

Healthy Child Development

Sleep & the Developing Brain

Quality sleep is essential to your child's healthy development, and their ability to focus and succeed in future years. This is especially true of early childhood years (0-8 years of age). Here is an excerpt from a study entitled, *Associations Between Sleep Duration Patterns and Behavioral/Cognitive Functioning at School Entry*:

“The finding that short sleep duration in the first 3 years of life was associated with hyperactivity/impulsivity and lower cognitive performance on neurodevelopmental tests at age 6 is provocative and potentially very important.

These findings appear to be consistent with previous evidence for short-term effects of sleep loss. Yet some aspects of their findings are quite novel. Notably, they reported that specific cognitive deficits and high hyperactivity scores at age 6 were most strongly associated with a pattern of short sleep duration at age 2.5 years, despite the increase to normative sleep patterns from age 3.5 through 6 years. This suggests that obtaining insufficient sleep during the first few years of life may have long-standing consequences.”

Read the Study [here](#).

SOURCE | Touchette E, Petit D, Séguin JR, Boivin M, Tremblay RE, Montplaisir JY. Associations between sleep duration patterns and behavioral/cognitive functioning at school entry. *Sleep*. 2007 Sep;30(9):1213-9. doi: 10.1093/sleep/30.9.1213. PMID: 17910393; PMCID: PMC1978413.

Developmental Milestone Information

Developmental milestones are an essential component of supporting your child's healthy growth and development. The CDC offers a great assessment tool showing developmental milestones for children aged 2 months to 5 years old. This milestones checklist represents an average age when certain developmental skills are reached, and should not be taken as a definitive guide to *all* children. Used in conjunction with teacher partnerships, physician observations, and the knowledge of engaged parents, it can be a useful tool.

Download the milestones checklist & tips resource [here](#).

Developmental Screenings

From the CDC's website:

The American Academy of Pediatrics recommends that children be screened for general development using standardized, validated tools at 9, 18, or 30 months and for autism at 18 and 24 months or whenever a parent or provider has a concern. Ask the doctor about your child's developmental screening.

Easterseals, provides parents with FREE access to the Ages & Stages Questionnaires, Third Edition, one of many general developmental screening tools. Click [here](#) to learn more and take the screening. Be sure to share the completed questionnaire and results with your child's doctor. Learn more about developmental screening [here](#).

NAEYC

Here are just a few helpful articles from the National Association for the Education of Young Children. Feel free to give us suggestions to add to our list.

[Observation: The Key to Understanding Your Child](#)

[Rocking and Rolling—It Takes Two: The Role of Co-Regulation in Building Self-Regulation Skills](#)

Copper Mountain College Courses

There are many affordable (and sometimes nearly free!) classes available locally. We recommend those taught by Professor Kim Martin. Public service programs can drop the cost of class tuition to \$4 per semester, depending on your income level. Prof. Martin's online classes are useful, collaborative, and highly relevant. She is an asset to this community, and we're fortunate to have her guidance as an advisor to our program.

Apply & register for upcoming classes [here](#).

Parenting Support Workshop

Developmental Phases | Session 1

JeanAnn Tulloch & Kimberly Andromeda Zzyzx

On Children by Kahlil Gibran

You may give them your love but not your thoughts,
For they have their own thoughts.

You may house their bodies but not their souls,
For their souls dwell in the house of tomorrow,
which you cannot visit, not even in your dreams.

You may strive to be like them,
but seek not to make them like you.

For life goes not backward nor tarries with yesterday.

You are the bows from which your children as living arrows are sent forth

<p>Antecedent</p> <p>What happened before the behavior? What was your child doing or saying? What time did it occur?</p>	
<p>Behavior</p> <p>Describe the challenging behavior or unsolved problem. What actions did your child take? What did they say?</p>	
<p>Consequence</p> <p>What was the result of the behavior? What happened right after?</p>	
<p>Developmental Relevance</p> <p>What was the challenge your child struggled with? What were their stuck points?</p>	
<p>Interpretations</p> <p>What do you think your child was trying to accomplish?</p>	
<p>Plan of Action/Strategies</p> <p>Think about interventions you can do: Can you model behavior? Are there books you can check out on related topics? Role playing? Introducing new tools? A teacher or professional you can go to for support?</p>	

How to Write about Behaviors

Describe the behavior in specific, observable, measurable language. For example, rather than saying “Kimberly is selfish” you might say, “Kimberly threw my paperwork in the trash, ran around the house and yelled.” Avoid interpretations in steps A, B, and C. **This is essential!** When you have a clear, precise description of the behavior you can set your adult lens aside, and begin to figure out the purpose of the behavior from your child’s point of view. Only then can you decide on a desired replacement behavior to practice, model and support.

Examining the Behavior’s Purpose ³

Your child may be trying to access or avoid attention from peers or adults, sensory stimulation or tangible objects. All problematic behavior is designed to communicate something, gain something or avoid something. When a child is trying to get something through their negative behavior, they need assistance, education or scaffolding around how to access the solution. So often, the reasons behind challenging behavior can be hard to understand or pin down. We bring a lot of adult context and experience to children’s actions where that adult lens does not belong. It’s easy to forget that these little humans have only been on the planet for a short time!

Does my child get enough sleep, exercise and nutrition?

So many factors can affect your child’s capacity to function. As adults, we’ve developed skills to combat these at a higher level. Sometimes it really is as simple as a need for more food, sleep, movement or connection.

Look for patterns. What time of day do these behaviors occur? Is it a similar time?

If the answer to this is yes, it may be related to one of the physical factors above.

What is your child trying to communicate, gain or avoid?

Think through what the function of their behavior may be... are they seeking connection or attention? Are they struggling with big emotions? If you’re feeling confused about the reasons, you can try looking at the context and components surrounding their behavior first, rather than their actions.

Where is my child at in their development?

Sometimes behavior that feels new, intense, unexpected from your child can actually be a part of what is “normal” in that developmental stage of growth. An example of this is, your child has been fine sleeping in their own bed and at 4 ½ they begin coming to your room, wanting to sleep in your bed, talking about scary dreams or monsters. This might feel like the child is manipulating the situation when in fact, children this age often begin to experience very scary nightmares and have imaginations that are very vivid. They are still figuring out what is real and what is not real and their fear and need for comfort is an appropriate response.

Behavior	Purpose	Need
Example using a child in the 2-3 year old range		
While parent is reading, child is jumping on furniture, and crossing physical boundaries with parent (pinching, tickling when asked to stop, etc.) & negative attention-seeking	The child may be seeking positive attention and connection.	Child may need to be taught how to get positive attention.
Example using a child in the 4-5 year old range		
After moving to a “big kid” bed and going through a period of stable sleep with no nightmares, the child begins running into parents’ bed at night with intense nightmares.	Children at 4-5 years old are undergoing such intense brain development, and are really parsing the differences between reality and fantasy.	Your child needs to know you are available to them when they are fearful, and may need to talk about what is real and what is not.

Meeting Your Child’s Need & Next Steps

Replacement Behaviors

What do you want to help your child do or say instead? Consider a more appropriate replacement behavior that would help your child positively meet their need or resolve the problem. You need to be realistic here. Think about small steps towards achievement. Is your expectation for the speed of progress reasonable? Is your solution one that is achievable for a 3, 4 or 5 year old’s developing brain?

Positive Support

How can you support your child in accessing their need? Can you model behavior in calm moments? Can you practice new tools together? This is where modeling, giving examples, education and practice come in. In the example for a 2-3 year old child above, the parent might need to model positive bids for connection for their child. They could say something like,

It seems like you want to spend time with me. Instead of pinching, you can ask me, “Can we play together?”

Potential Indicators for Neurological Testing or Assessment ²

Are my child’s problems getting in the way of their day-to-day functioning?

A tantrum during getting ready time in the morning, avoiding tasks or getting to bed on time can be expected/typical. However, if this behavior happens daily, or multiple days a week for multiple weeks without improvement despite your interventions, you may want to seek out additional support or testing from your GP, a child psychologist, or other professionals.

Can my child stay focused when they want to?

We all have bad days—at any age— but if notable changes in mood are happening very frequently, there could be an underlying mental health issue. Is your child able to focus on desired tasks? Can they engage for any amount of time in play that looks/feels enjoyable to them?

Does my child change moods for no apparent reason?

When your analysis of your child's behaviors are consistently resulting in a big question mark when it comes to the cause, trigger or purpose, you may want to seek additional help.

Is my child flexible with changes to their routine or new situations?

"I don't want to" and "No" are incredibly appropriate responses from children as they explore their agency and autonomy. If your child exclusively rejects all new situations or experiences, it may be time to seek additional support or testing.

Collaborative Problem Solving¹

1 | Gather information

Empathy is a foundational piece of examining challenging behaviors. You may need to gather information from your child so you can understand their concern or perspective. A great way to begin these conversations in an open, non-punitive way is to begin with "I've noticed" and end with "what's up?"

I've noticed you usually run away when you are upset or angry. What's up?

2 | Reflective Listening

Reflective listening is the method of repeating back whatever your child has shared, and adding a clarifying question, like "I don't quite understand", "What do you mean?" or "Can you tell me more?" This process is effective in two major ways:

- First, it helps you confirm that what you are hearing your child say is what they *mean*— less chance that the real reasons get lost in translation.
- Second, it helps your child process what is happening as they *hear* what they've said. This is a helpful opportunity for your child to reflect on their feelings and actions from a different vantage point, and also a great way to build their emotional awareness & vocabulary.

You might say something like,

It sounds like you felt angry when I said we had 5 minutes left at the park. You didn't feel good, and you ran away. Can you tell me more?

This helps you and your child break the unsolved problem into its component parts. If your child doesn't have an answer here or says "I don't know" that's okay! You can say something to take the pressure off, such as, "That's okay, we are not in a rush." or "We can figure this out together."

3 | Explain Your Concern/Need

Help your child understand the problem or danger this behavior is causing. For example, in responding to a child's impulse to run far away when upset, you might say something like,

I can see that when you are upset you want space. I am worried because when we're at the playground in town together it's my job to keep you safe. I can't keep you safe if I can't see you.

4 | Invite Their Participation

Now that you've gathered more information and involved your child in a discussion, ask for their ideas. It helps to summarize the info from previous steps in your question. For example,

This is the step where you invite your child or student to work collaboratively with you on identifying possible solutions to the problem. The most effective solutions are the ones that will be realistic and mutually satisfactory, meaning they address the concerns of both the child and the parent or teacher. Give your child or student the first opportunity to brainstorm solutions by asking "do you have any ideas?" and if the ideas they share don't address both concerns you can add "I wonder if there is a way..."

References

1. Adapted from *The Explosive Child*, by Dr. Ross Greene, clinical child psychologist
2. CDC's Developmental Milestones & related resources for parents
3. National Association for the Education of Young Children (NAEYC), "Observation: The Key to Understanding Your Child"