Why Are Parent-Child Classes So Vital to the Health of a Waldorf School?

Diana Marshall Mei[1]

Why should Waldorf schools offer parent-child classes? Does it make a difference in the long-term health of the school to have parents learning about Waldorf pedagogy when their children are still young? What long-term benefits do these classes offer to children, parents, and schools? Can we do more as parent-child educators to support the long-term health of the children at this crucial stage of their development? These are some of the questions asked of parent-child educators that I will address in the following pages.

At the San Francisco Waldorf School, we offer several weekly classes for parents and children aged birth to three-years-old. There are two categories of classes: one that includes a formal observation component, the other that includes a less formal observation and is more activity-based. There are two categories of classes: one that includes a formal observation component, the other that includes a less formal observation and is more activity-based. Classes with the quiet observation component are offered separately to three age groups: birth to walking, walking to twenty months, and twenty to thirty months. The activity-based classes offered to mixed-age toddlers are focused on crafts, cooking, or time in nature. The classes meet once a week over two periods of 15 to 18 weeks during the school year. These long periods give parents an opportunity to form a trusted community of like-minded adults at the beginning of their parenting journey. Many long-time Waldorf parents as well as Waldorf teachers began their association with Waldorf education when their children were babies.

So why is it important to start so early? Having worked with parents and their children for the past 35 years, I have heard the biographies of hundreds of children and know that learning issues frequently link back to events in these early years. It is my hypothesis that if those of us working as parent-child teachers intervene gently and effectively before developmental blockages get in the way, we can make a significant difference in the life of the child and of the school. Our task as Waldorf educators is to offer guidance that will foster the resilience and capacities that children need in order to meet the challenges ahead of them.

Our school, located in tech-saturated Northern California, is facing the challenge—along with many other Waldorf schools around the country—of having to provide educational support services for increasing numbers of children. These support services require us to employ two nearly full-time staff members whose focus is to work with class and subject teachers to identify and ameliorate learning challenges. Our school has also been blessed with steady consultation by Ingun Schneider, Co-Director of Waldorf Learning Support—a three-year part-time training for teachers wishing to specialize in learning support. Ingun has been providing her impeccable diagnostic and prescriptive skills to support the children in our school along with invaluable guidance to our teachers, staff, and parents. Even with such excellent support, these services are absorbing more and more of our school's financial and administrative resources. I believe that the introduction of gentle interventions and clear, respectful guidance during our parent-child classes could mean less need for learning support later, thus leading to significant benefit for our schools in the long term. Below are specific examples of these interventions. (Please note: names and distinguishing details of parents and children mentioned in this article have been changed in order to protect their privacy.)

No Propping

Sara brought her eleven-months old daughter Eliza to an infant parent-child class. While observing Eliza, I noticed that she was not crawling in a regular cross-lateral hands and knees fashion. Instead, she was sitting on her bottom and extending her right leg out in front of her before scooting across the floor, using her hands and left foot in a crab-like motion. After a few classes, Sara approached me and asked if I had any advice as to how to get Eliza to crawl "normally." She told me that she had brought her concerns to her pediatrician, who had done a thorough examination and found nothing wrong physically. The doctor assured Sara that "some children just don't crawl." I arranged to meet privately with mother and child after class the following week.

1 The author is deeply grateful to Ingun Schneider for her contributions to this article. It could not have appeared in this form without her significant advice and detailed editing.

When I entered the room where they were waiting after class, Sara was changing Eliza's diaper. When she was done, Sara sat Eliza on her bottom, using the familiar gesture of scooping the child's legs out from under her. Once seated, Eliza began to scoot around again. Sara recalled that as an infant, Eliza had a very low tolerance for lying on her back and that she had been sitting up since about five months old. Eliza had not followed the natural infant movement progression of lying on her back, rolling over to her belly, rocking on her knees, crawling, and sitting. She never learned to sit of her own volition and instead would be propped up to sitting position surrounded by pillows. With Sara's permission and after letting Eliza know what I was about to do, I picked her up and placed her on her hands and knees. She immediately flopped onto her belly. She did not have the muscle tone necessary to hold up her torso. I turned Eliza onto her back and began to play "pat-a-cake" with my hands on her ankles and moving her legs and feet, doing all the traditional movements that normally one would do with the hands. Eliza was happy to play along and offered very little muscle resistance, even allowing me to stretch her feet up to touch her cheeks. When I stopped, she immediately signed "more" and we played five or six more times. I suggested to Sara that Eliza had not learned to incorporate her lower body into her movement and encouraged Sara to place Eliza on her back instead of her bottom when putting her down, so she could fill in the developmental steps to sitting and crawling that she had missed. (I warned Sara that Eliza might not like this!) I also suggested that Sara play games with Eliza's feet at each diaper change, giving Eliza an opportunity to enjoy leg movements without the stress of having to support herself. And I urged Sara to ask her pediatrician for a referral to a pediatric physical or occupational therapist to rule out any more serious issues and to work together to strengthen Eliza's lower body. My intuition told me that there was no underlying pathology other than the fact that Eliza didn't have much awareness of her lower body. I was confident that once she became more aware of her lower body, she would start to move her legs in a normal way.

Eliza was referred to an occupational therapist who saw her once a week for a couple of months and prescribed similar games and activities to the ones I had suggested.

Although Eliza complained vehemently every time she was placed on her back and had to figure out how to roll over, crawl, and sit on her own, her parents persisted. Sara reported that before long, Eliza was enjoying her freedom; she mastered rolling over and began to crawl and sit up unassisted. At twenty-two months of age, Eliza began to walk. Although this age is a bit late compared to the average twelve-to-sixteen months onset of walking, it is still within normal range when there are no other developmental issues. And, since this delay in walking afforded Eliza several more months of crawling, it was worth it. Unfortunately, Eliza's family had since moved away and we lost touch; otherwise, I would have liked to have followed her progress as she entered Nursery and the grades. However, the case described next gave me the opportunity to see how Eliza's educational path could have evolved without these interventions.

What long-term benefits do parent-child classes offer to children, parents, and schools?

At a grade school child study, the studied child was described by his class teacher as "walking as if his legs were being pulled along behind his torso." Those of us who had observed his walk knew just what she was describing. It was as if the boy was unaware of the lower half of his body. And when the teacher reported on the boy's early years, she confirmed my suspicion that he had not crawled on hands and knees but had scooted around on his bottom, just like Eliza used to do. As a fifth grader, this boy was receiving several hours per week of educational support, both within and outside school. I could not help but wonder how different this student's learning support needs might have been if his parents had been aware of how important it was for him to crawl.

Unconscious vs. Conscious Balance

As parents, grandparents, and educators, we know how important it is to guide and nurture the developing children in our care, especially during the first three years of life. In the parent-child program, the first classes of every session begin with an explanation of why the children thrive when left free to move and develop into their uprightness completely on their own. I explain to the adults in the classes that when we allow the children to move from lying on their backs to rolling over, crawling, sitting, standing, and finally to walking—all on their own—they not only have a delightful sense of mastery over their own bodies; they also have developed a strong core of musculature. This core strength allows them to maintain their balance in an unconscious way, thus leaving consciousness free for other types of learning.

When we prop up a child into a sitting position or hold her fingers while she tries to walk, the child is using her

surface muscles to try to balance. To be engaged, surface muscles require consciousness. When we use consciousness to maintain our balance and to remember where our body is in space (proprioception), then our consciousness is not available for other types of learning. We see this consciousness-dependent balance manifest in the later years, when children sitting at their desks fidget, tap fingers and toes, or rock in their chairs, all in service of reminding themselves where their bodies are, so that they can feel balanced and safe. When looking across a sea of children in a grades classroom, you can pick out those who were allowed to come to uprightness on their own without adult interference. They are, for the most part, the children who can sit still.

No Assisted Walking

Dorothy and her children's nanny, Isabel, brought Dorothy's twenty-months old twins, Emily and Elliot, to an open-classroom event. Open classroom events are for families interested in enrolling in the parent-child program. They are held during non-class hours and allow for posing questions, meeting the teacher, and exploring the classroom with only one or two families present. They came early and stayed late so we had lots of time to visit, chat, and observe the twins in the safe environment of the parent-child classroom. Emily's right leg was in a full leg cast. Elliot was busily zooming around the classroom exploring everything. At one point he walked up a wooden ramp to a platform about six inches off the floor. Both Dorothy and Isabel panicked and rushed to him just as he stepped off the platform into the air, apparently having no sense of a need to navigate the gap from the platform to the ground.

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It appeared that both twins never attempted to break their falls with their hand and would regularly land on their head or shoulders. Observing this, I understood why both women were quick to move any toy or playing-block out of the children's way to prevent their tripping. In addition, each time one of the children fell to their knees or on their bottoms, the adults were there to catch them mid-fall, or pick them up and put them back on their feet. Dorothy was proud of the fact that the twins learned to walk early; they were barely ten months old when they began to take their first steps while holding the hands of an adult. Unfortunately, learning to walk in this way had them relying on abdominal surface muscles rather than on a strong core to remain upright.

When infants pull themselves up into standing and attempt to take their first steps, they will often lose their balance and either squat straight down or bend over to support their weight with their hands. These natural opportunities to catch themselves against gravity's pull develop healthy postural reflexes. These reflexes later on make their hands quickly move forward or toward a nearby support in order to slow a coming fall. In the case of the twins, assisted walking impaired their awareness of their surroundings and the innate knowledge of their own limitations. Instead of developing depth perception and awareness of obstacles in their paths, they were blithely moving about, dependent on adults to provide the safeguards. In addition to these obstacles they also did not develop independent balance and had a false sense of security in their environment. Just a week earlier, Emily had walked off the edge of a playground structure and broken her leg.

Much of my work with this family involved having them create a safe environment for the children to explore without adult interference. The children needed to learn to see the edge of the platform and to negotiate their own balance. They needed to become more aware of the stumbling blocks (literally!) in their path and not to rely on adult "help" in supporting their uprightness, catching their every tumble, and setting them upright again. With lots of regular encouragement and the weekly visits to our parent-child classroom, Emily and Elliot switched from walking to mostly crawling. They understood that they could move more quickly and fall less often when crawling, especially once the adults around them stopped helping them walk. By the end of our time together, everyone was much more relaxed around them and the twins ended up walking with confidence. They stepped over and around objects and navigated steps on their own. Dorothy and Isabel were also more relaxed and able to participate in adult conversations without the constant fear that the children might injure themselves. In the safe environment of the parent-child classroom, we had allowed them to stumble, fall, and pick themselves up again as part of their natural sensory-motor development.

Walking and Thinking

With independent, self-generated movement during the transition from crawling to walking, children learn to stand and fall safely. If we step back and allow them to drop onto their bottoms when toddling, or to fall forward onto their hands and knees, children develop depth perception and a greater awareness of their surroundings. As Waldorf educators, we know that movement and thinking are directly related. To think logically from one point to another requires many smaller "thought steps" in between. When we allow babies to develop and practice these falling and standing micro-movements on their own, at their own pace, we are supporting development of essential neurological pathways for later learning. Imagine the brain development necessary to grow from a helpless baby to a four-year-old who can talk to you about almost anything!

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Palmar Reflex

Among other early movement patterns innate to the infant, one essential development that parent-child teachers can help with is the dissipation of the Palmar Reflex. This reflex allows babies to grasp a finger from the moment they are born. This grasping reflex, which is so important to a baby's sense of security and comfort, needs to be integrated into the nervous system in order for more mature hand gestures to evolve such as eating with utensils, drawing, painting, and writing with ease. The tendency to tense the fingers when something touches the palm needs to have dissipated into a relaxed grip on their utensils, brushes, pens, and pencils. This reflex is naturally integrated as the baby puts pressure on the open palm while crawling, climbing, and all the activities of a baby that eventually lead to uprightness. In parent-child classes, we encourage parents to offer their babies a period of crawling as long as possible. Once they've learned to walk, many children still like to crawl; it's often faster, more efficient, and more fun for them than the toddling they do as new walkers. As parent-child educators we have the potential of making a significant reduction in the number of children needing later pedagogical support to remedy tense grips from retained Palmar Reflexes.

Sometimes, while observing babies in my classes, I see little ones who want to crawl or climb while holding onto an object; they usually have a strong, sustained Palmar Reflex. I demonstrate for parents how to gently remove the object and encourage the baby to crawl with unencumbered hands. When a baby is trying to climb the climbing tower with a block in hand, I gently remove the block and place it under the tower, reassuring the baby that it will be there when she climbs back down, and that climbing is an activity for two hands. After repeated exposure to this guidance, and with the parents following-up with similar guidance at home, most babies enjoy the sense of comfort and security while climbing with two hands; they are also willing to let go of an object so they can use their hands to support themselves.

Carriers

Many parents arrive at parent-child class with their baby hanging from a front-facing carrier strapped to the parent's chest; often the baby has not yet learned to sit up from the horizontal position on her own. In preparation for addressing this topic at the start of each period, I share Ingun Schneider's informative article, "Our Hands Belong to Levity."[2] After that we are ready to have a conversation about how babies are carried and held. I'll suggest to parents that they observe a baby being held or carried, looking to see if the baby's head and neck can be still and supported in several different positions: held in arms, in a forward/back facing carrier, lying horizontal in a wrap facing the parent's chest, in a front-facing stroller, or in an old-fashioned pram that allows the baby to lie flat on her back and play with hands and/or feet while looking up at her parent/care-giver. Through these observations, parents can recognize that their babies aren't ready to be hanging unsupported and facing out into the world with gravity taking hold of their limbs (especially the legs).

Through his research with very young infants, Joseph Chilton Pearce[3] discovered that the myelination of the brain of a baby, especially the areas connected to vision, is dependent on the child viewing the face of a person from the distance of the crook of an arm. Far from offering the proper stimulation for an infant's development, these forward/back facing carriers can do long-term damage to the delicate nervous system of the developing child. Our role is to protect the immature senses of the young child from a "too soon" onslaught of the world. Having babies lie horizontal and

2 Ingun Schneider, *Our Hands Belong to Levity* (https://www.waldorftoday. com/2012/10/our-hands-belong-to-levity/).

3 Joseph Chilton Pearce, *Evolution's End: Claiming the Potential of our Intelligence* (HarperOne, 1992).

facing us, instead of the world, is one of the ways we can do this. As Ingun Schneider states:

Even back-facing carriers can position the young infant in such a way that she is not able to find the parent's face and eyes without craning the neck and head backwards in an awkward and tense position. Once a baby can sit herself up from lying down or crawling and stay seated without support, she is ready to be carried in the upright carrier while facing toward the parent. By then, she is muscularly able to tilt her head back far enough to see the parent's face without straining the tender shoulder/neck area.

Parent-child educators can be helpful in conveying this information to families. Parents are eager for this type of information so they can do what's best for their infants.

Unassisted Standing, Walking, and Stair Climbing

Some infants love to be in a standing position on their parent's lap well before they've learned to sit up. If they've grown used to adults supporting them in this way, they don't want to give it up. But, as in supporting other types of movement, holding a child in a standing position before he has developed the core strength to stand on his own will lead to later issues with balance and proprioception. Instead, I encourage parents to hold the child in their arms in a well-supported, reclining position until the child can sit up and stand on his own. We also encourage delaying the use of highchairs for babies until they have demonstrated an ability to independently sit up from the horizontal and remain so when unsupported.

During our circle time on the floor with parents, if their babies want to be held upright, I encourage the parents to place their hands behind their own backs and allow their baby to climb up on them using its own balance. After a few times doing this and plopping down again, baby will usually crawl off to play. With the best intentions, parents have been encouraging baby's early standing without realizing that the natural, innate steps from horizontal to upright postures contribute to a reliable sensory-motor system that allows a child to sit still comfortably on a chair while paying attention to the teacher in first grade and beyond.

> Being in movement is the natural state of the young child.

Climbing stairs is another activity with which adults enjoy assisting children. My classroom is on the second floor and offers a wonderful teaching opportunity. The stairs are carpeted and consist of three short runs with two large landings, so even if a baby tumbles, there's only a short distance before a soft landing! And there's a lovely wooden banister with spindles. Many babies are used to their parents holding their fingers while they climb stairs. This position with arms stretched above the baby's head does not offer the baby the opportunity to develop her own balance. Instead, she is depending on the balance of the adult and uses her surface muscles to maintain a wobbly stance.

I encourage parents to stay just a few steps below the baby on the stairs while watching the baby climb up or down on her belly. Walking toddlers are able to hold the spindles and eventually walk down the stairs on their own. Holding a spindle is quite different from holding a hand. When the children hold onto us while climbing the stairs, we are continually compensating for their immature balance. The spindle is stationary and doesn't offer this subtle compensation. If in a hurry, it's better for babies' healthy development if they are carried rather than assisted. It's a wonderful joy to watch a baby climb on her own for the first time; she is so delighted with herself for having accomplished so much in this effort! Imagine the lift in self-confidence that comes with this experience of effort leading to satisfactory results. If you aren't lucky enough to have a flight of stairs to climb to get to your classroom, parent-child teachers can have inverted rocking boats that offer a few steps up and down for little ones to practice their stair climbing skills.

No Screens

Seven years ago, while sitting in a busy restaurant, I noticed a couple sitting at a nearby table with a baby in a high chair. The baby's back was toward me so I could not see his face, but what I did notice was that the baby was very still. Strangely, the parents barely looked at the baby during the entire meal. There was no dropping of toys or squawking, which you would expect from a one-year-old. I was intrigued and wondered what could be wrong with this baby! When leaving the restaurant, I passed their table and looked back to at the baby. There in front of him was an iPhone with some sort of cartoon playing. I was shocked! This was the first time I had seen a baby with an iPhone.

Today, this ubiquitous device can be found in the hands of children everywhere. While on a recent hike to the beach in Marin County, I observed family after family pushing strollers with toddlers and young children looking at iPhones, adults walking while texting as their

children ran ahead, and, in one instance, a mother walking with an open laptop with her iPhone resting against the screen! So much has changed in such a very short time. Others have spoken and written about the need for caution when placing screens in front of young children. What I noticed most in the restaurant at my first encounter with this practice was the baby's utter stillness. Some studies suggest that by the time many children are seven years old, they will have spent one full year of their waking life in front of a screen.

Imagine a child sitting still for a solid year during this profoundly important phase of brain and body development! Being in movement is the natural state of the young child. When we place babies and young children in front of a screen, they become unnaturally still, and we rob them of the vital time they need to develop healthy movement. We often resort to screens when we need a bit of time to do our own work and our children seem unable to be content to play on their own. When parents have created a space in their homes for free independent movement, starting from the time of infancy, children learn to develop an inner life and an independence that makes screen-time unnecessary, as well as undesirable. These young children can be free to develop capacities to self-soothe and become resilient. Many parents employed in the tech industry see the importance of screen-free early years and can become some of the strongest advocates for Waldorf education.

Preparing a safe and interesting space in your home for your baby to explore will also help baby to develop a rich inner life that is not dependent on the intervention of an adult. By stepping back from constantly entertaining our babies and providing this safe space, parents can convey a sense of confidence in their child's own capacities. Parents' expressing confidence in their child's capabilities (instead of anxiety about possible set-backs) will allow their child the freedom to become whoever the child is meant to be, with a deep-seated self-confidence that enriches all aspects of his or her engagement. An article by Susan Johnson, M.D., "Strangers In Our Home," speaks more about this topic.[4]

Since we are born with many more nerve cells than we need in our lifetime, many areas of the brain that are not stimulated enough through repetitive sensory and movement experiences in the early years are "pruned" from age one and periodically throughout childhood. What we don't use, we lose. If we are able to trust the natural development of the child and recognize and respect the individual child's progress through the innate sensory-movement developmental stages, we can eliminate many potential roadblocks and their resulting loss of skills and confidence. We need the confidence to trust in the wisdom of the developing child and provide the necessary guidance and love for the true nature of the child to emerge. As Adam Blanning, M.D., writes: "the ability to fully meet and sense another human being depends on how at home we are in the body."[5]

If we, as parents, grandparents, and educators support the developing child in this way, we may be able to lessen or even eliminate many of the educational support interventions otherwise required in later years. These helpful and necessary interventions during the school years need to avoid giving the child a sense of failure. Instead, they can re-ignite the child's self-confidence as she becomes able to perform many school tasks with greater ease. Changing the cultural norms of how we allow babies to develop will go far in helping to support a healthy classroom for all children. Supporting birth-to-three parent-child classes in our schools can be a very effective way to convey this knowledge to our communities.

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4 Susan R. Johnson, *TV Article: Strangers in Our Homes* (http://www. youandyourchildshealth.org/articles.html).

5 Adam Blanning, *Understanding Deeper Developmental Needs: Holistic Approaches for Challenging Behaviors in Children* (Lindisfarne Books, 2017).