding

Objectives: The aim of this program is to provide the well-being and safety of the children who are in contact with the given organisation and to exclude the possibility that the organisation may cause any harm to them during its operation. Accordingly, the internal policy offers a transparent framework within the organisation in order to effectively prevent, adequately handle and follow-up, at an institutional level, the abuse cases against children.

Methodology:

- online training material for children, parents, and professionals
- criteria and a manual for self-monitoring from a child rights perspective
- a guide on how to develop an organization’s own safeguarding policy.
- a template of a child safeguarding policy that can be used as a starting point for developing an own policy.

Impact: To provide online and free assistance to various organizations working with children to create their own child safeguarding policies. To provide complete support for schools, NGOs, and church-related organizations to elaborate and develop their own child safeguarding policies. This close collaboration also includes trainings for children, parents, and professionals on the most relevant issues of the child safeguarding policies (protection, prevention, abuse, violence, bullying, safe and secure environment, etc.). A follow-up is also part of the joint work:

the safeguarding policy has to be reviewed, monitored, and evaluated regularly by an independent organization.

Conclusion: Our long-term goal is community building. We strongly believe that the most effective way of improvement is to summarize our experiences and get to know the experiences of others.

Website: <https://hintalovon.hu/en/child-safeguarding-policy-program/>

Contact person/ Email: info@hintalovon.hu

SIMPLICITY PARENTING FOR CARE PROFESSIONALS - HUNGARY

Simplicity Parenting is a multi-layered, systems approach for decreasing cumulative stress in children's and families lives.

Target groups: Parents

Focus: Preventing stress in families

Objectives: Small, Doable Steps to a Simpler, More Connected Home Life

Methodology: Simplicity parenting provides an accessible, do-able set of simple changes in a family's way of life that can bring relief to stressed children and parents. These changes occur through: Simplifying environments: Reducing the number of toys, books, and clothes. Rhythm: Bringing more rhythm and predictability into a family's day, week, and year. Balance: In a child's life between down time, creative time and busy time and scheduled activities. Decision Making: Examining the trend to allow children to make too many decisions, too young. Filtering out: Making sure our children are only exposed to what is true, kind, and necessary for their developmental stage. Media influence: Finding ways to significantly reduce TV/computer time.

Impact: Today's "too much, too soon" culture takes the fun out of parenting and keeps children from having the kind of childhood that helps them thrive and be happy. Simplicity Parenting offers parents a different path.

Conclusion: Parents integrating Simplicity Parenting practices and strategies into their family lives experience positive outcomes including calm children who are more able and willing to learn and have greater resiliency, a deeper sense of family values, and a stronger sense of community.

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PART 2 HOME VISITING

SELECTION FROM RELEVANT LITERARY SOURCES

Home-visiting programs¹

Home-visiting programs have been offered for more than sixty years, with the aim of creating a safe and nurturing environment for new-borns and infants and preventing child abuse and neglect. Home-visiting programs involve the use of a professional (such as a nurse or social worker) or a trained paraprofessional or layperson to make regular visits in the home of a mother (or family) commencing prenatally or soon after the birth of a baby. Home visits are provided for anything from a few months to two or more years, with more visits (e.g., weekly) closer to the birth and fewer (e.g., monthly) as the child grows. The general aim is to improve outcomes for mothers and babies (Segal, Opie & Dalziel, 2012).

According to Segal, Opie & Dalziel (2012) home-visiting programs are now implemented widely, covering many thousands of families across the United States (Barth 1991; Bugental and Schwartz 2009; Duggan et al. 2004; Gessner 2008; Hardy and Streett 1989; Lutzker and Rice 1984; Schuler et al. 2000), the United Kingdom (Barlow et al. 2007; Wiggins et al. 2005), Canada (Infante- Rivard et al. 1989; Larson 1980; Steel O'Connor et al. 2003), Australia (Armstrong et al. 1999; Kemp et al. 2008), and elsewhere, including Syria (Bashour et al. 2008), New Zealand (Fergusson et al. 2005), Norway (Kaaresen et al. 2006) and Japan (Cheng et al. 2007).

Home visiting programs operate under the belief that parents mediate changes for their children. Most home visiting programs have trained practitioners not to interact directly with children but to encourage and train parents to help their children. Direct

¹ The Milbank Quarterly, Vol. 90, No. 1, 2012 (pp. 47–106)

help might include coaching parents to help their children with homework, and indirect help might include providing parents with emotional support and job training. Current programs are more likely to involve both parents, although traditionally such services have worked with mothers more than fathers (Sweet, Appelbaum, 2004).

Home visiting is an umbrella term that implies a strategy for delivering a service, rather than a type of intervention, per se. Programs differ along many dimensions, including the types of families served (e.g., single, teenage mothers; families of particular ethnicities; socioeconomic backgrounds; or social risk factors), targeted behaviours or outcomes (e.g., child abuse, school readiness, or mothers' employment), type of service delivery staff (e.g., nurses, or mothers from the community), ages of children targeted (e.g., enrolling pregnant mothers, or families with preschool children), length and intensity of services, types of services provided, methods of recruitment, and methods of assigning families to treatment groups. The services provided in the home vary from program to program, and even within program, e.g., teaching home safety and health, training parents how to teach their children to read, and providing empathetic practitioners to lessen parental stress and improve parents' state of mind. Home visiting practitioners believe that it is best to influence the family when the child is young so that good behaviours, and their associated positive outcomes, are evidenced early on, and progress throughout the child's and family's life span (Sweet, Appelbaum, 2004).

Most home visiting programs are based on ecological theory, which postulates that the child develops in a multifaceted environment (Bronfenbrenner, 1992). Parenting and the parent-child relationship are presumed to directly affect child outcomes. Distal factors such as governmental family policy, neighbourhood quality, and income indirectly influence child functioning by impacting the proximal environment. Most home visiting programs attempt to improve indirect influences on the child by connecting the family with economic and social supports. The direct influence of parenting is addressed through parenting education, which in turn is theorized to affect the developing child by improving the parent-child relationship. In fact, some of

the most successful early childhood programs with long-term outcomes are those that involve the parents (Yoshikawa, 1995).

Although all home visiting programs share the service-delivery setting of the home environment, they vary in their area of focus. Three primary types of home visiting programs for at-risk families have been identified (Sweet, Appelbaum, 2004):

1. improvement of maternal life-course outcomes, promotion of children's health, and early childhood education (Durlak & Wells, 1997; Gomby et al., 1999; Wasik, Ramey, Bryant, & Sparling, 1990),
2. programs focused on outcomes for low-income women with children promote employment, training, and economic stability.
3. programs designed to improve children's mental health are aimed at preventing child abuse, children's mental illness, and/or juvenile criminal behaviour. Educational interventions have been designed primarily to affect academic outcomes and are usually reviewed separately from programs aimed at mental health promotion (Durlak & Wells, 1997).

Home visiting programs provide structured visits by trained professionals and paraprofessionals to high-risk parents who have young children. These programs support families by providing health check-ups, screenings, referrals, parenting advice. Quality home visiting programs help parents provide safe and supportive environments for their children, and over time, families and home visitors build strong relationships that lead to lasting benefits for the entire family.

1. Benefits of Home Visiting Programs

Benefits include²:

- 1. MOMS AND BABIES ARE HEALTHIER.** During and after pregnancy, home visiting programs promote maternal health by helping mothers schedule regular doctor's visits, improve diets, reduce stress levels, and quit smoking or substance abuse. Babies benefit as well. One study found that mothers who participated in a home visiting program were half as likely to have a baby born low birthweight, which greatly reduced these babies' risk for health and developmental problems (Hack, Klein & Taylor,1995).
- 2. CHILDREN ARE BETTER PREPARED FOR SCHOOL.** Home visiting programs promote positive parenting practices that help parents better prepare their children for school. Parents enrolled in home visiting programs are more likely to have a safe play environment at home, provide age-appropriate books, and engage children in structured teaching activities (Jones Harden, Chazan-Cohen, Raikes, & Vogel, 2012; Kitzman, Olds, Henderson, Hanks, Cole, Tatelbaum, et al.,1997). Home visiting programs have also demonstrated long-term, positive impacts on children's academic achievement (Kitzman, Olds, Cole, Hanks, Anson, Arcoleo & Holmberg, 2010).
- 3. CHILDREN ARE SAFER.** Home visiting programs are associated with reduced rates of child maltreatment and injuries (Harriet, MacMillan et al.,2009). In one program, children of participating families experienced 40 percent fewer injuries between the ages of two to four (Olds, Henderson & Kitzman, 1994), and they were 35 percent less likely to visit an emergency room compared to children not enrolled. Mothers who participate in home visits also have lower stress levels and increased

² Child & Family Research Partnership • The University of Texas at Austin • The LBJ School of Public Affairs childandfamilyresearch.org

sensitivity during interactions with their children (Howard, Brooks-Gunn, 2009).

4. **FAMILIES ARE MORE SELF-SUFFICIENT.** Mothers with higher levels of education work more hours, have higher family income levels, and provide more cognitively stimulating home environments for their children (Carneiro, Meghir & Parey, 2013). Participating in a home visiting program leads to higher rates of enrollment and more hours spent in educational or training programs (Love, Kisker, Ross et al., 2002; LeCroy, Krysik, 2011).
5. **HOME VISITING PROGRAMS SAVE MONEY.** The short- and long-term benefits of home visiting programs largely outweigh the overall costs incurred from implementation. RAND found that high-fidelity home visiting programs for at-risk families have a \$5.70 return for every tax dollar spent from reduced spending for health care and welfare services. Another study of a home visiting program in Durham, North Carolina reported saving \$3.00 for every \$1.00 spent on the program during an infant's first six months due to reduced emergency care visits (Dodge, Goodman, Murphy, et al. 2014).

2. Models of home visiting

Children develop fastest in their earliest years, and the skills and abilities they develop in those years help lay the foundation for their future success. Similarly, early negative experiences can contribute to poor social, emotional, cognitive, behavioural, and health outcomes both in early childhood and in later life. Children growing up in poverty tend to be at greater risk of encountering adverse experiences that negatively affect their development. One service strategy that has improved these outcomes is early childhood home visiting, which provides information, resources, and support to expectant parents and families with young children, typically infants and toddlers, in their home environments (Duggan, Portilla, Filene, Crowne, Hill, Lee & Knox, 2018).

The home is the main setting for early experiences. Many children are born into families whose circumstances make it challenging for parents to provide the safe, secure, and supportive environment needed to start children on a trajectory for a successful life. As a result, children from low-income families are more likely to suffer from poor social, emotional, cognitive, health, and behavioural outcomes than children from higher-income families. The critical role of early parenting calls for a service strategy that supports over-burdened families and empowers them to overcome the challenges they face and foster the healthy development of their young children (Duggan, Portilla, Filene, Crowne, Hill, Lee & Knox, 2018).

Since the 1970s, many models of home visiting have been developed that each address multiple aspects of parenting and child well-being, though the models often originated in specific service sectors, including health, early education, and child welfare. Concurrently, substantial literature has provided evidence of home visiting impacts on family functioning, parenting, and child outcomes. The literature also provides evidence of various challenges in designing and implementing services so that home visiting achieves its potential as a part of the early childhood system of care. To shed further light on what occurs in home visiting and to offer insights into why and how services provided may vary across families through the lenses of home

visitors, the research conducted qualitative interviews with 104 home visitors across 24 local programs (Duggan, Portilla, Filene, Crowne, Hill, Lee & Knox, 2018):

- a) **Most home visitors described their work as providing consistent and stable support to empower the mother in her role as the child's first teacher.** Home visitors under- scored that their local programs aim to honour the goals and preferences of the mother. The emphasis on the mother's preferences sometimes created tensions for the home visitor in balancing mothers' preferences with the goals of the local program.
- b) **Given the emphasis on maternal preferences, some home visitors reported respecting the mother's position if she was not interested in changing a particular behaviour.** Home visitors most often mentioned doing so in the areas of reducing tobacco use or promoting breastfeeding. Even though home visitors believed these behaviours were important, they described feeling the need to balance the goal of helping a parent adopt new behaviours with supporting the family's engagement, which they thought would be compromised if they repeatedly brought up the issue. They expressed concerns that compromising engagement in this way, in turn, would undermine opportunities to improve and provide education in other areas such as child health and development.
- c) **Some home visitors described feeling especially challenged in addressing a mother's poor mental health, substance use, and intimate partner violence.** Perhaps not surprisingly, areas associated with stigma were not easy to address, in part because home visitors indicated that they could not easily identify these sensitive issues. Home visitors reported that some families were unlikely to be forthright about such issues until some trust had been established. Even when home visitors indicated that they could identify these issues, they felt that some families were unwilling or unable to understand their seriousness and potential consequences.

d) In the working relationships with families that home visitors saw as rewarding, they perceived mothers' eagerness to learn about and improve parenting practices as high and evident in how they continued with the visits and followed through between visits. For these families, home visitors felt they could achieve the intended level of service delivery and identify noticeable improvements in family behaviours or well-being.

Home visitors described their more challenging families as either being unmotivated to change or learn about positive parenting, having high levels of needs, or having psychosocial issues that sometimes stemmed from current and past trauma. In some of these cases, home visitors felt they were constantly engaged in crisis management and noted that planned visit content and duration of family participation were hard to achieve. This finding is consistent with those discussed above, indicating that families with more challenges and barriers tended to stay in home visiting for a shorter time than families with fewer challenges and barriers (Duggan, Portilla, Filene, Crowne, Hill, Lee & Knox, 2018).

3. Competency Framework

National Family Support Competency Framework for Family Support Professionals by Institute for the Advancement of Family Support Professionals³.

The National Family Support Competency Framework

- 1. infant and early childhood development**
- 2. child health, safety, and nutrition**
 - 3. parent-child interactions**
 - 4. dynamics of family relationships**
 - 5. family health, safety, and nutrition**
 - 6. community resources and support**
- 7. relationships-based family partnerships**
- 8. cultural and linguistic responsiveness**
 - 9. effective home visits**
 - 10. professional practice**

³

https://cpr-institute-prod.s3.amazonaws.com/modules/Approved%20National%20Family%20Support%20Competency%20Framework_FINAL_7_18_2018.pdf.

- a) Core competencies can be used for self-assessment. Staff can use competency frameworks to assess their skills and knowledge and identify areas where they could use more training.
- b) Core competencies can be used to develop job descriptions, career ladders, and evaluation frameworks. Home visiting program managers can use core competencies to help structure job descriptions and accurately describe the skills needed to be effective in a role. Managers and supervisors can also use competency frameworks to develop career ladders—for example, to indicate what level of performance is expected for different types of home visitors. Competencies can also be useful to help guide or structure annual or more frequent assessments that could be linked to promotion and salary increases.
- c) Core competencies can be used to develop training materials and professional development resources.



4. Evidence-Based Early Childhood Home Visiting

Impacts on Family Outcomes of Evidence-Based Early Childhood Home Visiting: Results from the mother and infant home visiting program evaluation⁴

In general, home visiting consists of three types of activities:

1. Assessing family needs
2. Educating and supporting parents
3. Referring families to needed services in the community and supporting the family's use of those services areas mentioned in the authorizing legislation:
 - Prenatal, maternal, and new-born health
 - Child health and development, including child maltreatment.
 - Parenting skills
 - School readiness and child academic achievement
 - Crime and domestic violence
 - Family economic self-sufficiency
 - Referrals and service coordination.

⁴ OPRE Report 2019-07, January 2019. Authors: Charles Michalopoulos, Kristen Faucetta, Carolyn J. Hill, Ximena A. Portilla, Lori Burrell, Helen Lee, Anne Duggan, and Virginia Knox .

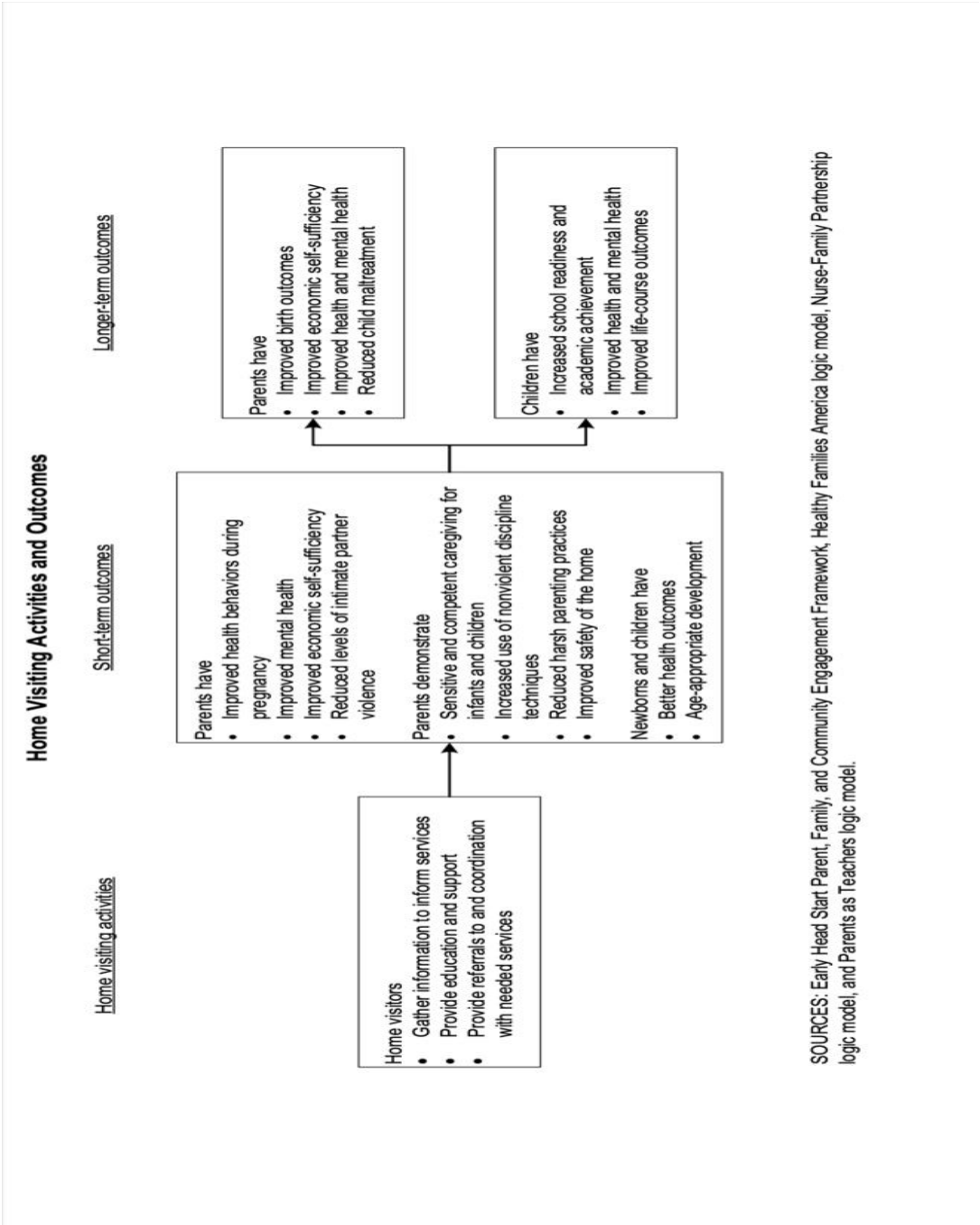
- **Assessing family needs.** To identify family strengths, needs, concerns, and interests, home visitors gather information from families through formal screening and assessment and through informal means that include reading cues provided by family members.
- **Educating and supporting parents.** Having identified family needs, home visitors devote most of their time to providing education and support to families. For example, home visitors educate parents on topics such as children’s developmental stages and provide comments on their parenting. Home visitors can also provide support during crises such as threats of being evicted or incidents of family violence. In addition, home visitors work to strengthen families’ support networks. Home visitors use methods such as positive reinforcement, direct suggestions and encouragement, and motivational interviewing to support healthy behaviour and positive parenting.
- **Referral and coordination.** For some family needs, home visitors may think the family will benefit from receiving more specialized services in the community. In MIHOPE, referrals were most made to address breastfeeding and nutrition, economic self-sufficiency, and public assistance or health insurance. This aspect of home visiting highlights the place of home visiting as one component in a comprehensive system of care for early childhood.

In the short term, these activities can lead to improvements in outcomes in several areas, as described in the middle box in the figure.

- During pregnancy, home visitors can help mothers obtain and use pre-natal care, can teach them about healthy behaviour such as abstaining from smoking and drinking, and might help to reduce stress that has been tied to adverse birth outcomes.
- In addition to reducing stress, home visitors can try to improve maternal mental health by referring mothers to mental health services in their communities or getting them assistance from other clinical staff members in their agencies.
- Home visitors can help improve families’ economic self-sufficiency by helping mothers obtain additional education and training, or by helping them find

employment. Home visitors can also help mothers understand whether they are eligible for public assistance that can provide economic support and can help them apply for those benefits.

- Many women receiving home visiting are in violent relationships and reducing violence can influence many other family outcomes. Although home visitors could assess whether families are at risk for violence and provide information to parents who are at risk, many home visitors in MIHOPE did not feel well positioned to help families in this area (as discussed in the summary of the MIHOPE implementation research later in this chapter). Nevertheless, they could make referrals to intimate partner violence services in the community.
- Home visitors commonly give parents information on positive parenting practices to help them provide sensitive and competent caregiving and to reduce child maltreatment.
- By promoting healthy behaviour during pregnancy and positive parenting practices, home visiting programs can also help new-borns and children have better health outcomes and age-appropriate development.



SOURCES: Early Head Start Parent, Family, and Community Engagement Framework, Healthy Families America logic model, Nurse-Family Partnership logic model, and Parents as Teachers logic model.

5. A snapshot of a home visitor's day⁵

Tracy has been a home visitor for about a year. She spends most of her time visiting the 17 families on her caseload, who are spread out across her small suburban county. She spent yesterday in a training session on recognizing postpartum depression and is eager to get started today on the three home visits she has scheduled. The families she will visit are similar in that they are young parents with small children. But each family is also unique, so Tracy will need to be attentive to their cues as well as their concerns, interests, understanding, and readiness to take actions that will improve family life and their children's health and development.

At the first visit, Tracy is greeted warmly by Kimmy and her 6-month-old girl, Shanna. Tracy sits on the floor with them and rolls out a plastic mat with toy fish inside. She encourages Kimmy to press on the mat and move the fish around to catch Shanna's attention. Kimmy helps support Shanna to sit up and she eagerly bats at the fish. Kimmy listens attentively as Tracy explains how this activity promotes motor development. Tracy also encourages Kimmy to count the number of fish to Shanna, explaining that it is never too early to introduce language and number concepts. As the baby plays, Tracy recalls that Kimmy had felt nervous about starting solids with Shanna. She asks whether Kimmy read the handouts on the topic she had left and how she is now feeling about starting solids. After Kimmy expresses interest, they agree to spend time in the next visit preparing purees to practice feeding Shanna.

Next, Tracy visits Gloria, a relatively new client, and her baby, Jessica. Gloria says that she is more stressed out than normal, and she smokes while Tracy asks more about what is going on. Gloria states that her phone bill is unusually high this month and she

⁵ OPRE Report 2019-07, January 2019. Authors: Charles Michalopoulos, Kristen Faucetta, Carolyn J. Hill, Ximena A. Portilla, Lori Burrell, Helen Lee, Anne Duggan, and Virginia Knox .

is not sure she can pay the bill, and she is running low on infant formula. Tracy nods empathetically as Gloria talks, and then suggests that they focus on each concern, one at a time. Although Gloria is worried about her phone bill, Tracy advises Gloria to pay what she can, as doing so will prevent her services being cut off. She further suggests that she and Gloria focus on budgeting at the next visit. She gives Gloria a number to call to apply for Women, Infant, and Children services and in the meantime offers to bring over infant formula that the office has in stock. Tracy probes more into the sources of stress Gloria typically faces and how she deals with them, seeing an opportunity for Gloria to open more. She comments to Gloria on how healthy Jessica looks and praises Gloria for how affectionate she is with the baby. Tracy wants to talk to Gloria about smoking in the home and ponders how best to raise this subject sensitively at the next visit to explore Gloria’s readiness for change.

Last, Tracy visits parents Marine and Bill and their infant son, Tyler. Both parents are typically quiet, but Tracy often can involve Marine in activities with Tyler. Bill usually sits and watches from a distance or focuses on something else. Tracy wants to involve him in learning to play with the baby. She uses strategies suggested by her supervisor to engage the family in play together — when Tyler starts to point to Bill, Tracy remarks, “Bill, someone’s looking for you!” and Bill waves and smiles. In addition to fostering parent-child interactions, Tracy encourages the parents to meet goals that are important to them. She asks them about goals they have for their family. Marine and Bill look blankly at each other and shrug. Tracy comments positively that “anything can be a goal” and asks them to think about what would make their lives better over the next year — “big or small.” Tracy could choose some home visit topics from her program’s curricula, but she thinks that partnering with the family is a more effective way to empower them and make home visiting relevant for them. She reflects on ways to help them think through what matters to them and how home visiting might be helpful.

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Handouts for Parents and Home Visitors

PARENTS

NEWBORN BABY'S SENSES

Taste, Smell, Touch	Sights	Sound
<i>sweet tastes, pleasant smells - prefers</i>	<i>focuses 20 to 30 cm away</i>	<i>hearing is fully mature</i>
<i>bitter, acidic smell – avoid</i>	<i>eyes wander/occasionally cross</i>	<i>recognizes some familiar sounds</i>
<i>recognizes the scent of her/his own mother's breast milk</i>	<i>black and white colour contrast - prefers</i>	<i>turns toward familiar sounds and voices</i>
<i>soft to coarse texture – prefers</i>	<i>prefers human faces over all other patterns</i>	<i>dislikes loud or abrupt noises</i>

HELP YOUR BABY TO DEVELOP HER/HIS PERSONALITY

- HUG, KISS, GENTLY CARESS
- LAY BABY ON HER/HIS BACK, MOVE HER/HIS ARMS ABOVE HER/HIS HEAD,
PUSH HER/HIS LEGS UP TO BEND HER/HIS KNEES
- LAY BABY ON HER/HIS STOMACH, GENTLY PUSH AGAINST HER/HIS FEET
- CARRY YOUR BABY IN FRONT OF YOU, KEEP HER/HIM NEXT TO YOUR WARB
CHEST, RIGHT OVER YOUR HEARTBEAT
 - MAKE FACES – *SMILE, FROWN, LAUGH, WINK....*
- HANG COLORED TOYS OR PISCTURES WHEN BABY CAN WATCH THEM
 - CATCH BABY'S ATTENTION WITH SOMETHING BRIGHT
 - MAKE A TOY DISAPPEAR AND REAPPER
- MOVE BABY'S HANDS IN FRONT OF HER/HIS FACE AND PULL HER/HIS HAND
APART (CLAP)
- PUT BABY IN PLACES WHERE SHE/HE CAN SEE THINGS THAT MOVE –
SHADOWS, SUNLIGHT, CURTAINS....
- TALK TO HER/HIM IN A FRIENDLY VOICE (*WHAT YOU ARE DOING, PLAYFUL
SOUNDS....*)
 - PLAY GENTLY MUSIC
 - TALK TO HER/HIM FROM DIFFERENT PALCES
 - MAKE NOISES (*WHISPER, SING, WHISTLE....*)

STAGES YOUR CHILD PASSES THROUGH

(Using pencils and crayons)

TWO YEARS

- Scribbles in straits lines, curves, circles
- Short, fat, and nontoxic crayons

THREE YEARS

- Starts to control of a pencil.
- Shows preference for left or right hand.
 - Wants to draw, no scribble.
 - Starts to draw figures.

FOUR YEARS

- Draws figures with more details – *fingers, bodies....*
- She/he knows what she/he wants to draw before starting.

FIVE YEARS

- Draws pictures with several different items.
- Draws pictures with a background – *sky, trees....*
 - Can colour within lines.

CHILD'S SAFETY

- **KEEP OBJECTS THAT COULD BE SWALLOWED OUT OF HER/HIS REACH –
*BUTTON, COINS, MARBLES***
 - **KEEP ELECTRICAL CORDS OUT OF HER/HIS REACH**
- **CUT WINDOW BLIND CORDS TO PREVENT YOUR CHILD FROM STRANGLING
IN BLIND CORP LOOPS**
- **INSTALL WINDOW GARDS OVER ALL WINDOW THAT OPEN TO PREVENT
FALLS FROM WINDOW OR BALCONY**
- **KEEP TOYS WITH WHEELS AWAY FROM STAIRS, KITCHEN, FIREPLACES AND
HEATERS**
- **KEEP PLASTIC BAGS OR ANYTHING ELSE THAT CAN COVER NOSE AND
MOUTH, OUT OF REACH**
 - **KEEP ALL MEDICINES AND ALCOHOL IN LOCKED CABINET**
 - **PUT ALL EMERGENCY NUMBERS BY YOUR TELEPHONE**

WHAT SHE/HE NEEDS

- SHE/HE CRIES WHEN HUNGRY, TOO WARM, WET, TOO EXCITED, LONELY OR SURPRISED
 - SHE/HE COOS WHEN PEACEFULLY AND CONTENT
- SHE/HE WILL MOVE HER/HIS BODY, EVEN HER/HIS TOES, TO SHOW PLEASURE
- SHE/HE USES HER/HIS FACE IN ALL SORTS OF WAYS. SHE/HE CAN FROWN AND SMILE, SHOWING HER/HIS FRUSTRATION AND EXCITEMENT
 - SHE/HE WILL TURN HER/HIS HEAD TOWARD YOUR VOICE
 - SHE/HE WILL TURN AWAY WHEN SHE/HE HAS ENOUGH TO EAT

NO TWO BABIES ARE THE SAME

QUIET, WATCHFUL BABIES

Some babies do not like to be cuddled – they seem to reject, even resent the physical constriction of enfolding arms or blankets. They prefer eye contact to cuddling. They are comforted by looking and listening.

HYPERSENSITIVE BABIES

They have extreme reactions to most stimulation. When picked up, they become tense, and pulling them down makes them jump. Any changes in their surroundings, however slight, seems to alert and alarm them.

RELAXED BABIES

So called “no trouble” babies. They make few demands and may even need to be woken up for most of their feedings. Persuading them to stay awake long enough to suck can be difficult. They do not seem to care about their surroundings or routines – they seldom cry. Make special efforts to engage her/him in various kinds of interaction, and to get him interested in looking at and responding to the world around her/him.

HOW TO PLAY WITH YOUR CHILD

- **Active play (physical development) – running, biking, throwing, and kicking.**

How to start? Sit and ride toys, push and pull around toys.

- **Nurturing play (emotional development) – playing with dolls and stuffed animals.**

How to start? Caring for the dolls – feeding, dressing, loving them.

- **Creative play (small-motor skills development) – drawing, clay paly, singing, making exercise.**

How to start? Using one thing to stand for something else. Using household things in play.

- **Imaginative play (social skills and language development) – dress-up.**

How to start? Making up stories, acting out everyday scenes.

HOW TO SPEAK WITH YOUR BABY

- Point to specific objects, name them, and encourage her/him to repeat. Do it whenever an opportunity arises.
- Say aloud all the things in her/his world. Talk about what you are doing.
 - Speak at the child's eye level. Make eye contact.
 - Do not correct the child's language.
- Repeat what you are saying, and what your child says.
 - Ask questions and encourage her/his response.

SOCIAL INTERACTIONS

NEWBORN (one to three months)

- Social small. Expressive with face and body. Imitate facial expressions.

AROUND HALF YEAR

- Interest in mirror images. Responds to people emotions what they show.
 - Social plays.

AROUND ONE YEAR

- Cries when mother or father leaves.
- She/he likes when people imitating in her/his play.
 - Prefer mother over all over.

AROUND TWO YEARS

- Imitating behaviour of others.
- Demonstrate increasing independence. Increasingly aware of herself/himself as separate from others.
 - She/he is enthusiastic about spending time with other children.

AROUND THREE YEARS

- She/he expresses wide range of emotions.
- She/he separates easily from parents.
- She/he understand concept of “mine” and “her/his”.
 - She/he can take turns in game.

BOOKS FOR CHILDREN

INFANTS

- Board books to touch and taste.
- Books with photos or drawings of familiar objects, animals ... babies.

TODDLERS

- Books with photos or drawing of children doing daily routines like plying, eating, sleeping ...
- Book with a few words on each page describing familiar objects.
 - Simple rhymes.
 - Animal books.

PRESCHOOLER

- Short stories.
- About making friends.
- About school, doctor ...
- About nature, animals...
 - Fairy tales.

EFFECTIVE HOME VISITS

Foster relationships. Your relationship with the family is an essential component of effective home visits. Spend time building and nurturing this relationship.

Empower the family. Find every opportunity to acknowledge the family’s progress in achieving their personal goals. You may not be the expert—but you can be their coach, teacher, and mentor.

Prepare. Plan your visits. Review the purposes before you visit. Choose those that are most appropriate.

Address the family’s concerns first. Effective home visitors balance family concerns with program goals. Families will be more engaged if you first help them with what they need and then introduce the information from the program.

Be observant. Notice non-verbal cues as well as what the family is saying. Observe the relationships in the home.

Make learning fun. We all learn best by doing. If you’re teaching how to breastfeed, bring a doll and let the expectant mom practice using it.

Ask when you don’t know. You don’t have to know all the answers, but you need to know how to find them.

Take advantage of training and resources. Seek opportunities for new knowledge. The more you know, the better you can help your families. If you are unfamiliar with a subject or want more information, look up the websites, books, videos, or pamphlets listed in the resource section.

Nurture yourself. Nurturing yourself nourishes your body, mind, and soul. You will find you have more to give the families you serve if you also take care of yourself.

⁶ Adapted from **Partners for a Healthy Baby Home Visiting Curriculum: Before Baby Arrives**, 2010
Florida State University Center for Prevention & Early Intervention Policy

WHAT CAN I DO AS HOME VISITOR

(SOME ADVICE)

1

MUM AND DAD

- Ensure Mom has adequate support during the postpartum period.
- Ask about Mom's relationship with baby's father and talk about the importance of his involvement with baby.
- Help Dad feel competent in his ability to care for his baby.
- Help Dad/ understand why breastfeeding is important and how he can be supportive.
- Ask Dad about strategies he uses for calming his crying baby.
- Talk with Dad about the importance of providing love, protection, and economic support.
- If mom smokes, encourage her to breastfeed and take precautions to minimize the impact on her baby.
- If Mom is breastfeeding, explain that any alcohol she drinks may harm her baby.
- Talk with Mom about birth control options.
- Talk with Dad about why his child sometimes prefers being with Mom.
- Encourage Dad to support toddler's development by creating an outside play area.
- Review dangers of second-hand smoke and how to protect their child.
- Ask about ways the family has fun together and encourage "family time."

WHAT CAN I DO AS HOME VISITOR

(SOME ADVICE)

2

FEEDING AND FOOD

- If Mom is breastfeeding, make sure her diet is healthy and balanced.
- Discuss benefits of breastfeeding with family.
- If bottle feeding, talk about steps to ensure success.
- Explain how to be sure baby is getting enough to eat.
- Ask how often baby is fed and if there are any problems with feeding.
- Talk about healthy food portions.
- Talk about choosing healthy meals and snacks for toddler.
- Discuss benefits of eating fruits and vegetables.
- Talk about how to have enjoyable family mealtimes.

WHAT CAN I DO AS HOME VISITOR

(SOME ADVICE)

3

HEALTH, HYGIENE AND SAFETY

- Ask about baby's first check-up and immunizations.
- Talk about symptoms of colic and handling the stress it can bring.
- Make sure family knows how to change diaper.
- Talk about bathing baby.
- Ask about baby's sleep patterns and how family copes with less sleep.
- Talk with family about how to baby-proof their house to prevent accidents.
- Ask about family's daily dental care and stress why it is important.
- Talk about health risks of being overweight and discuss family weight goals.
- Talk with family about how to care for their baby when sick.
- Talk about preventing accidents and what to do in case of an emergency.
- Explain how toxic stress can impact learning and behaviour.
- Encourage families to spend more time outdoors.
- Talk about ways to increase family protection and feelings of safety in the home.

WHAT CAN I DO AS HOME VISITOR

(SOME ADVICE)

4

SOCIAL AND EMOTIONAL DEVELOPMENT

- Help family understand baby's early social emotional development and complete screening.
- Help family recognize and respond to baby's signals.
- Explain why it is important to talk, sing, and read with their baby.
- Help parents read baby's cues and anticipate needs before baby gets fussy.
- Build parent's confidence and competence in calming baby when fussy.
- Help parents understand the importance of touch in building a close relationship with baby.
- Help Mom improve her mood by laughing and singing more.
- Share ideas about guiding their child behaviour.
- Ask how family maintains peace between baby and siblings.
- Talk about typical childhood fears and how to help children cope.
- Explain importance of unconditional love.
- Discuss the value of giving children limited choices.
- Give parents alternatives to saying "no."
- Help parents deal with any unrealistic expectations of their child.
- Help parents model respectfulness with child.
- Ask about family's methods of discipline and discourage physical punishment.
- Talk about ways to help child learn to wait.
- Discuss how routines help children.

WHAT CAN I DO AS HOME VISITOR

(SOME ADVICE)

5

PLAYING, LEARNING AND DEVELOPING

- Talk about baby's play skills and why play is important.
- Explain what new skills baby is likely to learn.
- Talk about baby's new motor skills and the benefits of crawling.
- Summarize and preview baby's upcoming language development.
- Explain how play helps baby learn.
- Talk about appropriate toys for their child.
- Encourage parents to offer a variety of appropriate toys and learning experiences for children.
- Summarize baby's early language development.
- Discuss ways to help baby explore books and print.
- Talk about the importance of reading with their child every day.
- Explain why children want to read the same books over and over.
- Talk about choosing good books for children.
- Help parents understand the value of storytelling.

HOME VISITOR SELFASSESSMENT⁷

What values are important to you in this role?

What can you do to 'keep the child in mind'?

Describe the type of relationship you would like to develop with a family?

When contacting families what do you pay attention to?

To what extent are you familiar with the wider community where the family lives?

What factors contribute to a successful home visiting service?

Is it important to you to present a professional image to the family?

Do you as a home visitor liaise with another agency?

What tools do you use to support good liaison with other professionals?

What information you may need to be shared with another professional?

What do you do to check your own thinking and approaches when working with families?

What actions are important for you making a successful referral?

What do you consider when assessing risks to family health and the needs of any children?

⁷ Adopted form <https://www.issa.nl/content/supporting-for-families-nurturing-care>



Home visiting – Inspiring practices from the partner countries



“HOME VISITING” PROJECT - ITALY

Support for parents and their children discharged from neonatal intensive care	
Target groups:	Parents and children
Focus:	Home visiting service aimed to support parents and their children discharged from neonatal intensive care
<p>Objectives: Piccino Picciò is a voluntary association of parents of children born prematurely or hospitalized at birth in Neonatal Intensive Care. The association has launched the HOME VISITING project starting from the awareness that after the birth it is important to accompany the family in the new adventure. The project plans to offer the families of newborns discharged from the NIC who need it, concrete help, and specialized professional support.</p> <p>Methodology: Home Visiting is an intervention in support of parenting that aims to create a space for listening attentive and sensitive to the needs of the child and the new family in a protected and intimate place, the home. In the months after birth, it is important to foster parents' confidence in their caring skills with the aim of promoting positive change and building a new balance. The intervention is carried out by professionals with specific training necessary to offer effective help in a delicate and precious period for the family and is modulated according to needs. The project, in time of COVID-19, according to the needs of the family, can also be activated remotely.</p> <p>Impact: The project, born from the experience of "premature parents" in collaboration with various professional figures, helped to prevent all those difficulties or risk factors that sometimes arise upon arrival at home in the family unit, which can be caused by premature birth, by pathologies that can be resolved in a short time or by a long hospitalization.</p>	
Contact:	
Website: https://www.piccinopiccio.it/progetti/	

**“HOME VISITING. SOSTEGNO DOMICILIARE POST RICOVERO” PROJECT
- ITALY**

Support for parents and their children discharged from neonatal intensive care	
Target groups:	Parents and children
Focus:	Home visiting service aimed to support parents and their children discharged from neonatal intensive care
<p>Objectives: Scricciolo is an association launched in Trieste by a group of parents of children born prematurely or hospitalized at birth in Neonatal Intensive Care. The association takes care about all families of babies born less than 32 weeks of gestational age or weighing less than 1500 grams; these are offered the possibility of free home support during the first two / three months after returning home. This support is provided through scheduled visits previously agreed with the family. The project was launched with a view to preventing the psychological distress that may arise in the new family unit where risk factors due to premature birth, hospitalization or the presence of short-term pathologies are highlighted.</p> <p>Methodology: In home meetings, the psychologist and physiotherapist calibrate their intervention on the specific characteristics and needs of each family unit and begin to build a relationship of trust and acceptance through listening with the mother, father, and possibly other family members.</p> <p>Impact: The project contributed to:</p> <ul style="list-style-type: none"> Promote the construction of a secure bond between parent and child; Enhance the skills of new parents and increase their awareness; Increase parents’ confidence in their abilities; Strengthen in parents the sensitivity, the ability to observe and understand their child; 	

Increase in parents the ability to find personal, non-predefined solutions to the problems they encounter;

Increase knowledge of local services and resources, facilitate their access and use;

Activate in each family system the useful resources to favour the emotional, social, and cognitive development of each child;

Preventing and / or early detection of developmental delays or difficulties.

Contact:

Website: <https://www.scriccioloassociazione.org/home-visiting>

“BECOMING PARENTS” PROJECT - ITALY

Home visiting support for parents and their children when considered at risk	
Target groups:	Parents and children
Focus:	Home visiting services for at-risk families during the two first years of life
<p>Objectives: Launched by the General Directorate for Family and Social Solidarity - Municipality of Milan, ASL Milan, Child Aid Centre mistreated and the Family in crisis, Crinali Cooperative, Department of Psychology - Bicocca University of Milan, this Research-intervention project started in 2009 in the Municipality of Milan and was aimed at families considered at risk in which are about to have or just had a newborn.</p> <p>Methodology: The methodology adopted by the “Diventare Genitori” Project provides mothers and families with the support of an operator who goes continuously for two years starting from the 5th / 6th month of pregnancy at their home.</p> <p>Impact: The project is extensively documented, with theoretical references, methodology and evaluation in the book "Accompany me for a while" (Franco Angeli, 2013).</p>	
Contact:	
Website: https://diazilla.com/doc/627016/e-book-francoangeli	

“LEGAMI NUTRIENTI” PROJECT - ITALY

Support for parents and their children	
Target groups:	Parents and children
Focus:	Home visiting service aimed to support parents and their children
<p>Objectives: The “LeNu” project has been launched by Orsa Maggiore coop and is based on the centrality of Nutrient Bonds to prevent educational poverty, understood as fragility, which if not adequately counteracted risks turning into overt and permanent discomfort.</p> <p>The project aims to respond to the needs, from the first thousand days of life up to 10 years, connected to the conditions of personal, family, and social vulnerability that interfere with a good growth path by offering them an integrated public / private response in terms of support, accompaniment, and mutual help.</p> <p>LeNu's activities are generally based on: 1. proximity, through Accompanied Hospital Discharges, Home Visiting, Mothers at Home Groups; 2. to relationality through Relational Spaces, Support for children with parents in the juvenile criminal area, Accompanying Programs for Ties, Psychological Counselling. The antennas are transversal to the actions listed above, i.e. listening and interception points for discomfort in significant places such as schools and hospitals, project partners, and training activities aimed at public and private operators involved in the project.</p> <p>Methodology: The three main intervention methodologies are particularly qualifying and innovative in carrying out the activities listed above: the MAMME INSIEME App, a chat through which mothers communicate with each other and, through the development of thematic sections, they are helped to orient themselves on the territory with respect to public and private services useful during pregnancy and the first years of a child's life, the VIG (Video Interaction Guidance) an intervention led by a professional - within a relational context - which, through the video footage of interactions, makes evident the positive relationships and their effects, EMDR (Eye Movement Desensitization and Reprocessing), a therapeutic approach used</p>	

for the treatment of trauma that focuses on remembering the experience using eye movements or other forms of alternating right / left stimulation.

Impact: The project, through the home visiting method, has improved the quality of the mother-child relationship.

Conclusion: Home Visiting is not a courtesy visit. It is good to focus on the fact that home visiting is a path that is structured within the family and that starts from the places of birth and growth of a child, in particular the maternal-infant wards of hospitals and vaccination points. The intervention takes the form of the presence inside the home of a trained educator who has the task of guiding fragile parents in the material and emotional care of their newborn child, building a relationship of trust and non-judgmental with them, and of connecting them to the network of local services to which they often do not know or do not consider it important to access. It goes without saying that the home visitor requires the active and proactive presence of health services (hospital, consulting room, paediatrician of free choice) both at the time of the birth event and in the following months.

Also, it is an intervention methodology not applicable to all problematic situations. Families must be selected considering the type of risk factors and the internal resources of the family. This aspect is very important because if used randomly, home visiting is not effective. And here returns the crucial nature of teamwork.

The territorial context is also important. But the presence of a protective network made up of trained physical structures and human resources, participating and including, is also important for the real effectiveness of the prevention intervention. The work on which the family worker focuses is the mother-child relationship, within a work of taking charge integrated with the local social and health services.

Contact:

Website: <https://percorsiconibambini.it/legamin/scheda-progetto/>

CESTA VON – OMAMA - SLOVAKIA



CESTA VON - Where one mother simply cannot do it all

Target groups: - children aged 0-3 and 4-6, parents, pregnant mothers

Focus: Breaking the cycle of generational poverty. Children born into extreme poverty have a significantly higher rates of chronic diseases, and difficult conditions and chronic stress negatively impact their ability to learn. Even before starting school, children from extreme poverty lag behind in their speech. Uncertainty and poverty lower the ability of parents to create a stable environment for the child. Stressors connected with poverty increase the risks of emotional problems and behavioural disorders. Insufficient stimulation in early childhood is the first step into the vicious cycle of poverty. All additional problems in school and in adulthood are related to it.

Objectives: In cooperation with local social workers and other professionals who are in direct contact with the poverty-afflicted communities, we choose one (or more) mother(s) - omama - who is capable, responsible, hard-working, and well-respected in the local community. With the help of early intervention professionals, we train these women in the methods of early child development and in creating appropriate conditions for child growth.

Participants who successfully completed the training and who demonstrate willingness and commitment to the project, are employed by our organization.

In cooperation with other professionals and with their mentorship, supervisions, and practical preparation, the omamas help to develop the youngest children aged 0-3, later 4-6. They offer counselling in early child development to parents of young children as well as to pregnant mothers in the whole community. Every week, they will visit homes of families with small children, and they will organize parents clubs on a regular basis.

Methodology: In pilot communities, a unique method was developed and tested, which includes various elements of successful programs of psychosocial stimulation of a young child, and which adjusts them to the conditions of living in extreme poverty. The goal of the intervention is to improve all aspects of early child development: fine and gross motor skills, cognitive abilities, socio-economic area, language skills and communication, creativity, resilience, and healthy lifestyle. The program is to strengthen self-confidence of children and parents, their mutual relationship and respect of a child towards oneself and others. All of this improves a child's readiness for pre-school or school.

Cesta Von is in touch with experts from Jamaica and Columbia who have been implementing a similar program of early child development for more than 20 years. In Jamaica, a longitudinal follow-up research has been carried out demonstrating that the children involved in the program significantly increased their cognitive abilities and literacy skills, they progressed better in school, they earned more money as adults, and they had fewer signs of depression and delay. We use the **Play wisely** program focused on brain development and movement capacity of children (www.mudrehranie.sk).

Strengths: For mothers and father in poor communities, our omamas become a source of information with regards to parenting, such in in the middle class, young parents receive advice from their parents. In generational poverty, the generation which would pass on advice and

habits for a successful life is absent since people in poverty never experienced it. Our Omamas represent this missing generation and they communicate to the people living in adversity important parenting advice.

Impact: In 2021, 27 Omamas helped 569 children in 20 communities. In 2020

Contact:

Cesta von, občianske združenie, Miletičova 30, 821 08 Bratislava,

website: <https://cestavon.sk/en/home>

Program manager: Oľga Coulton Shaw, email: olga.shaw@cestavon.sk

ZDRAVÉ REGIÓNY - ZDRAVÉ KOMUNITY - SLOVAKIA



The main activity of the project is the implementation and development of health mediation in the marginalised Roma communities. This project is implemented thanks to the support from the European Social Fund under the Human Resources Operational Programme.

Target groups: residents and members of the MRC; Community health education workers, health prevention and education workers directly from the communities

Focus: The main priority is to create a sustainable tool for improving health conditions in marginalised communities with the active involvement of the target group. Other priorities are targeted interventions in several interrelated areas - in active employment and human resource development, systematic, coordinated, and targeted health promotion activities, and sharing know-how across a wide collaborative network - from the regional level to the legislative level.

Objectives: The main objective of the Healthy Communities project is to implement health mediation in the field, directly in the MRC and in selected health institutions.

Methodology: We understand health mediation as a type of community work that engages and educates individuals - lay people from target communities - to carry out systematic work on

social determinants of health at the community level. The activities are expected to result in health promotion in the MRC.

The project aims to: improve communication and relations between the MRC and health care providers, increase trust in the health system, improve access to healthcare by reducing internal barriers, increase participation in preventive check-ups and compulsory vaccination, ensure early identification of infectious diseases, reduce the number of unjustified ambulance calls, increase health literacy, improve personal and communal hygiene, prevent substance abuse, improve postnatal care and promote breastfeeding, build new human capacities in the MRC (increasing employment and skills).

Impact: The project concentrates on human resources development. Human resources in the field are the most important performance component and a key project tool. Their targeted building, training, personal and professional development is one of the specific activities of the project. The selection of human resources in the field is our priority throughout the project.

Project field staff includes: 269 health promotion assistants, 25 health promotion assistant coordinators, 11 health promotion assistants in hospital settings and 10 contracted hospitals.

Contact:

Zdravé reigióny, Limbová 2, Bratislava

Website: www.zdraveregiony.eu, Contact person: Richard Koky - field expert, email: richard.koky@zdraveregiony.eu



misia
1000

ACEC - Misia 1000: Midwives help with antenatal care and care of babies in Slovakia

Target groups: mothers from disadvantaged Roma communities, children aged 0-3

Focus: A project called Mission 1000 is realized in the area of Spišská Nová Ves in the Slovak Republic. Eleven specialised Roma Health Mediators, the so-called midwives, help mothers from marginalised communities during their pregnancy and after the childbirth.

Objectives: The MISIA 1000 project is an implementation of health mediation in the setting of socially disadvantaged communities, focusing on the crucial 1000 days from the conception of a child. The interventions, in both home and hospital settings, are delivered by trained volunteer midwives. The midwives, themselves from the community, spread awareness among pregnant women and mothers, provide support, link women and health care providers, and help with antenatal preparation as well as newborn and toddler care.

Methodology: The midwives operate in several villages in the Spiš Region. They realize activities with and for girls, pregnant women, and stay-at-home mothers directly in the settlements, but also directly in hospitals. As part of their activities, they cooperate with local government, community centres, other helping professions, and health care providers. In Spišská Nová Ves, the midwives work at the Svet zdravia Hospital in the gynaecology and obstetrics, and the paediatric wards. The project is staffed by women midwives - Babice, who themselves come from the selected locality. They are motivated to help their community "from within". They come from the same background as the clients, understand the cultural and social context, know the family ties and finally the opportunities and constraints in the locality.

Thanks to their specialized training, midwives are able, in the settings in which they work, to convey the necessary information for the health and care of the pregnant woman, the health and care of the newborn and the child up to 3 years of age. They provide clients with information about possible health problems, appropriate care for themselves in pregnancy, and care for the newborn and children, taking into account the realistic capabilities of the client. Thanks to the intensive outreach work of the midwives, we are able to identify families in need and devote increased efforts and resources to them.

The midwives act as volunteers, improve their personal competencies, enhance their education, and increase their health literacy and preparation for the labour market. They are both agents and instruments of change. They create bridges and spaces for dialogue that can change the perspectives and attitudes of both community residents and health care providers. Through the implementation of outreach activities, health education, and personal example, they have the opportunity and space to change community and individual perspectives on perceptions of health.

Impact: The implementation of activities started in September 2019. The project started gradually in five locations around the hospital in Spišská Nová Ves: Vilčurňa, Smižany, Rudňany, Markušovce and Hrabušice with 11 trained midwives helping in the localities.

Contact:

Asociácia pre kultúru, vzdelávanie a komunikáciu (ACEC), Hurbanovo námestie 5, 811 03 Bratislava Slovensko, Website: <https://www.acec.sk/en/mission-1000/>, Email: office@acec.sk

TEDDY BEAR'S READING PROGRAMME - SERBIA

Parents and caregivers in Novi Sad are being trained on age-based involvement of children in reading process where they are supported to develop responsive interaction with children through reading or talking to children (for illiterate parents- illustrations based stories). Since reading is universal activity which can be applied in different manner and forms it showed great results in families with children with difficulties (disabilities), mothers who were exposed to traumas and violence (in shelters); mothers from deprived settings with experience of social isolation and discrimination (mostly Roma), and foster parents.

Target groups:	Children, Parents or caregivers and professionals
Focus:	CVET/ CPD (Continuous professional development)/ staff training; psychological/mentoring/coaching support services, innovative services/ tools.

Objectives: The main goal is to support professionals and parents/caregivers to develop responsive interaction, communication and nurturing, stimulating care with and for their children.

Methodology: It was local in the beginning, but organizations oriented towards inclusion of Roma children implemented it in different municipalities, regions in Serbia. At this point the programme has become part of formal job description of patronage service at National level. The basic level of the programme is part of patronage service (home visits to families with toddlers). Now library and support to reading with children is part of practice in all kindergartens, but also in Health Centres (waiting rooms in paediatric services) and Social welfare centres, as part of one-year campaign, supported by UNICEF. The activities for children include, based on age, reading or talking to children (for illiterate parents - illustrations based stories); In Roma communities, program delivery includes creation of reading materials; soft books; collage books made of newspapers and magazines. Parents or Caregivers are being trained on age-based involvement of children in reading process. They are supported to develop responsive interaction with children. Practitioners can moderate activity based on reflection on practice. At a group level, they practice responsive skills in the role plays. Professionals have map for Bear reader and supporting guidelines, educational videos (it can be used directly in practice with

parents). This practice helps social inclusion of both parents and children from various backgrounds, it helps parents develop their skills in parenting and communicating with their children. It also helps parents get more active in the child's education and care in ECEC settings.

Impact: Since reading is a universal activity which can be applied in different manner and forms it showed great results in families with children with difficulties (disabilities), mothers who were exposed to traumas and violence (in shelters); mothers from deprived settings with experience of social isolation and discrimination (mostly Roma), and foster parents.

Conclusion: Basic training and support for the professionals and parents

Website: <https://centarharmonija.rs/?cat=80>

<https://www.facebook.com/novisadcitadeci>

<https://www.facebook.com/OdCitanjaSeRaste>

LET'S GIVE THEM WINGS - SERBIA

The program for children and families STRONG FROM THE BEGINNING - DAM LEN PHAKA intended for families of the Roma national minority who live in conditions that are not sufficiently stimulating for the development and learning of children. The series STRONG FROM THE BEGINNING includes (for now) three programs: children and parents are directly involved in the activities of two programs. The third program is implemented directly only with parents, and children are indirect beneficiaries through the improved competences of adults and the use of materials for families.

Target groups:	All parents and caregivers, with a focus on families whose children are not enrolled in preschool institutions / in contexts without ECEC services
Focus:	Measures to improve the family environment, support and develop parents' skills in the development of positive parenting, support for children's health, development and education, advocacy, and practice of children's rights. Children have the opportunity

Objectives: An NGO initiated this as a project to support to development of parental skills, providing nurturing and stimulative living and developmental environment providing conditions for wellbeing of children - Module 1 was enhancing competencies of parents to support child wellbeing and resilience, positive discipline, communication skills, understanding gender roles and its impact on development. Modul 2 was enhancing competencies of parents to enhance healthy lifestyles; safety, socio-emotional skills; speech, language, logical and critical thinking, and creativity. The aim was to contribute to the improvement of the conditions for growing up, development and well-being of children (0-7) from vulnerable groups. The objectives were to enhance parents' skills for responsive parenting and positive discipline and enable them to advocate for child rights; to enhance community members' knowledge and skills for creating safe and stimulative environment for children from vulnerable groups.

Methodology: The principles on which the program is based are:

- voluntary participation;
- respect for children's rights and human rights;

- acting in the best interest of children and adults;
- participant participation;
- based on experience and strengths; respect for personal, family, cultural, religious and other differences;
- inclusive, non-discriminatory approach;
- respect for the personal boundaries of the participants.

The program has four thematic units (modules), which are implemented through workshops and home visits. The optimal duration of the program if implemented in its entirety is 18 months.

- **Workshops for parents, children and joint workshops for children and adults** are psychosocial, educational, creative, fun, and recreational in nature. Activities, methods, and forms of work are diverse and respond to the needs of participants of different ages, learning styles, knowledge, interests, and experience. For each workshop, goals are defined in the form of outcomes for participants, scenario with activities, recommendations for preparation and recommended literature. A greater number of topics are covered for both children and adults, to encourage exchanges in the family and the application of new models of behaviour.
- **Home visits** are a form of work with families who have children up to one year old. The goal is to empower parents to care for, educate and encourage the development of newborns and infants in their family environment, in a way and at a time that suits them.
- **Activities in the community/neighbourhood** aim to contribute to the development of the sense of belonging and closeness of all members, to encourage their joint action for the youngest, and to enrich the everyday life of people who live a difficult life.
- **Activities at home:** Workshops and home visits end with suggestions for parents on what to do between the two meetings, thus encouraging the integration of new knowledge into daily life activities.

Impact: The most significant findings of the external evaluation of this extended version of the program are:

- A statistically significant positive correlation was found between participation in the program and socio-emotional development and children's readiness for school.
- Parents who participated in the program have more confidence in their competence, implement more activities that encourage the child's development, and apply less severe disciplinary measures compared to parents from the comparison group.

Conclusion: It was found that the regular intervention has a positive effect of 0.26 standard deviations on parent-reported child development outcomes, and a more muted effect for the father-focused workshops. Although overall attitudes on discipline did not change, for the groups where fathers' participation was promoted, we find a lower likelihood of reporting use of physical punishment to discipline their children in the month prior to the survey than parents in the control group. Our findings show that parenting training programs – even when run virtually – have the potential to be effective in changing parenting attitudes regarding early childhood development and parenting behaviours, which in turn could be impactful toward child development.

Website: <https://www.cipcentar.org/index.php/pilici>

Case Studies – Parenting and Home Visiting in the Partner Countries

LEGAMI NUTRIENTI - ITALY

<p>Short description of the case study</p>	<p>The “LeNu” project has been launched by Orsa Maggiore coop in Italy and is based on the centrality of “Nutrient Bonds” to prevent educational poverty, understood as fragility, which if not adequately counteracted risks turning into overt and permanent discomfort.</p>
<p>Tell the story. (Include the interview/ additional desk research summary that you make with the representative of the best practice)</p> <ol style="list-style-type: none"> 1. What went well? 2. What was the biggest challenge? 3. Any suggestion for the future <p>Please indicate whether the action was original (developed for that particular situation, occasion, project), or it was adapted from some other project/activity. If it was adapted from something else, how the process of adapting it went - as an</p>	<p>Home visiting is a significant opportunity for social workers to engage with families from within their own homes. However, it is crucial to acknowledge that this approach cannot be universally applied or implemented at any stage of the helping process. To truly understand the complexities of the issues faced by families, a comprehensive and detailed examination is required.</p> <p>After more than two years of dedicated work, extensive training, knowledge exchange, and comparative analysis, it is evident that the cooperative involved in home visiting initiatives has thrived. The project manager, Marianna Giordano, has become a recognized authority not only in the Campania region but throughout Italy. Her expertise in this field is so esteemed that she, along with Gloria Soavi, a former president of Cismai and another project partner, contributed to the book titled 'Home visiting: an innovative model of prevention of child abuse' (published by Franco Angeli), authored by Maria Teresa Pedrocco Biancardi. This book serves as a prime example of the outstanding intervention provided by LeNu.</p> <p>Marianna Giordano specifically focused on chapter 4, which delves into various critical aspects of the home visiting intervention. These aspects include the importance of appropriateness in conducting home visits, which necessitates a</p>

example for those who read it how they can think and plan to adapt something to whatever their particular need may be

thorough evaluation process devoid of any negative biases. Furthermore, the chapter addresses the significance of fostering strong alliances between professionals and vulnerable families, as well as effectively responding to the complex requests for assistance.

Objectives: The “LeNu” project has been launched by Orsa Maggiore coop and is based on the centrality of Nutrient Bonds to prevent educational poverty, understood as fragility, which if not adequately counteracted risks turning into overt and permanent discomfort.

The project aims to respond to the needs, from the first thousand days of life up to 10 years, connected to the conditions of personal, family, and social vulnerability that interfere with a good growth path by offering them an integrated public / private response in terms of support, accompaniment, and mutual help.

LeNu's activities are generally based on: 1. Proximity, through Accompanied Hospital Discharges, Home Visiting, Mothers at Home Groups; 2. To relationality through Relational Spaces, Support for children with parents in the juvenile criminal area, Accompanying Programs for Ties, Psychological Counselling. The antennas are transversal to the actions listed above, i.e. listening and interception points for discomfort in significant places such as schools and hospitals, project partners, and training activities aimed at public and private operators involved in the project.

Methodology: The three main intervention methodologies are particularly qualifying and innovative in carrying out the activities listed above: the MAMME INSIEME App, a chat through which mothers communicate with each other and, through the development of thematic sections, they are helped to orient themselves on the territory with respect to public and private services useful during pregnancy and the first years of a child's life, the VIG (Video Interaction Guidance) an intervention led by a professional - within a relational context - which, through the video footage of interactions, makes evident the positive relationships and their effects, EMDR (Eye Movement Desensitization and Reprocessing), a therapeutic approach used for the treatment of trauma that focuses on

remembering the experience using eye movements or other forms of alternating right / left stimulation.

Impact: The project, through the home visiting method, has improved the quality of the mother-child relationship.

Conclusion: Home Visiting is not a courtesy visit. It is good to focus on the fact that home visiting is a path that is structured within the family and that starts from the places of birth and growth of a child, in particular the maternal-infant wards of hospitals and vaccination points. The intervention takes the form of the presence inside the home of a trained educator who has the task of guiding fragile parents in the material and emotional care of their new-born child, building a relationship of trust and non-judgmental with them, and of connecting them to the network of local services to which they often do not know or do not consider it important to access. It goes without saying that the home visitor requires the active and proactive presence of health services (hospital, consulting room, paediatrician of free choice) both at the time of the birth event and in the following months.

Also, it is an intervention methodology not applicable to all problematic situations. Families must be selected considering the type of risk factors and the internal resources of the family. This aspect is very important because if used randomly, home visiting is not effective. And here returns the crucial nature of teamwork.

The territorial context is also important. But the presence of a protective network made up of trained physical structures and human resources, participating and including, is also important for the real effectiveness of the prevention intervention. The work on which the family worker focuses is the mother-child relationship, within a work of taking charge integrated with the local social and health services.

YouTube video: <https://www.youtube.com/watch?v=1ecsddPThRA&t=5s>

Website: <https://percorsiconibambini.it/legamin/scheda-progetto/>

CESTA VON - SLOVAKIA

<p>Short description of the case study</p>	<p>Cesta von NGO has been providing services to disadvantaged Roma families through trained assistants directly from their communities since. These so called Omamas help build parenting skills and focus on development and education of children. Currently, Cesta Von also started with the Filip programme, through which male assistants provide these disadvantaged families with guidance and support in social and financial field.</p>
<p>Tell the story. (Include the interview summary that you make with the representative of the best practice)</p> <ol style="list-style-type: none"> 1. What went well? 2. What was the biggest challenge? 3. Any suggestion for the future <p>Please indicate whether the action was original (developed for that particular situation, occasion, project), or it was adapted from some other project/activity. If it was adapted from something else, how the</p>	<p>Cesta Von's story began with a vision to help disadvantaged Roma families break the vicious cycle of generational poverty. It responds to the problem of thousands of people in Slovakia living in intergenerational poverty. Children are born into difficult circumstances and their starting point is set at birth. Low levels of education, high unemployment, inadequate housing, and frequent health problems create a vicious circle that is difficult to break without outside help.</p> <p>They have started programmes in poor communities to develop children from birth and work with their parents in a targeted way. Omamas and FILIPs regularly visit hundreds of families directly in the communities, where family members themselves become agents of change.</p> <p>Its vision is that every child born into poverty should grow up in a supportive environment and be given the chance to fulfil his or her potential. If they receive a better education, their chances of success in life will be greater. They also want to give families the opportunity to learn how to manage their finances more effectively, to get and keep a job, or to improve their housing. They aspire to turn poor settlements into viable communities.</p>

process of adapting it went - as an example for those who read it how they can think and plan to adapt something to whatever their particular need may be.

At the moment, Cesta Von is running three programmes, focusing on parenting skills, financial literacy and improving Cesta's Slovak language skills - Omama, Filip, and Amal.

The programmes are gradually being expanded, responding to real problems in disadvantaged communities encountered by the workers in the field. They have gradually expanded their support to include financial literacy, as usury is a significant issue in many communities, and provide comprehensive support to selected families. Another issue that Cesta Von is addressing, is the language level of the outreach workers. As Slovak is not the mother tongue of most of the Omamas and they are working with children and preparing them linguistically for the rest of their lives, they are now provided with language training as well as mentoring and training.

The most difficult thing at first was gaining the trust of the communities but this is gradually being overcome. Cesta Von actively communicates about its activities on social media and, thanks to clever marketing, has managed to raise public awareness of the poverty issues among the Roma.

Objectives: In cooperation with local social workers and other professionals who are in direct contact with the poverty-afflicted communities, one (or more) - omamas – are chosen who are capable, responsible, hard-working, and well-respected in the local community. With the help of early intervention professionals, these women are trained in the methods of early childhood development and in creating appropriate conditions for child growth. Then those participants who successfully completed the training and who demonstrate willingness and commitment to the project, are employed by the organization. In cooperation with other professionals and with their mentorship, supervisions, and practical preparation, the omamas help to develop the youngest children aged 0-3, later 4-6. They offer counselling in early child development to parents of young

children as well as to pregnant mothers in the whole community. Every week, they will visit homes of families with small children, and they will organize parents clubs on a regular basis.

Methodology: In pilot communities, a unique method was developed and tested, which includes various elements of successful programs of psychosocial stimulation of a young child, and which adjusts them to the conditions of living in extreme poverty. The goal of the intervention is to improve all aspects of early child development: fine and gross motor skills, cognitive abilities, socio-economic area, language skills and communication, creativity, resilience, and healthy lifestyle. The program is to strengthen self-confidence of children and parents, their mutual relationship and respect of a child towards oneself and others. All of this improves a child's readiness for pre-school or school.

Cesta Von is in touch with experts from Jamaica and Columbia who have been implementing a similar program of early child development for more than 20 years. In Jamaica, a longitudinal follow-up research has been carried out demonstrating that the children involved in the program significantly increased their cognitive abilities and literacy skills, they progressed better in school, they earned more money as adults, and they had fewer signs of depression and delay. We use the **Play wisely** program focused on brain development and movement capacity of children (www.mudrehranie.sk).

Impact: Currently Omamas work already with more than 900 young children living in hard conditions in Slovakia, the programme has been acclaimed and celebrated widely as a good practice in Slovakia. In 2022, Cesta Von completed pilot research with Oxford University. Through the INTER-NDA method, they assessed the neurodevelopment of children aged 2 years in the areas of cognition, speech, fine and gross motor skills, and social behaviour.

Conclusion: For mothers and father in poor communities, our omamas become a source of information with regards to parenting, such in in the middle class, young parents receive advice from their parents. In generational poverty, the generation which would pass on advice and habits for a successful life is absent since people in poverty never experienced it. Our Omamas represent

this missing generation and they communicate to the people living in adversity important parenting advice.

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PADRI E FIGLIE. ALLENARSI ALLA PARITA - ITALY

<p>Short description of the case study</p>	<p>The case study refers to the Parenting methodology, and focuses on the relationship between fathers and daughters, starting from the experience of Girolamo Grammatico, an Italian parental coach and “feminist father” training other fathers and men towards gender equality.</p>
<p>Tell the story. (Include the interview summary that you make with the representative of the best practice)</p> <ol style="list-style-type: none"> 1. What went well? 2. What was the biggest challenge? 3. Any suggestion for the future <p>Please indicate whether the action was original (developed for that particular situation, occasion, project), or it was adapted from some other project/activity. If it was adapted from something else, how the</p>	<p>Girolamo likes to write, and besides being a coach and a dad he is also a writer. A decade after the birth of his first daughter, he put his approach to responsible, feminist fatherhood on paper in the book <i>Padri e figlie</i> (Fathers and daughters).</p> <p>It all started as a path of self-awareness, because although he strongly desired his children, he realized that he had introjected parental models in which he did not recognize himself and therefore did not want to pass on to his children. When he had children, he began to study everything he could about parenting, especially in the field of intersectional feminism: then, he worked a lot on biases and automatisms. Feminist practice helped him understand himself and what father he wanted to be, and what tools to use. Then this helped him rediscover the power of his work as a humanist coach and be more effective.</p> <p>The difficulty was first of all in close relationships, with grandparents, cousins, relatives. He advises against persistence when there is hostility in these relationships, but in daily practice to carry forward this policy vision. The relationship with the institutions has also been difficult because they reproduce a patriarchal culture in Italy: The world of education shows how far behind we are at a national level. The biggest difficulty is regulating the male ego, which in Italy is enormous.</p>

process of adapting it went - as an example for those who read it how they can think and plan to adapt something to whatever their particular need may be

All this can and must be carried forward daily with large private or public actions. By educating own children to read feminist books, as well as by promoting national paternity leave campaigns – two examples of things that Girolamo takes care about.

Objectives: What does it mean to educate a little woman? How is gender equality taught in the family? Girolamo Grammatico, expert Coach, since many years, as a writer and trainer helps his trainees (trainers and parents) to reflect together on what it means to be a father today, especially when it must be for a child. His book “Fathers and daughters. Training for gender equality ”, is - quoting the same – a “humanistic” coaching book to train the abilities of fathers to make this society a place that welcomes our daughters (and our sons) and allows them to develop their potential, so that each one realizes herself and can be happy, free, and autonomous.

Methodology: Girolamo founds his work on the achievement of a new paternal awareness. Being a father, today, also means carrying on a specific "male model". A necessary model to educate the young women of the future and, above all, young men. What does this mean? Educating for inclusion and gender equality. Educating for freedom.

Impact: As a dad and coach, Girolamo is daily involved in dealing with other fathers on issues related to women starting from the awareness that we have inherited patriarchal paradigms that we often do not realize. For Girolamo, as a father and as a coach, the study and practice of intersectional feminism was fundamental during the last decades. In this sense, Girolamo has written two very significant books, flanked by an admirable coaching job where he precisely deals with parenting. The books in question are “#esserepadrioggi. Manifesto of the imperfect father” and “Fathers and daughters. Training for gender equality” (Ultra edition).

Conclusion: After a 20-years career, the stereotypes he works against most:

The daughter is seen as a princess to be "embellished" and "protected" by obscuring the possibility of seeing the whole spectrum of alternatives;

The others are to see her as a future mother, framing her in a single role and struggling to consider that this can don't even happen as our daughter's free choice. The challenge is to educate and raise our daughters by allowing them to freely self-determine.

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TOY FOR INCLUSION PLAYHUBS - SLOVAKIA

<p>Short description of the case study</p>	<p>The overall goal is to combat segregation of young Roma children and families and enhance social cohesion through inclusive community-based ECEC services. The project promotes active involvement of Roma and non-Roma communities in ECEC services through the development of ECEC Play Hubs that provide access to quality non-formal ECEC service. The approach has been successfully adapted also for the displaced families from Ukraine in a project financed by UNICEF in years 2022 and 2023.</p>
<p>Tell the story. (Include the interview summary that you make with the representative of the best practice)</p> <ol style="list-style-type: none"> 1. What went well? 2. What was the biggest challenge? 3. Any suggestion for the future <p>Please indicate whether the action was original (developed for that particular situation, occasion, project), or it was adapted from some other project/activity. If it was adapted from something else, how the process of adapting it went - as an example for those who read it how they can think and plan to adapt something to whatever their particular need may be.</p>	<p>Originally the approach of Toy for Inclusion for developed by the International Child Development (ICDI) Initiative organisation from the Netherlands based on the belief that high-quality ECEC is an essential foundation for all children’s successful lifelong learning, social integration, and later employability. Disparities in access to quality education and increasing segregation in schools start early and hit marginalised children harder (e.g., minorities, migrants, Roma children, refugees, etc.). From 2017, TOY for Inclusion piloted an innovative approach to inclusive non-formal ECEC in eight European countries by creating community-based Play Hubs and promoting intersectoral work among early years services in eight European countries including Slovakia, where it was undertaken by Škola dokorán – Wide Open School, n.o. The approach builds parenting skills, promotes social development and cohesion, access to playful learning and cross-sectoral co-operation among educational, health and social services. It is based on four pillars.</p> <ol style="list-style-type: none"> 1. Community-based ECEC, which recognises the importance of all forms of ECEC services (formal, non-formal and informal) that

take place in the community and family settings, and their interaction with each other. This interactivity and community respond to the changing and diverse needs of a whole community and draws on the community and builds on the strengths and interests of community members.

2. **Integrated services for children and their families** that acknowledge the whole family approach and that young children's (and their parents') lives are lived holistically rather than sectorally, which means that needs cannot be met, and rights fulfilled through access to just one sector or one type of service.

3. **Together Old and Young - TOY Programme**, which aims to create opportunities for older adults and young children to learn and have fun together in formal and informal settings. Since 2012, TOY research and training has demonstrated the power of intergenerational learning as a catalyst for social cohesion, intercultural dialogue, and inclusion.

4. **Diversity, Equity, and Inclusion in ECEC** (Anti-Bias and Respect for Diversity Education), which is an approach that promotes respect and acceptance of differences and acting against bias and injustice. This approach requires critical thinking and problem-solving skills in both children and adults. The overarching aim is to create a climate of positive self- and group-identity development through which each child can develop to his or her full potential.

It is believed that the combination of these four building blocks is a very powerful social innovation in education, integration, and social inclusion. It brings together early childhood practitioners and activists working with children growing up in difficult

circumstances (Roma, migrants, low socio-economic background, etc.), to promote equal access to quality ECEC services.

Škola dokorán – Wide Open School has been operating Toy for Inclusion Play hubs since 2017, gradually widening its scope of interest to include Roma families, families of disadvantaged Roma children and families of people running from war in Ukraine always adapting the Play hub services to the specific context in the given community, based on the needs of the target group, training Play hub employees. Specifically in Slovak context we found that the borrowing of toys is rather hard to manage, so the original idea of a toy library was adapted and Play and Learning corners with books and toys are now being set up in every Play hub. It was also found that it is very beneficial to set up the Play hubs in already existing educational institutions, where they are used by all the children, not only the children from the minorities and their families what makes the integration process smoother and more effective. SD-WOS is currently running 14 Play Hubs across Slovakia.

Objectives: The initiative strives to improve the responsiveness and accountability of local authorities towards marginalised Roma communities, build the capacity of local authorities and Roma community representatives to develop and implement inclusive policies and public services, strengthen Roma families by supporting Roma parents in their efforts at raising children in a safe and caring family environment. It provides parents with information, social skills and knowledge on early childhood development and effective parenting techniques, helps improve communication and understanding between parents and children, and promotes positive parental attitudes towards education. It aims to increase the level of enrolment of Roma children in kindergartens, improve mutual tolerance between Roma and non-Roma parents, broaden the range of educational

materials for children from marginalised Roma communities, build trust between all the involved stakeholders, teaches children to meaningfully spend their leisure time, helps Roma parents prepare their children for school, and improves social skills of Roma children and their results, behaviour, and school attendance.

Methodology: The project uses stakeholder mapping, analyses of local needs and challenges, formation of Local Action Teams, training of trainers, training of practitioners, implementation of community-based non-formal educational activities, and intergenerational learning and a home-visiting programme all realised from the 4 existing Play hubs.

Impact: 200 Roma children (aged 0 – 8 years) and their families (80 families); 100 non-Roma children (aged 0 – 8 years) and their families (60 families); 10 ECEC trainers; 80 educators, ECEC practitioners, volunteers.

Conclusion: The project activities have led to increased self-esteem and pride of children and their families, parents and grandparents have become more confident in their parenting skills and their participation in ECEC services and local community life increased. They helped create better conditions for learning and development in inclusive and welcoming ECEC environments and facilitated better cooperation with families and communities. They reduced segregation of Roma, helped local and national stakeholders to gain knowledge, understanding and skills to be able to enhance social cohesion and combat segregation, led to increased parental and multi-generational involvement through joint activities between Roma and non-Roma families in formal and non-formal ECEC settings, and improved transition experience of children. ECEC professionals acquired new skills and tools to build bridges between different cultures. At the same time, the agency and visibility of members of the Roma community have increased and their voice and needs are now better represented.

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SURE START CHILDREN'S HOUSES AND EARLY YEARS PROGRAMMES - HUNGARY

<p>Short description of the case study</p>	<p>The case study examines in more detail the programme of Sure Start Children's Houses in Hungary that has already been running for 20 years in the country. Through building centres for families it tries to provide equal opportunities to deprived families. The case study tells the story of the practise, how it developed in Hungary and what are the lessons learned from it so far.</p>
<p>Tell the story. (Include the interview summary that you make with the representative of the best practice)</p> <p>1. What went well?</p> <p>2. What was the biggest challenge?</p> <p>3. Any suggestion for the future</p> <p>Please indicate whether the action was original (developed for that particular situation, occasion, project), or it was adapted from some other</p>	<p>Sure Start Children's Houses began in England in 1999 as a service for families with young children, providing a friendly and welcoming environment where parents and children can spend time together. They are also a place where families can wash and eat, where parents can meet with professionals who can support them and help them improve their parenting skills, and where they can look for work. The programme aims to promote inclusion and reduce the risks associated with social disadvantage and isolation. Sure Start has been recognised as good practice by the EU and the WHO.</p> <p>Sure Start was introduced in Hungary in 2003 when the British Embassy and the Hungarian Ministry of Health, Social and Family Affairs set up a working group which, with the help of the Norwegian Fund, launched several model programmes. By 2006, 51 Sure Start Houses had been established in 13 counties across Hungary in the most disadvantaged sub-regions. In 2009, the European Union stepped in, and a network of Sure Start Children's Houses was established with EU funding. On 1 January 2013, the Children's Homes were incorporated into the Basic</p>

project/activity. If it was adapted from something else, how the process of adapting it went - as an example for those who read it how they can think and plan to adapt something to whatever their particular need may be.

Child Welfare Services Act, ensuring national support and a national budget. By 2017, a total of 112 Children's Homes were operating across the country, and this number remained maintained in 2020.

At the beginning of the programme there was an effort to introduce the service to a wider population and to attract families from all walks of life. It was believed that this would encourage early integration and build relationships between families from different social backgrounds. However, the funding was used to support only the most deprived and disadvantaged families, and Sure Start Children's Houses became a service exclusively for these communities. The opportunity for wider integration was lost. In some regions, it also became compulsory for families to participate in certain activities in these centres. Lessons and recommendations from the programme can be summarised as follows.

1. The environment: Children's Houses should be well equipped with good quality toys and developmental tools. The purchase of equipment should be facilitated through open tenders, donations and help from the local community.
2. Location and accessibility: The local community agreed that the best location is close to the target community but not far from the town or village centre. All participants agreed on the importance of improved public transport to facilitate the travel of children, parents, and professionals. The lack of public transport created difficulties.
3. Quality of services: The quality of work is largely determined by the approach, attitude, skills, and experience of the staff working in the houses.

Financial constraints and the availability of trained staff can create instability and threaten the continuation of the programme. However, the positive effects of the services are already being seen in some kindergartens, with children showing improvements in social skills, adaptability, vocabulary, and mobility. In addition, many parents have developed their parenting skills, including cooperation, adaptability and problem solving, and have expanded their network of relationships. More research and evaluation would be needed to measure outcomes due to changes in the programme, namely the reduced opportunities for voluntary attendance and the fact that many families whose children are considered at risk are required to attend Sure Start houses at least three times a week.

In conclusion, the Sure Start Children's House programme in Hungary has demonstrated the importance of providing community-based early childhood development opportunities for the population of disadvantaged micro-regions experiencing many challenges.

Objectives: In Hungary, most mothers (and in some cases fathers or grandmothers) stay at home until the child is three years old. However, very few services have been provided for them and there have been very few grassroots initiatives for community-based programmes such as mother and baby clubs, toy libraries, play groups, etc. Mothers with young children are at high risk of isolation, although there is very little data on maternal mental health.

The expected outcome of the services provided by Sure Start Children's Houses is to prevent or help to catch up with developmental delays, ensuring better opportunities for all children, by supporting parents to learn about the developmental needs of young children and by providing professional support.

Methodology: The Sure Start Children's Houses methodology was first introduced in England in 1999 as a service for families with young children, providing a friendly and welcoming environment where parents and children can spend time together. They are also a place where families can wash and eat, where parents can meet with professionals who can support them and help them improve their parenting skills, and where they can look for work.

Sure Start Houses provide a range of services to the families who use them. There are bathrooms and washing machines, as many families do not have running water or a bathroom at home. Kitchens allow parents and staff to cook together, prepare healthy food and celebrate holidays, birthdays, and name-days. Computers are available for parents to use in their search for jobs, training opportunities or other information.

Impact: The first Houses were open in Hungary in 2003 and the programme has been running ever since. Since 2013 the programme has been funded by the state whilst the municipalities are responsible for setting up the space. There were 112 Sure Start Houses in operation in 2020. T-Tudok Inc evaluated the performance of Sure Start Houses in terms of the programme's impact on children's development and parent satisfaction. An additional review provided insights into the services and experiences of participants. The research has a territorial, public health and Roma focus and aims to collect good practices from the beneficiaries.

Conclusion: This programme, even though it currently functions a bit differently than originally foreseen, remains a good practice helping to bridge the gap between the Roma and majority population in Hungary with positive effects on the target group.

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