Nurturing Parenting Programs®

Evidence-Based Programs for the Prevention and Treatment of Child Abuse and Neglect

Facilitator Training Workbook and Program Implementation Guide

16th Edition of the Facilitator Training Workbook
January 1, 2014

Stephen J. Bavolek, Ph.D.
Asheville, North Carolina

Family Development Resources, Inc.
NurturingParenting.com
AssessingParenting.com

Creating a Worldwide Culture of Nurturing
16th Edition 2014

ISBN # 1-57202-215-9
122013

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**Nurturing Parenting Website**
The website contains information regarding the Nurturing Parenting Programs®, ordering materials on-line, training workshops, listing of trainer/consultants, news, research & validation, web based training, reports and related articles.
NurturingParenting.com

**Assessments and Inventories**
For more information regarding valid and reliable inventories designed to assess parenting practices, beliefs, knowledge and skills, visit our website at AssessingParenting.com
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About the Author

Stephen J. Bavolek, Ph.D. is a recognized leader in the fields of child abuse and neglect treatment and prevention, and parenting education. Born and raised in Chicago, Dr. Bavolek’s professional background includes working with emotionally disturbed children and adolescents in schools and residential settings, and abused children and abusive parents in treatment programs. Dr. Bavolek has conducted extensive research in the prevention and treatment of child abuse and neglect.

He received his doctorate at Utah State University in 1978 and completed a post-doctoral internship at the Kempe Center for the Prevention and Treatment of Child Abuse and Neglect in Denver, Colorado. He has held university faculty positions at the University of Wisconsin - Eau Claire, and the University of Utah. Dr. Bavolek has received numerous international, national, state and local awards for his work, including induction in 1989 into the Royal Guild of the International Social Work Round Table in Vienna, Austria, and selection in 1983 by Phi Delta Kappa as one of 75 young educators in the country who represent the best in educational leadership, research and services.

In addition, he was selected by Oxford Who’s Who in 1993 as a member of the elite registry of extraordinary professionals and in 1998 as a member of the elite registry of extraordinary CEO’s. Dr. Bavolek was also Mental Health Professional of the Year of Northern Wisconsin in 1985 and Child Advocate of the Year in Utah in 1991. In 1980, he was recognized by the Military Order of the Purple Heart for outstanding research and services to the handicapped.

Dr. Bavolek has conducted thousands of workshops, has appeared on radio and television talk show programs, and has published numerous books, articles, programs and newsletters. He is the principal author of the Nurturing Parenting Programs®, programs to treat and prevent child abuse and neglect, and the Adult-Adolescent Parenting Inventory (AAPI-2), an inventory designed to assess high risk parenting attitudes. Dr. Bavolek is President of Family Development Resources, Inc. and Executive Director of the Family Nurturing Centers, Inc.
Nurturing Parenting Programs®
Reference Table by Levels of Prevention
August 2013

A complete listing of all the Nurturing Programs is listed on our website: NurturingParenting.com

## Primary PREVENTION – EDUCATION Programs (5 to 18 SESSIONS)

Prevention-Education programs are designed to empower individuals and families with new knowledge, beliefs, strategies and skills to make good and healthy lifestyle choices. The goal of prevention-education is to empower. Programs at this level are generally short-term approximately 5 to 18 sessions (dosage) in length.

*The Prenatal, ABC’s, and Health Challenges program sessions are sequential and build upon each other. These are closed end programs, meaning parents are asked to participate in all sessions and no new parents can join the program after Session 2.

**Community Based programs that are designed as a series of stand-alone sessions. Parents can select the lessons they wish to attend as mandatory attendance is not required for all sessions.

### Primary Prevention - Education Programs

<table>
<thead>
<tr>
<th>Group-Based</th>
<th>Home-Based</th>
<th># of Sessions</th>
<th>Session Length</th>
</tr>
</thead>
<tbody>
<tr>
<td>X</td>
<td>X</td>
<td>9</td>
<td>2½ hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td>18</td>
<td>2 hours</td>
</tr>
</tbody>
</table>

There is no corresponding program for children.

#### Prenatal Families – Group-Based Program*

Pregnant moms and their partners or other adult family members attend 9 sessions. The sessions focus on improving the quality of life for the mom, her partner and the relationship. Parents learn about the dangers of smoking, drinking and use of legal and illegal drug use while pregnant. Parents also learn about proper nutrition, fetal growth and development and healthy brain development.

*Two Models of the Prenatal Program are available

#### ABC’s for Parents & Their Children 5 to 8 years*

Parents and their children 5 to 8 years attend separate sessions that meet concurrently. Parents learn about nurturing parenting skills and ways to promote their children’s success in schools. Discipline, communication, helping children express their feelings, strategies for building self-worth and personal power are included in the program.

Children learn comparable skills at age appropriate levels through puppets, role-play, music, art activities and leader-led discussions. Children close the session by parading into the parent’s room proudly displaying their lesson projects.

#### Parents & Their Children with Special Needs & Health Challenges*

This group based program is designed to help parents and their children with chronic or life threatening medical conditions, developmental delays, life-altering disorders and disabilities. Parents and their children meet separately for the first 90 minutes and meet together for the last 30 minutes, one day a week for 12 weeks.

Children’s groups are designed to meet the needs of all children regardless of abilities or health concerns. The program material is consistent with topics covered in the adult sessions, and supports the healthy development of children ages birth to 12.

#### Community Based Education: Nurturing Parenting**

Ten independent lessons offered on power point. Lessons include the philosophy of nurturing parenting, brain development, and discipline, building empathy and self-worth, positive ways to deal anger and stress and alternatives to spanking.

*No corresponding children’s program.*
### Primary Prevention - Education Programs

<table>
<thead>
<tr>
<th>Program Title</th>
<th>Group-Based</th>
<th>Home-Based</th>
<th># of Sessions</th>
<th>Session Length</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Community Based Education: Nurturing Parenting in Military Families</strong></td>
<td>X</td>
<td></td>
<td>7</td>
<td>1½ - 2 hours</td>
</tr>
<tr>
<td>Seven classes offered on power point addressing the uniqueness's military parent's face in raising their children. Lessons include deployment, reuniting, staying connected, keeping the relationship together and PTSD.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is no corresponding children’s program.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Community Based Education: Alcohol &amp; Kids Don’t Mix</strong></td>
<td>X</td>
<td></td>
<td>5</td>
<td>2 hours</td>
</tr>
<tr>
<td>An innovative, five lesson community based training program designed to address the dangers of alcohol addiction, fetal alcohol syndrome, teens and alcohol, prescriptive drug abuse as well as modeling appropriate adult consumption of alcohol.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is no corresponding children’s program.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Community Based Education: Alcohol, Anger &amp; Abuse</strong></td>
<td>X</td>
<td></td>
<td>5</td>
<td>2 hours</td>
</tr>
<tr>
<td>Alcohol, Anger and Abuse is an innovative community based training program that explores understanding and preventing the relationship between alcohol and other drug abuse and child abuse and neglect, and how they are linked.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>There is no corresponding children’s program.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Community Based Education: Teen Pregnancy Prevention</strong></td>
<td>X</td>
<td></td>
<td>8</td>
<td>1½ - 2 hours</td>
</tr>
</tbody>
</table>
The Community Based Education Teen Pregnancy Prevention is eight independent 60 to 90 minute lessons offered on CD. Lessons educate teens about the consequences of high risk behavior and give them the tools necessary to make better choices. |
| There is no corresponding children’s program.                                |             |            |               |                |
**Secondary PREVENTION – INTERVENTION Programs (12 to 20 SESSIONS)**

Prevention-Intervention programs are designed for at-risk youth and teen parents, as well as parents and families experiencing mild to moderate levels of individual and family dysfunction. Programs in this range work on stopping the dysfunction and engaging individuals and families in the process of building positive nurturing beliefs, knowledge and skills. Prevention-Intervention programs are referred to as Moderate Term programs and are generally from 12 to 20 sessions (dosage) depending on assessed needs. Individuals and families are required to go through an evaluation/assessment to match the assessed needs to the correct program content and dosage.

<table>
<thead>
<tr>
<th>Secondary Prevention - Intervention Programs</th>
<th>Group-Based</th>
<th>Home-Based</th>
<th># of Sessions</th>
<th>Session Length</th>
</tr>
</thead>
<tbody>
<tr>
<td>Nurturing Skills for Families Program</td>
<td>X</td>
<td>x</td>
<td>Sessions Vary</td>
<td>2½ hours 90 minutes</td>
</tr>
</tbody>
</table>

Session # is based on the assessed needs of the family/group

Children attend separate group sessions that meet concurrently with the parents. The Lesson Guide for Children provides lessons that are complimentary to the parents.

Depending on the age of the child, home based classes engage parents and child in attachment activities.

<table>
<thead>
<tr>
<th>Nurturing Skills Programs for Latino, Haitian &amp; Arabic Families</th>
<th>Group-Based</th>
<th>Home-Based</th>
<th># of Sessions</th>
<th>Session Length</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
<td>x</td>
<td>Sessions Vary</td>
<td>2½ hours 90 minutes</td>
</tr>
</tbody>
</table>

Session # is based on the assessed needs of the family/group

Children attend separate group sessions that meet concurrently with the parents. The Lesson Guide for Children provides lessons that are complimentary to the parents.

Depending on the age of the child, home based classes engage parents and child in attachment activities.

<table>
<thead>
<tr>
<th>Nurturing Skills for Teen Parents - Comprehensive Curricula for Schools &amp; Residential Centers</th>
<th>Group-Based</th>
<th>Home-Based</th>
<th># of Sessions</th>
<th>Classes run 50 to 90 minutes</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
<td>x</td>
<td>Sessions Vary</td>
<td>50 to 90 minutes</td>
</tr>
</tbody>
</table>

Session # & Length is based on the length of the semester or the discretion of the instructor

Children are encouraged to be a part of the program to enhance positive teen parent-child attachment. Instructional booklets are provided to assist teens in promoting healthy child development.

Adolescents attending teen nurturing parenting classes receive a parent handbook, and engage in role play, discussions, and creative expression through art.

Nurturing Skills for Families is an innovative model of the Nurturing Programs that is designed to provide flexibility to meet the needs of the families with children ranging in age from birth to 11 years old. The Lesson Guide for Parents contains over 80 individual lessons presented in 16 competency areas. Core competency lessons form the basic structure of the program. Additional supplemental lessons allow parent educators to tailor the program to the needs of the group or family.

The Nurturing Skills Programs for Latino, Haitian and Arabic Families are modeled after the Nurturing Skills for Families Program. All three culturally adapted programs include parenting handbooks and assessment inventories in the native languages. Games, parenting DVDs and other instructional materials are available in Spanish only. Other cultural adaptations of the Nurturing Skills Programs are in production. Core competency lessons form the basic structure of the programs. Group and home-based sessions are provided in Lesson Guides for Parents and Children.

Nurturing Skills for Teen Parents is a comprehensive curriculum containing 59 individual lessons that are perfect for classes offered in high schools, after-school programs, and residential facilities. The Lesson Guide is easy to use detailing the content of each lesson. Core lessons are identified that represent the basic skills of teen parenting. Curriculum offers opportunities to educate teens on issues critical to adolescence including pregnancy prevention, date rape, peer pressure, dating, violent relationships and other health related skills.
# Secondary Prevention - Intervention Programs

## Nurturing America’s Military Families

The Departments of the Navy, Army and Marines have implemented the Nurturing Program in the New Parent Support Programs (NPSP) worldwide. The length of the program differs per installation as the NPSP program is voluntary. Families can enter and drop out at will. Deployment and relocation back to the States is common. NPSP is commonly a home visitation program although some bases implement the program in groups. The Lesson Guide stresses nurturing parenting practices as well as issues related to being a military family. Such issues include deployment, staying in touch, PTSD, re-unification and more.

Program is appropriate for prevention and intervention.

<table>
<thead>
<tr>
<th></th>
<th>Group-Based</th>
<th>Home-Based</th>
<th># of Sessions</th>
<th>Session Length</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td>X</td>
<td>X</td>
<td>Sessions Vary</td>
<td>2½ hours</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
<td></td>
<td>90 minutes</td>
</tr>
</tbody>
</table>

Session # is based on the assessed needs of the family/group

Children attend separate group sessions that meet concurrently with the parents. The Lesson Guide for Children provides lessons that are complimentary to the parents.

Depending on the age of the child, home based classes engage parents and child in attachment activities.

## Nurturing Father’s Program

A 13 session group-based program designed to increase knowledge, understanding and skills associated with male nurturance. Fathers meet weekly to increase their understanding of their own childhood relationship with their father or father figure, learn to handle feelings of anger and stress, proper communication, ways to nurture themselves and more.

Program is appropriate for prevention-intervention.

|                          | X           | 13         | 2½ hours     |
|                          |             |            |              |

No corresponding children’s program.

The Nurturing Fathers Program is an adaptation of the Nurturing Program philosophy and lessons designed and implemented specifically for dads.

## “Nurturing God’s Way” Parenting Program for Christian Families

A 21 session group-based program authored by Sue Laney, Director of the Family Nurturing center of Georgia. This program is designed for families who embrace the teachings of the Bible to guide their parenting beliefs and practices. This cultural adaptation of the Nurturing Program incorporates the basic philosophy of nurturing parenting while assisting parents in building a nurturing Christian family lifestyle.

This program is appropriate to use as an intervention.

|                          | X           | 21         | 2½ hours     |
|                          |             |            |              |

No corresponding children’s program.

The Nurturing God’s Way program is an adaptation of the Nurturing Program philosophy and lessons designed and implemented specifically for parents of Christian faith.

## Family Nurturing Camp Weekend Experience

The Family Nurturing Camp is a structured therapeutic weekend camp experience designed to help families build caring, positive family life interaction patterns. The Camp is a structured model based on the multiple components that include psycho-educational groups, family based intervention and therapeutic, recreational and art activities to address the specific issues that affect families at risk for maltreatment.

This program is appropriate to use as an intervention.

|                          | X           | Weekend    | Weekend      |
|                          |             |            |              |

Children engage in art activities, discussions, hikes, trust building exercises, high ropes course and family strengthening activities.
### Tertiary PREVENTION – TREATMENT Programs (15 to 25 Sessions)

Prevention-Treatment programs (tertiary prevention) are designed for families referred for parenting education by Social Services/Mental Health for child abuse and neglect and/or family dysfunction. Tertiary level programs "treat" abusive and neglecting parent-child or parent-teen dysfunctional interactions through a process called "re-parenting." In re-parenting, parents increase their understanding of the abuse and neglect they experienced as children and how these parenting beliefs and patterns were passed on to their children. Old, hurtful patterns of parenting are replaced with newer, nurturing patterns.

Prevention-Treatment programs are generally referred to as Long Term programs and are generally **15 to 25 sessions or longer** depending on assessed needs of the family. Programs listed below are evidence-based programs for parents and their children at different developmental/age levels.

<table>
<thead>
<tr>
<th>Tertiary Prevention - Treatment Programs</th>
<th>Group-Based</th>
<th>Home-Based</th>
<th># of Sessions</th>
<th>Session Length</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Nurturing Program for Adult Parents &amp; their Infants, Toddlers &amp; Preschoolers - Group Based</strong>&lt;br&gt;Available for Latino, Haitian and Arabic families</td>
<td>X</td>
<td></td>
<td>16 with 5-7 individual parent sessions</td>
<td>2½ hours</td>
</tr>
<tr>
<td>Developed, implemented and validated throughout the state of Louisiana, this evidence-based program provides intense group and home based parenting sessions to families receiving services from child welfare. Parents attend 16 group sessions each lasting 2½ hours. Families can also receive individual parent sessions between the group sessions to ensure the knowledge and skills presented in the group sessions are being implemented in home. Program is appropriate to use as an intervention for high-risk families.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Nurturing Program for Adult Parents &amp; Their School-Age Children 5 to 11</strong>&lt;br&gt;Available for Latino, Haitian and Arabic families</td>
<td>X</td>
<td></td>
<td>15</td>
<td>2½ hours</td>
</tr>
<tr>
<td>A 15 session group based program with over 25 years of research recognized as one of the top parenting programs in the country design for the treatment and prevention of child abuse and neglect. Parents learn to replace old unwanted abusive parenting patterns for more caring, nurturing ones. Activities Manual details the activities for parents who engage in discussion, role play, expressive art activities, and assessments. Program is appropriate to use as an intervention for high risk adult parents and treatment for parents experiencing child maltreatment.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Nurturing Program for Young Parents &amp; their Children</strong>&lt;br&gt;Available for Latino, Arabic and Haitian families</td>
<td>X</td>
<td></td>
<td>16 with 5-7 individual parent sessions</td>
<td>2½ hours</td>
</tr>
<tr>
<td>Teen parents attend 16 sessions that address their role as a parent and the life issues they face as a teen. Based after the Louisiana model, teens can attend 16 group-based classes and 5-7 individual parent sessions. Empowering teens to be nurturing parent’s builds positive parent-child attachment. Empowering teens to make healthy personal choices provides children with positive role models. Program can be used as an intervention for high risk teen parents or a treatment for teens that experienced maltreatment.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>School-age children attend their own group that meets concurrently with the parents group. There are two subgroups that can be created:</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Children 5 to 8</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>- Children 9 to 12 due to developmental maturation issues.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children are learning many of the concepts the parents are learning to promote easy transition from classroom to home.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Children of teen parents participate in the program in ways that are appropriate for their age. Activities are available for toddlers and preschoolers while their teen parents are attending their classes. In home settings, the children are a part of the home visits.</td>
<td></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Tertiary Prevention - Treatment Programs</td>
<td>Group-Based</td>
<td>Home-Based</td>
<td># of Sessions</td>
<td>Session Length</td>
</tr>
<tr>
<td>----------------------------------------</td>
<td>-------------</td>
<td>-----------</td>
<td>--------------</td>
<td>----------------</td>
</tr>
<tr>
<td><strong>Nurturing Program for Parents &amp; Adolescents</strong>&lt;br&gt; <em>Available for Hmong and Latino Families</em>&lt;br&gt;This program is designed to repair abusive parent-teen relationships. Parents and their teens attend separate groups concurrently, and then join as one group for 90 minutes. Parents and teens role-play, discuss, draw, and learn how to live with each other, learn how to play together, to communicate respectively, and to be a positive, nurturing family.&lt;br&gt;This program is appropriate as an intervention as well as a treatment for abusive and dysfunctional parent-teen relationships.</td>
<td>X</td>
<td>12</td>
<td>3 hours</td>
<td>Teens participate in their own group that meets concurrently with their parents. After break time, parents and teens stay together in one group for 90 minutes. Role play, discussions, expressive art activities, DVDs, inventories are some of the ways parents and teens build positive, nurturing relationships.</td>
</tr>
<tr>
<td><strong>Families in Substance Abuse Treatment &amp; Recovery</strong>&lt;br&gt;There are 17 topic areas presented in the program, in addition to three topics focused on men and fathers. Each topic area represents a group-based session of 90 minutes. However, due to the number of activities and the depth of the information presented in each topic area, more than one session may be helpful to adequately increase parents’ knowledge and build their skills.&lt;br&gt;The program is designed to help parents learn the principles and practices of Nurturing Parenting while assisting parents in strengthening their own recovery, facilitating recovery within their families, and building a nurturing family lifestyle.</td>
<td>X</td>
<td>17</td>
<td>90 minutes</td>
<td>Children participate in a separate group that meets concurrently with the parents group. Activities are designed to help children deal with issues of separation by building a positive parent-child attachment.</td>
</tr>
<tr>
<td><strong>It’s All About Being a Teen - Comprehensive Curricula for Schools &amp; Residential Centers</strong>&lt;br&gt;Designed to enhance the development of nurturing skills in teens, this comprehensive curriculum contains 99 individual lessons that promote healthy teen development. Teens increase their awareness of self and others by sharing issues about themselves, their families, their childhood, as well as issues related to being a teen such as dating, love, sex, date rape drugs, pressure, and drugs, communication, handling stress and anger, expressing feelings, building self-worth, hormones, moods, teen brain and differences between male and female brains.</td>
<td>X</td>
<td></td>
<td>Sessions Vary</td>
<td>Classes Run 50 to 90 minutes</td>
</tr>
</tbody>
</table>
Comprehensive
Long Term Programs (26 to 55 Sessions)

Comprehensive programs are ideally suited for agencies like Healthy Start, Head Start, schools, residential centers, home-visitation programs and parent education programs designed to offer long term, more comprehensive parenting education. The Nurturing Programs presented below are evidence-based program that have been validated with agencies providing services over a period of years to families.

<table>
<thead>
<tr>
<th>Comprehensive Programs</th>
<th>Group-Based</th>
<th>Home-Based</th>
<th># of Sessions</th>
<th>Session Length</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Teen Parents &amp; Their Children - Group Based</strong></td>
<td>X</td>
<td>26</td>
<td>2½ hours</td>
<td></td>
</tr>
<tr>
<td>Teen parents attend 26 group based sessions. Each session lasts 2½ hours with a break in-between. Lessons address issues of being a teen, a teen parent, and a member of a family. Teens practice parenting skills with their children during class time. The lessons can be implemented in schools settings, residential settings, one-to-one or in a group.</td>
<td>Activities provided to the children are age appropriate. Facilitators utilize the Nurturing Book for Babies and Children and the Lesson Guide for Children.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Teen Parents and Their Children - Home Based</strong></td>
<td>X</td>
<td>50</td>
<td>1½ hours</td>
<td></td>
</tr>
<tr>
<td>Teen parents participate in 50 home visitations each session lasting approximately 90 minutes. Grandparents are invited to participate in the lessons at the home visitors’ discretion.</td>
<td>The Nurturing Book for Babies and Children is utilized as the guide to build parent-infant attachment. Each home visit has 30 minutes of scheduled parent-child time.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Adult Parents &amp; Their Infants, Toddlers &amp; Preschoolers - Group (Center) Based</strong></td>
<td>X</td>
<td>27</td>
<td>2½ hours</td>
<td></td>
</tr>
<tr>
<td>The group-based (Center-Based) program is a comprehensive parenting program utilized by agencies where parents attend over a period of years. Programs like Head Start offer Center based parenting education. Many agencies modify the length of the group sessions to 1½ hours to allow more interactive time between parent and child.</td>
<td>Children attending center-based classes for infants, toddlers and preschoolers are involved in a curriculum that is age and developmentally appropriate.</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td><strong>Adult Parents &amp; Their Infants, Toddlers &amp; Preschoolers - Home Based</strong></td>
<td>X</td>
<td>55</td>
<td>1½ hour</td>
<td></td>
</tr>
<tr>
<td>The 55 session home-visitation program is commonly used by agencies offering long-term support to families raising children infancy to preschool. Many Healthy Start and Head Start agencies utilize the program as the basis of their parenting curriculum.</td>
<td>The Nurturing Book for Babies and Children is utilized as the guide to build-parent-child attachment. Each home visit lasts 90 minutes and 30 of the minutes is devoted to positive parent-child interaction.</td>
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</tr>
</tbody>
</table>
Chapter 1:
Incidence and Effects of Child Abuse and Neglect

Incidence and History of CAN

- At least 1.25 million children in the U.S. experienced child maltreatment in 2005-06 (Sedlak et al., 2010).
- CAN cost our nation $220 million every day.
- It is estimated that the U.S. a staggering $80 Billion in 2012.


Tragic Results of Child Abuse and Neglect

- Child maltreatment results in over 1,700 deaths each year. It is estimated that five children die each day from abuse and neglect.
- Do the math: 5 children x 365 = 1,825 dead each year x 81 years (average lifespan of American female) = 147,825 children will die.
- The negative health effects reach well beyond these fatalities.
- Children who are maltreated are at higher risk for adult health problems such as:
  - alcoholism
  - smoking
  - depression
  - drug abuse
  - obesity
  - high-risk sexual behaviors
  - suicide
  - certain chronic diseases.
- The history of childhood has been bloody, dirty and mean.”

Lloyd DeMause: History of Childhood

What are the influences of Nature and Nurture in influencing or determining human behavior? Are humans genetically violent by Nature? Is child maltreatment the result of human Nature or Nurture? Can Nurturing be both good and bad?

Nature vs Nurture
- Is the behavior of humans determined more by their nature or nurture?
- 20% of our personality comes from our nature, primarily physical and mental health conditions.
- 80% of our personality is developed from the way we are treated during our process of growing up (nurture).

Our Human Nature
The word Nature comes from the Latin word “natura”...
...the essential character of a thing; quality or qualities that make something what it is; the essence; the inborn character;
...innate disposition; the inherent tendencies of a person.

Nature’s Critical Attributes
- Heritable Traits
- Predispositions

Nature’s Heritable Traits
- A heritable trait is one that’s caused by your genes rather than your upbringing.
- The Dominant and Recessive Genes you received from your parents and grandparents.
- Physical traits and behaviors passed on through DNA:
  - Eye color
  - Height
  - Intelligence
  - Tongue roller
  - Patterned baldness
  - Blood type

Nature’s Predispositions (Predisposition: A tendency; inclination).
- Alcohol addiction
- Depression and other mental health conditions
- Temperament
- Predisposition to certain cancers and illnesses
- ADHD- Attention Deficit Hyperactivity Disorder

The Nature of Humans as a Species
1. Predisposed to form and sustain long term positive nurturing relationships.
2. Predisposed to seek moral and spiritual meaning and positive nurturing relationships are the central foundation for positive moral and spiritual development.
3. Positive nurturing relationships increase our spiritual connection to the transcendent which significantly improve our physical and emotional health.
4. Positive nurturing relationships alter brain development in ways that profoundly affect our long term health.

Nurturing: The Energy of Life
- The word **nurturing** comes from the Latin word **nu tri tura**: to promote, nurse and nourish Life.
- Nurturing is the single most critical process for creating and sustaining life.

Nurturing Creates and Influences the Quality of Life
- **Positive Nurturing** is nourishing the aspects of life we want.
- **Negative Nurturing** is nourishing the aspects of life we don’t want, but get anyway.

Parenting is a Process of Nurturing
- Parenting is the process of adult life nurturing the health and growth of young life.
- Positive and Negative parenting practices exist and promote or deny nature’s predispositions.

Positive Nurturing
Positive nurturing is called **EMPATHY** which comes from the Greek word, Empatheia. Empathy is one of the most important characteristics of a nurturing parent.

Empathy
- The ability to imagine yourself in someone else’s position and to intuit what that person is feeling.
- To project into or identify with another.
- To enter fully through understanding another’s feelings or motives.
- To stand in someone’s shoes, to see what they see, to hear what they hear, and to feel with your heart.

Negative Nurturing
- Negative nurturing is called **abuse and neglect**. The word abuse comes from the Latin word abusus which means to mistreat; cruel and harsh punishment.
- Neglect comes from the Latin word neg.le.gere. Neg means “not” and legere means “pick up.” Neglectful parenting means not holding or touching or paying attention to children.

Predisposed Nature of Human Beings
Human beings are born with the biological predisposition to form and sustain long-term positive nurturing relationships.
- Positive Nurturing: healthy, empathic relationships, secure attachments; fulfilling relationships.
- Negative Nurturing: unhealthy, uncaring abusive relationships; loneliness.

Human beings are predisposed to seek moral and spiritual meaning and positive nurturing relationships are the central foundation for positive moral and spiritual development.
- Positive Nurturing: A sense of hopefulness embedded in morality that embraces the
positive aspects of a healthy family, community and country.

- Negative Nurturing: A sense of hopelessness embedded in destructive morality that cheats and denies others of a joyful and healthy quality of life.

Nurturing relationships and a spiritual connection to the transcendent significantly improve physical and emotional health.

- Positive Nurturing: Fosters healthy lifestyles; strong sense of belonging; a positive “community” mentality.
- Negative Nurturing: Fosters unhealthy lifestyles; Selfish “me first” attitude; personality traits of being a loner and isolated.

Nurturing relationships alter brain development in ways that profoundly affect long term health.

- Positive Nurturing: Healthy neurological networks; increase in positive neurological and physical growth; high levels of positive neurological transmitters.
- Negative Nurturing: Diseased neurological networks; destruction of neurological structures and functions; high levels of negative neurological transmitters.

Notes:
Chapter 3: Understanding Abusive and Neglecting Parenting Beliefs and Practices

The following parenting constructs identify the known practices and child rearing behaviors of abusive and neglecting parents. These five parenting practices are known to contribute to the maltreatment of children and form the foundation of the AAPI and lessons and competencies of the Nurturing Parenting Programs.

Based on their responses, programs are tailored to parents and teens in the form of education, intervention or treatment dosages.

Critical Practices of Child Maltreatment

Construct A: Inappropriate parental expectations of their children.
Construct B: Parental lack of empathy in meeting the needs of their children.
Construct C: Strong belief in the use of corporal punishment.
Construct D: Reversing parent-child family roles and responsibilities.
Construct E: Oppressing children’s power and independence.

CONSTRUCT A of the AAPI
INAPPROPRIATE EXPECTATIONS

Process:
- Beginning very early in the infant’s life, abusive and neglecting parents tend to inaccurately perceive the physical, emotional, and intellectual skills and abilities of their children.
- Parental expectations exceed the capabilities of each of their children.
- Despite individual differences, children are expected to perform within the same standards parents have set.

Inappropriate Expectations Regarding Crying:
It’s inappropriate to:
- Tell a baby to quit crying on command;
- “Shushing a baby to stop crying;
- Run a vacuum cleaner to get a baby to stop crying;
- Turn up the volume of the TV or radio to get a baby to stop crying; or
- Let a baby cry himself to sleep.

Limbic System of the Brain
The Limbic System is often referred to as the leopard brain or emotional brain.
- Controls emotions and long-term memories.
- Can override rational thoughts (cortex) and parts of the brain controlled by the brain stem causing blood pressure to rise.
- Attaches emotions to memories. Every time we remember an event, an emotion accompanies it.
- Converts information from learning and working into long-term memory.
- Checks new information with stored information.
Cerebral Cortex of the Brain
- The Cerebral Cortex is referred to as the Learner Brain; the home of thoughts (mind).
- Is the executive branch of the brain.
- Regulates decision making and makes judgments about incoming information.
- Different regions are responsible for processing our vision, touch, hearing, speech, language development and problem solving.
- Allows us to plan and rehearse our future actions.

The Reticular Activating System (RAS)
- Brain’s toggle switch controls whether the leopard brain or the learner brain is in control.
- Located in the upper part of the brain stem continuing to the lower part of the cerebral cortex.
- RAS switches at two times:
  - When we become emotionally charged (fight, flight or freeze) the RAS shuts down the learning brain and the leopard (limbic) brain takes over.
  - When we become relaxed and the threat is gone, the leopard brain or limbic brain shuts down and the learning brain is back in charge.

Sympathetic and Parasympathetic Nervous System
There are two parallel structures that our brain uses to keep us in balance. These two systems of nerves extend throughout our body:
- Sympathetic Nervous System (SNS) is the body’s accelerator which regulates the need for activity. Dominant chemicals: Cortisol, Adrenaline and Noradrenaline.
- Parasympathetic Nervous System (PSNS) is the body’s brakes which regulate the need for calm. Primary Chemicals: Oxytocin and Serotonin.
- SNS is developed in newborns before the PSNS (body’s brakes). Emotional regulation develops in the PSNS.

PSNS vs SNS
- SNS is the accelerator; PSNS is the brakes.
- SNS is dominant during the day.
- PSNS kicks in during the evening when we are safe at home and prepares for a good night’s sleep.

Discussion Question:
How does this apply to a home of family violence?

Emotional Regulation
Emotional regulation, sometimes called self-regulation is a person’s ability to:
- Understand and accept his emotional experience,
- Engage in healthy strategies to manage uncomfortable emotions, and
- Engage in appropriate behavior when distressed.

The inability to self-regulate one’s emotions is often referred to as Borderline Personality Disorder. Characteristics include:
- Emotional instability
- Dramatic shifts in emotional states
Learning Emotional Regulation

- Children need to feel confident that their feelings will be heard.
- Name and honor the feeling the child may be expressing.
- All feelings have energy. Children need to learn proper ways to express energy.
- Babies need to be comforted when they are crying and not to be told to stop crying.
- Parents are the primary source for teaching emotional regulation through modeling.

Common Effects of Inappropriate Expectations

- Low regard for self (concept, esteem, and worth)
- Feelings of failure
- Cannot please others
- Angry and anxious attachments
- Lack of trust in their skills and abilities
- Constantly striving to achieve higher goals- seldom satisfied with accomplishments
- Develop a role based/performance-based identity
- Difficulty in accepting positive recognition

CONSTRUCT B of the AAPI

CONSISTENT LACK OF PARENTAL EMPATHY

Process: Abusive and neglecting parents display a consistent low level or lack of empathy towards children’s needs.

- Insensitive to their children’s need as well as their own needs.
- Fail to create a caring environment that is conducive to promoting children’s **emotional, social, intellectual, physical, spiritual, and creative** growth.
- Fail to bond and form early attachments.

Common Effects of Low Parental Empathy

Children develop:

- Diminished ability to trust with fears of abandonment.
- Difficulty in taking care of one’s self.
- Develop clingy relationships.
- Focus is on self and easily led by others.
- Possessive and smothering relationships.
- Inability to bond with others and to form positive attachments.

Bonding and Attachment

- Bonding: an intense feeling of closeness between the mother and her baby; father and his child.
- Bonding begins at conception and carries through birth and early childhood that leads to a healthy attachment.
- Mothers and babies often seek out each other’s eyes after birth.
- Perry (2008): Bonding is the process of forming an attachment that involves a set of behaviors: holding, rocking, feeding, gazing, kissing, laughing, time together, eye-contact, face-to-face interactions, physical proximity.

Critical Years for Bonding

- Bonding experiences lead to healthy attachments which lead to increased capabilities
- At birth, the baby’s brain is 25% - 30% of its adult size and only 20% to 30% functional (nature).
• The baby’s brain is taking in experiences (nurture) through its senses (nature): Sight, Hearing, Taste, Touch, and Smell. Marshall Klaus (1998) described the newborn’s capacity moments after birth to crawl towards its mother’s breast and find the nipple inching forward with its legs.

• Under-developed cognitive neurological functioning prohibits understanding cause and effect. (Nature)

**Bonding and Brain Development**

• First year of life is necessary since the human brain develops to 90% of adult size and puts in place the majority of the systems and structures that will be responsible for all future emotional, behavioral, social and physiological functioning during the rest of life.

**Research and Attachment**

John Bowlby (1969) and Mary Ainsworth (1978) found that in the first year, infants adopt one of three ways of relating:

• **Secure:** sees mother as supportive and feels free to explore the world;

• **Anxious:** views mother as an unpredictable caregiver and commits her life to earning mother’s love.

• **Avoidant:** sees mother as rejecting and consequently discounts his or her own needs.

**CONSTRUCT C of the AAPI**

**STRONG BELIEF IN PHYSICAL PUNISHMENT**

Process: Physical punishment is generally the preferred means of discipline used by abusive parents.

• Spanking, hitting, whooping, beating, popping are all variations of the same theme: Physical pain caused by hitting.

• Corporal punishment has been documented as a practice during the ancient times when infanticide was allowed.

**Why Parents Hit Their Children** *(For more information see Resource Chapter 2).*

Process:

• Parents hit children to teach them right from wrong.

• Parents hit children as a form of punishment.

• Parents hit children based on religious writings.

• Parents hit children as an “act of love.”

• Parents hit children because it’s a cultural practice.

• Parents hit children to prepare them for the real world.

**Common Effects of using Corporal Punishment on Children:**

• Children identify with the act of spanking as an act caring.

• Children hold repressed anger towards the one doing the hitting.

• Children develop anxious and angry attachments.

• Children use violence as a way of solving problems and replicate the CP as parent.

• Children learn CP is normative and pass the act on to another generation.

**Research Related to Physical Punishment**

• CP is related to time spent with the child: more time less likely to spank; less time more likely to spank.
• CP is negatively correlated with the cognitive stimulation the parents provided the child.
• Although parents of all races and ethnicities use CP, Black parents use CP at a higher rate.

**CONSTRUCT D of the AAPI**
**PARENT-CHILD ROLE REVERSAL**

Process: Parent-child role reversal is an interchanging of traditional role behaviors between a parent and child.
• Child adopts some of the behaviors traditionally associated with parents.
• Common occurrence when parents lack the support of a partner.
• Common among single parents.
• Common parents who are very needy themselves.

**Common Effects of Parent/Child Role Reversal**
• Children fail to negotiate the developmental tasks of childhood.
• Develops feelings of inadequacy.
• Lag behind in social and emotional development.
• Parentified children often view themselves as existing to meet the needs of others.
• Develop a “role-based” identity.
• Have a limited sense of self.
• Have difficulty relating to children; play is acting foolish.

**CONSTRUCT E OF THE AAPI**
**Oppressing Children’s Power and Independence**

Process:
• Children are not allowed to challenge, to voice opinions, or to have choices.
• Children are told to “do what they are told to do” without question; “are better seen and not heard”; “are too smart for their own good”; “are too big for their britches.”
• Children have little to no voice in family activities.
• Are consistently told “no” without the obligatory “yes.”
• Fail to learn the art and science of negotiating, compromise.
• Are told “don’t make waves; and do what the others are doing.”

**Common Effects of Oppressing Children’s Power and Independence**
This demand for compliance to parental authority has many limitations:
• Obedience breeds powerlessness.
• Obedience breeds Inadequacy.
• Obedience also breeds rebelliousness.
• Obedience breeds compliance – to all.
• Obedience breeds followers, not leaders.
• Are very vulnerable to peer group pressures.

*Notes:*
Chapter 4:  
Positive and Negative Nurturing and the Development of Four Distinct Personality Traits

Personality Development

- Personality is the composite of our perceptions, knowledge, feelings and beliefs generated from experiences and manifested in our behavior (nurture).
- Personality: the emotional DNA of an individual (nurture).
- Events develop our personality characteristics (prevention).
- Personality characteristics lead to the development of personality traits (intervention).
- Over time, personality traits lead to full blown personalities (treatment).

Continuum of Nurturing

<table>
<thead>
<tr>
<th>Frequency</th>
<th>Positive Nurturing (Empathy)</th>
<th>Negative Nurturing (Abuse and Neglect)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Intensity</td>
<td>Always</td>
<td>Very High</td>
</tr>
<tr>
<td></td>
<td>Frequent</td>
<td>High</td>
</tr>
<tr>
<td></td>
<td>Sometimes</td>
<td>Average</td>
</tr>
<tr>
<td></td>
<td>Infrequent</td>
<td>Low</td>
</tr>
<tr>
<td></td>
<td>Never</td>
<td>Not Present</td>
</tr>
</tbody>
</table>

Impossible?

Alice laughed, “There’s no use in trying,” she said. “One can’t believe in impossible things.” “I daresay you haven’t had much practice,” said the queen. “When I was your age I always did it for half an hour a day. Why sometimes I’ve believed as many as six impossible things ... before breakfast.”

Medical, psychological and empirical evidence indicates that the frequency and intensity of positive and negative nurturing experiences created in childhood influence our behavior and personality through neurological networks and pathways.

The chart below displays how neurological pathways, personalities and behavior patterns are influenced early in life based on the quality of life in childhood portrayed in hours.

There are approximately **157,776 hours** in the first 18 years of life.

<table>
<thead>
<tr>
<th>Positive %</th>
<th>Negative %</th>
<th>Positive Hours</th>
<th>Negative Hours</th>
</tr>
</thead>
<tbody>
<tr>
<td>20%</td>
<td>80%</td>
<td>31,555</td>
<td>126,220</td>
</tr>
<tr>
<td>30%</td>
<td>70%</td>
<td>47,333</td>
<td>110,443</td>
</tr>
<tr>
<td>50%</td>
<td>50%</td>
<td>78,888</td>
<td>78,888</td>
</tr>
<tr>
<td>70%</td>
<td>30%</td>
<td>110,443</td>
<td>47,333</td>
</tr>
<tr>
<td>80%</td>
<td>20%</td>
<td>126,221</td>
<td>31,555</td>
</tr>
<tr>
<td>90%</td>
<td>10%</td>
<td>141,998</td>
<td>15,778</td>
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<tr>
<td>95%</td>
<td>5%</td>
<td>149,887</td>
<td>7,889</td>
</tr>
<tr>
<td>99%</td>
<td>1%</td>
<td>156,198</td>
<td>1,578</td>
</tr>
<tr>
<td>100%</td>
<td>0%</td>
<td>157,776</td>
<td>0</td>
</tr>
</tbody>
</table>
Re-Parenting and Emergence Theories
- In emergence theory, individuals already possess a degree of the sought after traits.
- The practice of re-parenting entails interactive and experiential lessons that challenge existing thought and behavior patterns.
- Studies in examining brain functioning and the role of memories have found that memories are stored in cells and contain both the cognitive and emotional components of the experience.

I and the Creation of the Self
- The “I” we refer to is our nature – our predisposed biological characteristic.
- The “Self” we refer to is created from the nurture we experience. It is the expression of the “adapted” I.

Adaptive Self
The intensity and frequency of positive and negative experiences promote the development of an adapted or acquired self.

Positive Adapted Self
   - Adapt Positively
   - Adapt Negatively

Negative Adapted Self

Understanding our Self

Our Beliefs entail...
- **Perceptions** - All the information we receive about ourselves and the world through our senses.
- **Cognition** - All the abstract conceptual processes that our brain uses to organize and make sense of our perceptions which include memories and unconscious thoughts.
- **Emotions** - Emotions help us establish the intensity and value of every perceptual and cognitive experience we have.
- **Social consensus** - The input we receive from others
- **Behavior** - A conscious or unconscious expression of a vast system of cause and effect relationships between our true nature and the adapted beliefs of the Self.

*Andrew Newberg “Why We Believe What We Believe”*
The Story of Me

• The more negative or positive images of yourself that are thought, the more those thoughts become “normalized”.
• The more you experience positive or negative nurturing experiences, the more the brain normalizes repeated behavior.
• Images and experiences form neural pathways, and become the story of that person.

Voices in Our Head

• 80% of the word communication we use is internal.
• 20% is actually verbalized
  “I hate myself!”
  “I can stand being with myself!”
  “I need to take better care of myself.”
  “Think I’ll do something for myself tonight!”
  “I took myself shopping last night.”

The Traits Behind the Voices
A high frequency and intensity of positive or negative nurturing experiences develop four distinct personality characteristics:

• Victim
• Perpetrator
• Nurturer
• Nurtured

Positive Personality Traits

Nurturer
The part of our personality that:
• is capable of giving care, empathy and compassion.
• takes care of one’s self as well as the selves of others.
• builds strong attachments with children, family, friends and pets.

Nurtured
The part of our personality that is capable of:
• receiving care
• seeking closeness
• accepting attachments
• accepting praise and positive touch

Negative Personality Traits

Perpetrator-Bully
The part of our personality that is abusive hurts others:
• physically
• emotionally
• spiritually
• sexually

Generally disregards the overall goodness of other living creatures.
Victim
The part of our personality that believes:
• Hurt and pain given by others is justified and valid.
• Hurt received from others is for their own good.
• People who love you can hurt you.
• Victims are taught to feel grateful for their victimization.

Good Witch or Bad Witch?
The concept of good and bad personality traits and characteristics has been recognized in the helping fields since the study of human nature thousands of years ago. People seek pleasure and avoid pain.
• Constructive criticism?
• Good spanking?
• Good beating?
• Tough love?
• Good tongue lashing?
• This hurts me more……
• I’m doing this for your own good...

Native American Wisdom
An elder Cherokee Native American was teaching his grandchild about life. He said to his grandchild … “A fight is going on inside of me … and it is a terrible fight and it is between two wolves. One wolf represents fear, anger, envy, sorrow, regret, greed, arrogance, self-pity, guilt, resentment, inferiority, lies, false pride, superiority and ego. The other wolf stands for honor, joy, peace, love, hope, sharing, serenity, humility, kindness, benevolence, friendship, empathy, generosity, truth, compassion, and faith. The same fight is going on inside of you and inside of every other human being too.” After thinking about it for a minute or two, the grandchild asked his grandfather, “Which wolf will win”? The old man leaned toward his grandchild and whispered … “The one you feed.”

Notes:
Chapter 5: 
Principles of Nurturing Parenting

1. **Nurturing Parenting** is based on psycho-educational and cognitive-behavioral approaches to learning.
   - **Psycho(logy):** Understanding the impact of past events on current behavior.
   - **Educational:** Becoming aware of and understanding new knowledge, skills and strategies of parenting.
   - **Cognitive:** Replacing old patterns of thinking with new thoughts and patterns.
   - **Behavioral:** Replacing old patterns of behavior with new ones.

**Therapy or Therapeutic?**
- **Therapy:** a systematic procedure of empowering the client to examine how previous unconscious life experiences have shaped current behavior patterns.
- **Therapeutic:** Lessons, activities, information and role plays designed to stimulate self-discovery of the relationship between early childhood experiences and present day parenting beliefs and behaviors.

2. **Nurturing Parenting** embraces the theory of “re-parenting.”
   - New patterns of behavior replace old, destructive patterns
   - Long term dysfunctional patterns of behavior require long term interventions
   - Change is evolutionary not revolutionary
   - Repetition is the key in replacing old patterns of behavior with new knowledge, emotions and skills

3. **Nurturing oneself as a man or woman** is critical in becoming a nurturing father or mother.
   - Caregivers that nurture themselves as men or women are better equipped to nurture others.
   - Burnout and stress are the result of ignoring the basic needs of self.

**Basic Human Needs**
- **Social** Need for friendships, others
- **Physical** Food, water, exercise, sex
- **Intellectual** Need for knowledge, new facts, learning, insights
- **Creativity** Expression of self through art, literature, music, writing, etc.
- **Emotional** Need to express feelings
- **Spiritual** Need for belonging, purpose

4. In humans there is an essential difference between our “being” and our “doing.”
   - “Being” constitutes the core elements of our identity; our personality.
   - “Doing” constitutes our behavior.
   - Behavior does not define a person, rather describes a person’s actions and state of consciousness at that moment.

**Parenting is a role: a Human “Doing”**
A role is generally defined as a set of behaviors that are time and situation specific. There are three primary categories of roles (doings) that humans (beings) generally are involved in:
a. **Family Roles** — mother/father, husband/wife, brother/sister, aunt/uncle, niece/nephew, grandmother/grandfather, etc.

b. **Work/Career Roles** — teacher, lawyer, auto worker, politician, laborer, social worker, parent educator, student, etc.

c. **Community Roles** — neighbor, cub-scout leader, den mother, consumer, volunteer coach, PTA, etc.

- A woman who achieves her self-worth primarily from her role as a mom places the burden of her self-worth on her children.
- Children need to meet mom’s expectations in order for mom to feel good about herself.
- A 24/7 role-based identity (performance-based) often leads to an abandonment of taking care of self which results in stress and burnout. A balance is needed.

5. **Self-awareness and acceptance of past experiences are critical for self-empowerment.**

   “The unexamined life is a life not worth living.”

   *Socrates*

**Self-Awareness and Acceptance**

- When parents and children become aware of, understand and accept their behavior patterns, true and lasting changes can be made.
- What you are aware of, you are in control of.
- What you are not aware of is in control of you.
- You are always a slave to what you are not aware of.

**Awareness and Acceptance**

- Research examining the unconscious influence on conscious decisions suggests the unconscious brain makes the choice split seconds before the conscious brain “decides.”

**Steps of Change**

- Awareness, Understanding, Acceptance, and Conscious replacement of old patterns of thoughts, feelings and behaviors are replaced with newer healthier ones forming new, healthy cellular pathways.
- Insight leads to choices, choices lead to changes and changes lead to liberation.

6. **Human behavior is multidimensional.** The positive and negative aspects of life’s events form our past which will shape our neurological, cognitive, and emotional responses to current events: our present. Our past creates a reality of the present which acts as a GPS to our future.

7. **Our nature is influenced by positive and negative nurture.**

   - Eighty percent of who we are and who we want to become is strongly influenced by the experiences we have and the people who care for us during the process of growing up.
   - The power of positive and negative nurturing is the most influential force we will experience in our lifetime.
8. **Early childhood experiences literally become the building blocks for life.**
   The quality of parenting the child receives from his parents; primarily from his Mother is the single most important influence the child will carry for a lifetime.

9. **Positive and negative life events carry affective and cognitive cellular memories.**
   Brain cells store cognitive and affective memories of life’s events. Since conscious meaning (cause and effect) is not yet developed, sensory and affective component of life’s events are being registered **unconsciously.**

10. **Adult Learning is based on the assumptions of andragogy.**

   **Andragogy:** “The art and science of helping adults learn.”
   Adults generally learn:
   - 10% of what they read;
   - 20% of what they hear;
   - 30% of what they see;
   - 50% of what they see and hear;
   - 70% of what they say and write;
   - 90% of what they say as they do.

**Notes:**
Chapter 6: Characteristics of the Nurturing Parenting Programs

Program Characteristics

1. Nurturing Programs are evidence-based programs with nearly 30 years of field research recognized by:
   - SAMHSA (Substance Abuse Mental Health Services Administration)
   - NREPP (National Registry for Evidence Based Programs and Practices)
   - California Evidence-Based Programs

Common Research Findings

- Significant pre and posttest findings in all constructs of the AAPI-2.
- A high rate of participant retention in attending program sessions.
- Low rates of recidivism among program graduates.
- Parents showed higher posttest levels of self-awareness.
- Children increased positives aspects of their personality such as assertiveness, self-awareness and enthusiasm.
- Low rates of recidivism resulted in cost neutrality of services (Louisiana study).
- High attendance rates in long term program dispel the myth that parents won’t attend parenting classes voluntarily and won’t complete their program.
- NPPs consistently show high outcome data and low rates of re-abuse.

Research data of studies are located in Resource Chapter 8 of this manual. Comprehensive report is located in your folder and on nurturingparenting.com.

2. Competency Based Lessons

- Each Lesson has a specific set of competencies that parents must learn before the next lesson is taught.
- It may take two Sessions or more to teach the competencies in one Lesson. When the competencies have been learned, the lesson has been taught and the next lesson can be introduced.
- BF Skinner: “If the student hasn’t learned it, the teacher hasn’t taught it.”

3. Family focused, community-wide programs designed to teach parenting at specific developmental stages.

Research supports family based programs as having the strongest outcomes. Parents, grandparents, children, teens, and other extended family members are involved in program sessions when appropriate.

Allows for a community-wide collaborative among service providers implementing evidence-based parenting programs, having a common philosophy covering all levels of prevention.

- Programs for Developmental Stages:
- Prenatal
- Birth to Five years
- School-aged Children
• Adolescents
• Young Parents (formerly Teen Parents)

4. Tailored for implementation in different settings:
• Child Welfare Agencies
• Supervised Visitation Settings
• Residential Placements
• Correctional Facilities
• Preschool/Day Care Centers/Schools
• Domestic Violence Shelters
• Homeless Shelters
• Military New Parent Support Programs
• Churches
• Schools

5. Designed to meet the unique cultural learning needs of families:
• Parents in Substance Abuse Recovery
• Parents with Special Learning Needs
• Parents with Children with Special Needs and Health Challenges
• Military families
• Families of ethnic diversity: Haitian, Latino, Arab, Hmong, African American
• Nurturing the Families of Hawaii, Louisiana

6. Nurturing Programs offer different models.
• Nurturing Parenting Programs offer flexibility of implementation while keeping program fidelity.
• Sessions are offered for parents and their children in group-based settings, home-based settings, and, a combination of group-based and home-based setting.
• Lessons can be taught one-to-one or in small and large groups.
• Programs are offered for prevention, intervention, and treatment of child abuse and neglect.

7. Flexibility in session dosage (number of classes and lessons)
• Low Risk Families get low dosage (5-12): Primary Prevention.
• Moderate Risk Families get moderate dosage (12-20): Intervention.
• High Risk Families get maximum dosage (15-55): Treatment.

8. Utilized as Primary Prevention in community based education for Low Risk Families.
Refer to pages in workbook and Lesson Outlines and Program Schedules.
• Low dosage ranging from 5 to 12 sessions
• Short term programs designed to improve and enhance basic knowledge and skills:
  – Prenatal Programs
  – ABC for Parents and Children
  – Parents and their Children with Health Challenges
  – Community Based Education Programs
9. **Utilized as Secondary Prevention (Intervention) for Moderate Risk Families.** Refer to pages in workbook and Lesson Outlines and Program Schedules.
   - Moderate dosage ranging from 12 to 20 sessions
   - Nurturing Skills Programs which allow for tailor made programs such as:
     - Nurturing Skills for Families
     - Nurturing the Families of Louisiana
     - Nurturing America’s Military Families
     - Nurturing Father’s Program
     - Nurturing God’s Way
     - It’s All About Being a Teen
     - Family Nurturing Camp
     - Nurturing the Families of Hawaii

10. **Utilized as Tertiary Prevention (Treatment) for High Risk Families.** Refer to pages in workbook and Lesson Outlines and Program Schedules.
    - High dosage ranging from 15 to 55 sessions.
    - Nurturing Parenting Programs for:
      - Parents and their Infants, Toddlers and Preschoolers
      - Young Parents (teen parents) and their Children
      - Parents and their School Age Children
      - Parents and their Adolescents
      - Families in Substance Abuse Treatment and Recovery

**Nurturing Programs Summary**
- Lessons can be taught one-to-one or in small and large groups.
- Programs are offered for prevention, intervention, and treatment of child abuse and neglect.
- Sessions are offered for parents and their children in group-based settings, home-based settings, and a combination of group-based and home-based settings.

**Notes:**
Chapter 7:  
The Morals and Values of Nurturing Parenting

The Nurturing Parenting Programs are developed from a strong philosophical basis that supports the growth and development of parents and children as caring people who treat themselves, others, and the environment including animals with respect and dignity. This philosophical basis of caring forms the underlying structure that constitutes the morals and values that are mirrored in the attitudes, beliefs, strategies, and skills taught in the Nurturing Programs. To be effective in changing the way people behave, the morals defined by a program must represent the standards and practices of behaviors known to contribute to the overall health and functioning of a society.

The Nurturing Parenting Programs are founded on the following morals and values:

**Value One:** Developing a Positive Self-Worth  
**Construct A:** Appropriate Expectations  
A parenting practice that is very common among reported cases of child abuse and neglect is the inappropriate expectations parents have for their children. Beginning very early in the infant’s life, abusive parents tend to inaccurately perceive the skills and abilities of their children. Inappropriate expectations of children are generally the result of three factors.

**Value Two:** Developing a Sense of Caring and Compassion  
**Construct B:** Building Empathy in Children and Parents  
Empathy is the ability to be aware of your own needs as well as the needs of others, and to take positive actions on the behalf of getting those needs met in healthy ways. Developing a sense of empathy is the cornerstone of the Nurturing Parenting Programs.

**Value Three:** Providing Children with Dignified Discipline  
**Construct C:** Alternatives to Physical Punishment  
Discipline comes from the Latin word *Discipulus* which means to guide and teach. The purpose of discipline is to teach children to be respectful, cooperative, and contributing members to a family and society. Harsh and abusive language, hurting touch, and punishment are viewed as disrespectful and undignified practices promoting rebellious and acting out behaviors. Parental practices of discipline must model the sought after behavior of the child.

**Value Four:** Increasing Self-Awareness and Acceptance of Family Roles  
**Construct D:** Appropriate Family Roles  
Self-awareness and self-acceptance are importance values of nurturing parenting. Family role reversals and confusion are significant factors in robbing children of their proper responsibilities in being a child. Increasing self-awareness and self-acceptance team up with the other four constructs in building self-nurturing skills and proper family role responsibilities.

**Value Five:** Developing a Healthy Sense of Empowerment  
**Construct E:** Empowering Power and Independence in Children and Adults
When children’s power and independence are oppressed, they are not allowed to challenge, to voice opinions, or to have choices, but rather are told to “do what they are told to do” without question.

Children and adults need to feel empowered to make good choices and wise decisions through the use of their strong will and personal power. Developing a strong sense of personal power is a necessary characteristic in nurturing one’s self and others.

**Value Six:** *Humor, Laughter and Fun*
**Construct:** *All Nurturing Parenting Constructs*

Having fun in life, laughing, smiling, and enjoying being with the people who you love and who love you is a necessary part of positive nurturing. Brain research clearly shows that endorphins, which are the brain’s feel good chemicals, are released in times of joy that work in creating healthy cellular networks. Family fun creates positive healthy bonds between all family members which strengthen the positive neurological networks. The cycle of positive nurturing is reinforced.

**Value One:** *Information and Techniques for Building Positive Self-Worth in Parents and Children*
**Construct A:** *Appropriate Expectations*

A positive self-worth is critical to the ability to nurture one’s self, others, and the environment. Adults, teens and children who treat themselves with respect will in turn treat others with respect.

1. **Appropriate Developmental Expectations**
   The importance of development and self-worth is extremely critical in the growth of children. When expectations placed on children or infants are inappropriate, that is, when children don’t complete the task or do the activity because they are too young and don’t have the skills, children see themselves as failures. Failures are children who can’t seem to please mom and dad no matter how hard they try.

2. **Developmental Stages and Self-Worth**
   There are four things we know about child development:
   - All children are predisposed with certain characteristics but the brain of a young child is still developing.
   - All children go through developmental stages with certain tasks and accomplishments needing to be met to move on to the next stage.
   - The expectations parents and other adults have for children grossly affects whether childhood will be a nurturing experience or not.
   - No child is “average” in all areas of growth. Children are unique and each child has their own capabilities. To expect all children in one family to accomplish tasks at the same age is inappropriate.
   - Each of the Nurturing Parenting Programs goes into great detail regarding normal developmental stages and tasks that children experience. A functional knowledge of appropriate expectations enhances healthy brain development and positive self-worth.
3. **Children’s Brain Development**

Children’s brains are a work in progress. How they develop is related to the experiences they have in their early years. How children’s brains develop depends upon how the genes they’re born with (nature) interplay with the experiences they have (nurture).

**Parts of the Brain** - The brain is made up of five major parts:

- The **Brainstem** is fully developed at birth. The brainstem is responsible for functions such as blood pressure, heart rate, and body temperature. The brainstem must be fully functional at birth in order for an infant to survive.

- The **Cerebellum** controls a person’s automatic movements and balance. Dancing, kicking a football, or bringing a cup to the lips to drink are all coordinated by the cerebellum. If a child’s cerebellum is damaged, the brain cannot coordinate movement.

- The **Midbrain** controls sleep, arousal responses, appetite and motor movements (such as running and skipping). The midbrain is very important for moving.

- The **Limbic System** controls emotions and long-term memories. The limbic system can override rational thoughts and parts of the brain controlled by the brainstem. A part of the limbic system is involved in attaching emotions to memory.

- The **Cortex** is the “executive branch” of the brain. It regulates decision-making and makes judgments about incoming information. The different regions of the cortex are responsible for processing our vision, touch, hearing, speech, language development, and problem solving, and allow us to plan and rehearse our future actions.

**How Children’s Brains Develop**

Each child is born with about 27 billion brain cells which are much more than ever needed. At birth, the connections between the cells are not very fast. But, the more the brain is stimulated, the faster and stronger these connections become. These connections then become a part of the permanent structure of the brain. But, if the brain is not stimulated, the connections between cells dry up. Simply, the more connections between the brain cells the better because these connections are forming the structures that will allow a child to learn.

- In the past, neuroscientists assumed that by the time babies are born, the structure of their brains had been genetically determined. Today, scientists know that the brain of the baby is still forming microscopic connections responsible for feeling, learning, and remembering.

- At birth, the brain’s 27 billion or so neurons form trillions of synapses (connections). Most of the synapses (that are crucial to learning) form after birth. Genes have already determined the brain’s basic wiring, and have formed the connections in the brain stem that will make the heart beat and lungs respire.
• In the first months of life, the number of synapses will increase twenty-fold to more than 1,000 trillion. It is through the development of these synapses that the brain develops a functional architecture. Without this, there would be no habits, no thoughts, no consciousness, no memories, and no mind.

• Experiences from the outside world create the architecture of the brain, allowing the brain to create or modify existing connections.

4. Teen’s Brain Development

• Defiance on the part of a teen is natural. Many scientists think that teenage defiance has become instinctive. Coupled with a diminished control of logic and a higher influence of impulses, teens are at risk for serious injuries.

• Scientists have found that teens are in a constant state of sleep deprivation. The average teen needs about 9 1/2 hours of sleep at night but get about 7 hours. Melatonin kicks in around 10:30 PM.

• Teens need to be involved with extracurricular activities. A lot of free time for teens correlates with early sexual activity, drug use, drinking and delinquency. Sports, clubs, volunteer efforts and after school jobs are good for teens in moderation.

• Sex hormones are especially active in the limbic system (the brain’s emotional center). The relationship between hormones and teen brain development increase the thrill seeking to explore situations where teens allow their passions and emotions to run wild.

5. Differences between the Male and Female Brain (Taken from “What Could He Be Thinking?” by Michael Gurian, St. Martin’s Press, NY 2003)

   a. **Males would rather work on a project than talk** – True. More cortical areas in the male brain than in the female brain are devoted to the development of spatial skills like mechanical design, measurement and manipulation of physical objects.

   b. **Males would prefer to read a book rather than play football or video games** - False. Since the male brain is devoting more cortical areas to spatialis, less cortical areas are devoted to word use or production. In females, it’s just the opposite.

   c. **Males tend to talk less often and use fewer words than females** - True. The bundle of nerves that connects the right and left hemispheres of the brain is called the “corpus callosum.” The corpus callosum is 24% smaller in males, resulting in males not connecting as many feelings or thoughts to words.

   d. **Females act more impulsively than males** - False. The male brain secretes less serotonin than the female brain. Serotonin is the brain chemical that acts to calm us down.
e. **Males tend to be more aggressive than females - True.** This is due largely to lower levels of oxytocin in the male brain. Oxytocin is the brain chemical that helps us to be able to bond and demonstrate more empathy. The higher the level of oxytocin in the brain, the less aggressive the person is likely to be and more likely to link bonding and empathy in the verbal centers of the brain.

f. **Females and males bond differently - True.** Males rely more on “spatials” like playing basketball; females prefer to talk, relying more on “verbals.” Bonding and attachment is influenced by hormones. Mothers have higher levels of oxytocin, which has been called “the nurturing hormone.” When a woman is around small, helpless beings – babies, puppies, etc. there is a spike in this chemical. Fathers have much lower levels of oxytocin and therefore must bond and attach in different ways – socially, emotionally and psychologically.

g. **Males tend to be more patient than females - False.** Men take action first, talk second. Women are just the opposite. Lower levels of serotonin and oxytocin in the male brain are responsible for this trait. The male brain responds more quickly to obvious signals in action. Men are less inclined to stop, be patient, listen and communicate emotions verbally.

h. **Males have a stronger sex drive than females - True.** Men have a hormonal system that is dominated by testosterone. Testosterone is the sex and aggression hormone. Males have up to 20 times more testosterone than women.

i. **Males tend to zone out more than females - True.** Women’s brains are constantly working. Whereas the male brain zones out and takes mental naps. Research shows that there is 15% more blood flow in the female brain than in the male brain.

j. **Males tend to solve problems by talking. Females tend to solve problems with action - False.** Males and females respond differently to problem situations. It’s due to the way their brains operate. Males have “action oriented” empathy. Men are doers; they like to solve problems with action. Females express more of “feelings oriented” empathy. Women like to process feelings first, then work on solving problems.

6. **Ten Ways to Improve a Child’s Self-Worth**

   1) Put children in situations where they can succeed.
   2) Expect the child to succeed in a small specific situation.
   3) If your child does not succeed in a specific situation, problem solve and determine what is undermining the child’s attempts at success.
   4) Every time you see your child behaving in the desired way, write it down.
   5) Tell someone else about how the child is behaving and make sure the child can hear you.
   6) Act in a way you want your child to act, and then praise yourself for acting that way.
   7) Visualize your child as already being the new positive label, and then relate to the child with the new label as part of the child.
8) Show respect for the child’s feelings and opinions even though you might not agree with them. Honor your child’s opinions and feelings by saying, “I can understand how you might feel this way.”
9) Be careful to give children comments on their strengths as well as their weaknesses.
10) Be patient. Change is an evolutionary process, not a revolutionary one. It takes time to change. Stay focused and above all, be consistent.

7. **Praise for Being and Doing**
   - Praise for **Being** recognizes the individual as a valued person unconditionally.
   - Praise for **Doing** recognizes the individual for his/her efforts and accomplishments.

8. **Special Motivations and Recognitions.** Parents create special ways children receive recognitions and motivations. A “red plate” given at meal time is a special recognition for the person who went above and beyond their normal tasks, put forth a great effort, who cooperated (all recognitions for doing), or who is being recognized for the wonderful person he or she is (recognition for being).

9. **Labels for Self and Others.** Labels are a type of “unspoken” communication. The way we perceive a person or the way we think about a person will determine our type or style of communication.

10. **Positive Self-Talk and Affirmations.** Self-talk is essentially messages we send to ourselves that tell us something about ourselves: we are too fat, thin, tall, mean, happy, uncaring, nurturing, etc. The messages we send to ourselves are ways we use our personal power to build ourselves up, or tear ourselves down. Our focus is to use the power of self-talk to build our self-esteem, self-concept, and self-perceptions.

11. **Self-Expression.** Self-expression activities lead to self-awareness. Self-awareness leads to goals to change or keep behaviors. Painting, role play, drawing, playing with play-doh, are all ways creativity is used to express one’s self in the Nurturing Programs.

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**Value Two: Techniques and Strategies for Developing a Sense of Caring and Compassion**

**Construct B: Building Empathy in Children and Parents**

Empathy forms the foundation of Nurturing Parenting. Empathy is the ability to be aware of the needs of others, and to take positive actions on the behalf of others. Developing a sense of empathy is the cornerstone of the Nurturing Parenting Programs.

1. **Defining Empathy.** Definition: Empatheia - “feeling into” - the ability to perceive the subjective experience of another person.
   a. **History.** The word empathy was first used in the 1920’s by American psychologist E. B. Titchner, referring to motor mimicry observed in one-year-olds who imitated the distress of someone else. Titchner believed that empathy stemmed from a sort of physical imitation of the distress of another, which then evokes the same feelings in one’s self.
b. **Development.** The root of caring stems from emotional attunement. Daniel Stern refers to attunement as a process that lets a child know their emotions are met with empathy, are accepted, and reciprocated.

NIMH found a large part of the difference in empathic concern had to do with how parents disciplined their children. Children were more empathic when discipline included calling attention to the distress their misbehavior caused.

c. **Research.** It has been suggested that 90% or more of an emotional message is non-verbal. Empathy is the skill required to communicate non-verbally. Tests with over 7,000 people in 18 countries indicated people being able to read feelings from non-verbal cues were:

- Better adjusted emotionally
- More popular
- More outgoing
- More sensitive

2. **Attunement.** Being attuned to the needs of your child is a primary function of the nurturing parent. Attunement is also a highly empathic characteristic of the nurturing parent.

3. **Bonding and Attachment.** Bonding is defined as the emotional closeness between mother and child in the first few hours of life. Attachment is the extension of bonding between mother and child for life.

4. **Needs and Behavior.** Needs can be thought of in six general categories. While we all have different needs at different times, all behavior is the expression of getting needs met. A way to remember these needs is by thinking of the word **SPICES.** These needs are:

   - **Social** The need for friendship and companionship.
   - **Physical** The need for food, sleep, exercise, and sex.
   - **Intellectual** The need for stimulation from new ideas or thoughts.
   - **Creative** The need to make something, dance, write a poem, etc.
   - **Emotional** The need for friendship, love, recognition, acceptance.
   - **Spiritual** The need to belong, to have membership, to believe we are part of something bigger than ourselves.

5. **Basic Needs of Individuals and Spoiling Children.** Needs are the forces that drive people to behave the way they do. All behavior is purposeful in that it is used to get needs met. A spoiled child is one whose normal developmental needs for comfort, sameness, and attention are excessive and demanding. Children become spoiled by:

   - parents doing everything for them;
   - parents spending all their time with their children;
   - parents blaming their children for being demanding;
   - children not being separated for brief times from their parents;
   - parents anticipating their children’s requests;
   - children being held only when crying;
   - parents setting inconsistent limits.
6. **Establishing Nurturing Routines.** Nurturing parenting routines are a consistent way of raising children that builds a child’s sense of predictability and success, which in turn, enhances children’s self-concept, self-worth and feelings of competence.

Nurturing Family Routines consist of specific behaviors:

- **Gentle Positive Touch.** There is no Nurturing Parenting Routine that ever had anything to do with using hurting or scary touch of any kind.

- **Praise and Encouragement.** Recognizing your children for the quality people they are, or their positive behaviors and efforts, is always a part of Nurturing Parenting Routines.

- **Pleasant Expressions and Tone of Voice.** You know the old saying, “It’s not what you say but how you say it.” Offer praise in a pleasant voice and look like you mean it. What kids do better than most adults is to know when adults are being sincere and when they’re not.

- **Cooperation.** Cooperation is an indicator that the child values the request. Obedience, on the other hand, is an indicator of a child being able to perform in some robotic way. That’s all. Whether the child values the behavior is left up to the imagination of the parent.

- **Fun.** Have fun with your children! They deserve it and so do you. Remember, a happy child is a lot easier to parent and be with than some angry mean kid.

- **Empathy.** Finally, nurturing routines entail kindness, caring and concern. If it’s not done with empathy, it’s not a nurturing routine.

7. **Personal Touch History and Types of Touch.** Everyone has a personal “touch” history. A touch history is comprised of all the touch experiences that we have had during our lifetime. Everyone has a touch history - including infants. A touch history is comprised of three different kinds of touch: hurting, scary, and nurturing.

   - **Hurting Touch:** Spankings, scrapes, cuts, hitting, rapes, attacks, slapping, broken bones, etc.

   - **Scary Touch:** Unwanted sexual touch, threats of hurting touch (“I’m gonna break your neck”).

   - **Nurturing Touch:** Rubs, pats, massages, hugs, gentle touching, etc.

8. **Body Map – An Exercise to Gain Awareness of Past Hurts.** With the Body Map Exercise, participants examine their personal history of touch and the personal tough history of their children by participating in an activity called the Body Map.

9. **Recognizing, Understanding and Communicating Feelings**

   a. **Feelings of Comfort and Discomfort.** There are two general categories of feelings: feelings of comfort and feelings of discomfort. Feelings of discomfort are generally feelings people have difficulty handling. The feeling of loss is one that
almost all abused children have to deal with. Loss as it relates to love, belonging, security, trust, and for many, the loss of their happy childhood.

b. **Suppressing and Repressing Thoughts and Feelings.** Every experience we have leaves us with both a memory and a feeling about the experience. Good experiences leave us with good memories and feelings. Bad experiences leave us with unpleasant memories and feelings. If we don’t talk about the bad times and our feelings, we end up suppressing (consciously) or repressing (unconsciously) our feelings.

10. **Typical Feelings of Discomfort**

- **Anxiety** - Fear of future hurt
- **Hurt** - Present pain; feels like sadness; disappointment
- **Anger** - Expressed past pain; the outward expression of hurt
- **Guilt** - Past pain unexpressed; often the result of anger held in and turned against self
- **Depression** - Past pain chronically unexpressed; feels lifeless, hopeless

11. **Relationship between Alcohol, Anger, and Abuse.** Alcohol serves as a disinhibitor. When people drink, suppressed/repressed hurts are expressed. If people have learned to express anger through violence, then alcohol will “release” the violence in people.

12. **Recognizing and Handling Anger**

<table>
<thead>
<tr>
<th>Anger Energy Release</th>
<th>Anger Expression (Cognitive)</th>
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</thead>
<tbody>
<tr>
<td>- Count to 10 (or 100)</td>
<td>- Write letter</td>
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<tr>
<td>- Physical exercises</td>
<td>- Communicate verbally</td>
</tr>
<tr>
<td>- Gain control</td>
<td>- Keep anger journal</td>
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<tr>
<td>- Meditations</td>
<td>- Anger role play</td>
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<tr>
<td>- Visualizations</td>
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<td>- Deep breathing</td>
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13. **Recognizing and Handling Stress**

a. Stress is an emotional response to the demands of life. It is the pressure we feel to meet a deadline, to keep a schedule, etc.

b. Not all stress is bad. Actually, there is some stress that’s good. Good stress activates us to use our personal power in positive ways to meet our needs, desires and wants. The kind of stress that is bad is called distress, or stress that drains us physically, emotionally, and socially. Bad stress, or distress, shows up in signs like headaches, backaches, ulcers, diarrhea, fatigue, anxiety, depression, lashing out, or withdrawing from others.

c. The most important aspect of stress is the ability to handle it. The following are some strategies that are proven in reducing stress.

<table>
<thead>
<tr>
<th>Physical Approaches</th>
<th>Mental Approaches</th>
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</thead>
<tbody>
<tr>
<td>- Get regular exercise</td>
<td>- Increase self-worth</td>
</tr>
<tr>
<td>- Improve your diet</td>
<td>- Set realistic expectations</td>
</tr>
</tbody>
</table>
• Listen to your body
• Learn relaxation skills
• Get adequate sleep
• Deep breathing

Social Approaches
• Develop a support network
• Develop a social life
• Volunteer your time

General Approaches
• Keep a positive outlook
• Improve your communication skills
• Leave work at work
• Get organized

14. Strategies to Reduce Children’s Stress
• Be a role model
• Do things as a family
• Establish routines
• Tell nighttime power stories
• Use praise
• Communicate
• Encourage sports and the arts
• Accept your child unconditionally
• Massage and Nurturing Touch

Value Three: Techniques and Strategies for Providing Children and Teens with Dignified Discipline

Construct C: Alternatives to Corporal Punishment

Discipline is the practice of teaching children to be respectful, cooperative, and contributing members to their family and society. Harsh and abusive language, touch, and punishment are viewed as disrespectful practices promoting rebellious and acting out behaviors. Parental practices of discipline must model the sought after behavior of the child.

1. Discipline, Punishment, Rewards

a. Discipline. Two important words that stem from the same Latin root, discipulus, are discipline and disciple. The word discipline is defined as instruction imparted to disciples or scholars; teaching; learning; education. The term disciple, means learner. Discipline is both the guidance the parents provide their children, and the desire of children to follow the directions the parents set forth.

b. Punishment. Punishment is an unpleasant consequence for doing or not doing something. The purpose of punishment is to decrease the likelihood that bad behavior will occur again. The purpose of punishment, however, is not to hurt children.

c. Rewards. A reward is a pleasant consequence for behaving in an appropriate or desirable way. The purpose of rewards is to reinforce good behavior. Rewards let children know how pleased parents are with their behavior.
2. Behavior Management, Behavior Modification, Behavior Encouragement

- Behavior **Management** is using techniques to *manage* someone else’s behavior. When management strategies are used, the message is, “You cannot handle your behavior, so I will.”

- Behavior **Modification** is using techniques to *change* someone’s behavior. The message sent here is, “Your behavior (and you) are bad and need to change.”

- Behavior **Encouragement** strategies and techniques are used to empower and promote someone’s behavior. The message sent is: “You can do it.”

3. Techniques to Manage Behavior

a. **Danger-proof the House.** Children, especially young toddlers, love to explore. Touching, pulling, grabbing, and eating are just a few of the ways young children explore their environment.

b. **Establish Clear Family Rules.** The purpose of family rules is for parents and children to establish consistent guidelines that will help everyone know what is expected.

c. **Choices and Consequences.** Providing children with choices for behavior and the consequences for each choice are excellent ways of empowering children and teaching them how to manage their own behavior. Children learn to logically associate “cause and effect;” that is, “If I do _____, then this will happen.”

d. **Verbal and Physical Redirection.** Redirection is a technique designed especially for young preschool children that encourages them to perform desirable behaviors. Redirection is used by parents to prevent personal injury, promote desirable behavior, reduce punishing interactions, and promote learning exploration.

e. **Ignoring.** Ignoring is a form of behavior management used to eliminate irritating behaviors.

   **When to Use Ignoring:**
   - Assess the degree of potential for physical harm to the child or others
   - Assess the degree of potential damage to property
   - Ignore irritating behaviors such as whining, temper tantrums, etc.

f. **Negotiation and Compromise.** When problem solving leaves both people at a stalemate, negotiation and compromise are used.

4. Techniques to Encourage Behavior (Rewards)

a. **Praise for Being and Doing.** Praise is the single most powerful reward a child, or anyone, can receive. Use praise for being (“I love you”) and praise for doing (“What a great job you did washing the car!”) two to three times each day with each child.
b. **Nurturing Touch.** There are three types of touch: hurting, scary and nurturing. Each of us has a personal touch history which includes all three types of touch.

c. **Privileges.** A privilege can be extra TV time, getting to stay up past bedtime, getting an extra story read at night, or other behaviors your children enjoy. Privileges should never include basic needs the child has such as food, time with parents, security, love, or trust.

d. **Objects.** Some parents like to reward their children with various objects in addition to praise and touch. Objects can include almost anything, from stickers to assorted toys. Objects used as rewards should never replace the affection and recognition children need from their parents.

e. **Allowance.** When children get older, paying them an allowance for chores they have completed is an excellent way to reward them. Allowance in the form of money teaches children how to be responsible and manage money. With the child, decide on the amount of money and a plan for its management.

5. **Techniques to Modify Behavior (Punishments)**

a. **Loss of Privilege.** Appropriate for children 3 years and older. A privilege is a right granted by the parent. Privileges can include watching TV, playing with a certain toy in the house, etc.

b. **Being Grounded.** Appropriate for children 3 ½ years and older. When a child leaves a yard or an area purposefully, without permission, an appropriate punishment is being grounded to the yard or house.

c. **Parental Disappointment.** Appropriate for children 3 years and older. Parental disappointment is a simple statement which expresses the disappointment a parent has in a behavior the child has chosen to perform. The intent is to build caring and awareness in the child of the parent’s disappointment. Example, “Son, I want you to know how disappointed I am that you chose to hit your brother (or whatever the misdeed). I’m sure the next time you’re upset, you won’t hit your brother and you will use your words to tell him not to take your toys. But right now, I feel disappointed.”

d. **Restitution.** Appropriate for children 4 years and older. Restitution means paying for some misdeed, either with money or extra chores.

e. **Time-Out.** Appropriate for children 3 years and older. Time-out is a temporary isolation of the child from others because they choose to act inappropriately. It is a technique that lets children know that when they choose to be mean to others, they will have to be by themselves for a while, sitting quietly. Time-out is not isolating the child for a long time. It is not solitary confinement in some dark room. It is not a threat of the loss of a parent’s love or protection. It is a technique that lets children know that when they choose to violate a rule, they will have to sit quietly by themselves for a while.
Value Four: Techniques and Strategies for Increasing Self-Awareness and Acceptance of Family Roles

Construct D: Appropriate Family Roles

Self-awareness and self-acceptance are important values of nurturing parenting. Family role reversals and confusion are significant factors in robbing children of their proper responsibilities in being a child. Increasing self-awareness and self-acceptance team up with the other four constructs in building self-nurturing skills and proper family role responsibilities.

1. **Anger, Alcohol and Abuse.** The relationship between alcohol and abuse of children and women is well researched and supported. Parents, teens and children learn about the effects of alcohol on forming and maintaining healthy family and peer relationships.

2. **Families and Alcohol.** Participants in the Nurturing Programs examine the role alcohol and other drugs have in influencing their family history and patterns of family interactions.

3. **Possessive and Violent Relationships.** Violence towards women is highly correlated with history of child maltreatment and neglect. Possessive relationships often begin innocently as a strong attachment that masquerades for feelings of ownership. Adults and teens examine the characteristics of violent and possessive relationships.

4. **Self-Expression.** Self-expression activities lead to self-awareness. Self-awareness leads to goals to change or keep behaviors. Painting, role play, drawing, playing with play-doh, and psycho-drama are all ways creativity is used to express one’s self in the Nurturing Programs.

5. **Draw Your Self.** Creativity positively correlates with problem solving, the ability to brainstorm, and flexibility as a character trait. Participants in the Nurturing classes draw their self on paper and share their image with others.

6. **Draw Your Family.** Parents and teens engage in a non-verbal activity taking turns compiling a portrait of their family. The family picture is complete only when all family members don’t have any more to add.

7. **Draw your Parents; Draw your Children/Teens.** Parents and teens draw each other independently in their separate groups.

8. **Body Map – An Exercise to Gain Awareness of Past Hurts.** With the Body Map Exercise, participants examine their personal history of touch and the personal tough history of their children by participating in an activity called the Body Map.

9. **Examining My Touch History.** Touch is often referred to as “the Mother” of all our senses. Touch is the basic need necessary to form and sustain healthy parent-child attachments. Participants examine their history of touch and how it has affected their parent-child and adult relationships.
10. **My Cultural Parenting Traditions.** Parents and teens examine the importance culture has in their family traditions, morals, values and beliefs.

11. **Spirituality.** Spirituality is defined as a feeling of belonging and membership. Many family members have lost their feelings of belonging and love and hence seek these qualities in their peer groups and out of marriage partners. Families in the Nurturing Programs have a chance to share the spiritual aspects of their families and ways to enhance feelings of belonging between family members.

12. **Dating, Love and Rejection.** Relationships are synonymous with heart ache, break-ups, jealousy and possessiveness. Feelings of love often get individuals to behave in ways they normally wouldn’t in causal friendships. Parents and teens examine the characteristics of healthy partner relationships.

**Value Five: Techniques and Strategies for Developing a Healthy Sense of Empowerment**

**Construct E: Autonomy and Independence**

Children need to be empowered to make good choices and wise decisions through the use of their strong will and personal power. Developing a strong sense of personal power is a necessary element in becoming a nurturing individual.

1. **Definition of Personal Power and Control.** Personal power is not how physically strong we are but how capable we are in getting our needs met in a desirable way. Creating an environment where children can express their power is another way of developing a disciplined environment. Review the major concepts of Personal Power.

   a. Personal Power is the capability we have to influence conditions in our life.

   b. Positive Personal Power means we do things to meet our needs in ways that build our self-concept and self-esteem.

   c. Negative Personal Power means we do things to meet our needs in ways that are destructive.

   d. Control is the use of Personal Power to influence the behavior or others.

   e. Positive Control means we control the lives of others who are unable to get their own needs met by themselves.

   f. Negative Control means we control the lives of others who are capable to get many of their own needs met, but we control them anyway.

   g. Positive Control helps people get their basic needs met. Negative control inhibits people from expressing their autonomy and ultimately leads to anger and rebellion.

   h. Personal Power is not how physically strong we are, but the use of our knowledge and our feelings to act in a manner to get our needs met. In this way, Self-Esteem, Self-Concept and Personal Power are all related to each other. We use our Personal Power based on what we know and how we feel about ourselves.
i. Ways babies and toddlers express their Personal Power are:
   • Babies focus on their refusing to eat certain foods, spitting out certain foods, and welcoming and enjoying massage as ways of expressing their Personal Power.
   • Toddlers and preschoolers focus on the apparent oppositional statements of “No, I do it!” or “No, I don’t want to!” as statements of personal Power. The goal of parenting is to let children express their opinions and honor their right to say, “No” but not be dictated by children’s demands. There are obvious times when a “No” cannot be negotiated (i.e. no running in the street, no hitting your brother, etc.) but the child’s right to say “No” has to be viewed as an expression of power.

2. Understanding Power Struggles. Children who feel they don’t have power have to fight to get some. Power struggles are when children feel they don’t have any influence on their lives.

3. Empowerment and the Strong-Willed Child. Building Personal Power in children is called Empowerment. Empowering children is critical for many reasons. It helps them:
   • To withstand peer pressure to do something they really don’t want to do.
   • To say no to alcohol, crack, cocaine, and other drugs.
   • To delay pregnancy for later in life or to avoid sexually exploitive situations such as date rape, incest, unwanted touch.
   • To help them be responsive to their own needs and the needs of others.

4. Obedience, Responsibility and Cooperation

   **Obedience:** Giving in to the one in control; submissive.

   **Responsibility:** Able to distinguish between right and wrong and to think and act rationally.

   **Cooperation:** Interactions largely beneficial to all those participating to work together.

5. Activities to Empower Children

   a. **Giving Children Choices.** A powerful strategy in helping children develop their personal power is offering children choices. Choices provide children with power and reduce power struggles.

   b. **Choices and Consequences.** Providing children with choices for behavior and the consequences for each choice is an excellent way of empowering children and teaching them how to manage their own behavior.

   c. **Transition Time.** Providing children with a transition time between activities and before requests is important in reducing power struggles. Mentioning to children “You have five more minutes before it will be time to eat.” helps them prepare to meet your expectation.

   d. **Bedtime Power Stories.** Bedtime power stories occur every night. Parents
review in story form all the positive things that occurred for the child that day: all the
times of cooperation, being helpful, sharing, eating food, etc. Bedtime stories
are named after the child: Adam stories, Katie stories, Courtney stories, etc.

e. **Situational Stories.** Encouraging positive behaviors in children can be accomplished,
in part, by helping them visualize success in specific situations that they have
faced or will face in the future. Stories can be about an issue and left with an open
ending for children to supply.

f. **Body Part Awareness.** The concept of owning one's body is an area of Personal
Power. The use of correct names shows acceptance and promotes Personal Power.

g. **Scary Touch.** Scary touch is any type of touch which feels uncomfortable. Children
know scary touch but at times are unable to express to the person doing the
touching that they don’t want to be touched or that they want the scary touch to
stop.

h. **Owning One’s Own Body and Personal Space.** Children (as well as adults) own their
entire body and nobody has the right to touch them anywhere on their body
without their permission. Not only are their penis, vagina, breasts and buttocks
private places, but also their entire body is private.

i. **Saying “NO.”** Children need to learn how to say “No” to scary touch. The areas of
focus of scary touch for children’s bodies are on their genitals, buttocks, breasts, and
mouth. It is especially not okay for anyone to touch them without their permission
first.

6. **Taking Responsibility – No Blaming.** Taking responsibility for your thoughts and feelings and
not blaming others is a positive way to use Personal Power.

7. **Criticism and Confrontation**

   a. **Criticism** leaves a person feeling badly about themselves. The person feels
worthless, terrible, and inadequate as an entire person. Criticism uses Blaming You
Messages.

   b. **Confrontation** leaves a person knowing they have done something you don’t like,
but still feel positive about themselves. The difference between criticism and
confrontation is the feelings the person is left with.

8. **Brainstorming.** Brainstorming with children solutions to problems empowers them to
problem solve, to use critical thinking skills, and to take ownership of their behaviors.
Additionally, successful resolve of a problem builds in children a sense of
accomplishment and increases their self-esteem.

9. **Problem Solving and Decision Making.** Another way to help children use their power and
take responsibility is through a process called “problem solving.” Problem solving is
useful when choices don’t work or children refuse to cooperate. Problem solving helps
children learn what to do to resolve problems. Children learn to become independent thinkers, take responsibility for their behavior, and gain a sense of mastery over their environment.

10. **Negotiating and Compromising.** When problem solving leaves both people at a stalemate, negotiation and compromise are used.

11. **Positive, Negative and Neutral Styles of Communication.** Communication can be sent with a particular style that can either enhance or detract from the message. There are three styles of communication:

   - **Positive** Said with a happy, excited tone that connotes something positive.
   - **Neutral** A bland, unexcited message that neither communicates excitement or hostility.
   - **Negative** A harsh, unattractive tone with content being just as harsh.

12. **Smoking and the Dangers of Second Hand Smoke.** From both a parents’ protection of her own health and the health of her baby and children, the effects of smoking and second hand smoke are discussed.

13. **Touch and Personal Space.** Participants learn to recognize their personal space and how to protect themselves from unwanted touch.

14. **Date Rape Drugs.** Empowerment comes in the form of knowledge and action. Understanding and recognizing drugs that render women defenseless is an important component of the Nurturing Program’s construct of Empowerment.

**Value Six: Humor, Laughter and Fun Constructs: All Nurturing Parenting**

Having fun in life, laughing, smiling, and enjoying being with the people who you love and who love you is a necessary part of positive nurturing. Brain research clearly shows that endorphins, which are the brain’s feel good chemicals, are released in times of joy that work in creating healthy cellular networks. Family fun creates positive, healthy bonds between all family members which strengthen the positive neurological networks. The cycle of positive nurturing is reinforced.

1. **Parenting Skills for Humor:**

   a. **Talking objects:** (Young children) Bathtubs, shoes, clothes, peas and carrots that say “Me, me...tickle me with your toes” is much more fun than a parent who commands “Get your shoes on right now.” Young children generally respond to the world of fantasy and make believe. In the end, happy children are more cooperative children which are easier for parents. Think win/win.

   b. **Reverse Psychology:** (All ages) Used sparingly can be an invitation to cooperation. Overused it can be a form of manipulation – which is disrespectful. The strategy is to state exactly the opposite of what you are trying to accomplish and say
it with a twinkle in your eye! Ok, I see there is supper on our table but I don’t want anyone to come in here and sit down to eat.

c. **Pay attention to what you want to see more of:** (All ages) When parent and child(ren) are having fun and relaxing, tell them how much you enjoy being with them and what a good time you’re having. At the end of the day, tell them again and thank them for cooperating.

d. **Role play:** (For young children you might use puppets or stuffed animals. Older children you can assume different roles and act out the situation.) Usually no matter the issue there will be laughter and fun.

e. **Art, music, dance:** (All ages) Creative expression encourages all family members to express a wide range of emotions and passions.

f. **Sports:** (All ages) In a family setting the purpose is to stay healthy and fit and to have fun.

2. **Suggestions for Fun Family Activities:**
   - Picnics – in the park or just in the middle of the living room floor.
   - Games – make them age-appropriate and keep emphasis on fun – not winning.
   - Cards – Old Maid, Go Fish, Crazy Eights, etc.
   - Family Movie Night – at home with popcorn.
   - Family Walks.
   - Play “Remember the time...” share memories of past fun times.
   - Volunteer– community projects/church, synagogue, missions, or neighborhood proj.
   - Pay it forward – do something nice for someone else anonymously.
   - Share jokes.
   - Have your family come up with 3 more ideas for fun.

3. **Benefits of Humor, Laughter and Fun:**
   - An increase in the number and activity level of natural healthy cells that attack viral and other diseased cells in the body.
   - Laughter appears to tell your body’s immune system to “turn it up a notch” thereby strengthening the immune system.
   - An increase in the antibodies that fight respiratory infections.
   - A decrease in the major stress hormone cortisol that constricts blood vessels.
   - Reduces dopamine levels – the body’s fight or flight hormone.
   - Laughing is aerobic by working the diaphragm and increasing the body’s ability to use oxygen.
   - Lowers blood pressure.
   - Laughter brings positive emotions thereby enhancing other tools used to fight disease.
   - Laughter can reduce pain and aid healing.
   - Laughter bonds family members together and creates a sense of intimacy and belonging.
Chapter 8: Successful Implementation Criteria

There are three criteria that are crucial to successful implementation of the Nurturing Parenting Programs:

**Pre-Process and Post Program Assessment**
Assessing the needs of the family and implementing the right program, the right model with the right dosage and monitoring individual and family progress.

**Keeping the Program Fidelity**
Maintaining the program fidelity means implementing the program as it was designed. However, flexibility is also important to ensure parents needs are being met. Critical is keeping the fidelity to the program philosophy, the staffing, gathering pre, process and post program data, and respecting how dosage relates to the levels of prevention.

**Competent Program Facilitators**
Employing trained and competent professionals and paraprofessionals capable of facilitating the growth of parents and children.

1. The Nurturing Program Facilitator is a **Philosopher**.
   - Philosophy is a well thought out set of beliefs.
   - A defined philosophy allows individuals to make conscious, congruent choices.
   - Parenting entails a set of unconscious beliefs and practices that have been passed down and recycled to another generation of children without understanding or challenge.
   - The best parents make conscious, informed choices in raising their children.

**Nurturing Parenting Philosophy**
Nurturing embraces the philosophy of raising children in caring, compassionate and empowering (non-violent) environments.
   - Building family attachments, empathy, and compassion.
   - Understanding brain development and functioning.
   - Enhancing self-concept, self-esteem and self-worth.
   - Empowering children, teens and adults.
   - Teaching discipline with dignity.
   - Increasing self-awareness and acceptance.
   - Promoting fun, laughter, and play.

2. The Nurturing Program Facilitator is a **Scientist**.
   - Is current of recent research being conducted on the effectiveness of parenting education.
   - Is competent in explaining & demonstrating the functions of program assessment and evaluation.
   - Is aware of the differences between opinions, beliefs, personal experiences, personal truths, and scientific facts when presenting information.
The Science of Nurturing Programs
Nurturing embraces the power of science and research in the prevention and treatment of child abuse and neglect.

- The impact of long term dysfunction on brain functioning requiring long-term treatments.
- The relationship between assessment and program development and modifications.
- Newest research on brain chemistry and its effects on human behavior.
- Understanding the ACE study and the ramifications of CAN on long term health.
- Understanding and explaining some of the key findings of the Nurturing Parenting Programs.

3. The Nurturing Program Facilitator is a Clinician.
   - Understands the motivations and reinforcements of behavior.
   - Aware of the impact the quality of childhood has on the life styles and parenting styles of adults.
   - Understands how the brain normalizes repeated experiences and develops neurological pathways.
   - Understands and accepts one’s own personal history and influence as a facilitator.

Clinical Aspects of the Nurturing Programs
Nurturing embraces the clinical understanding of human behavior including:

- Basic needs of human beings and role identity.
- Differences between “being” (our humanness) and “doing” (our behavior).
- The key aspects of bonding, attachment attunement, and empathy.
- How brain chemistry influences our behavior.
- Differences between male and female brains.

4. The Nurturing Program Facilitator is a Practitioner.
   - Skills in facilitating groups.
   - Skills in conducting home-visits.
   - Skills in working with children and teens in groups and one-to-one.
   - Creates a comfortable, positive learning environment.
   - Is capable of using assessment data to develop meaningful parenting instruction.
   - Knows the difference between primary, secondary and tertiary prevention levels.

Facilitating Nurturing Programs
Nurturing embraces the skill and the art of the practitioner in facilitating participant growth and learning:

- Conducting engaging, dynamic group and home based learning environments;
- Engaging and challenging parents and children to develop new beliefs and perceptions;
- Skillfully promoting growth through self-discovery;
- Embracing the philosophy, science and clinical aspects of NPP.

14 Step Implementation Guide
Each of the Nurturing Programs has a 14 step guide for implementing the program you select. The 14 Step Guide is presented in the introduction to each of the Instructor’s Manuals.
Chapter 9:
Nurturing Program Models and Formats

Home Based Nurturing Program Format
The following format is consistent for home-based programs for parents and their children:

1. **Welcome and Check-In (10-15 minutes):** Parents and the home-visitor review the family’s week and discuss the successes and accomplishments of the Home Practice Assignments.

2. **Parenting Skills and Self-Nurturing Activities (45-50 minutes):** Parents and the home visitor engage in role play, discuss new ideas, view A/V programs, and express self through art. Home sessions alternate the focus on learning nurturing parenting skills and self-nurturing skills.

3. **Family Nurturing Time (30 minutes):** Family Nurturing Time engages parents and children in deepening their attachment and stimulating children’s brain development. Depending on the age of the child, the following format is followed:
   - **Infant Activities** (birth to 15 months). Activities include finger plays, infant massage and play.
   - **Toddler and Preschooler Activities** (15 months to 5 years). Activities include finger plays, hand-eye motor activities, large and small muscle movement, sensory discovery, language development, creative art activities and child massage.

4. **Closing Activity (5-10 minutes):** The home visit ends with a review of the session competencies located in the Family Nurturing Plan and the Home Practice Assignment. Successful achievement of the competencies is measured by the responses to the questions and skills located on the FNP. The Home Visitor and the parent work together in assessing the degree of satisfaction in meeting the lesson’s competencies.

Implementing the HOME-BASED Nurturing Programs
The following are recommendations for implementing the program in a home-based setting. A more comprehensive presentation of successfully implementing the Home Based and Group Based Nurturing Programs is presented in greater detail in the *Nurturing Program Implementation Manual*.


2. Use appropriate activities for infants, toddlers and preschoolers during *Family Nurturing Time*.

3. **Parent Activities.** The parent sessions are arranged numerically in a developmental learning order; that is, many concepts serve as prerequisite knowledge to other more
advanced knowledge and skills. The initial sessions must be taught before the remaining sessions, with only a few exceptions. Sessions can be taught out of sequence only when prerequisite concepts have been taught.

4. What happens to the children when you work with the parents?
   - Bring a lot of toys for the children to play with.
   - With infants, you may just want the mother to hold the child, or place the child in a crib, swing, play pen, etc. nearby where you both are talking.
   - Allow the child to sit in on your discussions. The child may soon learn he’d rather be doing something else.
   - Find alternate child care for the one hour (neighbor, relative, etc.).

5. Use the *Parent Handbook* or *Easy Reader*.

6. Use the *Audio-Visual Presentations*.

7. Encourage parents to complete weekly entries in their *Nurturing Journal*.

8. **Home Practice Assignments** and **Home Practice Check-In**. Parents are assigned a weekly Home Practice Assignment. The assignments are listed in the Home-Based Activities Manual, the Family Nurturing Plan and the Family Nurturing Journal. The Home Practice Assignment is designed to reinforce the concepts that are presented during the Nurturing Program.

9. **Family Hug.** At the end of each home visit, you and all the family members close the time with a family hug. Getting parents and children comfortable with touching each other is a critical skill in developing nurturing parenting interactions.

10. **Program Assessments.** The Nurturing Program uses specific pretest and posttest measures to assess parent strengths. We recommend that you use the *Adult-Adolescent Parenting Inventory* (AAPI-2), and *Nurturing Skills Competency Scale* (NSCS).

**GROUP-BASED Nurturing Programs**
The frequency and length of the program sessions differs for each of the programs. Generally, group-based sessions run 2 1/2 hours to 3 hours once a week.

- Two professionals/paraprofessionals facilitate the parent’s program; two staff (plus additional volunteers when necessary) facilitate the children’s program.
- Groups are held in sites ranging from classrooms to meeting rooms in various agencies.
- Group-based programs generally run 2 to 3 hours per session with a 20-minute break.
- Parents and children meet in separate groups that run concurrently.
- 12 to 15 adults attend the group programs (single parents or intact couples). Their children meet in their separate groups.
- Many families attending the Nurturing Programs are either mandated by the courts, or required to attend as a stipulation of their treatment plan. Families who are not involved in abuse/neglect but wish to attend voluntarily sign up through news/flyer promotion.

The formats on the following page are typical for group sessions:
PARENTS AND CHILDREN - 2 ½ HOURS

Parent’s Group - 70 Minutes
Welcome
Check-In
Parenting Lesson

Children’s Group 5 – 11 Years
Hello Time
Circle Time
Art/Games

Family Nurturing Time – 20 Minutes
Parents, children and facilitators meet together for 30 minutes to share snacks, have fun and promote parent-child attachment.

Parent’s Group – 60 Minutes
Parenting/Self Lesson
Closing & Praise Circle

Children’s Group 5 – 11 Years
Puppet Power
Art/Games
Learning Center
Good-bye Song

PARENTS AND ADOLESCENTS - 3 HOURS

Parents Group – 70 Minutes
Welcome
Check-In
Parenting Lesson

Teens Group 12 – 18 years
Welcome
Check-In
Teen Development Lesson

Family Nurturing Time – 20 Minutes
Parents, teens and facilitators meet together for 30 minutes to share snacks and build stronger parent-teen attachments.

Parents and Teens Together – 90 Minutes
Parents and teens are together for discussion, activities and role-playing.
Closing & Praise Circle – 5 Minutes

Group-based and Home-based COMBINATION Program Model
In situations of chronic maltreatment, an appropriate design is the combination of a series of group sessions interspersed with home visitations. The functional purpose of the combination of group and home based education is to allow parents the opportunity to practice and implement the parenting strategies discussed in the group. In this model, the education is competency based meaning that the group sessions may finish, but based on the attainment of the competencies, the home-based visitations continue until competencies have been learned.


Classroom Settings
The Home-based Nurturing Programs Instructor’s Lesson Guides, along with the Nurturing Skills Instructor’s Lesson Guides are ideal to utilize in classroom settings. Each of the individual
lessons presented in the Instructor’s Lesson Guides translates into an hour or more of instruction in a traditional classroom setting with 60 minutes of class time. Classrooms located in schools, correctional facilities, half-way homes, residential centers and shelters are ideal settings for traditional hour long education.

Implementing the GROUP-BASED Nurturing Programs

A. Pre-Session Assurances
   1. Contact the family prior to the start of the first session; preferably on the day before. Remind them of the time, date, and place of the meeting.
   2. Call to make sure the training site will be open.
   3. Make sure you have all the materials for the session.
   4. Arrive an hour early to arrange the rooms, get coffee/tea going. Make sure the children’s learning centers are arranged.
   5. Make sure you know how to operate the A/V equipment.

B. How to Prepare to Facilitate a Nurturing Group Session
   1. Understand the concepts of the session.
      a. Review agenda for the session, which appears in the Activities Manual used by facilitators to run the groups. It will list the concepts to be covered in that session.
      b. Read the Parent or Adolescent Handbook chapters that correspond to the week’s session you are going to facilitate. Pay close attention to how the concepts are presented.
   2. Understand the activity to be facilitated.
      a. Read through the entire activity. Notice that each activity has:
         • A number and name (ex. 4.1 Welcome and Check-In) which tells you the week (4) in which the activity is run, the order in which the activity comes (.1 = the first activity of the session), and the type of process activity (Icebreaker) or the concept being taught
         • Time (ex. 50 minutes) which tells you how long the activity should run
         • Construct (ex. Empathy) which is being worked on through this activity
         • Materials (ex. flip chart, magic marker) which you will need to have to conduct the activity
      b. Pay attention to the Goals and Objectives of the Activity and the Notes and Suggestions at the end of the activity. These will help you to conceptualize the direction you are taking the group and any problems you might encounter.
      c. Review the DVDs that will be shown during the session. Never enter a session without first reviewing the DVDs. Preparation is always a key to success.
      d. Practice the session with your co-facilitators prior to the session.
   3. Understand Your Role as Co-facilitator. In the Nurturing Program, facilitators work as a team. Your team members can help by:
      a. Helping each other understand and prepare for activities
b. Giving each other support and encouragement.

c. Warming up together (checking in with each other beforehand to deal with feelings, etc. that might inhibit good work).

d. Debriefing together after the session (discussing how the session activities were conducted, what the process was like, how individuals and families are doing, how team members are feeling about their work in the NP, etc.).

e. Helping keep discussions on track and on time, observing interactions, sharing observations with the group, and generally facilitating group process along with the co-facilitator who is in charge of leading a particular activity.

4. **Prepare the Environment.**

   a. Arrive at the room in time to arrange the chairs, the AV equipment, and flip chart; get drinks ready; generally set up a comfortable learning environment.

   b. Be sure you have brought all materials needed for the session and have arranged them conveniently, so that you won't have to disrupt the flow of the session in looking for them.

5. **Final instruction: Relax and Have Fun with It!**

C. **When the Group Session Begins**

   1. Introduce yourself and each facilitator to the families as they enter.
   2. Tour the facility and show parents and children where the groups will be held.
   3. Have name tags ready for first session.
   4. Get children involved in the learning centers if they arrive early before the formal session begins.
   5. Begin on time. Late comers will work harder to get there on time if you start on time.
   6. Place chairs in a circle. Leave no vacant chairs in circle.
   7. Welcome everyone and thank them for sharing this time with you.
   8. Review the orientation of the program to the parents located in Activities Manuals and Parent Handbooks.
   9. Keep the group going. Be prepared and flow with the materials.

D. **How to Succeed with the Nurturing Programs**

   1. Be prepared.
   2. Provide leadership.
   3. Begin and end on time.
   4. Have snacks and beverages.
   5. Share family e-mail addresses if given permission.
   6. Share facilitator e-mail addresses and work phone numbers.
   7. Contact family who missed session and make up session.
   8. No new families after the second week of the group program.
   9. Establish a nurturing group:
      - Use confrontation.
      - Use praise.
      - Praise group for attending.
      - Establish family/group rules.
   10. Promote respect and dignity:
- Cut no one down.
- Don’t take sides.
- Make no snide remarks.

11. Make contact with family case worker to review progress.
12. Meet weekly as a team to review progress parents and children are making.

. . . for Teen Parents

13. Offer free goodies such as diapers, stuffed animals, gift certificates, etc.
14. Do home visits with grandparents and teens together, when appropriate.

Selecting Families

1. Decide what to do with families when all members can’t or won’t attend.
   • Offer instructing during a home visit.
   • Get court order for reluctant parent.

2. Screen for alcohol and drug dependency.
   • Active abusers of alcohol and drugs will struggle with nurturing instruction if they are coming to sessions drunk or high. The goal is to refer parent for addiction counseling and support.
   • Recovering alcoholics usually do fine with continued support.

3. Screen for mental illness. Make sure medications are regularly taken.

4. Low functioning parents or parents with intellectual handicaps.
   • Set up group for parents of low intellectual ability.
   • Use the Easy Reader Parent Handbooks.

5. Families with children in foster care.
   • Involve parents and children in group.
   • Use program time as supervised visit.

6. Families with children older or younger than children in the group.
   • For infants and toddlers, have volunteers.
   • Use adolescents as aides in the children's programs.

7. Parents living with parents. Involve grandparents?
   • Is involving grandparents a plus or minus?
   • Is it giving or taking power and responsibility to biological mom/dad?
   • Is grandma the primary parent?
   • What is in the best interest of the children?

8. Screen for sexual abuse.
   • The Nurturing Programs are not sexual abuse treatment programs.
   • Families in recovery for sexual abuse can succeed in the program.
How to Get Families to Agree to Attend

1. Meet with reluctant person(s) on their turf (home, park, lunch).

2. Contract with person/family to attend the first three sessions. After three sessions, family is hooked.

3. Schedule a convenient training time.

4. Help arrange transportation.

5. Choose comfortable training site.

6. DO NOT call it a Child Abuse Prevention Program.

7. Put contingency on attendance:
   - Child returned from foster care.
   - Child removed from home with relative.
   - Child placed in foster care.
   - Get friends and/or relatives to pressure on family to attend (minister, hairdresser, etc.)

8. Keep fee for attendance low or free.

9. Make it sound like you have a program with a long waiting list and they're lucky to be selected. Generally, the paradox of wanting something is when you can't have it.

10. Send a little thank you note to them telling them how much you enjoyed meeting them and that you look forward to the time together.

11. Get court order to attend.

12. Have families invite neighbor families or families of friends to also attend. For teen parents:
   - Get high school credit
   - Let boyfriend attend
   - Let children attend

13. Keep your conviction high.

Program Facilitators: People Who Will Implement the Nurturing Program

1. Four facilitators are needed to run group-based programs -- two for children or adolescent groups; two for parent group. (One facilitator is needed to conduct a home visit.)

2. Facilitators need to be:
   - Empathic
   - Emotionally stable
3. Facilitators need to have:
   - Good self-esteem, self-concept;
   - Knowledge and acceptance of alternatives to corporal punishment;
   - Skills in behavior management;
   - Appropriate expectations of preschoolers, children, adolescents;
   - The ability to act as a professional (there to help facilitate growth in others - not primarily self). The ability to conduct group process;
   - The ability to act as a team;
   - Self-assurance to run activities with music, play, and art.

Each time you run an activity, preparing for and conducting the next activity becomes a little bit easier. You'll develop your own style and special techniques as you go along. You have your co-facilitators to help and the participants to appreciate your work. You’ll do just great!

**Notes:**
Chapter 10:
The ACE Study (Adverse Childhood Experiences) and the Development of Protective Factors

Adverse Childhood Experiences: The ACE Study
In 1995, the initial phase of ongoing retrospective study began in San Diego. Goal: To examine the link between childhood stressors and adult health.

ACE Study
Ten exposures of adverse experiences were studied:

- Physical, emotional and sexual abuse;
- Physical and emotional neglect;
- Household substance abuse;
- Mental illness;
- Incarceration;
- Mother treated violently;
- Separation/divorce.

From 1995 to 1997, approximately 17,500 adult patients of Kaiser Permanente Health Clinic completed a questionnaire regarding their exposure to the 10 adverse childhood experiences.

Findings of ACE Study
- More than half of the 17,500 adults completing the questionnaire reported at least one exposure.
- 25% reported two or more childhood exposures.
- Patients who experienced four or more childhood exposures compared to patients who experienced none had a 4 to 12 fold increase for health risks.
- Health risks included:
  - Alcoholism
  - Drug abuse
  - Depression
  - Attempted suicide
  - Smoking
  - Poor self-rated health
  - Physical inactivity
  - Severe obesity
  - Sexually transmitted diseases

Findings Related to Child Maltreatment
- 28% of the respondents indicated they were physically abused
- 21% sexually abused
- 15% emotionally neglected
- 11% emotionally abused
- 10% physically abused
## ACE Nurturing Training Data

**Percentage of Individuals Indicating "Yes" to ACE Statements:**

<table>
<thead>
<tr>
<th>Statement</th>
<th>Total</th>
<th>Sacramento</th>
<th>Hermiston</th>
<th>Bangor</th>
<th>Chicago</th>
<th>Savannah</th>
<th>Oroville</th>
<th>Starkville</th>
<th>Baton Rouge</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Did a parent or other adult in the household <strong>often or very often</strong> swear at you, insult you, put you down or humiliate you or act in a way that makes you afraid that you might be physically hurt?</td>
<td>45%</td>
<td>52%</td>
<td>47%</td>
<td>46%</td>
<td>41%</td>
<td>25%</td>
<td>50%</td>
<td>11%</td>
<td>29%</td>
</tr>
<tr>
<td>2. Did a parent or other adult in the household <strong>often or very often</strong> push, grab, slap or throw something at you or ever hit you so hard that you had marks or were injured?</td>
<td>32%</td>
<td>38%</td>
<td>35%</td>
<td>38%</td>
<td>24%</td>
<td>25%</td>
<td>20%</td>
<td>22%</td>
<td>14%</td>
</tr>
<tr>
<td>3. Did an adult or a person at least 5 years older than you <strong>ever</strong> touch or fondle you or have you touch their body in a sexual way or attempt or actually have oral, anal, or vaginal intercourse with you?</td>
<td>30%</td>
<td>29%</td>
<td>39%</td>
<td>29%</td>
<td>22%</td>
<td>42%</td>
<td>40%</td>
<td>0%</td>
<td>36%</td>
</tr>
<tr>
<td>4. Did you <strong>often or very often feel</strong> that no one in your family loved you or thought you were important or special or your family didn’t look out for each other, feel close to each other, or support each other?</td>
<td>31%</td>
<td>26%</td>
<td>41%</td>
<td>46%</td>
<td>22%</td>
<td>33%</td>
<td>50%</td>
<td>17%</td>
<td>36%</td>
</tr>
<tr>
<td>5. Did you <strong>often or very often feel</strong> that you didn’t have enough to eat, had to wear dirty clothes, and had no one to protect you or your parents were too drunk or high to take care of you or take you to the doctor if you needed it?</td>
<td>12%</td>
<td>12%</td>
<td>10%</td>
<td>25%</td>
<td>6%</td>
<td>8%</td>
<td>25%</td>
<td>0%</td>
<td>21%</td>
</tr>
<tr>
<td>6. Were your parents ever separated or divorced?</td>
<td>39%</td>
<td>40%</td>
<td>33%</td>
<td>38%</td>
<td>37%</td>
<td>50%</td>
<td>60%</td>
<td>22%</td>
<td>50%</td>
</tr>
<tr>
<td>7. Was your mother or stepmother <strong>often or very often</strong> pushed, grabbed, slapped or had something thrown at her or <strong>sometimes, often or very often</strong> kicked, bitten, hit with a fist, hit with something hard or ever repeatedly hit at least a few minutes or threatened with a gun or knife?</td>
<td>22%</td>
<td>25%</td>
<td>18%</td>
<td>21%</td>
<td>27%</td>
<td>17%</td>
<td>20%</td>
<td>6%</td>
<td>14%</td>
</tr>
<tr>
<td>8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?</td>
<td>35%</td>
<td>38%</td>
<td>39%</td>
<td>42%</td>
<td>27%</td>
<td>33%</td>
<td>50%</td>
<td>11%</td>
<td>21%</td>
</tr>
<tr>
<td>9. Was a household member depressed or mentally ill, or did a household member attempt suicide?</td>
<td>33%</td>
<td>24%</td>
<td>43%</td>
<td>54%</td>
<td>33%</td>
<td>25%</td>
<td>40%</td>
<td>33%</td>
<td>43%</td>
</tr>
<tr>
<td>10. Did a household member go to prison?</td>
<td>10%</td>
<td>10%</td>
<td>8%</td>
<td>13%</td>
<td>10%</td>
<td>8%</td>
<td>10%</td>
<td>6%</td>
<td>0%</td>
</tr>
<tr>
<td><strong>Average</strong></td>
<td>29%</td>
<td>30%</td>
<td>31%</td>
<td>35%</td>
<td>29%</td>
<td>27%</td>
<td>37%</td>
<td>13%</td>
<td>26%</td>
</tr>
<tr>
<td><strong>Total</strong></td>
<td>345</td>
<td>157</td>
<td>51</td>
<td>24</td>
<td>49</td>
<td>12</td>
<td>20</td>
<td>18</td>
<td>14</td>
</tr>
</tbody>
</table>
Protective Factors

- Center for the Study of Social Policy in 2003 developed a logic model for reducing CAN based on building resiliency as a way of reducing risk factors. Five Protective Factors were identified by CSSP.
- An additional Protective Factor was developed by Community-Based Child Abuse Prevention (CBCAP).

1. **Nurturing and Attachment**
   The need for children to experience nurturing and creating a bond with a caring adult.

2. **Knowledge of Parenting and Child Development**
   - Parent Education and Support Groups
   - Program structure that offer long-term service (two years or more)
   - Interpersonal values: trust between staff and parents.
   - Educational approach that focuses on parents strengths.
   - Emphasizes solid decision making and not quick fixes.

3. **Parental Resilience**
   - Parent’s individual developmental history and personal psychological resources are considered to be the most important.
   - Intergenerational patterns of child maltreatment.

4. **Social Connections**
   - Helping families build and strengthen positive social connections.
   - Social Isolation: lack of integration into social networks.

5. **Concrete Support in Times of Need**
   - Poverty is the strongest factor that correlates with CAN.
   - Provide concrete support to help families cope with the stresses of poverty.
   - Work with parents to meet their daily needs: rent money, food, money to pay utilities, a place to live, employment, child care.

6. **Social and Emotional Competence of Children**
   - Cognitive skill building
   - Social competence
   - Mental health
   - Overall well-being

   Development is deeply affected by the quality of a child’s relationships with his or her primary attachment figures.

*Notes:*
Resource Chapter 1: 
History of Infanticide

Infanticide
Infanticide is defined by Langer (1974) as the willful destruction of newborn babies through exposure; starvation, strangulation, smothering, poisoning, or through the use of some lethal weapon.

Radbill (1968) describes infanticide as the killing of a newborn with the consent of parent, family or community.

Public caning of children, ritualistic whippings, disfiguration, and maiming were all common practices of early childhood in antiquity.

During the classical period of Plato and Aristotle, the philosophy regarding children was one of ownership. Aristotle was quoted as saying: “The justice of a master or a father is a different thing from that of a citizen, for a son or a slave is property, and there can be no injustice to one’s own property.”

Reasons Why Infanticide was practiced:
Infanticide has been a worldwide practice since recorded time. Reasons for infanticide include:

1. Population Control:
   - In societies that did not know how to prevent conception or how to produce abortion.
   - Babies were regarded as an unavoidable result of sexual intercourse.
   - More girls were killed than boys to limit the number of future mothers.
   - As a means of controlling family size.

2. Illegitimacy:
   - Dishonor of bearing an illegitimate child led to infanticide.
   - If not killed, the illegitimate child was left to die.
   - Mortality rates were twice as high for illegitimate children.

3. Children born in close proximity. Babies were killed because:
   - Illness or death of mom;
   - Older children were too much to care for;
   - Economic issues;
   - Feeding problems;
   - Jealous husband.

4. Greed for Money
   - Eighty percent of the illegitimate children put out to nurse in 19th Century London died. Nurses collected the fees then did away with the babies.

5. Greed for Power
   - Kings who feared they would be replaced with their own heir.
• New Testament depicts Herod as ordering the deaths of all children two and under. Estimates suggest 144,000 children were killed. Day was set aside to celebrate the Slaughter of the Innocents. Innocents Day was celebrated historically in most Christian countries by ritually whipping children.

6. Superstition
• Fears of unusual births, children with congenital defects usually meant evil.
• When an astrologer in antiquity was consulted at the birth of a child, if ill omened, the child was killed.
• Cure diseases, benefit sterile women, or bring good crops.

7. Ritual sacrifice
• Fertility rites, children were cast into rivers as offerings to water gods to bring good harvests.
• Sacrificing of best-loved child to prove piety.
• Kings used children to appease the wrath of certain gods.

8. Life-giving
• Slain infants were used for medical purposes.
• Feeding flesh to mothers to produce strong offspring.
• Blood and flesh of babies could confer health, vigor and youth-fullness.

9. Cannibalism.
• Usually under extreme famine conditions.

10. Infanticide immurement.
• The practice of placing children in the foundations or walls of buildings to ensure the durability of certain structures.

• Great philosophers like Seneca, Plato and Aristotle maintained that killing defective children was a wise custom.
• Mentally defective children were killed because they were instruments of the devil.
• “Going to beat the hell out of you.”
• “Going to beat the devil out of you.”

The maltreatment of children has been and continues to be the greatest of all human tragedies.

Mary Ellen Wilson (1864-1956)
• Case of child abuse that drew national attention in 1866.
• Born to Francis and Thomas Wilson. When Thomas died mother was unable to care for Mary Ellen and gave her up.
• The New York Department of Charities placed Mary Ellen with Mary and Thomas McCormack.
• Thomas McCormack died and Mary married Francis Connolly. They moved into an apartment on West 41 St where the maltreatment began.
• Concerned neighbors asked a Methodist Minister to check on eight year old Mary Ellen and observed the girl in a malnourished and abused state.
• Local authorities were reluctant to act on child cruelty laws.

ASPCA
Since local authorities were reluctant to act on child cruelty laws, Elbridge Thomas Gerry of the American Society for the Prevention of Cruelty to Animals took her case to the New York State Supreme Court in 1874. She was now 10 years old.

The deliberate cruelties and deprivations inflicted on Mary Ellen Wilson by her adopted parents included the following:
• regular and severe beatings;
• insufficient food;
• being forced to sleep on the floor;
• having no warm clothes to wear in cold weather;
• being frequently left alone inside a darkened, locked room;
• being forbidden to go outdoors, except at night in her own yard.

Mary Ellen Connolly Court Hearing
My father and mother are both dead. I don’t know how old I am. I have no recollection of a time when I did not live with the Connolly’s. Mamma has been in the habit of whipping and beating me almost every day. She used to whip me with a twisted whip—a raw hide. The whip always left a black and blue mark on my body. I have now the black and blue marks on my head which were made by mamma, and also a cut on the left side of my forehead which was made by a pair of scissors. She struck me with the scissors and cut me; I have no recollection of ever having been kissed by any one—have never been kissed by mamma. I have never been taken on my mamma’s lap and caressed or petted. I never dared to speak to anybody, because if I did I would get whipped. I do not know for what I was whipped—mamma never said anything to me when she whipped me. I do not want to go back to live with mamma, because she beats me so. I have no recollection ever being on the street in my life

“...the same treatment as the common cur.” Judge ruled:
“Mary Ellen is a human being who is a member of the animal world. Hence, since Mary Ellen is an animal she is deserving of the same treatment as the common cur.”
• Mrs. Connolly was sentenced to one year in jail.
• New York Society for the Prevention of Cruelty to Children was established.
• American Society of the Prevention of Cruelty to Children (ASPCC) and Animals (ASPCA) is located in Denver CO.
• In 1888 Mary Ellen got married had two children, adopted an orphan child and lived to 92 years old.
• Professionalization of social work began in the early 1900-1930.

Modern Era of Child Abuse and Neglect (CAN) Recognition
• In 1962, almost 100 years after the Connolly case, H. Kempe, Silverman, Steele, Droegemueller and Silver published an article in the Journal of the American Medical Association; July edition entitled “The Battered Child Syndrome”.
• A “battered child” is a clinical condition in young children who have received serious physical abuse, generally from a parent or foster parent.
Battered Child Syndrome
Syndrome consisted of:
- broken bones to any bone but especially to the long bones of the body;
- subdural hematoma;
- failure to thrive;
- soft tissue swelling or skin bruising;
- any explanation of the cause of an injury incongruent with the injuries.

Recognition, Legislation & Research
- 1970's saw the first legislation mandating professionals whose job brought them into contact with children to report suspected cases of maltreatment.
- In 1975, books and articles were describing why parents were abusing their children.
- 1978 Bavolek published the first inventory to assess high risk parenting attitudes
- Ray Helfer, MD (1987) published World of Abnormal Rearing (W.A.R.)
- Bavolek, S. (1987), published The Nurturing Parenting Program for Parents and their School-Age Children (5 to 11yrs) which was the first published, family focused, evidence-based parenting program.

Child Abuse Today
- Evidence-based parenting programs abound.
- April is Child Abuse and Neglect Prevention month.
- Funding is set earmarked for prevention and treatment programs.
- Children’s Trust Funds have been established in all 50 states making money available for prevention.

Discussion Questions
- Discuss the term “culture.”
- Describe the term “cultural identity.”
- What are cultural beliefs and practices?
- What is meant by the term “multi-cultural?”
- What roles do beliefs and practices play in shaping the morals of a multi-cultural society?
- Is “child protection” a familial, cultural or societal responsibility?

References


Notes:
Resource Chapter 2:  
Description of the Five Parenting Constructs of the AAPI and Nurturing Parenting Program

The Nurturing Parenting Programs are developed from a strong philosophical basis that supports the growth and development of parents and children as caring people who treat themselves, others, and the environment including animals with respect and dignity. This philosophical basis of caring forms the underlying structure that constitutes the morals and values that are mirrored in the attitudes, beliefs, strategies, and skills taught in the Nurturing Programs. To be effective in changing the way people behave, the morals defined by a program must represent the standards and practices of behaviors known to contribute to the overall health and functioning of a society.

The goals, objectives, and educational lessons of the Nurturing Programs were developed from the previous research of Bavolek, Kline, and McLaughlin (1978) in identifying and assessing high-risk parenting behaviors. In assessing parenting attitudes for risk of child abuse and neglect, the initial step was to identify the known behaviors or constructs of abusive parenting. The identification of these constructs lead to the development of the Adult-Adolescent Parenting Inventory, and to the foundation of the Nurturing Parenting Programs.

The following behaviors represent the known behaviors of Child Abuse and Neglect:

**Construct A: Inappropriate Parental Expectations**
A parenting practice that is very common among reported cases of child abuse and neglect is the inappropriate expectations parents have for their children. Beginning very early in the infant’s life, abusive parents tend to inaccurately perceive the skills and abilities of their children. Inappropriate expectations of children are generally the result of three factors:

1. Parents simply don’t know the needs and capabilities of children at various stages of growth and development. Ignorant of this knowledge, expectations are made that often exceed the skills and abilities of the child.

2. Many parents who abuse their children generally lack a positive view of themselves and consequently of their children. Inadequate perceptions of self as an adult generally stem from early childhood experiences of failure, ridicule, and disappointment. These patterns of childhood failure are repeated to yet another generation where demands are made for children to perform tasks that they are emotionally, physically, or intellectually incapable of performing.

3. Abusive parents generally lack the empathy that is required to determine what an appropriate expectation is for children at different stages of development. Lacking empathy, described in more detail in the following construct, is a major contributor to the inappropriate demands parents make of their children.

The effects of inappropriate parental expectations upon children are debilitating. Many children perceive themselves as being worthless, as failures, and as unacceptable and disappointing to adults.
Beginning very early in the infant’s life, abusive parents tend to inaccurately perceive the skills and abilities of their children. Effects:

- Low regard for self (concept, esteem, worth)
- Feelings of failure
- Cannot please others
- Angry and anxious attachments

Construct B: Repeated Lack of Parental Empathy
Empathy is the ability to be aware of your own needs as well as the needs of others, and to take positive actions on the behalf of getting those needs met in healthy ways. Developing a sense of empathy is the cornerstone of the Nurturing Parenting Programs.

When parents lack empathy they:

- Are insensitive to their children’s needs;
- Fail to create a caring environment that is conducive to promoting children’s emotional, social, intellectual, physical, spiritual, and creative growth;
- Fail to a safe, close and trusting home;
- Fail to establish a positive attachment and bonding.

Parental Lack of Empathy results in:

- Diminished ability to trust
- Inability to form strong attachments
- Difficulty in taking care of one’s self
- Develops clingy relationships
- Focus is on self
- Possessive and smothering relationships
- Fears of abandonment
- Easily led
- Difficulty in accepting positive recognition

Empathy is the ability of being aware of another person’s needs, feelings, and state of being. It is the ability to place the needs of another as a priority. Empathic parents are sensitive to their children and create an environment that is conducive to promoting children’s emotional, intellectual, physical, social, spiritual, and creative growth. Empathic parents understand their children from the inside, not from the outside as some interested observer.

Many professionals are of the opinion that the trait of empathy exists in children at birth and is fostered through the manner in which they are treated during the process of growing up. Parents lacking sufficient levels of empathy find children’s needs and wants as irritating and overwhelming. Everyday normal demands are perceived as unrealistic resulting in increased levels of stress. The needs of the child come into direct conflict with the needs of the parent, which are often similar in magnitude.

Lacking an empathic home life, children often fail to develop a solid moral code of conduct. Right and wrong, cooperation, and kindness are not important because they are not recognized as important values. Others are devalued as “self” takes center stage. The impact of one’s negative actions on another is muted as the ability to care about the needs or feelings of another is not
important. Children with low levels of empathy are often labeled as troublemakers, disobedient, and often engage in acts of cruelty to themselves, others, and animals.

**Construct C: Strong Belief in the Value of Corporal Punishment**

Discipline comes from the Latin word *Discipulus* which means to guide and teach. The purpose of discipline is to teach children to be respectful, cooperative, and contributing members to a family and society. Harsh and abusive language, hurting touch, and punishment are viewed as disrespectful and undignified practices promoting rebellious and acting out behaviors. Parental practices of discipline must model the sought after behavior of the child.

Physical punishment is generally the preferred means of discipline used by abusive parents. Throughout history, the use of corporal punishment has been well documented. Rationale for the practice includes:

- to teach children right from wrong;
- as a parenting practice sanctioned by the proverbs of the Old Testament;
- as a cultural practice of discipline;
- to provide punishment for children’s misbehavior in a loving way;
- just simply to punish misbehavior; and
- because it produces quick results.

Abusive parents often believe children should not be “given into” nor allowed to “get away with anything.” They must periodically be shown “who is boss” and to respect authority so they will not become sassy or stubborn. Abusive parents not only consider physical punishment a proper disciplinary measure, but strongly defend their right to use physical force.

Physical attacks by the abusing parent are not often a haphazard, uncontrolled, impulsive discharge of aggression by the parent toward their children. To the contrary, studies appear to indicate that abusive parents utilize physical punishment as a parenting practice designed to punish and correct specific bad conduct or inadequacy. Much of what abusive parents find wrong with their children are the same things for which they were criticized and punished for as children, hence the punishment carries the approval of traditional family authority and an aura of righteousness.

The effects of physical abuse are demonstrated in the observed inadequate behavior of children. It is a common tendency for abused children to identify with the aggressive parent in an effort to gain some measure of self-protection and mastery. Abused children often develop a set pattern of discharging aggression against the outside world in order to manage their own insecurities. Additionally, children who see and experience recurrent serious expressions of violence in their own family learn that violence is a way to solve problems. Abused children, upon becoming parents, tend to punish their children more severely. As a result, abused children often become abusive parents.

**Corporal Punishment: Why Parents Hit Their Children**

1. **Definition of Corporal Punishment.** Corporal means body. Punishment means penalty. Corporal punishment is a penalty administered to the body by means of striking the body.
Reasons Why Parents Hit Their Children

a. **Parents hit children to teach them right from wrong.** Parents often hit their children because they want their children to learn right from wrong. Using the theory, “When there’s pain, there’s gain,” parents feel a “good spanking” will teach children not to misbehave. The reality is that spanking communicates to children that they not only did something wrong, but also that they are bad people. In addition, hitting never teaches children what to do or what is the right thing to do. Instead, it only teaches children what is not acceptable. Until children are taught what to do instead, misbehavior will likely continue. In this instance, low self-concept and low self-esteem are the likely results from repeated spankings.

b. **Parents hit children as a form of punishment.** For many parents, hitting is the only way they know to punish children for misbehaving. If they don’t use spanking, many parents are left with no form of punishment at all. Any mention of eliminating spanking as a form of punishment leaves parents with a basic fear that children will be allowed to do what they want and will be out of control. Punishment, when used with rewards, is an effective way for teaching right from wrong. Punishments such as time out, being grounded, loss of privilege, paying for something purposely broken, and parental disappointment are far more effective than hitting. In these instances, children learn that they are still loved even though they misbehaved.

c. **Parents hit children based on religious writings.** “Spare the rod, spoil the child” is the single most misquoted and misunderstood phrase in religious literature. Many people hit their children based on the belief that God sanctions violence toward children. Interpreted literally, the rod to many people means a stick. The actual verse that appears in the Bible is Proverb 13:24: “He that spareth his rod, hateth his son; but he who loveth him, chasteneth him betimes.” The notion of “spoiling a child” by sparing the rod was suggested later by 16th Century authors. Notable among them was Samuel Butler who, in 1663 write in *Hudibras*, “Love is a boy by poets styled; then spare the rod, and spoil the child.”

d. **Parents hit children as an “act of love.”** Many parents feel that hitting children is an act of “love” born out of deep concern for their child’s well-being. These parents tell their children how much they love them while they’re hitting them. Statements like, “If I didn’t love you, I wouldn’t be doing this,” “This hurts me more than it hurts you,” or “One day you’ll thank me for this,” or “I’m doing this for your own good” send confusing messages.

e. **Parents hit children because it’s a cultural practice.** Many people believe that hitting children is a way for parents to express their cultural identity.

f. **Parents hit children to prepare them for the real world.** Violence is so common that many parents believe they need to prepare their children for the violence-filled “real world” by “toughening them up.” So, parents hit children at home to prepare them for the violent world they live in.
Effects of Corporal Punishment
- Children identify with the spanking and spanker.
- Children develop an anxious and angry attachment.
- Children use violence as a way of solving problems and replicate the CP as parent.
- Children learn CP is normative.

Research Findings on the use of Corporal Punishment
- CP is related to time spent with the child: more time less likely to spank; less time more likely to spank.
- CP is negatively correlated with the cognitive stimulation the parents provided the child.
- Although parents of all races and ethnicities use CP, Black parents use CP at a higher rate.

Construct D: Reversing Parent-Child Family Roles
A fourth common parenting behavior among abusive parents is their need to reverse parent-child roles. Children are expected to be sensitive to and responsible for much of the happiness of their parents. Parent-child role reversal is an interchanging of traditional role behaviors between a parent and child, so that the child adopts some of the behaviors traditionally associated with parents. In role reversal, parents act like helpless, needy children looking to their own children for parental care and comfort.

Although the phenomenon of role reversal is often associated with an inability to be empathically aware of the children’s needs, the two behaviors are markedly different. When abusive parents fail to show an empathic awareness of their children’s needs, the children are often left to care for themselves. Carried to the extreme, children are emotionally and/or physically neglected or abused.

The emphasis is not placed on children assuming the role of the “nurturing parents” as in role reversal. In the latter situation, children are an integral part of the family functions often becoming a source of authority, control, and decision making.

The effects of role reversal on abused children are destructive. Assuming the role of the responsible parent, children fail to negotiate the developmental tasks that must be mastered at each stage of life if they are to achieve normal development and a healthy adjustment. Failure to perform any of the developmental tasks not only hampers development in succeeding stages, but also further reinforces feelings of inadequacy. Children in a role reversal situation have little sense of self and see themselves as existing only to meet the needs of their parents.

Parent-child role reversal is an interchanging of traditional role behaviors between a parent and child, so that the child adopts some of the behaviors traditionally associated with parents.

The Effects of Parent/Child Role Reversal
- Children fail to negotiate the developmental tasks of childhood.
- Develops feelings of inadequacy.
- Lag behind in social and emotional development.
- Parentified children often view themselves as existing to meet the needs of others.
- Develop a “role-based” identity.
- Have a limited sense of self.
Construct E: Oppressing Children’s Power and Independence

Closely aligned with the value of physical punishment and the lack of an empathic awareness of children’s needs is the belief that children’s independence and power need to be oppressed. The age-old phrase “the terrible twos” most adequately describes this construct. Parents fear that if children are permitted to use their power to explore their environment, or ask questions, or challenge parental authority, they will become “acting-out” and disrespectful. Hence, obedience and complete compliance to parental authority is demanded. When children’s power and independence are oppressed, they are not allowed to challenge, to voice opinions, or to have choices, but rather are told to “do what they are told to do” without question. This demand for compliance to parental authority has many limitations:

1. **Obedience breeds powerlessness**
   When independence is not fostered as a state of growth, the feeling of dependence becomes a dominant personality trait. Independence fosters power - a sense of self in comparison to others and one’s environment. The young child who explores is learning about cause and effect relationships between concepts: the “if — then” law of logic and nature. For young children, the ability to say “no” is a way of establishing boundaries and developing a sense of power, both necessary for success in life. Obedience to parental rule, however, breeds a sense of helplessness and dependence at a time when learning to be a separate being is critical.

2. **Obedience breeds inadequacy**
   Inadequacy is the perception that self or others are “less than, incapable, or inferior.” By demanding obedience, parents model that power is something to be used on others to get them to do what you want. Power is equated to control and the more power you have, the more control you can exert on others. The sense of powerlessness described earlier fosters a personal sense of inadequacy. Being a decision maker for your own life is not an option. Powerlessness, excessive dependence, and a sense of personal inadequacy are common traits of many obedient children.

3. **Obedience also breeds rebelliousness**
   History teaches us over and over again that the oppressed will rise up to be recognized. It’s inevitable. The human spirit cannot be denied its existence. Power struggles, acting out behavior, disobedience are all common behaviors resulting from years of obedience and complete yield to parental rule.

4. **Obedience breeds compliance — to all.**
   Doing only what one is told to do often teaches children a generalized learned response of compliance. When those in perceived power make a demand, like a child’s peer group, once again, the learned response is to comply. In the experimental world of teenagers, common sense to stay away from drugs and alcohol, vandalism, and crimes against the community are overwhelmed with the compliance to peer pressure. Simply, children who have been raised as obedient to authority often struggle with their ability to withstand peer pressure. Saying “no” to drugs and other inappropriate behaviors is difficult to practice.

5. **Finally, obedience breeds followers, not leaders.**
   Doing what you’re told to do is not nearly enough to succeed in the world. Businesses look
for energetic, creative employees who have visions for the future. Thinkers, problem solvers, visionaries, and leaders are made from early home environments that foster these traits. Obedience as a dominant parenting practice designed to oppress children’s power and independence often has long lasting devastating consequences as observed in children and adults who are unable to make wise choices, or take initiative, or provide the leadership critical to nurturing parenting.

*Notes:*
Resource Chapter 3:
'Understanding the Human Brain and the Human Mind'

The Importance of Early Childhood
The child’s brain is developing neurological networks, an unconscious past is being created, and perceptions that form the bases of the child’s reality are being developed and strengthened.

Human Brain
“The brain is the most complex thing we have yet discovered in our universe.”

James Watson, Nobel Price for helping discover DNA

Woody Allen mentions that “...the brain is my second most favorite organ.”

Neurological Social Networking
• Humans are born with approximately 23 billion brain cells (neurons).
• Each cell reaches out to the other cell through axons (acts-on) with the endpoint of the axons pairing up with the receiving points on the dendrites (end-right) producing a synaptic connection.
• A synapse is the junction of the dendrite and axon.
• Receptors are the specialized sites on the neuron where synapses are formed.


Human Brain
• Each neuron is connected to hundreds of other neurons by anywhere from 1,000 to 10,000 synapses forming networks.
• A neurotransmitter is a chemical that is released in the union of neurons.
• Neurological networks are created by neurotransmitters which form the functional architecture of the brain. (importance of Birth to 5).
• Learning is defined as the establishment of new neural networks composed of synaptic connections.
• New synapses appear after learning.
• It is the number of synaptic connections that distinguishes greater from lesser mental capacity.
• Practice makes Synaptic Connections which lead to Learning supported by Repetition (Dosage).

Differences between the Brain and Mind
• Brain is an organ; mind isn’t.
• Brain is the physical place where the mind resides.
• Brain is the vessel in which electronic impulses that create thought are contained.
• Brain is the hardware; Mind is the software.
• Mind is thought and emotions which give birth to perceptions. Mind is memories. Mind is also determination (left brain) and imagination (right brain).
• Reality is perception: processing of Life’s events; interpretation; meaning; feelings.
• The Mind creates a reality that represents the sensory experiences that begin at birth.

Sight, Sound, Taste, Touch, Smell.
• Memory and emotions are carried by cells. At birth, memories are unconscious (no cognition).
• The brain will normalize repeated reactions to events in life which can lead to “mind control.”

Brain Development and Evolution
The brain is made up of five major parts and develops from the bottom up.

Cerebral Cortex
   Learner Brain: Cerebral cortex evolved in primates about 2 or 3 million years ago. The primary functions of the cerebral cortex are decision making; use of language, creativity intelligence. Modern Homo Sapiens have been around for about 30,000 to 40,000 years old. Considering the Earth is 5.3 billion, the modern human has lived on the earth for less than five seconds.

Limbic System
Limbic Brain or Leopard Brain: first appeared in small mammals 150 million years ago. It evolved as a part of the development of the General Adaptation Syndrome (GAS) which provided early humans the ability to fight their predator or run away and seek shelter (flight). The evolutionary development of the Limbic System was the beginning of cause and effect through long term memory.

Mid Brain, Cerebellum, Brain Stem often referred to as the Reptilian Brain. The Brainstem, Cerebellum and Midbrain are the oldest parts of the brain which first appeared in fish 500 million years ago and continued to develop in amphibians and then reptiles.

Brain Stem
• Brain Stem: our primitive brain (Lizard brain).
• Posterior part of the brain adjoining and structurally continuous with the spinal cord.
• Fully developed at birth.
• Nerve connections of the motor and sensory systems from the main part of the brain to the rest of the body pass through the brain stem.
• Responsible for functions such as blood pressure, heart rate and body temperature.
• Must be fully functional at birth in order for an infant to survive.

Cerebellum
• Part of the primitive (Lizard) brain.
• Second largest part of the brain.
• Controls a person’s automatic movements and balance.
• Sends a message to the muscles to move properly.
• Dancing, kicking a football, or bringing a cup to the lips are all coordinated by the cerebellum.
• If the cerebellum is damaged at birth, the brain cannot coordinate movement.

Midbrain
• Part of our Primitive (Lizard) brain.
• Smallest region of the brain.
• Controls the visual and auditory systems as well as eye movements.
• Controls sleep.
• Arousal responses.
• Appetite.
• Motor movements such as running and skipping and other body movements.

**Limbic System**

• Often referred to as the Leopard Brain or emotional brain.
• Controls emotions and long term memories.
• Can override rational thoughts (cortex) and parts of the brain controlled by the brain stem: stress causing blood pressure to rise.
• Attaches emotions to memories - every time we remember an event, an emotion accompanies it.
• Converts information from learning and working into long term memory.
• Checks new information with stored information.

**Parts of the Limbic System**

1. **Hypothalamus**: Part of the limbic system that primes our hormonal responses.
2. **Amygdala**: Handles many emotions and aggressive impulses. Is larger in males than females leading to increases in aggression.
3. **Hippocampus** is our memory center. It is larger in females than males. Females have better long term memories.

**Cerebral Cortex**

• Referred to as the Learner Brain; the home of thoughts (mind).
• Executive branch of the brain.
• Regulates decision making and makes judgments about incoming information.
• Different regions are responsible for processing our vision, touch, hearing, speech, language development and problem solving.
• Allows us to plan and rehearse our future actions.

**The Reticular Activating System (RAS)**

• Brain’s toggle switch controls whether the leopard brain or the learner brain is in control.
• Located in the upper part of the brain stem continuing to the lower part of the cerebral cortex.
• RAS switches at two times:
  - When we become emotionally charged (fight or flight) the RAS shuts down the learning brain and the leopard (limbic) brain takes over.
  - When we become relaxed and the threat is gone, the leopard brain or limbic brain shuts down and the learning brain is back in charge.

**Sympathetic and Parasympathetic Nervous System**

• There are two parallel structures that our brain uses to keep us in balance. These two systems of nerves extend throughout our body:
• Sympathetic Nervous System is the body’s accelerator which regulates the need for activity. Dominant Chemicals: Cortisol, Adrenaline and Noradrenaline.
• Parasympathetic Nervous System is the body’s brakes which regulates the need for calm. Primary Chemicals: Oxytocin and Serotonin.
• SNS is developed in newborns before parasympathetic system (body’s brakes).
• Emotional regulation develops in the PSNS.
Sympathetic Nervous System

- Commands our survival reflexes especially when the body is feeling stress and fear. Dominant chemicals are: cortisol and adrenaline.
- Mobilizes the body to flee from danger or fight when we need to or freeze. The brain’s stress response circuit is called the HPA axis.
- H stands for the hypothalamus which is the command center that manufactures many of the chemicals of emotions.
- P stands for the pituitary gland which is a chemical storehouse.
- A stands for adrenal glands which produce adrenaline.
- HPA operates below conscious thought.
- HPA ties into the amygdala, a part of the limbic system thought to be directly responsible for emotional reactions.
- The amygdala integrates information from the senses especially the vision and either acts on its own (especially in emotional situations) or sends the info up to the cerebral cortex for further analysis.
- The amygdala assigns emotional value to what the senses perceive.
- Perceives a foe: stimulates the HPA axis to send out Cortisol.

Parasympathetic Nervous System

- The SNS is the warrior, the PSNS is the peacemaker.
- Dominant chemical is Oxytocin which acts as the “anti-stress.”
- Stress of any kind stimulates the PSNS into action.
- SNS is the accelerator: PSNS is the brakes.
- SNS is dominant during the day. In the evening when you are safe at home, the PSNS kicks in and prepares for a good night’s sleep.
- How does this apply to a home of family violence?

Ontogeny Recapitulates Phylogeny

Some scientists claimed that ontogeny recapitulates phylogeny (ORP). This phrase suggests that an organism’s development will take it through each of the adult stages of its evolutionary history, or its phylogeny.

Notes:
Resource Chapter 4:  
Chemistry of the Brain

Neurotransmitters:
- Chemicals that help regulate the electrical signals between nerve cells and the brain.
- N.T.s travel across synapses in neurons.

Hormones:
- The endocrine system is a system of glands, each of which secretes a type of hormone directly into the bloodstream to regulate the body.
- Hormones travel across the blood stream.
- Hormones regulate various human functions including metabolism, growth and development, tissue function and mood.

Common Neurotransmitters:
- **Dopamine**: motivating neurotransmitter associated with attention; infatuation; pleasure-reward, motivation, and concentration.
- **Adrenaline**: also called epinephrine. A neurotransmitter and hormone produced by the adrenal gland that is associated with sympathetic arousal.
- **Serotonin**: “feel good” chemical produced by the midbrain and brain stem. A natural anti-depressant will raise and fall.
  - Low levels are associated with depression, OCD, eating disorders, sleep disturbances.
  - Increased levels are associated with relaxation and sleep.
  - When serotonin metabolizes, melatonin results.

- **Norepinephrine (noradrenaline) make these two like Serotonin**
  - Involved with mood, concentration and motivation; Fixes information into long term memory.
  - Helps establish new synapses associated with memory.
  - Released during traumatic events which explains why events are remembered.

- **Endorphins**: Feel good brain chemistry
  - Meaning “morphine within” the brain.
  - Serves as a tranquilizer and analgesic.
  - Triggered by aerobic exercise, pain, and laughter resulting in a pleasurable sensation.
  - “Smile when your heart is breaking.”

Common Hormones:
- **Oxytocin**: Crucial for maternal behavior; bonds lovers to each other; bonds parents to children; reduces anxiety allowing for relaxation, growth and healing.
- **Vasopressin**: Similar to oxytocin; central to male bonding; motivates men to defend the family; may increase anxiety and put men on alert.
- **Melatonin**: Hormone that helps control your sleep and wake cycles.
- **Estrogen**: Sex hormone; increases bonding effects of oxytocin in women; hormone of reproduction.
• **Testosterone:** Sex hormone that fuels sexual desire in men and women; hormone of reproduction.
• **Prolactin:** Hormone that stimulates maternal behavior, especially in nursing mothers; also produces sexual satiety in men and women.
• **Cortisol:** Hormone released by adrenal glands in response to stress; can weaken the activity of the immune system; increases blood pressure; shuts down reproductive system.

**The Chemistry of Empathy**
- Activates our parasympathetic nervous system acts as our peacemaker.
- Characteristics include: Lower heart rate and blood pressure.
- The release of serotonin important for regulating moods.
- Norepinephrine molecule of excitement.
- Dopamine: the molecule of attention and reward.
- Oxytocin: the chemical of love & connection.

**Oxytocin: The Cuddle Chemical**
- The brain chemical that lets us bond, trust and love.
- Crucial for maternal behavior and empathy.
- Often referred to as the “cuddle” hormone.
- Bonds lovers to each other.
- The “anti-stress” hormone.
- Oxytocin is released when we are:
  - emotionally intimate during love making particularly during orgasm.
  - Hugging.
  - petting your cat/dog.
  - for milk let down during nursing.
  - during child birth.

**Chemistry of Abuse and Neglect**
Activates our sympathetic nervous system which commands our survival reflexes commonly known as “fight or flight or freeze.” Characteristics:
- High blood pressure and heart rate;
- Releases cortisol, adrenaline, noradrenaline and vasopressin;
- Chronic stress which leads to poor health conditions.

**Epinephrine and Norepinephrine:**
- Produced by adrenal glands, spinal cord and brain are considered excitatory neurotransmitters;
- High Levels are associated with anxiety;
- Low levels are associated with depression.

**Cortisol: Chemical of Stress**
- Research has shown that children’s and teen’s brains are very sensitive to stress- up to 5 to 10 times more sensitive than adult brains.
- The brains of children and teens can be damaged by frequent or ongoing stress specifically the hypothalamus, pituitary and adrenal glands commonly known as the HPA axis.
• HPA brain areas control reactions to stress and regulate important bodily processes including digestion, the immune system, mood, growth, body temperature and sexuality.
• Research has shown that children who grow up in abusive households experience:
  - Chronically elevated levels of stress hormones;
  - Very poor memories of their childhoods;
  - Predispositions to mental health disorders later in life;
  - Shutting down the growth hormone in the child and slowing the rate that calcium is deposited in bone resulting in not growing as tall and higher risk of osteoporosis.

**Notes:**
Knowles, Holton and Swanson (1998) discuss six assumptions of andragogy:
1. The Adult’s Need to Know
2. The Adult’s Self-Concept
3. The Role of the Adult’s Experience
4. The Adult’s Orientation to Learning
5. The Adult’s Readiness to Learn
6. The Adult’s Motivation to Learn

The Adult’s Need to Know
- Adults need to know why they should learn something and how it will benefit them.
- Learning for immediate use is better than learning for future use.
- What do you expect to learn?
- How might the information be useful for them?

The Adult’s Self-Concept
- Adults resent and resist situations in which they feel others are imposing their wills on them.
• Self-Concept as a learner is influenced by successes and failures in school.
• Self-Concept as a learner is also related to the person’s level of empowerment and motivation.

The Role of the Adult’s Experience
• Based on a lifetime of experiences, adult learners are more heterogeneous than younger learners.
• Adults’ personal identity is often tied to their experiences with biases and habits.
• Reflective learning helps adults reassess the impact of experiences and prepare them for change.

Adult’s Orientation to Learning
Adults are ready to learn when they experience a need to learn something in order to cope with real life tasks or problems.

Adult’s Readiness to Learn
• Adults are life, task, or problem-centered in their orientation.
• Learning needs to use real life situations.
• Flexibility in the lesson allows for personal experiences.

Adult’s Motivation to Learn
• Adults’ internal priorities are more important than external priorities.
• Incentives such as self-esteem, quality of life, and satisfaction are most important.
• Adults’ input into the development of lessons or prioritization of topics can encourage adults to take ownership of the learning process.

There are four elements to learning:
1. Motivation
2. Retention
3. Reinforcement
4. Transference

Motivation for Learning
• A key aspect of learning.
• Teaching to unmotivated adults is a waste of the instructor’s time.
• A friendly and open atmosphere helps build motivation.
• The learning environment needs an appropriate level of concern and stress.
• Appropriate level of difficulty.
• Provide relevance.

Retention
1. Practice through role play.
2. Repetition.
4. Practice use experiences.
Reinforcement
- Encourage learning.
- Positive better than negative.
- Support for students.

Transference
- Learners can associate new information with something they know.
- Learners can find similarities between the new information and something they know.
- Learners have a high degree of original learning (self-discovery).
- Learners need information for a critical reason.

Summary of Major Points
- Discover why adults would want to learn something new.
- Adults need to learn experientially.
- Approach topic as problem-solving.
- Repeatedly emphasize relevance of topic.
- Involve the adult in the planning, learning and evaluation.
- Adults will need to process and reflect.

Notes:
Resource Chapter 6: 
Development and Validation of the 
Adult-Adolescent Parenting Inventory (AAPI-2)

Critical Attributes of Child Abuse and Neglect (CAN)
Research throughout the decades since 1962 has identified three attributes of child maltreatment:
1. Strong relationship between child maltreatment and the development of “maladaptive,” unhealthy and dysfunctional behaviors;
2. The multi-faceted nature of the CAN; and
3. The replication of child maltreatment passed down from one generation to the next.

Adult-Adolescent Parenting Inventory (AAPI-2)
• The Adult-Adolescent Parenting Inventory (AAPI) is a norm-reference inventory designed to assess the parenting and child rearing beliefs of adult and adolescent parent and non-parent populations.
• Responses to the AAPI provide a level of risk in five dominant parenting practices known to contribute to the abuse and neglect of children.
• Purpose of the inventory is both for the primary prevention and treatment of CAN.

Five Parenting practices known to contribute to CAN
1. Having inappropriate expectations of their children that exceed their physical, emotional and developmental capabilities.
2. A general lack of empathy in meeting the needs of their children, coupled with a general inability in getting their own needs met.
3. A very strong belief in the use of physical punishment as a means of discipline.
4. Reversing family roles with their children.
5. Oppressing their children’s power and independence.

Nurturing Parenting Programs
• The Nurturing Parenting Programs are evidence-based, family focused programs designed for the treatment and prevention of child abuse and neglect.
• The philosophy, lessons and competencies of the Nurturing Programs are based on the five parenting practices of abuse and neglect.

Foundation of AAPI and NPP
• The foundation of the development of the AAPI and the NPPs was Dr. Bavolek’s work from 1970-76 to the present with children, teens and adults with behavioral and emotional problems in public schools, residential settings half-way homes and detention centers.
• One common characteristic: a childhood background of maltreatment.

Origin of the Development of the Adolescent Parenting Inventory (API)
Development of the parenting inventory began in 1975-78 as Dr. Bavolek’s Dissertation:

Development and Validation of the Adolescent Parenting Inventory (API): A parenting Inventory designed to assess high risk parenting attitudes in pre-parent adolescents.
Hypotheses
Adolescents with documented abusive histories (abused adolescents) will express significantly more abusive attitudes and beliefs about parenting and child rearing than adolescents with no identified abusive childhood history (non-abused).

Origin of the API
Project Goals:
1. Identify parenting behaviors that are known and accepted in the literature to contribute to child maltreatment;
2. Develop an inventory with statements that reflect both abusive and non-abusive parenting behaviors;
3. Conduct preliminary validity and reliability levels;
4. Administer the inventory to abused and non-abused adolescents and analyze the data.

Development of the API
Responses to the API indicated:
- Teens with abusive histories expressed significantly more abusive parenting beliefs than teens with no reported histories of childhood maltreatment in each of the parenting sub-scales (constructs);
- Teen males expressed significantly more abusive parenting beliefs than teen females regardless of background;
- Non-abused female teens responded with the most positive parenting beliefs; abused male teen responded with the most abusive parenting beliefs.

Development of the AAPI-1
1. Research was conducted in 1983-84 with adult parents to test the findings generated from the teens.
2. Abusive and non-abusive parents participated in the study.
3. Abusive parents were selected from social service agencies. Non-abusive parents were selected from children attending public schools.

Findings generated from over 2,000 adult parents replicated the findings from the teens:
1. Abusive parents expressed significantly more abusive parenting beliefs than non-abusive parents in each of the five parenting constructs.
2. Males expressed more abusive parenting beliefs than females, regardless of background.
3. While each of the constructs showed significant differences, the items for Construct B: Lacking Empathy were the strongest.

Development of the AAPI-2
- In 1999 re-norming of the AAPI-1 produced the AAPI-2.
- In the re-norming of the inventory, a fifth construct “Oppressing Children’s Power and Independence” was identified in the factor analysis.

Notes
Resource Chapter 7:
Development and Validation of the Nurturing Parenting Programs

Development and Validation of the Nurturing Parenting Programs
- 1977-78 Post-doctoral internship at the Kempe Center for the Prevention of Child Abuse and Neglect: University of Colorado Medical Center in Denver provided treatment experience.
- By 1984 the AAPI-2 was validated on adult and teen parent and non-parent populations.
- Need for a treatment program that addressed parenting issues was paramount.
- 1981-83 Dr. Bavolek received funding from National Institute of Mental Health (NIMH) while Associate Professor at the University of Wisconsin-Eau Claire to develop and validate the Nurturing Program for Parents and their School-Aged Children 4 to 11 years for the prevention and treatment of child abuse and neglect.

Nurturing Parenting Programs
In 1985, The Nurturing Parenting Program for Parents and their School-Age Children 4-11 was the first published evidence based, family focused parenting program with a built in assessment tool (AAPI) to measure participant success that was designed for the prevention and treatment of child abuse and neglect.

Based on the original research and development of the AAPI and NPP since 1975 there are:
- 25 Nurturing Parenting Programs designed to meet the different learning styles, cultures, and age levels of children.
- Three inventories designed to assess the parenting beliefs, knowledge and practices of adult and teen parent and non-parent populations.

Since 1975, it is estimated that:
- Over 1.5 million families have participated in Nurturing Parenting classes worldwide.
- Approximately 300,000 professionals have participated in Nurturing Program training workshops, seminars and presentations worldwide.

Notes:
Resource Chapter 8:
Research Findings Supporting the Proven Effectiveness of the Nurturing Parenting Programs

Research Designs & Reports
- **Pre-Posttest Design**: measure of short term effectiveness: 18 published reports.
- **Comparative Program Design**: Two treatments administered to determine effectiveness: 2 published reports.
- **Pre-Posttest Longitudinal Design**: measure of short term effectiveness over time: 11 published reports.

National Institute of Mental Health: The Nurturing Program Original Study
In the fall of 1981, the National Institute of Mental Health (NIMH), Clinical Research Division, funded a two-year project designed to remediate abusive parent-child interactions.

A two-year study designed to measure the impact of abuse on the growth of children was carried out with abusive families in six Midwestern cities. The goal of the study was to develop and validate a treatment program that would modify abusive parent-child interactions. A fifteen-week parenting and nurturing program for parents and their children was developed and field-tested twice at each of the six cities. Results of the study indicate:

1. A total of 121 abusive adults and 150 abused children in six cities began the program. Of this group 79% of the adults (95) and 83% of the children (125) voluntarily completed the program, a rate significantly higher (p<.01) that the retention rates of participants in similar programs.

2. Test results indicated that abusive parents learned and used alternatives to corporal punishment such as praise and time-out; demonstrated empathy towards their children by recognizing and accepting their children’s feelings and needs; increased their own self-awareness and self-concept as men and women; and learned age-appropriate expectations of their children.

   Data also indicate abusive parents gained (p<.05) in self-awareness, became less inhibited, and decreased their anxiety.

3. Abused children showed a significant (p<.05) increase in self-awareness, assertiveness, enthusiasm and tough poise while decreasing their beliefs in using corporal punishment as a means of punishment.

4. Families demonstrated a significant (p<.05) increase in cohesion, communication, and organization, while showing a significant decrease in family conflict.

5. Information gathered from a year-long follow up of abusive families completing the program shows 42% of the families are no longer receiving services from County Departments of Social Services for child abuse and neglect. Recidivism was only 7%; that is, only 7 of the 95 adults completing the program had been charged with additional counts of child abuse and neglect, a significantly lower rate (p<.01) of re-abuse in comparison to national re-abuse rates.

83
6. Parents overwhelmingly reported that the program did a lot to help them learn new and more appropriate ways to raise children.

**Nurturing the Families of Hawaii**

- First of two studies on prevention 2005-08.
- 152 twelve session programs were implemented statewide.
- 1443 families participated in the twelve session program.
- 53% of the families completed all 12 sessions.
- AAPI posttest scores indicated significant gains in all five constructs.
- Posttest scores of families completing the program were significantly higher than the pretest scores of families who dropped out.

- Second of two studies on prevention FY 2007-09
- Forty-four 12 session programs were implemented statewide.
- 356 families participated in a twelve session program.
- 62% completed all 12 sessions.
- AAPI scores indicated significant posttest mean scores in all five constructs.
- Parents who completed all 12 sessions had higher AAPI pretest scores than parents who dropped out.
- NSCS scores showed a significant increase in the use of nurturing parenting practices.

**State of Florida Study**

- From 1999 to 2004 116 agencies throughout Florida participated in the study.
- 22 agencies implemented the NPP totaling 9,147 matched pairs of data.
- Of the remaining 94 agencies, 66 indicated they did not use a specific curriculum; 28 used another published program.
- A total of 33,001 AAPI’s were administered; 11,061 were matched cases.
- Parents completing the NPP Birth to Five and School Age programs had significantly.
- (p <.001) higher posttest mean scores than parent scores in all the other programs.

**Nurturing the Families of Louisiana**

1. Nurturing the Families of Louisiana Hodnett, Faulk & Maher.

2. State wide program in 2006-07 of NP 16 session group and home based program targeting families in Child Welfare.

3. Ten community-based service providers across the state of LA implemented the program.

4. 564 families were referred by OCS.
   - Overall retention rate was 70% much higher than other programs in child welfare system.
   - Significant and positive improvements in all five AAPI-2 constructs moving from high risk to low risk.
5. Dosage mattered. Parents with high rates of attendance (14 of 16 sessions) had odds of maltreating 73% lower than parents with lower rates of attendance.

6. In summary, the direct costs of delivering NPP statewide to all families referred to parenting education is almost equivalent to the savings realized from significant and associated reductions in repeat maltreatment incidences. The annual savings to cost ratio is $235,906 to 238,111, which equals 0.99. In other words, in purely economic terms, with the data we had available, statewide delivery of NPP is cost neutral from the short-term perspective of the child welfare department.

Nurturing the Families of North Dakota
Results of 2010-11 implementation of the Nurturing Program reported by Amy Tichy and Sean Brotherson, Ph.D., 2012:

1. Nearly 70% of the individuals who participated in the intensive 4-month program completed the classes. Findings represent a substantial record of participation.

2. Demographics indicate 77% women; cluster in age between 20 to 40 years; typically average 2 children; are predominantly White (63%) and Native American (31%); earn less than $25,000 per year; and 2 in 5 experienced some type of abuse within the family growing up.

3. Pre-post AAPI findings indicate moderate to substantial positive increases in all parenting constructs.

4. Significant changes occurred in:
   - Construct B: Empathy towards children’s needs;
   - Construct C: Increased belief in the use of alternatives to corporal punishment;
   - Construct A: Expressing more appropriate expectations of children.

5. Each of the parental constructs showed a decrease in the percentage of scores that fell in the high risk range.

Implementation of the Nurturing Programs for Hispanic Families in Imperial County, CA
From the fall of 2009 to the fall of 2012, Imperial County Board of Education implemented three different Nurturing parenting programs:

The Nurturing Parenting Program (NPP) for Parents and their Infants, Toddlers and Preschoolers, a 15 to 20 session group and home based program.

NPP for Parents and their School-Age Children, a 15 session group-based program.

NPP for Parents and their Adolescents, a 12 session group-based program.
   - These three programs were implemented a combined total of sixty-three times. Eight hundred and twenty-seven (827) families, 95% Hispanic, participated in approximately 1,014 group-based and home based parenting classes. With each
class running approximately 2.5 hours, 2,535 hours of parenting instruction was provided families of Imperial County.

- Posttest mean scores for the Adult-Adolescent Parenting Inventory (AAPI-2) all show positive increases compared to the pretest mean scores in each of the five sub-scales (Constructs).
- Three of the five AAPI Constructs displayed the biggest gains made by the parents’ pre to posttest mean scores. The Constructs were B (Empathy), Construct C (Alternatives to Physical Punishment), and Construct E (Power and Independence).
- The single largest gain was made in Construct B: Empathy where the mean posttest score showed a significant positive gain (p>.001). The second and third largest gains were in Alternatives to Physical Punishment (p>.01) and Power and Independence (p>.05).
- Posttest data analysis measured a substantial drop in all five AAPI-2 posttest mean scores out of the high-risk range. Construct B: Empathy had an 18% drop in high risk scores. That is, the percentage of parents expressing high-risk parenting beliefs in Empathy at the pretest level was 23%. The posttest level was 5%.
- Construct C: Physical Punishment had the second biggest drop in the percentage of posttest mean scores from the high-risk 1 to 3 sten range. These differences were measured from a 14% pretest rate to a posttest 5.64% posttest rate representing an 8% difference.
- The results show the successes that Imperial County achieved through their systematic efforts. Over 800 Hispanic families completed parenting education classes without being ordered by the courts to attend. This remarkable achievement challenges the widely held myth that parents won’t attend parenting classes because of some stigma that parenting classes are only for families with problems.

**Web-Based Resources**
Validation studies since 1985 support the Nurturing Program’s positive findings in treating and preventing the recurrence of child abuse and neglect. Go to: www.nurturingparenting.com.

**Notes:**
Resource Chapter 9:  
Facilitating Children’s Groups

Children’s Component Information

Compiled and Edited by Valerie Gemanis,  
Nationally Recognized Nurturing Program Trainer/Consultant

This is a collection of thoughts, ideas, and suggestions from The Nurturing Parenting Programs’ Trainer/Consultants who are experienced in facilitating the children’s component.

(Thank you to Charlotte L. Collins, Denise Hodges, Vicki Lunghorfer, Leigh McManus, Stacy Randell, and Michele Tryon for their contributions and freely sharing their knowledge and experience.)
Facilitators:
Facilitators must have a complete grasp of the Nurturing Parenting Program fundamentals and its philosophy. Training is not necessarily enough. Children's facilitators (and all facilitators actually) need to be nurturing but firm and consistent. If outside people are hired, it can be difficult to find facilitators who are able to both facilitate their groups and also use the techniques being taught to the parents. Issues of minimum wage and the follow-through of volunteers’ arise. Sometimes college students work out well (open minded and willing to learn), but they may only be available for a semester. Involving teen volunteers as role models can work very well.

Everyone should be encouraged to think of the children's program as being as important as the parents’ program—it is not the secondary job.

The importance of well-trained children’s facilitators and their support can be underestimated and is key to the well-being of the children and the facilitators. Facilitators need to feel effective and be able to model for families the importance of nurturing responses to the challenging behaviors of the children.

Agencies addressed some of these issues by having a team meeting after each class which included discussions of appropriate ways to handle situations arising in class. One agency requires their children’s facilitators to 1) take the program as a participant (so they can see what parents are learning), 2) attend the same facilitator training as the adult facilitators, and 3) co-facilitate with a seasoned children’s facilitator for practical experience.

Behavioral issues will always be a challenge, and facilitators have to be trusted and able to handle them appropriately. If someone is trained but you feel uncomfortable using them, then don't use him/her or make sure there is good supervision initially to get them started on the right path via role modeling.

Regarding behavior problems...patience, patience, patience! The child is behaving the only way they know how. Always refer to the basics of the curriculum. What does it tell the parent to do for this behavior? Behavior problems need to be discussed with the parent's facilitator, so they can be addressed with the parent. The parent may not be following through at home. Hopefully what these children learn will be carried on with them as they grow older.

Remind facilitators who are starting a new class series that the first three to four sessions can be difficult because the facilitators are getting to know the group and the children are getting used to the class. Hold on and be patient. It is rare that a child does not start to positively respond after the first few sessions when they have learned the class routine and are enjoying the nurturing and the praise they receive. About then, both parents and children start to settle in.

Children’s Activities:
Craft type projects or activities are always popular. Games are great too. Be ready to add more activities to keep children busy. Activities can be updated and changed. One agency found it helpful to get an extra book on children’s activities. Another suggested having a "bag of tricks" - a brown bag with several fun games, activities or songs written on index cards in it—the
children can pick one whenever you are looking for extra things to do.

Remember the importance of process over product. It does not matter what the end product looks like when a child is working on arts and/or crafts. What matters is that they have enjoyed the process of creating and expressing themselves. While they are working, it is a great time to reinforce concepts and to ask open ended questions.

Another agency recommended incorporating an art/craft activity into the lesson because it increases the children’s attention span for the topic. Or they talk about the weekly topic for a bit and then do the activity recapping the topic.

For transitions from one activity to another or to help children stop, think and calm down if they are getting rambunctious, it was found to be very helpful to use a "cue" like chimes or turning the lights off and on.

If the attention of the group wanders or the children seem restless, take a “Wiggle Break”—where all the children stand in place and wiggle, and wiggle, and wiggle some more! Children are delighted to have a chance to discharge their pent up energy (and feelings).

Before starting circle time, one suggestion was to have assigned places so children feel a sense of belonging. It can become clear, as time goes on, who might or might not do well sitting next to each other. You can assign places with masking tape on the floor with names written on them or use carpet squares with masking tape. It’s a wonderful way to have structure without being punitive. Children with behavior challenges can be placed next to facilitators or helpers.

**DO:**

1. Develop a routine for the class before starting class (as time goes on, you are modeling how important routines are). Some examples are: Everyone puts their sticker on the attendance chart and sits down; all snacks are eaten at the table; let parents know they need to take child to bathroom/or change the child before signing them in so that this, hopefully, will not need to be done soon.

2. At the first class, involve the children in helping with a list of class “Rules & Consequences” and keep them on a poster or flip chart to review at each session.

3. Stick to the rules.

4. Have space for the children to play games and do activities.

5. Plan ahead for supplies.

6. Keep the parent’s group on track for time (sometimes the parents were continuing to talk while the children and children’s facilitators were ready to call it a night).

7. Follow the curriculum, but also be flexible in order to respond to group needs.

8. Make it fun!
DON'T

1. Don’t allow siblings to mistreat or speak for each other.
2. Don't skip family nurturing time. It is a critical piece. (One agency leaves it to the very end to send the family home on a positive note.)
3. Don't force the children to participate.
4. Don't lecture the children or expect them to sit still all the time.
5. Don't be afraid to tackle the tougher topics because of adult discomfort.

Have fun and let your inner child play!

Division of Children / Number of Children:
An ideal example: In the 5-11 program, there is a curriculum for the 5-8 year-olds and 9-12 year-olds olds (plus child care for younger sibling’s birth to 4). Each age group has its own room, curriculum, and two facilitators. One agency had an extra “floater” to help when and where needed. Agencies may not have the funds to have two fully qualified facilitators in a children’s class, however, one facilitator can give direction to a couple of helpers.

Many variables influence the number of children in a group:

- How experienced are the facilitators?
- How many children’s facilitators or volunteers are available?
- Ages of the children? Infants and toddlers?
- What are the home day care ratios in your state? Though the children are only in their group for a couple hours, it will give ratios to consider.
- What is the size of the room?
- Safety issues should be considered and making sure if a facilitator is absent there are still enough hands to provide care.

Older school-aged children can be recruited as "assistants" who can help with their self-image and they don’t mind participating as much. They can set out snacks, help younger ones with activities, etc. While they are helping they are also hearing what is taught.

Extra help is needed with behavior problems. There should be a minimum of two facilitators so one can leave the room, if necessary, with a child with behavior issues. The first tactic would be to keep the child in the room with a one-on-one style, but sometimes it is necessary for a "timeout" outside of the room so the other children can still benefit from the curriculum without ongoing disturbance.

One agency found that there were usually more younger children than older children in any given group. The younger ones try to do what the older ones do. If the older ones are cooperative to the idea of helping, it can be a great combination. Another agency recommends no more than eight children in the 5-8 year-old group and eight to ten children in the 9-12 year-
old group. The use of teen volunteers can work well; the younger kids seem to enjoy them because they are “cool.”

**Breaks, Snacks, Parent-Child Contact:**
Each class has its own “personality.” Facilitators need to be creative in handling the difficulties that arise—something that works with one class may not work with a different class.

One agency had to be strict with a rule that no one bring food to class especially with peanut and other allergies out there as well as possible hygiene issues. They provided all of the snacks after surveying parents on health and allergy issues with their children.

Another agency made a rule for parents that they not go "visit" their child(ren) if they went out to take a non-formal bathroom break as this often disrupted the flow of the class and triggered acting-out behaviors in some children. Also this can present a problem if some parents have orders of protection against them and cannot have unsupervised contact with their children.

Having a meal at the beginning of group time and then breaking out into age groups can help younger children who have a harder time going back into the group setting if there is a break in the middle of the session. One facilitator found it best to have a quick break halfway through without parents coming in and then having Family Nurturing Time (with everyone) at the end of class. The children really like the family time, the song, etc. One agency ended up doing just a few songs that the kids really liked rather than changing songs so often. Following the lesson’s format and the closing song helps the children get into the routine. In the beginning, there may be issues with children who have difficulty separating from parents. (Going back to groups is usually the hardest for the birth to four-year-olds in child care.) One facilitator places pre-cut, laminated footprint prints on the floor between the children’s room and the parent’s room. This way the children always feel like they could "find their way back". It seems to give a great sense of security.

One agency does a pizza dinner half way through class with a family fun activity after eating. The biggest challenge is eating in a hurry and getting all parents to participate. For them it was very important for all facilitators and volunteers to role model participation and to set up expectations with the parents on the first night of the group, i.e. this is not the time for a smoke break. Facilitators should explain the process to children, and they generally adapt very well to the structure.

**Participant Insights (Parents & Children):**
Children in the all age groups who have come with inappropriate behaviors have made great strides in learning to control their behaviors with much nurturing, hugs, and praise from staff. Parents who see this are greatly encouraged and know that the information they are learning can work.

Teens are provided with a warm and trusting environment and feel comfortable disclosing personal situations in their lives. They and their parents learn how to communicate and negotiate in a safe environment.

All children love nurturing and praise. They really warm up to this from facilitators. A number of times parents have told facilitators that they might have skipped class or stayed home that
night, but the children wanted to come!

A high point for one facilitator was to be able to teach children that they do have a voice and a vote in their family system and loved teaching them how to use it in such a way that makes a difference. A powerful and recurring theme is that children learn to trust adults, know that they are loved, and that parents make mistakes too and can be forgiven.

Parents frequently share that their children respond well to Choices & Consequences and Praise. (Parents seem to love Choices & Consequences the most.) They also report that their children grasp the Personal Power concept and that they occasionally tell parents that they (the parents) are not using their personal power well themselves!

Examples:
- A young child was able to share his “anger mask” with his mother when she became angry.
- A daughter reminded her dad that it wasn’t nice to make fun of other people.
- A child was able to finally stay in with the children’s group without having a total meltdown.

Notes:
Appendix A:
Finding Your ACE Score
Finding Your ACE Score Questionnaire

While you were growing up, during your first 18 years of life:

1. Did a parent or other adult in the household **often or very often** ...
   ...swear at you, insult you, put you down, or humiliate you, or,
   ...act in a way that makes you afraid that you might be physically hurt?
   
   Yes   No   If yes, enter 1 ________

2. Did a parent or other adult in the household **often or very often** ...
   ...push, grab, slap or throw something at you, or,
   ...ever hit you so hard that you had marks or were injured
   
   Yes   No   If yes, enter 1 ________

3. Did an adult or a person at least 5 years older than you **ever** ...
   ...touch or fondle you or have you touch their body in a sexual way, or,
   ...attempt or actually have oral, anal, or vaginal intercourse with you?
   
   Yes   No   If yes, enter 1 ________

4. Did you **often or very often feel** that ...
   ...no one in your family loved you or thought you were important or special, or,
   ...your family didn’t look out for each other, feel close to each other, or support each other?
   
   Yes   No   If yes, enter 1 ________

5. Did you **often or very often feel** that ...
   ...you didn’t have enough to eat, had to wear dirty clothes, and had no one to protect you, or,
   ...your parents were too drunk or high to take care of you or take you to the doctor if you needed it?
   
   Yes   No   If yes, enter 1 ________

6. Were your parents ever separated or divorced?
   
   Yes   No   If yes, enter 1 ________

7. Was your mother or stepmother...
   ...**often or very often** pushed, grabbed, slapped or had something thrown at her, or,
   ...**sometimes, often or very often** kicked, bitten, hit with a fist, or hit with something hard, or,
   ...ever repeatedly hit at least a few minutes or threatened with a gun or knife?
   
   Yes   No   If yes, enter 1 ________

8. Did you live with anyone who was a problem drinker or alcoholic or who used street drugs?
   
   Yes   No   If yes, enter 1 ________

9. Was a household member depressed or mentally ill, or did a household member attempt suicide?
   
   Yes   No   If yes, enter 1 ________

10. Did a household member go to prison?
    
    Yes   No   If yes, enter 1 ________

Add up your “YES” answers: _________ This is your ACE Score.
Appendix B: “Meeting our Needs” Activity
Chapter 13

Meeting Our Needs and the Needs of Our Children

Needs are the SPICES of Life

Social Needs
The need for friendship, for companionship.

Physical Needs
The need for sleep, for food, for exercise.

Intellectual Needs
The need for intellectual stimulation, for thinking new thoughts, for reading challenging books, for learning something new.

Creative Needs
The need to make something, to dance, to write a poem, to create something.

Emotional Needs
The need for love, for praise, for feeling worthwhile.

Spiritual Needs
The need to know that we are part of something bigger than ourselves and that we can increase our awareness of and sensitivity to it.

GOAL: To increase parents’ awareness of needs and behavior payoff.
“Getting My Needs Met” Exercise

Needs are daily demands, not periodically, occasionally or semi-annually. A day without your basic physical needs met can get one in a desperate straight. Actually, any and all categories of needs going unmet can generate a sense of desperation and people in desperate situations make desperate choices. One way to avoid having to make desperate choices as a way of life is to develop a plan to get your needs met.

Step 1: In the space provided, write down two ways you currently are getting your needs met in each of the six categories.

Step 2: Rate each need area on a value scale of 1 (low) to 5 (high). That is, how high or low is the value of each of the need categories.

Step 3: Rate each need area on a frequency scale of 1 (infrequent) to 5 (consistent). Your ratings should reflect how often you do something to get your needs met.

Step 4: When completed, review the need areas. Is your value rating higher or lower than your practice rating? Why the difference? Maybe you want to increase your activities in areas where practice is lower than value. Take the information generated from this exercise and make a plan.

Example:

Value: (low) 1 2 3 4 5 (high)
Practice: (infrequent) 1 2 3 4 5 (frequent)

1. Social Needs:

a. ____________________________

b. ____________________________

Value: 1 2 3 4 5
Practice: 1 2 3 4 5

2. Physical Needs:

a. ____________________________

b. ____________________________

Value: 1 2 3 4 5
Practice: 1 2 3 4 5

3. Intellectual Needs:

a. ____________________________

b. ____________________________

Value: 1 2 3 4 5
Practice: 1 2 3 4 5

4. Creative Needs:

a. ____________________________

b. ____________________________

Value: 1 2 3 4 5
Practice: 1 2 3 4 5

5. Emotional Needs:

a. ____________________________

b. ____________________________

Value: 1 2 3 4 5
Practice: 1 2 3 4 5

6. Spiritual Needs:

a. ____________________________

b. ____________________________

Value: 1 2 3 4 5
Practice: 1 2 3 4 5

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Appendix C:

Sample Home Based or Individual Lessons from the Nurturing Program for Parents and their Infants, Toddlers and Preschoolers
SAMPLE LESSON 24

Developing Family Rules
Construct C: Discipline

Lesson Description:
This lesson is designed to increase parent's competence in creating and implementing a set of family rules.

Lesson Competencies:
1. Parents can discuss the importance of Family Rules.
2. Parents can establish a list of Family Rules.
3. Parents can implement Family Rules.

Prerequisite Conditions, Knowledge and Skills:
Lesson 21: Understanding Discipline
Lesson 23: Developing Family Morals and Values

Materials needed for Lesson 24:
Parent Handbook or Easy Reader Parent Handbook:
Chapter 22: Family Rules
DVD player
DVD: Nurturing Program for Parents of Infants, Toddlers and Preschoolers,
Part 10 – “Developing Family Rules”
Family Nurturing Plan
Family Nurturing Journal
SAMPLE Lesson 24: Developing Family Rules

Teaching Goal:
To increase parents’ skills in establishing family rules.

Lesson Competencies:
1. Parents can discuss the importance of Family Rules.
2. Parents can establish a list of Family Rules.
3. Parents can implement Family Rules.

Procedures:
1. Welcome the parents to the class. Mention that today’s class will focus on developing family rules.
2. Check in with the parents and see how things are going. Ask parents to share information from their Family Nurturing Journal about changes they’ve seen in themselves, their children, and their families this week.
4. Refer to Chapter 22 in the Parent Handbook or Easy Reader Parent Handbook called, “Developing Family Rules.” Begin by mentioning that family rules are different from “children’s rules.”
   a. Family rules involve everyone in the family making the rules.
   b. Family rules involve DOs and DON'Ts.
   c. Family rules are designed to promote and reinforce cooperative behavior.
   d. Family rules help children learn appropriate behavior through parental modeling.
   e. Ask each parent to respond to the following:

   Two rules that my family had when I was growing up were _____ and _____.

   One thing I learned about rules as a child was _______ because _______.
6. After the DVD, review “How to Establish Family Rules” from the Handbook. Tell parents that they will begin to brainstorm a set of family rules in order to get some practice. Use the following guidelines in creating family rules:
   a. Identify specific behaviors you want children to have.
   b. For every DON'T rule, there needs to be a DO rule, otherwise children won’t know what to do instead.
   c. The absence of a behavior is nothing until it is replaced with another behavior.
   d. It is easier to change behavior from one to another, rather than just drop a behavior.

   Encourage them to brainstorm a list of five to seven family rules.

7. Mention that parents are to make a set of family rules with their children, using the following as guidelines:
   a. Invite everyone around a table.
   b. Have a large piece of paper and marker.
   c. Draw a line down the center and make two columns: label one DOs and one DON'Ts.
   d. Involve children. Ask leading questions such as, “Billy, what rule should we have about putting toys away?” Or, “Martha, what rule should we have about loud music?”

8. The goal is not to “present” these rules to the children, but rather to use these rules as “guidelines” and to get children to come up with a list of DOs and DON'Ts.
Lesson 24

Home Practice Assignment:
Complete the assignment for Lesson 24 in your Family Nurturing Journal.

1. Meet as a family and make a list of rules. When completed, post the rules in an obvious place so parents and children can refer to them when a behavior needs to be performed. “Derek, I need you to follow our family rules and pick up your toys from the play room floor.”
2. Recall a time during your childhood when you were held accountable to some rule and your brothers/sisters or parents were not. What was the rule? How did you feel? What did you do or say?
3. Spend a minimum of 30-45 minutes each day playing, reading, and/or massaging your child(ren).

Family Nurturing Time:
For the next 30 minutes engage parents and their infants, toddlers and/or preschoolers in age-appropriate activities selected from the Nurturing Book for Babies and Children. Model for the parents ways to engage children when necessary. The primary goal is for the parents to take the lead. Encourage the parents to select the activity. If there are children of different ages and abilities, find creative ways to engage all children.

Notes and Suggestions:
Family rules can give parents an opportunity to exert their authority in a nurturing way.

Home Visitor Notes:
Appendix D:

Sample Group Based Lesson from the Nurturing Program for Young Parents and their Families
Session 3

Children’s Brain Development; Adolescence and Teen’s Brain Development; The Male and Female Brain

Constructs A & B: Empathy and Appropriate Expectations

Session 3 Description:
This session is designed to introduce parents to the importance of stimulating children’s brain development. This session also is designed to increase parents’ understanding of teen brain development and the differences in the operational functioning of the male and female brain.

Session 3 Competencies:
1. Parents increase their understanding that children’s brains are shaped in the manner in which they are treated growing up.
2. Parents describe the importance of the “critical windows of brain development.”
3. Parents can describe three facts about the development of teen brains.
4. Parents can describe some of the differences between male and female brain functioning.

Prerequisite Conditions, Knowledge and Skills:
Session 1: Introductions, Program Description and Positive and Negative Nurturing
Session 2: Being a Teen Parent in my Family; The Seven Principles of Nurturing Parenting

Session 2 Agenda:

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time</th>
<th>Required Materials</th>
</tr>
</thead>
<tbody>
<tr>
<td>3.1 Welcome and Check-In</td>
<td>20 Minutes</td>
<td>Family Nurturing Journals, flip chart, magic markers</td>
</tr>
<tr>
<td>3.2 Children’s Brain Development</td>
<td>50 Minutes</td>
<td>Parent Handbook Chapter 4: Children’s Brain Development; flip chart, magic markers</td>
</tr>
<tr>
<td>3.3 Family Nurturing Time: In and Out the Window</td>
<td>20 Minutes</td>
<td>Snacks and beverages</td>
</tr>
<tr>
<td>3.4 Adolescence and Teen’s Brain Development</td>
<td>20 Minutes</td>
<td>Parent Handbook Chapter 5: Teen’s Brain Development, flip chart, magic markers</td>
</tr>
<tr>
<td>3.5 The Male and Female Brain</td>
<td>25 Minutes</td>
<td>Parent Handbook Chapter 6: The Male and Female Brain, flip chart, magic markers</td>
</tr>
</tbody>
</table>
Activity 3.1 Welcome and Check-In
Time 20 Minutes
Constructs Self-Awareness and Empathy
Materials Family Nurturing Journals, flip chart, magic markers

Teaching Goal:
To welcome the teens to session 3 and to encourage them to share their successes and attempts with the Home Practice Assignment.

Procedures:
Note: Prior to beginning the session, post the Session Competencies on the flip chart to review during this activity. The competencies are found on the previous page.

1. Welcome the teens to Session 3. Demonstrate your pleasure in their arriving on time and being ready to learn.

2. Begin by checking in with the class members. Review what's been happening with them since the last meeting. Ask them to describe any changes they've noticed in themselves, children or family.

3. After reviewing the competency ratings from last session, explain to the teen parents what you discovered. Did some in the class indicate they didn't learn certain competencies? Explain to the class what you found and what actions you are taking this session.

4. Review the last session's Home Practice Assignment. The assignment is located in the Family Nurturing Journal. Reinforce attempts, problem solve, role play, or review the concepts when necessary.

5. Afterwards, review the competencies for this session. Make sure parents understand the competencies prior to beginning formal instruction.

Notes and Suggestions:
1. Reinforce the teens who have written in their Journal, carried through on playing with their children, and came prepared.

2. There is no doubt of the importance of positive parent-child interactions. When parents read to, play with and touch/massage their children, they are building stronger, healthier brains. The benefits last a lifetime.
Activity 3.2  Children’s Brain Development
Time 50 Minutes
Construct Appropriate Expectations
Materials Parent Handbook Chapter 4: Children’s Brain Development, flip chart, magic markers

Teaching Goal:
To increase parents’ ability to promote healthy brain development in their children.

Procedures:
1. Bring to the session a sense of excitement that today’s topic is so important and that the parents are going to learn some pretty interesting things about how children’s brains develop and ways they can make that development positive.

2. Hand out the information titled, Chapter 4: Children’s Brain Development. This chapter will now become part of the Parent Handbook. Review the following major concepts of the brain.
   a. Children's brains are a work in progress. How they develop depends to a large extent on the experiences they have growing up.
   b. There are prime times called “critical windows” when parts of children’s brains acquire certain skills.
   c. Parents play a major role in affecting the way children’s brains develop by the parenting practices they use, and the way they treat their children.

3. Review the following information:
   The brain is made up of five major parts. Write the following words on the flip chart and review their functions:
   
   **Brainstem.** Responsible for our heart rate, blood pressure, breathing and other bodily functions.
   
   **Cerebellum.** Responsible for balance and movements such as dancing, kicking a ball, etc. and coordination.
   
   **Midbrain.** Responsible for sleep, appetite, and general movement.
   
   **Limbic System.** Responsible for emotions and long-term memories.
   
   **Cortex.** Responsible for hearing, speech, language development, problem solving and other complex “thinking” functions.

4. Mention that by practicing certain behaviors, parents can stimulate these parts of the brain in their child, which will help it grow and function properly.

5. Critical Windows of Development:

   **Vision – Birth to 6 months.** It’s important for children to have things to look at. Brainstorm with the parents things they can do to stimulate a baby’s vision. Afterwards, review the information presented in the handbook for this area.
Activity 3.2 Children’s Brain Development

Vocabulary and Speech – Birth to 3 years. Brainstorm with the parents ways to enhance children’s vocabulary and speech. Afterwards, review the information presented in the handbook for this area.

Emotional Development – Birth to 18 months. Brainstorm with the parents ways to enhance children’s emotional development. Afterwards, review the information presented in the handbook for this area.

Logic and Math – One to 4 years. Brainstorm with the parents ways to enhance children’s logical and mathematical development. Afterwards, review the information presented in the handbook for this area.

6. Review the information presented in the Parent Handbook titled, What Every Child Needs. Stress each of these areas as critical for healthy growth and development.

Notes and Suggestions:

1. Learning is a process. Help parents understand that change takes time and if they stick with it, they will be able to improve their parenting skills and make life better for themselves and their children.

2. Continue to refer to brain development and the healthy growth the brain is making because the parents are using nurturing parenting practices.
Activity 3.3  Family Nurturing Time: In and Out the Window

Time  20 Minutes
Construct  Empathy
Materials  Snacks and Beverages, Family Nurturing Time handout promoting parent-child attachment

Teaching Goal:
To demonstrate ways parents and children learn to bond and enjoy each other through play and good times.

Procedures:

Please note:
- The goal of the activity is to promote nurturing through music and food.
- A great idea is to make this time a cultural awareness time. Celebrate different cultures with their foods, their games, and their music.
- For parents and babies, use the activities in the Nurturing Book for Babies and Children.
- The songs presented during Family Nurturing Time are suggested activities.
- Substitute at will but keep the focus on food, fun and nurturing.

1. Have the food and drink available for parents and children. Have plenty to eat and drink and tables and chairs if possible.

2. Initiate the activity after snacks and beverages have been served. Remember to make the appropriate adjustments to the FNT snack time activity.

3. Request that parents and children stand in a circle to participate in this activity.

4. Ask the group if they know the song, “Go In and Out the Window.” Sing a bit so they know the melody.

5. Choose one person or a parent holding their infant to start the game by walking around the circle, weaving behind and in front of each person as the group sings:

   Go in and out the window, go in and out the window, Go in and out the window, as we have done before.

6. The person stops and stands in front of someone in the circle as the group sing:

   Now stand and face your partner, now stand and face your partner, Now stand and face your partner, as we have done before.

7. The person takes the hands of their partner and they weave in and out of the circle as the group sings:

   Now take them off to London, now take them off to London, Now take them off to London, as we have done before.

8. The game continues with the same two people choosing to more people and so on until everyone has been chosen. Continue to repeat the song until everyone has a turn.

9. Finish the snack activity with the Good-Bye Song. You can locate the song in Activity 1.4.
ACTIVITY 3.4  Teen’s Brain Development

Time 30 Minutes
Construct Developmental Expectations

Teaching Goal:
To increase teens awareness of the influence brain development has on a teen’s behavior.

Procedures:

1. Mention to the teens that for the next 30 minutes the focus will be on the developmental period of adolescence.

2. Distribute Chapter 5: Teen’s Brain Development of the Parent Handbook. Use the information to review the normal aspects of adolescent development.

3. Present the DVD titled “Adolescence: It’s Normal for Teens to Act Weird.”

4. At the end of the third scene, and when instructed, pause the DVD and review the facts presented by playing the “Myth or Fact Game.” Mention that you will read a statement and parents are to respond in one of three ways:

   a. Thumbs up – means parents agree.
   b. Thumbs down – means parents disagree.
   c. Flat hand with palm facing down, slightly waving – means parents are unsure.

   **MYTH OR FACT**

   a. **Teens are going through a period of rapid brain development.** Myth or Fact?

      Fact: New research has discovered that from pre-adolescence through the early 20’s, the brain is undergoing more changes than any other time except immediately after birth. For girls, the growth peaks around the age of 11; for boys, the growth peaks around 12 ½ years of age.

   b. **The biggest change to the brain involves the limbic system, the part of the brain that controls emotions.** Myth or Fact?

      Myth: The biggest changes are occurring in the brain’s prefrontal cortex, located right behind the forehead, which governs “executive” thinking (our ability to use logic, make good decisions and size up potential risks).

   c. **The teen brain is feverishly reshaping itself by “pruning neural connections at the rate of 30,000 per second.”** Myth or Fact?

      Fact: Changes to the logic center of the brain explains why teens sometimes make poor judgments. In moments of high arousal, particularly when teens are with their peers, emotions often override logic. Some examples include:
ACTIVITY 3.4  Adolescence and Teen Brain Development

• Shoplifting even though the teen has money to pay for the item.

• Driving drunk even though the teen knows getting caught will mean a suspension of his license or even the risk of serious injury or death.

d. Teens often have difficulty assessing and responding appropriately to the emotions of others. Myth or Fact?

Fact: Teens read the facial expressions of others differently than adults do. Brain scans show teens have increased activity in the amygdala (the part of the brain that governs gut and impulsive actions). Adults, on the other hand, have been shown to use their more stable frontal cortex which enables them to distinguish between facial expressions.

e. Defiance on the part of a teen is natural. Myth or Fact?

Fact: Many scientists think that teenage defiance has become instinctive. Coupled with a diminished control of logic and a higher influence of impulses, teens are at risk for serious injuries.
  • 78% of high school students have tried alcohol.
  • 5 million admit to binge drinking monthly.
  • The average age a teen begins drinking is 14.
  • One out of five teens has sex before age 15.
  • Teens are a high risk population for AIDS.

f. Teens need no more than 7 hours of sleep to maintain their health. Myth or Fact?

Myth: Scientists have found that teens are in a constant state of sleep deprivation. The average teen needs about 9 1/2 hours of sleep a night and they get about 7. For teens, melatonin (the chemical that governs sleep) kicks in around 10:30 p.m.

g. Teens need to be involved in extracurricular activities. Myth or Fact?

Fact: A lot of free time for teens correlates with early sexual activity, drug use, drinking and delinquency. Sports, clubs, volunteer efforts and after school jobs are good for teens, in moderation.

h. Sex hormones are especially active in the limbic system (the brain’s emotional center). Myth or Fact?

Fact: The relationship between hormones and teen brain development increase the thrill seeking to explore situations where teens allow their passions and emotions to run wild.

6. Turn the DVD back on and review the list of nurturing strategies that are suggested that their parents use to help their teens through their challenging times. Get comments from the group. Are these suggestions that their parents should know?

7. Move on to the next lesson that addresses the differences between male and female brain functioning.

NOTES & SUGGESTIONS
Dispelling myths by presenting facts helps parents understand the behavior and psychology of teens.
Activity 3.5  The Male and Female Brain
Time  20 Minutes
Construct  Expectations and Empathy
Materials  Parent Handbook Chapter 6: The Male and Female Brain, flip chart, magic markers

Teaching Goal:
To increase parents’ awareness of the differences between male and female brains.

Procedures:
1. Draw a line down the center of a sheet of paper, making two columns. Label one column MALE and the other FEMALE. Brainstorm ways in which males and females think, feel and act differently. For example, girls like to talk more; boys like to talk less. Write their responses in the two columns.

2. Mention that the reason for a lot of these behaviors is the difference between the male and female brain. Distribute Chapter 6 for the Parent Handbook titled, “The Male and Female Brain.” Review the information with the group.
   a. The human brain, both male and female, has 27 billion neurons, roughly the number of stars and planets in the Milky Way.
   b. Neurons connect to each other through neural pathways. The more activity that is associated with a certain part of the brain, the more neural connections are made and the stronger they get.
   c. If certain parts of the brain are not used, neural pathways weaken and dry up. The brain is a “use it or lose it” organ.
   d. Male and female brains produce hormones that support brain growth. The male hormone is called testosterone and the female hormones are called estrogen and progesterone. Males and females have both testosterone and estrogen in different quantities.
   e. Between 3 to 6 months in the womb, the baby is being bombarded with different hormones. When there is more testosterone, certain areas of the neocortex grow and become connected. When the developing brain gets bombarded with estrogen and progesterone, certain other areas in the neocortex grow and connect.
   f. If the child in the womb is a chromosomal male child (XY), the mother’s hormonal system reads this as male and sends more testosterone. If the child is a chromosomal female (XX), the mother’s hormonal system sends more female hormones.
   g. In the womb, the child is being sexualized by the hormones it receives as either masculine or feminine.
   h. The brain development of all babies, no matter what their sex, is stimulated by all hormones. All males have some estrogen; all females have some testosterone.
   i. However, male babies get more testosterone and thus a more “male brain” develops while female babies get more estrogen and thus a more “female brain” develops.

3. The development of the male and female brain in the womb can be affected by the stress the mother experiences during pregnancy.
Activity 3.5  The Male and Female Brain

a. Physical abuse, illness, and emotional distress can cause the mother’s stress hormone (which is called cortisol) to cut off some of the normal surges of testosterone or estrogen.

b. It’s possible for a boy to be born with a penis, testicles and other physiological male traits but feel like a female because he received more estrogen than testosterone. The same is true for a girl. A female can have female physiological traits but feel more like a male.

c. Some males report that they feel like a female trapped in a male’s body. Some females feel like a male trapped in a female body.

d. While males and females acquire new neural skills throughout life, the way the brain is set up during pregnancy does not change.

4. Referring to Chapter 6, mention that the parents will take a short true-false quiz titled, “Male and Female Brain Quiz”. After the statement is read, the parents get to respond in one of three ways:
   a. If they agree with the statement, thumbs up.
   b. If they disagree with the statement, thumbs down.
   c. If they’re unsure, they are to wave their hands, palms down.

5. Go back to the responses the parents gave in #1: Brainstorming how male and females are different. Draw parallels between the responses the parents gave and the information presented on male and female brains.

Notes and Suggestions:
Understanding the differences between male and female brains empowers parents to make appropriate, gender-specific developmental expectations of children.
**Activity 3.6**  
**Closing Activity: Home Practice, Evaluation and Praise Circle**  
**Time**  
10 Minutes  
**Constructs**  
Empathy, Self-awareness,  
**Materials**  
Parent Handbooks or Easy Reader Parent Handbooks, Program Evaluation Forms, Family Nurturing Journals

**Teaching Goal:**  
To provide a consistent and supportive closure activity.

**Procedures:**

1. Have the parents locate their assignment for Session 3 in their Family Nurturing Journal. Review their assignments for Session 3.

   **Home Practice Assignment for Session 3**
   1. Read Chapter 4 – Children’s Brain Development, 5 – Teen’s Brain Development and 6 – The Male and Female Brain in your Parent Handbook and complete any written exercises.
   2. Complete the Family Home Practice Assignment:
      - Do something to nurture yourself.
      - Depending on the age of your child, continue doing activities from your parent-child attachment handouts to stimulate your child’s brain development. List five things you tried. What was your child’s response?
      - Spend a minimum of 30-45 minutes each day playing, reading, and/or massaging your child(ren).

2. Hand out a Program Evaluation Form to each parent. Encourage parents to complete the evaluation before they leave.

3. Have the group members all stand in a circle. Explain that each weekly session will end with a closing Praise Circle. Explain that the purpose of the Praise Circle is to honor the group and all the contributions and sharing that occurred. The nurturing praise circle that is formed at the end of each session will become a source of strength and support. At an appropriate time, end the session.

**Notes and Suggestions:**

1. Immediately after the session, rate each parent on each Lesson Competency using the FNP-Group Assessment for Session 3. Do this before reviewing the parents’ ratings from the Session Evaluation Form

2. Transfer the parent’s ratings from the Session Evaluation Form to the FNP-Group Form. Review your ratings and the parents’ ratings. Are their differences in the ratings? Do extra office/home visits need to occur? Don’t forget to put the ratings in the Family Nurturing Plan – Individual Assessments.
Appendix E:

Sample Group Based Lesson from the Nurturing Program for Parents and Adolescents
### Session 3 Agenda

<table>
<thead>
<tr>
<th>Activity</th>
<th>Time</th>
<th>Required Materials</th>
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</thead>
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<td><strong>PARENT PROGRAM SCHEDULE</strong></td>
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<td></td>
</tr>
<tr>
<td>3.1 Welcome &amp; Check-In</td>
<td>20 Minutes</td>
<td>Flip chart, magic markers</td>
</tr>
<tr>
<td>3.2 About Me</td>
<td>50 Minutes</td>
<td>Sheets of white paper, magic markers</td>
</tr>
<tr>
<td><strong>PARENTS &amp; TEENS TOGETHER</strong></td>
<td></td>
<td></td>
</tr>
<tr>
<td>3.3 Family Nurturing Time</td>
<td>20 Minutes</td>
<td>Snacks and beverages</td>
</tr>
<tr>
<td>3.4 Do You Know Me?</td>
<td>75 Minutes</td>
<td>Self-portraits from Activity 3.2, flip chart, magic markers</td>
</tr>
<tr>
<td>3.5 Self-Affirmation Relaxation</td>
<td>10 Minutes</td>
<td>Visualization CD, CD player</td>
</tr>
<tr>
<td>3.6 Home Practice and Praise Circle</td>
<td>5 minutes</td>
<td>Parent and Adolescent Handbooks</td>
</tr>
</tbody>
</table>

**Teens will be learning …**

<table>
<thead>
<tr>
<th>TEEN PROGRAM SCHEDULE</th>
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</tr>
</thead>
<tbody>
<tr>
<td>3.1 Welcome and Check-In</td>
<td>20 Minutes</td>
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</tr>
<tr>
<td>3.2 About Me</td>
<td>50 minutes</td>
<td>Sheets of white paper, magic markers</td>
</tr>
</tbody>
</table>
ACTIVITY 3.1 Welcome and Check-In
TIME 20 Minutes
CONSTRUCT Self-Awareness
MATERIALS Flip chart, magic markers

GOAL To increase parents' self-awareness.

OBJECTIVES

1. To become aware of positive characteristics of self.
2. To become aware of ways to nurture oneself.
3. To reinforce communication skills.

PROCEDURES

1. Welcome the parents to Session 3. Check in with the families' activities and changes that occurred during the week. Review the Home Practice Assignment.

2. Afterwards, ask each parent to respond to the following:

   Right now I am feeling ________________.

   One way I nurture myself is ________________.

   The hardest part of nurturing myself is ________________.

3. Transition the group to the next activity.

NOTES & SUGGESTIONS

1. Thoughts about self should become easier to express. Listen for parents who are having trouble saying something nice about themselves. Reinforce all positive comments regarding self.

2. Explain that the word “nurture” means “to take care of.” “Nurturing self” means to do good things for yourself.

NOTES:
ACTIVITY 3.2  About Me
TIME  50 Minutes
CONSTRUCT  Empathy, Self-Awareness
MATERIALS  Sheets of white paper, magic markers

GOAL  To increase self-awareness of parents through artistic expression.

OBJECTIVES

1. To encourage parents to express themselves through art.
2. To help parents experience their own creativity.
3. To provide parents with reinforcement in expressing self.
4. To encourage parents to share aspects of themselves.

PROCEDURES

1. Assemble parents around tables or in a circle on the floor. Mention that today parents will get a chance to increase their self-awareness by drawing a picture of themselves.

2. Hand out magic markers and large sheets of white paper to each parent. Explain that parents are to draw anything they want that represents their lives or themselves, or their hopes, or everything all together. They can draw a picture; make splotches of color or designs.

3. Join the parents in the activity by drawing your own pictures. Allow the group members 20 minutes to draw their pictures.

4. After 10 minutes or when group members have finished drawing their pictures, ask each parent to describe their picture and respond to the following.

   When I think of myself, the first word that comes to mind is ________________.
   The one thing I like most about me is ________________.
   The one thing I like least about me is ________________.

5. Ensure that each parent gets a chance to talk. Make a mental note of where each parent is.

6. Tell the group that you need to collect these drawings for the after-snack activity. Teens are also drawing pictures of themselves. During snack, all pictures will be taped to the wall and numbered. Parents and teens will get a chance to see if they can recognize their families by their pictures.

NOTES & SUGGESTIONS
Some parents will want further information relative to their painting assignment. Make sure NOT to tell them WHAT to draw, but that they are free to draw any aspect of their lives or themselves.

ACTIVITY 3.3  Family Nurturing Time
TIME  20 Minutes
CONSTRUCT  Empathy
MATERIALS  Snacks and beverages

Provide the group with a 20-minute snack time offering food and drink.
ACTIVITY 3.4  Do You Know Me?
TIME  75 Minutes
CONSTRUCT  Empathy, Self-Awareness
MATERIALS  Self-portraits from Activity 3.2, flip chart, magic markers

GOAL  To continue working on building family cohesion.

OBJECTIVES

1. To increase awareness of family members’ perceptions of other members.
2. To share aspects of self.
3. To reinforce family communication.

PROCEDURES

(Large Group - Time: 10 Minutes)

1. Welcome the teens and parents back to group. Mention that hanging on the wall are two groups of pictures: teen self-portraits and parent self-portraits.

2. Mention that parents and teens are to look at all the drawings and select the ones they feel were drawn by their parents or by their teens. Family members can identify the pictures by the numbers in the lower-right-hand corners.

3. Invite everyone to review the drawings they feel are drawn by their teens or parents.

(Nurturing Groups - Time: 30 minutes)

4. Gather everyone into their small nurturing groups.

5. For the next 30 minutes, group members are to share with their nurturing groups aspects of themselves they believe are unknown by their parents or their teen sons or daughters. Write the following statements on the flip chart and ask the members of each nurturing group to respond. Assign a group facilitator to each nurturing group to process the responses.

   The one most positive aspect of me that my parents (son/daughter) do not know is _____.
   The reason they don’t realize this is because _____.

(Family Groups - Time: 35 Minutes)

6. Ask group members to sit together as families. Assign a group facilitator to each family to process the activity.

7. Ask family members to identify the pictures they thought were drawn by their parents or teens. Keep all the pictures taped to the wall for everyone to view. Ask each family member to respond to each of the following:

   The picture I think you drew is _____________________.
   I feel this picture is you because _____________________.

The response to the second statement should reflect aspects of the picture that are most like those of the parent or teen.
ACTIVITY 3.4  Do You Know Me?  

8. Ask family members to go to the wall, remove the picture that they drew, and bring the picture back to their families. Have each member hold his or her pictures up to the other family members’ and describe the pictures. Ask each to respond to the following:

   This picture is me. It represents_____________.
   What you don't know about me is ___________________.
   I want you to know that my most positive aspect is ___________________.


NOTES & SUGGESTIONS

1. This is a very involved activity but one which highlights the differences among family members and often times the misperceptions, myths and biases.

2. The key to doing the activity is keeping to the time limits and facilitating the small group discussions.

NOTES:
ACTIVITY 3.5 Self-Affirmation Relaxation
TIME 10 Minutes
CONSTRUCT Self-Awareness
MATERIALS Visualization CD, CD player

GOAL To increase positive self-affirmation.

OBJECTIVES
1. To increase positive self-image.
2. To support self-struggle to change.

PROCEDURES
1. Ask families to get comfortable on the floor or in their chairs. Have family members hold hands.

2. Mention that today they are going to do an affirmation. An affirmation can be any positive statement. The practice of doing affirmations allows us to begin replacing some of our stale, worn-out, negative beliefs with more positive ideas and concepts.

3. Tell the parents you are going to give them some simple directions and then begin the CD.

   Relax and close your eyes…
   Take a couple of deep breaths and free your mind for the moment of your worries…
   I am going to read some statements that I would like you to repeat silently to yourself…
   When you are repeating the affirmations, sincerely try to believe and accept what it is you are repeating…

   Let’s begin… (Begin the CD).

   Every day in every way I am becoming a more positive person…
   I am a beautiful being, filled with love and nurturing…
   I am the master of my life…
   Everything I need is already within me…
   I love and appreciate myself just as I am…
   It is okay for me to have fun and enjoy myself – and I do…
   The more I love myself, the more love I have to give others…
   I deserve to live in a happy, healthy, loving family…

   When you are ready, open your eyes and realize where you are and with whom.

NOTES & SUGGESTIONS

If you are not using the CD, read the statements slowly and deliberately. Leave plenty of time between the statements for members to silently repeat to themselves each line that you have read.
ACTIVITY 3.6  Home Practice and Praise Circle
TIME  5 Minutes
CONSTRUCT  Empathy, Self-Awareness
MATERIALS  Parent & Adolescent Handbooks

GOAL  To increase family bonds through communication.

OBJECTIVES

1.  To build family cohesion.
2.  To reinforce family communication.
3.  To increase self-awareness.

PROCEDURES

1.  Instruct families to locate their Home Practice Assignment on Page 12 in the Parent Handbook and on Page 11 in the Adolescent Handbook. Review the Assignment with them:

   **Home Practice Assignment**

   1)  During Family Home Nurturing Time, take turns responding to the following statements:

   The image I think this family has of me is ________________.
   I guess the reason you have this image of me is because ________________.
   The image I would like to portray is ________________.

2)  Discuss the changes going on in the family.

3)  End the discussion with a family hug. Let everyone make physical contact in a way that is safe.

4)  During the week:

   a.  Notice something positive about each family member and offer praise.

   b.  Eat dinner together or go for a walk as a family.

2.  Get the large group to form a circle and close the session with a Praise Circle. Have everyone hold hands. Allow members to say anything they wish. As facilitators, offer praise to the group members for trying hard, for their attendance, for sharing. You may choose to review the painting exercise.

NOTES & SUGGESTIONS

1.  Make it a practice that is never lost of forgotten: Praise the Nurturing Group members, the large group, and the families.

2.  If some families or family members were not present for the session, call or do a home visit to get them back. Don’t let them get away from you that easily. Bring them back!

3.  It would be a nice surprise to send a short thank-you note to each family for attending. In the note, tell them you are happy they are attending, happy to get to know them, grateful for sharing, and look forward to seeing them next session. Go out of your way to keep them attending.

4.  Ask for volunteers to bring snacks for next session.