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In their 1996 Report on Aboriginal Peoples, the Royal Commission spelled out how: “Children hold a special place in Aboriginal cultures. According to tradition, they are gifts from the spirit world. They carry within them the gifts that manifest themselves as they become teachers, mothers, hunters, councilors, artisans and visionaries. They renew the strength of the family, clan and village and make the elders young again with their joyful presence.” Of all the treasures we have inherited from our First Nations, this may just be the most important.

The Canadian psyche is grounded in the belief that a safe and caring nation is one that cares passionately about the needs of its children: all of its children. This moral conviction is embraced, not just from a sense of duty and compassion, but also foresight. After all, how else can Canada become even more safe and caring, and lay the foundation for the next safe and caring generation, than by addressing the needs of its children?

But principles and passion alone are not enough to help families deal with the challenges they are struggling with today. What they truly need is to have practical strategies. And here is where recent scientific advances are profoundly supplementing traditional wisdom.

One of the most important of these advances is the realization that babies are all, in a fundamental sense, born “premature.” An extraordinary burst of neural growth and sculpting takes place in the first year of life, guided by the baby's caregivers. In particular, a baby's capacity for self-regulation—how she manages energy expenditure in response to stressors and then recovers from the effort—is being wired. So too is her “stress-reactivity”: the sensitivity of the alarm system buried deep in the brain that triggers fight-or-flight reactions.

The newborn’s basic needs haven’t altered from when she was inside the womb. She still needs to feel warm, safe and secure. For this critical first year of life, the caregiver has to carefully monitor and manage the baby's needs. A big part of this is not only feeding the baby and making sure she’s not too hot or cold, but calming her when she’s startled.

We now know that babies are startled even while they're in the womb, and even while they sleep. Because startle reactions consume so much energy, it's imperative this doesn't happen too often. The better a caregiver reads the baby's signs and adjusts the stimulation or soothing to suit the baby's needs, the more safe and secure the baby will feel.

A number of factors can interfere with a caregiver’s ability to perform this role. For example, severe illness might seriously interfere with a caregiver's capacity to cope with the demands of caring for a baby. Physical absence limits the opportunities to cultivate the connection. Especially important?
are biological challenges in the newborn that can render arousal-regulation extremely challenging for baby and parent alike.

But quite often what parents most need is not education, but help with their own self-regulation. This is not simply because it is so much harder to care for a baby when we are over-stressed, but because, under severe stress, a caregiver’s very ability to read, let alone respond to, a baby’s cues is severely diminished.

A safe and caring Canada is one that recognizes the high levels of stress that so many families are struggling with today and the impact this has on their children.

To meet this challenge, parents—and indeed, children and youth—need to master the five key steps of The Shanker Method®: 1) Read the signs of excessive stress, in yourself as much as in your child; 2) Identify the stressors; 3) Reduce the stressors; 4) Work on enhancing your stress awareness—bodily and emotional—first in yourself, and then in your child; and 5) Develop personalized coping strategies to promote resilience and restoration.

By supporting children’s self-regulation, we will be able to nurture our next generation of “teachers, mothers, hunters, councilors, artisans and visionaries.”