

“Spend Your Whole Life Learning and Giving!”

An interview with Alice Sterling Honig

The following interview with Dr. Alice Sterling Honig took place in Syracuse, New York, in May 2009. Michele Jachim Barrett of Syracuse University conducted the interview using questions prepared by the editors of *ECRP*. Dr. Honig is currently Professor Emerita at Syracuse University. Her work in early childhood development, care, and education spans several decades and continents. Her contributions to the field have included research, university teaching, advocacy, training of parents and caregivers, and rearing her own children. She has pursued a broad range of interests since first becoming involved in the study of child development in the 1960s, including such topics as quality of infant-toddler care, iron deficiency in infants, parent-child relationships, children’s linguistic and social development, and the effects of poverty on children’s development.

Becoming Involved in the Field

ECRP: How did you first become interested in the field of early development and education?

Dr. Honig: Well, this did not happen in my first Ph.D. program at Columbia University—because in that program I was studying rats every day of the week, running rats. And I was working with psychotic patients at the Psychiatric Institute in a Ph.D. program in Experimental Psychology. So it wasn’t until two decades later in my second Ph.D. work here at Syracuse University that I studied Developmental Psychology. Really, what got me profoundly interested in children at that point was having had my children and learning what an awesome, enormously complex, and subtle job it is to raise three different small human beings from scratch, from Day One, and find out that we learn so much if we open ourselves up to learning from our little ones.

ECRP: What are your children’s names?

Dr. Honig: Lawrence, Madeleine, and Jonathan. Dr. Lawrence Honig is a neurologist (and papa with two children), a professor at Columbia Medical School. Madeleine Lenski works on a pediatric project with children who were born very prematurely and follows their development throughout the decades. She has three grown children. And my youngest son, Jonathan Honig, is a lawyer and a papa of four children. All three are caring life partners with their spouses and awesomely gifted parents. I feel so appreciative of that! I love that their children are kind as well as hard working and passionately interested in learning as well as serving others. For example: Jonathan’s oldest son, Naftali, works at rehabilitating orphan chimpanzees in the Congo.

ECRP: What was involved in your training and preparation in early development and education?

Dr. Honig: I was very lucky in the early 1960s to work with Dr. Bettye Caldwell, who was the chair of the Child and Family Studies Department at Syracuse University for many years. She had a grant with the head of the Pediatric Department, who was the first person who started Head Start with President Lyndon Johnson. Dr. Caldwell was studying what happens to the IQ, the intellectual ability, of poor children over the first 2 years of life. As I tested infants for her over 24 months, even though some of them had two parents, what I found was a consistent downward drift in IQ level just from living in a culture of poverty. You know, “culture

of poverty” often doesn’t mean just that you lack money. It means that there may well be a poverty of rich intellectual environment for raising a child. So these little ones were probably not talked to a lot, probably not read to, and yet they were well loved. We recorded this huge drop in IQ, over 20 points.

At that point, Dr. Caldwell decided with Dr. Julius Richmond, who was the head of the Pediatric Department at Upstate Medical Center, to establish the Children’s Center under the auspices of a federal grant through Syracuse University. She wanted to provide high-quality infant-toddler care for groups of infants, but at that time in New York State, it was forbidden by law to care for infants in groups. She had to get a waiver from the state. So Dr. Julius Richmond, who founded Head Start in the 1960s with President Lyndon Johnson, with Dr. Caldwell, began a pioneer experiment! They established a high-quality infant-toddler program in a little old house just a few blocks from here. We learned so much in the first half-year. One thing we learned was that there was no decrease in the intellectual development of the middle-class infants in that program. You know, some people were afraid that if their children went to school with poor kids that maybe they would decrease in their intellectual development. After our initial findings were so clear, then Dr. Caldwell concentrated on enrolling only children of poor and low-income, low-education families.



Figure 1. Dr. Alice Sterling Honig's interest in young children and their families has led to a prolific life of research, writing, teaching, and pro bono service.

In that program, we did everything, as it were, from scratch! We created curriculum based on Piagetian, Eriksonian, and Mahlerian theory. We wrestled together intellectually as we tried to translate theoretical ideas into “What does this mean we should be doing with babies?” We’d put our own kids to sleep, get a sitter, and come back to the Center at night and work on creating curriculum. Nowadays with zillions of books and lots videos available (including some of my own books and videos!) that must seem unimaginable, but that’s how it was in the early 60s.

I feel so privileged to have worked with her. I still write to her by email where she lives in Little Rock, Arkansas, because Dr. Caldwell was my mentor. Through this early job, I learned how beautiful and amazing and full of new revelations the world of early childhood was—especially very early childhood—so that in this field, you spend your whole life learning. You never can have learned enough about little children, and I started my professional journey of lifelong learning about little children with Dr. Caldwell.

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Influential People and Ideas

ECRP: Whose work has influenced you, and what about their work has engaged you?

Dr. Honig: My mother was a teacher. My mother was born in a small *shtetl*, that's a little village in Poland/Russia along the borders. And the Cossacks came and killed Jews. She recounted how they killed one of her uncles when she was a child. When she came to this beautiful America, she only spoke Yiddish. She grew up to be a marvelous teacher of English literature to junior high school students because of what she called the blessings of the "Goldene Medina," America, this "golden land" that allows an immigrant the opportunity to try and become the best person possible by studying hard and working hard.

What I am most grateful for is the heritage my mother gave me for language. She had to mark 300 papers every weekend; I don't know if teachers still do that. My dad, as a kindness for Mom, would take us on a long walk to Prospect Park in Brooklyn so that she could mark papers all afternoon on weekends. She had the opera on radio every Saturday afternoon—so I learned to love classical music from when I was little. I heard Caruso on records she had bought. And she would recite poetry by the yard, so that I can recite to my classes reams of poetry from Shakespeare and others. Often in today's university classes when I have asked, "Who knows where that line of poetry comes from?" maybe one or two students will raise their hands. But sometimes poets wrote about early childhood and parenting and human beings' troubles in prose and poetry in ways that no child development specialist has written quite so beautifully, in terms of expressing what certain feelings or situations are.

An example: from the "Love Song of J. Alfred Prufrock" by T.S. Eliot: "I wish I were a pair of ragged claws, scuttling across the floors of silent seas." The anguish of the older man bursts out in these grieving lines describing so vividly his emotional difficulties in communicating with others.

I would say my mother gave me a deathless love of writing. I have written

all my life. I even had a poem published in the old *Herald Tribune* newspaper in New York City when I was a teenager! I have written over 500 articles and dozens of books, and written script for several videos I also narrated. My mother also gave me a love of learning, of wanting to learn more and more so that no matter how old I grow, I always feel that there is something I can learn by reading, and especially by watching a child's interaction with a parent or a caregiver. About children—there's *always* something new to learn!

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ECRP: Is there anyone else whose work has influenced you?

Dr. Honig: Well, first, Jean Piaget, because he taught us to watch a baby's every move so that you learn that "This behavior, reaching for a toy, for example, wasn't there the moment baby was born with little hands closed tightly into a fist." And anything babies learn—to play pat-a-cake at the body midline, to cross the room on all fours to get a rubber ball that rolled behind a chair—represents fantastic new learning.

I love to watch the trajectory of learning *early language*: when babies begin producing those throaty cooing vowels. How amazing when they put the vowels together with a far-forward labial consonant and say ma or da or pa, then double it—what do you get? You get of course "Ma-ma, Da-da, Pa-pa." (In French, mother is "maman"; in Mandarin, mother is "Ma" spoken on the first tone; and in Arabic and Hebrew, father is "Abba.")

Piaget's lucid and meticulous observations of his own three infants increased my sensitivity in observing infants and toddlers. He must have been a pest to have as a husband! He would go to the door where his wife was nursing a baby and say, "Coo-coo, baby!" and the 3-month-old would leave the nipple out of the mouth and look for Piaget's eyes. But he taught me to realize: "My goodness, she already knows to use her ocular motor muscles to look where Papa is calling from a distance!"

So I learned from Piaget's writings, especially *The Origins of Intelligence in Children*, to be a more careful observer. For example, once when I was testing a little fellow, I demonstrated how to open and close a little empty matchbox and encouraged him with a singsong voice to imitate my gesture with his hands. Instead, he solemnly opened and closed his own mouth! Piaget labeled this "generalizing assimilation," and I watched the tot try with his own mouth to reproduce the opening and closing motions I had just demonstrated with the tiny box.

I have learned much from Erik Erikson's work, about the eight stages and the great nuclear conflicts that result in different (more positive or more troublesome) trajectories for emotional development. Infants by year one have learned a balance of more trust vs. mistrust (or, alas, the opposite) for themselves, with parents, and with caregivers. I learned about all the nuclear conflicts of the next years of life, all the way to the dialectical struggle toward the end of life: accepting the life that we have lived despite all hardships or not achieving all our goals and early dreams. (Instead some bitter persons toward the end of life feel with despair: "If I'd only married somebody else, or had a different boss, things would have turned out differently!")

And then I learned from Margaret Mahler. I was very fortunate to be doing research

(using data from dossiers in a well-baby *Clinique aux Nourissons*) in Paris one year on the relationships between iron deficiency and severe respiratory illness during the early years. Dr. Mahler was speaking at a conference in the south of France, so we drove down, and I had the privilege of hearing her speak in person about her insights into very early development.

It's a great joy for me to realize that I have been in the same room with some of the giants of child development over the past century! I was able to sit at lunch with Jean Piaget once in New York City! My life partner was then dean of Yeshiva University's Belfer Graduate School. He called me one day at Syracuse and said, "You're coming to New York City tomorrow." I said, "I have so many things to do." And he said, "Well, Jean Piaget is being given an honorary doctorate by our university, and I will sit you at the lunch table with him." I said, "I'm coming!"

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So I have been able to be in the presence of some of the great theorists: Piaget, Mahler, Bowlby, Erikson—though alas, not Freud, who died in England. These personal experiences mean a lot to me.

Young folks, of course, can read books by pioneers in early childhood. The finest book that explains in detail the concepts of Margaret Mahler about early development is *Oneness and Separateness* by Dr. Louise Kaplan. My favorite book by Erik Erikson—I have reread this book dozens of times and still love it more than any other of his works—is *Childhood and Society*.

Amusingly, one of my students said to me in the Quality Infant Care Infancy-Toddler Workshop a few weeks ago, "I thought they must have lived way over hundreds of years ago, Dr. Honig!" It shows you what happens: Young persons think of the great theorists and researchers in our field as Old Folks. To me these great thinkers are still vividly alive because their ideas mean so much to me, and their clinical examples and insights have shaped my own ability to understand, empathize with, and find ways to help little ones flourish.

That's an important point for me to make. I've studied from books, but we need the clinical experience with people—babies, children, teachers, parents—in different cultures. It has to come together. I always say our field is like a three-legged stool: theory, research, and practical experience. And you know, if you're milking a cow and you cut off one of the legs of the stool, you'll fall off on your tush. You really need all those three legs of learning, understanding young children and their families from all these areas. So I feel very grateful that I have been able to learn in all those three areas.

I was also influenced and touched by training caregivers for Dr. Lally in the Family Development Research Program. Some of the wonderful ladies who worked as outreach home visitors touched my heart in a way that nothing else ever did. Some had lived in a South that was filled with discrimination against African

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Americans. Some of them had had maybe 4th-grade or a little more education. But they'd grown up with dignity. They cared deeply about the parents that we were serving. They persevered through snowstorms to travel by bus to make home visits to teen parents who would sometimes giggle behind a door and pretend they weren't there. I learned to respect their courage, their willingness to learn Piaget and Erikson brought down to a level of what kinds of activities to carry out with parents, and how we treat people and how we talk to them, so we help them feel as partners in this effort to help their children flourish. I interviewed one of our home visitors for my parent involvement book and was touched by her positive rejoicing report, that after a year of visiting one young mom, the shades were up and no longer drawn down when our worker arrived at the apartment. That young mom finally had gained enough trust and now truly believed that the home visitor came because she deeply wanted to help mom and her young child.

From working with staff at the Family Development Research Program, I learned an enormous respect for those who have suffered discrimination in our own country before our civil liberties laws—because this was in the early 60s that I started working with the Children's Center and then the Family Development Research Program.

ECRP: Could you say more about the influence of practical experience on your understanding of parents and children?

Dr. Honig: I am a licensed New York State clinician. As a psychologist, I see children and parents who are feeling so agonized—often in divorce/custody battles or with children who have a lot of problems with anxiety or anger management. I've learned to be very humble. There's not always a solution for some of the problems of some children who are really in trouble, unless you can make a parent feel "If you really love this child, could you try to see what's happening from his or her point of view? And then we will try new ways, new tools to help heal the troubles!" You learn from clinical work with human beings to be more humble and patient and to help people to see from the child's point of view, so that they can courageously try new ways of interacting with their children in order to heal hurts.

I have learned a lot from doing volunteer work. Years ago, working with a Catholic Charities program for teen moms and babies, I found that by starting assessments (with baby sitting on mom's lap) at much lower levels than the infant's biological age level and modeling delight at each successful infant response, the moms would be energized in their belief and positive feelings that this little one was a wonderful learner (even though the baby's developmental score, which I did not emphasize or provide, might have been worrisome to me).

Another example: I worked on a team with a lawyer for over 10 years as a volunteer with the Onondaga County Mental Health Association. We provided help to groups of parents in very difficult and contentious divorce custody cases, where there's sometimes so much of what Freud would call "projection of evil" onto the other: "If it weren't for her! If it weren't for him!" (You'd never know that they once married and loved each other!) They would describe children's grades plummeting, children fighting on the playground with peers, and even how babies in such contentious divorce cases were getting up lots more at night and crying more, and certainly their young children were feeling so sad. Sometimes it was easy to fix a problem: Mom or Dad wouldn't let the dog come to the other parent's house during the weekend visit. Now, that was easy to fix! Sometimes it was much harder, because some people having their own troubles find it harder to put their children's needs first. That's why I treasure that Onondaga Mental Health Association program, which is aptly called

“Children First.”

Rewards of Involvement in the Field

ECRP: Of all the roles you’ve had in the field, which have been especially rewarding?

Dr. Honig: I love being a teacher. In addition to my years of teaching at Syracuse, I taught one summer at a college in Kentucky and have given lectures at many universities in the USA such as Michigan State University. I have also been invited to lecture at the Singapore National Institute for Education for a period of several days, and at colleges in other countries such as Shanghai, China; Seoul, Korea; Paris, France; Regensburg, Germany; and Melbourne, Australia. I felt fortunate in Russia once to be able to give a talk to college students in my not-so-fluent Russian—I had studied Russian at Syracuse University for years, one course at a time, when my children were little.

I love mentoring—to help students get through their research and to look with them at the printouts and help them see that there’s something exciting there.

When one student came and said, “I didn’t find anything, Dr. Honig,” what I told her—with admiration for her talents—was, “You’re working as a social worker at your full-time job as well as doing research, and you found that,

despite the fact that all the children were born with developmental difficulties and handicaps and you’ve been working with each of these families for 5 years, there’s no difference between the outcome measures for your poorest families and your middle-class families? Your boss should give you a raise for these findings! Your data suggest you have been doing such supportive work with these families regardless of social class!” What a special feeling: when you mentor a student who looks up at you and says, “Really, Dr. Honig?” and realizes that “having found no differences” means that their own work in the field while trying to get a master’s degree has been wonderful work with families! There’s nothing like mentoring! It gives you such joy, and it makes you feel that you’ve earned your bread on God’s earth.

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And my work with Dr. Caldwell was very rewarding ... training her caregivers. After Dr. Caldwell moved to Arkansas, the Children’s Center had a new project director, Dr. J. Ronald Lally. The program was expanded into the Family Development Research Program (FDRP), with a rich addition—home visitation—so that this intervention program became a truly omnibus model program. I helped train the home visiting staff, and I worked with the teachers every week. All that time, I was learning how to teach adults at very different educational levels and learning how to observe the teachers and their interactions with children in the classroom continuously for formative and evaluative measurements so that we’d know how we could improve programs to make life flourish for the little ones and their families.

As I interacted with parents who were present as I assessed their children, I learned so much about the qualities of parenting—of vast differences in family upbringing. Those insights have been so important for my own development. For example: I once gave a compliment to a mom and said admiringly: “Your toddler has so much language!”—meaning that I was so delighted to hear this little one’s language in the classroom. And the mother said back to me, “Yeah, she do talk too much. She’s very

fresh." And I thought, "Okay, I meant my words as a compliment. I have to learn to speak more precisely so somebody understands that this was something beautiful about their child." That's something I needed to learn.

So how did I learn? From books, from parents and children, from my mentors, from being constantly in contact with doing research with parents, asking them questions about how they raised their children, and then publishing articles particularly using the "Implicit Learning Theory" questionnaire and materials we created. Sometimes the Implicit Learning Theory work involved just sitting in parks with parents and asking, "If your child did this or that behavior, how would you respond, how would you handle that?" and learning from their replies. So doing research by interviewing parents about their ideas and their practices has been a precious way to gain more insights into young children's development and how we can further their learning.

Living abroad in different cultures has helped me. I was visiting child care facilities, schools, hospitals, and talking (via a translator) with teachers in China when Mao Tse-tung was dictator there, and I was scared on my first visit because there were soldiers everywhere and people all dressed alike: in light-colored tops and dark pants. Yet, when I went to the infant centers, I saw such loving, tender holding-in-arms of little ones, and I saw that the babies had pajamas with patterns on them. That means that no matter how much more it cost, in a very poor country, infants were regarded as precious.

In China, I saw a woman walking along the street holding a baby and the baby had diarrhea coming out over the lady's hands, and she was calm and hurrying—not to scold the baby but to look for a water pump somewhere along the street so she could wash off the baby and herself! So I learned that in some cultures, even with a dictator who may well have killed 6 million of his own countrymen, people still loved tiny babies and treated them so gently—unfortunately, more than in some families where I was doing home visitations in my own culture. So I learned to respect that aspect of different cultures that really empathize with the tenderness that young children need. I believe that every experience in other cultures (such as France, where I have lived for extended periods) with observations of parents and young children has helped me grow in insight.

Implicit Parental Learning Theory

ECRP: Would you like to say a bit more about Implicit Parental Learning Theory, to clarify what it is, how it developed, and its current applications in your work or others' work?

Dr. Honig: The IPLET (Implicit Parental Learning Theory) is a questionnaire we developed at the Children's Center for parents to help us understand parents' ideas about how their children learn. There is a separate IPLET for parents of infants, of toddlers, and of preschool-age children, and an IPLET questionnaire for parents of 5- to 6-year-olds. Each IPLET item names a common childhood behavior, and the interviewer asks a parent how she or he would handle each behavioral situation—for example, a child hitting a sibling or playmate, or nagging at the parent to read a book, or having trouble settling to sleep, or turning TV or radio knobs while the parent is watching or listening to a program, or acting scared of a barking dog.

We have published research with IPLET in several different countries: India, Sweden, France, Korea, and the USA (I did the French and the Syracuse interviews). It is fascinating to see *both* the similarities and differences in maternal responses. In each culture, moms were far more likely to mention trying a *greater variety of*

responsive techniques when a behavior was baffling to them or not approved, compared with when behaviors were approved of, such as when a parent made a request and the child cooperated well. Some of the techniques parents *across* cultures reported are reasoning, comforting, punishing physically, explaining, giving a treat, and scolding.

Yet, degrees of use of physical punishment or of ignoring developmentally expectable behaviors differed markedly by culture. For example, Swedish moms were far more likely just to ignore behaviors that they deemed normative for a developmental stage.

I have also published research (with Jung) on the different responses of Korean fathers and grandfathers; we wanted to discover whether there are intergenerational differences in fathering patterns. Contemporary fathers answered with more flexible responses.

The most recent IPLET research I have been carrying out, with a graduate student who did IPLET interviews in Shanghai, involved asking fathers and mothers separately how they would respond to child behaviors they may see as change worthy. We were trying to find out whether parent gender roles in middle-class modern Chinese families differ or are more similar to each other nowadays, in handling child behaviors commonly found across cultures.

Other Significant Research

ECRP: You have investigated and written on many different topics in the field: infant-toddler care, social and emotional well-being of children, language development, and quality of care are just a few. Of all the topics and ideas, which have you found to be the most compelling, and what has made them so?

Dr. Honig: ...I loved doing research decades ago with Dr. Frank Oski, who was the head of the Pediatric Department at Upstate Medical Center. We did quite a few studies together on effects of iron deficiency anemia in infants and toddlers. It was a very strict study—random assignment of infants either to get intramuscular iron supplements when they had low hemoglobin or to get an intramuscular saline solution. And until I did that work, I never realized that when a child is very solemn, a mom might think, “Oh, she is such a crabby kid” or “He doesn’t love me.” One mom said that to me on a radio call-in show one time: “He cries all the time; he doesn’t love me.” But it could have been that her child had a hemoglobin level significantly below 10.5 and was cranky and irritable because he didn’t have iron-fortified formula! I learned so much from that research.

In the iron deficiency study, I wasn’t allowed to know who was in the iron enrichment or the control group for years until we had collected enough data. But sometimes I found the children so crabby and solemn (and I usually am willing to stand on my head and make funny faces for a baby!), and a week later some of those babies were wreathed in smiles. Dr. Oski would not tell me who was in which of those two groups, Michele, but I could tell!

And their IQs jumped if they had received intramuscular iron! IQs don’t normally jump in one week. I learned so much from that research that was precious—that a simple little thing like having iron-fortified formula (which is so usual now for babies in today’s world) could make such a difference, but this research took place nearly

30 years ago.

Later, I was doing research, living in Jerusalem in Israel for a while. I went to visit clinics where both Arab- and Hebrew-speaking pediatricians were serving the families. I felt privileged to be allowed to see how the well-baby clinics were set up so beautifully, with a corner on the floor for any mom to play with toys with her baby, and with a person

trained to help them learn how to work with and engage their babies in play, whether in Arabic or in Hebrew. The doctors said, "Oh, you're Dr. Alice Honig. We've read your articles with Dr. Oski. Ever since then, we've been very clear to any mom who's going from breast-feeding to bottle-feeding that they must use iron-fortified formula. And by doing the Bayley test in Arabic or in Hebrew, we have found in one year at least a 5-point increase in IQ compared with the outcomes from our tests from years ago. We're so glad to meet you!"

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That was a great joy to me, to hear that research in which I had participated meant something in the real world—that written research did not just represent findings published in a journal so one would get some extra points getting from assistant to associate professor!

Another research project that taught me to be more sensitive to gender issues was work with a doctoral student, several decades ago. Donna Wittmer's dissertation findings were that teachers working with toddlers from low-income families were less likely to be nurturing and responsive to bids from male toddlers (in comparison with girls). Since then, more and more research has revealed the increased vulnerability of male infants and toddlers to lack of sufficient tenderness and positive attention from parents and caregivers.

Also I did work with Holly Brophy, one of my former doctoral students. Holly was carrying out home visits to teach teen-age high school drop-out single moms about how to promote secure infant-to-mom attachment, how to cuddle and talk with their babies, how to read baby signals of distress and meet them promptly: "So that your baby can be lovingly and well attached, securely attached to you. So as the mom, you will have a child who's more cooperative when 2, 3, or 4 years old, because these are the interactions we know from research are more likely to happen as a result when babies experience rich early language and secure trust in the parent."

Interestingly, we found that after half a year of home visitation, the home visitation was not as powerful a variable as whether the mom had thought, "My mom hit me around, my mom yelled at me. My mom didn't say kind things to me. I don't want my baby to grow up feeling that way—mad or bitter. I want better things for my baby."

I called that insight *reflectivity*. Holly and I wrote an article together: "Reflectivity: Key ingredient in positive adolescent parenting." (This article was picked up by researchers in Canada who then got a grant, and they taught reflectivity to teen pregnant moms.)

And that's another thing that made me so happy. Again, it was research, which was published—so that makes you feel good. But that somebody actually then used our

research findings to be helpful in the real world! You know, we in the USA have the highest rate of teen pregnancy in the Western industrialized world, and we don't do anywhere near enough to ensure that teen families receive supports for rearing children who will be securely attached and zestful young learners. We might do enough at clinics for high-risk pregnancy, but we don't do near enough—except for special programs like Dr. David Olds [at the Prevention Research Center for Family and Child Health]—to help parents learn quality parenting skills—and learn to be reflective: “How do I want my baby to be? How can I help my baby thrive?”

One teen mother said, “He loves this!” She showed a huge jar of vanilla frosting you buy in a can to slather on a cake! She's giving this to a 4-month-old. Now who does love it? The teen mom! So she's decided that her baby loves it at 4 months. Then if he cries all night with a tummy ache, she's going to think he's a naughty baby. But she doesn't know that this food with high sugar level is not appropriate for a little baby.

Because of my outreach work with parents I've ... learned a lot about some parents' beliefs that may be wildly off base. (One father said he thought his son should be absolutely obedient to a parent's “No-No” by 6 months!) Sadly, I feel that we do very little to remedy teenagers' lack of developmental and parental knowledge with coursework that should be offered in every high school to teach supportive, nurturing parenting, and responsible sexuality for teenagers.

ECRP: You are a fellow of the American Psychological Association (APA) and the Society for Research in Child Development (SRCD). How has membership in those and other organizations in the field been significant for you?

Dr. Honig: I have presented research findings either myself, or with student collaborators, at SRCD research meetings for decades. This past SRCD meeting, Dr. Chu Chu Wu presented on our research collaboration: our findings on how Taiwanese mothers think about the importance of reading with their preschool children and how they interact while reading with their young children. She collected these data in the city of Tainan in Taiwan.

Each year for many decades, I also present a talk for those who attend the annual meetings of the National Association for the Education of Young Children (NAEYC). For example, this coming November, I will be speaking on the topic “Amazing infants: Research that caregivers need to know to enhance quality care for little ones.”

I have done some videos for NAEYC, and they show these regularly at conferences. I did a video for Davidson Films called “Nurturing Young Children's Language Power,” for which I wrote the script and narrated. Due to the generosity of Ms. Davidson in giving this video for NAEYC use, this film is often shown at annual NAEYC meetings also.

Shifting Personal Perspectives

ECRP: In your years of experience, have you had any shifts in your own perspective on young children and their care and education? What accounted for those shifts?

Dr. Honig: Well, I once walked into Barnes and Noble many years ago and saw that most of the

books about parenting were for middle-class parents, and the chapters were filled with “college-educated” kinds of words. So when I started writing some of my books, like my *Playtime Learning Games* book, I worked with a Flesch reading expert who taught me not to write a word like, “categorization” ... but to say, “Put things into groups—so that all these cars and buses and trucks belong together, and tea set silverware, cups, and dishes belong together.” I learned to use simpler words. That book is written at a 5th-grade reading level.

That became a way in which I could feel, “Yes, we can have materials for people whose level of English reading/speaking may not be middle-class, college-educated.” I didn’t want to write only for journals where you talk in the very esoteric terms that I was taught to use in Ph.D. work, but to write for people who would then say, “I can do all those little activities with my kids, Dr. Honig, because they’re easy and I can read all those words!” (That was something I heard from a lady with a 5-year-old child who had just come from Taiwan, who was taking some of our courses at Syracuse University as an undergraduate. She felt thrilled with that book, because she really could do all those wonderful activities, and her child so enjoyed learning with mom.)

Learning to write for ordinary folks in a simpler way was a challenge and very important for me.

I talk in my writings about “dancing up and down the developmental ladder” as we work to help children learn. So, if an activity is too hard for a child, how do you “dance down” a little bit? If it’s too easy, how do you “dance up” and create a slightly more challenging activity? Learning to write for ordinary folks in a simpler way was a challenge and very important for me. When I wrote with Dr. Lally the *Infant Caregiving* book, this was at a 9th- or 10th-grade level. When I wrote *Behavior Guidance for Infants and Toddlers* a few years ago, I made sure that every chapter is only two or three pages long. A parent or caregiver does not have to read a lot of pages. Someone could Xerox out a couple of pages and use them for staff training. Some of my research review chapters (such as chapters I have written on men working in child care or on oral language development) are very long, but my books for parents and caregivers do not have 50-page chapters. Each two- to three-page chapter in the *Behavior Guidance* book provides little examples and pictures to go with each specific suggestion for positive discipline techniques to use with infants and toddlers.

I tried to follow this style also with my *Secure Relationships* book, which I wrote for NAEYC as a gift. (All of my materials published by NAEYC, such as my first *Parent Involvement in Early Childhood Education* book, have been gifts to the National Association for the Education of Young Children.) Learning to write simple brief explanations, not tomes, about what secure or insecure attachment looked like, was a challenge. I learned to write more briefly, more concisely—that was a big help for me.

And you asked about changes in my thinking...

From Eriksonian theory, I always thought if you cared enough and worked with people, then you could help them raise a spark inside and teach them little ways, new ways to think about their issues and new ways to start trying to be with others with whom they are having interpersonal troubles. I’ve learned to use metaphor a lot. I said to one client of mine, “You’ve been on a gray road because of child abuse that happened to you, sexual abuse in your childhood. Let’s start on the yellow brick road. You may not reach Oz for a long time maybe, but you can see the towers of

Oz, and you will be traveling on the yellow brick road toward the Emerald City and not this gray road you have been struggling along for so long." He had been for years repeating hurtful patterns (in current interactions with intimate friends) of letting others use control and power with him—a role learned in earlier painful relationships.

I've also learned that no matter how hard you work, some folks think they just can bring a child to you with the message: "Fix up my kid!" As if something's wrong with their child instead of something needs healing in the parent-child relationship. If the parent has been giving carping orders, harsh criticism, and severe punishments and the child is acting out in school, butting up against teacher rules, this may have something to do not with the child alone but with the relationship. But changing our ways as adults requires so much courage as well as insight!

Sometimes in my own work, I've succeeded. An example: teaching about temperament. Once a little kid was driving his 10-year-old sister crazy. "Ever since he was born you've made my life a wreck!" said this 10-year-old to her mom! But when I taught the family to talk about each one's separate personality—things you're scared of, things you're worried about, things you need explained to you before they happen—wow. It changed them all. The little one, the 7-year-old, learned to say, "Mom, if we're going to move away from Syracuse, you'd better show me that new school and introduce me to the new teacher. That doctor you go to, she said that I need lots of time to get used to new things, so you'd better do that!" I was so thrilled. Children come in different temperament types. We do not always get a child who is easy to live with. Some are more fearful, and some are more irritable and triggery. There are parents who find it too hard to change. I've learned not to be a Pollyanna as much. You can't heal everybody all of the time.... You should just always try your best.

I've also learned that although universities have very strict rules—"You should be kicked out if you haven't finished your Ph.D. in 5 years or 7 years"—there are some ladies (and gentlemen) I've worked with who have families to support and life troubles that come along. We should be much kinder about supporting some of our graduate students through email—thank goodness for email!—students who may now live in different states. We should try to draw them back, because maybe they collected all their data and we should help them, even if it's 10 years later, to finish their degrees. I'm hoping somebody at this university listens to that one, because some rules seem to me too rigid and unfair. Women in particular ... and some men students I've had, were all but finished, finished their doctoral qualifying exams, but they had families to support and perhaps a spouse with a worrisome heart condition, and they never finished their doctorates. Why don't we behave more kindly toward people?

I've also learned that when you do research with your students, you don't always have to have huge grants. In this recession climate, when money is so tight, if students are feeling discouraged and they need help, sometimes you just have to have the good will of families or of child care centers that will allow you in to do intensive and extensive observational studies. You can have a good program of research that will teach you all kinds of new things without needing a great deal of money. Examples: one project I began was having students spend hours in shopping malls carefully observing the techniques that parents used in comforting their crying young children in public spaces. Another project was specifying the kinds of learning that go on in Chinese culture classrooms for children of Chinese parents (doing their graduate work at Syracuse University) who want their children to learn more about parental culture and language.

ECRP: What do you see as the most significant changes in the field since you first entered?

Dr. Honig: More rigidity. I've talked about a lot of things nowadays that center personnel are forbidden to do. For example: ever since all of the child abuse allegations that have happened in our country—some of which were true and some of which were made up by a psychotic woman in San Francisco, you know, projecting evil onto caregivers—but some of which has happened.... I've seen that a lot of people in kindergarten and other grades are afraid to touch a child because of what's happened with abuse allegations. We need to rethink the parameters. Thank goodness you can still touch babies! You have to change diapers and snuggle them for a bottle. I worry that little children and even older ones may never receive love and affectionate touches they need so much. Research shows that the size of young children's brains may be affected by how much play and affectionate touch they experience in infancy and early childhood. So touch is an extremely important aspect of caring for very young children.

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When children are distressed, you need to hug them. You need to rock and croon to a child who's had a terrible thing happen. You hug them and rock them and pat them, because they need reassuring and loving touch. Sometimes tragedies happen to very young children. Example: a mother went swimming early in the morning as she did habitually, at a local agency pool, and then they called the child care center and said to tell the 4-year-old that her mother had just drowned. That child is going to be suffering from terrible trauma and depression for months to come. That child will need lots of reassuring back rubs at nap time, lots of lap sitting, lots of holding to help cope with this loss and deep grief.

I've also seen a lot more rigid rules in child care centers. I was at a beautiful center a few years ago in the southern USA. I said, "How about a sandbox. I didn't see one outside. Maybe I missed it." "Oh, Dr. Honig, the inspector said even though we have a 6-foot link fence, maybe a cat could climb over and poop in the sandbox and then you could have diseases from cat poop." For goodness sake, I thought, can you buy something that's lightweight, or look for newly engineered lightweight materials so that even if you have a large sandbox, you could cover it with materials that teachers could easily pull off and still have a sandbox for the kids?

Children were not allowed to help with cooking at all at this center. Why not? Look what you can teach with cooking!... If you use an electric fry pan and you peel an apple and see whether you can carefully get the peel to get longer (first of all you're teaching all kinds of English comparatives: "This peel is long, longer, longest"). "And now we're going to cut the apple into slices. How many of us are sitting here? Oh, 6 of us—6 slices. Okay, let's see how many slices we can make," as teacher carefully cuts the apple. "Now, what do we need to put in the skillet so the apples won't burn?" And then you can eat the delicious apples, sautéed in butter. Not to allow any cooking in a center? Excuse me! We need creativity in order to keep children safe and still find ways for them also to enjoy homey activities such as cooking experiences.

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I've learned that sometimes we have too many rigid rules. Yes, we want to be somewhere in the middle, but there's a lot of dancing around in the middle—we can have democratic principles and principles of good child development and care that still keep kids safe. Of course you won't leave a child alone on a diapering table. That principle should stay firm. But no sandbox? Or no cooking? Come on. These kinds of rigid restrictions worry me.

Another thing I see is that as a society we don't value caregivers. In one center where I was a consultant, an educated father threw a wet diaper at the caregiver and complained that she changed his infant's diapers too many times a day and that he was paying for those diapers! Another example: a health care worker said to me, "The woman who's taking care of my 9-month-old...she let my baby cry for 2 hours. What am I supposed to do?" I said, "My name is Dr. Honig and I know a lot about this stuff, and you don't leave your 9-month-old with someone who lets a baby cry for 2 hours."

I wonder why we don't think of positive child rearing sensibilities and interactions as the gifts they surely are!

I told him about Child Care Solutions, the [child care] resource and referral agency in our town whose director is Peggy Liuzzi. Staff there will not tell you which is a better center or a better family child care; they're not allowed to by their grants and by state law.... But you can, as a mother or a father, go and observe at a care facility. The father I was speaking with asked: "But what should I look for?" So I gathered some of my own published materials on how to choose quality care and brought them to him at his workplace. He did look for and find an alternate care situation.

But I feel that as a society we don't sufficiently value the job of caregivers. The father whose caregiver let his baby cry for 2 hours said, "I need to get a better babysitter." What does that mean about the values of the culture, that someone who knows about child development and cares for young children is considered a "babysitter?" What does that mean we think about child care? A "babysitter" is someone, most likely a teenager, who has little training in child development and early childhood education.

Of course, I do believe that some persons are awesomely gifted even without coursework, just as some persons are gifted in music or artistic abilities. In the Children's Center church basement, we had four babies assigned to one caregiver. If one of us was diapering and another one was feeding a baby and another baby started to cry, the older lady who washed the hallway floors, and who spoke mostly broken English, would put her sponge mop in the pail, wipe her hands, and come in and rock that crying baby. Bless her heart. She knew. She was gifted for child development. But I wonder why we don't think of positive child rearing sensibilities and interactions as the gifts they surely are!

I have seen distressing situations, with parents treating a caregiver as a servant instead of as "this wonderful person who is caring for my little one ... reading to them, doing turn-taking talk, nurturing them, massaging them, helping them to feel like a wonderful beautiful growing little person. How lucky I am that I can go off to sell bonds and stocks while this

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person is lovingly caring for my child.”

How many politicians in the Congress know that we would have to pay far fewer billions for our prisons if we did more about early childhood education and had high-quality training, and paid for support for training for high-quality care by early childhood personnel? Our research in the Family Development Research Program (FDRP) indicated that teens who had attended program as preschoolers had significantly fewer juvenile delinquency convictions, significantly fewer serious infractions compared with control youth, and significantly less recidivism of delinquent behaviors. These results represent significant savings for society—a program that is keeping people out of the criminal justice system!

I’d like to see ... a complete groundswell of respect for quality child care, and lots more money being put into supports for that quality care. This year, the government bailed out the auto companies—I’m not saying we shouldn’t have—how many billion dollars? And yet we don’t spend billions, do we, or even millions on high-quality training for teachers of young children?

Only 8% of infant-toddler care in the United States is high-quality care! That’s scary, and it makes me worried because we are the most powerful, richest nation on earth, despite our current depression/recession. I think we need to be changing the mindset about what we as a nation need to invest in quality early childhood. We need to realize: “Hey, we’ll save lots of money on jails! Hey, we’ll save lots of money on litigation, if we lovingly raise children who develop secure attachments, wonderful prosocial skills, rich language with a love of books, and an early passion for learning fueled by each child’s innate curiosity and interests.”

In our Children’s Center, if you as a friendly looking adult had come into a room with a smile, a young child would have come toddling over to you with a book, maybe held upside down. You looked like a nice stranger who might have a generous lap and could read that book. I loved that about our teachers. They knew how to imbue tiny children with a love of books so early. We need to promote such a passion for books early in centers. I did research with one of our doctoral students on how much babies in middle-class centers in Onondaga County were read to when they were awake and fed. I bet you can’t guess how long a reading episode lasted—under a minute and a half! And practically no one was reading to children under 13 months. Curiously, toddlers were not being read to for longer time periods compared with younger children. Yet some toddlers can snuggle on your lap for a half-hour or more, absorbed in the picture book you are sharing with them. These data show that we have a lot of work to do in training caregivers.

We also need to think more carefully about our value system in assessing the civic contributions of caregivers and parents. How many parents who stay at home feel valued by other citizens for the quality of work they do or the income they have foregone in order to care tenderly 24/7 for their little ones?

ECRP: What do you think are some of the more promising developments in the field?

Dr. Honig: I just loved when Dr. Berry Brazelton had grants to train pediatricians in child development in Boston. But I don’t know whether that exists anymore. One promising development should be that professional people are lured into taking child development classes if they intend to be lawyers, or pediatricians, or nurses, or judges. Or if they intend to be a principal of a school where there will be kindergarten children who are being integrated into mainstream classes but may still

be functioning at the developmental levels of much younger children.

We want all children to have the best possible education, but some of our 5-year-olds who come to school might still be performing cognitively or socially at younger levels in terms of intellectual functioning. I watched a teacher in a school for mentally delayed youngsters get furious at a child about 7 years old, who had unrolled all the toilet paper in the bathroom and draped it everywhere. She had left him alone in the bathroom for a while without realizing that, despite his size, this child's mental functioning was about toddler level and that he needed an adult's presence and support in order to maintain self-control, to stay organized and appropriate with the toilet paper roll.

Some children may not have developed secure attachments with a parent, so they may need a lot more individual loving engagements and socialization skills in kindergarten. A school superintendent in a Midwest state once said, "We're bringing you child development folks in as consultants because I have been trained as a school administrator, and I haven't got a clue about what's going on in child development with the kindergarten or early grade classes in terms of their needs." I thought that person was very honorable and honest.

The cuts that are made when we have a recession come where, first? They come in services for young children, in health care for the neediest, in outreach parenting programs. Recently, the governor of California said that his heart breaks when people tell him they can't bear what's going to happen to desperately needed services in these areas. I suggest we raise taxes! Not for military hardware that is not needed or outrageously overpriced. But those citizens in the middle class should be rethinking wanting a very expensive car, and consider being willing instead to pay more taxes IF those taxes go into programs for more quality care for young children. Unfortunately, during tough economic times, the first thing politicians say they are going to cut is programs for those that are the neediest in our society, particularly young children and families.

Another change I would like to see is far more parent outreach programs to teach parents at all social levels more about helping young children learn. I had a middle-class mom say when I was reading a story, "How did you do that?" I said, "Pardon me?" She said, "You added in a lot of words like 'Please' and 'Thank you' and 'Wasn't that wonderful that he did that for me,' said Little Turtle.' That's not in the book!" And I said, "No, but you're in charge of a book when you read to a young child until they start to read—and then you read it the way it is written. You're in charge of a book! So you add in all those loving and kind words." But we will not be able to teach parents those skills unless we make political decisions to allot money for outreach programs for new parents.

You asked what I see as a positive change right now and, unfortunately, what I see is that where we're going to cut is where we should not be cutting funds.... That is something that I wish was not happening.

On a positive note, I do see a lot more grassroots programs in communities that are trying hard to partner with parents, for example, through work with hospitals discharging moms with newborns, or by offering low-cost training for caregivers through resource and referral agencies.

Ongoing Work

What are you going to be working on next?

Dr. Honig: I'm trying to troll in those graduate students who have been out for 10 years who do have their data collected and I know how beautiful their data are. I so hope that they can be encouraged to finish their master's or doctoral degrees. I helped one such student finish her M.S. degree (after many years away from grad school) a year ago. She had collected fascinating accounts of dreams from the preschoolers she was caring for in an enriching child care center.

I'm also looking forward very much to the publication of my new book called *Little Kids, Big Worries: Stress-busting Tips for Teachers*, which will come out this fall with Brookes Publishers. Not only is the recession causing more stress in terms of economics for families, but we have very high rates of divorce in our culture, which we didn't have 50 years ago, and we have high rates of people who are dual-career parents who are trying so hard to be all things—high-quality worker, high-quality parent, high-quality citizen. So stress can be worrisome for the children. Sometimes something gives. For example: one couple told me, "We've got to put the kids to bed early, because we get up at 5 o'clock to go to work!" But their kids really need more time with the parents, so sometimes the children are acting out and cranky or sullen. They need more intimate interaction time with each parent.

What I'd like to do is work as a mentor for more students. This past year I worked with Chinese students on going out to the community of Chinese immigrants whose children are learning English—and finding out more about what happens when immigrant parents' kids start to want to speak English more and their parents want to keep both cultures important in their children's lives. I've become very interested and have

submitted two articles on these topics. China is an enormously important nation in this world. All of my Asian students have been so precious to me, because in the culture I grew up in, one respected elders, one loved learning, and children were very precious. Confucian cultures have those same beliefs as the Jewish culture in which I grew up. So I feel extremely close to my students from Asian cultures, and if I can do more to help them do their research based on working within their culture groups, I would like to do that.

We can *take joy* from helping nurture the next generation—whether in our own families, or among our students, or for strangers who “swim into our ken”....

I hope I can continue to teach the National Quality Infant/Toddler Caregiving (QIC) Workshop at Syracuse University. Just this spring (2009), my former student Holly Brophy came to be the Reilly Distinguished Lecturer as part of the workshop. Next spring would be the 34th year. I really love doing that workshop.

On Remaining Inspired

ECRP: Do you have some thoughts you would like to share in closing?

Dr. Honig: As I enter the last years of living (I am now more than 80 years old), I realize that we are quite human in that we indeed fail in trying to reach some of our early dreams. We will never be perfect parents (nor were we perfect children for our own parents long ago!). We sometimes need to forgive ourselves when we are grumpy

and then pick ourselves up from what sometimes seems a “boxing ring” of life and go forward trying again to be the person we truly want to be!

What we *can* do to retain zestfulness is to keep a deathless curiosity for learning. (I re-read twice last month a new book called *The Brain That Changes Itself*, and I am even more excited about brain plasticity and what it means for healing for aged persons and for children who have been neglected or abused.) We can *take joy* from helping nurture the next generation—whether in our own families, or among our students, or for strangers who “swim into our ken,” for whom our small encouragements mean a lot. (I once gave a talk called “Committing random acts of kindness.”) We can fill up the “joy cup” of our souls with the ineffable beauties of nature, whether a new flower opening in glorious color in the garden this morning or a bird enjoying the seeds in our feeder, or the pattern of trees reflected in the still waters of a park pond.

As I grow older, I also enjoy reading more books on faith and spiritual development that help me think more deeply about how to live more in tune with Kindness.

Learning, giving, forgiving ourselves as well as others (and writing emails to legislators to support important social programs!)—these activities can keep us busy and feeling grounded in trying our best to the very end of our time on earth.

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