

Introduction and About the Book

Acknowledgement

NAEYC acknowledges with great appreciation and respect the contributions of Susan S. Aronson, MD, FAAP to this edition and as the Editor for the previous fourth and fifth editions of *Healthy Young Children*.

Child Development

In every early learning setting, the health, safety, and well-being of the children, educators, and staff members are among the highest priorities for the program. Educators must engage in health and safety education, modeling, promotion, planning, and prevention. These efforts take significant work and coordination between many parties, including administrative leadership, classroom teachers, all staff members, the greater community, healthcare professionals, and, of course, families. They also require that educators have a sound understanding of child development and learning to apply developmentally appropriate practice to health and safety education, policies, and goals.

Childhood is a unique period of life when physical, intellectual, emotional, and social growth all occur simultaneously and interactively. Children's bodies and minds are constantly learning how to meet challenges faced in their environment. Research shows that development of the brain (intellectual, cognitive, social-emotional) and children's physical, nutritional, and oral health are strongly linked to the quality of their early experiences. Children need protection from injury and infection, both of which can lead to discomfort, disability, or death. They also need activities that promote healthy growth and development.

Chief among the professional responsibilities of early childhood educators is the responsibility to plan and implement intentional, developmentally appropriate learning experiences across all domains of child development, including social-emotional development, physical development and health, and cognitive development, and the general learning competencies of each child served (AFSCME et al. 2020).

All domains of child development and approaches to learning are important and, as such, work together and support each other. For example, sound nutrition, regular physical activity, and sufficient sleep all promote children's abilities to engage in social interactions that, in turn, stimulate cognitive growth (AFSCME et al. 2020; NAEYC 2020).

Early childhood educators should plan and implement the health aspects of their programs to respond to the predictable developmental patterns of young children. As children progress from young infants to toddlers to preschoolers to school-age children and then to self-sufficient older children, their needs will differ and evolve. At each developmental level, early childhood professionals must simultaneously function as protectors, role models, and teachers for the children in their care. In addition, they play an important role in children's development, by supporting the families of children in their program.

Many practices in high-quality early learning programs enable learning, promote the development of strong bodies that resist disease, foster brain development, and support positive behavior. Here are some examples:

- › Developing warm, positive, continuous relationships between children and caring adults and among children while doing gross motor activities
- › Following recommended nutritional practices, such as offering children opportunities to choose among healthful food and beverage options and involving children in safe and sanitary practices for storing, preparing, and serving food
- › Providing sufficient developmentally appropriate and vigorous structured and unstructured physical activities that promote fitness and enable children to focus better on subsequent learning activities
- › Checking and tracking preventive healthcare services for children and staff members, including
 - Ensuring that they receive all recommended immunizations to control vaccine-preventable diseases so children can be present in the program for learning
 - Obtaining timely recommended screenings to detect and manage health problems to limit disabilities that can impair learning
- › Following oral health practices to prevent dental illnesses that can be painful, interfere with speech and nutrition, and reduce social competence

The many hours of contact that educators have with children can be very influential. Many children remember throughout life their early childhood education experiences. Healthful routines in the early childhood program can promote this growth and development.

Risk Management and Safety

Health and safety are not external patches or optional aspects of early learning programs. Regardless of the limits imposed by constraints in funding, staffing, the environment, or the curriculum, the health and safety component of the program should be an integrated part of daily activities. The health and safety component involves risk management and continuous assessment and learning for educators. A completely risk-free and infection-proof program is neither possible nor desirable—children need to experience challenge. *Risk management* involves making choices and finding acceptable alternative approaches so children can experience challenges without significant adverse consequences. While compromise is necessary, usually it is possible to meet the seemingly conflicting objectives of risk management and risk taking. Frequent safety checks of the site, with corrective actions when necessary, can prevent injuries. Careful, regular observations of children may reveal physical health and social-emotional difficulties that respond best to early treatment. You will find specific information, procedures, and recommendations on each of these topics, as well as on many others, in this book.

The Book and National Standards

This book is based on national standards for health and safety and is grounded in research. Both healthcare professionals and early childhood professionals have participated in writing every edition of this work. The book is intended as a guide to facilitate collaboration among early childhood educators, healthcare professionals, and family members for implementing currently accepted

health and safety standards. The primary reference for this book is *Caring for Our Children: National Health and Safety Performance Standards; Guidelines for Early Care and Education Programs*, fourth edition (CFOC), published by the American Academy of Pediatrics (AAP), and the *Caring for Our Children* online standards database maintained by the National Resource Center for Health and Safety in Child Care and Early Education (<http://nrckids.org>). In addition to CFOC, the text refers to guidelines from the Centers for Disease Control and Prevention (CDC) and *NAEYC Early Learning Program Accreditation Standards and Assessment Items*. These guidelines describe the conditions and practices for which sound evidence exists that following the standards will reduce an unacceptable risk of harm.

If you find it challenging to meet some of the standards in your program, implement what you can do now. Major health gains and safety measures can be achieved by taking simple steps. For example, diligently following hand-hygiene procedures (appropriate handwashing or proper use of alcohol-based hand sanitizers) and keeping everyone—children and adults—up to date with required vaccines are two strong defenses against the spread of infectious diseases.

Set targets to address the standards you cannot currently meet. Assess your priorities to avoid the most significant risks; don't expect to change everything overnight. To increase the likelihood of changes being successful, plan carefully and thoroughly, involving those who are affected, those with authority, and those with expertise related to the situation.

Some recommendations in *Healthy Young Children* may differ from those in other credible sources. Materials are published and updated in different time periods, drawing on an ever-changing base of information. Also, within the medical and scientific community, some experts differ on specific approaches. When there is a conflict, seek the *rationale* for the recommendations. Sometimes the different approaches are equally acceptable alternatives. Other times, you will have to make the best decision you can after exploring the basis for the differing points of view. If the issue involves technical information, you may want to consult a trusted local expert with the appropriate scientific background. Your state or local department of public health may be able to provide guidance or suggest where to get the help you need.

Book Organization and Chapter Features

This book is organized into four parts.

Part 1: Health and Safety in Early Childhood Education introduces the responsibilities of and collaboration between early childhood educators and healthcare professionals to ensure the health and safety of children and early learning programs overall.

Part 2: Promoting Children's Health includes chapters on specific health topics, each providing discussions, definitions, and recommendations for health promotion and illness prevention.

Part 3: Prevention, Planning, and Treatment includes chapters focused on specific guidelines and recommendations for prevention of, planning for, and treatment of certain injuries, conditions, and diseases.

Part 4: Program and Facility Management provides an overview of program and facility regulations, protocols, and guidelines for maintaining safe spaces and responding to emergencies.

Chapter Features

- › **Learning Objectives.** Each chapter opens with learning objectives to guide students through the key concepts that will be discussed.
- › **Special Features.** Each chapter contains special features designed to highlight specific content, provide tips, or present additional information on a specific topic.
 - **Immediate Impact.** This feature is targeted at educators and includes suggestions for implementing immediate strategies for improving health and safety in the program and classroom.
 - **Family Connections.** This feature provides tips and strategies for how educators can work with families to extend the benefits of health and safety measures taught and used in the program to the home.

Book Appendixes

Forms

Some of the chapters reference resources, such as forms and checklists, that can facilitate communication and recordkeeping. Many of these resources are provided as links within the chapters, and others are provided in the back of the book as appendixes.

Glossary and List of Acronyms

Online Resources

Online resources can be accessed at [NAEYC.org/healthy-young-children](https://naeyc.org/healthy-young-children)

- › A **crosswalk** of book chapters and NAEYC Early Learning Program Standards
- › All **book references** are posted online and searchable.
- › A **test bank** with more than 190 content-based questions for quick quizzes and exams

A note on terminology: This book uses the terms *family*, *parent(s)*, *caregiver(s)*, and *primary caregiver(s)* in an effort to represent diverse family structures and living situations and different contexts. In each instance, the term used refers to the person or persons responsible for the care of a child in the home.