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Crib sheet emily oster review

Did Cribsheet by Emily Oster sit on the reading list? Choose the most important ideas in the book with this short summary. To avoid the hard work of rote memorization, many students resort to using a cot sheet: a small piece of paper where they write down information that will be useful to them in exams. This information may range from specific facts to general rules about the topic on which it is tested. Hidden in their hands, the resulting nativity scenes provide the student with a simple but effective technique for cheating their way to academic success. Ethics aside, it's a rather clever trick. If only it were so easy to pass the tests that adult life sends us along the way – especially the most difficult ones, such as giving birth to children and raising them for the first few years of their lives. Nativity scene sheet for parenting - now that would be useful! Imagine that you have a set of guiding principles at your fingertips, ready to apply to any difficult parental decisions you need to make. Well, economist Emily Oster has exactly that, and this book summary gives a sheet of crib to her crib sheet! But wait a minute – a nativity scene sheet about parenting based on the economist's ideas? Not a pediatrician or a child psychologist? It sounds like a strange combination. But it actually makes a lot more sense than you might think. In this Cribsheet summary by Emily Oster, you will learn how economic reasoning can help you make difficult parenting decisions; why parenting advice is often informed by questionable research; and what to look for when looking for the most reliable research. The world of parenting advice is an incredibly confusing place, full of conflicting opinions about what to do and how to do it. If you are a new parent, it is true right away, when important questions and decisions will confront you immediately after the birth of the child. For example, if your newborn baby is a boy, should you circumcise it? And if you are a mother, should you room with him at birth - is that he sleep with you in the hospital room? Or maybe you should send it to the kindergarten hospital? You can get completely contradictory answers to such questions, depending on what friends, family members, doctors, journalists or online forums you are asking. For example, some will say that it is definitely necessary to circumcise; This is beneficial with a medical condition. Others will say that it is dangerous and unnecessary. Adding to the confusion is the fact that both sides are usually armed with all sorts of evidence in favor of their positions, ranging from peer-reviewed scientific research and established biological facts to personal anecdotes and that one newspaper article's aunt vaguely remembers reading a few years ago. To make matters worse, people don't just give their advice to you in a neutral, take-it-or-leave-it kind of way. Instead, they provide him burdened with moral judgment. For example, you are a mother, it's not just that some people breast-feeding the baby, since the practical benefits outweigh the disadvantages; many of them think that you are downright a bad mother if you resort to feeding your baby with a formula. Now, it would be a lot of confusion and pressure to cope even under normal conditions – but once you or your partner gives birth, you're probably sleep deprived, stressed and exhausted. The stakes, meanwhile, will be incredibly high. After all, you are trying to ensure the survival and prosperity of a fragile little man who will suddenly become the most important being in his life. So when you're dealing with questions like whether to breastfeed, circumcise or room with your baby, how does your frazzled mind figure out which answer is right? Well, if you approach these kinds of questions, such as an economist, you'll see that the short answer is that there are never any proper answers. Or, more precisely, it's just a bad way of framing questions in the first place! At first glance, it may seem that there is not much in common between the dry academic discipline of economics and the highly personal, practical task of parenting a child. But in fact, there is a significant overlap between them. Parenting revolves around making difficult decisions, and decision-making is one of the main aspects of modern economics. For example, economists ask: Given the choice between two services, how does someone decide which one to buy? For an economist, this comes down to several factors. First, there are the costs and benefits of elections, which economists call contributions. Outlays are both monetary and non-monetary, but let's start with those cash ones, because these are the simplest variables to understand and quantifying. Imagine that you can afford to hire a nanny for your child and try to decide between doing this and putting your child in kindergarten. Which option should I choose? Well, the nanny is probably more expensive than kindergarten, so in terms of financial cost, kindergarten may be a better choice. But here's the thing: whether and to what extent money matters to you depends on your circumstances and preferences. If you're a middle-class person with no big disposable income, the price difference between the two options may matter to you – while if you're rich, it can be trivial. But what about non-monetary outlays? Well, if you are a middle-class person who definitely prefers a personalized nanny service to kindergarten, then for you, giving up on it is a non-monetary cost. Or maybe the social opportunities that kindergarten can provide for your child are important to you - giving up on this is one of the costs of renting a nanny. But what if we bet that the cash and non-monetary expenses are the same for anyone who makes a decision about kindergarten and

nanny? Well, even taking into account the same inputs, different can, will and should make different decisions, depending on how their situation and preferences to weigh things. In other words, from an economic point of view, there is no single right decision for everyone. One decision may be suitable for one person and one for another, while for the opposite decision it is the opposite. It all depends on people's personal preferences and circumstances, as well as how these grids with choices at hand. We read dozens of other great books, such as Cribsheet, and summarized your ideas in this article called Purpose of LifeRead it here! If the modern economy is correct, then there is no single correct answer when you make a decision that depends on your preferences and circumstances. But how can you have a crib sheet for parenting? Well, you may not be able to have all the answers at hand when reality tests you as a parent, but you can equip yourself with a general decision-making framework that parenting forces you to make. This framework can be divided into several steps. To begin with, determine the costs and benefits of the choices ahead of you. For example, let's say you're trying to decide between returning to work and staying at home with your baby after giving birth. What are the costs and benefits of these two choices? Well, it depends on your priorities. If it's primarily your child you mean, then you're probably wondering about the impact of the decision on her childhood development and later adulthood. Which choice will make you happier or more successful in the long run? This is an empirical issue; the answer can be determined by analysing scientific studies that track the development of a parent's child at home compared to back to work. If that's what you mean, you're probably wondering about the impact of these two choices on your own luck and success. Will staying at home undermine your career or make you feel sick of your child? Or will returning to work make you feel like you miss the full experience of parenting? These are partly empirical questions, but they are also subjective; the answers depend on how you feel when you are a parent and how much time you want to spend with your child. Finally, if you mean your family's budget, then you're just trying to define the proverbial bottom line. This is an economic issue; the answer depends to a large extent on monetary calculations. For example, how much would you earn if you went back to work? After determining the answer to each of these different versions of the original question, you need to take into account your preferences and circumstances in weighing them against each other. Then you can make a decision. But all this is easier said than done, for reasons that we will look at in the next summary of the book. When we apply an economist's decision-making framework to difficult choices a parent has to make, no subject seems more cut and dried up than finance. Which option will bring more to your bank account – are you going back to work or staying at home with your child? Some simple calculations can answer this question quite easily. But even here, the nature and meaning of the answers will vary greatly depending on the circumstances and preferences that will shape the trade-offs you'll be making. These trade-offs, in turn, will depend on a pair of economic concepts called alternative costs and marginal value. Let us illustrate these ideas by a hypothetical example. Imagine you don't have a relative to look after your child, and you live in a country where free childcare isn't available to you. To get back to work, you will have to pay for a kindergarten or nanny. This means that if your salary is low and the cost of childcare in your area is high, you may actually lose money by going back to work. On the other hand, if your income is greater than the cost of childcare, returning to work will improve your finances – but maybe not by much. For example, if you want to earn \$25,000 a year back to work and childcare will cost \$18,000 a year, it's only going to be competing \$7,000. If you need that \$7,000, or love your job or just want some time to be an independent adult away from your child, then it might make sense to get back to work anyway. But if you don't need it and you give a lot of value to spending as much time as possible with your child, then \$7,000 is probably not worth it. The alternative cost of losing time with a child would be higher than the marginal value of the additional \$7,000 you can earn from returning to work. But then again, maybe you can use that \$7,000 to go on vacation or save for retirement. Depending on how much you value these things over spending time with your child, the benefits can also outweigh the costs. As we'll see in the next book summary, the same reasoning can be applied to non-monetary trade-offs as well. With many parenting decisions, weighing the potential risks and advantages of one choice compared to another should theoretically be a very rational process. Just put the risk on one side of your mental scale and the benefits on the other side, and then see which one is heavier, and voila: the decision made! In practice, however, our emotions can easily muddle our thinking. This is because the prospect of exposing our children to any risk tends to cause panic, a knee-jerk reaction in our minds. Consider deciding whether to share a bed with a child, also known as a co-sleeper. If you do this, you put your child at risk. You can roll on it and crush his little body, or he could get tangled in sheets and suffocate. Scientific research also suggests that he will be at greater risk of sudden infant death Syndrome, or SIDS - a tragic phenomenon in which children unexpectedly, for no apparent reason. Hearing about this risk, you'd think, Okay, that seems pretty clear; I'll share a bed with my child. But would you say the same thing about driving a car with a child? Probably not – but the risk of infant death from car accidents is much higher than that of co-sleepers: 0.20, respectively, compared to 0.14 per 1,000 births. Still, 0.14 per 1,000 births is a risk – but some risk is inevitable in life, so that doesn't automatically mean we should avoid it. The question is whether this is a risk worth taking. And right now, you can probably predict the answer: it depends on your preferences and how they lead to balancing the benefits of (potential) risk-related costs. What are the benefits of co-sleep? Well, the main is not for your child; it's for you, parent. If you are a breastfeeding mother and your baby wakes up in the middle of the night, you do not need to get up to feed it. You can just fall over, feed him and let him go back to sleep. You yourself will probably get more sleep as a result. Sleep deprivation is a very common problem among parents, and this can lead to depression, so it is a significant benefit. But whether they outweigh the risk of sleeping together depends on how much you value comfort, sleep and well-being in relation to your child's safety. Parental decision-making variables can be divided into two columns. In a more subjective personal column there are preferences and circumstances. And then there's the more experiential, in-kind column: the costs and benefits of the options you choose. You might think that the first group will be more foggy, while the other side will be brighter. But in fact, things are often the other way around. Determining the real facts about the potential risks and benefits of, say, breastfeeding can be quite difficult. And not despite this, but due to the fact that there is a lot of scientific research floating around there on this subject. Here's the problem: many of these research centers around collecting data on which parenting practices correlate with the outcomes in children affected. For example, there are many studies that correlate breastfeeding with the IQ of children. These studies show that breastfed babies tend to have higher IQ than unfed children – seven points higher on average to be accurate. But, as it is said, correlation is not necessarily equal to causal. Just because two things like breastfeeding and a higher IQ are often found together doesn't mean that one of them causes the other. There may be additional, confusing variables involved – variables that are common to both breastfeeding and IQ, and that provide a real causal link between them. For example, in most developed societies, breastfeeding women tend to have higher IQ, income and educational levels than women who do not. Each of these variables is also associated with higher IQ in children. Now, if you are a scientist, you can adjust these variables when analyzing the data. For example, in order to for the educational variable, only children of mothers with the same level of education can be compared. The more scientists adapt to variables, the less correlation they find between breastfeeding and higher IQ. After adapting to all the variables they can identify, some researchers still find a slight correlation between them - but some skepticism is justified here. Reality is an extremely complicated place, with countless variables involved in a given set of phenomena. If the correlation between breastfeeding and IQ decreases with each additional variable you adapt to, what is more likely - the possibility that you have adapted to every possible variable and there is actually a causal link between them, or the possibility that there are simply more variables than you might think, and this would further reduce the correlation, to the point that it eventually disappears or becomes irrelevant? Probably the latter. If you want your parents' decision-making process to be evidence-based, you should review the available scientific research on the choices you weigh - but when you do, you should remember that not all studies have the same value. This leads us to another important part of the application of economic reasoning in parents' decision-making: weighing not only your choices, but also the evidence that informs you about these choices. As we have already seen, all studies are muddled by the existence of interfering variables and the possibility that there are additional variables that scientists simply have not identified and adapted. But some types of research are better to deal with this problem than others. If they were competing in the scientific equivalent of the Olympics, randomized, large-scale controlled trials would win a gold medal. To conduct such a study while examining the benefits of breastfeeding, a large number of mothers can be recruited and randomly divided into two groups: the group treated with breastfeeding mothers and the control group of mothers who are not breastfeeding. Because you have randomized which mothers are in which group, the mothers in the treatment group will have the same characteristics on average as the control mothers. The only difference will be whether they are breastfeeding. In this way, you can test for this variable and this variable itself. If there is a correlation between breastfeeding and a specific outcome, such as a reduced risk of gastrointestinal disorders, you can be relatively sure that there is a real causal link between the two phenomena. The larger the groups, the truer it will be. And if, in addition to the correlation between the two phenomena, you can also establish a causal mechanism that explains the relationship between them, then you can feel even more confident about the causation in question. For example, breastfeeding is associated with a reduced risk of a mother developing breast cancer – and this relationship may be explained by the fact that breastfeeding lowers the level of maternal estrogen production, which is a risk factor for the development of breast cancer. To date, only one randomised, controlled large-scale breast-feeding study has been conducted. Only two important links were established between breastfeeding and children's health outcomes: a four percent decrease in diarrhea and a three percent reduction in skin rashes such as eczema. Many other possible effects were looked at, including the alleged increase in children's IQ, and found no significant correlations. If the gold medal for research goes to randomized controlled trials, what research gets silver? The second place concerns the type of studies that include observational studies. To conduct such a study on breastfeeding, it is sufficient to collect several data on both breastfeeding mothers and breastfeeding mothers and their children, then compare the two groups and see what different results can be found. The larger the groups, the more differences between their members will tend to wash out on average. And the more you control interfering variables, the closer you can achieve the ideal scientific study in which all variables are controlled except the one you are testing. Thus, the larger the sample size of the observational study and the more it controls for interfering variables, the greater the confidence you can feel in the results. On the other hand, the smaller the sample size and the less it controls for these variables, the less confidence should be felt in its conclusions. If the sample size is really small, skepticism is probably justified. The best observational studies are usually those that compare siblings from the same families – for example, the first breastfed child and the second child who was not. Since these children grew up in the same families with the same socioeconomic environment, many of the confusing variables that can be disputed when comparing breastfeeding with breast-feeding children are simply a kind of control themselves in these studies. The second best observational study is research that collects a lot of data on children's family and socio-economics. These confusing variables can then be controlled to a large extent – although, as we have seen, there will always be nagging questions about whether there are variables that are overlooked. If many large, well-controlled observational studies come to the same conclusions, you can be quite confident in them. In the case of breastfeeding, these studies seem to establish that breastfeeding reduces the risk of developing ear infections in children – and that's it. In popular imagination and discourse, there are many other benefits that breastfeeding supposedly provides to children, such as reduced risk of diabetes, juvenile arthritis, meningitis, obesity, pneumonia and cancer. Unfortunately simply not enough randomised controlled trials or observational studies to supplement these claims. This does not mean that they are necessarily false; this simply means that there are currently no compelling reasons to believe them. Finally, it's time to hand out a bronze medal for scientific research on the potential risks and benefits of certain parental practices. The third place concerns the type of research that includes case studies. To conduct a case check, you basically go out and look for children who show the same results or symptoms. Then you try to figure out everything they have in common. After adjusting for the interfering variables, you see what's left, and then you try to identify the causal link between all the residues and the results or symptoms in question. In 1998, for example, the then doctor Andrew Wakefield conducted a case study involving 12 children who showed symptoms of autism. Each of them received a vaccine against measles, mumps and rubella. He claimed a causal link between the symptoms and the vaccine, which was related to digestion. This study helped usher in an anti-vaccine movement in which more and more parents refuse to vaccinate their children. Unfortunately, case studies are much more problematic than even very small observational studies. Like their observational counterparts, case study data can be muddled by reckless confusing variables and basic differences between the people studied. Now, remember, the larger the sample size, the more these differences tend to wash out on average. If we are talking about the sample size of thousands of mothers or children, we do not have to worry too much about the differences between them. But the sample size of only 12 children? It's far too small. And in Wakefield's study, it was small for some reason: scientific malfeasance. On the sample, Wakefield deliberately selected children whose circumstances supported his request and excluded children who did not. He also falsified his data by changing the dates of autism symptoms in children so that they seemed to appear closer to the days when children were vaccinated. But such falsification is not always intentional. For example, case studies often involve asking parents to recall actions they took in the distant past. Let's say your child turns out to be an early reader, and some enterprising researchers want to find out why by conducting a case study. They may ask you when you started reading to your child and how often you read. But it could have been years ago, and the memory can be faulty or tinged with successive events. In conclusion: Trust the conclusions of well-conducted randomized control and observational studies and approach other studies with a healthy dose of skepticism. The most important message in this book is a summary: When making decisions in the first few years of your child's life, you need to weigh the Factors. The first set consists of your personal preferences and circumstances. The second set consists of the potential costs and benefits of choices for your child, you and your family. By weighing these factors, you can inform about scientific studies that differ in reliability. You may be sure of well-conducted randomized control and observational trials, but you should be skeptical of case control studies. Heartache advice: Relax. Concerned about the possibility of her child being bit by a bud for the first time on the holiday she was planning, the author received the following advice from her doctor: I probably just tried not to think about it. The author considers this to be the best piece of parenting advice she has ever received from anyone. There are millions of things that can happen to your child, and most of them are unlikely. If you try to predict and prepare for all of them, you just get anxious, which, ironically, will probably make you a worse parent because you'll be too frazzled to think about your parenting decisions properly. Follow your doctor's instructions: Try to avoid thinking about anything that might go wrong with your child, and try just enjoying time with it instead. Suggested further reading: Find more great ideas like the ones included in this summary in this article we wrote on Life purpose LifeClub © 2019 2019

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