**Unit One** addressed the big picture of labor market realities—which industries are growing, which are shrinking, and technology’s impact on the market. Students interpreted graphs and charts depicting recent employment trends in Construction and learned about a wide range of careers in the sector. They also learned about how technology has impacted the sector, what a labor union is, and the various types of career families and employer types available in Construction.

**Unit Two** addressed the inner workings of the job-seeker. What are her interests and passions? What kind of work environment will she enjoy? What careers should she consider based on what she knows about herself and what factors might influence someone making a career change? Students also learned to navigate career database websites, assess their own interests and conduct a group research project about careers in the Construction sector.

In **Unit Three**, students heard from Construction workers themselves, through firsthand accounts and interviews from workers in text and video. They developed informational interview questions and conducted further research on Construction careers of interest.

In **Unit Four** students considered what it takes to prepare for a career in Construction. They learned about common career pathways in the industry and considered how career movement happens in Construction careers. Students also explored the kinds of training and education opportunities available for someone interested in this field.

In **Unit Five**, students learned how to leverage their existing and potential professional networks for job seeking, explored the job search process, including analyzing help wanted ads, assessing job offers, and engaging with a panel of Construction professionals. They also learned how to become entrepreneurs by reading about Construction workers who have started their own businesses and using online resources from New York City’s Office of Small Business Services.
In **Unit Six**, students looked at the Construction sector from a consumer’s perspective. They learned about the types of housing available in New York, how to find an apartment or house, and what to do if their housing is unsafe. They learned how changing demographics impact the amount and cost of housing available. They learned home maintenance literacy—the tools and tasks they can do on their own, while waiting for a landlord or building manager to make the repair.

**Unit Seven:** Why should a unit on parenting be included in a resource guide about careers? Parenting is the oldest job in the world, and some have argued the most important. In addition to paid jobs, many students also have the unpaid job of parenting. Just as they can learn about the sector in which they currently work or hope to work, students can also learn the latest research on parenting and how it relates to the well-being and educational attainment of their children.
1. **TALKING TO BABIES**

Students read an article about the benefits of talking to babies, write short answer questions about the article, discuss vocabulary in the article, and write sentences about the article using the terms.

2. **AGES AND STAGES OF CHILD DEVELOPMENT**

Students read charts about the ages and stages of childhood development, brainstorm ways parents can help healthy childhood development, learn about the corresponding stages of parental development, then try to predict the specific actions parents can take during each stage.

3. **INTERGENERATIONAL EDUCATION: A PRESCHOOL IN A NURSING HOME**

Students watch a short video about a preschool in a nursing home, and consider the benefits and careers involved.

4. **ATTACHMENT AND BRAIN DEVELOPMENT**

Students read about the relationship between attachment and brain development, and work to identify two main ideas from the article and their supporting ideas.

5. **COMMUNICATING WITH TODDLERS**

Students read a New York City Department of Health pamphlet on strategies for communicating effectively with children. They then explain the reasons why these tips are recommended. Finally, they put the tips into practice through role plays.

6. **FAMILY LITERACY: SHARING BOOKS TOGETHER**

Students learn about building literacy skills in small children, read and annotate an article to identify the main idea and supporting details, and write a brief summary of the article.

7. **CHILDHOOD VACCINATIONS: WHY SHOULD I VACCINATE MY CHILD?**

Students read an informational article about childhood vaccinations, answer an FAQ sheet and peer review each other's answers. They also discuss a graph showing the decrease in preventable diseases, as well as recent cases of these diseases in the U.S.

8. **NEW YORK CITY COMMUNITY HEALTH PROFILES**

Students research the NYC Community Health Profile for their own neighborhoods and make presentations on their findings to the class.
9. **WHEN PARENTS GO BACK TO SCHOOL, THEIR KIDS BENEFIT**

Students read, annotate and discuss an article about the benefits low-income children receive when their parents return to school, and then write a letter of advice to a parent who is considering going back to school.

10. **COMMUNITY AND FAMILY RESOURCES**

Students will research a variety of community resources available to parents, examine scenarios of different parents, and match them with the appropriate resource.

11. **READING A NEW YORK CITY SCHOOL EVALUATION**

Students analyze an evaluation of a New York City school, practicing making bar graphs from data presented. They also consider what they would be looking for in a school for their children if they are parents, or what they would have wanted in their own high school experience.

12. **WE ARE NEW YORK: WELCOME PARENTS**

Students watch a video from the We Are New York video series titled, “Welcome Parents,” make predictions about the video’s content, practice taking notes, and write questions for their classmates to answer based on what they learn.

13. **WE ARE NEW YORK: STAY IN SCHOOL**

Students watch a video from the We Are New York video series that depicts a boy who is struggling with the decision to stay in school or drop out to help his family make ends meet and develop character maps for the two main characters.

14. **WRITING ACTIVITY: ADVICE FOR TEACHERS**

Students will reflect on a moment in their past that an educator or educational experience helped them develop. They will complete a three-paragraph writing assignment about this experience, conduct peer reviews, and revise their writing. Rather than focus on one writing strategy, this activity is designed to be flexible and invites teachers to use the activity as is (good for lower level students) or incorporate a focus on a specific writing skill of their choosing, such as topic sentences, paragraph structure, or transitional sentences.

15. **TASC ARGUMENTATIVE ESSAY: THE SCREEN TIME DEBATE**

Students read and discuss the pros and cons of screen time for young children. Using evidentiary reasoning from articles and their personal experience, students write an argumentative essay about the issue. The argumentative essay is a type of essay that appears on the TASC exam.
Talking to Babies

Students read an article about the benefits of talking to babies, write short answer questions about the article, discuss vocabulary from the article, and write sentences about the article using the terms.

*Note: This activity uses a New York City public health message which is applicable to families regardless of location.*

**PREP**

- Read *The Importance of Talking to Babies*.
- Write the definitions on the *The Importance of Talking to Babies* worksheet for use in class discussion.

**MATERIALS**

- *Talking to Babies* poster
- *The Importance of Talking to Babies* article
- *Talking to Babies* worksheet

**EXPLAIN**

1. Distribute or show on an overhead the *Talk to Your Baby* image. Ask students to describe things they think the adult and baby in the image are doing:
   - **Adult:** *Talking, making eye contact, smiling, possibly naming things, like the duck, for example.*
   - **Baby:** *Listening, making eye contact, possibly making or mimicking sounds, possibly touching the duck, possibly mimicking the adult's movements.*

2. Ask students why they think the City of New York is encouraging adults to talk to babies.

3. Write the following sentence on the board:

   **Babies learn best from educational television programs.**

4. Ask students to discuss their opinions of the sentence on the board. They should say which they agree with and why. Discuss the importance of finding evidence for opinions. This skill is essential on the TASC.
Distribute *The Importance of Talking to Babies* article and ask students to read and annotate it, underlining any unfamiliar words and marking anything they find interesting, surprising or confusing.

When students are finished, ask them to work in pairs to identify the main idea and at least three pieces of evidence from the article that support that main idea. They should underline the parts in the article that the author uses as evidence. Share responses with the class.

Distribute the *Talking to Babies* worksheet and ask students to complete it.

Distribute *Terms from The Importance of Talking to Babies* and ask students to complete the center column. They should use the article for context clues.

When students are finished, discuss the terms and definitions.
Talking to Babies poster

http://www1.nyc.gov/site/talktoyourbaby/index.page
The Importance of Talking to Babies

By Alice Sterling Honig

Source: http://www.scholastic.com/browse/article.jsp?id=893

Q: I keep hearing that it’s important to talk to my new baby all the time. Why?

A: Talking to your baby gives him a good start on language development. Start by talking with him every time you carry out any routine caring tasks. As you pick him up from the crib, tell him, “I am picking you up, lovey. Then we will get a diaper change and make you all comfy. Then mama will nurse you.” As you keep on talking and explaining to your tiny baby, a miracle will occur. Baby will learn from the cadences and tones of your voice that you keep your promises. You are someone he can trust. Soon, he will not fuss to nurse or take a bottle immediately, but will learn to wait a bit until he is dry and clean again. Your talking teaches baby the power of words. This begins the process of intimate attachment and builds a trusting relationship.

Turn-taking

Answer all your baby’s gurgles, coos, and smiles with delighted expressions and coos of your own. Tell him, “I love the way you are saying ah, ah, ah. What a nice sound you are making.” Later, you can imitate baby’s beginning consonants and turn them into duplicated babbles such as “mamama” or “bababa.” As baby starts to make these babbling sounds, express your pleasure. “What nice talking! I love to hear you talk. Tell me more!” Be sure to give spaces in between your talking so that baby can talk back with babbles and more vocalizing on a variety of pitches.

Learning new words

Diapering or bathing is a good time to teach body parts. Gently caress the tummy and say “What a nice round tummy!” When you wash his arms or legs, label those body parts too. Similarly, when you dress or undress your baby, explain what you are doing. “First we put in one little arm. Then in goes your other arm.” “One
shoe for these pretty toes on one little foot. Now the other shoe for your other little foot.”

When you serve foods to your baby in the second half of the first year, be sure to tell him the names for each food. “Mmmm. Yummy carrots!” As he takes a mouthful of rice cereal, tell him, “You are eating your cereal. Good for you. Nice warm cereal.” When your baby can grasp a biscuit or a banana or a slice of peeled apple, be sure to give him the power to hold his own food and chew on it. Admire him with words. “What a big fellow! You are chewing and chewing on your biscuit. Yum, yum, yum!”

**Rhythms, rhymes, and games**

Recite simple nursery rhymes while you hold baby on your lap and bounce him gently to the rhythms of the rhymes. Sing nursery songs over and over until he lights up with recognition at these songs that soon become favorites. Don’t worry about your voice. Baby will enjoy your songs because you are singing them!

Play simple games, such as saying “Ah…boom!” as you reach forward and gently touch foreheads with your five-month-old baby as he sits on your lap facing you (hold him firmly). Also play pat-a-cake, at first by guiding his hands. Later in the first year he will delightedly join in the game by starting to clap hands together as soon as he hears the first words of this well-loved rhyme. Play peek-a-boo (use a soft, light cloth so baby will not be frightened if you hide his face). Play “so big” with your baby and use exaggerated hand motions he can learn to imitate. As you carry out these daily rituals of rhymes and chants and songs, your baby will begin to associate pleasure with words and cadences.

**Reading**

Of course, share picture books with your baby. Once he can sit fairly well balanced on your lap, leaning with his back against you, you can look at the interesting pictures together. Respond with delight at baby’s first excited babbles on seeing a picture of a doggie, a baby swinging, or a daddy rolling a ball to a baby.

Turn-taking talk, sharing rhythms and rhymes, rich responsive talk when your baby babbles, and early, leisurely picture book sharing will all boost a love of language.

**ABOUT THE AUTHOR**

*Alice Sterling Honig, Ph.D.*, is a professor emerita of child development at Syracuse University. She is the author of *Secure Relationships: Nurturing Infant-Toddler Attachments in Early Care Settings*. 
Talking to Babies

Answer the following questions in complete sentences. Make sure the answers are in your own words.

1. Why does the article recommend talking to babies?

2. When should adults talk to babies, according to the article?

3. Why should adults encourage babies to make babbling sounds?

4. According to the article, why should adults read to babies, even if the babies don’t understand the words?

5. What should adults talk with babies about?
Terms from *The Importance of Talking to Babies*

Complete the chart by writing in the center column what you think the words below mean.

<table>
<thead>
<tr>
<th>TERMS</th>
<th>WHAT I THINK IT MEANS</th>
<th>DEFINITION</th>
</tr>
</thead>
<tbody>
<tr>
<td>Routine</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Consonants</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Express</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Pitch</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Vocalize</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Admire</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Recognize</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Exaggerate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Associate</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Imitate</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Ages and Stages of Child Development

Students read two charts about the ages and stages of childhood development, brainstorm ways parents can help children develop healthily, suggesting the actions parents can take during each stage to support their children.

MATERIALS

- Ages and Stages of Childhood Development infographic and worksheet
- Brain Development—How You Can Help Your Child Learn and Grow infographic

EXPLAIN

1. As babies grow into children, adolescents, and teenagers, they move through different stages of development. During each stage of development they are learning how to do new and different things. There are many ways adults can help children grow and learn throughout the stages of childhood development.

2. Distribute Ages and Stages of Childhood Development infographic. Ask students to read and annotate it, marking anything they find interesting, surprising or confusing.

3. When students are finished, distribute Ages and Stages of Childhood Development worksheet. Have students get into pairs and complete the worksheet, brainstorming ways in which parents might be able to help children learn and grow during each stage of development. When students are finished, each pair shares their brainstorms with another pair.

4. Distribute Brain Development—How You Can Help Your Child Learn and Grow infographic and let pairs review it together and discuss:

   Are your suggestions similar to or different from the suggestions on the handout? Are there any more you might add?

5. Ask students to get in pairs and make a list:

   What are some careers where it would also be necessary or helpful to understand the stages of childhood development and what caregivers can do to help support healthy development? Why/How would it help?

   > Childcare worker
   > Any career in social work that deals with infants and/or small children
   > Healthcare worker at a children’s hospital or pediatrician’s office
   > Teacher of small children

6. When students are finished, have pairs share and discuss with the whole class.
Ages and Stages of Childhood Development

**Birth to 3 Months**
- I begin to smile and track people and objects with my eyes.
- I prefer to look at faces and bright colors.
- I reach, and discover my hands and feet.
- I can lift my head and turn toward sound. I cry, but will feel better when you hold and comfort me.

**4 to 6 Months**
- I smile often. I’ll even laugh, gurgle and imitate sounds.
- I learn about my body, exploring my hands and feet. I think they are a part of me!
- I can sit up when you prop me.
- I like to roll over, scoot and bounce.
- I can grasp things without using my thumb, and like to put things in my mouth.

**7 to 12 Months**
- I remember simple events and familiar voices and identify myself in the mirror.
- I understand my name and other words you use a lot.
- I can say my first words.
- I like to explore, bang and shake objects.
- I can find hidden toys and put things in containers.
- I can sit up all by myself.
- I creep and can pull myself up to stand and walk.
- I’m shy and sometimes people I don’t know make me feel scared.

**1 to 2 Years**
- I like to imitate what adults are doing and help you with tasks.
- I can talk now and understand words and ideas.
- I like stories and experimenting with things.
- I can walk, climb stairs and run.
- I show you my independence, but am more comfortable with people I know.
- I recognize that toys and stuff are mine.
- I’m proud of the things I can do and can solve simple problems.
- I have some friends and am starting to play make believe.

**2 to 3½ Years**
- I like to learn new things.
- I can learn new words really fast now.
- I always like to be on the go.
- I have better control of my hands and fingers.
- I get frustrated easily.
- I act more independent, but I still depend on you.
- I like to act out familiar scenes when I play.

**I’m Growing Up & Learning Independence**

**3½ to 5 Years**
- I have a longer attention span.
- I act silly, boisterous and use language that isn’t nice.
- I talk a lot now and ask a lot of questions.
- I want real adult things and keep the art projects I make.
- I test my physical skills and courage with caution.
- I reveal my feelings to you in dramatic play.
- I like to play with friends, but I don’t like to lose.
- I sometimes share my stuff and take turns.

**5 to 8 Years**
- I am curious about people and how the world works.
- I am interested in numbers, letters, reading and writing.
- I have more confidence now in my physical skills.
- I use words to express my feelings and to cope.
- I like grown-up activities.
- I like to meet and play with more kids and I play more cooperatively now.

Complete the chart below writing what parents can do to help children in ways that are appropriate to each developmental level.

<table>
<thead>
<tr>
<th>AGE AND STAGE OF DEVELOPMENT</th>
<th>Birth to 3 months</th>
<th>4–6 months</th>
<th>7–12 months</th>
<th>1–2 years</th>
<th>2–3 1/2 years</th>
<th>3 1/2–5 years</th>
<th>5–8 years</th>
</tr>
</thead>
</table>

**HOW PARENTS CAN HELP CHILDREN LEARN AND GROW**
Brain Development—How you can help your child learn and grow.

Frontal Lobe—Concrete Thinking (3 to 12 years)
- Have me sort and categorize objects.
- Encourage problem-solving. Let me be frustrated sometimes as I figure something out.
- Help me notice patterns. (“When you do X, this always happens.” “After we do Y, we always...”)

Parietal Lobe—Language (Birth to 6 years)
- Talk to me, sing to me, read to me.
- Listen to me and respond.
- Read the same stories or sing the same songs over and over so I learn to memorize.

Parietal Lobe—Touch (Birth to 6 years)
- Touch me—hug me, hold my hand, massage me.
- Give me lots of objects to manipulate.
- Let me explore the world hands-on—pulling, pushing, pouring, picking up, cropping, turning, twisting, opening, and closing.

Prefrontal Cortex—Judgment (12—22 years)
- Give me choices (when I’m calm... I can’t make choices when I’m stressed or upset).
- Talk to me about plans.
- Help me break down big tasks into little steps.

Thought, memory and behaviour

Language and touch

Visual processing

Balance and coordination

Breathing, heart rate and temperature

Temporal Lobe (Birth to 6 years) and Limbic System (8 months to 2 years)
- Respond in consistent ways.
- Show me unconditional love.
- Experience joy with me.
- Talk to me about my emotions. Give me the vocabulary to understand how I feel.

Occipital Lobe (Birth to 2 years)
- Surround me with interesting things to look at.
- Play games where I follow things with my eyes.
- Make sure I have plenty of outdoor time to develop distance vision.

Cerebellum (Birth to 1 year)
- Let me move—a LOT.
- Take me to playgrounds and swimming pools.
- Dance with me. Let me wiggle, roll, and jump.
- Let me take some “risks” while I learn to move.

Brain Stem (Birth)
- Help me feel emotionally and physically safe.
- If I am frightened or stressed, my brain goes into survival mode (brain stem function), and the rest of my brain can't grow and develop. When I feel safe, I can learn.

Note: Timelines given is the “sensitive period” when that part of the brain is growing and developing the most. The brain grows and changes throughout our lifetimes.


Illustration: Macmillan Cancer Support 2012
Intergenerational Education: A Preschool in a Nursing Home

Students watch a short video about a preschool in a nursing home, and consider the benefits and careers involved.

MATERIALS
- Computer with internet, projection and sound is required for this activity.
- Benefits of Intergenerational Exchange worksheet
- Intergenerational Program Staff worksheet

EXPLAIN
1. Ask students to take out a fresh piece of paper and do a freewrite on an elder in their life who taught them something. It could be a relative or an elder unrelated to them. It could be an employer or co-worker, neighbor, family friend, congregant, even someone on the street, subway or barber shop. Include:
   - Who was the elder or what was your relationship?
   - What did you learn from this elder? Include three details.
   - What made this experience memorable?
   - How did this experience affect you?

2. Students briefly share their experiences in a class discussion. What did they learn from the elder? Why was it memorable? Generally, what is the role of elders in their lives, currently or when they were younger? Is your relationship to elders similar to or different from the relationship your parents' generation has or had with their elders? How?

3. We’re going to watch a short video about a preschool based in a nursing home. Three, four and five-year-olds have their classroom located inside a nursing home. The nursing home residents join the kids in their classroom, taking part in activities together. Imagine the activities done in preschool. Now imagine the elderly participating in these activities. If you were the director of a preschool, why would you choose to place a preschool in a nursing home?
Exchange between children and the elderly is mutually beneficial. Each group will likely be charmed and fascinated by the other, and might be reminded of the elders and youth in their own families. There are similarities between the populations — both may have limited mobility, children, because their bodies are still developing, and elderly because their bodies are becoming less robust. Due to their stages of physical development, both populations may need help with routine tasks, such as eating and walking. Both populations have time to enjoy their surroundings, such as nearby plants and animals. Both may be pondering philosophical questions, such as what happens at the end of life, and feeling extra appreciation for those closest to them. They may enjoy similar activities, such as making crafts, listening to music or dancing. Both may enjoy listening to or telling stories.

Have students turn to a partner and brainstorm the benefits of this kind of intergenerational programming, and any possible risks or downsides.

**EXPLAIN:** Take one piece of paper between the two of you, draw a vertical line down the center, write “Benefits” at the top of one column, and “Risks” or downsides at the top of another. Then fill in each column with your ideas of Benefits and Risks of elderly and preschoolers participating in activities together.

When students are finished brainstorming, navigate to [http://www.presentperfectfilm.com/](http://www.presentperfectfilm.com/). Click on **About** and play the video.

When the video is finished, ask students to add to their lists of Benefits and Risks, based on information from the video.

Pairs share their responses.

Distribute the two-sided **Benefits of Intergenerational Exchange** worksheet and ask students to complete it in pairs.

Distribute **Intergenerational Program Staff** and ask students to complete it, writing staff they think would be required at a joint elderly-preschool program, such as the one in the video.
**Benefits of Intergenerational Exchange**

Complete the chart below based on what you saw in the video, writing the benefits to the preschoolers, elderly, preschool staff and elderly staff.

<table>
<thead>
<tr>
<th>Benefits to Preschoolers</th>
<th>Benefits to Elderly</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Benefits to Preschool Staff</th>
<th>Benefits to Geriatric Staff</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Intergenerational Program Staff

Below list careers necessary in intergenerational programming. List the staff you saw in the video, as well as others who would be necessary at a facility like The Mount. Consider every career that is necessary to make The Mount run well.

1.

2.

3.

4.

5.

6.

7.

8.

9.

10.

Would you like working at The Mount? If so, in what career? Explain why or why not.
Attachment and Brain Development

Students read about the relationship between attachment and brain development, and identify two main ideas from the article and their supporting ideas.

MATERIALS

• Attachment and Brain Development article
• Identifying Significant Ideas: Attachment and Brain Development worksheet

EXPLAIN

1. Scientists have learned that 90% of the human brain’s development and sense of security happens by the age of five. Since so much development happens so early, they wondered what parents could do to support babies and young children to develop healthy brains. They found out that the ways parents and caregivers attach with babies and young children has a huge effect on brain development and their sense of security.

2. Distribute the Attachment and Brain Development article. Ask students to read and annotate it, marking anything they think is important, interesting, surprising, or confusing. They should also underline any unfamiliar words.

3. When students are finished, distribute Identifying Significant Ideas: Attachment and Brain Development worksheet and have them complete it in pairs.

4. Ask pairs to share their responses, identifying the main ideas, supporting ideas and where they found the quotations.

5. Discuss the author’s career path in child development:

Within the area of child development, what is the author’s area of specialization?

➢ The impact of trauma on children.

What is trauma? What are some examples of traumatic events?

➢ Trauma is when something violent or disturbing happens that is out of the ordinary, can be a shock, and may not have the skills to cope with effectively. Being a victim of or witness to physical, emotional or psychological abuse is trauma. Being hungry or homeless is traumatic.

Why would someone be interested in working with children who have experienced trauma?

➢ They are empathic and want to help people who have experienced hardship.
Attachment and Brain Development

Source: http://advocatesforchildren.net/502/

Strengthening the Brain
A child’s brain is literally shaped over time by the daily interactions he or she has with parents and caregivers. When relationships are nurturing, responsive and predictable it creates a foundation for healthy brain architecture. It allows for trillions of connections to take place that help to organize the psycho-biological systems related to stress and coping. Children who experience more stress because their physical and emotional needs go unmet secrete higher levels of cortisol, which disrupts healthy development. What’s more — during the first three years of life — feelings of trust develop in children at the same time when trillions of connections are forming in the language, intellectual, sensory and motor areas of the child’s brain. Connections only become permanent when they are repeatedly stimulated through a child’s environment: Every time you respond to your child with a smile, a hug, or eye contact it strengthens your child’s brain.

This doesn’t mean you need to be a perfect parent. But it DOES mean that you need to be aware of when you are feeling stressed, distracted or otherwise emotionally unavailable for your child. Your child is programmed to read your nonverbal cues and will easily pick up on your stress or tension and internalize those same feelings.

It also means reflecting on your own childhood to understand if you experienced secure attachment as a child with your own parents. Fortunately, barriers to secure attachment can be overcome if parents seek the support they need. There are many resources to help parents learn about child development and what they can do to better the emotional attachment with their child.

So What Does Secure Attachment Look Like?
Secure attachment is built in small everyday moments. It means being tuned into your child’s inner emotional state while getting them dressed, making dinner, during bath time or as you are putting them to bed. It requires both parent and child to be able to focus intently on each other. During playtime, it means following your child’s pace and communicating in words and in gestures that you are having fun and you enjoy spending time with your child. It also means allowing your child to initiate and end interactions between you; maybe you postpone taking a picture of your baby when he turns his head away from you or you respect that your toddler needs to be held quietly in the
middle of a chaotic moment. Secure attachment requires regular eye contact, relaxed facial expressions, and calm tone of voice, soft touch, and slowing down your adult pace to match that of your child.

A child that experiences a secure attachment will be better able to control his or her emotions and will be more easily soothed; the child will feel confident to explore the environment in the presence of their parent and will temporarily protest when their parent leaves the room; they will also seek out their parent when needing comfort, such as after bumping their head. On the contrary, a child may be experiencing an insecure attachment if they often cry or throw tantrums, seem anxious or hyper vigilant, or are disengaged or tuned out from their environment.

For young children, healthy development occurs within the context of a strong parent-child bond. Providing your child with a secure attachment experience is the greatest gift you can give to your child. It will not only impact their development and health during early childhood but has also been shown to be the primary predictor of how well your child will do in school and in life. In other words, relationships don’t just support healthy development—they directly impact how healthy your child will be during their entire lifetime.

ABOUT THE AUTHOR:

Gillian Roy is the Program Manager for Maine Families Androscoggin Home Visiting, a program of Advocates for Children in Lewiston, Maine. She holds a Master’s Degree in Child Study from Concordia University. As a graduate student she became interested in studying the impact of trauma on children, specifically the ways trauma influences a child’s development; her research and daily work has taught her that when a child is connected to one adult that loves and nurtures them this relationship can diminish the impact of trauma.
# Identifying Significant Ideas: Attachment and Brain Development

Identify two main ideas from the article. Then identify ideas that support the main idea, and include supporting quotations from the article.

<table>
<thead>
<tr>
<th>Main Idea</th>
<th>Supporting Idea</th>
<th>Quotation of this Idea</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Main Idea</th>
<th>Supporting Idea</th>
<th>Quotation of this Idea</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Communicating with Toddlers

Students read a New York City Department of Health pamphlet on strategies for communicating effectively with children. Drawing on their own experiences with communication, they explain the reasons why these tips are recommended.

NOTE: This activity contains a public health message from New York City, but is applicable to communicating with toddlers regardless of location.

MATERIALS

• Healthy Parenting info sheet
• Healthy Parenting: How and Why worksheet

DISCUSS

1 Because communication with young children has such a big impact on their development, the New York City Department of Health has produced a pamphlet of tips for caregivers about communicating with toddlers.

2 Distribute Healthy Parenting. Ask students to read it and complete the Healthy Parenting: How and Why worksheet in pairs, using their own knowledge and experience of effective communication.
Healthy Parenting Info Sheet

Enjoy Your Child!

Love and attention are as important as food and a place to live.

- Children whose parents enjoy them feel safe, loved and valued.
- You don’t have to wait for just the right moment to give your child what he needs. What your child needs most is YOU.
- Make ordinary things count! Have fun with your child at the corner store, in the park, at the supermarket.
- Sometimes all your child needs is a touch or a smile to show her you care.

Teaching Your Child to Listen

1. Get your child’s attention.
   - Get close. Make eye contact.
   - Children are more likely to listen when you are close by.

2. Tell your child what to DO (instead of what NOT to do).
   - Change “don’t” to “do.”
   - Say: “Please walk instead of running.”
     Instead of: “Don’t run.”

3. Be clear and specific.
   - Say: “Put your toys in this basket.”
     Instead of: “Be good and clean up.”
   - Say: “Put on your jacket and bring your backpack.”
     Instead of: “Get ready to go.”

4. Use fewer words.
   - Kids tune out when adults ramble on.
   - Keep it simple!
     - “Wash hands before dinner.”
     - “Homework first, then TV.”

5. Don’t back yourself into a corner.
   - Try “when” instead of “if.”
   - Say: “When you finish your lunch, you can go outside.”
     Instead of: “If you don’t finish your lunch, you can’t go outside.”

6. Use a normal tone of voice.
   - The louder you get, the less effective you are.
   - When adults yell, children know you’re out of control. They stop listening.

# Healthy Parenting: How and Why

Healthy Parenting gives several tips for communicating effectively with children. Based on your own knowledge of communication, write at least two reasons for each tip.

<table>
<thead>
<tr>
<th>Healthy Parenting Tip</th>
<th>Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Make eye contact.</td>
<td></td>
</tr>
<tr>
<td>Tell the child what to do instead of what NOT to do.</td>
<td></td>
</tr>
<tr>
<td>Use specific language.</td>
<td></td>
</tr>
<tr>
<td>Use fewer words.</td>
<td></td>
</tr>
<tr>
<td>Say “when” instead of “if.”</td>
<td></td>
</tr>
<tr>
<td>Use a normal speaking voice.</td>
<td></td>
</tr>
<tr>
<td>Confirm (confirmation)</td>
<td></td>
</tr>
<tr>
<td>Pediatrician</td>
<td></td>
</tr>
</tbody>
</table>
Family Literacy: Sharing Books Together

Students learn about building literacy skills in infants, toddlers and children, read and annotate an article to identify the main idea and supporting details, and write a brief summary of the article.

PREP

- Read the article, *Sharing Books Together*
- Be prepared to explain vocabulary: imitate, vinyl, language delay

MATERIALS

- *Sharing Books Together* article
- *Main Idea and Supporting Details* worksheet

EXPLAIN

1 **Quick write:** Experts believe that reading together offers many benefits to children. Write what you think the benefits are and why you think they are beneficial to children.

   - Having positive experiences of reading with a caring adult, sharing books becomes routine and something that children expect to do every day, understand that marks on a page are attached to meaning, learn to use their imaginations by visualizing, take joy in language, such as with rhyming words or make-up words.

2 Ask for volunteers to share their writing. Make a list on the board of students’ reasons why early reading experiences seem to be important to children.

3 Distribute *Sharing Books Together* handout. Ask students what the title of the article is. Point out that there are other titles in bold written on each page. Ask students what they think those titles indicate?

   - *What that section is about. Headings can give readers a glimpse into what the entire article by breaking it up into smaller sections.*

4 Divide students into groups and ask them to read and annotate the article, marking anything that helps them understand the main idea of the entire article and the main idea of each section within the article.

5 When students are finished, distribute *Main Idea and Supporting Details* worksheet and ask groups to complete it.
Sharing Books Together

When you read to your child, his brain cells are turned on and begin to make connections. As he looks at the picture on the page and hears the words you are reading, his brain is hard at work. And if you can talk about how the story is like something in your child’s life, that’s even better. Hearing favorite stories over and over also helps strengthen brain connections.

Sharing Books with Your Baby

It’s never too early to introduce books to your baby. Most babies enjoy being held and playing with the book as they listen to the sounds of the words. From the very earliest years, your baby will learn that looking at books is enjoyable and special. Here are some tips for sharing books with your baby.

- Give her cloth or vinyl books that can be washed.
- Hold her in your lap and circle your arms gently around her as you read or talk about the pictures in a book.
- Do something different when she loses interest. Babies have a short attention span and may enjoy books for only a few minutes at a time.
### Sharing Books with Your Toddler

Make story time a special part of your everyday activities. Toddlers usually enjoy short, simple books. They often ask to hear a story over and over again. Here are some ideas.

- Choose books on topics that will interest your toddler. Does she love trucks and cars? Animals? Books about everyday routines?
- Find sturdy, cardboard books for your toddler to handle. Let her help you turn the pages.
- Change your voice to imitate the characters during storytelling.
- Try to involve her in talking about the story. For example, suppose you are going to read Margaret Wise Brown’s *Goodnight Moon*. Here’s what might happen.

<table>
<thead>
<tr>
<th>Book</th>
<th>Involving Your Child in the Book</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Goodnight Moon</strong></td>
<td><strong>You</strong>: Do you want to hear <em>Goodnight Moon</em>? I love this book.</td>
</tr>
<tr>
<td></td>
<td><strong>Your Child</strong>: Moon!</td>
</tr>
<tr>
<td></td>
<td><strong>You</strong>: Yes, there it is. What else do you see?</td>
</tr>
<tr>
<td></td>
<td><strong>Your Child</strong>: Cow.</td>
</tr>
<tr>
<td></td>
<td><strong>You</strong>: You’re right. There’s a picture of the cow jumping over the moon! Will you help me turn the pages?</td>
</tr>
<tr>
<td>In a great green room</td>
<td><strong>You pause while your child points to the objects as you read the words.</strong></td>
</tr>
<tr>
<td>There was a telephone</td>
<td><strong>Your Child</strong>: Cow! 3 bears!</td>
</tr>
<tr>
<td>And a red balloon</td>
<td><strong>You</strong>: I see those pictures. What else was in the green room?</td>
</tr>
<tr>
<td>And a picture of---</td>
<td><strong>Your Child</strong>: Clock...bowl...mouse (points and names the rest of pictures of things in the room).</td>
</tr>
<tr>
<td>The cow jumping over the moon.</td>
<td><strong>You</strong>: Do you think a cow can really jump over a moon?</td>
</tr>
<tr>
<td></td>
<td><strong>Your Child</strong>: No-o-o-o-o! (Shaking head and laughing)</td>
</tr>
</tbody>
</table>

You continue to read the book and talk about the pictures as you read. Have your child find the mouse on every page. At the end of this bedtime story, say goodnight to different objects in your child’s bedroom. “Goodnight bed. Goodnight chair. Goodnight baby doll. Goodnight books.”
Sharing Books with Your Preschooler

Your preschooler will often still enjoy climbing on your lap to listen to a favorite story. Although you may be tired of reading or telling the same story over and over again, repeating helps make strong connections in the brain. Soon your preschooler will tell you the story, word for word! Here are some other ideas.

- Visit the library regularly and check out books. Most libraries have storytimes especially for preschool children. Perhaps you can check out a book for yourself and show your preschooler how you enjoy a good book also!

- Create your own story-time routine. This could be at bedtime or at another time during the day. Find a comfortable place where you can snuggle up and read or talk about a book together. Do it every day!

- Use expression in your voice when you read or tell the story.

- Choose books and stories that have rhyme and repetition, like *Brown Bear, Brown Bear, What Do You See?* (Martin) or Dr. Seuss books, such as *Green Eggs and Ham*. Encourage your child to join in the story with you. Soon you might see your child pretending to read or telling the story to a stuffed animal or doll.

- Lightly run your fingers under the words as you read. This teaches your child that the print stands for words and that we read from top to bottom of the page and from left to right.

- If your child has a language delay, ask him to point to pictures and encourage him to repeat the words after you.
Research shows that *how* you share books with your child is even more important than how often you do it. Your questions or comments can help your child become the teller of the story. For example, if you were reading the story *The Gingerbread Man*, here are some comments and questions you might ask:

<table>
<thead>
<tr>
<th>Kind of Question or Comment</th>
<th>Example</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Completion</strong> – Leave off a word at the end of a sentence and let your child fill it in.</td>
<td>“Run, run as fast as you can. You can’t catch me. I’m the Gingerbread ____.”</td>
</tr>
<tr>
<td><strong>Open-ended</strong> – Ask your child a question that will make her think of several different answers.</td>
<td>“What do you think the Gingerbread Man is doing in this picture?”</td>
</tr>
<tr>
<td><strong>Who, What, When, Where, Why, and How</strong> – Ask your child these kinds of questions about the story and the pictures.</td>
<td>“Who baked the Gingerbread Man? “What did the little old man say when the Gingerbread Man ran away?” “Where did the fox want the Gingerbread man to go?” “Why do you think the fox wants the Gingerbread man to ride on his head across the river?” “How did the fox trick the Gingerbread Man?”</td>
</tr>
<tr>
<td><strong>Connections</strong> – Help your child see how the story relates to something familiar.</td>
<td>“Do you remember when you ate gingerbread at Aunt Pat’s house?”</td>
</tr>
</tbody>
</table>

**Encouraging Reading and Writing**

Words are everywhere. You can use this fact to help your child get ready for reading.

- Young children are interested in their own names. Let your child see you write his name. Put magnetic letters on your refrigerator for him to play with and spell his name. You may see your child point to letters in words and say “That’s my letter!”
- Talk about the words and letters you see every day. Point out stop signs or signs on familiar stores. Talk about the name on a box of cereal as you take it off the shelf.
• Let your child see you looking at books, magazines, and newspapers. When he sees you reading, he may try to copy you. These experiences teach your child why we read and that reading is important.

There are also many ways you can encourage writing.

• If your child is playing house, give him paper and pencil to scribble a shopping list or take a message.

• If he is making a fort in the living room, offer paper and crayons to scribble a “Do Not Enter” sign.

• If you are outside, he can write in the dirt with a stick or on the sidewalk using chalk.

• If he copies what you do every day, have paper and pencil or crayons for him to “write” a shopping list, a phone message, or a letter to a friend.

Remember, however, that writing develops over time. At this point, don’t worry if your child scribbles or makes letters backwards or upside down.
# Main Ideas and Supporting Details

Work with your group to identify the main idea and supporting details of each section of the article. When you have finished, summarize the main idea of the entire article in your own words below.

<table>
<thead>
<tr>
<th>Section: Sharing Books With Your Baby</th>
<th>Supporting Details:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Idea:</td>
<td>1.</td>
</tr>
<tr>
<td></td>
<td>2.</td>
</tr>
<tr>
<td></td>
<td>3.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section: Sharing Books With Your Toddler</th>
<th>Supporting Details:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Idea:</td>
<td>1.</td>
</tr>
<tr>
<td></td>
<td>2.</td>
</tr>
<tr>
<td></td>
<td>3.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section: Sharing Books With Your Preschooler</th>
<th>Supporting Details:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Idea:</td>
<td>1.</td>
</tr>
<tr>
<td></td>
<td>2.</td>
</tr>
<tr>
<td></td>
<td>3.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Section: Encouraging Reading and Writing</th>
<th>Supporting Details:</th>
</tr>
</thead>
<tbody>
<tr>
<td>Main Idea:</td>
<td>1.</td>
</tr>
<tr>
<td></td>
<td>2.</td>
</tr>
<tr>
<td></td>
<td>3.</td>
</tr>
</tbody>
</table>

In your own words, summarize the main idea of the entire article.
Childhood Vaccinations: Why Should I Vaccinate My Child?

Students read an informational article about childhood vaccinations, answer an FAQ sheet and peer review each other’s answers. They also discuss a graph showing the decrease in preventable diseases, as well as recent cases of these diseases in the U.S.

PREP

- Be prepared to explain vocabulary: morbidity

MATERIALS

- Childhood Vaccinations: Why Should I Vaccinate My Child? article
- Childhood Vaccinations FAQ worksheet
- Preventable Diseases graph
- Immunization Tips for Parents handout

EXPLAIN

1. Raising a child comes with many decisions. Some are a matter of taste, like what to name the baby. Others are essential, especially when it comes to safety, like baby-proofing your home for potential hazards. But, what about the hazards that you can’t see and that can cause serious illness, disability, or even death in young children? Childhood vaccinations are one way parents can protect their kids, but some parents don’t believe that vaccinating their children is healthy. We are going to look at important facts about vaccines that parents need in order to make an informed choice about childhood vaccinations.

2. Distribute Childhood Vaccinations: Why Should I Vaccinate My Child? article. Have students read and annotate the article marking anything they think is important, interesting or confusing.

3. When students are finished, distribute Childhood Vaccinations FAQ worksheet and have them complete it. They should cite evidence from the article to support their claims.

4. When students are finished, have them turn to a partner and share their answers. The listening partner should imagine they are the concerned parent asking the questions and give the writer feedback as to whether they provided enough evidence from the article to answer their question. Then they will switch positions so both students share their answers and get feedback.

VOCABULARY

morbidity
Distribute the Preventable Diseases graph. Have students read it over to themselves.

DISCUSS GRAPH: U.S. DISEASE PREVENTION

What does the title above the first column mean?
- The estimated amount of people who caught the diseases listed before vaccines existed. If students do not know, explain what morbidity means.

What does estimated mean?
- Not exact, about how many.

What does the title above the middle column mean?
- The percentage of decrease in the number of people who have died from the diseases listed or the percentage of people who caught the disease.

What does the title of the third column mean?
- Number of cases most reported recently.

Does this mean that all these people died who were infected recently?
- No. If students answer yes, ask them to re-examine the language of the title.

What are the three diseases that had the most cases during the pre-vaccine era?
- Varicella (4,085,120), Measles (530,217), and Pertussis (200,752)
  Explain that Varicella is commonly known as the chickenpox.

What are the three diseases that have the most recent reports of cases?
- Varicella (449,363), Pertussis (13,506), and Hepatitis B (11,269)

How many recent cases of Pertussis are reported here?
- 13,506

Is this the same or different than the number of Pertussis cases reported in the article we read?
- Different. From article: 28,000 in 2014, 48,000 in 2012

Why are these numbers different?
- The article's statistics are from 2012 and 2014, the graph's statistics are from 2007.

After reading the article and analyzing the graph, why do you think it’s important to vaccinate against diseases, even if they are rare?
- They still happen to some people. To protect your child. To protect everyone else. To prevent the diseases from spreading.

For which diseases do you think there will be new vaccinations required in your lifetime?

Distribute Immunization Tips for Parents for students to take home.
Childhood Vaccinations:
Why Should I Vaccinate My Child?
Adapted from http://www.cdc.gov/features/reasonstovaccinate/, 2015

Serious Diseases Are Still Out There
One example of the seriousness of vaccine-preventable diseases is the increase in whooping cough, otherwise known as pertussis, cases and outbreaks reported recently. More than 28,000 cases of whooping cough were reported to the Center for Disease Control (CDC) during 2014 and this number is expected to increase. 2012 was a record year with more than 48,000 cases, the most cases that we had seen in the past 60 years. Whooping cough can be deadly, especially for young babies. From 2000 through 2014, there were 277 deaths from whooping cough reported in the United States. Almost all of the deaths (241 of the 277) were babies younger than 3 months of age, who are too young to be fully protected against whooping cough through vaccines.

Measles cases and outbreaks continue to occur in the U.S. So far this year, over 150 people in the United States have been reported as having measles. Most of these cases are part of an outbreak linked to an amusement park in California. Measles spreads easily, and it can be serious, causing pneumonia, encephalitis (swelling of the brain), and even death. Young children are at highest risk for serious complications from measles.

You may have never seen a case of polio or diphtheria, but they still occur in other countries. All it takes is a plane ride for these diseases to arrive in your community. Measles is still common in many parts of the world, including Europe, Asia, the Pacific, and Africa. Measles is brought into the United States by unvaccinated U.S. residents and visitors who get infected when they are in other countries. Measles can spread when it reaches a community in the U.S. where groups of people are unvaccinated.

Vaccines are the Safe, Proven Choice
The United States currently has the safest, most effective vaccine supply in its history. Before a vaccine is approved and given to children, it is tested extensively. Some people think that vaccines can cause children to develop other diseases and conditions, like autism, but scientists have proved this is not true. Nearly all children can be safely vaccinated. There are some exceptions including children with allergies to something in a vaccine. Children with weakened immune systems due to an illness or a medical treatment, such as chemotherapy treatment for cancer, also may not be able to safely receive some vaccines.
Children Must Be Vaccinated to Attend Public School
In most states, including New York, it is required by law that children entering day care facilities and public schools be fully immunized to protect the child and the entire school community from contracting and vaccinatable diseases. Vaccine exemptions are available for medical reasons or if a parent has a religious objection to vaccinations.

Vaccination Protects Your Family, Friends, and Community
Getting your child vaccinated helps protect others in your community—like your neighbor who has cancer and cannot get certain vaccines, or your best friend’s newborn baby who is too young to be fully vaccinated. When everyone in a community who can get vaccinated does get vaccinated, it helps to prevent the spread of disease and can slow or stop an outbreak. Choosing to protect your child with vaccines is also a choice to help protect your family, friends, and neighbors, too.

Protect Your Child From 14 Preventable Diseases
The CDC recommends vaccines for Chickenpox, Diphtheria, Hib, Hepatitis A and B, Influenza (Flu), Measles, Mumps, Pertussis, Polio, Pneumococcal, Rotavirus, Rubella, and Tetanus.
Childhood Vaccines:
Frequently Asked Questions (FAQ)

Use the information in the article you just read to answer these FAQs from real parents who are trying to decide whether or not to vaccinate their children. Your answers should be in paragraph form and provide at least one piece of supporting evidence from the article.

1. I've heard that vaccines are dangerous and can hurt my child. Is that true?

   (Provide paragraph with evidence from the article)

2. If I want to travel to another country with my baby, do I need to get her vaccinated before we go? What if she has some of her vaccines, but not all of them yet?

   (Provide paragraph with evidence from the article)

3. The diseases they vaccinate for aren't around anymore. I don't know of anyone who has ever had Mumps or Rubella! Why should I put my child through getting a bunch of shots if there is no danger of getting these diseases?

   (Provide paragraph with evidence from the article)
4 If I don’t want to vaccinate my child, why should I? It’s not hurting anyone else.

5 My baby can’t get even get the Pertussis vaccine until after she is three months old. Should I be worried about this? If so, is there anything anyone can do to help make sure my baby doesn’t catch it?
Graph: U.S. Disease Prevention

Source: myscienceacademy.org, statistics reported by The Journal of American Medicine Association, 2007

<table>
<thead>
<tr>
<th>Disease</th>
<th>Pre-Vaccine Era Cases</th>
<th>% Decrease</th>
<th>Most Recent Reports of Cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>Diphtheria</td>
<td>21,053</td>
<td>100%</td>
<td>0</td>
</tr>
<tr>
<td>H. Influenza</td>
<td>20,000</td>
<td>99%</td>
<td>243</td>
</tr>
<tr>
<td>Hepatitis A</td>
<td>117,333</td>
<td>91%</td>
<td>11,049</td>
</tr>
<tr>
<td>Hepatitis B</td>
<td>66,232</td>
<td>83%</td>
<td>11,269</td>
</tr>
<tr>
<td>Measles</td>
<td>530,217</td>
<td>99%</td>
<td>61</td>
</tr>
<tr>
<td>Mumps</td>
<td>162,344</td>
<td>99%</td>
<td>982</td>
</tr>
<tr>
<td>Pertussis</td>
<td>200,752</td>
<td>93%</td>
<td>13,504</td>
</tr>
<tr>
<td>Pneumococcal Disease</td>
<td>16,069</td>
<td>74%</td>
<td>4,167</td>
</tr>
<tr>
<td>Polio</td>
<td>16,316</td>
<td>100%</td>
<td>0</td>
</tr>
<tr>
<td>Rubella</td>
<td>47,745</td>
<td>99%</td>
<td>4</td>
</tr>
<tr>
<td>Congenital Rubella</td>
<td>152</td>
<td>99%</td>
<td>1</td>
</tr>
<tr>
<td>Smallpox</td>
<td>29,005</td>
<td>100%</td>
<td>0</td>
</tr>
<tr>
<td>Tetanus</td>
<td>580</td>
<td>98%</td>
<td>14</td>
</tr>
<tr>
<td>Varicella</td>
<td>4,085,120</td>
<td>89%</td>
<td>449,363</td>
</tr>
</tbody>
</table>
Immunization Tips for Parents

The pamphlet below is a fact sheet on vaccines. It includes some references to New York City resources. Some regions may decide to use local resources instead.

Download pamphlet PDF at:

The following terms may be useful in discussing the pamphlet:

**311:** A phone number that connects callers to New York City agencies that can assist with local problems, such as making housing complaints or accessing a child’s vaccination record.

**Autism:** A disease that affects development of children and adults, including social interaction and academic skills. Vaccines were previously thought to contribute to increasing diagnoses of autism, but that has been disproven.
Serious side effects from vaccines are rare. Any side effects are usually mild, such as soreness where the shot was given.

Before a vaccine is approved for use, it goes through years of testing. Each vaccine is then monitored on an ongoing basis for safety and to see how well it works.

Vaccines are very safe. The benefits far outweigh any risks.

Childhood Vaccinations: Safe for Your Kids

Getting your child fully vaccinated helps protect everyone, especially newborns and infants too young to be fully vaccinated.

Vaccines help protect others.

Talk with your child’s health care provider to find out which vaccines your child needs and when. To find a provider near you, call 311 or visit nyc.gov and search for childhood immunizations.

Immunizations (vaccines or shots) help protect your child from many dangerous diseases.

Vaccines help protect your child from many serious diseases, including measles, mumps, whooping cough (pertussis) and chickenpox. Children who are not vaccinated can get very sick or even die from these diseases.

In the past, many more people got sick or died from these diseases than do now. Before the measles vaccine, more than 3 million people got sick with measles each year in the United States. Of those, 48,000 were hospitalized and about 450 died.

In Europe, a measles outbreak spread through 30 countries and in 2011, almost 225 people contracted measles in the U.S., with 25 in New York City alone, mostly children and adults who had not been vaccinated.

In 2011, a measles outbreak was mainly due to low immunization rates. In 2012, there were outbreaks in Africa, Asia, Europe, and the Americas, including the U.S., with more than 26,000 people infected. The outbreak was ended in 2016 when reporting stopped.

Many childhood diseases are no longer common because of vaccines. But the germs that cause most of these diseases are still common and can cause very serious disease. Even die from these diseases.

For more information about autism, visit autismspeaks.org or autismsciencefoundation.org.

Frequently Asked Questions

1. I’ve heard a lot of negative things about vaccines. How do I know what to believe?
   - Organizations like the Vaccine Education Center at the Children’s Hospital of Philadelphia (vaccines.chop.edu) and Parents of Kids with Infectious Diseases (pkids.org) offer reliable information.
   - Be skeptical of claims against vaccines. False or misleading information can travel fast on the Internet, especially in chat rooms.
   - Talk to your child’s doctor about any information that concerns you.

2. I’ve heard that some vaccines can cause autism. Is this true?
   - No. Vaccines do not cause autism. Numerous scientific studies from the U.S. and around the world have found no link between autism and vaccines.
   - For more information about autism, visit autismspeaks.org or autismsciencefoundation.org.

Immunization Tips for Parents

- Bring your child’s immunization card to every doctor visit. This will help you stay on schedule for your child’s recommended vaccinations.
- If you don’t know which shots your child has had, call 311 and ask for the Citywide Immunization Registry (CIR). The CIR keeps a record of vaccines your child receives. All children born or vaccinated in New York City are enrolled in the CIR.
- For free or low-cost vaccinations, call 311 or visit nyc.gov and search for childhood immunizations.

Childhood Immunizations
Serious side effects from vaccines are rare. Any side effects are usually mild, such as soreness where the shot was given.

Before vaccines, many more people got sick or died from these diseases than do now. Before a vaccine is approved for use, it goes through years of testing. Each vaccine is then monitored on an ongoing basis for safety and to see how well it works. Immunizations (vaccines or shots) help protect your child from many dangerous diseases.

### Why should I get my child immunized?

I thought no one gets these diseases anymore.

- Many childhood diseases are no longer common because of vaccines. But the germs that cause most of these diseases are still around. Between 2008 and 2011, about 700 New Yorkers each year got sick from vaccine-preventable diseases.
- When vaccination rates are low, these diseases can come back and spread quickly.
- In Europe, a measles outbreak spread through 30 countries in 2011, with more than 26,000 people infected. The outbreak was mainly due to low immunization rates.
- In 2011, almost 225 people contracted measles in the U.S., with 25 in New York City alone, mostly children and adults who had not been vaccinated.

### Is it okay for my child to have so many vaccines at once?

- Yes. Children are exposed to thousands of germs every day. The killed or weakened germs in vaccines are very few compared to the millions of germs children fight off each day.
- Talk to your child’s doctor about combination vaccines, which protect against more than one disease with a single shot. They can reduce the number of shots and office visits your child will need.

### I’ve heard it’s safer to skip some vaccines or wait to get my child vaccinated. Is this true?

- No. If you skip some vaccines or wait to get your child vaccinated, you put your child at risk. Your child could get very sick or even die from a serious disease that could have been prevented.
- Children should get the recommended vaccinations at the right age and on time.
New York City Community Health Profiles*

Students research the NYC Community Health Profile for their own neighborhoods, and make presentations on their findings to the class. They then consider how this information can be used to inform choices about family health and well-being.

*Note: This activity uses New York City health profiles as text for students to practice interpreting data and applying them to broader choices about family location. Many counties and regions provide similar information about local conditions.

PREP

- Read and familiarize yourself with the community health profile included on Bedford Stuyvesant, a neighborhood in Brooklyn, NY, and/or visit the website below to view other neighborhoods. The community health profile on Bedford Stuyvesant presents an example of health and welfare data that can be applied to many neighborhoods and regions.

- Choose 4-6 sections of the Community Health Profile on which you would like students to focus their research—asthma rates, for example, or housing quality.

- Write the website on the board:
  http://www1.nyc.gov/site/doh/data/data-publications/profiles.page

MATERIALS

- This activity requires a computer lab
- Whiteboard, chalkboard, or chart paper and markers

EXPLAIN

1. In Fall of 2015, researchers began publishing health statistics on New York City by neighborhood. These include graphs, charts and text showing their findings. They include data on topics such as employment rates, school attendance, pre-term births, teen births, incarceration and violence, as well as health factors such as smoking, diet and physical activity, health insurance coverage, asthma and diabetes rates, hospitalization and leading causes of death.
What does this have to do with Parenting?

> Parents make hundreds of choices for their families, including where to live, work and attend school. Each neighborhood is unique. Some have great public schools and nearby parks. Some have playgrounds or housing in disrepair. Some have high asthma rates but low pre-term birth rates. Parents can use data on community health and wellness to make choices that benefit their families or to fight for improvements in their communities.

2 Today you are going to find and read the community health profile for your own neighborhood. Later, you’ll also prepare a presentation with a group to report back some of your findings to the class.

3 Ask students to navigate to [http://www1.nyc.gov/site/doh/data/data-publications/profiles.page](http://www1.nyc.gov/site/doh/data/data-publications/profiles.page), scroll down and find the link to the neighborhood they consider home (could be where they live now or where they grew up). Students should click on their neighborhood and read the first three pages to themselves. Ask students to stop when they get to the table of contents. If a student does not reside in NYC, they may choose a neighborhood they are interested in. See the screenshot below.
Once students have navigated to their neighborhood’s profile, read the second paragraph under *Navigating this Document* and discuss the color key together as a class. Make sure students understand their neighborhood (orange) statistics will be compared to other neighborhoods, the entire borough their neighborhood is located in (purple), and all five boroughs of NYC (blue).

Make sure students understand that they need to read each statistic very carefully to make sure they know what it is measuring—sometimes it is for people who do or have something, like parents having children, sometimes it is for people who don’t do or don’t have something, like children being absent from school. And the best-performing neighborhood is sometimes the lowest for something, like asthma rates, or the highest, such as access to healthcare. Discuss these nuances carefully with students before proceeding.

After students are finished reading their neighborhood’s health profile and notetaking, distribute *My Community’s Health Profile* worksheet and ask them to complete it based on their research.

When students are finished with the worksheet, ask them to re-read their neighborhood’s profile focusing on the sections you have chosen to focus on—asthma rates, for example, or housing quality.

Divide the class into groups, with each group containing representatives from several neighborhoods. Each group will focus on one assigned health topic, asthma rates, for example, and compare that health topic across neighborhoods. Students should first discuss how each of their neighborhoods fared in the assigned health topic. They should then write sentences on chart paper describing the similarities and differences between the neighborhoods on the assigned health topic. They will ultimately present these differences to the class.

While students are working, circulate and assist groups in compiling their information into a cohesive presentation.

Groups present their research to the class.

As a class, students discuss how they as individuals would rank the findings. In other words, if they were considering moving in to one of the neighborhoods, which health topics would they consider more important and which would be less important to them. Ask students how they might use this information to make decisions about personal or family health moving forward.
Health is rooted in the circumstances of our daily lives and the environments in which we are born, grow, play, work, love and age. Understanding how community conditions affect our physical and mental health is the first step toward building a healthier New York City.
WHO WE ARE

BEDFORD STUYVESANT TOTAL POPULATION

154,332

POPULATION BY RACE AND ETHNICITY

64% Black*

20% Hispanic
11% White*
2% Asian*
2% Other*

POPULATION BY AGE

0 - 17 18 - 24 25 - 44 45 - 64 65+

25% 12% 32% 22% 10%

HAVE LIMITED ENGLISH PROFICIENCY

19%

ARE FOREIGN BORN

13%

PERCENT WHO REPORTED THEIR OWN HEALTH AS "EXCELLENT," "VERY GOOD" OR "GOOD"

77%

LIFE EXPECTANCY

75.1 YEARS

* Non-Hispanic
Note: Percentages may not sum to 100% due to rounding
Note from Dr. Mary Bassett, Commissioner, New York City Department of Health and Mental Hygiene

New York City is a city of neighborhoods. Their diversity, rich history and people are what make this city so special.

But longstanding and rising income inequality, combined with a history of racial residential segregation, has led to startling health inequities between neighborhoods. Poor health outcomes tend to cluster in places that people of color call home and where many residents live in poverty. Life expectancy in Brownsville, for example, is 11 years shorter than in the Financial District. And this is not because residents of Brownsville are dying of unusual diseases, but because they are dying of the same diseases – mostly heart disease and cancer – at younger ages and at higher rates.

This is unfair and avoidable. A person’s health should not be determined by his or her ZIP code.

Reducing health inequities requires policymakers, health professionals, researchers and community groups to advocate and work together for systemic change. In One New York: The Plan for a Strong and Just City (OneNYC), Mayor Bill de Blasio has outlined a vision to transform this city, and every neighborhood, guided by the principles of growth, equity, sustainability and resiliency.

Our communities are not simply made up of individual behaviors, but are dynamic places where individuals interact with each other, with their immediate environments and with the policies that shape those environments. The Community Health Profiles include indicators that reflect a broad set of conditions that impact health.

Our hope is that you will use the data and information in these Community Health Profiles to advocate for your neighborhoods.

MARY T. BASSETT, MD, MPH
Navigating this document

This profile covers all of the Brooklyn Community District 3, which includes Bedford-Stuyvesant, Stuyvesant Heights and Tompkins Park North, but the name is shortened to just Bedford Stuyvesant. This is one of 59 community districts in New York City (NYC).

Community districts are ranked on each indicator. The highest rank (#1) corresponds to the largest value for a given measure. Sometimes a high rank indicates a positive measure of health (e.g., ranking first in flu vaccination). Other times, it indicates a negative measure of health (e.g., ranking first in the premature death rate).

The following color coding system is used throughout this document:

- **BEDFORD STUYVESANT**
- **BEST-PERFORMING COMMUNITY DISTRICT**
- **BROOKLYN**
- **NEW YORK CITY**

TABLE OF CONTENTS

- WHO WE ARE  
  PAGE 2
- NEIGHBORHOOD CONDITIONS  
  PAGE 5
- SOCIAL AND ECONOMIC CONDITIONS  
  PAGES 6 AND 7
- HEALTHY LIVING  
  PAGES 8 AND 9
- HEALTH CARE  
  PAGE 10
- HEALTH OUTCOMES  
  PAGES 11, 12 AND 13
- NOTES  
  PAGES 14 AND 15
- MAP AND CONTACT INFORMATION  
  BACK COVER
**Housing quality**

Poorly maintained housing is associated with negative health outcomes, including asthma and other respiratory illnesses, injuries and poor mental health. A similar percentage of homes in **Bedford Stuyvesant** have maintenance defects compared with homes citywide.

**Maintenance defects**

<table>
<thead>
<tr>
<th>Percentage</th>
<th>Neighborhood</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>100%</td>
<td>Bedford Stuyvesant</td>
<td>20th</td>
</tr>
<tr>
<td>67%</td>
<td>Tottenville and Great Kills</td>
<td>69th</td>
</tr>
<tr>
<td>59%</td>
<td>Brooklyn</td>
<td>59th</td>
</tr>
</tbody>
</table>

Maintenance defects include water leaks, cracks and holes, inadequate heating, presence of mice or rats, toilet breakdowns and peeling paint.

**Air pollution**

Although NYC air quality is improving, air pollution, such as fine particles (PM$_{2.5}$), can cause health problems, particularly among the very young, seniors and those with preexisting health conditions. In **Bedford Stuyvesant**, levels of PM$_{2.5}$, the most harmful air pollutant, are 8.8 micrograms per cubic meter, compared with 8.7 in Brooklyn and 8.6 citywide.

**Retail environment**

Tobacco retailers are more prevalent in **Bedford Stuyvesant** than in the city overall. Supermarket access is similar to access citywide, with 120 square feet per 100 people.
Higher education levels are associated with better health outcomes.

One in three residents of Bedford Stuyvesant lives below the Federal Poverty Level; it is the eighth-poorest neighborhood in NYC.

Adult educational attainment

In Bedford Stuyvesant, fewer than one in three adults has a college degree, and one in four has not completed high school.

Income

Living in poverty limits healthy lifestyle choices and makes it difficult to access health care and resources that can promote health and prevent illness. Unemployment and unaffordable housing are also closely associated with poverty and poor health. About one in six Bedford Stuyvesant adults ages 16 and older is unemployed, and over half of all residents spend more than 30% of their monthly gross income on rent.

One way to consider the effect of income on health is by comparing death rates among neighborhoods. Assuming that the death rates from the five neighborhoods with the highest incomes are achievable in Bedford Stuyvesant, it is estimated that 49% of deaths could have been averted.
Children and adolescents

The littlest New Yorkers all deserve the same opportunities for health. In **Bedford Stuyvesant**, the rate of preterm births, a key driver of infant death, is nearly twice the Midtown rate, the teen birth rate is higher than the Brooklyn and citywide rates, and the rate of elementary school absenteeism is sixth-highest in the city.

### Preterm births

<table>
<thead>
<tr>
<th>Location</th>
<th>Rate (percent of all live births)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedford Stuyvesant</td>
<td>10.7</td>
</tr>
<tr>
<td>Midtown</td>
<td>5.7</td>
</tr>
<tr>
<td>Brooklyn</td>
<td>8.8</td>
</tr>
<tr>
<td>NYC</td>
<td>9.0</td>
</tr>
</tbody>
</table>

### Teen births

<table>
<thead>
<tr>
<th>Location</th>
<th>Rate (per 1,000 girls ages 15-19)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedford Stuyvesant</td>
<td>34.2</td>
</tr>
<tr>
<td>Financial District</td>
<td>24.0</td>
</tr>
<tr>
<td>Brooklyn</td>
<td>23.6</td>
</tr>
</tbody>
</table>

### Elementary school absenteeism

<table>
<thead>
<tr>
<th>Location</th>
<th>Rate (percent of students missing 20 or more school days)</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedford Stuyvesant</td>
<td>31</td>
</tr>
<tr>
<td>Financial District</td>
<td>4</td>
</tr>
<tr>
<td>Brooklyn</td>
<td>19</td>
</tr>
<tr>
<td>NYC</td>
<td>20</td>
</tr>
</tbody>
</table>

**Incarceration**

The incarceration rate in **Bedford Stuyvesant** is more than double the Brooklyn and citywide rates.

### Jail incarceration

<table>
<thead>
<tr>
<th>Location</th>
<th>Rate per 100,000 adults ages 16 and older</th>
</tr>
</thead>
<tbody>
<tr>
<td>Queens Village</td>
<td>5* (RANKS 597th)</td>
</tr>
<tr>
<td>Bedford Stuyvesant</td>
<td>244 (RANKS 6th)</td>
</tr>
<tr>
<td>Brooklyn</td>
<td>96</td>
</tr>
<tr>
<td>NYC</td>
<td>93</td>
</tr>
</tbody>
</table>

**Violence**

The injury assault rate in **Bedford Stuyvesant** is twice the citywide rate.

### Non-fatal assault hospitalizations

<table>
<thead>
<tr>
<th>Location</th>
<th>Rate per 100,000 population</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedford Stuyvesant</td>
<td>129</td>
</tr>
<tr>
<td>Rego Park and Forest Hills</td>
<td>11</td>
</tr>
<tr>
<td>Brooklyn</td>
<td>66</td>
</tr>
<tr>
<td>NYC</td>
<td>64</td>
</tr>
</tbody>
</table>

Non-fatal assault hospitalizations capture the consequences of community violence.

People who are incarcerated have higher rates of mental illness, drug and alcohol addiction and other health conditions.

Child and adolescent health are a signal of a community’s current well-being and potential.


*Interpret estimate with caution due to small number of events

**New York State Department of Health, Statewide Planning and Research Cooperative System, 2011-2013**
Self-reported health
People are good at rating their own health. When asked to rate their overall health on a scale of one to five (excellent, very good, good, fair or poor), 77% of Bedford Stuyvesant residents rate their health as “excellent,” “very good” or “good.”

Percent who self-reported their own health as “excellent,” “very good” or “good”

<table>
<thead>
<tr>
<th>Community District</th>
<th>Percent</th>
<th>Rank</th>
</tr>
</thead>
<tbody>
<tr>
<td>Bedford Stuyvesant</td>
<td>77%</td>
<td>33rd</td>
</tr>
<tr>
<td>Upper East Side</td>
<td>92%</td>
<td>1st</td>
</tr>
<tr>
<td>Brooklyn</td>
<td>75%</td>
<td>1st</td>
</tr>
<tr>
<td>New York City</td>
<td>78%</td>
<td>1st</td>
</tr>
</tbody>
</table>

NYC DOHMH, Community Health Survey, 2011-2013

Smoking, diet and physical activity
Smoking, poor quality diet and physical inactivity are risk factors for high blood pressure, diabetes and other problems. Adults in Bedford Stuyvesant smoke, consume sugary drinks, eat fruits and vegetables and are physically active at rates similar to residents of Brooklyn and the city as a whole.

Adults in Bedford Stuyvesant are almost three times as likely to consume sugary beverages as Stuyvesant Town and Turtle Bay adults.
Health Living

Exercise is one way to maintain a healthy weight. Federal guidelines say that children should get 60 minutes of exercise per day, adults should get 150 minutes per week, and older adults should get 150 minutes per week as their physical abilities allow, with a focus on exercises to improve balance.

Obesity and diabetes

Obesity can lead to serious health problems such as diabetes and heart disease. At 33%, the rate of obesity in Bedford Stuyvesant is higher than the city rate and over four times the rate in Stuyvesant Town and Turtle Bay. The diabetes rate in Bedford Stuyvesant is 15%, the fifth-highest rate in the city.

<table>
<thead>
<tr>
<th>Obesity (percent of adults)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BEDFORD STUYVESANT</strong> (RANKS 7th)</td>
</tr>
<tr>
<td><strong>STUYVESANT TOWN AND TURTLE BAY</strong> (RANKS 59th)</td>
</tr>
<tr>
<td><strong>BROOKLYN</strong></td>
</tr>
<tr>
<td><strong>NYC</strong></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>Diabetes (percent of adults)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BEDFORD STUYVESANT</strong> (RANKS 5th)</td>
</tr>
<tr>
<td><strong>STUYVESANT TOWN AND TURTLE BAY</strong> (RANKS 59th)</td>
</tr>
<tr>
<td><strong>BROOKLYN</strong></td>
</tr>
<tr>
<td><strong>NYC</strong></td>
</tr>
</tbody>
</table>

Substance use

Drug- and/or alcohol-related hospitalizations reflect acute and chronic consequences of substance misuse. In Bedford Stuyvesant, such hospitalization rates are much higher than the rates in Brooklyn and NYC.

**Alcohol-related hospitalizations (per 100,000 adults)**

- **Bedford Stuyvesant** (RANKS 9th): 1,713
- **Bayside and Little Neck** (RANKS 59th): 233
- **Brooklyn**: 1,041
- **NYC**: 1,019

**Drug-related hospitalizations (per 100,000 adults)**

- **Bedford Stuyvesant** (RANKS 11th): 1,830
- **Rego Park and Forest Hills** (RANKS 59th): 921
- **Brooklyn**: 907
- **NYC**: 907

NYC DOHMH, Community Health Survey, 2011-2013

New York State Department of Health, Statewide Planning and Research Cooperative System, 2012
Access to health care
A lack of quality health care can lead to negative health outcomes and more intensive treatment, such as avoidable hospitalizations. In Bedford Stuyvesant, one in five adults has no health insurance and one in eight goes without needed medical care, similar to citywide rates.

Prevention and screening
Compared with teens citywide, teenaged girls from Bedford Stuyvesant are less likely to receive the full human papillomavirus (HPV) vaccine series. However, Bedford Stuyvesant adults are more likely to have been tested for HIV than adults citywide.

HEALTH CARE
Prior to 2014, 20% of adults in NYC had no health insurance; however, with implementation of the Affordable Care Act, this percentage decreased to 14% citywide in 2014. A similar decrease is expected in Bedford Stuyvesant.

HPV infection causes cancers that can be prevented by the HPV vaccine. Boys and girls should receive the vaccine at 11 to 12 years of age, prior to HPV exposure and when the vaccine is most effective.
### New HIV diagnoses

Some people with HIV do not know that they are infected. Getting diagnosed is the first step in the treatment and care of HIV. **Bedford Stuyvesant** ranks fifth-highest in the rate of new HIV diagnoses, more than twice the Brooklyn and citywide rates.

![New HIV diagnoses graph](image)

**Bedford Stuyvesant**

**Rates:**
- 64.1 per 100,000 population
- NYC: 30.4
- Brooklyn: 27.9

**New HIV diagnoses (per 100,000 population)**

---

### Stroke

High blood pressure is the leading risk factor for stroke and the most important to control. **Bedford Stuyvesant** ranks eighth-highest in the rate of stroke hospitalizations in the city.

![Stroke hospitalizations graph](image)

**Hospitalizations due to stroke (per 100,000 adults)**

- **Bedford Stuyvesant:** 415
- Greenwich Village and Soho: 140
- Brooklyn: 344
- NYC: 319

**Ranks:**
- Bedford Stuyvesant: 8th
- Greenwich Village and Soho: 59th
- Brooklyn: 39th
- NYC: 25th

---

### Mental health

Variations in hospitalization rates may reflect differences in rates of illness, access to health care and other social and cultural factors. The rate of adult psychiatric hospitalizations in **Bedford Stuyvesant** is higher than the Brooklyn and overall NYC rates.

![Psychiatric hospitalizations graph](image)

**Psychiatric hospitalizations (per 100,000 adults)**

- **Bedford Stuyvesant:** 1,060
- Financial District: 259
- Brooklyn: 734
- NYC: 684

**Ranks:**
- Bedford Stuyvesant: 8th
- Financial District: 59th
- Brooklyn: 52nd
- NYC: 35th

---

NYC DOHMH, HIV/AIDS Surveillance Registry, 2013

New York State Department of Health, Statewide Planning and Research Cooperative System, 2012

New York State Department of Health, Statewide Planning and Research Cooperative System, 2012

---

**HEALTH OUTCOMES**

People diagnosed with HIV who enter care and start antiviral medications live longer, healthier lives and are less likely to transmit HIV.
**Child asthma**

Many hospitalizations for asthma among children could be prevented by addressing housing-related exposures to asthma triggers, including cockroaches, mice and secondhand smoke. Good medical management can prevent asthma symptoms. The asthma hospitalization rate among children ages 5 to 14 in **Bedford Stuyvesant** is higher than the Brooklyn and citywide rates.

**Child asthma hospitalizations** (per 10,000 children ages 5-14)

<table>
<thead>
<tr>
<th>Borough</th>
<th>Hospitalizations (per 10,000 children)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BEDFORD STUYVESANT</strong> (RANKS 16th)</td>
<td>54</td>
</tr>
<tr>
<td>BOROUGH PARK (RANKS 59th)</td>
<td>6</td>
</tr>
<tr>
<td>BROOKLYN</td>
<td>32</td>
</tr>
<tr>
<td>NYC</td>
<td>36</td>
</tr>
</tbody>
</table>

New York State Department of Health, Statewide Planning and Research Cooperative System, 2012-2013

**Adult hospitalizations for asthma**

The rate of avoidable adult asthma hospitalizations in **Bedford Stuyvesant** is higher than the Brooklyn and citywide rates.

**Avoidable asthma hospitalizations** (per 100,000 adults)

<table>
<thead>
<tr>
<th>Borough</th>
<th>Hospitalizations (per 100,000 adults)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BEDFORD STUYVESANT</strong> (RANKS 16th)</td>
<td>531</td>
</tr>
<tr>
<td>GREENWICH VILLAGE AND SOHO (RANKS 59th)</td>
<td>46</td>
</tr>
<tr>
<td>BROOKLYN</td>
<td>263</td>
</tr>
<tr>
<td>NYC</td>
<td>249</td>
</tr>
</tbody>
</table>

New York State Department of Health, Statewide Planning and Research Cooperative System, 2012

**Adult hospitalizations for diabetes**

**Bedford Stuyvesant** ranks eighth-highest in avoidable adult diabetes hospitalizations, higher than the Brooklyn and citywide rates.

**Avoidable diabetes hospitalizations** (per 100,000 adults)

<table>
<thead>
<tr>
<th>Borough</th>
<th>Hospitalizations (per 100,000 adults)</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>BEDFORD STUYVESANT</strong> (RANKS 8th)</td>
<td>604</td>
</tr>
<tr>
<td>GREENWICH VILLAGE AND SOHO (RANKS 59th)</td>
<td>54</td>
</tr>
<tr>
<td>BROOKLYN</td>
<td>357</td>
</tr>
<tr>
<td>NYC</td>
<td>312</td>
</tr>
</tbody>
</table>

New York State Department of Health, Statewide Planning and Research Cooperative System, 2012

Certain hospitalizations for asthma and diabetes can be prevented by high-quality outpatient care and are known as “avoidable hospitalizations.”
Leading causes of death

The top causes of death for residents of Bedford Stuyvesant, as for most New Yorkers, are heart disease and cancer. Death rates due to diabetes, HIV and homicide are more than twice the citywide rates.

### Top causes of death and rates (per 100,000 population)

<table>
<thead>
<tr>
<th>Rank</th>
<th>Cause: Number of Deaths</th>
<th>Death Rate</th>
<th>New York City Rank</th>
<th>Death Rate</th>
</tr>
</thead>
<tbody>
<tr>
<td>1</td>
<td>Heart disease: 1,576</td>
<td>267.8</td>
<td>1</td>
<td>202.6</td>
</tr>
<tr>
<td>2</td>
<td>Cancer: 1,099</td>
<td>176.8</td>
<td>2</td>
<td>156.7</td>
</tr>
<tr>
<td>3</td>
<td>Diabetes mellitus: 276</td>
<td>45.3</td>
<td>4</td>
<td>20.6</td>
</tr>
<tr>
<td>4</td>
<td>Flu/pneumonia: 222</td>
<td>38.3</td>
<td>3</td>
<td>27.4</td>
</tr>
<tr>
<td>5</td>
<td>HIV: 171</td>
<td>23.1</td>
<td>10</td>
<td>8.4</td>
</tr>
<tr>
<td>6</td>
<td>Stroke: 142</td>
<td>22.9</td>
<td>6</td>
<td>18.8</td>
</tr>
<tr>
<td>7</td>
<td>Lower respiratory diseases: 134</td>
<td>22.4</td>
<td>5</td>
<td>19.8</td>
</tr>
<tr>
<td>8</td>
<td>Hypertension: 132</td>
<td>21.9</td>
<td>9</td>
<td>11.4</td>
</tr>
<tr>
<td>9</td>
<td>Homicide: 125</td>
<td>15.6</td>
<td>14</td>
<td>5.7</td>
</tr>
<tr>
<td>10</td>
<td>Drug-related: 94</td>
<td>12.4</td>
<td>8</td>
<td>8.6</td>
</tr>
</tbody>
</table>

NYC DOHMH, Bureau of Vital Statistics, 2009-2013

HIV is the fifth most common cause of death in Bedford Stuyvesant, but it is only the tenth leading cause citywide.

Infant mortality and premature death

The rate of infant mortality in Bedford Stuyvesant is similar to Brooklyn and citywide rates, but five times higher than the Upper East Side rate.

Disparities in premature death (death before the age of 65) persist among neighborhoods. The rate of premature death in Bedford Stuyvesant is higher than the Brooklyn and citywide rates, and more than four times the rate in the Financial District.

<table>
<thead>
<tr>
<th>Infant mortality rate (per 1,000 live births)</th>
<th>Premature mortality rate (per 100,000 population)</th>
</tr>
</thead>
<tbody>
<tr>
<td>5.0</td>
<td>309.2</td>
</tr>
<tr>
<td>1.0*</td>
<td>75.6</td>
</tr>
<tr>
<td>3.9</td>
<td>194.5</td>
</tr>
<tr>
<td>4.7</td>
<td>NYC</td>
</tr>
</tbody>
</table>

NYC DOHMH, Bureau of Vital Statistics, 2011-2013

*Interpret estimate with caution due to small number of events
Life Expectancy by Community District

- 74.1 - 78.7 years
- 78.8 - 80.9 years
- 81.0 - 82.9 years
- 83.0 - 85.4 years
- Unpopulated areas

Contact Information:
For reports on the other 58 Community Districts, please visit nyc.gov and search “Community Health Profiles” or email: profiles@health.nyc.gov

NYC Community Health Profiles feature information about 59 neighborhoods in New York City.

Suggested citation:
**My Community’s Health Profile**

Answer the questions below based on your neighborhood’s health profile and your notes. Write as much as you can in response to each question and give specific examples and evidence from the health profile to support your answers. Make sure to use all the information available to gather your evidence. You can and should use information from anywhere in the profile and your personal experience in your answers.

1. Who are the people in your neighborhood? Introduce your neighborhood and the people who live there to someone who has never been there or heard of your neighborhood before.

2. If you had to give your neighborhood a rating for its conditions based on the information in the Neighborhood Conditions section, from 1–10 (1 being the lowest and 10 being the highest), what would it be? Why? Is this different than the rating you would have given it before you read these statistics? Why or why not?

3. What percentage of people in your neighborhood have less than a high school diploma? What percentage of people in your neighborhood live below the Federal Poverty Line? What do you think is the relationship between education, income, and health? How is your neighborhood affected by this?

4. How are babies, children, and teens doing in your neighborhood according to the CHP? If you lived in this neighborhood as a young person (under 18 years old), do these statistics surprise you? Do they seem similar or different from your experience? Why or why not. If you did not grow up in this neighborhood, would you estimate that it is similar to or different from where you grew up? Why or why not.

5. Summarize the information given about violence and incarceration in your neighborhood. Does this information feel accurate to your experience in the neighborhood? How do you think this is related to an individual's health, the health of a family, and the overall health of the neighborhood? Can you give specific examples?
6. Would you say most people in your neighborhood eat healthy foods and exercise regularly? Why do you think this is? Do you think this is related to your neighborhood’s location or income levels? Why or why not?

7. How many avoidable hospitalizations of adults were there in your neighborhood at the time these statistics were taken? What were they for? How many avoidable hospitalizations of children were there? What were they for? Is there a relationship between these statistics and any other statistics you’ve learned about in the CHP? Which ones and why? Or why not? How do you think these hospitalizations could have been avoided?

8. What is the average life span in your neighborhood? What are the most common causes of death? How does your neighborhood compare to all of NYC in these two areas? Why do you think this is?

9. If you could change three things about your neighborhood, what would they be? How would you change each of them?

10. What are three things you love about your neighborhood? Explain why you love each one.
When Parents Go Back To School, Their Kids Benefit

Students read, annotate and discuss an article about the benefits low-income children receive when their parents return to school, and then write a letter of advice to a parent who is considering going back to school.

PREP

Read When Low-Income Parents Go Back to School article.

MATERIALS

- When Low-Income Parents Go Back to School article
- Should I Go Back To School?: Letter to a Parent worksheet

EXPLAIN

1. What are the benefits of adults going back to school to get a HSE diploma or college degree?
   - You can get better employment, make more money, accomplish your academic and career goals, raise self-esteem.

2. Do you think anyone else besides the student benefits from them going back to school? How or why?
   - Their families get to experience having more economic stability and more opportunities. Bosses and co-workers get to experience having a more knowledgeable and skilled employee and colleague. Parents become academic role models for their children.

3. Today we’re going to read about some specific ways in which the children of parents who go back to school benefit from their parents’ efforts and accomplishments. Distribute When Low-Income Parents Go Back to School article.

4. Ask students to read and annotate the article, circling any unfamiliar words and underlining anything they think is interesting, important, surprising or confusing. Ask students to write down the following things:
   - The main idea of the article.
   - Two new things they learned from the article.
   - At least one question they have related to what they read.
When students are finished, have them turn to a partner and share what they learned and what questions they had.

DISCUSSION

What is the main idea of this article?

- Although being a parent makes returning to school especially challenging, children of low-income parents who return to school benefit from their parents’ new skills. They see their parents struggle and resilience are facing academic and are more likely to graduate from high school as a result.

Why do you think children of low-income parents who go back to school are more likely to graduate from high school than those whose parents did not?

- Parents are better able to help with homework. Parent and child can encourage each other. Parent becomes an academic role model.

Some parents go back to school and are able to get a better paying job to help the family be more economically stable as a result of their continuing education.

Do you think this might affect their children’s success in school? Why or why not?

- More economic stability can decrease the stressors of being low-income or living in poverty, which can allow a child to learn better. When children do not have the things they need or their family is stressed about money all the time, it makes it hard to concentrate and learn.

The article states, “About one in 10 low-income parents participate in education and training courses, according to a 2014 report by the Urban Institute. About half of those parents work while enrolled, creating a need for childcare.”

How is this connected to the main idea of the article?

- Low-income parents often find going back to school more challenging than the average student because they have to find childcare in order to be able to go to class. If they miss too many classes because they can’t find or pay for childcare, they won’t be able to pass the class or graduate.

What do you think could be done to solve this problem?

- Schools could offer childcare centers, childcare services could offer discounts for students, the government could subsidize/provide childcare for students.
What are some other roadblocks or challenges adults face when trying to go back to school?

- Answers will vary depending on student experience. Use follow up questions to elicit deeper thinking such as: How do you know that? Why do you think that is? Can you say more about that?

What are some ways that you or someone you know have dealt with these challenges and succeeded?

- Answers will vary depending on student experience.

What other questions do you have about this article?

- Answers will vary. Use the article to clarify any remaining questions.

**EXPLAIN**

1. Based on the information you learned from this article and your own experience, you are going to write a letter to a friend (real or imagined) who is a parent and who is considering going back to school. They are having a hard time deciding if they want to get their GED and need some advice. In your letter, you must use at least two quotes (pieces of evidence) from the article to back up your opinion or advice.

2. What kinds of things might you want to say to or ask this person in your letter?

   - What challenges this person might be facing and how they can deal with them, what kinds of support system they might have, what questions they need to ask themselves, what the benefits of going back to school will be for them, how their children could benefit, what kinds of opportunities might be available to them if they go back, etc.
When Low-Income Parents Go Back to School

By Leah Askarinam


Earning a GED can have financial benefits for parents who didn’t graduate—and make it more likely that their children will get a diploma.

Leon Sykes has eight children at home, works two jobs, and drives for Uber and Lyft on the side. Yet the 34-year-old father has found time to take classes Monday through Thursday from 6 to 9 p.m. to earn his high-school credentials at Academy of Hope, an adult public charter school in Washington, D.C. Sykes is about two years into the program. His wife usually picks up their children, ages 5 to 15, from after-school activities, but he still can’t always make it to class. “Some days, you just have to pick and choose,” he says.

About one in 10 low-income parents participate in education and training courses, according to a 2014 report by the Urban Institute. About half of those parents work while enrolled, creating a need for childcare. The Department of Labor’s Strengthening Working Families Initiative has set aside $25 million to fund partnerships between workforce and childcare organizations to help parents who want to advance their education. For parents who did not graduate from high school, earning a GED can have financial benefits. Adults who hold a GED certificate end up with higher monthly earnings than those who never finished high school.

Working parents often take classes in the evenings but childcare centers generally close before 6 p.m., leaving parents to find informal options, such as asking a family member to come over or dropping a child off with a neighbor. At Academy of Hope, which has two campuses serving a total of about 330 students, 42 percent say they have at least one dependent. Parents can participate in the GED-preparation program or in the college-transition program, where students can earn four college credits that transfer to a local community college. Parents who take classes here can qualify for a voucher for childcare through the federal Temporary Assistance for Needy Families Program, but there are more children than slots. And while the school considered offering childcare, it has decided that it would be too complex and costly.

The Academy of Hope CEO Lecester Johnson says that there are plenty of reasons a student might have to miss class: Many students have multiple jobs, for instance,
and schedule changes can prevent them from showing up. Being a parent, however, can make things even more difficult. “If their babysitting or childcare falls apart, there isn’t usually a backup, and that’s the case for most folks,” Johnson says. At this school, female students who are also parents are especially affected by the lack of childcare, according to Richmond Onokpite, a lead science and technology teacher. Nationally, of the 1.8 million low-income parents who participate in education and training, more than half are single moms.

In a science class at Academy of Hope sits Domonique Gillis, a 27-year-old single mother of four. This is her favorite subject. Gillis grew up in West Virginia, where she did well in high school. But her junior year she got into a fight, which resulted in her being moved to an alternative school. She knew that the alternative school was for “bad kids,” and so she stopped listening in class and completing her school work. “I wasn’t bad until I went there and I adapted to the environment to fit in,” she says. “And then I stopped going to school.”

**Poor children whose parents have at least a GED or high-school diploma are more likely to complete high school.**

About two years ago, she started taking classes at Academy of Hope to earn a GED. Last year, she missed too many classes to complete the program. This year, she might again miss too many classes to finish it. Academy of Hope usually allows eight missed classes per 13-week term, though the staff tries to meet with each student before his or her absences reach this point to discuss solutions. “Once students miss beyond that eight, it’s really hard for them to catch up,” Johnson says.

While parents have a hard time actually getting to class, the benefits can be huge for their kids, as poor children whose parents have at least a GED or high-school diploma are more likely to complete high school. Johnson said she notices that a lot of parents start enrolling at Academy of Hope when their kids reach fourth grade, after recognizing that they need to pursue their education to help their children with homework. Parents start attending school functions, too, as their positive adult education experience starts replacing frequently negative childhood ones.

At Academy of Hope, about a quarter of students set a goal to become more involved in their children’s schooling; about 70 percent achieve it. “[They] look at the child’s homework and they can help them out, rather than just looking at the homework and having no idea what’s going on,” Onokpite says.

Gillis said that her eldest son has provided a lot of encouragement. She says if she doesn’t earn her high-school credentials, her children won’t feel they have to, either. “My son said, ‘Mom, if you want a high-school diploma from me, you have to get your GED. If you don’t get your GED, I can’t promise you a high-school diploma.’ So that made me want to go to school more to get my GED because I owe it to my kids.” •
Should I Go Back To School?
Letter to a Parent

Based on the information you learned from the article and your own experience, write a letter to a friend (real or imagined) who is a parent and who is considering going back to school. They are having a hard time deciding if they can commit to earning their HSE diploma and need some advice. Your letter must use at least two quotes (pieces of evidence) from the article to support your opinion or advice.

Dear Friend,

I am writing to you today because __________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

________________________________________________________________________

Sincerely,

_______________
Community Parenting and Family Resources*

Students will research a variety of community resources available to families and community members paraphrase what they have read, examine scenarios that describe family needs, and match the family with an appropriate resource. They will take information they have read and use it to solve scenarios, activating critical thinking and problem-solving skills.

Note: This activity uses New York City public and community resources as a means for helping students practice computer literacy, paraphrasing and problem-solving skills. All communities have resources that can help residents live more safely, efficiently or with greater fulfillment. This activity can be adapted to local resources.

PREP

Read about each of the community resources below through their website. Print materials are also provided, following these instructions.

Write the names and web addresses of the following community resources on the board, or others that you select:

- New York City Childcare Connect* https://a816-healthpsi.nyc.gov/ChildCare/ChildCareList.do
- New York City Early Intervention (services for infants and children with disabilities)* http://www1.nyc.gov/site/doh/health/health-topics/early-intervention-eligibility-and-services.page
- Access NYC (Screening for government benefits)* https://a069-access.nyc.gov/ACCESSNYC/application.do
- Single Stop (Free tax preparation, legal advice, government benefit screening and more)* http://www.bcc.cuny.edu/Single-Stop/
- CUNY Fatherhood Academy* www.cuny.edu/cfa
MATERIALS

- This activity requires a computer lab
- *Parent Resource Recommendations* worksheet

EXPLAIN

1. There are many community resources available to help parents access services for themselves and their children. These resources can provide parents with the information they need to help their children be successful in school, secure childcare, prepare their taxes, enroll themselves in college or continuing education courses, and apply for government assistance programs such as unemployment benefits or SNAP food assistance.

2. Navigate to the websites written on the board and read about local resources. Based on what you learn, you will provide recommendations to families who can benefit from their services.

3. On a clean piece of paper, write the following about each resource:
   - **Name of resource and contact information.**
   - **What specific services or information does this resource provide?**
   - **Who is eligible and/or could benefit from this resource?**
   - **How is this resource useful for parents?**

4. When students are finished with their research, distribute *Parent Resource Recommendations* worksheet and have them complete it. They should use their notes on the services each resource provides to help them match a resource with a family in need of assistance.

5. When students are finished with worksheet, discuss their recommendations as a class.
Parent Resource Recommendations

Read the descriptions below of family situations. Use your research to recommend a resource or resources they should contact. Explain why or how this resource(s) might help them with their particular need.

<table>
<thead>
<tr>
<th>PARENT NEEDS</th>
<th>RESOURCE(S) RECOMMENDATION</th>
<th>WHY/HOW MIGHT THIS RESOURCE HELP?</th>
</tr>
</thead>
<tbody>
<tr>
<td>Patricia recently lost her job as a child care worker because the daycare she worked for went out of business. She has two kids of her own and is worried because she has to look for a new job and has no idea how she is going to pay the rent or feed her family in the meantime. She doesn’t know if she is eligible for government assistance or how to apply for it.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Rikki needs to find childcare for her 1-year-old daughter so that she can return to work full time. She is so overwhelmed by how many child care services there are in NYC and has heard that some of them can be very poorly run, which makes her very afraid to choose one without knowing a lot about it.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Louis and Yolanda’s 10-month-old baby girl was born prematurely and, as a result, has been diagnosed with developmental delays. She doesn’t seem to be able to recognize simple words like dog or cat and hasn’t yet been able to understand simple commands like, “wave bye-bye!” These are milestones that most 10-month-olds have met already. Louis and Yolanda want to help their baby, but they can’t afford to hire a specialist to work with her.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>PARENT NEEDS</td>
<td>RESOURCE(S) RECOMMENDATION</td>
<td>WHY/HOW MIGHT THIS RESOURCE HELP?</td>
</tr>
<tr>
<td>------------------------------------------------------------------------------</td>
<td>----------------------------</td>
<td>-----------------------------------</td>
</tr>
<tr>
<td>Darien is about to become a father for the first time. He is excited, but he</td>
<td></td>
<td></td>
</tr>
<tr>
<td>is also terrified. He has no idea how to be a parent and he is also</td>
<td></td>
<td></td>
</tr>
<tr>
<td>worried he won't be able to provide enough money to support his partner and</td>
<td></td>
<td></td>
</tr>
<tr>
<td>their new baby. He wants to try to get his HSE diploma so that he can</td>
<td></td>
<td></td>
</tr>
<tr>
<td>get a better job than he has now.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Andy’s son Johnny attends a NYC public school and comes home from school</td>
<td></td>
<td></td>
</tr>
<tr>
<td>every day crying. Another boy at school has been bullying Johnny in his</td>
<td></td>
<td></td>
</tr>
<tr>
<td>math class. Andy isn’t sure if he should just tell Johnny to stand up to</td>
<td></td>
<td></td>
</tr>
<tr>
<td>the boy, which could be dangerous, or if he has the right to demand the</td>
<td></td>
<td></td>
</tr>
<tr>
<td>teacher or principal do something about the situation.</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Chris and Michael have two sons who are 3 and 7 years old. Chris is a</td>
<td></td>
<td></td>
</tr>
<tr>
<td>stay-at-home parent and Michael just lost his job as a construction worker</td>
<td></td>
<td></td>
</tr>
<tr>
<td>because the company had to downsize its staff. They need to get some</td>
<td></td>
<td></td>
</tr>
<tr>
<td>financial advice and help while Michael gets a new job. They are also now</td>
<td></td>
<td></td>
</tr>
<tr>
<td>without health insurance and want to see what their options are.</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Department of Education Parents’ Bill of Rights*

The New York City Department of Education's Parents' Bill of Rights is a 5-page, highly detailed document. To download the complete document, visit:


Parents’ Bill of Rights and Responsibilities

Each child’s maximum potential can best be achieved through a partnership between parents¹ and the education community. To foster active engagement between parents and schools, parents have certain rights and responsibilities.

ALL PARENTS HAVE THE FOLLOWING RIGHTS:

1) THE RIGHT TO A FREE PUBLIC SCHOOL EDUCATION
   Parents have the right to a free public school education for their child in a safe and supportive learning environment.

Parents have the right to:
   a) a free public school education for their child, from kindergarten until age 21, or receipt of a high school diploma, whichever comes first, as provided by law;
   b) an evaluation for their child with a disability and, if found to be in need of special education, receive a free, appropriate education from age 3 through age 21, in accordance with applicable laws and regulations;
   c) bilingual education or English as a Second Language services, for their child with limited English proficiency, as required by law and regulations;
   d) have their child receive his or her full instructional schedule in accordance with the Department of Education school year calendar;
   e) have their child learn in a safe and supportive learning environment, free from discrimination, harassment, bullying, and bigotry;
   f) have their child receive courtesy and respect from others and equal educational opportunities regardless of actual or perceived race, color, religion, age, creed, ethnicity, national origin, alienage, citizenship status, disability, sexual orientation, gender (sex) or weight;
   g) have a child accorded all the rights set forth in the Bill of Student Rights and Responsibilities found within the New York City Department of Education's Citywide Standards of Intervention and Discipline Measures.
NYC Childcare Connect*

Childcare Connect is a database of New York City childcare providers. It is searchable by program name, type of program, such as infant/toddler or pre-kindergarten, borough, neighborhood and zip code. In addition to general information, it also contains information on the results of routine inspections, for example, childcare providers who have received fines or warnings for failure to comply with required procedures.

Childcare Connect can be found at:
https://a816-healthpsi.nyc.gov/ChildCare/ChildCareList.do

Childcare Connect Video

A 30-second video about the Childcare Connect database can be seen at:
https://www.youtube.com/watch?v=D5-tom1ltVY&t=13
Early Intervention

Explain
When parents, caregivers or doctors suspect a child may have developmental delays, they can request evaluation and treatment from Early Intervention specialists. These are people who are trained to work with families to help children develop to their full potential. They use the existing household routines and children's interests to encourage children to develop in their areas of need, such as walking, playing with a ball or holding a bottle. Many young children are able to make up for physical, mental, learning or emotional deficits caused by birth complications or disease. Others are able to learn strategies and tools that help them cope with their delays or impairments.

Does Your Child Need Early Intervention (EI)?
If you have a concern about your child’s development, the Early Intervention Program (EIP) can help by providing an evaluation of your child at no cost to you. The evaluation will identify your child’s strengths and needs and find out if your child is eligible for the EIP.

Skills like taking a first step, smiling for the first time, and waving “bye-bye” are called milestones. To find out if your child’s development is on track or if you should refer your child to the Early Intervention Program, learn more about the developmental milestones for your child’s age.

Who Can Be Referred to the NYC Early Intervention Program (EIP)?
Infants and toddlers who live in New York City, are from birth to three years old, and:

- have a diagnosed physical or mental condition that is likely to result in a developmental delay; or
- are suspected of having a developmental delay or disability.

These infants and toddlers will receive an evaluation to find out if they are eligible for the EIP. Children must be found eligible in order to receive services.

Children who are 2 years and 11 months or older should be referred to the Committee for Preschool Special Education (CPSE) under the Department of Education for preschool special education. Call 311 for information on the CPSE.

Who Can Refer to the EIP?
Infants and toddlers up to age three can be referred by anyone: their family, doctors, social service workers, child care workers, community agencies, and others.
In New York City, call 311 and say that you want to refer a child to the EIP, or fill out a Referral Form (PDF).

**What Happens When a Child is Referred to the EIP?**

A service coordinator will be assigned. She/he will explain the program and help the family choose an evaluation agency.

If the evaluation shows that a child is eligible for the EIP, an Individualized Family Service Plan (IFSP) meeting will be held. At the IFSP meeting, the family works with a team to develop goals and a plan that meets their child’s developmental needs. After the meeting early interventionists (teachers and therapists) will work with the family to help their child learn.

Since children learn best from the people that they spend the most time with, early interventionists work with each child and family during their daily routines. The service coordinator works with the family to ensure that the EIP is working for them.

**Who Will Pay for Early Intervention Services?**

- Early Intervention is at no direct cost to families.
- The program uses a child’s Medicaid and/or insurance (if available) to help pay for services. This will not affect or reduce a family’s Medicaid or insurance benefits.
- When a family’s insurance is billed, the family may receive Explanation of Benefits (EOB) letters from their insurance company. This is not a bill.

**What if a Child is Not Eligible for the EIP?**

Not all children with delays are eligible for the EIP. If a child is at risk of developing a delay, or has been evaluated and found not eligible for Early Intervention, the family may enroll in the Early Intervention Developmental Monitoring Program at no cost.

---

**Early Intervention Video**

The following video shows an early intervention treatment session in process. It shows how the therapist works with the mother, supporting her to work with the child, using already existing routines and interests.

Know Before You Enroll*

Before you take on debt or pay to enroll in a school or training program, do your homework first. Here are 10 important tips to help you protect your money.

1. Free and low-cost adult education and training options are available. Visit nyc.gov or call 311 and ask about free and low-cost adult education and job training options. You can attend classes at the Department of Education, City University of New York (CUNY), public libraries, community-based organizations, Workforce Career Centers, and more.

2. If a school or training program sounds too good to be true, it probably is.

3. Research, research, research. Consider multiple schools before deciding which one is right for you. Ask for information on graduation and completion rates, student loan debt, and whether or not the credits you get will transfer to other schools. Sit in on a class, ask to speak to former students who have completed the program, and visit nyc.gov to read reviews from real students in the NYC Training Guide. Ask to see a list of employers that hire graduates, and call those businesses to ask their opinion of the school. You should also research the general field you’re interested in to make sure it’s the right fit and there’s potential for job availability and growth.

4. Avoid unlicensed schools. Some schools are operating illegally. If you go to an unlicensed school, you can’t take exams to become licensed in many fields such as nursing. Visit nyc.gov or call the New York State Education Department at (212) 443-4760 or (518) 474-3989 to check if a vocational or trade school is licensed. Remember, even if a school has a license, it might not be well run, so research the school before you sign up. Call 311 or visit nyc.gov to file a complaint about an unlicensed school.

5. Don’t sign up the day you visit a school. Before you sign up, you need to understand how much the program will cost and how you will pay for it. Do not make such an important decision on the spot! Take your time, and research the school. Visit nyc.gov for the NYC Training Guide to learn more about specific schools and programs.

6. Never sign anything you don’t understand. If a school pressure you to sign a contract or agreement on the spot, walk away. You have the right to bring some important forms so you can read them more carefully and review them with people you trust.

7. Ask for the school’s tuition cancellation policy in writing. The policy should describe how you can get a refund if you need to cancel or withdraw. However, once you have signed up, it can be tough to get your money back.

8. Be careful of taking on a lot of debt. Some schools charge tens of thousands of dollars. Often, the “financial aid” that is available isn’t free money, but rather loans you have to pay back—with interest. School loans last a long time, and there’s a limit on how much money you can borrow. Loans can also lower your credit score if you don’t pay them back on time. Make sure you understand the terms and will be able to make the payments. Remember that free and low-cost education and training options are available. See tip #1!

9. Avoid schools that “guarantee employment” after you graduate. A school can’t guarantee that you’ll get a job when you graduate. Many times, the schools that make these types of promises don’t actually place you in a job.

10. You have the right to file a complaint. Did you enroll in a school or training program but didn’t get what you were promised? Call 311 or visit nyc.gov to file a complaint.

Are you in debt from school?

Visit nyc.gov or call 311 and ask for an NYC Financial Empowerment Center, where you can get free one-on-one professional financial counseling.

*RAENS will provide adaptations based on local labor conditions.
Access NYC*

https://a069-access.nyc.gov/ACCESSNYC/application.do

ACCESS NYC is a free service that helps you find out if you may qualify for over 30 City, State and Federal benefit programs. You can apply online for certain programs through ACCESS NYC.
Single Stop

http://www.bcc.cuny.edu/Single-Stop/

The One Stop Source for Help

Single Stop provides students and their immediate families with access to benefits and services that help students stay in school and graduate. Whether it is afterschool programs, health insurance, legal advice, debt solutions, childcare, or government benefits, we can help to identify the services that are available to you. Single Stop offers:

Benefits Screening
The free benefits screening takes you through a quick series of questions to see which public benefits you qualify for. We will discuss the options that are best for you, help you complete the appropriate application(s), and then help you prepare for the application process.

Financial Counseling
Meet with a financial expert and learn lifelong strategies that will help you save money, build assets, and manage debt. We can also help you get your free credit report, establish credit if you have none, and improve your credit scores. We provide one-on-one, private counseling that will help you establish and achieve your financial goals. Financial counseling is available Tuesday and Wednesday afternoons. Contact us to make an appointment.

Legal Aid
If you have questions about divorce, child support, employment, housing, debt collection, public assistance, or another topic, come to the Single Stop office for a free and completely confidential consultation. Contact us to make an appointment with an attorney to answer any legal questions.

Tax Preparation
Get a free tax preparation and e-file submission through this special IRS approved program. Come to see us during tax season from January through April 15.
The CUNY Fatherhood Academy*

Are you a father between the ages of 18-24 years old? Are you unemployed or underemployed? Do you want to expand your education? Do you want to learn new ways to engage with your child?

The CUNY Fatherhood Academy is a **FREE** 16 week, 3-day a week program that can help you:

- Prepare for the TASC, NY’s high school equivalency exam.
- Provide a direct pathway to college enrollment at one of the three college campuses.
- Learn about important topics such as parenthood, health and financial literacy.

Programs available in the BRONX, BROOKLYN, AND QUEENS at 3 of CUNY’s Community Colleges

Visit us on the web at [www.cuny.edu/cfa](http://www.cuny.edu/cfa) Or call **311** to learn more and mention CUNY Fatherhood Academy.

*RAENS will provide adaptations based on local labor conditions.*
Reading a New York City School Evaluation*

Students analyze an evaluation of a New York City school. They read infographics and perform calculations using percents. They make an assessment of a school based on quantitative and qualitative data. They also consider what they would be looking for in a school for their children if they are parents, or what they would have wanted in their own high school experience.

PREP


MATERIALS

- Academy of Careers in Television and Film Snapshot handout
- The Mathematics of the High School for Careers in Television and Film worksheet

EXPLAIN

1. Did you know that public schools in New York City are given a report card by school evaluators to show parents and others how the school compares with other schools? What kind of information do you think should be included in this report card?
   
   > Examples: assessment of teachers from students and parents, condition of the school building and facility, incidences or perceptions of violence/safety.

2. You’re going to read a Report Card for a high school in Queens. There are nearly 50 pages of information on each school. What you are going to read is a snapshot, a short summary of the school’s assessments. This information is public information and can be found on the Department of Education’s (DOE) website. You can search for evaluations of every public school in New York City.
3 Distribute *Academy of Careers in Television and Film Snapshot* handout and have students read it.

**DISCUSS**

What kinds of information are included in this evaluation?

- General information about the school, number of graduates, who goes to college, how teachers and students feel about the school, etc.

What are your general impressions of this school?

Does it seem like a “good” school? Why or why not?

What makes a school good?

- Teachers that are respectful to students and parents and create a positive learning environment, physical and emotional safety for students, students are successful, the classes are interesting, extra curricular activities are offered, effective leaders are in charge.

4 Distribute *The Mathematics of the High School for Careers in Television and Film* worksheet and have students complete it. When students are finished, discuss their answers together as a class.
Academy for Careers in Television and Film Snapshot

2014-15 School Quality Snapshot / HS
Academy For Careers In Television And Film (30Q301)

Student Achievement

Progress Toward Graduation

Credits
98% earned enough credits in 9th grade to be on track for graduation
City: 84%
Borough: 86%
Comparison Group*: 88%

95% earned enough credits in 10th grade to be on track for graduation
City: 99%
Borough: 92%
Comparison Group*: 83%

Regents
How well does this school help students improve from their incoming proficiency levels and pass Regents exams?

English
Mathematics
Science
Social Studies

Graduation
4-Year
98% graduated within four years
City: 79%
Borough: 73%
Comparison Group*: 85%

6-Year
98% graduated within six years
City: 76%
Borough: 77%
Comparison Group*: 87%

At this school, how did students from different starting points in 8th grade perform in high school?

Starting Point
High School Outcomes
Graduated in 4 yrs
College ready

<table>
<thead>
<tr>
<th>School</th>
<th>City</th>
<th>School</th>
<th>City</th>
</tr>
</thead>
<tbody>
<tr>
<td>Level 3 or 4</td>
<td>100%</td>
<td>91%</td>
<td>100%</td>
</tr>
<tr>
<td>Level 2</td>
<td>100%</td>
<td>81%</td>
<td>73%</td>
</tr>
<tr>
<td>Level 1</td>
<td>94%</td>
<td>47%</td>
<td>29%</td>
</tr>
</tbody>
</table>

Closing the Achievement Gap
How well did this school help different groups of students graduate in four years?

English Language Learners N/A

Students with Special Needs

City's Lowest Performing Students

College and Career Readiness
98% successfully completed approved college or career preparatory courses and assessments
City: 46%
Borough: 53%
Comparison Group*: 56%

55% graduated college ready (met CUNY's standards for avoiding remedial classes)
City: 33%
Borough: 41%
Comparison Group*: 42%

72% graduated from high school and enrolled in college or other postsecondary program within 6 months
City: 53%
Borough: 57%
Comparison Group*: 57%

Postsecondary options that students from this school pursued:
22% CUNY (City University of New York) - 4 yr
29% CUNY (City University of New York) - 2 yr
14% New York State Public
6% New York State Private
1% Out of State
0% Other

*Comparison Group is made up of students from other schools across the city who were the most similar to the students at this school, based on their incoming test scores, disability status, economic need, and over-age status. Comparing the school's results to the "comparison group" result provides insight on how well the school is helping its students in light of their starting points and the challenges that they face.

The section ratings are based on more information than what is included in this summary report. For more information, please see: http://schools.nyc.gov/Accountability
## 2014-15 School Quality Snapshot / HS

### Rigorous Instruction

<table>
<thead>
<tr>
<th>Quality Review</th>
<th>Survey</th>
<th>Selected Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>How interesting and challenging is the curriculum?</td>
<td>91% responded positively to questions about Rigorous Instruction</td>
<td>89% of students say that they learn a lot from feedback on their work (City: 84%)</td>
</tr>
<tr>
<td>How effective is the teaching and learning?</td>
<td></td>
<td>94% of students know what their teacher wants them to learn in class (City: 90%)</td>
</tr>
<tr>
<td>How well does the school assess what students are learning?</td>
<td></td>
<td>51% of teachers say that students build on each other’s ideas during class discussions (City: 78%)</td>
</tr>
</tbody>
</table>

### Collaborative Teachers

<table>
<thead>
<tr>
<th>Quality Review</th>
<th>Survey</th>
<th>Selected Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>How well do teachers work with each other?</td>
<td>98% responded positively to questions about Collaborative Teachers</td>
<td>100% of teachers say that they work together to design instructional programs (City: 91%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>97% of teachers say that they have opportunities to work productively with colleagues in their school (City: 85%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>100% of teachers say that they feel responsible that all students learn (City: 89%)</td>
</tr>
</tbody>
</table>

### Supportive Environment

<table>
<thead>
<tr>
<th>Quality Review</th>
<th>Survey</th>
<th>Selected Questions</th>
</tr>
</thead>
<tbody>
<tr>
<td>How clear are high expectations communicated to students and staff?</td>
<td>89% responded positively to questions about Supportive Environment</td>
<td>53% of students feel safe in the hallways, bathrooms, locker room, and cafeteria (City: 89%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>61% of students say that teachers notice when they are upset or having emotional difficulty (City: 71%)</td>
</tr>
<tr>
<td></td>
<td></td>
<td>90% of students say that this school supports students in navigating the post-secondary process (City: 82%)</td>
</tr>
</tbody>
</table>

---

1 Quality Review Ratings from an experienced educator who visited and evaluated the school on May 6-7, 2014

2 Survey Response Rates
Teachers: 100%
Parents: 75%
Students: 95%

**KEY:**

- Excellent
- Good
- Fair
- Poor

The section ratings are based on more information than what is included in this summary report. For more information, please see [http://schools.nyc.gov/Accountability](http://schools.nyc.gov/Accountability).
### 2014-15 School Quality Snapshot / HS

**Academy For Careers In Television And Film (30X2011)**

#### Effective School Leadership

School leadership inspires the school community with a clear instructional vision and effectively distributes leadership to realize this vision.

**Survey**

- 97% responded positively to questions about Effective School Leadership
- City: 82%
- Borough: 82%

**Selected Questions**

- 100% of teachers say that the principal communicates a clear vision for this school (City: 86%)
- 100% of teachers say that curriculum and instruction are well coordinated across different grade levels (City: 82%)
- 94% of parents feel that the principal works to create a sense of community in the school (City: 89%)

#### Strong Family-Community Ties

The school forms effective partnerships with families and outside organizations to improve the school.

**Survey**

- 81% responded positively to questions about Strong Family-Community Ties
- City: 75%
- Borough: 74%

**Selected Questions**

- 94% of parents say that school staff regularly communicate with them about how the staff can help their children learn (City: 88%)
- 96% of parents feel that teachers try to understand families’ problems and concerns (City: 90%)
- 100% of teachers say that teachers at this school work closely with families to meet students’ needs (City: 91%)

#### Trust

Relationships between administrators, educators, students, and families are based on trust and respect.

**Survey**

- 95% responded positively to questions about Trust
- City: 89%
- Borough: 89%

**Selected Questions**

- 100% of teachers say that they trust the principal (City: 82%)
- 97% of parents say that they trust each other (City: 87%)
- 96% of parents say that school staff work hard to build trusting relationships with them (City: 91%)
- 93% of students say that teachers treat them with respect (City: 86%)

---

* Survey Response Rates
- Teachers: 100%
- Parents: 75%
- Students: 95%

**KEY:**

- Excellent
- Good
- Fair
- Poor

For more information on this document:
The Mathematics of the High School for Careers in Television and Film

Use the General Information section on the first page to solve the following problems.

1. During the year this report evaluated the school, how many students were Hispanic/Latino? Show your work below.

Write one sentence describing the steps you took to solve this problem.

2. How many were Black? Show your work below.

Write one sentence about the steps you took to solve this problem.

3. How many were Asian? Show your work below.
4. The only racial and ethnic categories presented are Hispanic, Black, White and Asian, but New York is so diverse. How can you rewrite these categories to capture the diversity of New York City students?

5. Describe the quality of the academics at this school. Use data from the snapshot to support your answer.

6. How does this school compare to other high schools in New York City? Use evidence from the snapshot to support your answer.

7. If you were choosing a high school for your child, a younger relative such as a sibling or cousin or niece/nephew, or friend, what information in addition to the information presented in this snapshot would you want in order to advise your family member or friend?
We Are New York: “Welcome Parents”*

Students watch a video from the City’s We Are New York video series titled, “Welcome Parents,” make predictions about the video’s content, practice taking notes, and write questions for their classmates to answer based on what they learn.

PREP

• This activity requires note-taking. Students should already be familiar with note-taking strategies before doing this activity.

MATERIALS

• This lesson requires a computer and projector
• We Are New York worksheet
• What You Can Do handouts
• Extension Activity: Write Carmen a Letter handout

EXPLAIN

1 Moving to a new country and learning a new language are among some of the biggest challenges a person can face in life.

What about this experience do you think is difficult and why?

➢ Leaving your home, family and friends, learning new cultural traditions and norms, not knowing anyone or many people, getting lost, not being able to say what you think/feel/need.

2 Consider your own experience or try to put yourself in the shoes of someone who is a parent and has had to face this challenge with their children.

What are some issues people might encounter, specific to being a parent or becoming a parent, in a new country trying to learn a new language?

➢ Not being able to communicate with kids’ teachers, healthcare providers, friends’ parents, etc. Trying to access support services for children. Trying to help children with homework. Difficulty finding adequate employment to support a family.

3 Today we are going to watch a video about parents who are new to the United State and to speaking English. We are also going to practice note taking.
4 Distribute *We Are New York* worksheet and write the title of the video, “Welcome Parents,” on the board. Ask students to write 2 predictions about the video based on the title.

5 Play video:
Ask students to take notes on the video as they watch. They should note anything that seems important to understanding who the characters are and what is happening in their lives. Students should also make a note of anything they find interesting, surprising or confusing and write down any questions they have.

6 When the video is finished, ask students to complete the rest of the worksheet using their notes.

7 When students are finished writing their questions, have them exchange papers with a partner and answer each other's questions. When they are finished, students should correct each other's papers and return them.

**DISCUSS**

Who was your favorite character and why?

What are the support services for parents of NYC public school children we learned about in the video? How does each one help parents?

- Parent Coordinator—meets with parents and gives them advice, resources, assistance
- Translator—parents can request a translator when they need to communicate with a teacher, principal, school staff, etc.

If you had a parent-teacher conference coming up, what could you do to prepare?

- Write down what you want to say, get together with friends and practice asking questions, take a pen and paper to conference to take notes, repeat back what you hear, ask questions.

What did you learn from the video that could be useful even if you aren't a parent or learning a new language?

- Working with your community can help solve problems, ask questions when you don't understand something, investigate resources that could be available to you, you usually aren't alone (other people have the same challenges as you), you can be a leader in your community by helping to organize others around a common goal.
We Are New York

Complete the questions below, based on the *We Are New York* video. Complete the first question (with two responses) before you watch the video, and the rest of the questions once you have watched the video.

The title of today’s video is ________________________________.

Write 2 predictions about this video based on the title:

1. __________________________________________________________________
2. __________________________________________________________________

After watching the video:

Were your predictions correct? Explain why or why not.

1. __________________________________________________________________
2. __________________________________________________________________

Write 3 questions about facts from this video for a classmate to answer. Give your paper to a classmate and have them write the answers to your questions.

**Question 1:** __________________________________________________________

Answer:

**Question 2:** __________________________________________________________

Answer:

**Question 3:** __________________________________________________________

Answer:
Extension Activity: Letter to Carmen

Students read two tip sheets. One addresses Carmen’s situation directly; the other is about parental school involvement more generally. After reading the tip sheets, they write a letter to Carmen giving her advice.

MATERIALS

• What You Can Do to Prepare for Parent-Teacher Conferences tip sheet
• Dear Carmen handout

EXPLAIN

1 There are so many things that parents can do to help their children succeed in school.
   Read the What You Can Do to Prepare for Parent-Teacher Conferences tip sheet, and annotate it, by writing an example of how a parent can use each tip.

2 Distribute the What You Can Do to Prepare for Parent-Teacher Conferences tip sheet.

3 Distribute the Dear Carmen handout and ask students to write a letter, using the tip sheet and their own experiences, offering Carmen advice on the parent-teacher conference. They should consider their own experiences with learning a language, immigration or parenting, as well as explaining how she should use some of the tips on the tip sheet. They can discuss experiences related to building community, accessing resources, learning something new or being in an unfamiliar place.

NOTE

Teachers may want to use writing strategies they have been using in class, such as creating an outline, using pair discussions or writing a chart of topics and topic sentences.
What You Can Do
To Prepare for Parent-Teacher Conferences

Carmen
Write down what you want to say.

Fatima
Get together with friends and practice asking questions.

Pierre
Take your notebook with you.

Juan
Don't forget your pen!

Ming
Repeat back what you hear.

Sayeed
Ask questions!
Dear Carmen

Write a letter to Carmen. Ask her a question. Give her advice. Tell Carmen your story!

Dear Carmen,


Sincerely yours,
We Are New York: Stay In School

Students watch a video from the We Are New York video series that depicts a boy who is struggling with the decision to stay in school or drop out to help his family out financially and develop character maps for the two main characters.

PREP

• Vocabulary: flashback

MATERIALS

• Newsprint and markers
• Stay In School screen capture
• This lesson requires a computer and projector

EXPLAIN

1 Distribute Stay In School screen capture and ask students what they see. You may prompt them by asking what people, places and things they see, and what they think is happening. Make thinking visible by writing student ideas on newsprint that will remain posted around the room.

Specifically, on one piece of newsprint establish the characters of A Man and on another establish the character of A Boy; you will be developing character maps for each as the story unfolds.

2 Ask what they think the story will be about. Finally, ask students what they wonder about the story we are about to watch.

3 Transition to viewing by using student predictions to offer a brief overview of the episode. Make special note of the concept of a flashback.

4 Remind students about the two pieces of newsprint containing the words “A Boy,” and “A Man.” Tell them we will be learning who these people are and adding information to the posters as we go. (These will serve as the character maps for Diego and Uncle Juan.) Begin viewing.

5 Viewing segment 1: Stop after Diego asks Lupe in the front hall, “Hey, Lupe, do you want to play?” [end of Scene 2] Ask class what we have learned about the Boy. Add their ideas to the Boy’s character map, including his name. Clarify their understanding of how a flashback is being used. Resume viewing.
6 **Viewing segment 2:** Stop after Diego learns his aunt and uncle are having trouble paying the rent and Uncle Juan says, “Come on. Eat. Eat.” [end of Scene 6] Ask class what we have learned about the Man. Add their ideas to his character map, including his name, then ask specifically what his problem is. Summarize this in one sentence and add it to the map. Resume viewing.

7 **Viewing segment 3:** Stop after Omar asks Diego, “Did they find out the truth?” [end of Scene 9] Check comprehension by asking students to summarize the action so far. Elicit Diego’s problems and summarize these clearly on his character map. Resume viewing.

8 **Viewing segment 4:** Stop after Juan and Carmen confront Diego and he replies, “I don’t know. I don’t know.” [end of Scene 12] Check comprehension by asking students, “How do we know Diego is doing poorly in school?” Establish that the teacher mentions three reasons in her phone message. Then ask what problems Diego says he is having in school; he mentions three problems to his aunt and uncle. Finally, ask students what Diego’s choices are at this point. It should be clear that he can either stay in school or quit and go to work. Have the class vote on their prediction and ask them what makes them say that. Resume viewing.

9 **Viewing segment 5:** Stop after Diego tells his classmates, “My uncle took two days off of work.” [end of Scene 16] Check comprehension by asking students what things Diego and his family did to find solutions to his problems. Add student ideas to Diego’s character map under the title, “Solutions.” Resume viewing.

10 **Viewing segment 6:** Play video to the end. Ask students to discuss and summarize the services available to NYC students to stay in school. Diego and his family learn about this from their visit to the school counselor.

**DISCUSS**

- Ask students, “Who was your favorite character?” and “Why?” (“What makes you say that?”). Many will indicate that they admire Diego for his decision.

- Ask students to summarize how Diego solved his problems and who helped him to do this. Write students’ ideas on newsprint.

- What did you learn from watching Diego solve his problem and how could this information be useful to you in your own life?
Stay in School Screen Capture

Lesson Guide

Section 14

Writing Activity: Advice for Teachers

Students will reflect on a moment in their past that an educator or educational experience helped them grow as a student or person. They will complete a three-paragraph writing assignment about this experience, conduct peer reviews, and revise their writing.

Note: Rather than focus on one writing strategy, this activity is designed to be flexible and invites teachers to use the activity as is (good for lower level students) or incorporate a focus on a specific writing skill of their choosing, such as topic sentences, paragraph structure, or transitional sentences.

PREP

- Review the writing assignment.
- **Optional:** Choose a writing strategy to incorporate into the activity. This could be a skill you have already introduced or are introducing for the first time. Some possible options include:

  - **Topic Sentences:** Use sentence starters/stems to help students focus on developing effective topic sentences for their paragraphs. For example:
    
    According to the article,…
    The article focused on,…
    The key issue discussed in the article…

  - **Paragraph Structure:** Use a Sandwich Paragraph (or other) graphic organizer to help students understand the different parts of a paragraph. See the following link or google “sandwich paragraph” for more guidance. https://missisparagraphpage.weebly.com/paragraph-sandwich.html

Respond to text in writing

NYSED/CUNY CareerKit for HSE & ESL Learners (2019) • Construction
Transition phrases/sentences: Use transitional sentence stems/ starters to help students understand strategies useful for transitioning between ideas. For example:

- In addition,....
- As a result,....
- First,...  Second,...  Third,...  Finally,...

MATERIALS

- Writing Activity: Advice for Teachers worksheet

EXPLAIN

1. Who has had a favorite teacher or has a favorite positive memory from a time when you were in school? It could be from any age or grade or even now! Elicit 2–3 brief examples from students.

2. Today you are going to write about a positive educational experience you’ve had as a way to give advice to all the teachers out there. You’ll need some paper and a pen or pencil.

3. Review any applicable writing skills you have decided to focus on, such as topic sentences, paragraph structure, transition sentences, etc. (See Prep section for examples)

4. Distribute Writing Activity: Advice for Teachers handout. Have students read and explain the instructions and then give students time to write. You may also want to write the prompt on the board as follows:

**PARAGRAPH 1:** Describe the event.

**PARAGRAPH 2:** Describe how the event impacted you.

**PARAGRAPH 3:** What did you learn about education from the experience and what advice do you have for teachers?

Write in as much detail as possible!
Writing Activity: Advice for Teachers

In this writing activity, you will write three paragraphs about a positive educational experience you had—the earlier, the better. Each paragraph should have a topic sentence, details, and examples. Make sure your sentences flow with clear logic from one idea to the next and that your paragraphs address the topic completely.

Think back to one of your first positive educational experiences. Was it in preschool, kindergarten or elementary school? What were you doing—playing with blocks or trucks, dressing up, treating a pretend patient, reading? What did a teacher say or do that made you feel included, intelligent or important? Or maybe it was even another student that made you feel this way. Maybe it was an activity or subject that you were especially excited about. Think back to an early educational experience that’s a happy memory and write about it in as much detail as possible. Use the following template as your guide.

**PARAGRAPH 1:**

**Early Positive Educational Experience**
Describe an early positive educational experience that had an impact on you in as much detail as possible. Make sure to include your age, location, surroundings including people, and what made the experience positive for you.

**PARAGRAPH 2:**

**How it Impacted You**
Describe the impact this experience had on you, including why you remember it, how it changed you, and why this change was important.

**PARAGRAPH 3:**

**Lessons for Educators**
Based on this experience, describe what you learned about education and what advice you would give to teachers. Some things to consider while writing this paragraph:

- What creates a positive educational experience? What do children need in order to be and feel successful at this age?
Extension Activity: Peer Editing Advice for Teachers

Students engage in a revision process of reading one another’s writing, providing feedback, receiving feedback from their partner, and revising their writing based on the feedback.

PREP

• Be prepared to explain vocabulary: relevant, peer, edit, revise

MATERIALS

• Extra copies of written assignment
• Peer Editing Worksheet and Error Log

EXPLAIN

1. Even the most successful writers have editors. Editors can catch mistakes writers have missed. Before you have someone else look at your writing, it’s always important to re-read it yourself and make sure it’s the best it can be.

2. Ask students to re-read what they have written to make sure:
   • It has at least 3 paragraphs and all the writing in each paragraph is relevant to the assignment and focused on one idea.
   • The writing is clear and easy to understand.
   • The writing is grammatically correct. It can help to read aloud or think each word to yourself.
   • There are no spelling mistakes.
   (You may want to write these on the board so students can refer to them as they re-read.)

3. If you encounter any mistakes, correct them now.

4. Now, write down three questions you have for your editor. These are parts of your writing that you are unsure of, for example, a question about the clarity of a certain part, or a question about whether one sentence is too long and should be split in two. Your editor is here to help you, so ask questions that will help clarify what might make your writing better.
5 Distribute *Peer Editing Worksheet* and *Error Log*.

6 Exchange your writing with a partner, read your partner's writing and complete the following peer editing worksheet based on what you read. You will also need the assignment when completing the peer edit worksheet. Your goal is to help your partner make her writing the best it can be.
Peer Editing Worksheet

Complete this sheet based on your reading of your partner’s writing.

Editor ___________________________ Date ___________________________
Writer ___________________________

A particularly effective part of this writing was:

PARAGRAPh ONE
This paragraph was about:

It was / was not (circle one) closely related to the assignment because:

It was / was not complete because:
PARAGRAPHS TWO
This paragraph was about:

It was / was not (circle one) closely related to the assignment because:

It was / was not complete because:

PARAGRAPHS THREE
This paragraph was about:

It was / was not (circle one) closely related to the assignment because:

It was / was not complete because:
**Error Log**

Complete the chart below to help your partner refine his or her writing.

<table>
<thead>
<tr>
<th>I found the following grammatical errors:</th>
<th>Where I found them:</th>
<th>Why they are incorrect:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>I found the following problems with organization:</th>
<th>Where I found them:</th>
<th>Why this was a problem:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>I found the following parts unclear:</th>
<th>Where I found them:</th>
<th>What made these parts unclear:</th>
</tr>
</thead>
<tbody>
<tr>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>


**Discussing Feedback**

When students are finished with the peer editing sheet, they should discuss all points with their partners, and give their partners the sheet. Once they are finished, they should switch speaking and listening roles, so that both students’ writing is discussed. Once both are discussed, the editor should give the writer the feedback sheet.

Students should bring their first draft and the peer edits of their own writing to the next session.

---

**Revision, Based on Feedback**

With their partner’s feedback in front of them, writers should make changes to their writing on the first draft or on an additional sheet as necessary. The teacher circulates to check progress and answer questions. Pairs should continue to sit together in case they have questions for one another.

---

**Final Draft**

Using revisions, students write final drafts, at computers or by hand. Students turn in the first draft, peer edit worksheet, revision notes and final draft by the end of the class.

---

**A Celebration of Writing: Sharing Excerpts**

As the teacher circulates, she selects components of students’ writing that are particularly effective and asks the writer to share with the class, discussing as a class what made these parts particularly effective.
TASC Argumentative Essay: The Screen Time Debate

Students read and discuss the pros and cons of screen time for young children. Using evidentiary reasoning from articles and their personal experience, students write an argumentative essay about the issue. The argumentative essay is a type of essay that appears on the TASC exam.

PREP

- Pre-teach vocabulary from *Baby Einsteins*, including: detrimental, passive, interferes with, interact, stimulation/overstimulated, proliferate.
- Pre-teach vocabulary from *Parents, Calm Down*, including: abstain/abstinence, misleading, claim (as a noun), cognitive, moderation, crucial.

MATERIALS

- Picture 1 (either projected onto a screen, or copies to distribute to the students)
- *TASC Argumentative Essay: Impact of Screen Time on Children* handout
- *Baby Einsteins: Not So Smart After All* and *Parents* article
- *Calm Down about Infant Screen Time* article
- *The Pros and the Cons: Screen Time Debate* double entry journal
- *Argumentative Essay Template* handout

EXPLAIN

1. **Project or distribute the picture of the baby at the computer. Ask students what they see in the picture, and how they feel about it. Lead a short discussion to draw out students’ opinions about and experiences with small children using electronic devices.**

2. **SAY:** Today we will read two articles with opposing views about how screen time affects small children. Then we will write an argumentative essay in support of one side of the debate or the other. This is a type of essay that appears on the TASC exam.

3. **Distribute *TASC Argumentative Essay: Impact of Screen Time on Children* handout. Ask students to read the essay prompt on their own and then together as a class, develop two guiding questions for the reading based on the prompt. Write the guiding questions on the board. Some examples might be:
• Does looking at screens, such as television, phone, tablet or computer screens, harm children?
• Should parents allow their children to watch television, phone, tablet or computer screens?

4 Distribute *Baby Einsteins: Not So Smart After All* article and *Parents, Calm Down about Infant Screen Time* article. Ask students to read the articles and try to answer the guiding questions. They should annotate the articles, noting the main ideas in the margins, underlining the evidence the writers use to support their arguments, and writing down any questions they have.

5 Tell students that one way to understand a reading well is to focus on the author’s words, and then explain and analyze them in our own words. Distribute *The Pros and the Cons: Screen Time* debate double entry journal and have students read and explain the instructions.

6 Help students complete the double entry journals, first by copying a sentence from the article into the left-hand column. They should choose a sentence from the article that they feel best explains a reason WHY screen time is harmful to kids, or a reason why it’s not so harmful (or HOW kids can use screens in a way that is helpful). After copying their quotation, students should explain/analyze the quotation in their own words in the right-hand column, then repeat the process with a second example.

**DISCUSS**

Lead a short follow-up discussion about students’ opinions about small children and screen time. Draw out any new ideas that students may have learned in the reading.

Some additional questions might include:

• Are parents using screens as babysitters, or interacting with children while they watch?
• What is realistic for parents?
• What types of media are children using?

**WRITE**

Students will now develop their essay according to the prompt. Teachers may want to use the *Argumentative Essay Template* included to help students plan their essay or employ any essay-development strategies they have been using in class, such as using a graphic organizer, creating outlines, or discussing in pairs prior to writing the essay. Students should include quotations from the double journal entry or others they find compelling from the readings. They can also include examples from their own experiences or comments they’ve heard from trusted individuals or organizations.
Argumentative Essay:
Impact of Screen Time on Children

There is an ongoing debate about whether or not parents should allow their young children to spend time looking at televisions, smart phones, or computer screens. People who oppose screen time for young children believe it can adversely affect their brain development. Others claim that keeping young kids away from screens entirely is unrealistic and ignores research that says it’s not so bad.

Weigh both sides of the claim, then write an argumentative essay supporting one side or the other. Be sure to use information from both texts in your essay.

Before you begin planning and writing, read the two texts:

1. Baby Einsteins: Not So Smart After All article
2. Parents, Calm Down about Infant Screen Time article

As you read the texts, think about which details you might use in your essay. Annotate the article, taking notes on the details as you read. After reading the two texts, create a plan for writing your essay. Think about what you know about the topic. Think about other information, details and examples that you may want to use. Plan how you will introduce the topic and think about the main ideas of the paragraphs in your essay. This is one type of essay that appears on the TASC exam.
Picture 1

Photo: http://cdn.sheknows.com/articles/2013/04/toddler-on-computer.jpg
Baby Einsteins: Not So Smart After All

By Alice Park from Time

Adapted from http://content.time.com/time/health/article/0,8599,1650352,00.html

The claim always seemed too good to be true: park your infant in front of a video and, in no time, he or she will be talking and getting smarter than the neighbor’s kid. In the latest study on the effects of popular videos such as the “Baby Einstein” and “Brainy Baby” series, researchers find that these products may be doing more harm than good. And they may actually delay language development in toddlers.

Led by Frederick Zimmerman and Dr. Dimitri Christakis, both at the University of Washington, the research team found that with every hour per day spent watching baby videos, infants learned six to eight fewer new vocabulary words than babies who never watched the videos. These products had the strongest detrimental effect on babies 8 to 16 months old, the age at which language skills are starting to form. “The more videos they watched, the fewer words they knew,” says Christakis. “These babies scored about 10% lower on language skills than infants who had not watched these videos.”

It’s not the first blow to screen time for young children and it won’t be the last. Mounting evidence suggests that passive screen time not only doesn’t help children learn, but could also set back their development. Last spring, Christakis and his colleagues found that by three months, 40% of babies are
regular screen viewers (including television, computers, tablets, or smartphones); by the time they are two years old, almost 90% are spending two to three hours each day in front of a screen. Three studies have shown that screen time, even if it includes educational programming such as Sesame Street, delays language development. “Babies require face-to-face interaction to learn,” says Dr. Vic Strasburger, professor of pediatrics at the University of New Mexico School of Medicine and a spokesperson for the American Academy of Pediatrics. “They don’t get that interaction from watching TV or videos. In fact, the watching probably interferes with the crucial wiring being laid down in their brains during early development.” Previous studies have shown, for example, that babies learn faster and better from a native speaker of a language when they are interacting with that speaker instead of watching the same speaker talk on a screen. “Even watching a live person speak to you via television or computer is not the same thing as having that person in front of you,” says Christakis.

This growing evidence led the Academy to issue its recommendation in 1999 that no child under two years old watch any television. The authors of the new study might suggest reading instead: children who got daily reading or storytelling time with their parents showed a slight increase in language skills.

Though the popular baby videos in the Washington study were designed to stimulate infants’ brains, not necessarily to promote language development, parents generally assume that the products’ promises to make their babies smarter include improvement of speaking skills. But, says Christakis, “the majority of the videos don’t try to promote language; they have rapid scene changes and quick edits, and no appearance of the ‘parentese’ type of speaking that parents use when talking to their babies.”

As far as Christakis and his colleagues can determine, the only thing that baby videos are doing is producing a generation of overstimulated kids. “There is an assumption that stimulation is good, so more is better,” he says. “But that’s not true; there is such a thing as overstimulation.” His group has found that the more screen time children have, the shorter their attention spans later in life. “Their minds come to expect a high level of stimulation, and view that as normal,” says Christakis, “and by comparison, reality is boring.”

He and other experts worry that the proliferation of these products will continue to displace the one thing that babies need in the first months of life—face time with human beings. “Every interaction with your child is meaningful,” says Christakis. “Time is precious in those early years, and the newborn is watching you, and learning from everything you do.” So just talk to them; they’re listening.
Parents, Calm Down About Infant Screen Time

By Chris Ferguson, in Time Magazine, Feb. 3, 2015


Too much of the wrong kind of media can hurt infants, but that doesn’t mean you need to practice total abstinence

Parents of infants face hard choices about how to raise their children, and sometimes misleading information can get in the way of their decisions. Take screen time: readers of the Guardian were recently treated to the claim that allowing toddlers to play with iPads or other small screens could damage their brains. It turned out, however, that the story (since corrected) was not based on an actual research study, but a press release regarding a commentary in the journal Pediatrics. The story was one in a series of claims in recent years that tablet use hurts infants’ development—scary headlines that too often mislead readers about research that is much less clear or consistent than claimed.

Both journalists and scholars are responsible for needlessly scaring parents. For instance, the American Academy of Pediatrics (AAP) has long called for complete avoidance of screen time in infancy. Yet a number of scholars and commenters have criticized the AAP for being both unrealistic and ignoring data that doesn’t fit their scarier message. One of the top experts in this area, Deborah Linebarger has said that the AAP should present all data on screen time rather than ignoring data that suggest positive benefits of media while sensationalizing flawed studies that find negative relations.

So what does the research really say on screen time for infants? Well, it’s complicated. First, claims that exposure to screens (including television) is associated with reduced cognitive development in childhood are controversial. In one of my own recent studies with coauthor M. Brent...
Donnellan, we found that total abstinence, that is to say families following the AAP's recommendations, was actually associated with lower cognitive development, not higher. But this doesn’t mean that anything goes—no one is suggesting that we sit baby down for a Terminator marathon.

The non-profit group Zero to Three recently released screen time recommendations for infants. As they note, it really is not so simple as to say that screens are or aren’t good for infants. Nor is abstinence the answer. It’s more about using screens in a quality way, as when caregivers engage with infants while they watch and explain what they are seeing. Screens such as iPads or smartphones can actually be used in ways that promote babies’ cognitive and social development. But as they write, moderation is key: “the need for limits is still important because research clearly shows that it is active exploration of the real, 3-D world with loving, trusting caregivers that is most critical for healthy early development.”

In another recent study, presented by Deborah Linebarger at the American Psychological Association conference in 2014, researchers found that parent-toddler interactions around media were most crucial for toddlers’ language development and that media that shows real characters in real situations is associated with better language development. Too often newspaper headlines and the AAP present media and parenting as a kind of zero-sum game. But media can be intelligently incorporated into smart parenting.

Who the media was designed for in the first place is important too. One 2010 study by Rachel Barr and colleagues found that infant exposure to adult-oriented media was associated with less cognitive development, but exposure to child-oriented media was not associated with any cognitive outcome.

So, given that the data is often complex and contradictory and even scholars debate these issues, what should parents do? Is it ok to let the little ones have a bit of screen time? Probably, so long as it’s not replacing interactions with parents and it’s using media that is educational or geared toward children and shows real characters in real situations. Don’t think of media as an either/or but something you can use with children and talk to them about. Sure, if you’re letting your infant watch CNN alone for hours on end, you’ve probably got media wrong. But total abstinence for toddlers isn’t necessary. Pressuring parents with total media abstinence, particularly with nonsense claims of damaged brains isn’t good science. It’s just frightening and shaming parents.
The Screen Time Debate—The Cons

Use the following double entry journal to write about why the readings say that parents should NOT let young children have screen time.

<table>
<thead>
<tr>
<th>In the words of the article (a quotation)</th>
<th>In your own words, explain what it means or how/why it’s saying that.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. “</td>
<td></td>
</tr>
<tr>
<td>2. “</td>
<td></td>
</tr>
</tbody>
</table>
**The Screen Time Debate—The Pros**

Use the following double entry journal to write about why the readings say that it's OK for parents to let young children have screen time.

<table>
<thead>
<tr>
<th>In the words of the article (a quotation)</th>
<th>In your own words, explain what it means or how/why it's saying that.</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. “</td>
<td></td>
</tr>
<tr>
<td>2. “</td>
<td></td>
</tr>
</tbody>
</table>
Template for TASC Argumentative Essay

**ESSAY TEMPLATE: ARGUMENTATIVE ESSAY**

**PARAGRAPH ONE: Introduction**

- The topic
- Why the topic is important
- Your claim about the topic

An important issue today is ______________. Some people feel that ______________. Others believe ______________. My own opinion is that ______________.

**PARAGRAPH TWO: Reason One to support your claim**

Further explanation/examples/evidence to support this reason
*(Check that your whole paragraph is ONLY about Reason One)*

One reason I believe ______________ is that ______________. The article ______________ states that ______________. This article gives the example of ______________.

**PARAGRAPH THREE: Reason Two to support your claim**

Further explanation/examples/evidence to support this reason
*(Check that your whole paragraph is ONLY about Reason Two and that Reason Two is DIFFERENT from Reason One)*

Another reason I think ______________ is that ______________. As the author of ______________ shows, ______________. In my own experience, ______________. For instance, ______________.
<table>
<thead>
<tr>
<th>PARAGRAPH FOUR: Counterclaim</th>
</tr>
</thead>
<tbody>
<tr>
<td>Mention ONE reason from the text that goes AGAINST your claim and explain why you disagree with it.</td>
</tr>
<tr>
<td>Although __________________ provides some evidence that __________________, I do not believe this is enough to justify the claim that __________________. Instead, __________________.</td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>PARAGRAPH FIVE: Conclusion</th>
</tr>
</thead>
<tbody>
<tr>
<td>Two or three sentences that return to your claim and say again (1) why it is important (2) how things in general will be better if people do things the way you have recommended in your essay.</td>
</tr>
<tr>
<td>In conclusion, __________________ (restate your claim in different words and why it is important.)</td>
</tr>
</tbody>
</table>