Spring 4-26-2022

Embracing a Pedagogy of Care in the Infant and Toddler Classroom

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EMBRACING A PEDAGOGY OF CARE

IN THE INFANT AND TODDLER CLASSROOM

by

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A MASTERS PROJECT

Presented to the Faculty of

The Graduate College at the University of Nebraska

In Partial Fulfillment of Requirements

For the Degree of Master of Science

Major: Child, Youth, and Family Studies

Under the supervision of Dr. Rachel Schachter

Lincoln, Nebraska

December, 2021

ABSTRACT:

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University of Nebraska, 2021

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Care is a universal concept which connects us all as humans. Everyone comes into this world needing care and most of us will exit this world in need of care. Care is necessary throughout the span of our lives and should be considered a human right. Everyone is entitled to quality care, no matter their age or social status. The U.S. society has been entrenched in a decades long division between education and care which has historically prioritized education over care. This division has contributed to care being hidden and undervalued within the context of early childhood (EC) as a vital aspect of teaching practice, particularly in infant and toddler settings. As a result, care has become associated with custodial tasks which can be done by anyone and with little training or specialization. This paper focuses on implications of integrating a pedagogy of care into EC infant and toddler settings and reasserting care as a foundational aspect of EC professional practice. The paper provides a brief overview of the history of care in the context of EC and contributing factors related to the divide between care and education, analyzes and defines care, and offers insight to the significant implications embracing a pedagogy of care may have for the field.

EMBRACING A PEDAGOGY OF CARE

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The field of Early Childhood (EC) is currently facing a dilemma regarding professionalizing and describing the scope of work done by practitioners in the field. What exactly are the roles and responsibilities of an EC educator? Are we educators or care providers? Is it possible to be both and still be valued in the field of education? A recent study by Schachter et al. (2021) suggested there has been a notable shift away from using terms such as "caregiver" to legitimize the work of EC professionals. The study revealed EC professionals perceived their role as preparing children for formal school, and preferred the term "teacher" to describe their role in the classroom. Many teachers in the study recognized the caregiving aspect of their profession; however, many resisted the term "caregiver" as it has become associated with low-skilled work, and is often viewed as 'less than' education (Schachter et al., 2021; Shin, 2014; Garboden-Murray, 2020).

Perhaps our efforts to advocate for our legitimacy as educators has created an unintentional divide between care and education (Harwood et al., 2013; Schachter et al., 2021). In some cases, care is seen as subordinate to education. However, time spent in caring rituals such as mealtimes, toileting, and rest time may have the potential to be rich teaching and learning opportunities for young children (NAEYC, 2019; Garboden-Murray, 2020; Head Start ECLKC, 2021). Utilizing a pedagogy of care within the classroom would allow educators to turn everyday routines, perhaps seen as custodial care, into curriculum (Rockel, 2009; Shin, 2014; Bussey & Hill, 2016; Garboden-Murray, 2020). Care

is more than simply keeping children safe and clean. Entering into caring relationships requires specialized knowledge about human development, children, and learning (Raikes, 1993; Degartori & Davis, 2008; Garboden-Murray, 2020). Uniting care and education may allow EC professionals to articulate a new identity as educators, one where we claim caregiving as a pedagogical imperative rather than a weakness. A pedagogy which incorporates care and learning highlights specific knowledge and skills of EC professionals related to nurturance and care which may have previously been undervalued. Adopting a pedagogy of care (Rockel, 2009; Shin, 2014; Garboden-Murray, 2020) bridges the gap between care and education by providing theoretical rationale, recognizing care as a research-based practice, and a framework for pedagogical leadership.

This paper draws upon work from feminist theorists (Noddings, 1984; Tronto, 1998; Michel, 2011) and aims to build a deeper understanding of care within the context of infant and toddler classrooms, illuminate the pedagogy of care as an educational philosophy and empower teachers to embrace a professional practice rooted in the pedagogy of care. First, I provide a brief overview of the history of care in the context of EC, as well as review the contributing factors related to the divide between care and education. Then, I further analyze and define care and an ethic of care, and discuss its significance to the EC field. Next, I examine how teachers perceive care as it relates to their professional identity, and discuss emerging themes found within the care literature. Finally, I offer a framework of pedagogy of care for infant and toddler teachers in the field who are hoping to enhance their practice.

History of Care in the Context of EC

To inform our current understanding of care within the American EC system, we must take a look at our past. The following, while not a complete history of EC in the U.S., offers insight to how cultural and political contexts have impacted the trajectory of care and education for young children. Two contrasting stories can be told about the history of care and education for children under 3 in the United States. Lally (2001) claims one is a story is of progress forward and hope, while the other is of stalled progress and uncertainty. Over the past few decades, there has been significant advancements made on behalf of both state and federal governments to increase access funding and access to quality care for children birth to age 5 (Head Start ECLKC, 2021). One of the most notable services, the Head Start program, began in 1965 as an effort to help meet communities needs of low-income families and children ages 3-5. Head Start was designed as a culturally responsive, comprehensive childcare program which would offer qualifying families social, emotional, nutritional, and education support (Head Start ECLKC, 2021). In 1995, Early Head Start grants were awarded to serve low-income infants, toddlers, and pregnant women (Administration for Children and Families, 2021). Attempts have been made to further regulate and uphold quality care standards such as the Head Start performance standards. The performance standards (Head Start Performance Standards, 2020) guide all Head Start and Early Head start funded care providers and include these specific requirements:

1. Group sizes for children 0 to 36 months of age must be a 2:8 or 3:9 ratio.

2. Each child is assigned a primary caregiver to promote continuity of care.

3. Children should remain in consistent care with the same caregiver as much as possible to support continuity of care.

The performance standards are significant because prior to their conception, no such federal guidelines existed for infants (Lally, 2001). Additionally, the Early Head Start performance standard encourage responsive relationships between infant and caregivers, a key aspect of quality care. According to the Head Start performance standards, "teaching practices must emphasize nurturing and responsive practices, interactions, and environments that foster trust and emotional security" (p. 28) indicting quality infant care begins with the foundation of secure and trusting relationships. Although the introduction of the Head Start performance standards has significantly contributed to the increasing the quality of care children across the United States receive, quality care is not available to majority of the children in our country (Lally, 2001; Lally, 2013; McLean, 2020). Resistance to providing quality care to our nation's children and families has persisted for over thirty years and stems from historical, cultural, and moral conflict (Michel, 1998; Michel, 2011; Lally, 2001).

Some argue that the EC sector in America has endured a long history as a system linked to inadequate political decisions which have led to a consistent disregard of early childhood education and care as a vital public good (Michel, 1998; Michel, 2011; Lally, 2001). Child care in the U.S. has been associated with both formal and informal arrangements which were typically denounced as welfare programs for low-income, minorities and immigrants. In the early 1900's, the roots of child care began to take hold starting with day nurseries which mainly served the "unfortunate" children of immigrant or black

working mothers (Michel, 2011). Day nurseries were typically staffed by women from the local community who had no formal education. No education requirements existed for this type of vocation. Simply being a woman was seen as an adequate qualification further perpetuating the deeply imbedded maternalist discourses of motherhood which continues to play into the provision of EC and care (Aliwood, 2008; Michel, 2011).

The onset of the World War II (WWII) created a mixed impact on EC and women. Initially, the federal government was opposed to women entering the workforce, despite the labor shortage, claiming "mothers who remain at home are performing an essential patriotic service" (Allen & Kelly, 2015; Michel, 2011). Eventually, Congress authorized support for childcare through federal grants to both public and private agencies to fund childcare in war-affected areas and the idea of maternal employment slowly began to be accepted by the public. It was during this time in history our nation ran a universal child care program, but it was short-lived (Allen & Kelly, 2015; Michel, 2011; Lally 2001). As women began to enter the labor market, the need for child care continued to rise and many national organizations, like the Child Welfare League of America, lobbied for continued government support for permanent public child care programs. Their efforts fell short and as the war concluded, women were laid off, the federal government ceased all funding for child care, and hundreds of childcare facilities closed. Although a majority of the child care facilities shuttered their doors after WWII, nursery schools associated with private state colleges and universities continued to stay open and thus paved the way for formal teacher preparation and education programs (Allen & Kelly, 2015; Michel, 2011).

As women continued to establish themselves in the workforce, it became apparent that child care could no longer be considered exclusively a family responsibility (Lally, 2001). In the 1970's, family demographics were rapidly changing. Women were being drawn to the workforce, many families no longer lived in close proximity to one another, and neighborhoods were seen more as a place to sleep rather than a place of support (Lally, 2001). Recognizing the need for comprehensive support and quality child care, early childhood advocates, labor and civil rights leaders, and a coalition of feminists worked with members of Congress to legislate a universal child care policy called the Comprehensive Child Care Act (Allen & Kelly, 2015; Lally, 2001; Michel, 2011). It was swiftly vetoed by President Nixon who denounced it as an attempt to "Sovietize" our children, further stating this was a "private matter" rather than a "public right" (Allen & Kelly, 2015; Lally, 2001; Michel, 2011). The split between public-private regarding the field of EC has persisted within the U.S. and has continued undermine care as a vital public good.

In more recent years, there has been more federal recognition of the importance of providing high-quality care to our youngest citizens and less resistance from policymakers regarding funding allocated to the EC sector. For example, shortly after becoming president, President Obama ushered in new education reform initiatives such as Race to the Top-The Early Learning Challenge and Preschool for All, which aimed to increase access to quality EC programs for children birth to five (U.S. White House, Office of the Press Secretary, 2013; Zero to Three, 2014). President Obama was a strong advocate for EC and proposed a series of investments be made to help establish a continuum of high-quality EC for all children in the U.S. The primary focus of these initiatives remained on

expanding preschool programs, kindergarten readiness, and child achievement outcomes related specifically to STEM literacy (U.S. White House, Office of the Press Secretary, 2013). Funding was made available for expansion of Early Head Start programs which serve low-income infants, toddlers, and pregnant mothers; however, no other support was offered to community-based, private child care providers serving infants and toddlers (Dillon, 2008; U.S. White House, Office of the Press Secretary, 2013; Zero to Three, 2014). Despite EC being identified by President Obama as crucial to long-term economic success and educational equity, federal policy dialogue continued to target only preschool-aged children, dismissing the critical years of birth-3. My intention is not to minimize the significance of the EC initiatives created by the Obama Administration, instead to highlight the ways federal funding for EC services in the U.S. has placed an increased importance on "education", which seems to specifically refer to preschool aged children, and less concerned with providing support to "care" for infants and toddlers.

The divide between education and child care can even be found within current political conversations between Congress and the Biden Administration. Through the American Families Plan (U.S. White House, Office of the Press Secretary, 2021), President Biden has proposed to invest roughly $350 billion to the EC system with the goal of making high-quality child care affordable and providing universal preschool to children ages 3-4 (Biden for President, 2021; U.S. White House, Office of the Press Secretary, 2021; Austin et al., 2021). The plan suggests child care and preschool are two distinct systems, which further deepens the dichotomized view of care and education. Offering free high-quality universal preschool to all 3 and 4 year olds while continuing to allow

infant and toddler care to be offered through fee-based services could have detrimental effects on the entire EC delivery system (Zero to Three, 2021). President Biden's plan may continue to widen pay gaps, racial stratification, working conditions, and profession-al development opportunities between publicly funded preschool and child care teachers (i.e. infant and toddler teachers) (Zero to Three, 2021). Research has shown the lowest paying job in the EC sector are those that involve working with infants and toddlers, and Black women are more likely than their peers to work with infants and toddlers (White-book, 2019). President Biden's proposal expands upon the existing EC system, increasing access to child care subsidies, making it more affordable for most families without mak-ing salary adjustments for infant and toddlers teachers working in community-based pro-grams compared to public school-based settings (Whitebook et al., 2018; Austin et al., 2021).

Funding child care and preschool differently sends a clear message to our nation that care and education are separate, preschool (i.e. education) is valued as a public good, and more important than care (Austin et al., 2021). The division between care and educa-tion continues to undermine scientific evidence we have about how children learn and further deny care as a public good. Conceptualizing care as a human right and a public good could help to strengthen our society and lift us from the current care crisis we find our country in today (Page, 2017; Garboden-Murray, 2020; Jessen-Howard et al., 2020).

What is Care?

In recent years, the concept of care in EC has begun to capture the attention of those in the field. Emerging research studies and scholarly articles devoted to issues re-

garding care in the classroom have only just begun to understand the implications of care

in the context of EC (Goldstein, 1998; Shin, 2014; Davis & Degotardi, 2015; Langford et

al., 2017; Katz et al., 2020; Bergmark, 2019). Although there has been much interest in

the topic of care, most studies are rooted in the assumption that there is a universal

agreement about what it means to care. Currently, there is no systematic definition of the

term care. Some believe the term care has been mentioned with such regularity and fre-

quency throughout literature that it has lost its meaning, becoming more of a buzzword

instead of a professional stance (Goldstein, 1998).

Care is an essential aspect and responsibility of the education of young children;

however, caring has become associated with a generic meaning which implies an image

of a nice, kind, and nurturing teacher (Noddings, 2012; Goldstein, 1998; Garboden-Mur-

ray, 2020). Whereas this may be true for some, others have recognized issues with main-

taining this image of the teacher within EC. The common understandings and definitions

of what it means to be a caring teacher are associated primarily with the affective domain

and suggest caring is a result of temperament, feeling, or a personality trait rather than an

intellectual act (Goldstein, 1998). Much of the current discussion of care overemphasizes

care as only 'feeling' work and dismisses the 'thinking' or actual intellectual work and

complexity of working with young children (Tronto, 1998). Tronto (1998) reminds us

that care is both a mental disposition and the specific caring practices we engage in,

which suggests care may have dual meaning. Throughout the literature regarding care,

some theorists and researchers have suggested definitions for care. For example, Tronto

and Fisher (1990) define care as: "A species activity that includes everything that we do

to maintain, continue, and repair our 'world' so that we can live in it as well as possible. This includes our bodies, ourselves, and our environment, all of which seek to interweave in a complex, life-sustaining web" (p. 40). Although Noddings does not provide an explicit definition, she repeatedly argues that the foundation of care is morality and caring is a relation between the one-caring and the cared-for. In her book, *Illuminating Care*, Garboden-Murray (2020) suggests care could be defined as: an action, an attitude, and an ethic" (p. 7). For the purpose of the paper, I offer a definition of care which emphasizes the ethical, philosophical, and pedagogical implications for the field of EC. Drawing from the work of Noddings (1984), Ikes (1980), and Tronto (1998) I describe care as: *A human activity rooted in reciprocal relations between the one-caring and the one(s) cared-for in which empathic accuracy is achieved through both cognitive and affective dimensions.*

This definition has several intentional and noteworthy aspects. First, naming care as a "human activity" reminds us that how we care for one another is a central feature of what it means to be human. Second, placing care within the context of a reciprocal relationship describes the action of facilitating meaningful interpersonal exchanges between the one-caring and the cared-for, and further emphasizes responsive relationships as fundamental. Third, as a result of well-established reciprocal relationships, empathic accuracy is developed. Empathic accuracy, a term coined by Ickes (1993), is referred to in his research as "everyday mind reading" and suggests people are motivated to understand each other's personality traits as well as make accurate inferences about physiological states such as thoughts or emotions. When we highlight both the cognitive and emotional

skills involved in the development of empathic accuracy, care is elevated from being menial or reduced to emotional qualities and seen as an intentional practice and science.

An Ethic of Care in EC

The foundation of care ethics is derived from the experiences of women and is commonly referred to in the literature as feminist ethics. The study of care in education and care ethics has widely referenced the work of theorists and philosophers such as Noddings (1984), Tronto (1998), and Gilligan (1982). The influential work of these authors has provoked questions regarding how care ethics may impact research, practice, and policy making within all aspects of the field of EC (Goldstein, 1998; Moss, 2001).

Nodding's work has provided an intriguing perspective on the ethic of care and care ethics within the context of education. Noddings (1984) described the ethic of care as being in relationship with "the other", working to establish "engrossment", therefore leading to "motivational displacement" of the one caring's own needs to meet those of the other. It is through utilizing a caring ethic that a meaningful and reciprocal caring encounter takes place between the one caring and the cared-for. Within the caring encounter, the one caring meets a cared-for with full attention and receptivity, or engrossment, leading to a motivational shift. This shift is referred to by Noddings (1984) as motivational displacement and occurs once the one caring receives the cared-for into herself, therefore, seeing and feeling, and giving primacy to the needs of the cared-for. From this perspective, care ethics is seen as both situated and relational. Actions are motivated by the needs of the cared-for and the responsibility to the other, not reason or virtues. There

are many parallels which can be drawn between the concept of ethics care elaborated by

Noddings and caring relationship found in most EC classrooms. Noddings (2012) states:

> I have to respond to the cared-for who addresses me in a special way and asks me for something concrete and, perhaps, even unique. Thus, what I as a carer do for one person may not satisfy another. I take my cues not from a stable principle but from the living other whom I encounter (p. 188).

This quote underscores the situated nature of a reciprocal relationship between the one

caring and cared-for, much like you may find between an EC teacher and child. To effec-

tively and appropriately meet the caring needs of a child, the teacher must know them

well and intentionally seek out confirmation that caring has been received to complete the

caring relationship (Bergmark, 2019). To ensure completion of the caring relationship, the

carer must learn to discern between the child's assumed needs and expressed needs. Care

ethics suggest teachers should be responsive and receptive to children's expressed needs

by using their professional and moral judgement and be cognizant to remain other-orient-

ed, not self-oriented (Noddings, 2012). Ethical care processes in an infant or toddler room

could be considered responsive behaviors which provoke reciprocity between the teacher

and child such as: respecting the child as an individual, active listening, flexibility, in-

quiry, and building trust through secure attachment (Noddings, 2012; Shin, 2014; Lang-

ford et al., 2020). Despite most of Nodding's work being focused primarily on elemen-

tary, middle, and high school children, I would argue there is a place for care ethics in the

EC classroom as well.

Tronto (1998) argues that an ethic of care provides a framework to analyze caring activities and elevates care to a central value in the human life and involves four phases: caring about, taking care of, care giving, and care receiving (Moss, 2001; Tronto, 1998). Echoing Noddings (1984), Tronto (1998) suggests receptivity, responsiveness, and competence is critical to care ethics. I agree with Moss (2017) that the way Tronto conceptualizes an ethic of care as pervading all relationships-ourselves, others, and the planet we live on, is unique and could serve as the relational ideal. Care as an ethic as described by Tronto helps move us away from a narrow view of care as a set of menial tasks, and towards viewing care as a relational ethic which applies to children, adults, the community, and the environment.

The EC setting could be viewed as a site of "inevitable dependence and inextricable interdependence," (Langford & Richardson, 2020) where ethical care practices have particular relevancy to the field of EC and are central to the work of EC teachers. There is some empirical evidence which suggests implementing an ethic of care in the context of EC, although regarded as instrumental to teaching practice, is not being applied. A study by Langford et al. (2017) attempted to identify the complexities of care and describe how ethical and relational practice are being carried out in the classroom. The study indicated that an ethic of care was absent from the observed interactions. Observed care interactions between children and teachers were described as 'instrumental'. Teachers were observed being responsive to children, however, the interactions between children and teacher were brief and often did not allow for opportunities to engage in the processes of care ethics (i.e. listening, inquiry, negotiation, flexibility, and adjustment). Teachers were

observed rushing through interactions with little awareness to how care was given and completed (Langford & Richardson, 2020). Researchers also observed the high ratio of children to teacher significantly affected the teacher's capacity to sustain caring interactions. Teacher-child interactions were constantly interrupted by competing priorities of managing a large group of children and other classroom demands. The observers noted that they were "deeply concerned about the educators' struggles to be responsive to the children" (p. 41), citing lack of structural supports as the leading cause of diminished caring actions in the classroom rather than teachers' values or perceptions of care. This study also revealed the children's experience of care was denied and were not active participants in their own care. The instrumental care provided by the teachers often denied the children opportunities to reflect on care given and teachers seemed to expect children to receive the care given passively. Interestingly, the researchers theorized that the difficult working conditions resulted in teachers being denied the opportunity to engage in caring practices which aligned with their values, therefore not receiving care themselves. The Langford & Richardson (2020) study underscores the challenges regarding implementation of an ethic of care in an EC classroom. Although this study was conducted in a preschool classroom, it is likely this may be indicative of experiences in infant and toddler classrooms as well.

The philosophy of care ethics has the potential to provide EC teachers with a framework to re-conceptualize care and is important to consider regarding the future direction of our field. The field of EC has been described as a "loci of ethical practices" (Moss, 2001; p. 155) where teachers make choices daily regarding values,

ethics, and translate them into practice. Therefore, it is undeniable that the work done in

EC (i.e. relationships, organization, practice, and purpose) is permeated by ethical choic-

es. An ethic of care helps strengthen our understanding of what it means to be caring

teachers and provides clarity on how to engage in caring behaviors (Shin, 2014). Accord-

ing to Davis and Degotardi (2015), *"care comprises part of the professional identity of*

EC teachers and should be embraced as an ethical approach to practice" (p. 1734). Simi-

larly, Taggart (2011) argued care ethics is intertwined with codes of ethics as a moral

foundation for care within the context of EC, and suggests specific skills and competen-

cies are required to perform the professional work of infant and toddler teachers. Howev-

er, the division between care and education had produced competing views of the organi-

zation, conceptualization, and purpose of EC.

Education Versus Care Debate

Moss (2017) described the historic split between EC care and education as "a dys-

functional legacy". In the U.S., 'care' has traditionally been constructed as private, gen-

dered, and associated with welfare, and refers to children ages 3 and under. 'Education'

seems to be considered a universal entitlement, or public good, and refers to children ages

3 and over (Langford et al., 2017; Moss, 2017, Rockel, 2009). Confusion about the divide

between care and education within the context of EC provokes many questions: How is

education and care understood by teachers, parents, and society? Are education and care

distinct or are they complementary and related? Is 'care' in EC confined to infants and

toddlers or does it have relevance to preschool and school-aged children? Even the term

'early education and care' should be used with caution, as it further supports the dichotomized relationship between education and care (Langford et al., 2017).

Despite care being regarded as an essential aspect of teaching, it continues to garner a perception of being a prerequisite to education, largely feminine, and burdensome work (Davis & Degotardi, 2015; Moss, 2017; Langford et al., 2017). Care and education should not be at opposing ends of a spectrum. Instead, care and education should be united and recognized as a human right. Naming care as a right may help to release it from being labeled a private matter to being normalized as a public good. As discussed earlier in this paper, there are historical connections to the current education and care relationship as it exists in the U.S. which has continued to cause issues regarding accessibility of quality care for most families.

Impact of the Private vs Public Narrative on Education and Care in the U.S.

EC education and care services as it currently exists in the U.S. is an artifact of the past. The U.S. operates under what have been called, 'split systems' which refer to two different traditions of development: education and care and can be traced back to the 19th century (Moss 2017). The two primary sectors within the split system, education and care, continue to have distinct identities which has resulted in varying structural aspects regarding funding, regulation, organization, and different understandings of teachers' purpose and responsibility (Moss, 2017). A greater responsibility to education has dominated in the U.S., with more funding and investments being made to preschool initiatives (i.e., education) than care services for infants and toddlers (Austin et al., 2021; Whitebook et al., 2018; Langford et al., 2017; Moss, 2017, Lally, 2013). This could be

attributed to the monetization of children's education, commonly being articulated as an

'investment'. This perspective has led to an increased attention on narrow child outcomes

related to literacy and math which are often closely linked to the topic of school readi-

ness, can easily be observed and measured within the classroom, and are prevalent within

EC research (Langford et al., 2017; Lally, 2013). Despite care being perceived as vital to

the growth and development of children, it is rarely examined in the classroom, underrep-

resented in research, and often omitted from policy discussions regarding the field of EC

(Rockel, 2009; Shin, 2014; Landford & Richardson, 2020).

Currently, the U.S. is experiencing a childcare shortage, causing it to be harder for

families in the U.S. with children under age 3 to find affordable care (Whitebook et al.,

2018). A recent report indicated there are approximately 2 million adults, mostly women,

providing care in various settings to approximately 10 million children across the U.S.

(Whitebook et al., 2018). More specifically, 42% of infants and 55% of toddlers in the

U.S. experience at least one weekly non-parental care arrangement (NCES, 2021). Given

that a substantial amount of children are receiving care outside the home, one would

imagine the U.S. would have a well maintained and robust system of early care and edu-

cation. Unfortunately, this is not the case. In the U.S., there remains a reliance on the

mindset that EC education is a private, family matter and that the EC needs can be suffi-

ciently fulfilled by the market. However, the market is overwhelmed and inadequate at

providing high-quality EC services, further denying families and children a vital public

good (McLean et al., 2020). Unlike elementary education, where school-aged children

are guaranteed access to the public-school setting, high-quality early care and education

settings for children under age 6 are difficult to find and can be nearly impossible to obtain for parents of children under age 3 (Whitebook et al. 2018).

The COVID-19 pandemic has notably increased challenges regarding accessibility of quality infant and toddler care. A recent survey conducted at the beginning of the COVID-19 pandemic revealed 63% of providers may have to permanently close their programs due to strained funding; therefore, only leaving enough child care supply to serve less than one-fourth of the infant-toddlers across the U.S. in need of care (Jessen-Howard et al., 2020). Although the need for early care is obvious, the narrative of care as a private matter versus public good continues to persist and families of infant and toddlers often face a disproportionate amount of the of the burden caused by insufficient funding and lack of support in the EC sector (Jessen-Howard et al., 2020). The U.S. continues to face on-going struggles regarding the field of EC, many of which could be attributed to the separation of education and care viewed as either private or public. If the U.S. continues to hold on to the outdated private versus public matter narrative, this may hinder our ability to move forward in creating access and availability to care for all families and children.

Invisibility of Care

Care is the foundation of EC education, but in an attempt to legitimize our roles as educators, there has been a push to hide care from our work under the veil of direct instruction and curriculum (Garboden-Murray, 2020). Examples of this can be found in EC marketing mechanisms such as prevalent images of EC teachers engaging young children in developmentally inappropriate direct instruction (e.g., calendar time or using flash-

cards of letters or numbers), or removing term "care" from child care centers' names and opting to call them child development centers or early learning centers to make them appear to have more value. Images of teachers engaging in routine caring rituals like eating meals together, diapering, and rest time are often neglected and seen as custodial or devalued as something other than educational (Garboden-Murray, 2020). Care provided to children in the EC environment remains invisible, undervalued, and inevitably assigned to women as a "natural place" (Arnot, 2002; Langford et al., 2017, Langford & Richardson, 2020).

Osgood (2010) argued workload intensification and increased regulatory gaze may lead teachers to feel the need to hide care from their practice. Osgood noticed the types of traits teachers reported as being key characteristics of an infant teacher were more closely aligned with the affective domain (e.g. caring, loving, compassionate) suggesting they prioritized care as a professional trait. However, teachers felt they should be "marketing a certain type of professionalism", (p. 126) during formal inspections and felt it was necessary to satisfy demands to demonstrate competency through meeting curriculum objectives, record keeping, and monitoring; leaving care and emotional labor in the background. The invisibility of care sends a clear message to EC teachers in the field that care is subordinate to education, is "naturally" done by women, and dismisses the complex, intelligent, messy, and emotional nature of providing care to children (Langford & Richardson, 2020). The attempts to disguise care within with EC field has led to the acceptance of a greater focus on standardized teaching and "learning" discourses which resemble those found in the K-12 sector (Langford & Richardson, 2020).

Perceptions of Care in EC Infant/Toddler Classrooms

Some believe our field is in jeopardy of losing care to the assimilation of education, suggesting education is not becoming more like care, rather care is being fit into educational models (Gibbons, 2007). The push to align the EC field more with our K-12 counterparts is ever-present within the care versus education debate. Perhaps the split between care and education may have also had an unintentional impact in the way teachers perceive care as it relates to their role and responsibilities in the classroom.

There is also an underlying or perhaps unspoken assumption made in the EC field about how care is handled in the classroom and by whom. It is not uncommon for there to be at least two adults in an EC classroom, a lead teacher and an assistant teacher. One such general assumption is that the lead teacher is primarily responsible for 'education' (i.e., planning, curriculum, instruction) and the assistant is responsible for providing 'care' (i.e., hand washing, diapering, mealtimes) (Van Laere et al. 2012). In this sense, education seems to be conceptualized as "learning" or only concerning the mind while care is referred to as being an afterthought or inferior to education. (Rockel, 2009; Van Laere et al., 2012, Moss, 2017, Garboden-Murray, 2020)

There is emerging evidence which suggests the care versus education divide may even reinforce a type of division within the classroom between assistant teachers and lead teachers, producing an unjust hierarchy amongst professional roles. A study conducted by Van Laere et al. (2012) aimed to better understand the role of assistants within the field of EC in relation to the lead teacher and a conceptualization of care and education. Although there was much variation, most countries employed assistant teachers who were poorly

qualified, from vulnerable populations or ethnic minority communities, and mostly women. According to the data, assistant teacher roles were described as providing 'caring' or 'routine' tasks. A description provided by one workforce profile from Lithuania described the role of assistants as, "technical workers who are in charge of cleaning the facilities, feeding children, and other 'routine' chores. Other tasks include supervising children, scheduling naps time, assisting with their hygiene routine, dressing children to go outside, helping with discipline, etc" (Van Laere et al., 2012 p. 533). The study suggests the role of assistant teachers is to take over the caring tasks so the lead teacher can focus on educating children, which diminishes the value of care and of the assistant teacher. The researchers also theorized that the split between education and care may create a hierarchical structure embodied in the varying statuses of EC professionals. This type of hierarchy undermines the importance of care in the context of EC and alludes to a narrow view of care as inferior to education, can be provided by any low-qualifying person, and does not require specific training or professional development (Van Laere et al. 2012).

A study by Degotardi (2010) explored how care is perceived in the infant classroom by investigating quality of interactions with infants in routine care contexts, and teachers' responses to professional discourses of care. There seem to be many studies which focus on quality interactions within the context of play; however, few studies have explored teacher-child interactions specifically during routine care experiences. Degotardi (2010) examined factors associated with the quality of infant-teacher interactions in the context of both play and routine care. Teacher-child interactions were recorded during

three specific contexts, play, mealtime, and dressing. This study revealed an association

with higher levels of sensitivity and stimulation during play contexts than in the routine

contexts. It should be noted that the mealtime footage was excluded from the final analy-

sis as a result of "minimal practitioner proximity and interaction" (Degotardi, 2010 p.

31). According to Garden Murray (2020), "Meals hold unlimited potential for integration

of intellectual, social, and academic skills" (p.26). EC programs are being challenged to

acknowledge learning opportunities which extend from routine care contexts and how

they serve as an integral part of the day. Combined with the low levels of interpersonal

interactions between teachers and infants during the mealtime context, findings from this

study suggest teachers may still be overlooking the importance of routine care as educa-

tional (Gonzalez-Mena & Widemeyer-Eyer, 2007; Degotardi, 2010).

Perceptions of care continue to be problematic, especially when associated with

infant and toddler classrooms where care is considered a core feature of best practice, yet,

undervalued as a professional competency (Rockel, 2009; Shin, 2014). One study

(Brooker, 2010) found dispositions of care such as "attentiveness, responsiveness and

thoughtful consideration between caregiver" (p. 193), were regarded by both parents and

infant teachers as desirable professional skills. In the Brooker (2010) study, parents and

teachers rated the provision of physical care routines (e.g. diapering, feeding, and other

routine care moments) as highly important and foundational formation of the infant-

teacher relationship. Shin (2014) also highlights how providing responsive routine care-

giving actions has the potential to turn "ordinary routine care into extraordinary caring

encounters" (p. 502) and suggests enacting a caring pedagogy has a powerful impact on

developing sensitive, positive, and reciprocal relationships between infant and teacher.

Consistent with Noddings (1984) approach to care, Shin (2014) observed infant teacher's

positive response to the feelings and wants of the "cared for", which are associated with

engrossment and receptivity, indicating care can be both an emotional and intellectual act.

Infants were also observed participating in reciprocal caring exchanges with the teachers

as demonstrated by vocalizations, body movements, and showing physical affection. Al-

though the study did not explicitly describe perceptions of care, one could imagine a pos-

itive reciprocal exchange between the "one caring" and a "cared for" could be perceived

as meaningful and rewarding for both the infant and teacher. Reciprocal caring encoun-

ters and caring dispositions continue to remain largely unrecognized in the classroom de-

spite being recognized as a central aspect of best practice. While there are several com-

plex factors which could be attributed to the absence of care in the classroom, how care is

connected (or in this case, disconnected from) professional identity has emerged through-

out the literature as a common problem for infant teachers.

Professional Identity and Care

Among the many challenges reported by infant teachers, lack of recognition and

professional status, and care being undervalued as a professional trait were frequently

indicted as significant issues (Osgood, 2010; Shin, 2014; Davis & Degotardi, 2015; Elfer

& Page, 2015; Recchia et al., 2018). According to Goouch and Powell (2013), terms such

as 'care' and 'caregiving' continue to be "maligned terms", (p.90) and they reported that

infant caregivers perceived themselves as "the lowest of the low" (p.150). Considering

the vital role infant teachers play in the EC field, this is concerning for many reasons, but

mostly because infant teachers continuously feel isolated and neglected by their own pro-

fession (Goouch & Powell 2017). Davis and Dunn (2019) argue the value of infant teach-

ers' specialized role is recognized in research, but not in the regulation and practice of the

EC field.

A recent study aimed to understand infant teachers' reflections about their profes-

sional role and how these reflections helped shape their professional identity (Davis &

Dunn, 2019). Findings revealed the infant teachers in this study made intentional peda-

gogical decisions in the classroom based on specialized knowledge and expertise. Teach-

ers felt self-aware and confident in their professional decisions and function in the class-

room, however, did not feel valued for their work. Lack of recognition by colleagues and

families was cited as being one of the biggest challenges for teachers in this study. Teach-

ers expressed that they did not receive recognition from other educators and faced resis-

tance from other untrained staff regarding pedagogical practices, responsiveness to chil-

dren and reflection, and professional development efforts. "Participants were reported

being described as lazy, for example, when they were perceived by other staff as taking

too long with nappy change as a way to get out of other tasks such as cleaning" (p.250).

Communicating to families how care is connected to learning was also a key issue be-

cause most parents had a narrow understanding of learning as more related to specific

disciplines such as math, literacy, or science. Defending their pedagogy to untrained staff

and parents was linked to deepened feelings of isolation and contributed to declining lev-

els of motivation (Davis & Dunn, 2019).

Some have expressed concerns regarding how care is conceptualized within curriculum documents in terms of professional knowledge and practice. A study by Davis and Degotardi (2015) examined how concepts of care are portrayed within curriculum framework, and how EC teachers working with infants and toddlers implemented the curriculum. Using Tronto's theory of care, the researchers examined how care is conceptualized across the Australian Early Years Learning Framework (EYLF), teachers response to how the curriculum conceptualized care, and how teachers conceptualized their own care practices. Researchers found that references to care within the EYLF were limited and statements about 'caring about' children were completely absent. Many teachers participating in the study commented on the absence of care within the curriculum documents and expressed they felt the omission of care could be perceived as dismissing care as a valid pedagogical practice (Davis & Degotardi, 2015). In short, teachers felt their national curriculum did not 'care about' care. The EYLF also failed to reflect the specialized role care plays in an infant and toddler environment, which resulted in teachers feeling their work was invisible.

The study also revealed interesting connections between caregiving and the construction of teachers' professional identity. Several teachers mentioned they felt they had a "duty to care" (Davis & Degotardi, 2015; p. 1741) for young children which suggests professional intentionality and connection with care is important to infant and toddler teachers. Taking care of children in the context of care routines was viewed by the teachers as a large part of their curriculum, however, care routines as a curriculum experience was not referenced within the EYLF. Teachers criticized the curriculum document for not

including specific verbiage on the care, specifically related to reciprocal relationships, routine care, and dispositions of care which they felt were deeply connected to their work and age group they serve. Teachers felt the curriculum implied care was separate from education and expressed the need to acknowledge care as not in conflict with teaching practices, but as fundamental to their teaching practice. Teacher conceptualizations of care in the classroom seemed to go beyond custodial care routines and were described as an ethical stance and a a necessary part of their pedagogical practice.

The findings of this study suggest care is an integral part of infant and toddler teachers professional pedagogical practice and professional identity. The absence of care from the EYLF resulted in teachers feeling the curriculum did not meet their needs or validate the work they do with infants and toddlers. Other studies (Powell & Goouch, 2013; Powell & Goouch, 2017) have highlighted the perceived low status and invisibility felt by some infant and toddler teachers. It could be argued that the exclusion of care from curriculum documents could continue to reinforce negative self-perceptions among infant and toddler teachers. Teachers know care is important, but since care has been left mostly unarticulated, this could be adding to the confusion about how it connects to practice in the classroom, and how care is conceptualized within the classroom and as a pedagogical practice (Rockel, 2009; Davis & Degotardi, 2015; Davis and Dunn, 2019). Recently, researchers have begun to realize the need to bridge the gap between theory, care, and teacher practice in the classroom. Adopting a pedagogy of care could help bridge this gap and could have significant outcomes for children, teachers, and families.

Pedagogy of Care

The discussion of a pedagogy of care in the infant and toddler classroom is limited in the literature. In fact, I would argue that discussion of pedagogy of care is only just beginning to emerge within the field of EC. The concept of care within EC is not new; however, naming care as an educational philosophy, and as way to further professionalize the field is new. Research suggests that EC teachers, specifically infant and toddler teachers, feel their work is often overlooked, undervalued, and marginalized (Davis & Degotardi, 2015; Goouch & Powell 2017; Davis & Dunn, 2019). Research also shows care to be one of the most commonly reported professional constructs of infant and toddler teachers, suggesting the practice of care does play an important role in constructing the professional identities of teachers working with infants and toddlers (Osgood, 2010; Shin, 2015). Helping infant and toddler teachers to embrace a pedagogy of care within the classroom could have significant implications for the field of EC.

Rockel (2009) defines the term 'pedagogy' as providing a theoretical and philosophical basis to teaching practice. In other words, pedagogy could be considered, in the broadest sense, the art of teaching. Based on this definition of pedagogy, a pedagogy of care is the art of caring within a professional teaching practice. A pedagogy of care unites care and education, and could be considered an intentional teaching practice and educational philosophy. Pedagogy of care recognizes that caring is relational, and requires specialized knowledge about human development, children, and learning (Garboden-Murray, 2020). It also reminds us that caring for children is more than a physical task. Opportunities to create deep connections with infants and toddlers emerge during the actual practice

of care and reciprocal exchanges, and often occur during moments of routine care. Care is rooted in ethics, respect, and requires an attitude and awareness; therefore, encouraging teachers to make intelligent decisions and judgments to ensure care promotes growth, and meets the child's individual needs (Garboden-Murray, 2020). Pedagogy of care allows us to re-conceptualize the way we enter into and sustain reciprocal relationships with children, and allows the invisible notions of care to become visible. Naming care as a pedagogy and connecting it to practice validates the work done by infant and toddler teachers, and could help elevate perceptions of professional identity.

The pedagogy of care has evolved from the work of responsive care advocates and researchers such as, Pikler (1968), Gerber (2020), Lally (2013), and Gonzalez-Mena (2011). Responsive care is the process of being aware and in tune with the needs of young children in your care, and responding in respectful and sensitive ways (Raikes & Edwards, 2009; Garboden-Murray, 2020). When responsive care occurs within the teacher and child relationship, it leads to establishing a trusting, secure attachment which is connected to healthy brain functioning, among other positive outcomes (Raikes & Edwards, 2009). Responsive care as a practice in the field of EC is linked with care ethics because it recognizes the relational nature of care begins in infancy, and is critical in developing a sense of self, meaningful connections with others, social-emotional health, and general well-being. Responsive care is also an excellent example of the inseparability of education and care because it generally views infants and toddlers as protagonists of their own learning, and the teachers who care for them as central to shaping their brain. The intention of a pedagogy of care is not to replace the practice of responsive caregiving, but

rather extend responsive care principles into a pedagogy for EC teachers. Articulating a pedagogy of care could provide EC teachers a framework for reflective dialogue where teachers continually re-examine their practice, values, and ethical perspectives. As Shin (2014) argued, enacting a pedagogy of care in the classroom can help teachers provide infants and toddlers with 'extraordinary' care, as opposed to 'ordinary' care, simply by valuing a caring environment as a highly professional and educational setting.

Further Directions and Final Thoughts

Moving towards a pedagogy of care, the field of EC should begin to embrace care as a core aspect of EC professional practice. The synthesis of the literature presented in this paper reinforce the need for more research in EC infant and toddler settings, specifically, how infant and toddler teachers perceive the role of care in relation to professional identity, and how care in infant and toddler settings can be integrated as a pedagogy. Current research on care seems to be dominated by countries such as: Australia, New Zealand, and Canada. Research regarding care from the U.S. is minimal which suggests it may be time for the U.S. to enter the care research arena to explore how care is conceptualized by U.S. EC teachers, and advocate for care as a vital public good.

To move the field forward, there are several future directions for researchers to consider. Further research could investigate how care practices are implemented in EC classrooms using an ethic of care (Nodding, 1984; Tronto, 1998) to analyze and interpret the complexities of care. It would also be important to further understand EC teachers' perceptions of care, particularly for infant and toddler teachers. Investigating how teachers view learning in care, and interpretations of care as a curriculum in an infant and tod-

dler setting could have important implications for the unique and complex work of infant

and toddler teachers. This type of research could also assist in reexamining the role of the

teacher in infant and toddler settings. Additionally, I propose we find ways to include

some of the most overlooked participants in research, children. Infants and toddlers are

entitled to agency and rights regarding their learning, but we know little about what is at

the heart of what they think, perceive, and of their lived experience. Future research

which highlights perceptions of children, especially infant and toddlers, may help to cul-

tivate an image of infants and toddlers as agents of their own learning rather than only

having needs. Finally, the field of EC in the U.S. could draw upon current pedagogical

understandings from EC curriculum documents such as Te Whāriki in New Zealand, and

the EC curriculum for the state of South Australia. Despite coming from varying cultural

contexts, these documents offer an interesting perspective on how to clarify the signifi-

cance of pedagogy within EC. These curricula include definitions and descriptions of

pedagogy and in general, describe the relationship between pedagogy and curriculum.

For example, the state of South Australia (Department of Education and Children's Ser-

vices, 2005) provides a succinct definition of pedagogy:

1. The function, work, and art of educators

2. The science and art of putting tougher learning processes and teaching actions

3. How you put into practice your values and beliefs about care and education

within your setting/environment.

U.S. national curriculum documents (e.g. National Association for Education of Young

Children) and state early learning curriculum standards should consider articulating spe-

cific verbiage regarding pedagogical practices and the value they possess. Articulating the term 'pedagogy' and the importance of its integration into EC practice may encourage teachers to cultivate critical thinking, reflection, and increase perceptions of themselves as researchers.

For years, EC teachers, particularly infant and toddler teachers, have been fighting to legitimize their role within the field of education. Although care is an integral part of EC, somehow it has become easier to hide the role of care from our field to establish ourselves as professionals. We can no longer afford to ignore care and must begin to re-assert care as foundational to the practice of EC. Infant and toddler teachers should be encouraged to reassess the problematic nature of glossing over care routines, and prioritize ethical care encounters on a daily basis. When we prioritize the practice of care and conceptualize it as a pedagogy, this provides opportunities to uplift the professional work done by infant and toddler teachers, paves the way for future dialogue regarding ethical and philosophical ideas, and elevates the quality of care for children.

APPENDIX: PRACTIONER ORIENTED FRAMEWORK

The purpose of this document is to provide foundational knowledge regarding a framework of a pedagogy of care for infant and toddler teachers. The document was created to specifically provoke thinking about the features of a pedagogy of care and how they can be applied in a teaching practice. Additionally, resources are included to deepen teacher's thinking regarding a pedagogy of care, how it is related to the field, and professional practice.

Pedagogy of Care: A Framework

Care is a universal concept which connects us all as humans. Everyone comes into this world needing care and most of us will exit this world in need of care. Care is necessary throughout the span of our lives and should be considered a human right. Everyone is entitled to quality care, no matter their age or social status. The U.S. society has been entrenched in a decades long division between education and care which has historically prioritized education over care. This division has contributed to care being hidden and undervalued within the context of EC as a vital aspect of teaching practice. As a result, care has become associated with custodial tasks which can be done by anyone and with little training or specialization. It is time for EC teachers to reclaim and reassert care as integral to the field of EC. Embracing pedagogy of care would lift care from being considered custodial and help to elevate it as an intentional teaching practice which could be implemented across all classrooms.

A pedagogy of care does not fit into a "how-to" format, however, it can be articulated within a broad educational framework. Although not exhaustive, this document includes features of a pedagogy of care which are supported by empirical research and aims to help EC teachers who are interested in considering adopting a pedagogy of care in their practice. These features are critical components of a pedagogy of care that may help guide EC teachers as they begin to consider development of caring relationship within their environment. This framework is meant to provoke discussion regarding: care in the context of EC, how we can leverage the power of care to strengthen our professional practice, and how implementing a pedagogy of care may enhance care for young children.

A Pedagogy of Care…

Views children as capable, competent learners who possess agency and the ability to express their desires.

✳ A pedagogy of care honors young children's agency and competency, beginning from birth. Children are protagonists of their own learning and have the ability to make choices that impact their play, environment, and relationships with caregivers.

✳ Children are regarded as worthy of respect, love, and freedom of choice.

✳ Children are viewed as powerful, active learners-not "cute" or "empty-vessels" waiting to be filled with knowledge.

Views teacher as researcher, facilitator, and partner in learning.

✳ The role of the teacher is to guide, scaffold, and partner with children in their learning journey.

✳ Pedagogy of care perceives the relationship between teacher and child as a partnership, and is practiced as a reciprocal exchange.

✳ As teacher-researchers, inquiry is used to guide our caring practices. The pedagogy of care asks teachers to inquire, observe, actively listen, document, and know the children we care for well.

✳ Reflective questions help teachers become researchers of care, caring partnerships, and how it is received in their environments (e.g. "I noticed Sarah retreats to her cub-

by during the busy lunch transition. I wonder how we can use this observation to help

her be more successful during this time?" "Kevin seems to be having a difficult time

grasping the small bits of fruit. What other ways can we offer food to help him master

this emerging skill?").

Allows the specialized work of infant and toddler teachers to become visible and provides distinction of the unique role of infant and toddler teachers.

✳ Enables teachers to nurture not only self-actualization of children, but of themselves
    as professionals in the field.

✳ A pedagogy of care clarifies and makes visible the complex role and responsibility of
    the infant and toddler teacher by naming care as a core value and practice within the
    classroom.

✳ Connects teacher's values and care practices to ethical perspectives, theory, and re-
    search.

✳ Provides professional framework which may help to increase positive perceptions of
    professional identity. A pedagogy of care names care a both a personal and profes-
    sional practice, and attempts to celebrate care, not obscure it.

Unites care and education.

✳ Early learning standards are embedded within caring routines such as: mealtime,
    dressing, rest time, and toileting/diapering.

✳ Care is not a set of menial custodial tasks which only involve the body and education is not only reserved for the mind. Children do not separate educational and non-educational moments, all moments have the potential to be learning experiences.

✳ Care is education. Recognizing time spent in caring rituals as educational has the potential to place care at the heart of teaching and honors young children's intelligence and perspective of what it means to learn how to be human.

✳ Authentic learning can be nurtured through rich experiences which occur during routine care such as: eating together, learning to pour milk, practicing putting shoes on, playing, and while changing diapers. Education grows from the relationship that results from caregiving.

Recognizes care as a right and a public good.

✳ Care should be available and accessible to all children and families as a public good.

✳ Valuing care as a right recognizes children as citizens who are (and should) be invited into the culture of responsive care.

✳ Care as a right means advocating for family support, a comprehensive understanding of care, policies which invest in expanding care rights for all citizens, and strengthening well-being for families.

Acknowledges care as an educational philosophy and intentional teaching practice.

✳ Connects teacher's values and care practices to ethical perspectives, theory, and research.

✳ A pedagogy of care recognizes the expressive art of caring which encompasses respectful, intentional, and intelligent care relationships.

✳ Viewing care as a practice implies it is something teachers can become better at through growth, reflection, and refinement of skills. When we name care as a pedagogy, the invisible acts of caring such as pace, tone, listening, and attentiveness to become visible, thus inviting us to see aspects of teaching practice we may not have previously articulated or analyzed.

Involves integration of ethic of care into classroom practices and adult-child interactions.

✳ Pedagogy of care repositions care as an ethical approach which can be applied to all teaching practices, relationships, classrooms, and to all children.

✳ Adults working with children have a moral responsibility to uphold an ethic of care within their classrooms.

✳ A pedagogy of care is grounded in care ethics and encourages teachers to embrace an attitudinal shift regarding how we create and sustain reciprocal relationships with children. Reciprocal relationship and caring encounters are learning experiences for young children.

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