ISSUE #14

SIVET EMPOWERMENT-GRACE & LOVE

15 April 2024



Hey Everyone!!!

Truths & Tips

Today is the 15th week of the year and the 15th day of the month. These days are flying by!

I hope that the first part of April has been good to each of you. As we continue into this month I am sure you all are aware of the new rules that are being worked on and updated.

Also, I am wondering if you all still want to get together and chat. If you are interested in meeting up send me a separate email and I will find us a place to meet up, network, and eat. I am sure we can vent, laugh, and share a lot of stories.

Do you all have summer fun plans for your kiddos? What are you all doing this summer at your schools? Do you all have a relaxed curriculum in the summer? If you would like please share some of your ideas in the email. It is always great to bounce ideas off of each other. If you all have any events or activities that you all want advertised please share in the group email. I don't think you all are utilizing this platform for the purpose it was created for.

Remember:

- 1. It is okay to ask questions to the group.
- 2. If you need advice this is a safe place to ask and we can all share our opinion if we have one.
- 3. If you have any new news on anything pertaining to DHS, child care, curriculum etc. please share it with all of us. News or documents.
- 4. If you are wanting things advertised feel free to share.

Our goal in creating this platform, for us by us, was to create a safe space to share and vent. I understand that life gets busy but I also know that we put in what we get out of things.

Be blessed and stay safe and remember to lead with Grace & Love, Ms. Tevis

In this newsletter you can expect:

Potty Training Tips

Do Teachers Have?

Reducing Resistance cont.-

Attendance & Punctuality Award/Discipline /Point Systems

Mental Health is Real!

Black Maternal Health



Potty Training Tips

I have been having a lot of conversations with programs and families about potty training. When to start, how to start and is it always hard.

First let me say that if your child is in childcare or even has a babysitter. Families and educators/sitters must work in partnership during this time. I will provide some support that you all can share with your families and utilize in your program in the months to come.

Potty training is a major milestone in your child's life. If your toddler is showing signs then it is time to get started. The first thing to remember is that all children are different. Be very patient, if the child feels pressured it may turn into a negative experience for the child. Some children are ready at 18 months, these are your neurotypical kids who are mature enough to "hold it." Realistically, a child may not be ready until they are 24 months.

Some of the signs to be mindful of are developmental-communication and fine motor skills-being interested in the bathroom, asking for diaper changes and staying dry for longer periods of time. Pulling at a wet or dirty diaper. Interest in others going to the restroom and dressing and undressing themselves. Understanding and following basic directions. Staying dry for two hours or more. These are signs to look for.

To Be Cont.-

Do teachers have?

Planning time that is built into the daily schedule? Is this time separate from their responsibility of care for children? If not, where can it fit in and how often can time be set aside? If time is being built in to the schedule have you assed the work being done? Is the time used constructively?

Do classrooms have the necessary materials for lesson plans and curriculum implementation? Is there and accurate amount of materials to engage all children? How often do you rotate the material?

Are teachers clear about when they need to call for assistance from another teacher or administrator? Do you have additional staff available to help when the need arises?

Does your teachers understand what is expected daily pertaining to the curriculum? **To Be Cont.-**

Reducing Resistance Cont.-

A caregiver's response may be an indication of resistance to working through challenges.

*Time Constraints-the caregiver agrees the meeting is important and sounds like they support moving forward, but then have many reasons that they cannot set an appointment.

Possible Solutions: Offer multiple times and days that may be options-remain flexible to allow the caregiver to choose the time-observe that setting a time is becoming a barrier and ask the caregiver to create a solution so that the meeting can happen.

*Attacking the person by bringing the problem to their attention-the caregiver may become angry and blame. There may be angry words or high emotions. Possible Solution: Do not take things personally. Observe the caregiver, to see if he/she is have a difficult time processing the problem-calmly, yet firmly, explain the need for a solution and offer to reschedul

Employee's



Attendance & Punctuality

As we all know the importance of attendance and punctuality are crucial in the early care environment. Being consistent and showing up regularly and on time are necessary responsibilities of employment at any school. Without educators following procedures, the program cannot run efficiently or safely. Remember you as the leader must also be consistent. Holding each other accountable. Practicing what you preach.

Mental Health is Real!

It is important that we as a collective in the black and brown community work hard at dismantling the stigma around mental health. It has been a part of all of our lives for centuries and it isn't going away.

But what is important is that there is help out there and we should not be ashamed to ask or seek help and support. Mental health does not discriminate and anyone can be affected by it no matter your age, gender, race, or ethnicity etc.

Award, Disciiplinary Action, Point Systems

How many of you have these things in place? Is it clearly defined? If it is the bigger question is how many of you really adhere to these measures? If you don't want are your reasons? This goes back to holding each other accountable. Is it fear of staff quitting? Is it fear of people being mad at you? Is it because you are running a tight ship and don't have replacements or subs? It could be all of the above. It still boils down to practicing what you preach and holding each other accountable. Have you tried a point system? Did it work or didn't it? Why or why not? If you need some tips and or advice or support let me know. You can share in the thread or send me an email.

60% of all people living with a mental health condition do not seek treatment. 80% of Black people with a mental health condition do not seek treatment 80% of Hispanic people with a mental health condition do not seek treatment. 88% of Asian individuals with a mental health condition do not seek treatment. (Sourced from someone else)

Having a mental illness is nothing to be ashamed of. It is a health concern just like diabetes, high blood pressure or high cholesterol. Our mental health is the foundation for our emotions, how we process our thiking, how we communicate, how we



learn, how resilient we are, our self esteem, how we handle relationships, and our overall well being. In turn it can influence and be influenced by our physical health.

Remember as we are taking care of so many others, take care of yourself. If there are things going on with you research it, talk to a trusted someone, mention it to your doctor, there are support group out there that you would not even imagine. Get back to living life to the fullest!!! You got this!!!



Black Maternal Health week April 11th-17th

Maternal Mortality in the United States Maternal mortality is defined as the death of a woman during her pregnancy, childbirth, or 12month postpartum period. Women in the U.S. face a maternal mortality rate <u>10 times higher</u> than that of other industrialized nations. This can be attributed to a lack of social and economic supports during a woman's pregnancy, delivery, and postpartum period. Without this support, women in the U.S. are deprived of the quality of care they need to survive pregnancy and childbirth.

This crisis is felt even more acutely by Black and Native women, who are respectively <u>three and</u> <u>two times more likely to die</u> during childbirth than white women. While factors such as <u>educational attainment</u> or income usually correlate to better health outcomes, they do not overcome racial disparities in maternal health outcomes. The rate of death for a Black woman with a college degree is still <u>1.6 times higher</u> than a white woman without a high school diploma. Moving Towards a Safer Future As maternal mortality rates stay high, governments are calling for change. In 2022, the White House released its <u>Blueprint for</u> <u>Addressing the Maternal Health Crisis</u>. The Blueprint specifically named doulas as one way to address this crisis for their proven benefits to maternal health outcomes. <u>Most states</u> now have active Medicaid coverage for doula services or are exploring this possibility. Tennessee is one of the states considering this option. <u>Other</u> <u>immediate policy choices</u> that Tennessee can pursue to address this crisis is <u>paid leave</u> and <u>Medicaid expansion</u>.

We cannot turn back time and prevent these pregnancy-related deaths. We cannot take away the trauma their families are now left with. But we can strive for a better future. We can become a state where Tennesseans feel safe and are safe to give birth. Covering doula services is one place to start.

This was written by Asia Porter 2024

Thank you for reading!

SIVET EMPOWERMENT LLC LOVE & GRACE MATERNAL HEALTH

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