Acknowledgements

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Glen Cooper, MA
Bert Powell, MA
Circle of Security International

Zemirah Jazwierska, Ed.S.
Licensed School Psychologist
Kids Relaxation LLC

Rochelle Lentini, M.Ed.,
Director of Quality Counts for Kids’ Program-Wide Positive Behavior Support
University of South Florida

Jody McVittie, MD
Sound Discipline

Robert T. Muller, PhD
Psychology Today

John Richards, MA AITP
Lead, Health Information Group
Research Director, McCourt School of Public Policy
Georgetown University

Angela Thayer
Teaching Mama.org

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Primary Authors
Melissa Charbonneau, RN, BSN
Rhonda Crooker, RN, BSN
Peggy Slider, RN, MS

Contributing Authors
Caroline Law, RN, BSN (Retired)
Rowena Pineda, MEd

Editors
Elaine Conley, RN, MPH (Retired)
Marion Moore, PhD, BCBA-D
Kim Papich, Public Information Officer
Rowena Pineda, MEd

Technical Support
Amy Jennings, Graphic Designer
Sharon Peluso, Administrative Assistant

Weaving Bright Futures Program
1101 W. College Avenue, Spokane, WA 99201
509.324.1650 | srhd.org
Introduction

Public health nurses at Spokane Regional Health District (SRHD) developed this toolkit for caregivers of children. Caregivers are defined broadly to include parents, grandparents, child care providers, teachers, and others who care for children daily. Recent advances in the understanding of how early childhood experiences shape the way the brain works over the lifetime reveal just how critically important the job of caring for children is. It turns out that the brain grows and develops differently in response to nurturing versus traumatic environments. Experiences beginning at birth affect physical, mental and emotional health over the lifetime. When these experiences are traumatic and sustained over time, the impact on the brain makes it more difficult to build lasting and meaningful relationships, to learn and to handle stress.

By caring for children in a way that is sensitive, kind, and respectful, yet firm, caregivers make a difference by literally changing the geography of children’s brains, thereby helping them live healthier and more productive lives. Through everyday interactions caregivers can invite children to be their best selves and help them reach their intellectual potential.

This toolkit is intended to support caregivers on their journey towards trauma sensitivity. It is organized by topic, each offering a brief overview, specific tools that can be used with children, and where to find more information. Also included are handouts that can be used as teaching aids. Each toolkit topic builds upon the previous ones. It is meant to be user-friendly, so please feel free to add to it.

It is our hope that this toolkit will be useful in improving the resilience of caregivers, as well as that of the children in their care.
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Key
The Brain
Brain Development

The basic development of the brain happens over time beginning before birth and continuing into adulthood. It is through the interactive influences of genetics and experiences that the actual physical development of the brain occurs. There are specific, sensitive periods of time during which some parts of the brain grow and develop the best. Genetics determine when the different electrical and chemical “circuits” of the brain are formed and our experiences shape how those circuits are built.\(^1\)

While there are many parts of the brain that perform different functions, there are three main parts that are important to understand when addressing trauma: the brainstem, the limbic region and the cortex.

Brainstem

Brain development occurs from the bottom up. The brainstem is located at the very bottom of the brain. This is where basic biologic functions are controlled including heart rate, breathing and body temperature regulation. It also controls states of arousal like hunger; relaxation; sleep; wakefulness; and the fight, flight and freeze responses that are responsible for survival during times of danger.

Limbic Region

Directly above the brainstem is the limbic region. This part of the brain works closely with the brainstem to create and manage emotions and is responsible for making decisions about whether something is good or bad. It also plays a critical role in how we become emotionally attached to others and thus form relationships. The need for attachment is “hardwired” into the brain and causes us to seek connection with one another. This hardwiring actually means that being in relationship with others is critical not only to healthy growth and development but also to survival itself.

The limbic area also controls stress hormones. When faced with overwhelming situations with which we cannot adequately manage or cope, stress hormone levels often stay elevated over time. Traumatic experiences can cause changes to this area of the brain resulting in stress hormone levels that not only interfere with the proper growth and development of the brain, but may actually become toxic. Once these changes occur, the brain becomes overly sensitive to danger, resulting in difficulty determining which situations are “real danger” and which are not. Because of this, the traumatized brain often perceives danger in situations where none exists.

Another function of the limbic region is the creation of different forms of memory. These memories help us recognize danger at an instinctual level. This is important for survival. However, changes in the brain due to trauma can cause it to “misread” or misinterpret situations. Consequently, memories of past experiences can push us into a fight-flight-or freeze mode when there is no danger.

Cortex

The cortex makes up the outer layer of the brain and is separated into two different parts: the cortex and the prefrontal cortex. These are the brain’s “thinking” parts and allow us to plan, anticipate outcomes, evaluate situations and experiences, and coordinate interactions between many areas of our brain. This area also helps us thoughtfully control our emotions, giving us the ability to manage frustrations and build relationships, which helps us be more successful in school, work, and life.

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The Brain on ACEs

Adverse Childhood Experiences (ACEs) are the “not ok” events that sometimes happen in our lives. These events can adversely or negatively affect our brain growth and development and often have long term negative health outcomes. In fact, research shows that there is a direct correlation between the number of ACEs a person experiences and the ability to form healthy relationships as well as how memory works and consequently the ability to learn. ACEs are common and tend to occur in clusters rather than as a single experience, thereby increasing the risk for adverse effects on the brain and other body systems, as well as social, emotional, and intellectual impairments. These experiences can have lasting effects on both the structure and function of the brain.

Since the brain functions on a “use it or lose it” basis, the parts of the brain that are most stimulated are the parts that are the most developed or “strongest.” Consequently, when ACEs are prevalent in our lives those most primitive parts of our brain (brain stem and limbic systems) grow stronger while our cortex and prefrontal cortex become underdeveloped. Radiologic studies show that brains exposed to a high number of ACEs are actually smaller than brains that have had fewer ACEs (or none). There is also less activity in the higher brain structures as opposed to the limbic and brain stem regions.

Resiliency

The good news is that the negative effects of ACEs can be minimized as resiliency is increased. This is true across the age spectrum. Resiliency is what helps us to bounce back when bad things happen and overcome the negative effects that ACEs can have. By working on building safe, nurturing relationships and learning to regulate emotions we can help the brain to heal, opening the opportunity to live rich, successful and fulfilling lives while minimizing the long term negative effects of the adverse events in our lives (see toolkit section titled Resilience).

MORE INFORMATION

Stress and Early Brain Development: Understanding Adverse Childhood Experiences (ACES) handouts
From ACEs Connection Blog
Reading this in print? Go here: www.acesconnection.com/blog/handouts-for-parents-about-aces-toxic-stress-and-resilience

Stress and Early Brain Development: Understanding Adverse Childhood Experiences (ACES) handouts
Original Version 1 Version 2 Version 3
Understanding Adverse Childhood Experiences (ACEs)

What are ACEs?
ACEs are significant childhood traumas as identified below which can result in actual changes in brain development. These changes may affect a child’s learning ability, social skills, and can result in long-term health problems. The Centers for Disease Control and Prevention (CDC) views ACEs as one of the major health issues in the 21st century.

Exposure to childhood ACEs can increase the risk of:
- Adolescent pregnancy
- Alcoholism and alcohol abuse
- Chronic obstructive pulmonary disease (COPD)
- Depression
- Early initiation of sexual activity
- Early initiation of smoking
- Fetal death
- Health-related quality of life
- Illicit drug use
- Ischemic heart disease (IHD)
- Liver disease
- Multiple sexual partners
- Risk for intimate partner violence
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies

How do ACEs affect health?
Through stress. Frequent or prolonged exposure to ACEs can create toxic stress which can damage the developing brain of a child and affect overall health.

- Reduces ability to respond, learn, or process effectively which can result in problems in school
- Lower tolerance for stress can result in behaviors such as aggression, checking out, and defiance
- May have difficulty making friends and maintaining relationships
- Problems with learning and memory can be permanent
- Increases stress hormones which affects the body’s ability to fight infection
- May cause lasting health problems

A Survival Mode Response is one that increases heart rate, blood pressure, breathing and muscle tension. When a child is in survival mode, self-protection is their priority. In other words:
“I can’t hear you, I can’t respond to you, I am just trying to be safe.”
The good news is resilience brings hope!

What is Resilience?
Resilience is the ability to adjust (or bounce back) when bad things happen. Research shows resilience helps reduce the effects of ACEs. Protective factors are internal and external resources that help us to build our resilience.

Resilience trumps ACEs!
Parents, teachers and caregivers can help children by:
- Gaining an understanding of ACEs
- Creating environments where children feel safe emotionally and physically
- Helping children identify feelings and manage emotions
- Creating protective factors at home, schools and in communities

What are protective factors?
1. **Parental resilience**
   Increasing parents’ ability to problem-solve and build relationships with their child and others

2. **Nurturing and attachment**
   Listening and responding to a child in a supportive way and discovering and paying attention to the child’s physical and emotional needs

3. **Social connections**
   Having family, friends or neighbors who are supportive and willing to help or listen when needed

4. **Concrete supports**
   Having their child’s basic needs met, such as housing, food, clothing and health care

5. **Knowledge of parenting and child development**
   Increasing parents’ knowledge of their child’s development and appropriate expectations for their child’s behavior

6. **Social and emotional competence of children**
   Helping their child to interact positively with others, manage emotions and communicate feelings

**Resources:**
- **Parent Help 123**
  www.parenthelp123.org
  1-800-322-2588
- **Resilience Trumps ACEs**
  www.resiliencetrumpsaces.org
- **Washington Information Network**
  www.win211.org
  1-877-211-WASH (9274)
- **CDC Adverse Childhood Experiences (ACE) Study**
  www.cdc.gov/ace/about.htm
**STRESS & EARLY BRAIN GROWTH**

**Understanding Adverse Childhood Experiences (ACEs)**

**What are ACEs?**
ACEs are serious childhood traumas -- a list is shown below -- that result in toxic stress that can harm a child's brain. This toxic stress may prevent child from learning, from playing in a healthy way with other children, and can result in long-term health problems.

<table>
<thead>
<tr>
<th>Adverse Childhood Experiences can include:</th>
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<tbody>
<tr>
<td>1. Emotional abuse</td>
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<td>2. Physical abuse</td>
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<tr>
<td>3. Sexual abuse</td>
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<td>4. Emotional neglect</td>
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<tr>
<td>5. Physical neglect</td>
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<tr>
<td>6. Mother treated violently</td>
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<tr>
<td>7. Household substance abuse</td>
</tr>
<tr>
<td>8. Household mental illness</td>
</tr>
<tr>
<td>9. Parental separation or divorce</td>
</tr>
<tr>
<td>10. Incarcerated household member</td>
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<tr>
<td>11. Bullying (by another child or adult)</td>
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<tr>
<td>12. Witnessing violence outside the home</td>
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<tr>
<td>13. Witness a brother or sister being abused</td>
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<tr>
<td>14. Racism, sexism, or any other form of discrimination</td>
</tr>
<tr>
<td>15. Being homeless</td>
</tr>
<tr>
<td>16. Natural disasters and war</td>
</tr>
</tbody>
</table>

**How do ACEs affect health?**

**Through stress**, Frequent or prolonged exposure to ACEs can create toxic stress which can damage the developing brain of a child and affect overall health.

- Reduces the ability to respond, learn, or figure things out, which can result in problems in school.
- Increases difficulty in making friends and maintaining relationships.
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- Lowers tolerance for stress, which can result in behaviors such as fighting, checking out or defiance.
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**Exposure to childhood ACEs can increase the risk of:**
- Adolescent pregnancy
- Alcoholism and alcohol abuse
- Depression
- Illicit drug use
- Heart disease
- Liver disease
- Multiple sexual partners
- Intimate partner violence
- Sexually transmitted diseases (STDs)
- Smoking
- Suicide attempts
- Unintended pregnancies

**A Survival Mode Response to toxic stress increases a child's heart rate, blood pressure, breathing and muscle tension. Their thinking brain is knocked off-line. Self-protection is their priority. In other words:**

"I can't hear you! I can't respond to you! I am just trying to be safe!"
The good news is resilience can bring back health and hope!

What is Resilience?
Resilience is the ability to return to being healthy and hopeful after bad things happen. Research shows that if parents provide a safe environment for their children and teach them how to be resilient, that helps reduce the effects of ACEs.

Resilience trumps ACEs!
Parents, teachers and caregivers can help children by:

- Gaining an understanding of ACEs
- Helping children identify feelings and manage emotions
- Creating safe physical and emotional environments at home, in school, and in neighborhoods

What does resilience look like?
1. **Having resilient parents**
Parents who know how to solve problems, who have healthy relationships with other adults, and who build healthy relationships with their children.

2. **Building attachment and nurturing relationships**
Adults who listen and respond patiently to a child in a supportive way, and pay attention to a child's physical and emotional needs.

3. **Building social connections**
Having family, friends and/or neighbors who support, help and listen to children.

4. **Meeting basic needs**
Providing children with safe housing, nutritious food, appropriate clothing, and access to health care and good education.

5. **Learning about parenting and how children grow**
Understanding how parents can help their children grow in a healthy way, and what to expect from children as they grow.

6. **Building social and emotional skills**
Helping children interact in a healthy way with others, manage their emotions and communicate their feelings and needs.

Resources:

**ACES 101**
http://acestoohigh.com/aces-101/

**Triple-P Parenting**
www.triplep-parenting.net/glo-en/home/

**Resilience Trumps ACEs**
www.resiliencetrumpsACEs.com

**CDC-Kaiser Adverse Childhood Experiences Study**
www.cdc.gov/violenceprevention/acestudy/

**Zero to Three Guides for Parents**

Thanks to the people in the Community & Family Services Division at the Spokane (WA) Regional Health District for developing this handout for parents in Washington State, and sharing it with others around the world.
STRESS & EARLY BRAIN GROWTH

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3. Sexual abuse
4. Emotional neglect
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6. Mother treated violently
7. Household substance abuse
8. Household mental illness
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11. Bullying (by another child or adult)
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14. Racism, sexism, or any other form of discrimination
15. Being homeless
16. Natural disasters and war

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Through stress. Frequent or prolonged exposure to ACEs can create toxic stress which can damage the developing brain of a child and affect overall health.

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- Creating safe physical and emotional environments at home, in school, and in neighborhoods

**What does resilience look like?**

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3. **Building social connections**
   Having family, friends and/or neighbors who support, help and listen to children.

4. **Meeting basic needs**
   Providing children with safe housing, nutritious food, appropriate clothing, and access to health care and good education.

5. **Learning about parenting and how children grow**
   Understanding how parents can help their children grow in a healthy way, and what to expect from children as they grow.

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Resilience
What is Resilience?

Resilience is, “The ability to become strong, healthy or successful again after something bad happens.”

Why is Resilience Important?

The ability to recover from difficulties increases the likelihood that individuals will be able to reach their full potential, and mitigates the damaging effects that adverse childhood experiences can have over the lifespan.

Jody McVittie, M.D., co-founder of Sound Discipline, identifies two things that influence how able a child is to “bounce back” when bad things happen:

1. How they are able to make meaning of their life experiences.
2. The network of “safe” connected adults they have in their lives.

People do their best thinking and learning in the context of safe relationships.

“Resiliency is not as prevalent as we would like to believe. What we do know is that it is strongly related to the belief that somehow you ‘mattered’ to someone: the deep belief that at one time you mattered to another human being.”

Vincent Felitti, M.D., Co-Principal Investigator, Adverse Childhood Experiences Study

What can be Done?

Healthy relationships are key to building resilience, which is the primary way to combat ACEs. It is in the context of safe relationships that we can invite children to feel like they matter, which is critical for building resiliency.

- Look for opportunities to connect. Connection can be thought of as “being present with” another person. This can be as simple as sharing a smile, speaking a word of encouragement, doing an activity together or sitting with a child who is upset.

- Focus on encouragement. This is not the same thing as praise. Praise is focused on children’s accomplishments, while encouragement invites children to be their best selves by expressing belief in who they are. It is difficult to praise a child who is failing, and this is when encouragement is needed the most. Here are some examples of praise and encouragement.

<table>
<thead>
<tr>
<th>PRAISE</th>
<th>ENCOURAGEMENT</th>
</tr>
</thead>
<tbody>
<tr>
<td>I’m so proud of you.</td>
<td>You figured it out.</td>
</tr>
<tr>
<td>You did it just like I told you.</td>
<td>You reached your goal!</td>
</tr>
<tr>
<td>You’re the best player on the team.</td>
<td>You are capable.</td>
</tr>
<tr>
<td>You got an A!</td>
<td>I trust your judgement.</td>
</tr>
<tr>
<td>Good boy/girl.</td>
<td>You can decide for yourself.</td>
</tr>
<tr>
<td>Your painting/project is beautiful.</td>
<td>Can you tell me about your painting?</td>
</tr>
<tr>
<td>I’m impressed.</td>
<td>You really stuck it out.</td>
</tr>
<tr>
<td>You are so smart!</td>
<td>Look how far you’ve come.</td>
</tr>
</tbody>
</table>

Adapted from Positive Discipline by Jane Nelson, Ed.D. 2006
More recommendations for building resiliency  Adapted from Positive Discipline by Jane Nelson, Ed.D. 2006

- Use mistakes as opportunities to teach children instead of taking punitive action.
- Focus on finding solutions rather than punishment. Helping a child problem-solve and think through issues strengthens the “thinking” part of the brain.
- Consider both the age and developmental level of children, and adjust your expectations of them accordingly. Expecting children to be able to do something they aren’t capable of will only increase their sense of inadequacy, rather than building self-esteem.
- Balance respect for the child’s needs, your needs, and the needs of the current situation. One person’s needs do not take priority over another’s. All people are equally worthy of respect.
- Give each child meaningful tasks to do, taking into account the child’s age and developmental level. Completing a simple task such as helping to clean up after a meal can help a child feel important.
- Because we do our best thinking and learning when we feel safe and connected with others, the most effective way to correct a child is by first connecting.

Here are some examples

- “Wow...you’re really mad because your blocks fell over. It’s not okay to hit your brother.” Connection through acknowledgement of feelings, followed by correction.
- “You seem really upset. Do you need a time out?” (see Positive Discipline section of this toolkit) and once the child has calmed, “Do you know why what happened wasn’t okay? What’s your plan for the next time you feel that way?” Connection through acknowledgement of feelings and an invitation to self-regulate, followed by correction.
- Take time for self-care. Making time to do things that are enjoyable is rejuvenating and replenishes the energy needed to care for others.
- Asking for help when you need it is a sign of strength. Modeling this skill for children is a powerful way to help them understand that they do not need to have all the solutions by themselves.

MORE INFORMATION

This Emotional Life: What is Resilience?
Public Broadcasting Service (PBS) Series
Reading this in print? Go here: www.pbs.org/thisemotionallife/topic/resilience/what-resilience
Attachment
What is Attachment?

Attachment is, “A deep and enduring bond that connects one person to another across time and space.”

Why is Attachment Important?

• Interactions with others in the first few years of life form the building blocks that determine our outlook and understanding of how the world works and how we fit into it.
• Attachment:
  • Is a basic human need.
  • Provides a sense of predictability, safety, security and protection.
  • Serves as the foundation for care, comfort, stimulation and interaction.
• Children’s first attachments influence their view of the world, the quality of their future relationships, and the decisions they make about what they need to do in order to thrive or survive. It affects how they eventually parent their own children. It’s never too late to learn new ways to relate to the world and the people around us, but our earliest interactions always matter.
• Without attachment, infants may fail to thrive and may even die.
• When the care children receive is erratic they learn that their feelings are unreliable predictors of caregiver responses to their need for comfort and safety, resulting in difficulty making a coherent connection between how they feel and how caregivers respond. They learn that they are unable to rely on or trust their feelings. As a result, they often become difficult to settle and calm when distressed and their flight-flight-or freeze response may be activated with very little provocation, setting them up for difficulties throughout their lives.
• Children who experience the world as predictable, supportive and responsive to their needs develop the foundation that helps them learn and reach their intellectual potential.

What Can Be Done?

Build connection with children by:

Being positive
- offer encouragement
- celebrate successes
- laugh together

Having fun together
- sing
- be silly
- play together, following the child’s lead
- talk to children about what you are doing and what they are experiencing

Using touch and eye contact
- massage
- play peek-a-boo
- snuggles, hugs and affectionate touch

Responding to children’s needs consistently
- comfort children when they are upset
- feed children when they are hungry
- notice children’s signals that say, “I am done” or “I need more” and meet that need

MORE INFORMATION

Understanding Attachment and the Development of Beliefs article
Adapted from presentation by Penny Davis, MA, based on training materials by Grossmont-Cuyamaca Community College District; Foster, Adoptive and Kinship Care Education Program; Attachment Parenting Class

Rebuilding the Foundation for Children with Insecure Attachments or Trauma
by Jody McVittie, M.D.
Adapted from Center for Early Childhood Mental Health Consultation (ECMHC), Georgetown University Center for Child and Human Development (CEMHC).

Circle of Security Video
Reading this in print? Go to: https://www.youtube.com/watch?v=1wpz8m0BFM8

Circle of Security Tool and Instructions

Social Emotional Tips for Families with Infants
From ECMHC, CEMHC.

Social Emotional Tips for Families with Toddlers
From ECMHC, CEMHC.

Some Starters for Giving Positive Feedback and Encouragement
From the Center on the Social and Emotional Foundations for Early Learning.

www.circleofsecurity.net
Understanding Attachment and the Development of Beliefs

Adapted from presentation by Penny Davis, MA, based on training materials, Grossmont-Cuyamaca Community College District, Foster, Adoptive and Kinship Care Education Program “Attachment Parenting”

Beginning at birth, through the attachment relationship with a primary caregiver, infants start making decisions about who they are, what the world is like and what place they have in it, what caregivers are like, and what they need to do in order to thrive or survive. These decisions form a blueprint in their brain for how to navigate life, and become the lens through which they view the world. All future relationships are affected by this blueprint.

When children’s physical and emotional needs are met consistently, it builds a strong and healthy attachment between children and their caregivers. The dance that occurs between a sensitive, responsive caregiver and a child who clearly signals his/her needs forms a blueprint in that child's brain based on trust and security. This child sees his/her world as predictable and consistent, trusts that his/her needs will be met and that caregivers understand how he/she feels. These internal beliefs provide the foundation for a successful future at school, at work and in forming healthy relationships.

Some things that can get in the way of building secure, healthy attachments include caregiver addictions or mental health issues, abuse and/or neglect, and caregivers who did not develop secure attachments themselves or are very young or developmentally incapable of providing consistent care. When infants’ needs are met inconsistently or perhaps not at all, a blueprint is formed in their brain based on mistrust and insecurity. These children grow up viewing the world as unpredictable and inconsistent, caregivers as disinterested and unsympathetic, and as a result they become incapable of trusting that their needs will be met. Lacking the strong, stable foundation of secure attachment, children cannot go on to build the skills they need in order to be successful in school and in forming and maintaining relationships.

The foundation built in the brain through the relationship with primary caregivers, beginning at birth, determines how successful individuals will be in reaching their intellectual potential. The four basic building blocks that form this foundation are:

1. causal thinking
2. basic trust
3. conscience development
4. the ability to delay gratification

Causal Thinking

Causal thinking is the ability to understand cause and effect. When children’s needs are met consistently, they learn that expressing a need (A) leads to the need being met (B), which helps them feel better (C). When A leads to B leads to C over and over again, children decide that the world is consistent and predictable. Some things for which we depend on causal thinking include math, spelling, organizational skills, problem solving skills, and the ability to follow directions. When we reach school-age, without causal thinking, we may not understand that two plus two will always equal four, and...
so we may answer that simple math problem differently each time we encounter it. If our brain has decided that the world is not predictable, why would math be? One of the most widely used discipline methods in our society is consequences. Without causal thinking, consequences make no sense, because we don’t have the ability to think through “if I do __(this)__ __(that)__ will happen”. Later on, when we decide to go to college, the entrance requirements may be so overwhelming that we might give up because we don’t have the ability to problem solve the order in which things need to be done or to think through what comes next. Lack of a strong causal thinking building block creates difficulties in life.

**Basic Trust**

The basic trust building block is built through the belief that our needs will be met and consequently the ability to develop a relationship with our caregiver that is based on unconditional positive regard. When we have the knowledge that we will be loved no matter what, it helps us feel safe to express ourselves, explore, and make the mistakes in life that are necessary for learning. Without basic trust, all future relationships are more difficult.

**Conscience Development**

Conscience development is built by developing a sense of empathy, or the ability to feel what others feel, to put oneself in another’s shoes. When a caregiver is responsive to children’s needs and sensitive to their feelings, they learn that others understand them, that their feelings are real and legitimate. The ability to empathize leads us to develop a sense of right and wrong. We are able to understand what it feels like for another person if we are not kind to them. Without this ability, it is difficult to understand why we should not hurt others.

**Delayed Gratification**

Delayed gratification is the ability to wait, to be patient. When children know their needs will be met and that caregivers understand how they feel, they are able to learn how to wait. Without a strong delayed gratification building block, we may just take what we want when we want it, because our brain has decided that if we don’t, we may never get what we need.

**Attachment Building Blocks**

These four building blocks provide a firm foundation on which to build. Causal thinking allows for development of intellectual potential. Identity formation comes from basic trust. In order to build socialization and relationship skills, we need conscience development and delayed gratification. If the foundation is weak or nonexistent, it is very difficult or impossible to move on to develop other skills.

As a result of the decisions our brains make in relationship to our early caregivers, we end up with an internalized belief system that looks like this:

- I feel ____________________________.
- Caregivers are ____________________________.
- The world is ____________________________.
- I am ____________________________.

This becomes the lens through which we view the world.

The good news is that weak foundations can be strengthened or rebuilt for children through connection with kind, caring and compassionate adults. The younger we are the easier it is to rebuild our foundation. For ideas about what you can do to begin rebuilding the foundation for children, please see Rebuilding the Foundation for Children with Insecure Attachments or Trauma in the Attachment section.
Rebuilding the Foundation for Children with Insecure Attachments or Trauma

Adapted from “Building Resiliency: Working with Students Exposed to Trauma,” by Jody McVittie, M.D.

Causal Thinking
- “What” and “how” questions
- Limited Choices
- Focusing on solutions (Consequences don’t make sense without causal thinking)

Basic Trust
- Routines (including family meetings)
- Consistency and reliability in the relationship
- Relationships based on dignity and respect (firm and kind)
- Listening to their story

Conscience Development
- “What” and “how” questions
- Family meetings
- Gradual building of empathy (being listened to, feeling felt)
- Respecting differences

Ability to Delay Gratification
- Routines
- Consistency
- Relationships built on dignity and respect (firm and kind)
- Family meetings
- Mistakes are opportunities to learn

Ability to Handle Stress and Concentration
- De-escalation tools (modeled, taught, expected)
- Teaching children about their own brain (brain in the palm of the hand)
- Using “I” statements
- Learning language for emotions
- Space for “chilling out” (Positive time out or “chill down time”)
- Family meeting to be heard and validated, and to recognize that others have similar feelings
- Mistakes are opportunities to learn

Relationship Skills and Socialization
- Adult relationships based on dignity and respect (firm and kind)
- Family meetings
- Problem solving
- Opportunities for play and practice making mistakes
- Mistakes are opportunities to learn

Identity Formation and Intellectual Potential
- Household jobs and responsibility
- Being able to contribute in meaningful ways
- Using “I” statements and learning language for emotions
- Opportunities to practice during play
- Learning how to make amends and fix mistakes instead of “paying for them”
- “It seems like you feel __________ because ______________.”
Circle of Security Illustrations

How Do I Use These Tools?

Physical and emotional safety is important to all of us, adults and children alike, and is necessary in order to thrive. In the Circle of Security caregivers provide a “secure base” that encourages and allows children to explore the world while being watched over and delighted in. Caregivers also provide a “safe haven” for children to come back to when they need comfort, protection, or help to manage their emotions.

The following illustrations explain the various circles that occur between caregivers and children as defined by Circle of Security International.
CIRCLE OF SECURITY
PARENT ATTENDING TO THE CHILD’S NEEDS

I need you to...

Support My Exploration
• Watch over me
• Delight in me
• Help me
• Enjoy with me

I need you to...

Welcome My Coming To You
• Protect me
• Comfort me
• Delight in me
• Organize my feelings

Always: be BIGGER, STRONGER, WISER, and KIND.
Whenever possible: follow my child’s need.
Whenever necessary: take charge.

© 1998 Cooper, Hoffman, Marvin, & Powell
circleofsecurity.org
Mom and Dad,
All this chaos feels too big for me. Sometimes I might feel OK. But sometimes I don’t. When I feel sad or scared I might cling or get real quiet or act out of control. At those times I’m telling you I don’t know what to do with how I’m feeling.

I need you to:
♦ Talk with other adults and let them help you trust in the future
♦ Be in Charge
♦ Be kind
♦ Give me predictable daily routines
♦ Sit down with me often, offer soothing reassurance, and let me know it’s still OK to be afraid

I’m really saying please help me. I need you because I’m often still scared and confused. You may not realize how much you help me just by being with me.

The Circle of Trust applies to children of all ages
See: www.circleofsecurity.org

© 2005 – Cassidy, Cooper, Hoffman, Marvin & Powell
5 Simple Tips To Support Your Infant’s Social Emotional Health During Dressing

1. Talk about what you are doing.
   “Mila, Daddy is going to put your shirt on now.”

2. Practice patience.
   “David, this shirt is hard for mommy to get over your head, I am going to try a different way.”

3. Leave extra time.
   “It will be time to go to child care soon, let’s get you ready Sasha.”

4. Offer positive words.
   “Ellen you wiggled your foot into the sock. Way to go!”

5. Have fun.
   “We got your shirt on Dedrea, let’s clap your hands!”

You Are Your Child’s First Teacher!
Together, you and your infant can make dressing a special time for connecting. When you show patience and use gentle words, your infant learns from you how to be kind and patient. When you talk positively about what you are doing together your child learns that you like taking care of them, “Daddy is going to dress you in warm clothes today for our walk, it’s chilly outside.”

Developed for the Center for Early Childhood Mental Health Consultation, Georgetown University Center for Child and Human Development with funding by the Office of Head Start/ACF, DHHS (#90YD026).
5 Simple Tips To Support Your Infant’s Social Emotional Health During Meal Time

1. Hold your baby while feeding. “I am going to feed you now Brayden. Mommy is going to find a comfortable spot for us.”

2. Look in their eyes and connect. “I see you looking at me Gabe, I love looking at you too.”

3. Talk and sing to your baby while feeding. “You like the orange carrots Calvin, I see that smile!”

4. Consider breastfeeding. “Let’s find a cozy spot for mommy to feed you Jeremiah.”

5. Notice signs from your baby that say, “I am done” or “I need more.” “Kara you are turning your head away, I think you are all done eating.”

You Are Your Child’s First Teacher!

You and your baby can connect during mealtimes through cooing, singing and looking at each other. Babies love your face and voice. You help them to feel safe when you speak gently. When you know what your baby needs and react, for example by feeding them, it sends a message to your baby that their needs are important.

Developed for the Center for Early Childhood Mental Health Consultation, Georgetown University Center for Child and Human Development with funding by the Office of Head Start/ACF, DHHS (#90YD026)
5 Simple Tips To Support Your Infant’s Social Emotional Health During Play Time

1. Follow their interests.
   “Lily, I see you bouncing to the music, let’s dance together!”

2. Talk about what you see.
   “Sal, look at those big, red apples! Do you want to hold one for me?”

3. Sing and read.
   “That’s it David, snuggle in and let’s look at this story together.”

4. Offer encouragement.
   “Helena, you almost rolled over, come on big girl, let’s try again!”

5. Have fun and laugh together.
   “Daddy loves your giggles, Talia!”

You Are Your Child’s First Teacher!

Infants are wired to learn and connect with people they love. Playing with your baby every day builds your parent-child bond. When you sing, read and talk with your baby and look into their eyes, it helps their brain to grow.
5 Simple Tips to Support Your Infant’s Social Emotional Health During Rest Time

1. Create a routine.
   “Time to take a bath Gia and then we’ll get ready for your nap.”

2. Use routines across settings.
   “Let’s pack your favorite book and blanket for Ms. Joslyn to use with you at child care today Jayden.”

3. Leave time for transitioning.
   “We have had fun playing Hanna, let’s go for our walk before bed time.”

4. Take care of the basics.
   “Justin, let’s change your diaper before you rest.”

5. Take time to refuel.
   “Nina, daddy has to take a break too so we can play again later.”

You Are Your Child’s First Teacher!

Infants, need time each day to rest. Just like us! Gentle routines—doing the same thing every day, will help your infant know what to expect and will help them ease into resting. Planning ahead to meet your infants needs each day will make it easier for them and for you, “Sara, we will be out with your grandmother today, I will pack some extra diapers for you and snacks for us.”

Developed for the Center for Early Childhood Mental Health Consultation, Georgetown University Center for Child and Human Development with funding by the Office of Head Start/ACF, DHHS (#90YD026).
5 Simple Tips To Support Your Infant’s Social Emotional Health During Diapering

1. Create a routine.
   “Hi Derry, you had a good nap! Let’s check your diaper.”

2. Know the signs.
   “Eli, I see you pulling on your diaper, do you need to be changed?”

3. Take time to Connect.
   “Look at that big smile Henry! You make mommy smile too!”

4. Offer choices.
   “Kia do you want the red ball or the bear to hold while daddy changes you?”

5. Practice patience.
   “I know you don’t like to be changed but we need to take good care of you. Mommy is almost done.”

You Are Your Child’s First Teacher!

Diapering is an everyday routine that creates an opportunity for connecting with your infant. When you coo, babble and talk with your infant it sends a message that they are important. They love your voice and face! Creating a simple routine for diapering—doing some things the same every day, can help your infant know what to expect and will make the experience smoother for each of you, “Daddy is going to change your diaper and sing our song and then we will go play with our toys!”

Developed for the Center for Early Childhood Mental Health Consultation, Georgetown University Center for Child and Human Development with funding by the Office of Head Start/ACF, DHHS (#90YD026).
You Are Your Child’s First Teacher!

Together, you and your toddler can make dressing a special time for connecting. Toddlers like to show that they can do it—“All by myself!” When you offer choices and show patience they learn that you value their efforts. This will help them to keep trying and eventually learn to dress themselves. Toddlers look to you for encouragement. Let them know their efforts matter, “Tamika, you pulled your pants up! You are doing new things, daddy is proud of you.”

For Families

5 Simple Tips To Support Your Toddler’s Social Emotional Health During Dressing

1. Let them help.
   “Mika, hold your arms up high, while I pull your shirt over your head!”

2. Offer choices.
   “Josef, do you want to put your shirt on first or your pants?”

3. Practice patience.
   “Anna, these socks are tough to get on! Let’s take a few deep breaths and try again.”

4. Leave extra time.
   “William, we are going to child care soon, let’s go see what you want to wear today.”

5. Offer positive words.
   “Nice going Elena! You got your shoe on your foot!”
5 Simple Tips To Support Your Toddler’s Social Emotional Health During Meal Time

1. Let them help.
   “Hey Talia, I bet you could hold your spoon!”

2. Offer choices.
   “Derek, do you want the red cup or the blue cup?”

3. Eat together.
   “Daddy likes his rice; do you like your rice Jayden?”

4. Know when your child is hungry.
   “Maria, I see you frowning and you are getting frustrated, let’s have a snack that is good for our body.”

5. Be a role model for healthy eating.
   “Dana, let’s share this banana.”

You Are Your Child’s First Teacher!

Meal time offers an opportunity to connect and learn with your toddler. Take time to talk about the day together. Offering choices lets toddlers feel in control. Noticing cues that let you know your toddler is hungry or full—fussing, crying, etc. helps them feel understood.

Developed for the Center for Early Childhood Mental Health Consultation, Georgetown University Center for Child and Human Development with funding by the Office of Head Start/ACF, DHHS (#90YD026).
5 Simple Tips

To Support Your Toddler’s Social Emotional Health During Play Time

1. Join in!
   “Ashton, Mommy, will run with you, let’s go!”

2. Stay close by.
   “Michael, I am right here, I see you playing with trucks.”

3. Talk about what you see.
   “Mia, you are jumping up and down with a big smile! You are excited.”

4. Show her how to do new things.
   “Dalia, you can hold the bowl with this hand and then stir!”

5. Have fun and laugh together.
   “Brady, that’s so silly, you make me laugh!”

You Are Your Child’s First Teacher!

Toddlers love to learn. Your toddler learns by looking, touching and interacting with things around them. When you join in and encourage learning through play, it supports your child’s brain to grow—getting them ready for school and life! So, take time to have fun every day.

Developed for the Center for Early Childhood Mental Health Consultation, Georgetown University Center for Child and Human Development with funding by the Office of Head Start/ACF, DHHS (#90YD026).
You Are Your Child’s First Teacher!

Toddlers, need time each day to rest. Just like us! Gentle routines—doing the same thing every day, will help your toddler know what to expect and will help them ease into resting, “Shana, it’s time to pick out your stories for nap time.”

5 Simple Tips

To Support Your Toddler’s Social Emotional Health During Rest Time

1. Create a routine.
   “Abia, In ten minutes we’re going to read a book and then it’s time for bed.”

2. Use routines across settings.
   “Eden, don’t forget your cuddle bear for grandma’s house so you can have it at nap time.”

3. Offer choices.
   “Keri, what pajamas do you want to wear tonight?”

4. Take care of the basics.
   “Justin, let’s change your diaper before you rest.”

5. Take time to refuel.
   “Neal, Daddy has to take a break too so we can play again later.”
5 Simple Tips To Support Your Toddler’s Social Emotional Health During Diapering and Toileting

1. Create a routine. “Let’s sit on the potty and then we can wash our hands.”
2. Know the signs. “Tamesha, I see you pulling on your diaper, do you need to be changed?”
3. Offer choices. “Grace, do you want to talk with Daddy while you are on the potty or be by yourself?”
4. Follow your child’s lead. “Marcelo, you are upset right now, let’s try again later.”
5. Prepare for toileting. “Angela, do you want to read Once Upon a Potty?”

You Are Your Child’s First Teacher!

Your child looks to you for support and guidance as they take on new challenges. As your toddler moves from diapers to using the potty they need your patience and support as there may be many accidents along the way. Each child moves at their own pace and when you read their cues and find ways to support them, this stage can be less frustrating for everyone, “Shana nice job pulling up your pants! Thanks for trying, let’s go wash our hands.”

Developed for the Center for Early Childhood Mental Health Consultation, Georgetown University Center for Child and Human Development with funding by the Office of Head Start/ACF, DHHS (#90YD026).
Some Starters for Giving Positive Feedback and Encouragement

- “You do a dynamite job of...”
- “You have really learned how to...”
- “You must feel proud of yourself for...”
- “Excellent idea for...”
- “You’ve done a wonderful job at...”
- “See how _______ has improved in...”
- “You have worked so hard...”
- “Look how well s/he did at...”
- “That’s a resourceful way of...”
- “WOW!! What a fabulous job you’ve done of...”
- “That’s a cool way to...”
- “I’m so appreciative that you...”
- “It really pleases me when you...”
- “You’ve really grown up because you...”
- “You are a real problem solver for...”
- “Brilliant thinking for...”
- “Give me an EXTRA HUGE high five for...”
- “Class, I have an announcement! Let’s all give a hip, hip hooray to ______ for ______”
- “I really appreciate the way all of you have your eye on the story and are listening so carefully. It’s like you have eye-ball glue!!!”

Your favorites here...

- “
- “
- “
- “
- “
Cues
What are Cues?

Cues are a signal from one person to another to do something. They are a child’s way of telling you what he or she wants, even without using words.¹

Why are Cues Important?

- Noticing cues and responding to meet a child’s needs:
  - Contributes to healthy attachment.
  - Teaches children how to regulate their own emotions, trust others, and build healthy relationships.
  - Promotes security by helping children feel cared for and understood.
  - Helps children feel safe enough to explore and learn about their world.
  - Makes caregiving easier and more rewarding.
What Can Be Done?

- Practice learning to understand what children are telling you through their signals.

**Engagement cues** encourage people to be with, pay attention to, or play with a child.¹

- Smiling
- Vocalizing
- Making eye contact with caregiver
- Reaching out to caregiver
- Turning eyes or head toward caregiver
- Lip smacking and other feeding sounds

**Disengagement cues** signal the need for a break or rest, which may be long or short.¹

- Crying or fussing
- Turning head and/or body away from caregiver
- Squirming or kicking
- Back arching or pulling away
- Coughing, choking, spitting up or vomiting
- Falling asleep

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¹ Adapted from “Nursing Child Assessment” (from satellite training, University of Washington, Seattle, 1990.)

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**MORE INFORMATION**

*Understanding Your Child’s Behavior: Reading Your Child’s Cues from Birth to Age 2*

From the Center on the Social and Emotional Foundations for Early Learning.

*Baby Talk: Nonverbal Infant Communication*

From Psychology Today.
Understanding Your Child’s Behavior:
Reading Your Child’s Cues from Birth to Age 2

Does this Sound Familiar?

Jayden, age 9 months, has been happily putting cereal pieces into his mouth. He pauses for a moment and then uses his hands to scatter the food across his high chair tray. He catches his father’s eye, gives him a big smile, and drops a piece of cereal on the floor. When his father picks it up, Jayden kicks his legs, waves his arms, and laughs. He throws another piece of cereal. His dad smiles and says, “Jayden, it looks like you are all done eating. Is that right?” He picks Jayden up and says, “How about we throw a ball instead of your food, okay?”
Naomi, age 30 months, is happily playing with her blocks. All of a sudden, her mother looks at the clock, gasps, and says, “Naomi, I lost track of time! We need to go meet your brother at the school bus! Let’s go.” She scoops Naomi up and rushes toward the kitchen door. Naomi shouts, “NO!” and tries to slide out of her mother’s arms to run back to her blocks. When her mother puts on Naomi’s sneakers, she kicks them off, slaps her mother’s hands, and repeats, “No! I STAY! I playing blocks!” Naomi’s mother sighs with frustration and buckles her into the stroller with no shoes. This sets off another round of protests: “My SHOES! Where my SHOES?” Naomi pulls at her stroller’s buckle, trying to unfasten it, and kicks, screams, and cries all the way to the bus stop.

The Focus

Babies and toddlers might just be learning to talk—but they have many other ways to tell parents how they are feeling! Children can experience the same emotions that adults do, but they express those feelings differently. Jayden is giving his father many clues that he is done eating. First, he begins to play by sweeping the food across his tray. Then he drops food on the floor in an attempt to get his Dad to play the “I Drop It, You Get It” game. Jayden’s father notices and responds to these “cues,” by calling an end to mealtme and giving Jayden a chance to play. Naomi is also very clear about her feelings. She doesn’t like having to make a transition from a fun activity (blocks) so quickly. She is giving her mother many “cues” too—her words, facial expressions, and actions are all saying, “This transition was too quick for me. I was having fun and I can’t move on so quickly.”

Children’s behavior has meaning—it’s just that adults don’t always understand what the meaning is. In the early years, before children have strong language skills, it can be especially hard to understand what a baby or toddler is trying to communicate. This resource will help you better understand your child’s behavior cues and help you respond in ways that support his or her healthy social and communication development.

What to Expect: Communication Skills

Birth to 12 Months

Did you know that crying is really just a baby’s way of trying to tell you something? Your baby’s cry can mean many different things, including, “I’m tired,” “I don’t know how to settle myself,” “I’m in pain or discomfort,” or “I want the toy you just picked up.”

In the first year, babies will gradually begin to use gestures and sounds to communicate. But many parents find the first 12 months one of the most difficult times to understand the meaning of their babies’ behaviors. Below are some common ways babies communicate. With time, you will figure out your baby’s unique way of communicating.

Sounds: Crying is your baby’s primary communication tool. You might find that your baby uses different cries for hunger, discomfort (like a wet diaper), or pain (like a tummy ache). Paying attention to the sounds of these cries helps you make a good guess about what your baby is trying to communicate.

Language: Right around the one-year mark (for some babies earlier, and for some babies later), your baby will say his or her first word. While at first your child’s language skills will seem to grow slowly, right around the two-year mark they will really take off!

Facial Expressions: The meaning of a smile is easy to understand. But you will also get to know your baby’s questioning or curious face, along with expressions of frustration,
pleasure, excitement, boredom, and more. Remember, babies experience the same basic emotions we do: happiness, sadness, curiosity, anxiety, frustration, excitement, and so on.

**Gaze:** Look where your baby is looking and it will tell you a lot about what he or she is thinking. An overstimulated or tired baby will often break eye contact with you and look away. A baby who wants to play will have a bright gaze focused right on you or the toy she is interested in!

**Gestures:** Babies use their bodies in many ways to communicate. They reach for people and objects, pick objects up, sweep objects away with their hands, wave their arms and kick their feet, and point (just to name a few). Babies will also turn away from sounds they don’t like or arch backwards if they are upset.

**Putting It Together**

Babies use their whole body to communicate. So, for example, a baby might focus a bright, clear gaze on a new toy, and then look to you, then back at the toy. She might kick her legs or swing her arms excitedly. The baby might then reach for the toy while making excited “eh eh!” sounds and smiling. While babies don’t think in words yet, the message this baby is sending might be, “What is that thing? I want to see it. Can you give it to me? It looks like fun!”

Or imagine a baby who is happily playing with an older cousin. The cousin is puffing out his cheeks and then letting the air out, making a loud whooshing sound. The baby is laughing, kicking, and waving his arms. All of a sudden, though, the baby’s response changes. He looks away and his expression turns to one of distress. He kicks his legs and arches his back. He starts to cry. The message this baby is sending might be, “That was fun for a while. But now it’s too much. I need a break.”

**Facial Expressions and Gaze:**

Toddlers make some of the best expressions ever, so keep your camera handy during this second year of life. You can see delight, curiosity, jealousy, and other strong emotions play across their faces.

**12 Months to 24 Months**

In the second year, young toddlers are becoming more skilled at communicating their needs and desires to you. Here are more examples of how young toddlers’ communication skills are growing and changing from 12 to 24 months.

**Sounds and Language:** Your young toddler’s vocabulary is growing slowly but steadily across his or her second year of life. Pronunciation might not be perfect, like “muh” for milk, but that will come with time. Your toddler also understands more words than ever before. In fact, he probably understands more words than he can actually say! For example, if you ask him to touch his nose, chances are, he will be able to do so.

Even as your toddler’s language skills are growing, cries are still the main way to communicate strong emotions like anger, frustration, sadness, or feeling overwhelmed. You might also see your toddler squeal with laughter and scream in delighted glee when he is too excited for words!

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Your toddler also watches your reactions to make sense of new situations (I am not sure I want Uncle Joe to hold me. I am going to check your face to see if you think he is okay or not.) Often you will find that your child mirrors your own expressions and gestures—if you take a bite of broccoli and crinkle your nose, chances are good that your toddler will too.

**Gestures:** Young toddlers are more talented than ever at using their bodies to communicate. They can walk, run, point, take your hand, show you things, carry and move objects, climb, open and shut things, and more. Watching your toddler’s body language and gestures will give you lots of information about what she is thinking about, what she wants, or what she is feeling.

**Putting It Together**

Over time, it becomes easier to understand your child’s cues and messages. Young toddlers are skilled at using their bodies, expressions, and growing language skills to communicate their needs more clearly than ever before. A 14-month-old might creep over to the book basket, choose a favorite story, creep back to her uncle, and tap the book on his leg while saying, “Buh.” A 20-month-old might pick up her sandals and then walk to the back door, turn to her grandmother and say, “Go park.” These interactions are really an amazing developmental leap for toddlers! They are now able to hold an idea in their minds (“I want to read a book and not just any book, this book”) and understand how to communicate that idea to the people who can make it happen.

**Three Steps to Understanding Your Baby’s or Toddler’s Behavior**

When you see a behavior you don’t understand, think about these “clues” to try to figure out what the behavior means for your child. Remember, every child is different. The same behavior (for example, a baby who is arching her back while being held) can mean that one baby is tired and that another baby wants to be put down so she can stretch out and play. Getting to know your child’s unique cues is an important way that you can show your child that you love and understand him or her.

**Step 1:** Observe and interpret your child’s behavior:

- Notice the sounds (or words) your baby or toddler is using. Does your child sound happy, sad, frustrated, bored, or hungry? When have you heard his cry or sound before?
- What is your child’s facial expression? What feelings are you seeing on your child’s face? Is your baby looking at a new object with interest? Perhaps he is trying to say, “Hand that to me so I can touch it.”
- Notice your child’s gaze. Is your baby holding eye contact with you or has she looked away? (That is usually a sign that a baby needs a break.) Is your toddler holding your gaze? Perhaps she is trying to get your attention or wants to see how you are reacting to a new situation.
- What gestures or movements is your child using? Is your baby rubbing her eyes and pulling on her ear when you try to hold her? She might feel sleepy and be ready for a nap. An older toddler who is on the verge of beginning potty training might start to hide behind a chair or go into a closet to have a bowel movement.
- Think about what’s going on when you see a behavior you don’t understand. Does this behavior happen at a certain time of day (like at child care drop-off or bedtime)? Does this behavior tend to happen in a certain place (like the brightly lit, noisy mall)? Does the behavior happen in a particular situation (like when your child must cope with many other children at one time, like at the playground)?
Step 2: Respond to your baby or toddler based on what you think the meaning of his or her behavior is. It’s okay if you are not sure if your guess is right. Just try something. Remember, you can always try again. For example, if your 11-month-old is pointing toward the window, lift him up so he can see outside. Even though you might discover he was really pointing to a spider on the wall, the very fact that you tried to understand and respond lets him know that his communications are important to you. This motivates him to keep trying to connect with you. When you respond to your child, say out loud what you think his behavior might mean. For example, you might say to the toddler you pick up, “Are you saying that you want up? I can pick you up.” By using language to describe what the child is communicating, you will be teaching your child the meaning of words.

Step 3: If your first try didn’t work, try again. Trying different techniques increases the chances that you will figure out the meaning of your child’s behavior, understand his needs, and validate his feelings. If your four-month-old is crying but refuses a bottle, try changing her position—picking up and rocking putting her down.

Step 4: Remember that tantrums are a communication, too. A tantrum usually means that your child is not able to calm himself down. Tantrums are no fun for anyone. They feel overwhelming and even scary for young children. For adults, it is easy to get upset when you see upsetting behavior. But what frequently happens is that when you get really upset, your child’s tantrum gets even bigger. Although it can be difficult, when you are able to stay calm during these intense moments, it often helps your child calm down, too.

Another strategy to try when you child is “losing it” is to re-state how your child seems to be feeling, while reflecting her strong emotions. You might say in a very excited voice, “You are telling me that you just cannot wait for the birthday party! It is just tooooo hard for you to wait! You want to go the party right now!” For some children, having you “mirror” their intense feelings lets them know that you understand them and take them seriously, which helps them calm down. Experiment to see which response works best to calm your child.

Remember: You can’t always understand what your child is trying to communicate. Even in adult relationships, we sometimes find ourselves wondering about the meaning of another person’s behavior. But these moments—when your child is distressed and you can’t figure out why—can be very stressful for parents. If you feel as though you really cannot handle your baby or toddler in the moment, it’s okay to put him or her somewhere safe (like a crib) and take a few minutes for yourself. Taking care of you is important. You will make better parenting choices and be able to meet your child’s needs more effectively if you are feeling calm and together.

Wrapping Up

Babies and toddlers experience and express thoughts and feelings. Often they communicate their strong feelings through behaviors that adults understand right away—like a baby’s big toothless grin when she sees her grandma coming. Other times, very young children’s behavior can be confusing or even frustrating to the adults who care for them. Being able to stay calm, make a good guess at what the behavior might mean, and then respond helps children understand that they are powerful communicators. Over the long-term, this helps children learn how to connect with others in ways that are healthy and respectful—a skill they’ll use for life.
Baby Talk: Nonverbal Infant Communication

Learning how to understand your baby without words

Robert T Muller Ph.D.
November 22, 2013
Psychology Today’s “Talking About Trauma”

It would be hard to imagine living in a world in which you couldn’t use language to communicate basic wants and desires to others. And yet, babies very much find themselves in that position prior to acquiring verbal skills.

Babies actively communicate. But they must use nonverbal cues to interact with caregivers. How these cues are read by caregivers is an integral part of the all-important attachment relationship and infant development.

Elisabeth Robson, a Family and Child Therapist who specializes in infant, child, and family treatments, implements “Baby Cues” into her work with parents. “Baby Cues: A Child’s First Language” is a child development program designed through NCAST (Nursing Child Assessment Satellite Training) to help parents/caregivers respond and interact more sensitively with their babies. “Baby Cues” is based on research done by nursing professor, Dr. Kathryn Barnard, founder of the Center on Infant Mental Health and Development at the University of Washington.

Robson states that knowing how to read nonverbal cues is essential because “infants, toddlers, and even young children who are developing language, but still cannot express their feelings, needs, or wants the way we as adults can, use nonverbal communication to be understood.” Because infants do not have verbal skills, nonverbal cues are all they have to communicate during that early period of their development.

According to Barnard, there are two types of nonverbal cues used by infants and toddlers: engagement and disengagement cues. When a child expresses herself using engagement cues, a parent may find it a good time for talking, teaching, playing, or feeding the child. In other words, the child is willing to interact with the parent. However, when displaying disengagement cues, the child usually tries to communicate a need for a break in whatever they are doing (whether it’s eating, playing, or listening).

Each type of cue may be expressed in either a subtle or potent manner. Potent engagement cues include smiling, babbling, and reaching toward caregiver. Subtle engagement cues are more difficult to notice and may include brow raising, eyes wide and bright, facial brightening, and open hands.

Disengagement cues, which are also expressed subtly and potently, occur more frequently. While potent disengagement cues are quite clear and include crawling away, crying, or falling asleep, subtle disengagement cues may provide a greater challenge for caregivers. They are often difficult to detect and include things such as fast breathing, hand behind head, hand to ear, leg kicking, and lip compression. Robson explains, “some of the cues are more subtle and may seem arbitrary and that’s why parents sometimes miss them.”

In considering the relationship between the cues and parent-child interaction, Robson suggests that...
“noticing baby cues is very important for attachment.” It contributes to an environment in which the child feels safe and secure, and also to the development of a realization that they’re being taken care of and being understood. We see that constant failures to read the infants’ cues have direct impact on attachment.

Robson adds that “we all need to disengage from things, and the idea of disengagement is not that they are having a bad experience with what they’re doing, it just means that they need a change or want to do something different.” According to Barnard, since infants can only take in a certain amount of information before needing a break from the interaction, caregivers who allow the infant to pause and then wait until the infant is ready to become engaged again, have longer and more attuned interactions with the infant.

So, what happens to the relationship between parent and child if the parent cannot read disengagement cues? Robson states that when parents repeatedly miss their children’s cues, this may lead to “distress” or “the child may learn that the parent can’t read their cues and they need to try a different strategy. In extreme cases, the child may even give up and stop trying.”

However, Robson notes reassuringly, “kids are very resilient and will try for a very long time to have their needs identified. If it’s a subtle disengagement cue the parent is missing, the child is going to move on to a more potent cue that, hopefully, the parent will pick up on.”

A common reason why parents may miss their infant’s cues is attributed to parental trauma. Robson suggests that a parent who experienced trauma is constantly on the lookout for danger, so their efforts are directed at keeping them and their children safe. That sometimes may get in the way of seeing what’s in front of them, so they miss subtle things with their baby because they’re constantly looking at their environment.

In a study by professors Karen Appleyard (Duke University) and Joy Ososky (Louisiana State), following trauma, parents may often become overwhelmed by anxiety and experience symptoms of depression. These two factors may greatly affect their parenting and the connection they form with their children.

Robson believes that an emphasis on nonverbal communication should be an integral part of the therapeutic intervention offered to struggling parents. It is helpful when parents become aware of the positive things that they do and how well they are able read their babies’ cues once they do notice. Robson adds that helping parents develop insight as to what their child might be thinking and feeling, so that they begin to think of their child as a separate person who needs things from them, has provided encouraging results.

Overall, we can remain optimistic about parents’ ability to improve the interaction with their children even when they previously haven’t had that much success in reading non-verbal cues. Since relationships are not static, such difficulties are repairable, especially with young children. Robson states that “if a parent becomes more attuned to what the child needs, it has a positive effect on the relationship, and when that becomes consistent over time, there is a positive effect on attachment.”

—Chief Editor: Robert T. Muller, The Trauma & Mental Health Report http://trauma.blog.yorku.ca/
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Emotions
What are Emotions?

Emotions are mental reactions (such as anger or fear) marked by strong feelings and usually causing physical effects.¹

Why are Emotions Important?

- Feelings and emotions:
  - Drive behavior, especially in young children.
  - Can be confusing.
  - Are stored in the body; when they are blocked rather than expressed, they can damage health.
  - Can signal danger, and are meant to be protective. However, children who have experienced traumatic things may perceive danger in situations where none exists, leading them to respond inappropriately.
  - Can trigger survival behaviors (fight, flight, freeze) more frequently in children who have experience with trauma, due to their tendency to be on the lookout for danger.
  - When safety, stability, and nurturance are lacking, children often begin to misunderstand the emotions of others. Emotional cues signaled by others are frequently misinterpreted, leading children to respond in ways that are viewed as inappropriate by those around them. (For example, a teacher may be slightly irritated with something completely unrelated to a child, but that child interprets the teacher’s cues as anger towards him/herself.)

- Sharing feelings is sometimes viewed as unsafe or unacceptable, especially for children who have experienced trauma.

- Social and emotional competence is the single most important predictor of how children will adjust to life as adults.

What Can Be Done?

- Help children identify and name what they are feeling.
  - Practice makes perfect—give children lots of opportunities to identify feelings in themselves and others.
- Encourage children to talk about their feelings.
- Be a role model. Talk to someone you trust about your own feelings.
- Accept children’s feelings, whatever they are.
- Teach children that emotions are not good or bad, they just are. Help them learn that it’s ok to feel whatever they feel.
- Help children think about how to respond to feelings, conflicts, and problems in healthy and respectful ways. One way to do this is by asking them:
  - What can you do?
  - Who can you talk to?
  - How do you calm yourself down when you feel upset?

MORE INFORMATION

Teaching Your Child About Feelings from Birth to Age 2
From the Center on the Social and Emotional Foundations for Early Learning.

Emotions Vocabulary Chart
From the FASD London Region Assessment Clinic.

Gingerbread Cut-Outs with Instructions
Does This Sound Familiar?

Damon (6 months) and his sister Karena (20 months) have arrived at their grandmother’s house for the day. Even though this has been the morning routine for a few months now, Damon cries and cries when his mother leaves. He is almost inconsolable, and it takes a great amount of time and comforting for him to calm down. Meanwhile, Karena is pulling on her Granny’s arm. She wants to play with her doll stroller but it is in the closet and she can’t turn the knob. She is not happy about waiting for her grandmother’s attention. Karena swats her little brother, stamps her feet, and pulls on the doorknob with all her might.

What would you do if this happened in your home? Would you be feeling a little frustrated with one or maybe even both children? Or would you be able to hang on to that little piece of calm inside yourself and find the strength to soothe both your little ones?

The Focus

Young children experience many of the same emotions adults do. Children can feel angry, jealous, excited, sad, silly, frustrated, happy, and worried. The difference is that very young children—ages birth to 3—often lack the self-control and language skills to express their strong feelings in ways that adults find acceptable. Instead, babies and toddlers communicate strong emotions through their sounds and actions. For example, Damon cried to show how difficult it was saying good-bye to his mother. Big sister Karena used her body—swatting, stamping, and yanking—to show her frustration with waiting and her desire for the doll stroller.
Sometimes it is hard to imagine that very young babies are actively learning all the time, especially when they seem to spend most of their time sleeping, spitting up, or dropping strained carrots off the side of the high chair. However, these early years are a critical time of learning for babies and toddlers. They are developing a foundation of social-emotional skills that they will build on for the rest of their lives. Here is a table that highlights the social-emotional skills your child is learning and practicing at different ages. You can use this information to track how your child is growing and changing from birth to age 3.

<table>
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<th>Developmental Goal</th>
<th>Age Range</th>
<th>What’s Happening?</th>
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| **Stage One:** Being Calm and Interested in All the Sensations of the World | Approximately birth to 3 months | Your baby is:  
• learning how to be calm, how to accept soothing and comfort from a loved caregiver.  
• learning to feel secure and interested in the world around him.  
• trying to organize the information he is receiving from his senses. |
| **Stage Two:** Falling in Love | Approximately 2 to 10 months | Your baby is:  
• becoming more focused on parents and other persons and things outside herself.  
• expressing emotional reactions of her own (e.g., smiles and frowns).  
• expressing pleasure in others’ company. |
| **Stage Three:** Becoming a Two-Way Communicator | Approximately 3 to 10 months | Your baby is:  
• purposefully using gestures (facial expressions, actions, and sounds) to communicate.  
• responding to others’ gestures with gestures of his own.  
• realizing that he can use sounds and gestures to get his needs met by loved caregivers. |
| **Stage Four:** Learning to Solve Problems and Discovering a Sense of Self | Approximately 9 to 18 months | Your baby is:  
• learning to solve problems, like how to stack blocks in a tower.  
• communicating in increasingly complex ways, using language, expressions, and gestures.  
• learning what to expect from others, based on interactions and experiences with parents and caregivers.  
• developing a sense of self. |
| **Stage Five:** Creating Ideas | Approximately 16 to 36 months | Your toddler is:  
• becoming skilled in symbolic thought (e.g., labeling images with words: “Cookie!”).  
• using verbal means to communicate needs and desires.  
• engaging in pretend play.  
• learning to recognize and communicate her feelings.  
• learning to understand others’ feelings. |

(Greenspan 1999)
From birth to age 2, parents and caregivers have a big part to play in helping children learn about feelings. The most important thing they can do is meet their babies’ needs, love and nurture them, and comfort them when they are upset. This type of responsive care helps very young children build a strong, loving relationship with the adults who care for them. Feeling safe and secure, loved and nurtured, is the biggest and most important ingredient for a child’s healthy social-emotional development.

There are other things that you can do to help your baby or young toddler begin to learn about feelings and how to express them. These are all good habits to develop while your child is young so that they become part of your everyday interactions and routines.

• **Think about your child’s temperament**, or the way in which she approaches and reacts to the world. Temperament influences how intensely your child experiences feelings (like frustration or anger) and how easily she can calm down. A child who has strong feelings and reactions might have a harder time learning to control her emotions. Strong feelings probably feel even bigger and more overwhelming to her. On the other hand, a child who is easy going and allows changes or disruptions to “roll off her back” will probably have an easier time. Think about your own temperament. There is no “right” or “wrong” way to be. But paying attention to your own and your child’s temperament gives you important information about each of your preferences. You can learn how to adjust or match your caregiving to meet your child’s needs and help her grow and learn.

• **Talk about feelings.** At first, babies and young toddlers will probably not understand when you say, “I can see you are angry because Jessie knocked your blocks over” or “You are so sad that your balloon flew away.” It might even feel a little silly to talk to a tiny baby about his feelings. But this is an important part of helping your child learn to identify and describe his emotions. When you use feeling words over and over as your child grows, he will eventually come to understand what you mean. As your child’s language skills develop, he will start to use these words on his own.

• **Be a role model for expressing strong feelings in healthy ways:** “I just spilled your cup of juice all over the floor! I am feeling really frustrated. I think I am just going to close my eyes and count to five before I clean up.” Through your words and actions, you can show your child how to manage strong feelings and recover. And when you are having a hard time, it’s okay to make sure your children are in a safe place and give yourself a couple of minutes to calm down. You are modeling self-control and showing that sometimes you need a break, too.

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**Practice Makes Perfect**

Children from birth to age 2 are learning a lot about relationships, feelings, soothing, and self-control. Here are some activities and strategies you can use with your child to help him or her begin to understand these big ideas:

**From Birth to 18 Months**

- **Keep your baby close.** Put on some of your favorite music, pick up your baby, and gently sway to the beat. Gaze into your baby’s eyes, smile at her, and hold her next to your body. Leave the infant carrier in the car sometimes and hold your baby instead as you walk through the mall or visit a friend. Cuddle and nuzzle your baby during some one-on-one time before bed. Shared moments like these help build a strong bond between the two of you.

- **Read or tell stories about feelings.** Choose books with brightly colored illustrations or pictures and not too much text. Stories help your baby begin to understand emotions like frustration, anger, pride, and joy. As you read, point to the faces in the book and say, “She looks excited. He looks surprised.” As your child grows, you can ask: “Who is sad on this page?” When he is able to talk, you can ask, “How is that baby feeling?”

- **Make baby-safe puppets.** Cut some pictures of babies and adults from magazines or catalogs. Choose pictures that show a range of emotions. You can also use family photos. Glue these to sturdy cardboard. If you’d like, you can cover them in clear contact paper so your baby can drool on them! Let your baby choose a face to look at. Let her look at the picture for as long as she’d like. Talk about the picture as your baby gazes at it: “That baby is crying. He is sad.” Or, “That baby is laughing. He is happy to play with his puppy.”

- **Play peek-a-boo.** Beginning at about 6 to 9 months, babies really enjoy peek-a-boo. Label your baby’s feelings as you play: “Uh oh, where’s Mommy? Here I am—Peek-a-boo! Are you surprised? Are you happy to find Mommy?” Games like peek-a-boo are also ways you can practice separations, reassuring your child that “I might go away, but I come back.”
- **Look in the mirror.** Babies don’t really know it’s them in the mirror until they are about 2 years old. But you can help them become familiar with their own faces by making baby-safe mirrors part of your play. As the two of you look at your reflections, point to your smile and say, “I am so happy. I am happy because I love being here with you!”

- **Watch to see how your child responds to sounds and textures.** Use different sounds (rattles, toy pianos, shakers) and textures (towel, blanket, a square of lace, a piece of sandpaper, etc.) during playtime with your baby. Watch how your child responds. What does he like? Dislike? How much stimulation is too much for him? How do you know when your baby has had enough playtime (does he cry, look away, fall asleep, etc.)? Information like this helps you understand his needs and make him feel safe and comfortable.

- **Help your child recover when feelings get overwhelming.** How does your child like to be soothed? You can try swaddling, or snugly wrapping your baby in a blanket. Giving your baby a pacifier to suck, rocking, and singing can also help soothe little ones. For children over age 1, a cuddly stuffed animal or special blanket can comfort and calm them. Does your toddler need time alone to calm down? A firm hug or cuddle time, a change of scenery, a chance to jump up and down, or some physical play can also help toddlers recover. When you help soothe your young child, you are not “spoiling.” Instead, you are teaching your child that she can depend on you. Children are also learning what to do to make themselves feel better when they get overwhelmed—a lifelong skill.

- **Know that your baby senses how you are feeling.** Research has shown that babies watch their loved ones very closely and respond to the feelings of the people around them. They know when you are upset, angry, stressed, or worried, even when you are trying very hard to hide it. They can feel your arms holding them differently when you are stressed and they are able to recognize that although you are smiling, your eyes are sad. So it’s very important to take care of yourself so that you can take good care of your baby and help him feel safe, secure, and loved.

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**From 18 Months to 2 Years**

- **Use pretend play as a chance to talk about feelings.** Your young toddler is just beginning to play pretend. You can help her develop this important skill by using a doll or stuffed animal in your play. Ask your child, “Doggie is sad because he fell down and got a bump. What can we do to make Doggie feel better?” This helps your child think about others’ feelings, a quality called “empathy.”

- **Make a homemade book about feelings.** Toddlers love looking at photos of you, themselves, and their friends. Snap some photos of your child when he is happy, silly, tired, excited, etc. Glue each photo to a piece of sturdy paper or cardboard. Write a feeling word under the photo, punch holes in the pages, and tie together with yarn. Let your child “read” the book to you and tell you how he is feeling in each photo.

- **Use songs to practice feeling words.** Your child’s language is just beginning to take off, so give her a fun way to practice by changing the words to songs like “When You’re Happy and You Know It.” Try adding new verses like, “When you’re angry and you know it, stomp your feet,” “When you’re sad and you know it, get a hug.” “When you’re cranky and you know it, find your Teddy,” etc.

- **Make a cozy place in your home.** Just like adults, children sometimes need time alone to calm down. Give your child a space to do this by piling up some soft cushions and blankets, and adding a few stuffed animals and favorite stories. You can even get a large moving box, cut a door, and create a toddler-size “cozy room.” Encourage your child to use this place when he is feeling overwhelmed or just wants some quiet time.

- **Suggest ways to manage strong emotions.** We often tell toddlers what not to do (e.g., “No screaming!” or “Stop hitting!”). Telling toddlers what they can do to express big feelings is even more important. When your child is really angry, suggest that she jump up and down, hit the sofa cushions, rip paper, cuddle up in a cozy area for alone time, paint an angry picture, or some other strategy that you feel is appropriate. The goal is to teach your child that any emotion is okay to feel and that she can learn to express feelings in healthy, non-hurtful ways.

- **Empathize with your child’s feelings.** Sometimes the choices your child is being offered are not the ones he wants. Because your reaction gives him a cue of how to respond, it’s best to stay matter-of-fact when you explain: “I know that..."
you do not want the doctor to give you a shot. You are feeling really worried. But the shot keeps you healthy. It will hurt a little, but not too much. And it will be over with very quickly.” This helps your child cope and, hopefully, move on.

**Help your child understand her feelings and behavior.** When you can make connections between your child’s temperament and her feelings, it helps her learn about herself. For example, you might say to a child who has a hard time moving between activities, “It’s hard for you to get ready for nap right after we finish lunch. Your body needs time to relax after playing and eating. I will help you settle down and start to feel sleepy. Let’s choose a story and get cozy.” Over time this helps your child learn to manage situations that are challenging for her.

### Teaching Feeling Words

We often think only of teaching words for common emotions like happy, sad, mad, etc. But there are many, many other feeling words that we can use to describe the range of complex emotions each of us (and our children) experience every day. Children benefit when they can help them make sense of the world around them. If an upsetting play theme continues for a while or you are worried about your child’s play, talk with your child’s health care provider, teacher or caregiver, or a child development specialist.

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<td>Interested</td>
<td>Uncomfortable</td>
<td></td>
</tr>
<tr>
<td>Confused</td>
<td>Proud</td>
<td>Stubborn</td>
<td></td>
</tr>
</tbody>
</table>

### Plan for tantrums.

Tantrums are very common in the toddler years because children are still learning—and sometimes really struggling—with managing and expressing their feelings. Tantrums are their way of saying, “I am out of control and need your help to calm down.” Rather than getting angry, too (which is easy to do, but can be scary for your child), help your child recover. Here’s what you can try:

1. Put into words how you think your child is feeling: “You are really mad. You are so frustrated!”
2. Give him a way to show his strong feelings: “Do you want to throw some pillows?”
3. Give him the support he needs (hugs, time alone, his teddy, etc.) to recover.
4. Suggest another activity to shift his energy to something positive: “Let’s play with blocks.”
5. And, as hard as it is sometimes, try to stay calm during your child’s tantrums. You teach your child self-control by staying calm when he has “lost it.” This helps him feel safe and lets him know that you’ll always be there to support him—even during the tough times.

### Offer choices.

Choices give toddlers a sense of control and can help them cope with disappointment. You might say, “It is bedtime. But you can choose whether you put pajamas on first or whether you brush teeth first.” Choices can also help children deal with angry feelings and move on. For example, during a tantrum, you might say, “I can see you need to cry right now. Would you like me to hold you or do you want to be alone?”

### Putting It All Together

Understanding feelings is an important part of a child’s social-emotional development. Babies and toddlers experience feelings just like you do, and know when you are feeling happy or down as well. When you use words to describe emotions, share in their good feelings, and comfort them when they feel sad or overwhelmed, young children are learning important social-emotional skills. This learning takes a lot of practice on their part, and a lot of patience on yours. But the time and effort are worth it. The social-emotional skills children develop in the first two years are ones they will use and build on for the rest of their lives.

Maggie is playing with her four-year-old son. He selects a truck puzzle and begins matching and placing the pieces in the holes. He has a difficult time turning a piece around so that it will match the hole and fit. Maggie tells him, “Let me help you turn it the right way.” Her son pushes her hand away and says in an agitated voice, “Let me do it.” He tries to fit the piece in again, but is unsuccessful. He screams and throws the piece across the room and then throws the puzzle at Maggie.

What would you do if this happened in your home? Would you throw in the towel and quit for the night, maybe try again tomorrow? OR would you turn it around and create a brand new lesson, about helping your child understand and talk about his emotions?
The Focus

Young children deal with many of the same emotions adults do. Children get angry, sad, frustrated, nervous, happy, or embarrassed, but they often do not have the words to talk about how they are feeling. Instead, they sometimes act out these emotions in very physical and inappropriate ways. For example, when Maggie’s son was frustrated, he threw the puzzle piece and the puzzle.

The Solution

Parents can help their children understand and express their emotions. The following strategies are some of the ways you can help your child express his feelings:

• Help your children understand their emotions by first giving the feelings names and then encouraging them to talk about how they are feeling. For example, you might say to your child, “Daddy left on a trip, you are sad. You said you want your Daddy.” By giving your child a label for her emotions, you enable your child to develop a vocabulary for talking about feelings.

• Give children lots of opportunities to identify feelings in themselves and others. For example, you might say to your child, “Riding your bike is so much fun. I see you smiling. Are you happy?” Or you might point out a situation and ask your child to reflect on what someone else may be feeling: “Joey bumped his head on the slide. How do you think Joey feels?”

• Teach your children the different ways we can deal with feelings. Let your child come up with ways she can deal with her feelings. Talk about positive and not so positive ways to express feelings. There are many strategies you can use to teach new ways to appropriately express feelings:
  • Use real-life examples or teach in the moment. For example, “You are having a difficult time putting your trike in the carport. You look frustrated. What can you do? I think you could ask for help or take a deep breath and try again. What do you want to do?”
  • Teach your child new ways to respond to feelings by discussing common situations that your child might remember or that happen frequently. For example, “Yesterday, you were angry because Joey would not let you play with his truck. You were so mad that you hit him. When you feel angry that Joey won’t let you have a turn, what should you do?”

• You can use children’s books to talk about feelings. For example, ask your child when reading a book, “What is (character in book) feeling right now? How do you know? Have you ever felt that way? What do you do when you feel that way?”

• Keep it simple, use visuals or pictures to help get your point across, and always try to relate your lesson back to something that happens in your child’s life.

• Teach your child new strategies to use when feeling emotions that may be expressed inappropriately (e.g., anger, frustration, sadness). Strategies to share with your child might include taking a deep breath when frustrated or angry, getting an adult to help resolve a conflict, asking for a turn when others won’t share, asking for a hug when sad, and finding a quiet space to calm down when distressed.

The Steps

1. Explain the feeling by using words your child can easily understand. Try to use pictures, books, or videos to help get your point across. “Look at Little Red Riding Hood’s face; she is so scared when she sees the wolf in her Grandma’s bed!”

2. Teach your child the different ways we can deal with feelings. Let your child come up with ways she can deal with her feelings. Talk about positive and not so positive ways to express feelings. There are many strategies you can use to teach new ways to appropriately express feelings:
  • Use real-life examples or teach in the moment. For example, “You are having a difficult time putting your trike in the carport. You look frustrated. What can you do? I think you could ask for help or take a deep breath and try again. What do you want to do?”
  • Teach your child new ways to respond to feelings by discussing common situations that your child might remember or that happen frequently. For example, “Yesterday, you were angry because Joey would not let you play with his truck. You were so mad that you hit him. When you feel angry that Joey won’t let you have a turn, what should you do?”
3. Praise your child the first time he tries to talk about his feelings instead of just reacting. It is **REALLY** important to let your child know exactly what she did right and how proud you are of her for talking about feelings. It should always OK to say what we are feeling. It’s how we choose to feelings and respond to things that requires special effort.

4. Support your child to talk about feelings and practice her new strategies for expressing emotions appropriately every chance you get. For example, you can talk about feelings when you are playing a game, when you are riding in the car, or when you are eating dinner. There will be all kinds of things that happen every day that will be great opportunities for you to talk about feelings. The more often your child practices, the faster your child will learn.

**WARNING** – Do not try and practice when your child is in the middle of a “meltdown.” Use quiet, calm times to teach and practice the new strategies. For example, if your child is having a “meltdown” because she does not want to wait for a cookie until after dinner, she will not be in the mood to practice expressing her frustration with words, rather than a tantrum. In this situation, you have to be deal with her emotions (e.g., “I know you really want a cookie now, but that is not an option, we are going to eat dinner in 5 minutes. You may have a cookie after dinner.”). However, you can talk with your child about the incident after she is calm and discuss the best way for expressing those emotions (“When you are frustrated that you can’t have what you want, you can tell me, but you can’t hit me or shout at me. Earlier, you wanted a cookie before dinner and you hit me. The next time you feel frustrated, you can tell me and then take a deep breath and calm down if you feel angry.”)

### Practice Makes Perfect

Here are some activities that you can do with your child to help him or her understand feelings.

Here are some activities you can do with your child to help him or her understand feelings.

Play **Make a Face** with your child. You start the game by saying, “I am going to make a face, guess what I am feeling by looking at my face.” Then, make a happy or sad face. When your child guesses the feeling word, respond by saying, “That’s right! Do you know what makes me feel that way?” Follow by describing something simple that makes you have that feeling (e.g., “Going to the park makes me happy.” “I feel sad when it rains and we can’t go to the park.”). Please note, this is not the time to discuss adult circumstances that are linked to your emotions (e.g., “When your Daddy doesn’t call me, I feel sad.”). Then say to your child, “Your turn, you make a face and I will guess what you are feeling.” Don’t be surprised if your child chooses the same emotion that you just displayed; it will take time before your child can be creative with this game. Once you guess, ask your child to name what makes him have that emotion. Keep taking turns until your child shows you that he is not interested in continuing he game.

**Tell a story** in a new way. Read a story to your child that shows characters who experience different emotions (e.g., sad, happy, scared, worried, confused, etc.). Stop on a page where the character is showing the expression. Ask your child “What do you think he is feeling?” “Why is he feeling that way?” or “Look at her face, how can you tell that she is ?” Other questions could be “Have you ever felt ___? What makes you feel that way?” or “What will happen next?” or “What should he do?” Do not pause too long on one page and only continue the discussion as long as your child shows an interest.

Make an **emotion book** with your child. An easy project to do with your child is to create a homemade book. All you need is paper, crayons or markers, and a stapler. You can make a book about one emotion and have your child fill the pages with things that make her feel that way. For example, a “Happy Book” may have pictures that you and your child draw of things that make her happy, pictures cut out of magazines that are glued on the pages, or photographs of friends and family members. Another approach is to have the book be about a variety of feeling words and do a page on each of several emotions (happy, mad, surprised, scared, irritated, proud, etc.). For children who have a lot to say about their feelings, you may want to have them tell you a sentence about what makes them feel that way.
Expressing Feelings

Sometimes children express their emotions in ways that are problematic. Your child might cry when frustrated or throw toys when angry. Here are some different ways you can teach your child to act on feelings:

- Ask for help
- Solve problems with words
- Say it, don’t do it (say “I am mad” instead of throwing toys)
- Tell a grown-up
- Take a deep breath
- Describe what you are feeling
- Think of a different way to do it
- Relax and try again
- Walk away
- Ask for a hug

Teaching Feeling Words

We often only think of teaching common emotions like happy, sad, mad, etc. But there are many other feeling words that children should learn to express, such as the following:

| Brave     | Cheerful   |
| Confused  | Bored      |
| Curious   | Surprised  |
| Disappointed | Frustrated |
| Embarrassed| Silly      |
| Excited   | Uncomfortable |
| Fantastic | Worried    |
| Friendly  | Stubborn   |
| Generous  | Shy        |
| Ignored   | Satisfied  |
| Impatient | Safe       |
| Important | Relieved   |
| Interested| Peaceful   |
| Jealous   | Overwhelmed|
| Lonely    | Loving     |
| Confused  | Tense      |
| Angry     | Calm       |

Putting it All Together

Understanding emotions is a critical part of children’s overall development. It is up to adults to teach children to understand and deal with their emotions in appropriate ways. They are experiencing so many new and exciting things for the first time. It can be overwhelming! We need to be sure we always validate our children’s emotions and don’t punish them for expressing their feelings. You might want to remind your child that, “It’s ok to tell me how you feel, but it’s not ok to hurt others or things when you feel (name feeling).” Teach them about their emotions, help them come up with new ways to deal with emotions, give them lots of time to practice their new strategies, and always remember to give lots of positive encouragement when they use the new strategy instead of reacting in the “old” way!
Feelings Charts

How Do I Use These Tools?

When we think about teaching children about words that describe feelings, what usually comes to mind are common emotions like sad, mad, glad or scared. There are many more words children can use to express the full range of emotions that we all have on a daily basis. Talking about feelings with children, helping them identify their emotions and how to express them in positive ways, helps children say what they are feeling and experiencing. Feelings Charts can be used to show children examples of facial expressions for specific emotions. They can be used to “check in” with children to help them identify how they are feeling.
This is how I feel today!

Frustrated

Embarrassed

Sad

Mad

Nervous

Happy

Proud

Scared

Loved

Lonely

Gingerbread Cut-Outs

How Do I Use This Tool?
The cut-outs on the next page can be used with children who are verbal and able to put sentences together. It can help children understand how their emotions are felt in their bodies.

Examples

When I feel ____happy____, this is how it feels in my body:

I feel like smiling
I have a ton of energy
I have happy, active feet
I want to sing
My voice may be strong

When I feel ____sad____, this is how it feels in my body:

I have very little energy
I just want to sleep
My face may frown
My voice may be soft
I may avoid eye contact
When I feel _____________________________
This is what it looks like:
I feel it in my body here:

When I feel _____________________________
This is what it looks like:
I feel it in my body here:

When I feel _____________________________
This is what it looks like:
I feel it in my body here:

When I feel _____________________________
This is what it looks like:
I feel it in my body here:
Emotional Regulation
What is Emotional Regulation?

Emotional regulation is an awareness and understanding of one’s emotions and their impact on behavior, and the ability to manage those emotions in a positive way.

Why is Emotional Regulation Important?

**Our ability to regulate emotions**
- Helps us calm down during times of high emotion and control negative urges during times of emotional distress.
- Helps prevent depression, aggression, and other emotional states or behaviors that could be dangerous to ourselves or others.
- Is important for mental health, academic achievement and positive social relationships, which are crucial skills for success in life.

*Children with healthy emotional regulation skills*
- Are able to experience, express and manage a range of emotions.
- Engage in appropriate behaviors in response to emotional situations.
- Adjust well to transitions and new situations & show a high tolerance for frustration.

*Children with poor emotional regulation skills*
- May exhibit a limited range of emotions.
- Have difficulties coping with stressful experiences, resulting in outbursts of negative emotions, aggression or ego-centric behavior dependent on age.
- Are less socially competent and are often less successful in school, where they have difficulty learning and are less productive.

What Causes Poor Emotional Regulation?

*Poor attachment*
- Requires children to fall back on crudely developed regulation strategies, since children often need the help of the adults in their lives to develop regulation skills.

*Exposure to trauma*
- Children learn to disconnect from their physical and emotional experiences when those experiences are too painful or overwhelming.
- Sharing feelings may not be safe or acceptable.
- Children may be unable to tell whether situations are safe, causing them to respond in order to keep themselves safe even when there is no real danger.
- Children become increasingly unable to build safe relationships or effectively manage their emotions.
What Can Be Done?

- Model healthy emotional regulation, practicing repair as needed when your emotions get out of control.
- Help children think about ways they can manage their emotions in situations where they might feel out of control.
- Practice regulation skills with children.
- Encourage healthy outlets for physical and emotional energy, such as exercise, creative activities or hobbies.
- Create consistency and use routines to help avoid meltdowns (see subsections on Rules, Routines, Rituals and Transitions in this toolkit).

**Practical tools for emotional regulation**

- Encourage deep breathing exercises.
- Practice Crossing the Midline activity (see explanation at right).
- Pop bubbles with only one hand.
- Play flashlight tag. In a dimmed room, have children follow your flashlight beam projected onto the wall with their own flashlight.
- Encourage babies to crawl.
- Have older children write their name in the air while rotating the opposite foot clockwise.
- Exercise...anything that gets children’s hearts pumping.

MORE INFORMATION

- **Creative relaxation ideas for kids**
  - From Zemirah Jazwierska via kidsrelaxation.com
  - All Relaxation Activities (kids)
  - Reading this in print? Go to: http://kidsrelaxation.com/?cat=9

- **Teaching kids how to belly breathe**
  - From fit web platform (WebMD and Sanford Health) Belly Breathing
  - Reading this in print? Go to: http://fit.webmd.com/jr/recharge/article/belly-breathing-activity

- **Belly Breathe with Elmo**
  - From Public Broadcasting Service (PBS) Sesame Street series via YouTube Sesame Street: Common and Colbie Caillat- “Belly Breathe” with Elmo
  - Reading this in print? Go to: http://www.youtube.com/watch?v=_mZbzDO-pyIA

- **Relaxation Thermometer with Instructions**
  - From the Center on the Social and Emotional Foundations for Early Learning
  - Relaxation Thermometer

- **Games to Help with Emotional Regulation**
Belly Breathe Lyrics by Common & Colbie Caillat

Sometimes the monster that’s inside you
Is a monster that is mad
It’s a monster who is angry
It’s a monster who feels bad.
When your monster wants to throw things
And your monster wants to shout
There’s a way to calm your monster and chill your inner monster out.

Belly breathe gonna breathe right through it
Belly breathe this is how you do it.
Belly breathe gonna breathe right through it
Belly breathe this is how you do it.

Put your hands on your tummy now you’re ready to begin
Put your hands on your belly and you slowly breathe in.

Ba ba breathe belly belly
Ba ba ba ba breathe belly belly breathe.

Feel your belly go out and in and in and out
And you start to calm down without a doubt
Feel your belly go in and out and out and in
And now Elmo feels like himself again.

Belly breathe gonna breathe right through it
Belly breathe this is how you do it.
Ba ba breathe belly belly
Ba ba ba ba breathe belly belly breathe.

Your mad monster may appear at any time and anywhere
And that mad monster will make you make a mad monster face.
He makes you want to push he makes you want to shove
There’s a way to calm that monster bring out the monster love!

Belly breathe gonna breathe right through it
Belly breathe this is how you do it.
Belly breathe gonna breathe right through it
Belly breathe this is how you do it.

Feel your belly go out and in and in and out
That’s what belly breathing is all about!
Feel your belly go in and out and out and in
And now I feel like myself again!
Belly breathe gonna breathe right through it
Belly breathe this is how you do it.
Belly belly breathe Belly belly breathe
Everybody just breathe!

Watch it on YouTube:
https://www.youtube.com/watch?v=_mZbzDOpylA
Relaxation Thermometer

Why is the Relaxation Thermometer Helpful?
Children who are experiencing strong emotions, but lack the ability to identify them (e.g. stressed, tense, calm, relaxed) may behave aggressively or in other undesirable ways to express what they are feeling. The relaxation thermometer is used to teach children how to “tune into” their emotions and then express to others, in a concrete way, how those feelings are impacting them before they act them out.

If we are able to provide a way for children to identify and share their emotions throughout the day we can help them to effectively manage themselves. Furthermore, if we can teach them the difference between “tense” (like a hard door) and “calm” (or relaxed like a sleeping puppy), then we can help them understand how to go from tense to relaxed.

How Can the Relaxation Thermometer be Used?
The relaxation thermometer can be used throughout the day as a means for children to check where they are emotionally and to help cue themselves and others as to how well they are regulating their emotions.

The bottom of the thermometer is the blue (or cool) section and feelings in this section could be “happy” or “relaxed.” The thermometer then goes all the way up to “angry” or “stressed out,” which is the red (or hot) section.

The relaxation thermometer should be explained to children after they have been taught how to recognize and “name” their emotions—possibly after being taught about Gingerbread Cutouts or being show Emotion Charts, both are in the Emotions section of this toolkit.

Examples of how to explain the thermometer could be: “When you feel loose like spaghetti, where are you on the thermometer?” Answer: blue end. “When you are so mad that you feel like you are going to blow your top, where are you on the thermometer?” Answer: red end. Children should be encouraged to identify terminology that works for them such as referring to the red end as, ‘danger zone’ ‘hot button’ ‘code red,’ etc.

You can then have a child describe a recent conflict that led to an angry outburst. As the child describes what happened, you can write down words that describe the child’s thoughts, words and actions that paint a pattern of increasing anger. You can then show the child where he/she was on the thermometer at each step along the way. The child can then be shown ways to help regulate emotions.

Work with the child to develop a calming plan and practice it together, inviting him/her to point to where he/she is on the thermometer before and after practicing calming techniques.
Relaxation Thermometer

Take 3 deep breaths
1...2...3

Mad

Relaxed
Games to Help with Emotional Regulation

Games that help children follow a leader can help them to practice how to calm themselves and manage their emotions. Ending the games with gentle, relaxed, and slow movements allow them to practice those self-regulation skills that permit them to transition from excitement to calm.

1. Mirror, Mirror On The Wall
While facing children, ask them to move the same way as the leader. Vary tempo and move body parts such as arms, face, hands, legs, etc. Each child takes turns being the leader.

2. Red Light! Green Light!
Have children face you from across the room or yard. Ask them to do something (run, walk, jump, move arms, etc.). Yell out green light which means go and red light which means stop. When the children stop they should freeze in whatever position they were in when the direction was given.

3. Mother May I?
The leader gives an instruction to the children to do something (e.g. Take 3 steps backwards). They must say “Mother may I?” before responding to the command. If the children forget they must return to the starting line. Vary the speed and intensity of different movements.

4. Drummer
Sitting in a circle have the leader start a hand clap rhythm or beat a pattern on the floor or table. Vary the speed, volume and clapping surface (e.g.: clap hands 3 slow loud beats followed by 2 fast quieter beats and then bang hands on table for 3 tapping sounds). The children copy the leader.
Rules

What are Rules?
A rule is a prescribed guide for conduct or action.¹

Why are Rules Important?
- When used appropriately, rules provide a sense of predictability and consistency for children, thereby promoting physical and emotional safety.
- Rules help guide actions toward desired results.

What Can Be Done?

- Prioritize and establish a few rules that are the most important. It is best to have only three or four rules. More than that can overwhelm children, setting them up for failure.
- Involve family members in setting rules. This helps obtain buy-in, increasing the likelihood of success.
- Make sure the rules are clear, and that they address what they are intended to address. If they do not, brainstorm together how they can be clarified or changed.
- Make sure children understand exceptions to the rules (such as if safety needs to come first).
- Make the rules positive and action-oriented. Save “don’t” for specific safety situations. For example, “Treat each other with respect,” rather than, “Don’t fight, don’t hit, don’t push”.
- Rules should grow with the child. Change them as needed to meet the needs of the child and the current situation.
- Be consistent.
- Focus on success...create rules to help children succeed.
Routines

What are Routines?
A routine is a pattern for an activity that is followed the same way each time the activity is done.

Why are Routines Important?
Routines:
- Are helpful for emotional regulation during times of transition between activities or when things are different.
- Provide predictability about what will happen next, helping build safety and security.
- Help children feel safe to explore their world and express themselves.
- Reduce power struggles while teaching positive, responsible behavior.
- Support social skills.
- Help teach self-control.
- Encourage memory and the development of early organizational skills.
- Strengthen the connections between brain cells.
What Can Be Done?

- Maintain routines as much as possible in all situations. For example, keep bedtime routines when spending the night away from home.

- Offer positive words when children follow routines or get through a change calmly.

- Have only two or three consistent caregivers for children.

- Use routines for bedtime, nap time and meal times.

- Spend some quiet time with children each day. Consider reading, crafts, quiet play, or baking together.

- Create predictability by being consistent. Explain to children what the rules and consequences are, and then follow through.

Routines work well for discipline too.

- Correction works best when it is:
  - Predictable.
  - Consistent.
  - Developmentally appropriate (considering the child’s age, stage of development and individual needs).
  - Solution focused.

- Never discipline children in anger.

MORE INFORMATION

Teaching Your Child To Become Independent with Daily Routines
From the Center on the Social and Emotional Foundations for Early Learning.

Creating Routines
Does this Sound Familiar?

Nadine is a single mom with two young children ages 3 and 5. Her children attend preschool while she is working. When they all get home at the end of the day, Nadine is exhausted but still has household chores to complete (i.e., making dinner, doing laundry, straightening the house, etc.). In addition, she has to help the children with bathing, getting ready for bed, and brushing their teeth. She wishes that her children would start doing some of their daily self-help routines independently. The preschool teacher has said that the 5-year-old is very helpful and independent. But at home, neither of the children will get dressed and undressed independently, and they complain and whine when asked to wash their hands, brush their teeth, or help with the
bathtime routine. When Nadine asks the children to do one of these self-help tasks, they run around the house or whine and drop to the ground. It takes every ounce of energy Nadine has to get through the evening. Often she finds herself yelling at the children and physically helping them through the entire routine, just to get it done.

The Focus

Young children can learn how to do simple daily self-help activities—they just need to be taught what to do. When teaching a child to do self-care skills, you first need to know what you can typically expect of a young child, your child’s skill level, and how to provide clear and simple instructions about how to do a task. In addition, providing children with ample encouragement that is both positive and specific will help promote their success. Children can learn, at a very young age, how to independently wash their hands, brush their teeth, and get undressed and dressed. The information below will help you understand what you can expect from your preschooler and tips for helping your child learn how to become more independent with daily routines.

What to Expect

Children who are 8 to 18 months old often can:
• Drink from a cup, pick up finger food, and begin to use a spoon
• Help undress and dress, put foot in shoe and arm in sleeve
• Point to body parts
• Have strong feelings and begin saying “no”
• Reach for/point to choices
• Feel a sense of security with routines and expectations (e.g., at bedtime)
• Imitate sounds and movement
• Understand more than they can say

Children who are 18 to 36 months old often can do all of the above and:
• Wash hands with help
• Drink from a straw
• Put clothes in the hamper when asked
• Feed self with spoon
• Push and pull toys; fill and dump containers
• Learn to use the toilet
• Bend over without falling
• Imitate simple actions
• Become easily frustrated
• Enjoy trying to do tasks on their own (note that this is why tasks may now take more time to complete)

Children who are 3 often can:
• Help with brushing teeth
• Understand “now,” “soon,” and “later”
• Put dirty clothes in the hamper independently
• Get shoes from the closet
• Put on shoes without ties
• Enjoy singing easy songs
• Listen more attentively
• At times, prefer one parent over the other
• Enjoy playing house
• Imitate
• Match like objects
• Put non-breakable dishes in the sink
• Put trash in the trash can
• Wash body with help
• Wash and dry hands, though they may need some help reaching

Children who are 4 often can:
• Use a spoon, fork, and dinner knife
• Dress without help, except with fasteners/buttons
• Learn new words quickly
• Recognize stop signs and their own name in print
• Follow two-step directions that are unrelated
Teaching Your Child to Independently Complete Daily Routines

Young children like to feel independent, but sometimes they need a parent’s encouragement to feel that they are capable and that adults believe that they “can” do it. Teaching independence with self-help skills like hand washing, brushing teeth, and dressing/undressing is an important step in development that can be achieved when children are taught how to do each step independently. Initially, it takes an adult’s focused attention to teach children how to do these skills. Once the child learns how to do a skill independently, the adult can fade out of the routine completely.

When teaching your child independence in self-help routines (brushing teeth, hand washing, getting dressed/undressed), try these simple, yet effective, tips:

1. Begin by getting down on your child’s eye level and gaining his attention. (i.e., touch your child gently, make eye contact, physically guide, or jointly look at the same object).

2. Break down the routine into simple steps and state each step one at a time with positive and clearly stated directions. Sometimes we make the mistake of telling children what not to do or what they did wrong, such as, “Stop splashing in the water.” However, it’s more effective and clear to say, “All done washing, now it’s time to turn off the water.”

3. To clarify steps even further, you could take a photo of each step in the routine and post it where the routine takes place. For instance, with hand washing, you could post photos above the sink. As you state one step at a time, show your child the photograph to illustrate what needs to be done.

4. When teaching your child to do each step, model (i.e., demonstrate) how to do each step. After your child begins to learn the steps, you can take turns showing each other “how” to do the routine. Be prepared to provide your child with reminders about what to do. As a child first learns a skill, it’s common to forget a step and need assistance. You can simply model and say, “Look, do this,” and show how to do the step that is causing difficulty. If needed, you can gently physically guide your child in how to do the step so that he/she can feel successful.

- Understand simple clear rules
- Share and begin taking turns
- Wash self in the bathtub
- Brush teeth independently
- Wash and dry hands

Children who are 5 often can:

- Follow established rules and routines (e.g., wash hands before eating, put dirty clothes in the hamper, brush teeth before going to bed)
- Independently initiate a simple routine (e.g., dress and undress, brush teeth, wash hands, eat dinner sitting at the table, take bath with adult watching)
- Understand beginning, middle, and end
- Begin to understand others’ feelings
- Be independent with most self-care skills

Sometimes, children with disabilities may need special assistance to become more independent in doing daily routines. You might want to do the following:

- Expect your child to do only part of the routine, while you assist with the part that is difficult
- Provide help to your child so that he/she can complete the task
- Provide instructions in a different format, by modeling and/or using a picture or gesture so that your child understands what to do
- Allow extra time to complete the task

Children who are 5 often can:
5. For activities that might be difficult or not preferred, state the direction in a “first/then” phrase. For instance, “First wash hands, and then we can eat snack”; or “First brush your teeth, and then I can give you a minty fresh kiss”; or “First get dressed, and then you can choose milk or juice with breakfast.”

6. Offering children a “choice” during routines increases the likelihood that they will do the activity. With brushing teeth, you could say, “Do you want to use the mint toothpaste or the bubble gum toothpaste?”

7. It is very important that you encourage all attempts when your child is first learning how to do a routine. If you discourage or reprimand your child because it was not done quite right, his/her attempts at trying might stop. It’s important to let your child know you understand his/her feelings and then assist your child so that he/she feels successful. For example, “I know it’s hard to brush your teeth. Let me help.”

8. Encourage your child as each routine is completed and celebrate when the task is done.

Remember that young children need a lot of practice—and your support—before they are able to do new skills independently. Encourage your child as each routine is completed and celebrate when the task is done. 

Why Do Children Sometimes Become Challenging When Learning to Do Self-Help Skills on Their Own?

As children grow, they are learning all kinds of new skills that will help them become more and more independent. A child might be using challenging behavior to communicate a variety of messages. For example, your child might need help with a task, and crying results in your providing that help. Or a child might have a tantrum to communicate that the task is too difficult. Other children might have challenging behavior because they don’t want to leave a preferred activity (e.g., playing with toys) to do something that is less interesting (e.g., taking a bath). If you think you know the “message” of your child’s challenging behavior, a good strategy is to validate what the behavior seems to be saying. For example, you might say, “You are telling me that you don’t want to stop playing for your bath. But it’s time to be all done and get in the tub.”

What Can You Do When Children Refuse to Independently Do Daily Routines?

Remember, preschoolers are moving from the toddler stage, where much was done for them, to a new stage where they are becoming independent little people. Your child might need a bit of help or extra cueing when learning new skills that will build his/her ability to be more independent around everyday routines. Think about what your child needs and help him/her be successful…success builds independence! For instance, your child:

- Might want your attention because inappropriate behavior got attention in the past. Your child might refuse to listen or cooperate to gain your attention because this has worked before.
  - Remember to ignore the challenging behavior and teach calmly and clearly while guiding him/her through the task.
frustration, you might take a few deep breaths to feel calmer. First, take a deep breath in through your nose and out through your mouth several times, and then proceed with clearly stating your expectation to your child.

- Might find the routine too difficult and need some modeling or partial help.
  - First, model how to do the first step and then say, “Now you show me.” Show one step at a time, allowing time for your child to process the information and imitate what you did before moving to the next step.
  - If needed, assist your child by gently guiding him/her through the steps.
  - Praise every attempt.

- Might not understand what you are trying to get him/her to do.
  - Restate your expectation in positive terms and show him/her how, with either photo cues and/or modeling.

- Could need a warning a few minutes prior to the routine.
  - Let him/her know there are only a few more minutes of “play time” and then it’s time to _____ (i.e., wash hands, eat dinner, undress/dress, brush teeth, etc.).

- Might not have heard what you asked him/her to do.
  - Gain attention and calmly and clearly restate the direction.
  - Try pairing the verbal direction with a gesture or model.

- Might feel rushed and confused.
  - As children learn new tasks, we need to slow down the routine and expect that it might take extra time to complete.
  - If you are feeling frustrated with your child and think your child is reacting to your frustration, you might take a few deep breaths to feel calmer. First, take a deep breath in through your nose and out through your mouth several times, and then proceed with clearly stating your expectation to your child.

- Might find the routine too difficult and need some modeling or partial help.
  - First, model how to do the first step and then say, “Now you show me.” Show one step at a time, allowing time for your child to process the information and imitate what you did before moving to the next step.
  - If needed, assist your child by gently guiding him/her through the steps.
  - Praise every attempt.

- Might need encouragement and to be validated.
  - You could say, “I see you are sad. This is hard. You can do it. Let me show you how.”

It is important to try to understand your child’s point of view and feelings. This will help you respond with the most appropriate cue. Encouragement and supporting your child’s attempts will build confidence.
Creating Routines

Use of routines to guide daily activities (bed or nap times, meal times, getting ready for the day, what children should do when they arrive home from school, etc.) helps promote a sense of safety and security. Routine charts can be a helpful way to do this. Making these charts into a visual guide for children to follow helps them be more independent in following routines. By involving children in the process of creating routine charts, caregivers help them feel capable and important. For example, ask them to brainstorm everything they need to do to get ready in the morning, and then ask them to put the list in the order in which it should be done. Add to the list anything they may have forgotten, and help them arrange it in the right order if necessary.

Adding photos of children doing each step can be a fun activity to do together, and helps cue children who can’t read. Allowing the routine charts to be the boss can also cut down on the need for nagging. Instead a caregiver can ask, “What’s next on your routine chart?”

Thinking for themselves about what comes next helps strengthen children’s belief in how capable they are and promotes problem solving skills. More ideas for creating routine charts can be found in “Tips and Ideas for Making Visuals” in this toolkit’s Transitions section.
What are Rituals?
Rituals are a series of acts done in a particular situation and in the same way each time.
The difference between rituals and routines is the attitude behind the ritual. Routines are not necessarily meaningful parts of our days, and so we tend to view them as chores. Rituals, on the other hand, are viewed as more meaningful activities. Often there is a sense of purpose and/or symbolism involved in rituals. Any routine can be turned into a ritual when we are fully engaged and aware of what we are doing and why.

Why Are Rituals Important?
- Use of rituals for times of transition between activities can be a helpful way to encourage children to stay calm.
- Rituals help cue children when change will happen, thus encouraging cooperation and smooth movement between activities.
- They give children something to do during times when they have to wait, and can help the time pass more quickly.
What Can Be Done?

• Sing songs, recite rhymes or do finger plays to cue children to transitions.

• Use the same ritual to signal a new activity each time that activity is done. For example, sing the same silly hand washing song each time children wash their hands.

MORE INFORMATION

Reassuring Routines and Rituals
Read this in print? Go to: http://teacher.scholastic.com/professional/childdev/routine.htm

Songs and Chants Instructions

Songs and Chants with Words
Songs and Chants

How Do I Use This Tool?

Singing songs, reciting rhymes, or doing finger plays during times of transition helps time pass more quickly and gives children something to do while waiting for new activities to start. Playing the same music or singing the same song when it is time to start something new helps children move more easily from one activity to another. This is especially important for children who have been exposed to trauma. This section’s Songs and Chants with Words printable offers some ideas for songs and rhymes to use for this purpose.
Wiggle Your Fingers, Stomp Your Feet!
(Chant)

Wiggle your fingers in the air.

Wiggle them, wiggle them everywhere!

Stomp your feet upon the ground.

Stomp them, stomp them all around.
Now sit down and cross your feet.

Hands in lap and nice and neat.

Now we are ready to start our day,

We’ll listen first, and then we’ll play.
Do You Know What Time it Is?
(Tune—Muffin Man)

Do you know what time it is, what time it is, what time it is?

Do you know what time it is?

It’s ______________ o’clock in the (morning, afternoon, evening).

*Variation:*
Do you know what shape I have, what shape I have, what shape I have?

Do you know what shape I have, hiding in my can?
If You’re Happy and You Know It
(different variations to the song)

If you’re happy and you know it, skip with a smile,
If you’re happy and you know it, skip with a smile,
If you’re happy and you know it, then your face will surely show it,
If you’re happy and you know it, skip with a smile!

If you’re sad and you know it, walk with a frown
If you’re mad and you know it, stomp your feet!
If you’re silly and you know it, shake all over.
If you’re scared and you know it, hide your eyes.
If you’re quiet and you know it, sit right down....Shhhhh!

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We’re Putting Our Toys Away
(Tune: The Farmer in the Dell)

We’re putting our toys away,
We hope it won’t take all day,
To have more fun,
We’ll get it all done,
We’re putting our toys away,

Tidy up
(Tune: Jingle Bells)

Tidy up, tidy up, put the toys away,
Tidy up, tidy up we’re finished for today.
Tidy up, tidy up, put the toys away.
For we’ll get them out again the next time that we play.
Color Song
(Tune: If You’re Happy and You Know It)

If your clothes have any red, any red
If your clothes have any red, any red
If your clothes have any red, any red, put your finger on your head,
If your clothes have any red, any red.

Additional Verses:
Blue—finger on your shoe
Yellow—smile like a happy fellow
Brown—turn your smile into a frown
Black—put your hands behind your back
White—stomp your feet with all your might
This is the Way I Move!
(Tune: Mulberry Bush)

This is the way I touch my nose, touch my nose, touch my nose,
This is the way I touch my nose, when I’m at Preschool!

This is the way I jump up and down...
This is the way I balance on one foot...
This is the way I spin in a circle...
This is the way I hop like this...
This is the way I touch my toes...
This is the way I stretch up high...
This is the way I sit on my spot...
Little Wiggle
(Chant)

I had a little wiggle, deep inside of me.
I tried to make it stop,
But it wouldn’t let me be.
I pulled out that wiggle and threw it like a ball.
Now my wiggle’s gone
And it’s bouncing down the hall!
Finger on Your Lips
(Tune: If You’re Happy and You Know It)

Put your finger on your lips, on your lips, shhh, shh.

Put your finger on your lips, on your lips, shhh, shh.

Put your finger on your lips and don’t let it slip.

Put your finger on your lips, on your lips, shhh, shh.

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Washing Hands Song
(Tune: Row Your Boat)

Wash, wash, wash, your hands,
Soap will make them clean,
Scrub the germs til they fall off,
Germs go down the drain.
Criss Cross Applesauce
(Chant)

Criss Cross applesauce,
Hands on lap, gingersnap.
Back straight, chocolate shake
On my rear, root beer.
Lips zipped, cool whip
Shhhhhhh!!
Transitions

What are Transitions?
For our purpose, transitions are defined as the times when children move from one activity to another. Common transition times are when children arrive at school or day care, meal or snack times, nap or bed times, and anytime there is movement from one activity to another.

Why Are Transitions Important?
- Transition times often invite misbehavior from children.
- Misbehavior with transitions is more likely to occur when:
  - Clear instructions are not given so children do not know what is expected of them.
  - There are too many children transitioning at the same time and in the same way.
  - There are too many transitions.
  - Transitions are too long and children have to wait with nothing to do.
  - There is no consistency on how transitions are implemented.
  - Children are expected to transition without warning.
- Some children have more difficulty staying emotionally regulated with transitions because of a disability or history of trauma, which can result in difficulties with problem solving, communication, or social-emotional skills.

What Can Be Done?

- Plan ahead
  - Design a daily schedule that allows for a limited number of transitions. Look to combine transitions.
  - Plan activities such as singing to keep children occupied during transitions and let children start the new activity as soon as they are ready rather than waiting. For example, sing songs or play waiting games during this time. If possible, allow children to start the new activity as soon as they are ready, instead of waiting for everyone to be ready before getting started.

- Fold snack times into other activities so children can eat when they’re ready.

- Give a verbal warning five to 10 minutes before transitions happen. This helps children be ready.

- Pay attention to what is happening during transition times and make changes as needed.
  - At child care centers and schools, ask someone to watch during transition times, taking note of what adults and children are doing, and any misbehavior that occurs, including what triggered it.
  - At home, pay attention to what you and your child do during transitions. Giving some thought to what might have triggered any misbehavior will provide clues for finding solutions.
  - Design a transition plan using what you have learned. For example, it might be helpful to post an adult at the door to engage children in an activity when they line up. It may also be helpful to identify children who need additional support for transitions such as individualized reminders or visual schedule reminders.

- Use of interactive games and songs can help make transitions interesting and minimize the likelihood of misbehavior.
  - For example, while children take turns washing their hands, have another activity going on such as singing songs or reading books. When children finish washing, ask them to gently tap another child to signal that it is his/her turn.

- Teach children what to do during transitions so the expectations are clear.
  - Break each activity down into small steps that you will need to explain and model several times in different ways.
  - Post a visual schedule for different activities to help children learn the order and role-play each step.
  - After children have some practice, mix up the pictures and ask them to put them in order.
  - Children enjoy being the models for their peers. A child can demonstrate while you narrate the procedure.

- Post a visual schedule for different activities. This helps children learn the order in which activities happen, what comes next and prepare for transitions.

- Be prepared to problem solve individual solutions for children who continue to have difficulty despite your best efforts to follow these guidelines.

MORE INFORMATION

Moving Right Along...Planning Transitions to Prevent Challenging Behavior
From National Association for the Education of Young Children.

Tips and Ideas for Making Visuals
From the Technical Assistance Center on Social Emotional Intervention for Young Children

Reading this in print? Go to:
TIPS AND IDEAS FOR

MAKING VISUALS

To Support Young Children with Problem Behavior

Rochelle Lentini and Lise Fox
University of South Florida
WHY USE VISUAL STRATEGIES

1. Visual strategies can be used to prevent problem behavior.
2. Visual strategies are helpful in supporting and increasing both receptive and expressive communication.
3. Just as adults use calendars, grocery lists, and “to-do” lists to enhance memory, children benefit from visual reminders.
4. Visuals are static, meaning that they remain present after words are spoken. Children can refer to them once the spoken words are no longer present. Visuals serve as a reminder of the verbal direction.
5. Visuals assist children in knowing exactly what is expected of them. (e.g., washing hands independently, cleaning up toys)
6. Regular routines, when represented visually, can be taught to children at a very young age. Once taught, the adult can fade out of the routine and allow the child to self-monitor the routine to completion.
7. For many children, visual supports are most beneficial when used in conjunction with spoken language and/or sign language.
8. Visuals can act as a cue to teach appropriate behavior or new skills for children who are having challenging behavior.

PICTURE TIPS

1. Remember that children communicate and understand at different levels.
2. Determine your child’s “visual stage” (or combination of):
   - **Object Stage**: use of actual objects and items for communication needs
   - **Photo Stage**: use of real photographs (photo, digital, scanned, magazines, catalogs, coupon adds, Izone Camera which prints out mini-Poloroid pictures with adhesive on the back side of the picture, …) for communication needs
   - **Picture Symbolic Stage**: use of colored line drawings (hand-drawn or commercially produced) for communication needs
   - **Line Drawing Stage**: use of black and white line drawings (hand-drawn or commercially produced) for communication needs
   - **Text Stage**: use of written words and/or numbers for communication needs
3. Use written text along with photographs, pictures, and line drawings to promote reading. Written text also assures that everyone interacting with the child uses the same language for a particular item.
4. Present visuals from left to right if your child can scan horizontally. Horizontal orientation will also prepare the child for reading. (Note: Some children are vertical scanners. In this case, present visuals from top to bottom.)
5. Photographing tips:
   - Place item or object on a solid/high contrasting background when taking photo.
Note: If you are trying to communicate “go potty” and you take a photo of the toilet, try to avoid including the bathtub in the picture. The child may focus on the tub instead of the intended picture of the toilet. Try to take the photograph from the child’s perspective.

6. Preparing the picture visuals:
   Remember to make the “picture” sturdy, easy to handle, and durable. Either print on cardstock or glue to a file folder, then cover with contact paper or laminate.

7. Pictures can be obtained from a variety of places:
   *Photographs:* camera, digital, computer scanning, magazines, catalogs, coupons, advertisements, Izone Camera, internet sites, commercial computer programs…
   *Picture Symbols & Line Drawings:* computer scanning, magazines, catalogs, coupon ads, internet sites, commercial computer programs, coloring books and dittoes, hand-drawn pictures, etc.

**CHOICE CHARTS**

1. Allowing for choice making gives children **opportunities for socially appropriate power and control.**
2. **Give choices** at every opportunity possible. (“Do you want the blue cup or the red cup?”)
3. If you don’t have a visual that represents a particular choice, **use the actual item** or a representation of the choices. (e.g., food choice, art materials, toy pieces, video choices,…)
4. When first introducing choices, **start with 2 or 3 choices**; then, gradually with communication progress, increase the amount of choices offered at one time.
5. **Examples of Choice Boards** commonly used: (Start with one category at a time.)
   - Foods & Drinks
   - Toy Choices
   - Activity Choices (tickle game, chase, computer, swim…)
   - Places (restaurants, library, stores, park, beach …)
   - Material Choices (Such as for art: colors, utensils, medians)
   - Clothing & Shoes
   - Actions (stop, do, sit, eat, drink, sleep, do it again, my turn, take a break, …)
   - People
   - Songs
6. Choice Boards or Charts need to be placed in a location that is **accessible to the child** (on their eye level and within their reach) for quick and easy use.
7. **Incorporate a child’s preference,** when possible, in choice charts and choice making. For instance, if the child likes “Blue’s Clues”, place “Blue’s Clues” stickers along the border to increase attention (unless it is distracting).
HOW TO MAKE A VISUAL SCHEDULE

1. **Gather Materials:** Scissors, glue stick, poster board, clear contact paper (Wal-Mart, Office Depot), Velcro (Wal-Mart, fabric store, Sams Club), pictures (photographs, pictures from magazines, computer programs, cereal boxes, household supplies, restaurant napkins, placemats, wrappers, etc.). *TIP:* Every picture should have a label so your child can associate the written text with the picture.

2. **Choose pictures** for the schedule you wish to create. Keep in mind that a visual schedule is used to assist children with transitions and anticipating activities throughout the day. It can be as specific or as generalized as the children may need and can be for
various amounts of time. For example, a visual schedule may outline parts of a day, half-
day, or an entire day.

3. **Cut your pictures** and poster board squares the same size. Keep in mind your child’s
developmental level (see handout “Picture Tips” to determine your child’s visual picture
stage).

4. **Glue** the pictures on poster board squares for durability.

5. **Laminate or cover the pictures** with clear contact paper.

6. **Velcro** a small piece of Velcro on the back center of each picture. *TIP: Always use the
same type of Velcro for pictures and the opposite kind for the schedule board.*

7. **Create a strip** to hold the schedule. Cut out poster board long enough to hold all the
pictures for the block on time you are creating a schedule. You may create a pocket at
the bottom/end that represents “finished” or “all done.” *TIP: If your child visually tracks
up and down, you will want the schedule to be vertical. You’re your child visually tracks
from side to side you will want to make a horizontal schedule (horizontal schedules
promote reading skills).* Laminate the strip and place a long piece of Velcro down the
center.

8. **Velcro the pictures** to the schedule in the order they will occur. Teach the child how to
use the schedule by explaining and modeling how to use the pictures. Remember to
always include changes in the schedule and to review them with the child. *When setting
up the schedule you can either turn the pictures over as you move through the schedule to
indicate that the activity is finished or you can remove the picture entirely from the
schedule and place it in a pocket with the word “finished” on it. If you are going to turn
over the picture as you complete each schedule item, make sure to put Velcro on the front
without covering the picture/text. This will enable the picture to adhere to the Velcro
strip and then once the day is complete you can easily set-up the schedule for the next
day by turning all the cards back over to show the pictures.*

9. **Use the schedule!** Keep the schedule located in a convenient place at the children’s eye
level to promote consistent use. Use the schedule as part of your routine.

10. **Celebrate!** Be sure to celebrate your success and the children’s success. Praise children
for following the schedule appropriately! Good luck!
A first/then board can be used to communicate a sequence of events or to reinforce completion of a non-preferred activity. A first/then board can be used in a variety of ways:

- Assist with transition from one activity to another
- Assist in completing non-preferred tasks by reinforcing with a preferred activity
- Breaking a large schedule or sequence of events into smaller steps
  - First/Then boards can be broken down into two-step activities. For example, “FIRST clean up, THEN go outside.”
  - First/Then boards can be broken down into a sequence of steps followed by a reinforcer or the next transition. For example, “FIRST color-cut-glue, THEN computer.”

Making the First/Then Board

1. **Gather the materials:** Scissors, glue stick, poster board or file folder, clear contact paper (purchase at Wal-Mart, Office Depot…), Velcro (Wal-Mart, fabric store, Sam’s Club…), pictures (photographs, pictures from magazines, computer programs, cereal boxes, household supplies, restaurant menus or placemats, wrappers, etc.). **TIP:** Every picture should have a label so your child can associate the written text with the picture.
2. **Collect pictures** to represent activities (refer to section on “Picture Tips” to determine your child’s visual stage).
3. **Cut the pictures** out and paste on poster board for durability or print on cardstock.
4. **Laminate or cover** in contact paper.
5. **Use a file folder or cut the poster board** large enough to hold several of the pictures. Divide the sections by making a vertical line to separate the first/then sides. Laminate or cover in contact paper.
6. **Velcro** small pieces of Velcro on the back of the pictures. *TIP*: Make sure you use the same side of Velcro on all pictures. Next, place a strip of opposite Velcro on both sides of the first/then board.

7. As you use the “First/Then” board with your child, try to place a reinforcing activity or item on the “then” side of the board. This will increase the likelihood that child will complete the activities on the “first” side of the board (see samples below). As each activity is completed, turn the picture over to indicate that the activity is “finished”.

8. Once your child successfully follows the first/then board activities, **change the pictures** according to the activity. When using a first/then schedule, remember to model the behavior. It shouldn’t take long before your child understands the first/then concept! If your child is not following the first/then board, consider the visual stage you have selected by referring to the “Picture Tips” section. It is also possible that activity on the “then” side is not reinforcing for your child.

9. **Celebrate your success!**
OTHER CREATIVE IDEAS FOR USE OF VISUAL STRATEGIES

Routine Activity Sequences

This is an example of the toothbrushing routine in Brendan’s home. The pictures are of his brother to increase the likelihood that Brendan would attend to the visual and also to give his brother a sense of involvement.

Cue Cards

Cue cards are placed on a ring with “stop” on one side and the cue (shown above) on the other side. The ring of cues could easily be attached to a key ring, necklace, or beltloop for easy access for cuing.

Activity Analysis Using Clip Art

This is an example of the steps to follow when washing hands.

These pictures were placed on small cue cards on a ring to cue Brendan in the library.

Turn-Taking Charts

These cues were hand-drawn and placed on a ring to use to cue Brendan at swim lessons.
Stop Signs

Children place their names with pictures on the turn chart to indicate order at the computer. As a turn is completed at the sound of a timer, the child places his/her name/picture in the “all done” pocket, and the next child takes a turn.

Stop Signs

Stop signs can be used on items and doors to help cue children when items or activities are “not a choice”.

A stop sign is placed on the door to remind children to “stop and stay inside.”

Feeling Charts

Because of Brendan’s preference of traffic signals, a reminder chart was created to cue him to “stop computer”, “go pee-pee”, then “go back to the computer”.

Feeling Charts

Feeling pictures in an easy-to-carry book acts as a visual reminder when children are trying to express feelings. The child can either point to the appropriate “feeling picture” or say what is being felt.

*Job Charts, Toy/Activity Self Labels, People Locators are other possible ideas.
What is Behavior?

A behavior is the way a person acts in response to a particular situation.

Why is Behavior Important?

- For children who have experienced trauma, keeping themselves safe becomes the primary motivator of behavior. Children may appear manipulative or controlling, when in reality they may be attempting to just keep themselves safe. Safety trumps all else.
- Behavior is like an iceberg...we only see the small portion above the surface. Below the surface are the feelings and emotions driving the behavior. The misbehavior we see is often a child’s attempt to solve another problem of which we are unaware.
- Even minor stressors can act as triggers that fill children with emotion and can result in misbehavior. Misbehavior puts children at risk for maltreatment.
- When caregivers don’t understand why a child is acting out, they are more likely to focus on “managing” the behavior rather than meeting the child’s need. This is an ineffective response to misbehavior, like a doctor treating the symptoms of a disease without considering the cure.
- In order to understand misbehavior, it is important to understand the body’s stress response.

What is the Body’s Stress Response?

- Our bodies have a built-in alarm system that signals danger. Children who have experienced repeated trauma often have overactive alarms. They are keenly watchful for danger, and may label non-threatening things as dangerous. False alarms can happen when children hear, see, smell or feel something that reminds them of frightening things from the past. These reminders are called triggers.
A Child is like an Iceberg

The behaviors we see above the surface

Are a result of the needs below:

I feel angry.
I feel frustrated.
I feel scared.
I feel happy.
I feel loved.
I feel proud.
I feel lonely.
I feel worried.
I feel embarrassed.
I feel sad.
I am sick.
I am tired.
I am hungry.
Am I safe?
Can I do things by myself?
Do I belong?
Am I respected?
Am I understood?
Am I accepted?
Do I matter?
Am I loved?
Triggers

What Are Some Common Triggers?

- Unexpected change
- Feelings of vulnerability or fear
- Feeling threatened or attacked
- Too much stimulation from the environment

What Does a Triggered Child Look Like?

- Behaviors resulting from a stress response typically fall into one of three categories: flight, fight or freeze.
  - What does flight look like?
    - Behaviors in which children move away from a person/situation they feel is a threat
  - What does fight look like?
    - Behaviors in which children move toward a person/situation they feel is a threat
  - What does freeze look like?
    - Behaviors in which children use their minds to move away from a person/situation they feel is a threat (holding still while “checking out”)

- Children who have experienced trauma may:
  - Appear nervous or jumpy.
  - Avoid physical contact.
  - Have difficulty sleeping/have nightmares.
  - Be confused about what is dangerous and who to go to for protection, especially if the trauma was caused by a caregiver.
  - Have mood swings, for example, shifting quickly between being quiet and withdrawn to being aggressive.
  - Demand lots of attention.
  - Have trouble paying attention to teachers at school and to parents at home.
  - Lose their appetite.
  - Go back to “younger” behaviors such as baby talk or wanting adults to feed or dress them.
  - Re-enact the scary things they have experienced during play.
  - Withdraw from friends or activities they have enjoyed previously.
  - Get into fights at school or fight with siblings at home.
  - Older children may engage in self-destructive behaviors such as drug or alcohol abuse, cutting themselves or having unprotected sex.
What Can Be Done?

- Stay calm, no matter what behaviors are displayed. Becoming upset when dealing with a triggered child can worsen the behavior.
- Remember the iceberg...try to identify the need below the surface that is driving the child’s behavior. Focus on meeting the child’s need rather than on “fixing” troubling behavior.
- Wait until the child is no longer triggered to talk about what happened. While triggered, a child is not able to use the rational part of the brain, making reasoning ineffective.
- When the child is calm, talk about how to recognize triggers and what can be done to increase awareness of emotions to prevent being triggered, or what can be done to calm down and manage (or regulate) emotions.
- As difficult as it can be, try to remember that these behaviors are not a personal attack, and likely have little to do with you.

MORE INFORMATION

The National Child Traumatic Stress Network
Reading this in print? Go to:
http://www.nctsn.org/

Hand Model of the Brain by Dan Siegel
Reading this in print? Go to:
https://www.youtube.com/watch?v=gm9CIJ74Oxw

1-2-3 Care 17” x 11” Poster
What is the Need Behind the Behavior?

**AGE**

<table>
<thead>
<tr>
<th>0-1 yr</th>
<th>1-3 yrs</th>
<th>3 yrs</th>
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</thead>
</table>
| **TRIGGERING EVENT** | • Unexpected changes in routines or caregivers  
• Loud, unexpected noises  
• Strong emotions (often anger)  
• Anger (real or perceived) from others | • Unexpected changes in routines  
• Transitions  
• Strangers  
• Crowds, disorder and chaotic environments  
• Fear of strangers  
• Engage in parallel play rather than group play  
• Easily frustrated, which can lead to tantrums or aggression  
• Fear of strangers  | • Unexpected changes in routines  
• Transitions  
• Perceived aggressive behavior  
• Disorder and chaotic environments  
• Easily excited and talk a lot  
• Eager to engage  
• Easily frustrated, which may lead to aggression  
• Curious about strangers  
• Watchful when they perceive adult anger  
• Need comfort items  
• Seek comfort from familiar caregivers |

| **DEVELOPMENTALLY-APPROPRIATE BEHAVIOR** | • Startle, but is able to self-soothe  
• Clasp hands, suck  
• Cry, but is able to be comforted by caregivers | • Are excited about with their world  
• Eager to engage, but can be shy  
• Easily frustrated, which can lead to tantrums or aggression  
• Fear of strangers  
• Engage in parallel play rather than group play  
• Difficulty paying attention  
• Fearfulness  
• Isolate self from others  
• Refuse to participate through withdrawal  
• Run or walk away | • Easily excited and talk a lot  
• Eager to engage  
• Easily frustrated, which may lead to aggression  
• Curious about strangers  
• Watchful when they perceive adult anger  
• Need comfort items  
• Seek comfort from familiar caregivers |

| **FLIGHT** | • Excessive sleeping with difficulty arousing  
• Avoid eye contact  
• Crawl or more away | • Difficulty paying attention  
• Fearfulness  
• Isolate self from others  
• Refuse to participate through withdrawal  
• Run or walk away | • Run away  
• Hide  
• Cry inconsolably  
• Seek comfort items  
• Move away from others  
• Complain frequently of aches, pains & illnesses  
• Regressive behavior (bathroom accidents, sucking thumb) |

| **FIGHT** | • Cry inconsolably, caregiver may be unable to soothe  
• Cling to adults  
• Fuss  
• Arch back  
• Pull & push away | • Aggressive behavior (biting, hitting, pushing)  
• Cling to adults  
• Have a tantrum  
• Refuse to participate through disruptive behavior  
• Throws toys  
• "Check out"  
• Unresponsive, does not appear to hear or understand  
• Difficulty with learning activities | • Get in caregiver’s face when angry  
• Throw things  
• Have a need to tell their side of the story  
• Rapidly escalating aggressive behavior  
• "Check out"  
• Difficulty with learning activities  
• Difficulty paying attention or following directions |

| **FREEZE** | • Dull-looking face and eyes  
• Look away (distracting)  
• Sleep a lot  
• Show little emotion  
• Go from “awake” to “sleep state” quickly | | • "Check out"  
• Unresponsive, does not appear to hear or understand  
• Difficulty with learning activities |
Discipline
What is Positive Discipline?

Positive discipline is a way of teaching and guiding children by letting them know what behavior is acceptable in a way that is firm, yet kind.

Punishment describes methods of control, gained by requiring rules or orders be obeyed and punishing undesired behavior. Discipline comes from the Latin root word disciplina, which means “giving instruction, to teach.” Recent brain research has confirmed that people learn best when they feel safe and connected to others, in the context of safe relationships. Therefore, the goal of positive discipline is to teach by first creating safe relationships with children. Connection must come before correction in order for discipline to be effective in the long term. The most powerful tool for teaching children is modeling what we want them to do or to be.

Why is Positive Discipline Important?

Positive discipline:

- Teaches children responsibility, self-discipline, problem-solving skills and cooperation.
- Is respectful to both children and adults.
- Builds trust and strengthens relationships, helping form new connections in a child’s brain.
- Builds and maintains self-esteem.
- Teaches children how to manage their emotions.
- Teaches children to deal with stress in healthy ways.
- Invites children to contribute in meaningful ways and develops their sense of significance.
- Develops strong understanding that one has power or influence over what happens to them in life.

Five Criteria for Effective Discipline:

1. Helps children feel a sense of connection (belonging and significance).
2. Is mutually respectful and encouraging (kind and firm at the same time).
3. Is effective long-term (considers what the child is thinking and feeling, learning, and deciding about himself and his world, and what to do in the future to survive or to thrive).
4. Teaches important social skills and life skills (respect, concern for others, problem solving, and cooperation as well as the skills to contribute to the home, school, or larger community).
5. Invites children to discover how capable they are (encourages constructive use of personal power and autonomy).

What Can Be Done?

Look to find solutions that are “reasonable, respectful, related and helpful,” rather than to “managing” misbehavior in the following ways:

- Wait to problem solve solutions until you are calm. You will do your best thinking this way and also model an important life skill for the child.
- Show respect by listening to and acknowledging the child’s feelings. This also helps build connection.
- Model the qualities you desire to see in the child.
  - Talk to the child about what happened once both of you are completely calm.
  - Respect the child’s boundaries by allowing him/her to avoid eye contact and let the child make the first move to engage in physical contact with you.
  - Reassure the child that you care.
  - Ask the child to identify how what happened may have impacted others.
  - Use “I” statements instead of “you messed up” statements. Begin sentences with “I” and make them about yourself and how you feel rather than what the child did. This is a less critical way of discussing the situation and helps the child feel less defensive.
  - Ask the child to come up with a plan for reconciliation if others were hurt or property was damaged.
  - Help the child come up with solutions for handling similar situations in the future.
- It is ok to ask for help and talk to someone you trust for support.
- Never discipline a child in anger.
It is not important to remember a long list of tools or rules about whether a response to misbehavior is “right.” Instead, by asking yourself a few simple questions, one can decide for oneself.

- Is it respectful to the other person? Is it respectful to me?
- Does it lead to a better sense of connection?
- Does it invite the child to have a sense of meaning, value, or capability?
- Is it encouraging? Does it help to bring out the child’s best self?
- Will it be helpful long term?
- Does it invite a sense of social interest and community? Does it contribute to the common good?

Everyday tips for keeping guidance positive:

- Focus on encouragement rather than praise. (See section on Resilience in this toolkit)
- Redirect the child into desired behavior. When children hear “no” or “don’t” too much, they tune it out. Instead, explain what to do, giving alternatives to replace the misbehavior with something acceptable. For example, when misbehavior occurs in the grocery store, ask for help picking things out or re-arranging things in the cart rather than scolding.
- Spending quality time with children on a daily basis helps them be happy and well-behaved.

MORE INFORMATION

Positive Discipline Web Site
Reading this in print? Go to: www.positivediscipline.com

The Amazing Brain and Discipline
Reading this in print? Go to: www.instituteforsafefamilies.org/sites/default/files/isfFiles/amazing4.pdf

Teaching Your Child to Cooperate with Requests

Responding to Your Child’s Bite

Traditional Time Out

Time-in and Positive Time-out
Traditional Time-Out

Time-out is a well-known method of discipline that can be effectively used with many toddlers and early grade school-age children, although some parents and caregivers report difficulties with this method. The idea behind time-outs is that the child is removed from people and made to sit quietly for a designated period of time. While more trauma-sensitive methods are presented in the Time-in and Positive Time-out article in this section of this toolkit, an overview of traditional time-outs is included here to help ensure that this method is used appropriately and in the most trauma-sensitive manner possible.

Choose a Time and Place
The first step in making time-outs work is choosing a suitable place. This should be in a location where you can monitor the child to ensure safety and compliance. Consider a name for the area such as the “thinking place.” Make sure the area is boring – away from television, toys and other forms of amusement.

A good rule of thumb for the time is one minute per year of the child’s age. It is important to keep close track of the time. Some have found that a kitchen timer works well.

Introduce the Time-Out Spot
Don’t spring time-out on a child. When a caregiver and child are both in a good mood, show the child the spot and explain what it is: a quiet place to go when misbehaving and failing to follow rules, or when needing to calm down. Choose three to five misbehaviors (examples: hitting, biting, angry yelling, throwing a tantrum), and be specific about which broken rules will lead to a time-out. Let the child know how long he/she will have to stay in time-out, and explain that when time-out is over (when the timer or alarm rings) he/she can return to activities.

Don’t Wait to Discipline
If a child earns time in the “thinking place,” take him/her there immediately. Don’t wait until finishing a task, such as watching a television show or washing dishes. Time-outs are most effective when given while the misbehavior is happening or immediately afterward. Young children have short memories, so if the consequence isn’t immediate, they are apt to forget the misbehavior and be confused when they are disciplined later.

Keep Your Cool
Time-outs are a way to give the misbehaving child a break to regain self-control, but it is also important to keep your own emotions in check. When a child is given a time-out avoid yelling, spanking, criticizing, or
getting into long-winded versions of “I told you so.” Simply state the inappropriate behavior in a firm and calm tone of voice, without too much explanation, and send the child to the time-out location. All you need to say is, “No hitting, Mary. Go to time-out.”

**Make it Stick**

Once you have explained that a specific behavior will lead to time-out, follow through with it every time so the child takes time-outs seriously.

Getting a child to stay in time-out can be difficult. Children may keep getting up or scoot their way out of the designated area, or try to position themselves to see or participate in ongoing activities. If the child refuses to stay put, hold him/her firmly in place for the duration of the time-out, or take the child back to the time-out spot every time the child leaves and restart the timer. If it is necessary to hold the child in place, do so quietly, without talking, as the purpose is to keep the child in the time-out space long enough for the child to calm down. Children will learn quickly that it is easier to sit and finish a time-out the first time so they can rejoin the fun.

**Move On**

Once the timer or alarm rings to indicate that the time-out is over, have a quick chat with the child. Ask if he/she understands what misbehavior earned the time-out. Allow the child to express feelings and very briefly remind him/her that time-outs occur when rules are broken or to help tone things down. Praise the child for completing the time-out.
**Time-In and Positive Time-Out**

Adapted from Lappin, S. (2014, Oct. 9) and McVittie, J. (2011, Nov. 29) - full citation on reverse

When we consider use of various discipline tools, it is helpful to consider what we want children to learn and what we are trying to accomplish in the long run. When thinking about using time-out, it is good to ask ourselves, “What is the purpose of a time-out in sports?” “Is it to penalize the players for breaking the rules or is it to give them time to re-group, catch their breath, and come up with another plan?” If our goals for children fit with the second part of this question, two helpful tools are time-in and positive time-out. Both are great ways to teach children how to calm down without isolating them or inviting feelings that can be problematic and lead to further misbehavior.

Being isolated, as described in the Traditional Time-out article in this section of this toolkit, can be very scary and can trigger feelings of abandonment in young children, especially those who have experienced abuse or neglect. When children are put in a time-out place, separate from others, and are told or forced to stay there alone, they may panic, and the negative messages they may already have about what the world is like are re-enforced (if I’m bad, I get sent away). While children can be frightened into compliance, it does not help them learn how to calm down and use their thinking brain to make better choices.

Children have a need to feel important, included and connected. When children act out, it is often because these needs are not being met or they are simply tired or hungry. Sometimes just naming the feeling and the problem is enough to help a child calm down, i.e. “You look frustrated and mad that your tower of blocks fell over.”

**Time-in**

Including children in an activity that can be done together can provide an opportunity to re-group and calm down, while fulfilling the need for connection. You could ask them to help you work on something—fold some clothes, bake cookies, go for a walk together, blow bubbles, color, draw or paint, read together, or even sit together and talk about their feelings. If they are willing, sharing a hug can be very powerful and may help them feel connected and calmer.

**Positive Time-Out**

Positive time-out is another way to invite children to do what is needed in order to calm down. What kinds of things do we, as adults, do to soothe and calm ourselves? Bubble baths? Music? Creative projects? Reading a book? Everyone needs a time-out every once in a while, because we all make mistakes and at times “lose our cool”. It helps to have a place to sort out feelings and make a decision about what to do.
Engaging children in identifying a designated positive time-out space creates ownership and increases the likelihood of success. It is helpful to have a designated positive time-out area or give children choices about where they would like to go to re-gather themselves. Brainstorm together the kinds of things that would be helpful, what theme and name to give it, and where it will be located. Ideas include pillows, blankets, favorite stuffed toys, books, writing materials, coloring books, art supplies, music, and a snow globe to shake and watch as it swirls and settles. Themes could be tropical vacation, outer space or camping. Everyone can be involved in decorating the space. It may be helpful to set guidelines for use of the space, especially if you are worried children will go there to avoid chores or homework.

Positive time-out is more effective if it is chosen by the child rather than ordered by the adult. It might be helpful to ask a child who is struggling to stay calm, “Do you need to go to [name of cool down area]?” If the child says no, which is unlikely if that child helped create the space, you could ask if it would be helpful to have a time-out buddy go as well.

Children are able to identify for themselves when they are feeling better and can then leave the space. Once children have experienced positive time-out, they often begin to use it without prompting from adults.

Our ability to calm down improves as the brain develops. The prefrontal cortex, where we manage self-regulation, is not fully developed until the age of 25. This means a 3-year-old cannot calm down as easily as a 6-year-old or an adult.

Once both you and the child have calmed down, you can work on solving the problem that created the issue to begin with, if needed. If the problem does not need to be addressed further, the best thing to do is just move on rather than bringing it up again.
Teaching Your Child to: 
Cooperate With Requests 

Does this Sound Familiar? 

Kevin and Chelisa are at the end of their rope. They are constantly reminding their three children to pick up toys, to play nicely together, and to help with chores. They would very much like their children (ages 6, 4, and 3) to respond to their requests. However, it often feels as if all three children are uncooperative and out of control. They run in the house, leave toys on the floor, and refuse to sit at the table for meals. On many occasions, the children’s failure to follow the rules results in shouting, frustration, and tears. Lately, Kevin and Chelisa have stopped asking their children to follow their directions, because it’s just too hard to get them to follow directions.
The Focus

Young children can learn to follow adult expectations, including performing simple chores, if the expectations are developmentally appropriate (meaning they match what can be expected for children at that age) and are taught to the child. Below is information on what you might expect from your preschooler and some tips for helping your child learn and follow your requests.

What to Expect

Children who are 3 often can
- Put their dirty clothes away
- Put toys or books away
- Put clean clothes away
- Put their shoes away
- Put non-breakable dishes in the sink
- Wipe the table with a sponge
- Put trash in the trash can
- Put napkins on the table
- Wash their hands independently

Children who are 4 often can
- Pick up toys on request
- Put clean clothes away
- Put clothing on independently
- Undress and place clothes away
- Wash self in the bathtub
- Brush teeth independently
- Put silverware on the table
- Put dry pet food in a dish
- Return outdoor toys to their storage spot

Children who are 5 often can
- Remember and restate household rules
- Ask adults’ permission to do activities
- Follow established rules and routines without being asked (e.g., wash hands before eating, clean up toys before going to bed)
- Independently do a simple chore (e.g., feed a pet, get the mail, make the bed)
- Help adults with more complex chores (e.g., water plants, fold clothes, wash dishes, dust)
- Be independent with most self-care skills

When children have disabilities, they may need special assistance to meet these expectations. You may want to do the following:

- Expect your child to do only part of the task, while you complete the part that is difficult for him
- Provide help to your child so that she can complete the task
- Provide instructions in different ways (e.g., using a picture or using a gesture) so that your child understands what you are asking

Teaching your child to do simple chores

Are you surprised that young children can manage so many different activities and responsibilities? Are you interested in your child becoming more independent and helpful? If you want your child to be able to do a skill or activity, you have to teach him or her what to do. It’s really less complicated than it sounds. To teach your child, follow these steps:

1. State clearly what you want your child to do. For example, if you want your child to throw his napkin in the trash, you would say, “Andrew, go put your napkin in the trash can.” Sometimes parents do not state their expectations very clearly. For example, a parent might ask, “Where does that go?” or say, “Don’t put your trash in the sink.” These directions do not tell the child exactly what is wanted and may not produce the expected behavior.

2. If your child seems unsure of what is expected or does not understand the direction, follow your direction with, “Let me show you how to do it” (said in a gentle tone of voice) and provide your child with the minimal amount of help that he needs to do the activity.
3. When your child attempts to do the activity or carries out the request, immediately praise his effort. You might say, “Look at you! You are a big boy. You can throw the trash in the trash can.” The key is to praise with enthusiasm and be specific about what your child did.

4. Be prepared for the possibility that the very first time your child attempts a new activity (e.g., puts silverware on the table, socks in the drawer, toys on the shelf), her efforts may not meet your expectations (e.g., silverware is mixed up or socks are not put away neatly). When your child is first learning an activity, it is very important to encourage her attempts. If you discourage or reprimand your child because she did not do it quite right, she may be less eager to try the activity again.

5. Your child may need to practice the new skill or activity before he can do it independently. If the activity is complicated and you have shown your child how to do it (e.g., putting toys on the shelf), you may want to avoid actually showing your child how to do it and just provide verbal direction instead. Remember that when providing instructions, you should state exactly what you want your child to do (e.g., pick up the blocks and put them in the bucket) and respond with praise when the child completes the task.

Why Do Children Sometimes Refuse to Cooperate?

The preschool years are a time when children are learning how to express themselves and interact with others. Their refusal to cooperate is not always a deliberate refusal to follow your directions, but may be due to other reasons. For example, your child may

- Need a warning that you expect him to stop an activity to comply with your request
- Might be thinking about something else and not hear the request
- Might not clearly understand your request
- Might be more used to receiving negative attention (e.g., yelling, scolding) and may refuse the request to get that attention

By thinking about why your child may not be responding to you, you can determine what your next step should be. For example, you may need to give your child a warning before making a request. If your child has a disability or language delay, you might need to provide a concrete cue that shows your child what you want her to do (e.g., handing your child the toothbrush to indicate that it’s time to brush teeth). You might need to get down on your child’s level and make sure you have her attention (e.g., make eye contact, touch your child gently) before making a request. If your child seeks negative attention (e.g., misbehaves to get your attention), you might try ignoring the misbehavior (not scolding or talking to your child) and then praising your child when he is doing something appropriate.

What Can You Do When Children Refuse to Follow Instructions or Requests?

When children are very young, they are often eager to learn simple chores and they approach the tasks with enthusiasm. Part of their joy comes from receiving your praise and attention and from the sense of accomplishment they have at being a “big boy” or “big girl.” It is important to recognize that once the child is able to do the activity independently, he might be less
motivated to complete the task consistently. (Face it, how many adults take joy in making the bed?). At this point, you should remember that your praise and attention can be a powerful tool to gain your child’s cooperation. If your child is reluctant to do a chore that he is capable of completing independently, try the following:

1. Move closer to your child, get down on his level, and restate your request, stating exactly what you expect in a calm and firm tone of voice. (e.g., “Parker, pick up your books and place them on the shelf.”)

2. If your child resists or refuses, take a deep breath (so you can remain calm) and think about why the child might be refusing. After examining the situation, you might
   • Tell a child who is reluctant to stop an activity, “I see you want to keep playing. You can play for 3 more minutes. I’ll time you. Then you must clean up.”
   • Tell a child who is angry, “You are telling me you are angry, and you don’t want to clean up. The books need to be picked up. Once you are calm, you will need to pick them up.” Then wait until your child is calm before restating your direction.
   • Tell a child who is slow to begin, “I will help you get started. I will pick up one and then you pick up one.”
   • Tell a child who may not be aware of the fun activity that will come next, “When the books are on the shelf, you can take your bath with the new bubble bath that we bought today.”
   • Tell a child who is seeking to have control, “You have a choice. You can put the cups or the silverware on the table. You must help set the table.”
   • Tell a child who is not enthusiastic about the task, “Let’s play beat the clock! I will time you and see how fast you can finish it.”

3. As soon as your child begins cooperating with the request, provide praise or feedback. When you praise your child, describe exactly what he or she is doing. For example, “That’s great. You are picking up the books. I like how you are cleaning up.”
Responding to Your Child’s Bite

Marc is preparing dinner and his two children—Jack (3 years) and Jalen (1½ years)—are playing with cars on the kitchen floor. Suddenly, Marc hears a bloodcurdling scream coming from Jack that quickly turns into sobs. Between sobs, Jack shows his dad his arm and slowly says, “He bit me.” Jalen has bitten Jack. Marc is frustrated. He doesn’t know what to do. Jalen bites often. He bites his brother, other children on the playground, and children in his childcare class. Marc is not sure how to respond. He wonders if he should use “time out” as a consequence, but thinks that Jalen is just too young to understand the relationship between biting and a “time out.”
The Focus

Many toddlers and young children bite. Developmentally, most toddlers don't have enough words to express how they are feeling. They primarily rely on sounds and actions to communicate what they are thinking and feeling. Biting is one of the ways toddlers express their needs, desires, or feelings. While biting might be very frustrating, your child is not biting purposefully to annoy you or hurt anyone. Your child might be biting to say, “I’m scared,” “People are crowding me,” or, “I’m frustrated.” Naturally, parents and caregivers worry that biting might seriously injure another child. And they worry about the negative impact for the biter as well, such as being avoided by other children. The good news is that there are many ways to reduce and to stop a child’s biting.

Why Do Children Bite?

Young children bite for many different reasons. Understanding why your toddler might be biting is the first step in reducing or stopping the behavior. The following are some of the reasons young children bite.

- Communicating frustration—Many young children bite out of frustration. They often do not know other ways to express their strong feelings. Biting might communicate messages such as, “I don’t like that” or “I want that toy” or “You are in my space.”

- Challenges in playing with others—Some young children can become overwhelmed when playing near or with others. They might not know how to share, take turns, or communicate their wishes or interests.

- Cause and effect—Toddlers might bite to see the effect it has on others. They learn quickly that it gets a BIG reaction and has a major impact from both the children they bite and the adults who witness it.

- Exploration and learning—One of the most important ways toddlers learn about their world is through their senses. Biting might be a way to find out what an object, or person, feels like. In other words, their biting might be trying to communicate, “You seem interesting. I wonder what you feel and taste like?”

- Oral stimulation—Some children bite because they enjoy and seek out the physical sensation of biting or chewing.

- Teething—Many children experience pain when they are teething. Biting or chewing on something can help ease the pain of teething.

- Monkey see, monkey do—Toddlers love to imitate or copy the behaviors of others. They learn so much by practicing behaviors they observe. For example, if Jalen sees Sara bite and sees that Sara receives quite a bit of attention for biting (even if it is negative attention), Jalen might want to try out that biting behavior to see how the various adults in his life react.

- Coping with uncomfortable feelings—When children are hungry, sleepy, bored, or anxious, they are less able to cope with life’s ups and downs (for example, a toy being taken, not getting that second cookie after lunch) and might resort to biting instead of finding other ways to express their needs or feelings.

Normal but Unacceptable

While biting is a typical behavior for young children, that doesn’t mean it is acceptable. Biting can cause discomfort, angry feelings, and on occasion serious injury. Other children may begin to make negative comments about (e.g., “he’s mean”) or avoid playing with children who frequently bite. Social reactions such as these can be very harmful to a child’s relationships with other children and his feelings about himself.

What Can You Do?

Children can be taught more appropriate ways to express their needs and feelings.

Observe

Observe your child to attempt to understand more about why he/she bites. Identify any patterns, such as what happens before your child bites. Notice when, where, and who your child bites. Does he/she bite when crowded in a small space with other children, or when he/she is hungry or sleepy? Does he/she bite when there are a number of children present or when the noise level is high?

Try to prevent biting

Once you understand why and when your child is likely to bite, you can try to change situations in order to prevent it. The following are just a few ways you can use your observations to this end:

- If your child seems to bite when frustrated:
  You can say, “You are so frustrated. You want that toy.” Teach your child simple words such as “mine” or “no.” Teach some basic sign language or gestures for things like “help” or “stop.”
• **If your child seems to bite because he/she is overwhelmed by playing near or with others:**
  Join your child in play by sitting on the floor and coaching him/her in play. Your child might need help to understand other children’s ideas. He/she might also need guidance to learn and practice how to join play, take turns, share, communicate with other children, and get help if he/she needs it. For example, if another child tries to take your child’s doll, you might say, “Molly thinks your doll looks fun. She wants to play too. Can we show Molly where the other dolls are?”

• **If you think your child is biting to see what happens when he/she bites:**
  Clearly and calmly let your child know that biting hurts. Keep your reaction neutral, non-emotional, short, and as uninteresting as possible to avoid teaching that biting has a big effect on the adult. An adult’s big reaction can be very rewarding and reinforcing. Encourage your child to experiment with cause and effect in other ways. For example, you might want to show him/her how to wave “bye bye” so that others will wave back, or let your child tickle you and then give him/her a big laughing reaction.

• **If you think your child might be biting for oral stimulation:**
  Offer crunchy healthy foods such as crackers, rice cakes, or pretzels at snack intervals throughout the day. Or, provide appropriate and interesting items for your child to chew on (e.g., teething toys).

• **If your child is biting because he/she is teething:**
  Give him/her a teething ring or cloth to chew on. Chilled teether can also soothe sore gums.

• **If your child tends to bite when he/she is tired:**
  Provide increased opportunities for your child to rest. Gradually move naps or bedtime up in 10- to 15-minute intervals to earlier times. Ask your child’s other caregivers to watch and stay close when he/she seems tired. Minimize stressful or stimulating activities when your child is tired.

• **If you believe your child might be biting when he/she is hungry:**
  Try to offer more frequent healthy snacks. Show your child what he/she can bite—food.

• **If you believe your child might bite when he/she is bored:**
  Provide novel, interesting activities and toys to explore and play with. Change the environment as needed (when you see your child becoming bored or unfocused) by rotating toys or going outdoors or into different play spaces.

• **If you believe your child might bite when he/she is anxious:**
  Talk about any changes he/she might be experiencing. Help your child put words or signs to his/her feelings. Attempt to keep confusion and uncertainty at a minimum by talking about transitions, schedules, plans, etc.

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**What Can You Do in the Moment When Your Child Bites?**

1. Quickly yet calmly remove your child from the person he has bitten. Calmly (e.g., without yelling or scolding), clearly, and firmly say, “Stop. No biting. Biting hurts.” Show and explain the effect of the bite on the other child. For example, you might say, “Jack is crying and sad because the bite hurts him.”

2. Focus most of your attention on the child who was bitten. Understandably, adults often react strongly to the child who bit as they try to correct the biting behavior. However, even negative attention can encourage the biting. Helping to soothe the child who was bitten teaches empathy and helps the child who bit to understand the power of his actions. It might be helpful to say to the child who was bitten, “I’m so sorry this happened. I know biting really hurts,” as a way to model apologies and empathy. Avoid trying to get your child to apologize. While it is important for your child to develop empathy, trying to get your child to apologize typically results in paying more attention to the biter and not the child who was bit.

3. Acknowledge your child’s feelings. You might say something like, “You are frustrated. Let’s find another way. Touch gently or ask for the toy. You can say, “Can I have that?”

4. When your child is calm (not in the heat of the moment), teach him/her other ways to express his/her needs and desires. For example, you might say to your child, “Biting hurts. Next time, if Sienna is grabbing your toy you can say stop or ask a grownup for help.” It might be helpful to role play scenarios where your child can practice saying “stop” or “help.”
What to Do When Biting Continues

- **Be patient.** It can take time to learn a new way to cope with difficult feelings. Continue to observe and try to understand as best you can the purpose of the biting, the need it is meeting. Stay calm when it happens and focus on teaching your child alternative ways to get needs met. Continue to help put words to your child’s experience: “You don’t like it when Jalen bites. You can say ‘stop.’”

- **Shadow or stay within arm’s distance of your child during playtime** with other children and/or at times when you believe your child might be more likely to bite. Staying close gives your child a sense of security and makes it easier to intervene before your child bites.

- **Talk to others who care for your child.** Share with your child’s daycare provider or other caregivers the strategies you use when your child bites. Share the observations you have made about when your child seems to be more prone to biting. Ask your childcare provider for help and suggestions for preventing and responding to biting. Try to have all caregivers approach the biting in the same way.

- **Provide your child with education about teeth and what teeth are for.** Teeth are for chewing foods, not people. Offer your child appropriate things to chew.

- **Read books about biting.** As you read, ask your child how the different characters might be feeling. If you have an older toddler, you can ask him/her to “read” the book to you by telling you what is happening based on the pictures. Some recommended titles include
  - *Teeth Are Not for Biting* by Elizabeth Verdick
  - *No Biting* by Karen Katz
  - *No Biting, Louise* by Margie Palatini

What Not to Do

- **Don’t bite back.** Biting a child back to show what it feels like creates confusion and fear. Young children often cannot make the connection between why you bit them and their own biting. And it teaches that biting is an acceptable problem-solving method. Biting hurts and can be considered a form of child abuse.

- **Don’t use harsh punishment.** Yelling, scolding, lecturing, or using any form of physical punishment has not been demonstrated to reduce biting. Harsh reactions such as these might increase your child’s level of anxiety or fear and might cause more biting. They also do not teach children a new skill to use instead of biting.

When to Seek Professional Help

If your child’s biting does not decrease over time, you might want to consider seeking guidance from your pediatrician or the nurse in your doctor’s office or medical clinic. If your child is enrolled in an early childhood or Head Start program, ask if there is somewhere there who might be able to address the biting or refer you to another professional. A child therapist or a child development professional can help you to sort out potential reasons for your child’s biting and to devise a plan to address it.

Repair
What is Repair?

For the purposes of this toolkit, repair means to fix or mend a relationship.

Why is Repair Important?

• None of us are perfect and our conversations and exchanges with others will not always go how we would like. The good news is we can repair breaks in relationship and prevent further damage from occurring.

• Even when mistakes are made, repair helps children know they are loved, cared for and accepted, and helps them trust that adults will attempt to set things right.

• One of the most important ways of keeping children safe is through the adult-child relationship. Repair:
  • Teaches children how to admit when they are wrong and take responsibility.
  • Teaches children how to have trusting relationships with others.
  • Maintaining a positive relationship with children can decrease misbehavior and increase cooperation.
  • Seeing how mistakes affect others helps children develop empathy.
What Can Be Done?

Before having any conversation with children, it is important to be completely calm. Be prepared to respect their boundaries by allowing them to avoid eye contact and letting them make the first move to engage in physical contact with you.

When you make a mistake

- Identify the mistake that was made and apologize. Take responsibility for it.
- Ask how the child felt about the mistake, and accept any feelings expressed.
- Tell the child how you feel about having made the mistake.
- Problem solve how you will avoid the same mistake in the future and identify what each of you will do. Be specific.

When a child makes a mistake

- Use “I” statements instead of “you messed up” statements. Beginning sentences with “I” and making the statements about yourself and how you feel rather than what the child did decreases feelings of defensiveness.
- Explore how the child could have handled the situation differently and offer reassurance that you still care.
- Help the child develop a “calm down” plan and think of ways to handle difficult situations in the future.

Other tips

Playtime with children is one of the most fun and effective ways of nurturing relationships.

- If possible, devote 10 – 25 minutes each day to one-on-one playtime. During this time, plan to give the child your undivided attention, free of distractions.
- Let the child be in charge—follow his/her lead.
- Talk to the child, be curious and interested in what he/she is thinking, feeling and experiencing. Ask open-ended questions and phrase guidance positively. For example, “Tell me about your drawing,” or “What would happen if you turned the puzzle piece the other direction?”
- This is fun time—save discipline for another time.

MORE INFORMATION

I Can’t Believe I Did That! And How to Make Repairs

by Jody McVittie, Sound Discipline blog

Reading this in print? Go to:
https://sounddiscipline.wordpress.com/2011/02/16/i-can%E2%80%99t-believe-i-did-that-%E2%80%93-and-how-to-make-repairs/
Miscellaneous
What is Self-Care?

Self-care is a conscious, active choice to engage in activities that promote optimal physical, emotional, spiritual, and psychological health.

Why is Self-care Important?

- Witnessing children’s reactions to traumatic experiences or hearing their story is often difficult. When we bear witness to this on a daily basis, it can become difficult to process the sadness and trauma of another person. Sometimes it can bring up our own past experiences or make us feel like we are directly sharing the other person’s pain. This is called vicarious or secondary trauma. Caregivers are at high risk for experiencing this.

- Prolonged, unrelieved stress or secondary trauma can lead to burnout (mental, physical and emotional exhaustion that results in the inability to effectively care for ourselves or others).

- Because the effects of stress and secondary trauma often build up slowly, caregivers sometimes don’t recognize them until they have reached burnout.

- Practicing self-care is the best way to combat stress and prevent burnout.

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**Signs of Burnout**

**Physical**
- Feeling drained and tired most of the time
- Frequent muscle aches, headaches, and back pain
- Change in appetite or sleep habits
- Decreased ability to fight infection, feeling sick a lot

**Emotional**
- Sense of self-doubt or failure
- Decreased sense of accomplishment or satisfaction
- Feeling defeated, trapped and helpless
- Increasingly negative or cynical outlook
- Loss of motivation
- Feeling alone in the world or a sense of detachment from others

**Behavioral**
- Withdrawing from responsibilities
- Taking longer to get things done, putting things off
- Isolating oneself from other people
- Taking one’s frustrations out on others
- Skipping work or coming in late and leaving early
- Using alcohol, drugs, or food to cope
What Can Be Done?

- Take time daily to practice self-care. Make an appointment with yourself or schedule it into your day if needed. Guard this appointment like you would any other important appointment you have scheduled.
- Pay attention to how you are feeling so that you can deal with stress and secondary trauma before you begin to feel burned out.
- Develop a support system.
- Ask for help when you need it.
- If you feel like burnout is beginning to have a foothold in your life, talk to someone who is trained to help.

Self-Care Ideas

- Exercise: walk the dog, do yoga, lift weights, or whatever you enjoy.
- Take a bath or shower.
- Read a book.
- Do something creative...draw, paint, work on a craft or building project.
- Talk to a trusted friend.
- Write in a journal.
- Laugh...watch a funny movie or comedy show.
- Listen to music that you find uplifting or relaxing.
- Spend time in nature.
- Relax, even for five minutes. Sit quietly, meditate, pray, or simply focus on your breathing.
- Get the sleep you need.
- Eat well. Don’t skip meals, and choose healthy snacks.
- Drink plenty of water or other non-caffeinated beverages during the day.

MORE INFORMATION

20 Tips to Tame Your Stress

Reading this in print? Go to:
http://psychcentral.com/lib/20-tips-to-tame-your-stress/
Military Families

Families with members in the military face unique situations that can make parenting more challenging. Being separated from a loved one during deployment coupled with uncertainty about when they might return places unique stress on families and creates intense, often mixed feelings. It is important to recognize that these feelings are a normal response to these stressors.

The Deployment Cycle

- **Predeployment:** the time leading up to deployment is often strained by uncertainty about the future and a sense of urgency to get household tasks completed. It is common for arguments between couples to increase as the time to say “goodbye” approaches because of the underlying irritability and tension both are feeling. It can help, although it can be difficult, for couples to talk about what they expect of each other while they are apart.

- **Active deployment:** the time period between departure through the first month or so of deployment. It is often a time of emotional ups and downs.

- **Sustainment:** the time from active deployment until a month before the service member returns home. During this time, those left at home establish routines, build a support system, and begin to feel like they can manage things on their own. There is ongoing concern, however, for the wellbeing of the service member, especially if that person is in a combat zone.

- **Redeployment:** the month before the service person returns home. It is often filled with deep and mixed emotions.

- **Postdeployment:** begins when the service member returns home and lasts about three to six months. Often, a “honeymoon” period follows the return home. As time passes, parents are faced with having to readjust and renegotiate roles and responsibilities in the household.

Families who experience multiple deployments report the feeling of never getting back to where they began before another deployment happens again.

**Clues that children may be having difficulty**

- Increased whining, crying and/or clinginess
- More frustration and difficulty calming down
- Increase in aggressive behavior
- Withdrawal, or decreased interest in activities and other people
- Changes in eating and/or sleeping patterns
- A return to behaviors from when a child was younger, such as thumb sucking, toileting accidents, or waking at night
- Greater fear of separation from familiar caregivers
What Can Be Done?

- It is the little things said and done that make a difference for children. Spending special time with children, helping them name what they are feeling, accepting and validating their emotions, and keeping or establishing routines are all ways children can be supported.

- Caregivers can share a story about a time when someone they loved and trusted helped them through a stressful time, and then help children think of what would be helpful for them.

- Openly communicate and advocate for children. For example, a parent might say, “I’m leaving for Iraq next month. Can we talk about what this means for [child’s name]?”

- Take time for self-care.

MORE INFORMATION

Supporting young children of military families
Content adapted from Dombro, A. (2007)

Reading this in print? Go to: