### Module 4

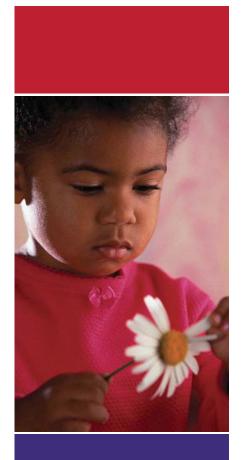
## Handout 4.6: Leadership Strategies





후 Evidence-Based Practice: 활 Young Children 양 with Challenging Behavior

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# **Recommended Practices**

Supporting Infants and Toddlers with Challenging Behavior Lise Fox, Ph.D. – University of South Florida

In the last decade researchers, policy-makers, educators, practitioners, and families have become increasingly aware of the importance of the emotional and social development of infants and toddlers. Research has shown that development in these early years provides the foundation for the child's future emotional, social, and cognitive development. Research has also indicated that problems that occur in the infant's or toddler's social or behavioral development are likely to be early indicators of more difficult and persistent challenging behavior as the child grows older.

The public health model of universal, secondary, and tertiary prevention and intervention practices provide a helpful framework for considering the types of supports that may be provided to very young children and their families. At the universal level of prevention, all young children and their families need regular and adequate health care, screening and the monitoring of their child's development, nurturing relationships with caregivers, parenting advice and support, anticipatory guidance from health care providers, high quality early education and care, and child guidance as the baby begins to interact with others and develop relationships. Secondary prevention efforts may include community programs, such as parenting classes, monitoring and home visiting for high-risk parents, community education about child development through pamphlets, videos, television programs, resource and referral support for families who have multiple risk factors, professionally guided play groups, etc. At the tertiary level, when children are showing evidence that there are delays in their social or behavioral development, focused intervention efforts should be provided.

Focused intervention may be delivered by home visitors who support families in learning the critical skills needed to support their children's development and by professionals who work directly with the children to demonstrate to family members and other caregivers strategies and techniques that may be used to support them. The following are considerations that should be addressed when supporting very young children and their families:

## Module 4



## Helpful Resources

Brazelton, T. B. (1992). Touchpoints: The essential reference. Reading, MA: Addison-Wesley, 1992.

Bronson, M. B. (2001). Self-regulation in early childhood. Nature and nurture. New York, NY: Guilford.

Honig. A. S. (1996). Behavior guidance for infants and toddlers. Little Rock, AR: Southern Early Childhood Association.

Landy, S. (2002). Pathways to competence: Encouraging healthy social and emotional development in young children. Baltimore: Paul H. Brookes.

Liberman, A. (1993). Emotional life of the toddler. Washington, DC: Zero to Three.

Parlakian, R. (2002). Building strong foundations: Practical guidance for promoting the social/emotional development of infants and toddlers. Washington, DC: Zero to Three

Sameroff, A. J., McDonough, S. C., & Rosenblum, K. L. (2003). Treating parentinfant relationship problems: Strategies for intervention. Washington, DC: Zero to Three.

Zeanah, C. H., (2000). Handbook of infant mental health (2nd ed.). Washington, DC: Zero to Three.

#### On the web

www.challengingbehavior.org Center for Evidence-Based Practice: Young Children with Challenging Behavior

www.csefel.uiuc.edu Center on the Social and Emotional Foundations for Early Learning

www.zerotothree.org Zero to Three

www.ptic.org The Program for Infant Toddler Caregivers

www.rtc.pdx.edu Research and Training Center on Family Support and Children's Mental Health

#### Early intervention for infants and toddlers with challenging behavior is essential. It is never too early to begin to address concerns about a child's problem behavior although a major task will be to identify if the behavior is developmentally expected or of a level of intensity or persistence that exceeds normal development.

It is important to have a full understanding of the infant's/toddler's physical/medical status, developmental status, and medical/ intervention history before developing interventions. In addition to information on the child, the interventionist should seek to understand the family system and factors that may affect the child's relationship with others.

Intervention approaches for infants and toddlers must be focused on the parent and/or caregiver interaction and the child. Intervention approaches typically include teaching the parent interaction skills to assist the infant and toddler in coping with difficult situations, regulating sensory input, understanding routines, and supporting the child's language and social development.

A highly effective approach to intervention is for the interventionist to identify routines or activities that are difficult for the caregiver and child and to support the caregiver in developing new skills or implementing strategies that reduce the child's discomfort or problem behavior.

The natural environment is an optimal location for intervention. The natural environment includes both home and community settings that the child is likely to access (e.g., parks, home, child care, stores, etc.) Treatment offices or clinic settings do not allow the interventionist to observe and analyze the complex factors that occur in the natural environment and affect children's behavior.

Intervention approaches should be family-centered and focus on building the capacity of the child's caregivers to read the child's social and emotional cues and facilitate the development of self-regulatory behavior, emotional expression, and social problem-solving.

Intervention approaches must consider the cultural context of the family. Social development and behavior expectations are culturally defined and may differ across families. Interventionists should be trained in cultural competence and strategies for providing culturally responsive supports.

Intervention services and supports should be coordinated with other supports and services the family receives. Interventionists should seek to collaborate with other providers to ensure a comprehensive and coordinated approach.

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