Indiana Early Learning Foundations

Physical Health and Growth Guidance

Indiana Department of Education
Introduction

Families, caregivers, and early educators all work together to help children grow and learn. This guidance is intended to be a resource for educators to support and enhance children’s learning and development while using the Foundations, Indiana’s Early Learning Development Framework. While this is not an exhaustive list, this guidance is meant to serve as a suggestion for practice from birth to age five, including the transition into kindergarten. It can be used to support a child’s development at different levels of learning and promotes fluid movement between developmental stages. The Foundations are not intended to be a curriculum, but what children should know and be able to do throughout developmental stages. Curricula is content that children should learn and methods to teach the content whereas lesson plans are intended to demonstrate how the content is conveyed to children. This guidance is a resource for educators to use while developing an intentional lesson plan.

Looking Ahead to Kindergarten

High quality early experiences help a child become ready for kindergarten and beyond. The Foundations show early educators the developmental progression that typically developing young children should experience as they grow toward kindergarten readiness. In 2014, Indiana’s Early Learning Advisory Committee approved the following definition of kindergarten readiness: “In Indiana, we work together so that every child can develop to his or her fullest potential socially, emotionally, physically, cognitively, and academically. Through growth in all of these domains, the child will become a healthy, capable, competent, and powerful learner.”

Family Engagement

Research shows that family engagement is a strong predictor of children's development, wellness, educational attainment, and success later in school and life. Children develop in the context of their environments, which includes family, culture, and community. We know that families are their child’s primary and most important educator. Early educators can use the Family Engagement sections and the Powerful Practices throughout this guidance for strategies that they can encourage family members to use at home. We encourage early educators and early childhood program administrators to also be aware of local and state supports available to vulnerable populations including (but not limited to): 2-1-1 Hotline, shelters, food pantries, WIC offices, and community centers.

Special Populations

The Indiana Core Knowledge and Competencies encourage educators to see children as unique individuals within a family and community and to be sensitive to individual developmental needs. This guidance supports special populations including dual language (DLL), exceptional, and high ability learners; however, many of the recommended strategies are appropriate and beneficial to all children. It’s encouraged that educators use a flexible approach when designing curriculum and keep the needs of all children in mind. The use of the Universal Design for Learning (UDL) provides a blueprint for creating instructional goals, methods, materials, and assessments that work for everyone (See Appendix B for additional information).

Additionally, with family/parental consent, we encourage educators to engage and collaborate with other professionals in closely related sectors supporting the child and family to further inform and align services. This could include professionals from education, health, and social services (e.g. First Steps/Early intervention, public schools, therapists, and physicians).
PHG1.1: Demonstrate development of healthy practices

Health and education are closely intertwined. The development of healthy practices lay the foundation for independence in personal care and long term success. When children and adults are healthy, they’re more engaged in learning and in life. For young children, educators play a significant role in modeling and inspiring a lifelong commitment to health and all dimensions of wellness.

Looking Ahead to Kindergarten

In kindergarten, students will begin to identify that healthy behaviors affect personal health (Health 2.1.1) as well as identifying their personal health decisions (Health 2.5.1). Students will also recognize that physical activity is important for health (PE K.5.1.A). Students will also begin to recognize the dimensions of health including emotional, intellectual, physical and social health (Health 2.1.2). Lastly, students will begin to understand ways to prevent communicable diseases (Health 2.1.3).

Family Engagement

Encourage families to:

- Promote healthy hygiene practices at home (e.g. “Let’s brush our teeth before bed!” or “Let’s wash our hands before dinner!”).
- Promote physical health and wellness by incorporating physical activity into daily routines and schedules (e.g. going for a family walk after dinner).
- Be aware of developmental milestones and what to watch for (e.g. using the CDC’s “Learn the Signs. Act Early.” app and resources).

Special Populations

Educators can:

- Provide opportunities and materials that are accessible to all children (e.g. ensuring the dramatic play center is accessible to children with varying mobility).
- Use visual supports to promote healthy practices (e.g. labeling the environment in multiple languages).
- Consider learning simple words and phrases in a child’s native language or in sign language.
- Collaborate with other service providers when appropriate and with familial consent (e.g. implementing activities recommended by a child’s OT/PT/Developmental Therapist).

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1 See Appendices A&B for additional information on how to support Special Populations
Powerful Practices
Examples of ways adults can support young learners’ development of healthy practices:

**PHG1.1: Demonstrate development of healthy practices**
Across all developmental stages, educators can:

- Limit screen time for young children and follow appropriate guidelines and regulations.\(^2\)
- Provide opportunities and materials for children to participate in healthy practices (e.g. bath tubs and baby dolls in the dramatic play center, etc.).
- Provide opportunities and materials for children to engage in play related to healthy practices (e.g. healthy food options in dramatic play area, baby dolls to change diapers, etc.).
- Prompt and praise handwashing and other hygiene activities, providing supervision and support when needed.
- Actively participate with children in all play opportunities (e.g. run alongside children outside, engage in dramatic play, etc.).
- Ensure children have 3-5 hours daily of opportunities to engage in movement or play.\(^3\)
- Model physical activity and hygiene-related practices (e.g. coughing and sneezing into elbow).
- Use visual supports to promote healthy practices (e.g. visuals for hand washing, coughing, etc.).

### Table: PHG1.1: Demonstrate development of healthy practices

<table>
<thead>
<tr>
<th>Infant</th>
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<tr>
<td>Actively engage with infant during tummy time, increasing duration and frequency with muscular development.</td>
<td>Model personal health practices (e.g. wash your hands alongside the children, describing each step in the process)</td>
<td>Use vocabulary to describe symptoms of illness and wellness</td>
<td>Encourage child to identify symptoms of illness and wellness</td>
<td>Foster conversations with children about healthy living and prevention (e.g. hair care, bathing, brushing teeth, etc.)</td>
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<tr>
<td>During routine care, use “play by play” announcing (e.g. “Let’s change your diaper! You pooped!”)</td>
<td>Talk to children about the importance of sleep/rest and provide opportunities for rest and calming areas/activities</td>
<td>Provide materials that encourage imitation of healthy practices (e.g. doctor kits, bandages, vision charts, model of teeth with large toothbrush)</td>
<td>Provide materials for dramatic play that engage children in the roles of medical professionals</td>
<td>Provide materials for dramatic play that engage children in the roles of medical professionals</td>
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<tr>
<td>Model personal health practices (e.g. wash your hands with children, describing each step in the process)</td>
<td>Provide materials for children to model routine care (e.g. bath tub for baby dolls, etc.)</td>
<td>Talk to children about the importance of sleep/rest and provide opportunities for rest and calming areas/activities</td>
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<tr>
<td>Incorporate oral hygiene activities (e.g. using finger toothbrushes to wipe out mouths)</td>
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<tr>
<td>Provide materials for children to model routine care (e.g. bath tub for baby dolls, etc.)</td>
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PHG1.2: Demonstrate development of safety practices

Keeping young children safe in early learning environments is a top priority. The development of safety practices helps to not only prevent accidents and injury, but also helps to create an environment where children feel safe and secure. In safe environments, children feel more comfortable and are more likely to learn, try new skills, and take appropriate risks. Ensuring the development of implementing safety practices is the basis for following guidelines and rules related to school, home, and workplace safety.

Looking Ahead to Kindergarten

Throughout kindergarten, students will begin to understand ways to prevent injuries (Health 2.1.4) and consider behaviors to avoid or reduce health and safety risks (Health 2.7.2). Students will also work towards following instructions when prompted (PE K.4.2.A), sharing equipment and space with others (PE K.4.3.A), and recognizing established protocols for class activities (PE K.4.4.A). Lastly, students will follow teacher directions for safe participation and the proper use of equipment (PE K.4.5.A).

Family Engagement

Encourage families to:

- Check that children are in the appropriate car seat or booster seat (e.g. seeking out car seat checks in their local community).
- Talk to their children about the importance of safety (e.g. holding hands in the parking lot).
- Create a family emergency exit plan for their home and practice those plans regularly.
- Create a family safety procedure for severe weather and practice those plans regularly.

Special Populations

Educators can:

- Consider children with limited mobility during emergency procedures and evacuation plans.
- Collaborate with families and other service providers (with parental/familial consent) to develop safety procedures.
- Use visual supports for emergency procedures.
- Provide social stories for emergency procedures.
- For DLL, learn simple words and phrases related to emergency situations in the child’s native language or sign language.

4 See Appendices A&B for additional information on how to support Special Populations
 Powerful Practices
Examples of ways adults can support young learners’ ability to demonstrate development of safety practices:

**PHG1.2: Demonstrate development of safety practices**
Across all developmental stages, educators can:

- Set up and continuously monitor environment to ensure child’s physical safety (safe sleep, storage of hazardous materials, broken toys or materials, etc.).
- Respond calmly and sympathetically to any injuries or accidents that occur and administer first aid as needed.\(^5\)
- Establish reasonable boundaries for risk taking in indoor and outdoor environments based on the age and skill levels of child (e.g. climbing, jumping, cutting, etc.).
- Respectfully prepare children in changes in the environment including transitions, staff changes, environmental changes, and routine changes by providing visual and verbal cues and including children in the process.
- Talk with children about safety drills and procedures in a non threatening way.
- Be aware of and practice your program’s safety drills and procedures\(^6\).
- Provide consistent routines and staffing patterns (when possible) and acknowledge changes (e.g. “Ms. Joy isn’t feeling well today. Ms Abby is going to be with our class today!”).
- Communicate expectations around safety in a positive manner by stating the desired behavior (e.g. “Use your walking feet” instead of “Don’t run!”).
- Engage with community partners to provide resources and supports for families (e.g. car seat checks, local food banks, organizations that provide safe sleep materials, etc.).

<table>
<thead>
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<tbody>
<tr>
<td>Build an emotional bond with infant to provide security (e.g. holding, rocking, singing, etc.)</td>
<td>Identify and describe dangerous situations</td>
<td>Acknowledge child’s recognition of danger</td>
<td>Facilitate conversations around real and perceived dangers (e.g. inviting a firefighter or police offer as a guest speaker)</td>
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</tr>
<tr>
<td>Use emotional talk to support infant when encountering an unfamiliar person or object (e.g. “You are afraid because Mrs. Clark is new to our classroom.”)</td>
<td>Model and practice safety procedures (e.g. cleaning up wet/ dry spills and safety drills)</td>
<td>Plan and facilitate opportunities for child to try new skills (e.g. pouring, jumping off a low platform, and climbing)</td>
<td>Establish safety rules with children</td>
<td>Involve children in the development of safety rules and provide leadership opportunities to practice them</td>
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<td></td>
<td>Provide guidance about avoiding danger (e.g. “Hold my hand while we walk in the parking lot so I can keep you safe.”)</td>
<td>Provide guidance and ask questions about how to avoid danger (e.g. “We’re headed into the parking lot. What do you think you should do before we enter?”)</td>
<td>Facilitate discussion around the safety rules</td>
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PHG1.3: Demonstrate development of nutrition awareness

Young children need the appropriate types and amounts of nutrition to fuel their growth and active nature. **Nutrition awareness** is key for not only preventing childhood obesity but nutrition can also significantly impact learning outcomes.

Nutrition awareness is critical for long term health, and early educators have the opportunity to model and empower children to make healthy decisions. Establishing nutrition awareness will help create positive habits and a healthy relationship with food that will last a lifetime.

Looking Ahead to Kindergarten

In kindergarten, students will be able to recognize that food provides energy for physical activity (PE K.3.6.A) and be able to identify healthy and unhealthy foods (PE K.3.6.B).

Family Engagement

Encourage families to:
- Find nutritional balance that works for their families (e.g. providing healthy and fresh options when possible).
- Create family guidelines for what snacks are, when snacks can be eaten, and discuss what hunger cues feel like.
- Engage children in meal planning for the family (e.g. creating menus, grocery lists, etc.).
- Provide opportunities for children to be a part of the food experience (e.g. gardening, grocery shopping with the child, serving dinner they helped to create, etc.).

Special Populations

Educators can:
- Make it a priority to learn and understand each child’s nutritional needs (e.g. food allergies, sensitivities, trouble swallowing, feeding tubes, etc.) and ensure dignity and respect.
- Encourage children to be as independent as possible, empowering children to make decisions, and provide only as much assistance as necessary.
- Include all children at the table with peers to promote interaction.
- Provide children time and additional supports as needed (e.g. utilizing non-slip mat and no spill bowl/cups to support self-feeding, flexible seating, etc.).

7 See Appendices A&B for additional information on how to support Special Populations
Powerful Practices

Examples of ways adults can support young learners' development of nutrition awareness:

<table>
<thead>
<tr>
<th>PHG1.3 Demonstrate development of nutrition awareness</th>
<th>Across all developmental stages, educators can:</th>
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</thead>
<tbody>
<tr>
<td>- Demonstrate and educate families on healthy nutrition practices for young children.</td>
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<tr>
<td>- Provide materials in the environment that promote nutrition (e.g. nutritious foods and cooking tools in the dramatic play area, books related to nutrition, etc.).</td>
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<td>- Do not use food and drink as a reward or a punishment.</td>
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<td>- Choose nutrient dense foods and source locally (when possible).</td>
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<td>- Respect familial nutrition choices, particularly when it comes to infants, and be sensitive to individual needs (e.g. allergies) and cultural expectations.</td>
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<tr>
<td>- Select foods that are safe for children to eat based on developmental stage and ability.</td>
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<tr>
<td>- Make water available at all times and encourage children to drink.</td>
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<tr>
<td>- Assist child in understanding hunger/thirst cues by offering descriptive words.</td>
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<tr>
<td>- Model healthy food choices in the environment and/or follow any relevant program wellness policies.</td>
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<tr>
<td>- Integrate nutrition education as a complement to curriculum and at meal times and snacks (e.g. using vocabulary intentionally).</td>
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### Infant
- Pay attention to, label, and respond to infant’s feeding cues (e.g. feed child on-demand instead of on adult-established schedule)
- Describe new foods before introducing them to infant
- Provide opportunities for infant to self-feed when appropriate
- Have a designated place and equipment for breastfeeding
- Feed infants in appropriate settings (e.g. high chair versus feeding in a bouncy seat)

### Younger Toddler
- Provide new and varied food to child
- Establish a meal/snack routine (e.g. 1. Clean the tables. 2. Wash your hands. 3. Set the table. 4. Plate the food)
- Allow child to self-feed, providing utensils necessary for food type and demonstrate their use
- Model the use of healthy nutrition practices and eat alongside children (i.e. serving family style when possible)
- Feed toddlers in an appropriate setting (e.g. toddler size table vs. high chair)

### Older Toddler
- Acknowledge and respect child’s food preferences
- Describe characteristics of food (e.g. texture or color of food)
- Allow child to self-feed, providing utensils necessary for food type and demonstrate their use
- Model the use of healthy nutrition practices and eat alongside children (i.e. serving family style when possible)

### Younger Preschool
- Respect child’s physical hunger and thirst cues
- Label and describe the nutritious value of foods
- Provide reminders as necessary for child to use utensils for independent eating
- Model the use of healthy nutrition practices and eat alongside children (i.e. serving family style when possible)

### Older Preschool
- Respect child’s physical hunger and thirst cues
- Facilitate conversations around healthy food and beverage selection (e.g. "Milk has calcium and calcium builds strong bones! We’re having milk this morning!")
- Provide reminders as necessary for child to use utensils for independent eating
- Model the use of healthy nutrition practices and eat alongside children (i.e. serving family style when possible)

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8 Follow Child and Adult Care Food Program guidelines if and when applicable. For more information can be found here: [https://www.doe.in.gov/nutrition/child-and-adult-care-food-program](https://www.doe.in.gov/nutrition/child-and-adult-care-food-program)

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PHG2.1: Demonstrate how the five senses support processing information

Young children use their senses to process information and learn. They take in information through their eyes, ears, mouth, nose, and skin. They mentally process the information from these various sources and determine how to respond. As they process sensory information, they learn the properties of objects and begin to use those objects for intended purposes. The development of senses leads to:

- Increased knowledge of objects
- Inventive use of materials
- Problem solving
- Creative thinking
- Critical thinking skills

Looking Ahead to Kindergarten

The rich explorations of materials from birth on assists in developing critical skills and understanding key concepts. Kindergarten children are expected to manipulate objects, both physically and mentally, in order to develop important skills.

Family Engagement

Encourage families to:

- Think about ways to support sensory development at home (e.g. bath time as an opportunity for exploring water and bubbles or cooking together as a time to explore the smells and textures of different foods).
- Allowing discovery time in outdoor areas in all seasons (e.g. going for a family walk and discussing how flowers smell, feel, etc.)

Special Populations

Educators can:

- Provide opportunities and sensory materials that are accessible to all children (e.g. ensuring the sand/water table is accessible to children with varying mobility).
- Provide options when a child hesitates to use sensory materials (e.g. when a child does not want to explore mud or wet sand, offer gloves or various tools).

11 See Appendices A&B for additional information on how to support Special Populations
**Powerful Practices**
Examples of ways adults can support young learners’ ability to demonstrate how the five senses support processing information:

**PHG2.1 Demonstrate how the five senses support processing information**
Across all developmental stages, educators can:

- Provide safe sensory materials and manipulatives of different shapes, textures, scents, etc.
- Provide opportunities for and engage with children as they safely explore materials (i.e. get messy and engaging children in clean up efforts).
- Intentionally plan and make available a variety of experiences for young children to use their senses (e.g. taste testing foods with children - what does this feel/smell/taste like? What does it sound like when you bite into it?).
- When engaging in materials alongside children, use descriptive language of your actions or the child’s action. (e.g. “I’m dropping the pebbles onto my hand. You are dropping them into the pail.”)
- Integrate the five senses (i.e. sight, smell, hearing, taste and touch) into daily and activities (e.g. noticing smells outside, etc.)

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<tbody>
<tr>
<td>Provide a variety of experiences for infant to see, hear, taste, smell, feel</td>
<td>Model and encourage various actions with familiar objects</td>
<td>Provide a variety of objects for the child to explore (e.g. musical instruments, texture table, etc.)</td>
<td>Provide materials the child can take apart and reassemble</td>
<td>Provide open ended materials and simple tools for design, construction, and deconstruction across learning centers (e.g. screwdrivers, hammers, wrenches, tree cookies, rocks, tape, string, etc.)</td>
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<tr>
<td>Facilitate the use of materials for infant to explore what will happen (e.g. shake the rattle with the infant)</td>
<td>Observe how a child interacts with familiar objects, while noting new and unique actions</td>
<td>Plan a variety of experiences to engage the child’s senses</td>
<td>Encourage and engage child in identifying sensory experiences</td>
<td>Encourage child to compare and contrast sensory experiences (e.g. modeling the use of vocabulary like different/same)</td>
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<tr>
<td>Provide sensory experiences, respecting the child’s preferences and boundaries</td>
<td>Label sensory experiences</td>
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PHG2.2: Demonstrate development of body awareness

Young children naturally desire to move. They wiggle, reach, and kick long before they can propel their body through space by crawling, walking, climbing, or running. As they engage in these different types of movements, they develop body awareness and begin to understand how their body works.

The development of body awareness leads to:
- Understanding what they can and cannot do with their body with ease
- Learning what is “risky” behavior
- Spatial awareness
- An increased awareness and respect for personal space

Looking Ahead to Kindergarten

In kindergarten, students will learn to differentiate between movement in personal space and general space at a slow to moderate speed. (PE K.2.1.A) and move in personal space to a rhythm (PE K.2.1.B). Students will also begin to travel in three different pathways (such as moving in various patterns: straight, curved) (PE K.2.2.A) and travel in general space with different speeds (such as traveling at various speeds in skill development activities) (PE K.2.3.A).

Family Engagement

Encourage families to:
- Find ways to actively engage their child in physical activity during routine events (e.g. encouraging the child to stand or hop on one foot while waiting in line at the grocery store).
- Find ways to use physical activity as quality time together through various activities (e.g. sports, exploring nature, cleaning the house, etc.).
- Create active environments or visit spaces that encourage movement (e.g. moving furniture to promote play).
- Limit the use of screen time.
- Model physical activity as a self-care strategy.

Special Populations

Educators can:
- Plan and provide opportunities, space, and materials that are accessible to all children including those with varying mobility.
- Respectfully acknowledge the developmental differences and abilities of all children using a strengths-based approach.

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12 See Appendices A&B for additional information on how to support Special Populations
**Powerful Practices**

Examples of ways adults can support young learners’ development of body awareness:

**PHG2.2 Demonstrate development of body awareness**

Across all developmental stages, educators can:

- Ensure that the environment is reflective and responsive to the interests and abilities of children.
- Provide a variety of props to encourage children to move in a variety of ways (e.g. paper plates, hoops, scarves, etc.).
- Use proper terminology and names for body parts while being respectful of names children and families use.
- Promote individual range of abilities and take time to talk to children about their unique strengths and abilities.
- Respectfully respond to questions about differences in a factual way.
- Respect individual preferences and cultural norms.
- Provide opportunities for children to discover their own strengths and challenges.
- Promote big body play (e.g. tumble play or tag) to encourage understanding of physical limits
- Provide a variety of opportunities and spaces for children to deliberately and freely move.
- Consider using physical movements to teach other concepts (e.g. patterning and movement in music, how the body responds to those changes/patterns, etc.).

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</table>

- Provide opportunities for infant to move and explore (i.e. limit the use of “baby containers” or equipment that restricts an infant’s movement such as bouncy seats, swings, etc.)
  
  Label and describe infant’s movement and discoveries (e.g. “You found your toes!”)

- Sing songs and fingerplays to encourage movement and body awareness (e.g. Pat-a-Cake, “Where is your nose?”)

- Provide play materials for identification and awareness of body parts (e.g. the bear’s foot, the baby doll’s belly)

- Provide spaces for a child to move through, under, over, behind, and around

- Provide objects that can be pushed, pulled, thrown, kicked, rolled, stacked, etc.

- Describe child’s movement as they move through, under, over, behind, and around

- Plan indoor and outdoor learning experiences that encourage specific physical movements (e.g. Hokey Pokey, bean bag toss games, dancing, marching, etc.)

- Engage in conversation that develops descriptive language for body movement (e.g. throw with my arm, chew with my teeth)

- Provide experiences that encourage movement relative to peers (e.g. dancing with scarves and ensuring personal space)

- Provide materials that require more than one child to lift or move

- Read books about physical health and wellness

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PHG3.1: Demonstrate development of fine and gross motor coordination

The development of fine and gross motor coordination helps children to be able to move and manipulate objects. Gross motor skills refer to large muscle groups and body parts (e.g. legs, arms) whereas small motor skills relate to being able to manipulate small objects with precision (e.g. hand, wrist).

The development of fine and gross motor coordination leads to:
- Early writing skills
- Balance and body awareness
- Spatial awareness
- The ability to perform tasks and movements

Family Engagement

Encourage families to:
- Provide opportunities for fine and gross motor play (e.g. going outside for gross motor or providing crayons, pencils, etc.).
- Allow children multiple tries when moving an object safely before intervening.
- Participate, model, and announce keywords with big body play (e.g. having a dance party and saying “This is a spin and this is a wiggle.”).

Special Populations

Educators can:
- Provide opportunities and materials that are accessible to all children (e.g. ensuring tools have different size grasps or adaptations).
- Plan and provide opportunities, space, and materials that are accessible to all children including those with varying mobility.
- Consider the use of visual supports during fine and gross motor activities.

Looking Ahead to Kindergarten

In kindergarten, students will work to continue to develop their manipulative (PE K1.7.A through 1.16.B) and gross motor skills (PE K.1.1A through K1.5.A). Students will also begin to differentiate between movement in personal space and general space at a slow to moderate speed (PE K.2.1.A) and move in personal space to a rhythm (PE K.2.1.B). Lastly, students will recognize that physical activity is important for good health (PE K.5.1.A).

14 See Appendices A&B for additional information on how to support Special Populations
### Powerful Practices

Examples of ways adults can support young learners’ development of fine and gross motor coordination:

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<thead>
<tr>
<th><strong>PHG3.1: Demonstrate development of fine and gross motor coordination</strong></th>
<th><strong>Across all developmental stages, educators can:</strong></th>
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<tr>
<td><strong>Create environments and intentionally plan activities that encourage exploration and movement.</strong></td>
<td><strong>Provide opportunities with clear expectations for risk taking with appropriate supervision and guidance.</strong></td>
</tr>
<tr>
<td><strong>Be respectful of and promote the varying strengths and abilities of all children.</strong></td>
<td><strong>Closely observe and document the potential need for additional supports and services.</strong></td>
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<tr>
<td><strong>Model and narrate/naming experiences and movements (e.g. children move their arms like a flying bird).</strong></td>
<td><strong>Consider the use of simple signs to support fine motor development and communication skills.</strong></td>
</tr>
<tr>
<td><strong>Provide a variety of materials to support fine motor development (e.g. thin/thick crayons, thin/thick paint brushes, stamps, sponges, realistic household items, etc.).</strong></td>
<td><strong>Provide activities and materials to support early writing (See Early Learning Foundations Guidance for ELA3.1).</strong></td>
</tr>
<tr>
<td><strong>Provide opportunities with clear expectations for risk taking with appropriate supervision and guidance.</strong></td>
<td><strong>Be respectful of cultural and familial considerations.</strong></td>
</tr>
<tr>
<td><strong>Model and narrate/naming experiences and movements (e.g. children move their arms like a flying bird).</strong></td>
<td><strong>Consider the use of music and creative movement expression to support fine and gross motor development (e.g. provide instruments, finger plays, dance that is culturally reflective of the children, etc.).</strong></td>
</tr>
<tr>
<td><strong>Provide activities and materials to support early writing (See Early Learning Foundations Guidance for ELA3.1).</strong></td>
<td><strong>Provide opportunities with clear expectations for risk taking with appropriate supervision and guidance.</strong></td>
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<tbody>
<tr>
<td>Provide an environment that supports infant’s development of rolling over, sitting, reaching, and grasping.</td>
<td>Sing songs and fingerplays</td>
<td>Provide smaller objects for child to manipulate, supervising as necessary for child’s skill level (e.g. clay or playdough and tools)</td>
<td>Provide tools for children to grasp and manipulate (e.g. writing tools, screwdrivers, pliers, scissors, scoops, shovels, etc.)</td>
<td>Provide tools for child to grasp, manipulate, and practice more refined skills.</td>
</tr>
<tr>
<td>Allow and encourage child to finger feed self.</td>
<td>Provide board books and encourage children to explore pages on their own.</td>
<td>Create an environment with open spaces for gross motor activities (e.g. climbing structure, pull toys, bridge and ramps).</td>
<td>Create an environment with open spaces for gross motor activities (e.g. more challenging balance beams, higher climbing structures, etc.)</td>
<td>Utilize the environment to facilitate intentional, complex gross motor activities (e.g. hopping on one foot, galloping, and skipping).</td>
</tr>
<tr>
<td>Facilitate the coordinated movements of infant’s limbs through songs and play.</td>
<td>Allow and encourage child to finger feed self.</td>
<td>Facilitate the development of oral motor skills.</td>
<td>Consider the use of small and large group activities to promote a sense of body and spatial awareness and cooperation.</td>
<td></td>
</tr>
<tr>
<td>Provide infant floor time on various surface types.</td>
<td>Create an environment with open spaces for gross motor activities, including items for support as needed (e.g. ottoman, push toys).</td>
<td>Provide simple and safe utensils for children to self-feed.</td>
<td>Consider the use of small and large group activities to promote a sense of body and spatial awareness and cooperation.</td>
<td></td>
</tr>
<tr>
<td>Facilitate the development of oral motor skills.</td>
<td>Facilitate the development of oral motor skills.</td>
<td>Provide simple and safe utensils for children to self-feed.</td>
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</tr>
<tr>
<td>Provide opportunities for infant to move and explore (i.e. limit the use of “baby containers” or equipment that restricts an infant’s movement such as bouncy seats, swings, etc.).</td>
<td>Provide simple and safe utensils for children to self-feed.</td>
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PHG3.2: Demonstrate development of oral motor skills

**Oral motor skills** refer to the coordination of the lips, mouth, tongue, and jaw. Oral motor skills are also closely related to self-feeding and oral hygiene. Early dental caries (i.e. cavities or tooth decay) are the number one chronic illness of early childhood and the most preventable. Early educators can help to identify potential teeth issues.

The development of oral motor skills lead to:

- Communication and language skills
- Ability to chew and swallow
- Increasing independence in self-feeding and oral hygiene

Looking Ahead to Kindergarten

While oral motor skills are typically developed in children prior to kindergarten, it is incredibly important and foundational to a number of other kindergarten skills. The ability to communicate clearly and effectively supports the development of English Language Arts skills and the ability to self-feed is important for kindergarten routines and schedules.

Family Engagement

Encourage families to:

- Understand and model the importance of dental care and routine check-ups when appropriate.
- Play games and sing songs or fingerplays that incorporate various creative sounds and facial expressions.
- Avoid materials that could be considered choking hazards and provide materials that are sanitizable and safe for children to explore.
- Provide direct supervision during meal times and model safe eating practices.

Special Populations

Educators can:

- Provide opportunities and materials that are accessible to all children (e.g. ensuring toothbrushes have different size grasps or adaptations) and consider special positioning needed for brushing teeth.
- Encourage families to seek out dentists who have experience working with children with special needs.

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15 See Appendices A&B for additional information on how to support Special Populations
Powerful Practices
Examples of ways adults can support young learners’ development of oral motor skills:

**PHG3.2: Demonstrate development of oral motor skills**
Across all developmental stages, educators can:

- Provide foods of varying textures.\(^1\)
- Avoid materials that could be considered choking hazards and provide materials that are sanitizable and safe for children to explore.
- Provide opportunities for children to make creative sounds and movements with their mouths (e.g. singing, blowing bubbles, whistling, clucking, “raspberries”, etc.).
- Play games, sings songs or fingerplays that incorporate various creative sounds and facial expressions.
- Closely observe and document the potential need for additional speech supports and services.
- Provide direct supervision during meal times and model safe eating practices.
- Model and narrate/name experiences and movements specific to the mouth.
- Have conversations with families about the importance of early dental care and check for potential tooth issues.

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<tbody>
<tr>
<td>Mimic the sounds and expressions infants make (e.g. educator exaggerates facial expressions when talking to infant)</td>
<td>Allow and encourage child to finger-feed self</td>
<td>Provide simple and safe utensils for children to self feed</td>
<td>Provide open cups for drinking</td>
<td>Provide open cups for drinking</td>
</tr>
<tr>
<td>Sing to model the movement of the mouth and creation of sound</td>
<td>Provide simple and safe utensils for children to self feed</td>
<td>Provide sippy cups for drinking or adaptations as needed</td>
<td>Provide open cups for drinking</td>
<td>Provide open cups for drinking</td>
</tr>
<tr>
<td>Notice and respond to feeding cues</td>
<td>Provide a variety of interesting, engaging materials (e.g. shakers, teethers, books that can be mouthed and cleaned, and mirrors)</td>
<td>Provide open cups for drinking</td>
<td>Progress diet to raw fruits and vegetables</td>
<td>Progress diet to raw fruits and vegetables</td>
</tr>
<tr>
<td>Provide a variety of interesting, engaging materials (e.g. shakers, teethers, books that can be mouthed and cleaned, and mirrors)</td>
<td>Provide opportunities for spoon feeding when appropriate and in coordination with infant’s feeding plan</td>
<td>Encourage child to finger-feed self</td>
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\(^1\) Consider infant feeding plans and potential choking hazards.
PHG Foundation 4: Personal Care
Early learners develop foundational skills that support the independent care of one’s self.

PHG4.1: Demonstrate increased independence in personal care routines

Young children learn by observing and imitating the adults and the world around them. Learning to take care of their personal needs helps young children gain independence while preparing for the future. Educators can support establishing personal care routines that encourage children to begin taking care of themselves while building a positive body image. The development of personal care routines leads to:

- Increasing independence
- Self-confidence
- Basic understanding of health and the dimensions of wellness

Family Engagement

Encourage families to:

- Talk to their children about their current personal care routines and cultural influences of the household.
- Provide opportunities for young children to do as much as they can while offering encouragement and support (e.g. brushing their hair or teeth when appropriate).

Looking Ahead to Kindergarten

A significant amount of development occurs prior to kindergarten with the understanding that students will be expected to independently dress and undress themselves, as well as attend to toileting needs. Additionally, throughout kindergarten through second grade, students will begin to identify personal health decisions (Health 2.5.1) and people or places where health information can be obtained (Health 2.5.1).

Special Populations

Educators can:

- Provide visual supports (e.g. use real life photos to display the steps of proper handwashing).
- Ensure vocabulary is loaded into appropriate communication devices.
- Use a variety of visual supports, and words from a child’s home language when possible or use sign language.

17 See Appendices A&B for additional information on how to support Special Populations
### Powerful Practices
Examples of ways adults can support young learners’ increased independence in personal care routines:

**PHG4.1: Demonstrate increased independence in personal care routines**
Across all developmental stages, educators can:

- Address personal care with dignity and respect (e.g. engaging in consistent and respectful dialogue with parents about their routines and norms).
- Be respectful of and understand each family’s cultural norms and preferences (e.g. engaging with parents to find out additional information about their cultural and familial expectations).
- Provide materials that children can use to practice skills related to dressing and undressing (e.g. clothing in dramatic play, laces, zippers, velcro, etc.).
- Provide books that promote personal care routines.
- Provide choices/options in routines when possible.
- Implement, model, and supervise proper handwashing procedures.
- Promote and provide opportunities to practice hygiene.
- Create an environment and schedules that supports routines.

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<tr>
<td>Narrate personal care routines (e.g. “Your nose is running. I am going to wipe it with a tissue.” or “It is time to change your diaper.”)</td>
<td>Encourage the child to participate in personal care routines</td>
<td>As child shows interest and ability, encourage them to act independently in personal care routines</td>
<td>Support child’s independence in personal care routines (e.g. encourage children to change own clothes and provide specific praise)</td>
<td>Support child’s independence in personal care routines (e.g. encourage children to change own clothes)</td>
</tr>
<tr>
<td>Invite infant to participate in personal care routines as they are able (e.g. “Lift your foot so I can put your shoe on.”)</td>
<td>Describe why personal care routines are necessary (e.g. “Your shirt is wet! Let’s change it so you are safe and dry.”)</td>
<td>Provide descriptive feedback about child’s actions (e.g. “You did it! You put your jacket on. Now I can zip it.”)</td>
<td>Provide reminders about body care practices as needed (e.g. “It looks like you need a tissue.”)</td>
<td>Provide reminders about body care practices as needed (e.g. “It looks like you need a tissue.”)</td>
</tr>
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<td></td>
<td>Verbalize your observations of the child’s toileting needs (e.g. while speaking one-on-one with the child, “It looks like your diaper is wet. We need to change it.”)</td>
<td>Ask questions about personal care routines (e.g. “You forgot to wash your hands. Do you want to do it yourself or would you like help?”)</td>
<td>Ask questions about personal care routines (e.g. “We are getting ready to go outside. Does anyone need to use the bathroom?”)</td>
<td>Ask questions about personal care routines (e.g. “We are getting ready to go outside. Does anyone need to use the bathroom?”)</td>
</tr>
<tr>
<td></td>
<td>Introduce the bathroom and provide opportunities for children to explore it</td>
<td>Recognize and respond to child’s verbal and non-verbal cues related to toileting</td>
<td>Encourage children to dress themselves, providing assistance when needed</td>
<td>Encourage children to dress themselves, providing assistance when needed</td>
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Acknowledgements

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Megan McKinney-Cooper, Jump In for Healthy Kids
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Nancy Ward, Family and Social Services Administration, Office of Early Childhood and Out-of-School Learning
Allyson Zimmerman, Family and Social Services Administration, Office of Early Childhood and Out-of-School Learning
Appendix A - Supporting Dual Language Learners

Who are Dual Language Learners?

Dual Language Learners (DLL) are children, birth to five years old, who are developing their home language(s) while also developing English. Indiana has a formal process to identify children once they enter kindergarten, which includes the use of a Home Language Survey (HLS) and an English language proficiency assessment. In order to meet the learning needs of DLLs, educators should learn about the language(s) the children speak by conducting interviews with the family and focus on providing rich language activities for children to build their skills in all languages.

How can I support Dual Language Learners’ language development?

All children, birth to five years, are language learners; some children just happen to be learning more than one language. Children who are learning English as an additional language are the fastest growing population in the country, making it essential that educators know how to meet their unique language needs as well. Much of the language used in early learning environments is new for all children, both native English speakers and DLLs alike. Many of the same supports that are effective for developing skills in the first language will transfer to children acquiring multiple languages, such as visuals, modeling, manipulatives, and peer-support. However, educators of DLLs must focus on providing varied and supported opportunities for children to process and produce language across all content and developmental areas to ensure learning is meaningful while the children are developing English. DLLs may follow an altered trajectory on the developmental continuum. “Specific consideration should be given to the nature of early language and cognitive development, family and community-based sociocultural contexts for language learning, and the psycholinguistic nature of second language development in preschoolers who are still developing the foundational structures and rules of language” (WIDA, 2014).

What resources are available to help teachers of Dual Language Learners?

Indiana has adopted the WIDA Early English Language Development Standards (E-ELD). These standards are to be used in conjunction with the Foundations. As a result, DLLs develop the social and academic language needed to access and be successful in early childhood environments. The WIDA E-ELD Standards require educators to focus on the language DLLs need to process and produce to meet the Foundations. As shown in the graphics below, educators must ensure children learn the language of each developmental area in order to learn the core concepts.

Using the WIDA Early English Language Development Standards

The WIDA E-ELD Standards represent the language of overarching developmental domains that Dual Language Learners need to use with peers, educators, and curricula within the preschool setting. The E-ELD Standards are designed to be used in conjunction with the Foundations to ensure Dual Language Learners are provided necessary language support to make learning meaningful while developing English. The connections document can be found here: https://wida.wisc.edu/resources/connection-indiana-early-learning-foundations

Additional resources can be found by clicking on the “Download Library” at www.wida.us
Appendix B - Supporting Exceptional Learners

Children enter early childhood programs with diverse learning and developmental needs. Each child has unique characteristics that may help or hinder the ability to learn. It is the role of the program and educators to provide a learning environment where every child can be successful.

Early childhood environments should be inclusive ones where children with disabilities and developmental delays enjoy learning experiences alongside their typically developing peers. In 2015, the United States Department of Education along with the United States Department of Health and Human Services issued a draft policy statement on the inclusion of children with disabilities in early childhood programs.

“The Departments define inclusion in early childhood programs as including children with disabilities in early childhood programs, together with their peers, without disabilities, holding high expectations and intentionally promoting participation in all learning and social activities, facilitated by individualized accommodations and using evidence-based services and supports to foster their cognitive, communication, physical, behavioral, and social-emotional development; friendship with peers; and sense of belonging. This applies to all young children with disabilities from those with the mildest disabilities, to those with the most significant disabilities.”

The Foundations were designed for all children. The content within this developmental framework provides the breadth of information from which to create goals and experiences that will help children reach their highest potential while capturing their interests and building on what they already know. Educators must emphasize and celebrate all children’s accomplishments and focus on what children can do.

To differentiate instruction is to recognize children’s varying background knowledge, readiness, language, preferences in learning and interest, and to react responsively. Differentiated instruction is a process of teaching and learning for students of differing abilities in the same group. The intent of differentiating instruction is to maximize each child’s growth and individual success by meeting the individual needs of each child in the learning process. Differentiation should be used to engage all learners. In order for early educators to differentiate instruction they must first understand the developmental goals a child needs to obtain. This understanding should be used to develop lesson plans and learning experiences that help the child meet the goals.

Educators may need to adapt or modify classroom environments, interactions, and/or materials and equipment to help children with disabilities fully participate.

Universal Design for Learning

When using the Foundations in developing curriculum, Universal Design for Learning (UDL) can be utilized to give all individuals equal opportunities to learn. UDL provides a blueprint for creating instructional goals, methods, materials, and assessments that work for everyone. It is not a single, one-size-fits-all solution, but rather flexible approaches that can be customized and adjusted for individual needs.

UDL is a theoretical framework developed by the Center for Applied Special Technology (CAST) to guide the development of curricula that are flexible and supportive of all children. The concept of UDL was inspired by the universal design movement in building architecture. This movement calls for the design of structures that
anticipate the needs of individuals with disabilities and how to accommodate these needs from the outset. Although universally designed structures are more usable by individuals with disabilities, they offer unforeseen benefits for all users. Curb cuts, for example, serve their intended use of facilitating the travel of those in wheelchairs, but they are also beneficial to people using strollers, young children, and even the average walker. The process of designing for individuals with disabilities has led to improved usability for everyone.

UDL calls for the design of curricula with the needs of all children in mind, so that methods, materials, and assessments are usable by all. Traditional curricula present a host of barriers that limit children's access to information and learning. A UDL curriculum is designed to be innately flexible, enriched with multiple media so that alternatives can be accessed whenever appropriate. A UDL curriculum takes on the burden of adaptation rather than leaving it up to the child to adapt. It minimizes barriers and maximizes access to both information and learning.

The UDL framework guides the development of adaptable curricula by means of three principles (Figure 1 and 2). The three UDL principles call for flexibility in relation to three essential facets of learning, each one orchestrated by a distinct set of networks in the brain. UDL recognizes four essential teaching methods for each facet of learning (Figure 1 and 2).
### Universal Design for Learning

**Principle 1: to support recognition learning, provide multiple, flexible methods of presentation**

To support diverse recognition networks:
- Provide multiple examples
- Highlight critical features
- Provide multiple media and formats
- Support background context

**Principle 2: to support strategic learning, provide multiple, flexible methods of expression and apprenticeship**

To support diverse strategic networks:
- Provide flexible models of skilled performance
- Provide opportunities to practice with supports
- Provide ongoing, relevant feedback
- Offer flexible opportunities for demonstrating skill

**Principle 3: to support affective learning, provide multiple, flexible options for engagement**

To support diverse affective networks:
- Offer choices of content and tools
- Offer adjustable levels of challenge
- Offer choices of rewards
- Offer choices of learning context

(Figure 2)

The Indiana Core Knowledge and Competencies (CKC’s) identify the core knowledge and competencies needed by professionals who work with infants, children and youth. The CKC’s are an essential component of Indiana’s comprehensive statewide professional development system.

https://www.in.gov/fssa/files/2016_INCKC.pdf

The Division of Early Childhood (DEC) Recommended Practices were developed to provide guidance to educators and families about the most effective ways to improve the learning outcomes and promote the development of young children, birth through five years of age, who have or are at-risk for developmental delays or disabilities.

https://divisionearlychildhood.egnyte.com/dl/tgv6GUXhVo

The WIDA Early English Language Development (E-ELD) Standards were specifically developed to help support the unique language needs of DLLs, ages 2.5–5.5 years, who are in the process of learning more than one language prior to kindergarten entry. The connection between the WIDA Standards and Indiana Early Learning Foundations may be helpful to educators.

https://wida.wisc.edu/resources/connection-indiana-early-learning-foundations

Physical Health and Growth Specific Resources

The National Association for the Education of Young Children (NAEYC) has resources and articles available for educators and to share with families.

https://www.naeyc.org/resources/topics/physical

Zero to Three has resources and articles related to the development of children under the age of three.

https://www.zerotothree.org/espanol/physical-health

The World Health Organization has physical activity guidelines that may be helpful to programs and families.


Mayo Clinic has a resource on screen time that may be helpful to programs and families.

https://www.mayoclinic.org/healthy-lifestyle/childrens-health/in-depth/screen-time/art-20047952

The CACFP Provider Handbook has a great supplemental resource on how to prevent choking hazards in early education programs.


Healthy Kids, Healthy Future has recommendations and information on best practices for various age groups related to physical activity.
Indiana Grown 4 Schools provides resources for early childcare educators to increase access to healthy environments, improve early eating habits, and promote nutrition and agriculture education through project based learning.

https://www.ingrown4schools.com

Family Engagement

Brighter Futures Indiana is a resource to support families in understanding and enhancing a child’s learning at home and while in care. This resource was created through a partnership between The FSSA Office of Early Childhood and Out-of-School Learning and Early Learning Indiana. This can be shared with families for even more strategies on how they can support their child’s development at home.

http://brighterfuturesindiana.org/ On Facebook: https://www.facebook.com/BrighterFuturesIndiana/

The Indiana Early Childhood Family Engagement Toolkit is intended to support programs along a journey toward new heights of engagement.


The WFYI Bright By Text Service is for parents and adults who care for young children newborn through age 5. When parents register for the service using their child’s birthdate, direct text messages will provide developmentally appropriate information, activities, and more from trusted national and local resources.

https://www.wfyi.org/bright

Families look to early educators and programs for information about their child. The CDC’s “Learn the Signs. Act Early.” (LTSAE) has FREE research-based, parent-friendly resources on child development to help programs boost family engagement and professional development.

www.actearlyindiana.org

https://www.cdc.gov/ncbddd/actearly/index.html

Community Resources

Child Care Resource and Referral Agencies provide local, helpful services to families, child care providers and communities in several ways. The list of Resource and Referral Agencies can be found here:


We encourage educators to contact their local library for developmentally appropriate book suggestions and other resources. Please see the Public Library Directory to locate the nearest public library:

https://www.in.gov/library/pldirectory.htm