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Voluntary Early Learning Guidelines

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Table of Contents

Introduction …….. 1

Physical Health and Stamina ……..
- **Physical Development**
- **Health and Personal Care**
- **Safety**

Functional Gross and Fine Motor Skills ……

Adaptive personal, social and emotional skills …….

Cognitive Processes …….
- **Literacy**
- **Numeracy**
- **Academic Achievement**

Principles of Language ……
- **Expressive**
- **Receptive**

Multiple Approaches to Learning ……..

Creative Expression Processes ……
- **Play**
- **Music**
- **Art**

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Introduction

North Dakota Early Learning Guidelines

Developmental Standards and Indicators

What are Early Learning Guidelines?

The North Dakota Early Learning Guidelines are a voluntary set of standards that can be used as a resource to guide children's development and learning in the formative years from birth up to entry into Kindergarten. The Guidelines are designed for parents, child-care professionals, and teachers who care for and teach young children in North Dakota. The North Dakota Early Learning Guidelines are aligned with the North Dakota Curriculum Standards and Benchmarks established by the North Dakota Department of Public Instruction for children in grades Kindergarten through Grade 12. The Early Learning Guidelines are designed to outline the skills, knowledge, and dispositions that young children need prior to starting in school and for ensuring a successful transition into Kindergarten.

The following sections outline the background, principles, and structure of the North Dakota Early Learning Guidelines. The information presented below will help you understand why the developmental standards and indicators were created and how they can be used.

Why are they needed?

The first five years of a child's life is a remarkable period in the life of a child. The growth and development of the young child is significantly accelerated during these early years. Newborns begin their development as infants who are totally dependent upon adults for all major life functions. Within three years, the infants emerge as young children, who can walk, talk, use their hands, demonstrate symbolic thinking, and express themselves and communicate with the world around them. There is no other period of human development with as significant a growth rate. So amazing is human development during this period that some have referred to these years as the "magic years."

Research has demonstrated the significant contributions that adults make in enhancing a child's early development and learning. Parents are clearly their child's first and most important teacher. But parents are not alone. Many family members, community members, friends, pediatricians, and teachers support them

in their nurturing roles. While parents have the primary responsibility for nurturing and educating children prior to enrollment in kindergarten, there are many resources to support parents during these critical early years. Throughout North Dakota, communities have available a variety of services and programs that serve young children and their families. Many young children spend at least part of the day in the care of someone other than their parents. For this reason, the North Dakota Early Learning Guidelines were written for all consumer groups that provide direct support for the growth and development of young children. This includes the parents, extended family members, medical personnel, child-care personnel, and teachers. Secondary users of the Early Learning Guidelines are those individuals who may not provide direct services, but who are able to exert direct influence in shaping state and local policies that support the development of young children. Included in this category are state legislators, employees of human service and education agencies at the local, regional and state levels, and personnel providing training at the Colleges and University's. This category also includes individuals from any walk of life who serve on local, regional, and state advisory committees that make recommendations for policy changes.

What is the Underlying Theory?

There is no single, universally accepted theory of child development. Indeed, researchers and educators hold different sets of researched-based beliefs, or theories, about how young children grow and develop. Examples of differences in theories include researchers who believe in the principles of behavior management to shape appropriate behaviors and learning outcomes; theories that stress the importance of cognitive development; and theories that place significant value on environmental experiences. Some theories emphasize genetics; others stress children's experiences with the learning materials in multiple environments. Some theories emphasize emotional development, others stress intellectual development. Some theories support firm and directive parenting and teaching, while other theories endorse parenting and teaching that provides indirect guidance and support. In addition to the differences observed in the research community, different perspectives on how children should experience and interact with the world around them are seen across families, communities, and cultures.

Considering the abundance of available theories, the North Dakota Early Learning Guidelines embed elements from several different theoretical approaches and cultural contexts. The Early Learning Guidelines bring together different perspectives with established scientific research. The guidelines represent goals for young children's development that reflect the perspectives, values, and recommended practices of a diverse range of people, institutions, and communities

throughout North Dakota. The indicators are based on the concept that young children's learning is multi-dimensional. Since children grow physically, socially, emotionally, linguistically, and cognitively at the same time, all dimensions of learning are critical to healthy development and must be valued. While these indicators may not encompass every hope and expectation of all families, communities, or cultures, they are a comprehensive foundation for addressing the learning and development of all young children. To that end, the indicators can serve as a tool for discussion, dialogue, and sharing between parents, early childhood professionals, and community members.

What is the Purpose of the Developmental Standards and Indicators?

There are currently many different programs within each community in the state that provide services to young children. These programs and services are provided by a diverse group of agencies including programs sponsored by the public health, social services and education agencies. Services are often provided by private programs, religious entities, city-sponsored organizations, and state-funded programs. Considering the vast assortment of agencies and programs providing services to young children, it is not surprising that there is often little alignment in what is expected for children across the various settings in which young children spend their day. Because of the importance of the early years, and because it is beneficial for children to experience consistency from the many adults who play a part in their development, the state of North Dakota decided to create a resource that provides a common understanding about what young children should know and be able to do at different stages in their development. The expectations, or developmental standards and indicators, provide essential information for those who love, care for, and educate young children. It is hoped that the early learning guidelines will be use locally by communities across the state to strengthen and coordinate early childhood practices, programs, and policies.

Broadly defined, the Developmental Standards are a set of statements that reflect expectations for young children's knowledge and behavior. They are designed to support the growth and development of young children from birth to entry into kindergarten, whether the children are in their own homes, others' homes, in licensed child care, early intervention programs, Head Start, Infant Development or in private or public preschools. The Standards serve as a resource, informing parents, caregivers and teachers in these settings about expectations for children's development and learning. The Indicators are sequential steps necessary

to attain the goal statements articulated in the Developmental Standards. The Indicators spell out what young children should know and be able to do by the time they reach the end of each of the critical stages of development. The age ranges are comprised of varying intervals below the age of two years including: 2months, 6 months, 9 months, 12 months, 15 months, 18 months, and 24 months. The interval ranges above age 2 years are broader and encompass larger intervals. The intervals reflect the typical grouping of young children in most early childhood settings. The specific levels include 30 months, 36 months, 42 months, 48 months, and 60 months. The age ranges of the Indicators are flexible, allowing for variations within developmental ranges, while still providing helpful guidelines for parents and caregiver.

Parents and caregivers can use the Indicators as a way to better understand what they can expect of see as their children develop and to better support and enhance their children's development and learning. Teachers can use the Indicators as a framework for a learning continuum that will help each child's transition from one stage of development to the next. By specifying skills and competencies for children, the Indicators have the potential to help reduce inequities in achievement as children mature. The Indicators can also be used as the basis for curriculum development and for the professional development of those who work with young children.

The Indicators are designed to:

- Provide a common tool for discussion, dialogue, and sharing between parents, early childhood professionals, and community members about reasonable expectations and practical strategies for all adults who care for and teach young children;
- Contribute to a unified vision for the early care and education system in North Dakota; and
- Create a continuum of learning that links early care and development to later success in school and in life by aligning the indicators with the North Dakota Curriculum Standards and Benchmarks.

The Indicators are not designed to:

- Serve as an exhaustive guide to child development and should not be seen as a developmental checklist that provides the full scope, a definitive breakdown, or an exact sequence of developmental indicators;
- Serve as the replacement for a curriculum although they can be adapted by teachers to supplement many different curricula;
- Serve as an assessment instrument to determine children's eligibility for various programs or services;

- Serve as an assessment instrument to gauge children's functioning or skills for an Individual Family Service Plan (IFSP) or Individual education Plan (IEP);
- Serve as an assessment tool to collect statewide information on the overall status of children in North Dakota. If an assessment system is desired, the Indicators can inform the content of, but not substitute for, a technically developed reliable and valid assessment.

How were the Indicators Developed?

The Developmental Standards, Indicators, and Supportive Practices were developed through a comprehensive and collaborative process involving many sources of information, expertise, and guidance. An Advisory Committee, comprised of representatives from several consumer groups in North Dakota worked closely with the three authors commissioned to identify the indicators, field test the process, and write the final document. Agencies and programs represented on the Advisory Committee included the Department of Public Instruction, Department of Human Services, Developmental Disabilities Division, Resource and Referral Program, child care providers, preschool teachers, Head Start personnel, Early Childhood Special Education teachers, Infant Development interventionists, and University training programs.

The content of the Indicators was derived from two primary sources. First, an extensive review of the latest research on early childhood development; international, national, and state level early learning standards documents; reports by federal agencies; guidelines issued by professional organizations; and quality child development published articles, texts and other resources authored and published in peer-reviewed journals.

Second, extensive feedback was secured from parents and professionals across North Dakota. A broad group of stakeholders reviewed and field-tested the initial draft of the document. Groups participating in the field testing consisted of Head Start Program, Early Head Start Programs, Infant Development Programs, preschool programs, Early Childhood Special Education classroom teachers, child care providers, Right Track personnel, and parents. The final version of the Indicators reflects the thoughtful suggestions and comments made throughout the review process.

What are the Guiding Principles?

One of the earliest collaborative efforts of the Advisory Committee and the writing team consisted of the development and adoption of a set of guiding

principles intended to guide the a) content of the Developmental Standards, b) development of the Indicators, and c) development of the supportive strategies. The principles that established the foundation for the collaborative work on the Indicators are presented below.

North Dakota Early Learning Guidelines

Guiding Principles

The Early Learning Guidelines Advisory Committee has established the following Guiding Principles to guide the development and application of the voluntary Early Learning Guidelines in North Dakota. These guiding principles reflect the knowledge base from scientific research, our values, and our commitment to young children and families.

About Children

1. ***Competent Learners***: Children of all ages are capable and competent learners. Development and learning begins at birth and occurs in all settings and environments. The *North Dakota Early Learning Guidelines* support practices that promote development of young children and assure appropriate expectations and practices.

2. ***Multidimensional:*** A child's early learning and development is multidimensional. Developmental domains are highly interrelated. The *Early Learning Guidelines* reflect the interconnectedness of the domains of children's development: physical health and development, motor skills, personal, social and emotional development, cognitive development, communication development, approaches to learning, and creative expression.

3. ***Unique Individuals***: Children are unique individuals who develop at various rates and learn in different ways. The *Early Learning Guidelines* are designed to help each child develop his or her individual potential through respecting and valuing the differences in children and building upon the individual differences rather than stressing conformity. The *Guidelines* provide opportunities for continuous learning while considering the different settings and methods through which children learn.

4. ***Intellectual***: Children are curious and enthusiastic learners who want to know about the world around them. Intellectual development is a process of acquiring, structuring and restructuring knowledge. As children experience their world directly, they experiment, make discoveries and form hypotheses. They use language to clarify and extend their thinking and to communicate with others.

5. ***Artistic***: Children are artistic beings who learn through their sensory experiences. The children express and represent their thoughts and feeling through a variety of media and forms. The learning environment should provide the time and opportunities for children to experience and respond to their world through their senses and allow children to create and express themselves through a variety of art forms.

6. ***Social***: Children are emotional and social beings with unique personalities. They learn best when they feel secure and valued. When they are accepted and appreciated, they are free to take risks, to make mistakes and to learn from their errors and successes. Children develop and refine their thinking as they interact and communicate with other children and adults. Children benefit from experiences designed to teach them to regulate and express emotions appropriately and communicating attitudes and feelings both verbally and nonverbally. Children also require experiences for learning to comprehend the feelings of others including developing empathy, understanding, and acceptance and for distinguishing between incidental and intentional actions.

7. ***Physical:*** Children are physical beings who, to varying degrees, are physically active and energetic. For children, learning involves whole-body activities, active participation and play. They need experiences that extend their ability to lead safe, active and healthy lives. The learning environment should provide space and opportunities for movement, for manipulation of objects and for acquiring attitudes, dispositions, skills and knowledge for safe and healthful living.

About Environments

8. ***Families***: The first teachers and most important role models for children are the parents and other members of the extended family. Families provide the nurturing environment necessary for developing a child's social and emotional skills. Parents and families provide routines in the home that contain daily opportunities for learning. Routines include spending time together, playing together, working together, conversing, sharing ideas and reading aloud to one another. They share with and support one another throughout their life experiences. Families strive to foster positive interactions and experiences in the home to support appropriate learning and behavior that will prepare the children for school. Families project their philosophies, attitudes and ideas concerning education to their children. Parents and families have needs that change over time.

9. ***Natural Environments***: Since families are the children's primary and most important caregivers and educators, the family home is considered the young child's most basic natural learning environment. The community settings and programs in which families choose to participate comprise other natural learning environments for the child and play significant roles in terms of what opportunities are available to children and how well a child is able to access those learning opportunities.

10. ***Safe, Stimulating Environments***: Young children are entitled to the basic rights afforded all citizens of the society, including special rights and provisions necessitated by their vulnerabilities. Children learn best in an environment where their physical and psychological needs are met because they feel safe, valued as unique individuals, and are actively engaged in acquiring new skills and knowledge.

11. ***Social Environment***: The learning environment is social in nature, providing a psychologically safe, secure and stimulating climate for all children. It provides time and opportunities for children to take appropriate risks, make choices and explore and investigate their world. The learning environment should offer children experiences, which encourage them to interact with others, to develop interpersonal skills and to work and learn cooperatively and collaboratively. The learning environment should also foster the development of a positive

self-concept that includes traits, habits, abilities, motives, social roles, goals and values that define how we perceive ourselves. The ultimate challenge of the social environment consists of teaching the children self-efficacy, or the belief that children can successfully accomplish what one sets out to do, both individually, and collectively.

12. ***Intellectual Environment***: The learning environment is experience rich, providing time and opportunities for first-hand experiences. It facilitates the development of thinking processes by engaging children in activities that stem from their natural curiosity and wonder. Children are invited to explore and represent their thinking in a variety of forms. The environment is rich with language and literacy experiences, providing time and opportunities for children to communicate with other children and adults, to be immersed in oral and written language and to become literate in purposeful, meaningful ways.

About Practices

13. ***Developmentally Appropriate Practices***: All children have the right to be cared for and educated in a developmentally appropriate manner. All children have the right to be treated as an individual with unique strengths, interests, and approaches to learning. Early care and education must address the "whole child" on multiple levels. Childhood is a unique stage in human development, and must be appreciated as such.

14. ***Collaboration***: All children have the right to the necessary supports, resources, and services they need to participate actively and meaningfully in early childhood settings. Providers of early care and education should be prepared to work together with families, follow the parents' lead, and make referrals when children's development appears delayed. Referrals should include collaboration with service providing agencies to ensure that appropriate interventions are identified that utilize the natural environments and daily routines of the children as the context for intervention.

15. ***Brain Development***: All children have the right to have their early experiences acknowledged and recognized as extremely important in their future development. Children come into the world ready to

learn, actively engaging in making sense of their world from birth. The first three years of a child's life set the groundwork for a lifetime of brain development and must be taken into consideration when planning and supporting learning opportunities.

16. ***Cultural Sensitivity***: All children have the right to expect that their home, community, and family lives will be respected in the early care and education setting. The primary language used in the child's home must be respected as the basis for learning a second language. It is recognized that a child's learning is complex and is influenced by multiple cultural and contextual factors.

17. ***Construct Knowledge***: Learning is an ongoing experience where children continually act upon and organize their experiences as they try to make sense of their world. As they interact with information and experiences, they move through the cycle of human learning common to all. This cycle involves movement from awareness (exposure to and notice of events, concepts, people and objects), to exploration (figuring out or bringing personal meaning to events, concepts, people and objects), to inquiry (developing an understanding of events, concepts, people and objects, to utilization (applying or transferring what has been learned about events, concepts, people and objects). The learning environment must provide opportunities and support each level to foster individual growth and development. Opportunities to revisit experiences and information must be provided to facilitate a child's movement through the learning cycle as each interactions strengthens current knowledge and challenges the child to move to the next level.

18. ***Play***: All children have the right to expect that their play is respected as a valuable learning tool. They need enriched learning environments in which to explore their world and be exposed to a variety of experiences to help deepen their understanding. Children learn best through a combination of adult-directed and child-initiated methods, through both guided play and open-ended activities. Play is how a child learns to understand the complexities of the world and is the primary avenue through which they learn about the world around them.

About Providers

19. ***Quality of Care***: All children have the right to expect that their early care and education practitioner has a solid knowledge of child development and continues to improve his or her practice through professional development on current research-based practices. Research shows that quality early care and education contributes to a child's developmental progress, and that staff education and experience are determining factors in high quality programs.

20. ***Monitoring Development***: The *North Dakota Early Learning Guidelines* embed components that can be used to identify goals to help children enhance their developmental outcomes and improve the stimulus value of normalized learning environments and routines. The Guidelines also provide feedback to parents and care providers about the general parameters or expectations for child development across the sequential age levels. In those cases where additional assessment may be needed, the Guidelines serve as a basic framework for communicating data on child developmental outcomes and discrepancies

Who are they for?

Every child has unique characteristics, developing and learning in the context of their family, culture, and community. The Development Standards and indicators acknowledge and embrace the tremendous diversity and variations that exist between young children. In building a resource to develop a common understanding, the Developmental Standards and Indicators have used a broad definition of diversity that includes, but is not limited, to socioeconomic, cultural, racial linguistic, ethnic, gender, abilities and regional variations. The Standards and Indicators attempt to build upon and attempt to represent the rich cultural heritage and knowledge of children and families in North Dakota. In addition, efforts have been made to include the unique learning needs of children with disabilities and children whose home langue is not English.

To this end, the goal statements are intended for all children. The indicators and strategies incorporate modifications to reflect children's diversity. In addition, the ages indicated for achieving each

of the indicators are broad guidelines: given the nature of children's diversity, we expect and treasure differences in when and how children will achieve the indicators. Not all children will achieve all indicators in the time frame specified. Some children may achieve some of the indicators earlier than the age specified while other children may achieve them at a different rate, in a different order, or not at all. In all cases, the timelines offered are guidelines to inform, not to constrain, children's natural course of development.

The role of caring adults and communities is also reflected in the Developmental Standards and Indicators. The document provides some simple play and learning strategies and activities that adults can use to enhance the development of children. It is critical to use the Indicators so that no child experiences any sense of failure. It is also essential to use the Indicators to accommodate different approaches to learning. The intention is for parents and other caregivers to focus on the function of the goal, as opposed to the specific indicator. For example, while it is essential that young children learn to say words to communicate wants and needs, some children may learn to accomplish the same function by using sign language or pointing to pictures to communicate wants and needs.

This document is not designed to fully account for the multiple ways in which children in North Dakota communicate, learn, play, and interact with adults and peers. The intent is that every adult sees a little bit of his or her own unique life experience in the Indicators and uses the document as a basis for extending dialogue about the many contexts in which children grow and learn. On-going collective discussions among parents, caregivers, early learning professionals, teachers, and others will ensure that the Indicators are used in ways that represent the values, aspirations, and effective practices of all cultures and communities in North Dakota.

What is my role as a parent?

Parents and families are the child's first and most important role model and teacher. Families have an extremely important role to play in providing the social and emotional support needed in order to learn and grow. Parents are the child's first teacher, and perhaps the

most influential teacher the child will encounter on his or her life journey.

The section entitled Supportive Practices contains suggestions that are designed to serve as a set of general guidelines for use by parents, grandparents, siblings and other extended family members. Each age interval signifies the outcomes typically expected of a child upon reaching the upper age level cited. For example the skills listed under category 1, 0 to 2 months are the skills typically in place when a child reaches his or her 2nd month birthday. The skills in the next category, 2 to 6 months, include the skills typically seen in children when they turn 6 months.

Each skill that is identified contains suggestions for what you can do to provide stimulation, instructional practice, and enrichment activities to generalize the child's skills. Every attempt has been made to offer suggestions for activities that can be incorporated into the daily living routines of your family and activities that provide parents an opportunity to "play" and "interact" with their child. The workbook style format is designed to provide space for you as a family member to record your observations and responses to the self-reflection questions.

What areas are included?

The North Dakota Developmental Standards and Indicators cover eight major domains or area of development. These domains represent a common knowledge derived from contemporary research. Although presented separately, the eight domains of children's development are highly interrelated. Children's growth and development in one area often influences and/or depends upon development in others areas. No single domain can be considered more important than another.

The domains used to organize the North Dakota Developmental Standards and Benchmarks are:

- ✓ **Physical Health and stamina**. This domain encompasses children's physical health and well-being and the physical ability and stamina to sustain interactions with people, objects, and activities in the environment.

- ✓ **Functional gross and fine motor skills and sensory development**. This domain addresses the functional postures, postural adjustment skills and movement skills necessary to ambulate and access the environment. Fine motor and sensory skills involve the ability to use the senses to take in information and the arms and hands to interact meaningfully with objects and activities in the environment.
- ✓ **Adaptive personal, social and emotional skills**. This domain addresses the emotional competence and ability to form positive relationships that give meaning to children's experiences in the home, school, and community.
- ✓ **Self-care and independence skills**. This domain includes skills that enable the child to perform essential self-preservation and maintenance skills independently of others. This domain also addresses the importance of an individual's need for independence and self-autonomy in developing a positive self-concept.
- ✓ **Cognitive processes**. This domain includes children's ability to understand and think about the physical and social phenomenon encountered in their multiple environments. Specifically, this domain focuses on children's knowledge of objects in the world around them, their logic and mathematical knowledge, their knowledge of agreed-upon social conventions such as numeracy and language concepts, and their understanding and appreciation of the literacy skills necessary for achievement in school and the continuing quest to access knowledge about the world around them.
- ✓ **Language and communication**. This domain encompasses children's understanding of language (receptive) and use of language (expressive). This domain also addresses the functional ability to communicate effectively in different environments and for a variety of purposes.
- ✓ **Multiple approaches to learning**. This domain refers to a child's disposition, rather than ability, for becoming involved in learning and acquiring knowledge. This domain addresses a variety of alternative approaches to learning that accomplish the same critical effect of knowledge acquisition.
- ✓ **Creative expression**. This domain includes the understanding and appreciation of a variety of art forms for enhancing the quality of life including play, music, drama, art, and dance.

Each of the eight domain sections include an introduction, or developmental foundation, that presents the rational and definitions for the domain. Each introduction also addresses the considerations for how individual differences and diversity can be supported as children learn and develop knowledge and skills. The domain introductions conclude with global strategies, referred to as ***supportive practices***, that all care givers can use to help ensure every child receive learning experiences that meet his or her unique needs.

The Developmental Standards and Indicators are structured as follows:

- **Domain**: A domain is defined as a broad category, or dimension, of children's learning and development. The domains consistently describe each dimension of development with equal importance across all age ranges.
- **Developmental Standard**: A developmental standard is a goal statement that describes the desired outcome for each domain area. The development standards comprise eight goal statements for children's development across all age ranges.
- **Sub-Domain Standards**: Some Developmental Standards are further divided into Sub-Domain Standards that comprise a general facet of development within the domain. For example the Developmental *Standard 2. Children will develop functional gross and fine motor skills* has three sub-domains including a) development of gross motor skills, b) development of fine motor skills, and c) development of visual motor skills.
- **Age Group**: Each Developmental Standard is accompanied by a specific set of indicators and suggested strategies at each of the designated age levels including 2 months, 6 months, 12 months, 18 months, 24 months, 30 months, 36 months, 42 months, 48 months, and 60 months.
- **Unique Characteristic of Age Group**: Each age group above 2 years begins with a narrative description of the unique characteristics of that particular age group and implications for that age level in terms of structuring group and/or classroom activities.
- **Indicators**: The indicators describe the expected observable behavior or skill of children. There are several indicators for each age group that demonstrate progress toward the attainment of a particular sub-goal or goal. It is important to note that each child may have unique

ways of demonstrating his or her development progress. The indicators represent some, not all, of the ways that children will demonstrate progress toward attaining the Developmental Standard.

- **Supportive Practices**: Each age group of indicators contains a suggested list of learning activities that adults can engage in with children at home or in an early care and education setting. The activities are designed to foster the children's accomplishment of the indicators. The strategies represent some, but not all, of the ways that adults can interact with children to nurture their learning and development.

How can the Indicators and Strategies be used within and across age ranges?

Because some aspects of learning and development are more predominant in one age range than another, the number of indicators and strategies provided for each age range varies for most Developmental Standards. The indicators build upon one another across the age ranges. It is expected that a child entering kindergarten will demonstrate the indicators at the 60-month level, as well as all indicators preceding this age range. Similarly, the strategies build upon one another across the age ranges. A strategy listed at the 2-6 month level may also be applicable to older children. For example, it is suggested that adults spend time daily interacting and engaging in "turn-taking" with their child. Although the specific behaviors used in turn-taking episode will vary over time, the recommended strategies for facilitating the "turn-taking", or the mechanics of the process, remain unchanged after 2 months of age and are the same for all subsequent age groups.

Alignment with Head Start and K-12 Curriculum Standards and Benchmarks

In the Resource section at the end of the document, an Alignment Chart specifies how the Developmental Standards and Indicators are linked to and aligned with other educational standards used in North Dakota. Given the multiple public programs that provide early childhood care and education, this alignment chart shows how the Developmental Standards and Indicators complement the standards used by specific programs such as Head Start, Early Head Start, and Kindergarten. In addition, the alignment chart shows that the Indicators are useful not only as a stand-alone set of expectations for young children, but also as precursors to more complex and

detailed forms of learning and behavior that are expected in the K-12 education system and defined by the North Dakota Curriculum Standards and Benchmarks. It is important to note that the alignment does not represent a developmental continuum; rather is presents a framework for illustrating how the Indicators connect with other education standards.

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Evidence Based Practice

Evidence based practices, as defined by Dunst, Trivette and Cutspec (2000), are: *"Practices that are informed by research, in which the characteristics and consequences of environmental variables are empirically established and the relationship directly informs what a practitioner can do to produce a desired outcome"*. This definition is well suited for the fields of early childhood care and education, early intervention and early childhood special education. The components, when considered as interdependent variables, fully support a combined approach where developmentally based and empirically based research correlates with successful outcomes for children and families.

Widespread agreement exists that all curriculums should be based on evidence and evaluated for its effectiveness (National Research Council 2001). The focus of such evidenced based practices for curriculum, individual child monitoring and overall program evaluation is only effective when the three elements are considered to be interdependent and function as one unit. This approach uses well-documented evidence to drive professional decisions regarding curriculum, staff and program effectiveness and identifies key curricular characteristics that are most effective and under what conditions they are effective. However, these elements are often considered as separate, independent variables and so the information provided by each is not integrated and fails to provide a comprehensive assessment of effectiveness.

Recent research also indicates that curricula for young children must be comprehensive; include support for social and emotional development, and function to encourage positive approaches to learning. Furthermore, research has shown that curricula implemented in a way that maintains a family's linguistic and cultural uniquenesses demonstrate more success for children. In addition, research has indicated that children learn best when learning is experiential, such as with social, physical and mental activities. Longitudinal research has described the benefits identified when curricula emphasizes child initiation, are well planned consistent and well implemented (NAEYC and NAECS/SDE 2003).

The following indicators of effectiveness have been identified through numerous studies, demonstration projects and research projects to promote overall program effectiveness and successful outcomes for children and families.

- Children are active and engaged.
- Goals are clear and are shared by all.
- Curriculum is evidenced based.
- Valued content is learned through investigation, play and focused intentional teaching.
- Curriculum builds on prior learning and experiences.
- Curriculum is comprehensive.
- Professional standards validate the curriculum's subject matter content.
- The curriculum benefits children.

Curricula implemented to meet the unique needs of each child demonstrate the above indicators, which allow for a wide range of outcomes having beneficial effects (NAEYC and NAECS/SDE 2003).

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ASSESSMENT

North Dakota State Early Learning Guidelines (NDELG) will serve as a helpful resource for individualized student programs and for many content areas relating to Early Childhood Education and Early Childhood Special Education. The Guidelines provide instruction regarding (1) implementation of individualized curriculum, (2) verification of assessment information, (3) ongoing assessment of student progress, and, (4) overall program improvement. Further, the Guidelines correlate directly to the CEC, DEC, NAEYC, InfAC, ATE and NCATE professional standards.

Division of Early Childhood
http://www.dec-sped.org/

National Association for the Education of Young Children
http://www.naeyc.org/

Association of Teacher Educators
http://www.ate1.org/pubs/home.cfm

National Council for Accreditation of Teacher Education
http://www.ncate.org/

(1) Implementation of Individualized Curriculum
Through observation of where a particular child is functioning along the ND ELG, one can adapt curricular content (e.g., real object versus picture of an object; activity related to culture) and curricular approach (e.g., direct teaching; generalization discovery) to meet needs and interests of a student.

(2) Verifying Assessment Information:
Children who experience challenges with learning may undergo an assessment process in an attempt to identify the impact of those problems on learning. When formal assessments are used, observations through us of the NDELG would provide families information that would supplement previous assessments and provide additional information by which to make informed decisions.

(3) Ongoing Assessment of Child's Progress:
As one reviews the NDELG with each child, a pattern of growth and development emerges. The pattern may reflect areas, which exceed expectations in development in certain domains. A pattern may also develop showing areas of development that may be delayed or underdeveloped. Both warrant attention. By using information obtained with the NDELG, strengths of individual children can be paired with areas showing potential concerns to enhance learning across all developmental domains.

(4) Teacher Targets: Teachers and caregivers look at the patterns of development for a child or for a number of children (such as a center, class, and so forth). Information relating to how the teacher can enhance each child's learning is available within the NDELG. The identified patterns of growth or lack thereof will help identify areas to target for enhanced learning. For example, identification of targeted areas that may be enhanced with additional materials in a particular domain; adaptation of the environment; accommodations for children's learning styles and needs; and, supplemental training for the teacher to build on understanding and implementation of early childhood curriculum.

(5) Overall Program Improvement: An individual program may use the information provided by the NDELG for qualitative review of overall effectiveness of the program. The information may assist the program in analysis of best practices in Early Childhood curriculum.

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NORTH DAKOTA EARLY LEARNING GUIDELINES

UNIVERSITY PERSONNEL

Several professional groups (e.g., DEC, ATE, CEC, NAEYC, state licensure entities) have published standards for education best practice in areas of early intervention and early childhood education. The ND Early Learning Guideline indicators and strategies parallel content of many of the standards in areas addressing curriculum, assessment, adaptations, diversity, and others. Preparation of personnel who serve young children and their families includes opportunity for students to acquire knowledge and skills essential to provide high quality early care and education programs. The NDELG is a resource document for course content and learning experiences through a growth-based curriculum model, program accountability, outcomes assessment, theoretical application, cultural competence, and personnel reflective self-assessment

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Program Standard 1: Close, caring relationships exist between child and caregiver

Stable and responsive relationships are the foundation for infants' and toddlers' development and care. All early learning focuses on security. Infants might ask "Can I trust her to get my needs met?" or, "Will she protect me?" All future social and emotional health has its roots in these secure early relationships.

We know that close; caring relationships help children develop good emotional and mental health and the ability to be resilient—to bounce back when bad things happen.

With the advance of brain research in the last decade, we also know that secure relationships are the foundation for all later learning. Security and trust are learned in the context of the caregiving relationship and impact the physiology of the brain during infant and toddler development. Certain chemicals flood the brain during times of ongoing stress and insecurity and can cause irregular "wiring" patterns in brain connections.

Close, caring relationships are critical elements of programming with infants and toddlers and set the tone for everything else done. These elements are most easily supported in programs when the same caregiver is kept with the same group of children for extended periods of time, as well as when attention is focused on teacher/child ratios and small group size.

The program will . . .	**The caregiver will . . .**
• Provide a primary caregiver, who is responsible for the needs of a specific group of children. • Provide continuity of care, keeping one teacher with the same group of children over an extended length of time (ex. from entry through age 3) • Keep total group size and caregiver/child ratios at or better than established program guidelines. • Establish guidelines that will recognize and respect individual temperament, culture, preferences, stage of development, and, or disability of each child. • Keep to a minimum the number of adults who provide care for the children during the day.	• Respond immediately when children cry. • Position self where all children can be observed. • Get on the child's level when speaking to a child. • Be knowledgeable about the individual temperaments, cultures, preferences, and, or disability of each child. • Speak gently and respectfully to all children. • Use redirection, distraction, or channeling of inappropriate behavior into acceptable outlets, instead of punishment. • Respect individual developmental stages of children. • Maximize opportunities for reciprocal interactions during one-on-one care such as feeding, diapering, play time, and comforting. • Recognize the need for individual activities and routines for each child. All children need not participate in the same activity at the same time. • Recognize developmental stages of children and that expectations change as children move through these stages. As children develop independence allowance must be made for the toddler that says "NO!" • Encourage independence appropriate to each child and his developmental stage. • Acknowledge and identify feelings and social interactions for

	young children. • Use classroom observations to develop individual lesson plans for each child based on interests and developmental level. • Read the child's cues for fatigue, hunger, frustration, comfort, and act in an appropriate responsive manner. • Recognize that children perceive adult moods and facial expressions and that the child's experiences and development are affected by what they see and hear.

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Program Standard 2: Safety and Health Practices Healthy children are better learners. When programs use good, thorough hand washing techniques, and routinely sanitize toys, they actually reduce the numbers of colds and cased of diarrhea in their centers. Nutritional needs of young children require avoidance of sugary snacks and drinks. Safety requires vigilance, anticipation, and knowing appropriate expectations for each age group of young children. The goal is to keep things safe while allowing for curiosity, exploration and learning. It takes study and reflective practice to know how to keep the environment safe, yet allowing children to try new things themselves.	
The program will . . .	**The caregiver will . . .**
• Provide a hazard free, yet stimulating environment indoors and outdoors. • Develop policies and procedures that ensure safety and health of infants and toddlers. • Provide equipment and supplies to support health and safety policies and procedures. • Provide age appropriate nutrition for infants, toddlers and young children. • Follow all sanitary procedures related to food preparation and toileting. • Have consistent age appropriate daily routines and schedules.	• Closely monitor (physically and visually) the environment at all times. • Act to avoid dangerous situations before they occur. • Prevent the spread of germs by ensuring that children and adults wash hands, wash mouthed toys daily, wipe each child's nose and mouth individually and throw the tissue/paper away immediately. • Be good models of health practices through consistent hand washing, turning head and covering mouth when coughing, using a stool rather than standing on furniture, wiping spills to prevent falls, etc. • Provide appropriate feeding practices. Hold infant when bottle-feeding and allow older infants and toddlers and young children to learn about and feed them. • Cooperate with families to provide good food habits, respect family position and work together to help child give up bottle, coordinate introduction of new foods (introduce new foods many times). • Respect individual needs and schedules when diapering and toileting. Appropriate supplies must be readily available. • Utilize routines of sleeping, feeding/eating, and diapering/toileting as a chance to interact one on one with a child. • Individualize caregiver routines. Allow a tired child to nap early, rub child's back before nap, and provide activities for those children who do not sleep.

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Program Standard 3: Connections with families are valued. When programs pay close attention to the families of the children they serve, they let the child know that the family is important. Care should be consistent with the care the child receives at home as much as possible, and caregivers should know enough about the families of the children in their care to understand what their attitudes, beliefs and values are and how it relates to the development and care of their child. Programs that take the time to learn about a family's cultural background, and adjust their care to meet the family's needs, know that there is more than one way to provide quality child care.	
The program will . . .	**The caregiver will . . .**
• Establish guidelines that recognize and respect a family's culture, including values, attitudes and beliefs. • Support caregiver efforts in connecting to families through a variety of methods. • Seek out training opportunities related to working with families and encourage the caregivers' participation. • Provide opportunities for families to have input into the program policies. • Provide materials and resources for families on a variety of issues, such as special needs/disabilities, proper nutrition, guidance and discipline, etc. • Establish guidelines that support the transition between home and school, such as nap routines, feeding patterns, etc.	• Speak to family members in a respectful manner. • Acknowledge the family as the most important and constant caregiver of the child and support this relationship. • Gain knowledge about each individual family's culture, including values, attitudes and beliefs. • Provide for a variety of ways in which families can be included in daily activities of the program. • Include materials in the classroom that reflect the cultures of the children served in the program, such as photographs of the child's family, books, toys, displayed at the child's level. • Implement routines that support the care given to the child in the home environment. • Communicate with the family on a daily basis about the activities and growth of the child in a positive manner. • Use a variety of techniques to keep communication flowing freely between caregiver and family. • Support the child's developing awareness by talking about families, displaying family photographs, and celebrating accomplishments. • Welcome families in the program at any time during the day.

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Program Standard 4: Knowledgeable responsive caregivers **Knowledgeable, responsive caregivers continue their own education by focusing on young children and learning the differences between the developmental needs of infants, toddlers, and young children. They understand the difference in temperament traits of children and tailor expectations and responses to meet those individual needs. Knowing the importance of rich interactive language involvement with young children, they read and sing with children throughout the day. They foster independence in young children learning to take care of themselves and value the idea that a child sometimes learns more by getting it wrong than by getting it right. They understand the importance of the environment and know that the right setting, arrangement, material and routines can make a difference in quality of care.** **Knowledgeable responsive caregivers understand that young children learn through exploration and imitation. They make sure** That there are abundant opportunities to explore and make choices of what and how to play. They set the emotional tone and know that their actions throughout the day are the model for children's behavior.	
The program will . . .	**The caregiver will . . .**
• Provide space with good ventilation and natural lighting that is accessible to persons with disabilities. • Provide adequate space for different experiences at one time. • Provide adequate storage for children's materials and personal needs of staff. • Provide furniture suitable for individual care and play of infants, toddlers and young children. Chairs and tables and other equipment should be the correct height and size. Shelving should be low enough for easy access of children. • Provide age-appropriate materials to enhance the development of young children. • Provide a schedule that includes ample time for indoor and outdoor play, and that allows children to choose activities based on their own interests, and is varied to meet individual needs. • Encourage the acceptance of diversity and cultural awareness.	• Provide materials such as soft toys push and pull toys, toys to manipulate, explore, books, etc. • Arrange materials with similar use together to make interest areas, but allow children to bring items from one area to another during play. • Have materials and equipment stored for easy access. • Make all spaces clearly visible from all areas in the room. • Give attention to care giving rather than other tasks, interests, talking to coworkers, or personal business. • Interact with young children individually and in small groups. • Sing, read, play and talk using turn-taking conversations with young children throughout the day.

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Inclusion Considerations

While observing a child with special needs or a disability and applying accommodations in the classroom or home, it is important to be familiar with:

- Behaviors that may interfere with obtaining reliable responses (such as perseveration or distractibility);
- Limitations imposed by specific disabilities or limitations as well as abilities not generally affected; and
- Relevant background information, especially data concerning medications, prosthetic devices, or other assistive technology needed to maximize functioning

Discussions with the parent, caregiver, and, or teacher, or observation of the child over a period of time will provide clues as to how the child responds to instructions. Sufficient time should be allowed for children to initiate, work with and complete a task.

Culture and Background

Adults can increase rapport through awareness of the cultural mores of the child and his/her family as well as the community in which the child lives. One may need an interpreter when conversing with family members, teachers, and other service providers. In addition one may wish to visit and participate in classrooms to become familiar with social interactions and communication with the child's peers, as well as attend cultural activities in the child's community. Interpreters may assist awareness of dialects and pronunciation unique to the community or subgroups within the community.

Motor Impairment

Many of the Early Learning Guideline Indicators require an overt motor response, even though the indicator may not be motoric in nature. For example, in the Cognitive Domain, some responses require a rather high level of eye-hand and upper-body coordination (such as placing shapes in a form board, sorting objects, pointing, etc.) Children who have motor limitations and little or no expressive language are at a great disadvantage as their failure to complete an Indicator may indicate an inability to communicate or to perform motorically, rather than any real deficiency in understanding the concept or task. It is imperative to offer every opportunity for maximal response.

Proper handling, positioning, and adaptive seating are critical to the performance of the child with motor limitations. Time must be taken to normalize muscle tone and place the child in a position that promotes optimal performance. In one is unfamiliar with positioning a hypertonic (stiff) or hypotonic (floppy) child for maximal performance, an occupational therapist or physical therapist familiar with the child could provide positioning instructions or assist through the observation of the child. A parent, caregiver, or teacher may also be able to position the child.

The setting should be familiar and not threatening, particularly for the child with hypertonicity. Excitement, and, or fear may increase the child's tone and make observation very difficult. Observation should be done to avoid startling the child.

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When sitting, the child should be positioned so that he or she is symmetrical and has good eye contact with you. The child's body should be stable and in good alignment. Head and trunk control may be adjusted by changing the angle of sitting and external supports. For some children, a side lying position may be more functional. Children who use wheelchairs or other adaptive seating should be allowed to utilize these devices during an observation.

Subtle cues may alert the observer to a response (eye movement, head movement, guttural sounds, increased or decreased tone). Parents, caregivers and teachers who know the child well should be consulted regarding the best mode of communication.

Ample time should be allowed for response. A child with motor impairment may have a greater concentrated effort to make the slightest motor response. If a child does not immediately respond, the child may need manual assistance to make the desired response and this accommodation should be noted throughout the observation.

Assistive technology, such as keyboards, touch pads, or communication boards may need to be used. If a child uses eye blinks, head nods or another method to communicate, he should be allowed to use these accommodations during observations.

Hearing Impairment and, or, Deafness

An inability to hear significantly affects expressive skills, cognitive skills related to language and some aspects of social behavior. An observer should familiarize themselves with procedures to maximize the child's performance.

Be alert to the possibility of hearing impairment, either permanent or temporary in any child being observed. Because ear infections and hearing deficits are often undetected in infants and preschoolers, some children with no known hearing problems may have some functional hearing loss. In addition, children with known disability conditions such as Down Syndrome, cerebral palsy, and other congenital conditions are at high risk for associated hearing losses. Auditory difficulties should be discussed with the parent, caregiver or teacher for appropriate referral to an audiologist. If there is difficulty with auditory tracking, care should be taken to establish good eye contact and attention to task with the child. Use of gestures, demonstration, and clear verbal instructions will improve communication of the required response to the child.

If there is a known hearing loss, it is important to know the nature and extent of the loss, as it influences how the child will be taught and the means used to observe developmental skills. Hearing loss ranges from slight to profound when the average ability to detect pure tones at different frequencies is calculated. Hearing loss may be in one ear only or both ears with different levels of loss in each ear. Inability to hear clearly is classified into one of three types:

- Conductive loss, which involves the middle ear and the auditory canal
- Sensorineural loss, which involves the inner ear and connections with the brain, and
- Mixed loss, which refers to a combination of the two types

It is likely that a child's functioning and ability to use assistive hearing devices effectively may vary considerably. In addition to the nature and extent of the loss, other related factors consist of: age of onset, age of identification, cause of hearing loss, stability of the hearing loss, educational approaches used to teach communication to the child and means of communication used by parents, especially if one or both have a hearing loss.

Prior to observation, one must determine how the child communicates and receives information. The child may use modes ranging from primarily aural to primarily manual or a combination of each, depending not only on the child's communication abilities but also on the situation (with familiar persons, social, school setting, etc.).

If the child uses manual communication, the observer must be aware of the specific mode, as it will affect the level of the child's response and understanding. Modes include American Sign Language, Signed Exact English, and Cued Speech. Before observation, the child's primary system of communication should be determined by discussions with the parent, caregiver or teacher. The observer should be familiar with the child's communication system to use it is giving instructions and receiving responses or an interpreter should be utilized.

Specific suggestions for a child with hearing impairment or deafness include:

- The child should be wearing or using any amplification device that they regularly use, such as a hearing aid or auditory training unit. The device should be in good working order and turned on. Minimize background noise and visual distractions.
- Attract the child's visual attention.
- Be sure the child can see your face and lips clearly. Lighting is important. Do not exaggerate lip movements or raise your voice.
- Combine manual communication with standard verbal when appropriate.
- Allow a child to respond through his/her communication system. It may be appropriate for an older child to write his responses or draw pictures to express himself.
- Recognize that a child may not understand the instructions and use simpler language if it does not change the intent of the Indicator.
- Children with hearing impairment are often delayed in language development. It may be appropriate to begin observation at an age younger than the child's chronological age.
- If a child uses an interpreter, speak directly to the child, not the interpreter.
- Be aware that facial expressions and body language may be a part of the child's communication.

Further information relating to children with hearing impairment is available in *Deaf and Hard of Hearing Students' Educational Service Guidelines.* National Association of State Directors of Special Education, Inc. Alexandria, VA. 1997. Material developed by Steven Hardy-Braz is useful for sign language interpretation.

Speech Impairment

Techniques for responding used by children with hearing impairment are also applicable to the child with speech difficulties. Verbal and nonverbal responses such as nodding or shaking the head, pointing, writing or drawing, or manual communication are acceptable responses.

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Vision Impairment

Range and type of visual loss can vary greatly due to the nature of the eye condition and the presence of an associated medical condition. Three categories of visual problems are: refractive (focusing problems), diseases of the anterior visual pathways (lack of retinal function) and diseases of the visual cortex (difficulty in transmitting impulses and lack of interpretation from the brain). Most individuals who are considered legally blind can see light, color, and objects and can gather some or limited visual cues at near points or from a distance. The severity of the visual condition and preferred sensory mode are factors that help determine whether the child will use regular print, enlarged print, Braille, and /or recorded educational materials.

Attention needs to be given to the best type of lighting, optimal placement of materials, appropriate posture, spacing of print lines, print size, reduction of visual clutter distractions, visual fatigue, provision of a quiet environment, and visual contrast when presenting pictures or materials. Allowing a child to bring objects and materials close to use his central or peripheral vision will give the observer information on the best viewing distance and visual field.

It may take additional time to develop rapport with a child who has vision impairment. Engaging in conversation about familiar topics or playing a simple game are comfortable ways to build confidence and trust by allowing the child to hear your voice and build familiarity.

You may need to utilize closed-circuit television, magnifiers, slant boards, a brailler or Braille note taker for recording. Lighting conditions are very important. The intensity of light should be comfortable for the child, with lower intensity for the child that is sensitive to light (cataracts or albinism) and additional lighting for other types of conditions (retinopathy of prematurity, retinitis pigmentosa). Glare and flickering lights should be avoided. Additional light, when needed, should be positioned to come over the shoulder of the side of the child's dominant eye.

Allow children to handle and explore objects independently. It is typical for children with vision impairment to smell and/or bring an object to his/her face or lips to gather more information. If they need further guidance, ask the child's permission to guide hands through a task.

If a child uses a cane, they may need extra time for travel. Never hold or push or pull him when walking. When guiding the child to a chair, tapping lightly on it will give the sound cue of its location.

Be aware of possible reactions to stress induced by the observation situation. Some children with vision impairment may experience lower visual efficiency under stress or during prolonged visual activities. This is especially true for children with nystagmus or limited field of vision. Allow for breaks when needed and provide encouragement and periodic distracters to help reduce tension and fatigue.

For children with visual impairment, it is important to give clear, step-by-step directions concerning what is being done and what is expected. Understand that individuals who are blind interpret common visual words such as "see" "look" to mean examine and that it is fine to use these words. For example, you might say, "Here is the ball. I am putting a stick beside it. I would like you to feel the ball and stick. Now look for the one that is round."

Examples of behaviors often associated with visual deficiency may include: rocking, pressing on the eyes, head lowering, finger flicking, or hand wringing. These behaviors may be especially present when the child is concentrating hard or is idle.

For further discussion of assessment and education of children with vision impairment, see *Children's Vision Concerns: Looks Beyond the Eyes!* Harrell, 1992.

Emotional and Behavioral Disorders

Observing a child with emotional or behavioral difficulties often presents a challenging situation. Behavior variations can be extreme. Specific situations that foster cooperative and attentive behavior from the child should be discussed with the parent, caregiver or teacher.

Several suggestions that may be helpful in observing children with emotional or behavioral difficulties are:

- Use of demonstration and practice trials and allowing the child to give his response in a variety of ways (pointing, writing, drawing, or other means).
- Use a variety of positive reinforcement strategies to encourage the child to attempt items. Be conscious of not using positive reinforcement only for correct responses.
- Work to obtain and hold the child's attention. Use a variety of approaches consisting of: speaking in a lower, whispered voice, exaggerated movement, or displaying materials in a variety of ways.
- Avoid pressuring the child to perform. Have distracters and/or fidgets that can be presented to relieve tension.
- Puppets may be used to gain a child's attention. The child may also use the puppet to respond to depersonalize the situation. Puppets could also be used to give instructions.
- Set limits for the child early in the interaction. The child should be aware that you are in control and what behaviors will be accepted and which will not be accepted. Be aware of setting limits of control that you cannot enforce.
- Observe the child during several short sessions and communicate the time limits that will be used.

Multiple Disabilities

If several disabilities or delays are present, guidelines for both impairments may be used. Use all guidelines appropriate for the known or suspected disability or limitation no matter how many conditions may be included.

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Policy Matters

North Dakota Early Learning Guidelines

Setting and Measuring Outcomes for State Policies

Recommendations for local, regional and state polices

This section of the manual is designed to assist state policy makers in creating state laws, regulations, and policies that foster the readiness skills necessary to receive maximum benefit from educational opportunities. The agencies involved include education, human services, social services, and casemanagement and service coordination. The policy analysis procedures included in this document are appropriate at all levels of service delivery including local, regional, and state level. In addition to addressing the needs of legislative bodies that enact laws, the procedures are also important for the agencies assigned the responsibility for creating the rules and regulations to enforce the state and local legislation. It is also essential for local, regional, and state governing and advisory bodies that are designed to address service coordination needs and interagency collaboration needs. Although the document appears to stress the phenomena of school readiness, an essential feature underlying all elements of the paper is the emphasis on the policies for very young children and families that influence outcomes prior to beginning in school.

School readiness is often a misunderstood concept that is conceptualized in a way that precludes the use of developmentally appropriate practices in programs for young children. Many professionals equate school readiness as successful mastery of a kindergarten curriculum or competence at unarticulated "preschool skills" that will ensure success in learning the skills contained in a typical kindergarten curriculum. According to Kagen and Riby (2003), in their technical assistance manual *Policy Matters: Setting and Measuring Benchmarks for State* Policies, three distinctly different components of the concept must be defined and separated out in order to understand the concept of school readiness.

Readiness to learn is a discipline advocated by developmental therapists who attempt to instill in young children the developmental skills necessary to master subsequent concept learning in an academic environment. Readiness to learn is generally acknowledged as the developmental level at which an individual has the capacity to undertake learning of specific material, usually the age at which the average group of individuals achieves the

specified capacity. Most theorists believe that readiness to learn grows out of the young child's mastery of prerequisite skills in the domains of physical development, intellectual ability and emotional maturity and health. Examples of readiness to learn skills include the ability to understand the more complex language patterns used in listening to stories, and the ability to express ideas through spoken language. Other skills include having the emotional maturity and competence to share and take turns in group activities, and the movement skills necessary to compete in games the physical activities.

Readiness for school is a more finite construct, typically embracing specific cognitive and linguistic skills, and often associated with children's reading readiness. It encompasses *readiness to learn* skills but utilizes them in specific academic activities. It includes activities such as understanding the language inherent in following directions, completing paper and pencil tasks, listening for specific information, and following rules. It is regarded as a fixed standard of physical, intellectual, and social development that enables children to meet school requirements and assimilate curriculum.

These two constructs differ greatly. Readiness to learn applies to students of all ages. Readiness to learn must be fostered in all children and is not a quality to be "expected". Readiness for school applies primarily to young children prior to, or upon entry into, kindergarten. Readiness for school is an expectation.

Maturation is a third construct that evolves from the first two concepts. Maturational readiness acknowledges the characteristics of *school readiness*, that it is necessary and important to expect children to achieve a specified standard prior to school entry. It also acknowledges the characteristics of children's individual time clocks, more closely associated with developmental theory. Maturational readiness says that because all children do not develop at the same pace and because the content of school curriculum is fixed, not all children are ready for school at the same chronological age. Traditional developmental theorists, such as Gesell and others advanced the concept of assessment of children to determine their readiness for school, and when necessary, give them the "gift of time" to develop before their enrollment in school

Contemporary researchers are questioning the value of adhering to the traditional "maturational" perspective. No longer considering development a prerequisite for learning, readiness revisionists suggest that learning and development are intertwined. Children are ever-ready learners and grow into the intellectual life around them, so that development is stimulated by learning and is not a prerequisite for learning.

The recent impetus to the changes in theory surrounding maturational readiness has grown out of federal initiatives and legislation including Goals 2000 and No Child Left Behind. Benchmarks were established by the National Education Goals Panel (NEGP) to monitor the nation's progress in meeting the education goals established by legislation. Four primary contributions to the school readiness debate grew out of these goals.

Readiness as a Condition of Individuals and Institutions.

Historically, the responsibility for readiness was placed primarily on the child-whether the focus was on readiness for school or readiness to learn. The NEGP adopted a broadened conceptualization of readiness in which readiness is regarded as a condition

of institutions, as well as individuals. Readiness is understood as the match between the readiness of the children and the readiness of the environments that serve young children. Thus the contemporary understanding of readiness acknowledges that the sources of readiness are not only the child's emotional, cognitive, linguistic, and social abilities, but also the contexts in which children live and interact with adults, teachers, and other community members. In order to affect a child's school readiness, multiple contexts including families, schools, neighborhoods, and early childhood settings must be involved.

The role of society in fostering readiness conditions is well documented in the efficacy literature that compares the differences between children reared in affluent and privileged families versus families living in poverty. Lewis Diuguid (2005) reported on the inequities in an article entitled *Addressing classism will improve school performance*. In the article lawmakers are admonished to listen in a quote cited by Rothstein, a research associate of the Economic Policy Institute at Columbia University: "I don't have a strategy to get politicians to do something different except to keep on emphasizing what the social and economic realities area. Article states: "The education system is less to blame for the achievement gap than society's ills. Yet, the No Child Left Behind law would have people think the schools are totally at fault. America's sicknesses include racism and classism.

Rothstein is reported to describe how upper-middle class parents with jobs in which they collaborate with others are more likely to show their young children how to figure out answers for themselves. The children of people with professional careers are generally more inquisitive and take a more active approach to learning than children of working-class parents. Parents whose jobs require "creativity and decision-making were less likely to punish their children for actions in which the children's intentions were desirable, even if matters did not work out as intended. Parents who were closely supervised at work were more likely to base punishment on their children's actions, regardless of the children's intentions.

Rothstein added that parents in professional jobs generally spoke more than 2,000 words per hour to their children compared with 1,300 for working-class parents and 600 for welfare mothers. Toddlers of professionals received and average of six encouragements per reprimand, in contrast to the working-class children who received two. For welfare children the ration was reversed: they received an average of one encouragement for every two scoldings. It seems reasonable to expect that when these children eventually go to school, their teachers will not be able to fully offset such differences in early interactions.

Rothstein is quoted as saying: "You can't fix it with school reform. The biggest improvements will come when you address social and economic inequality. Narrowing the achievement gap isn't an impossible dream. "If you want to improve the achievement of low-income children, one thing you can do is improve their health," Rothstein said. Vision and dental problems impede learning. Poor kids have twice the average rate of severe vision impairment. "The disproportionate assignment of low-income black students to special education may partly reflect a failure to correct their vision" Rothstien stated. Rothstein also noted that: "Untreated cavities are nearly three times as prevalent among poor children as among middle-class children" and "Students with toothaches,

even minor ones, will tend to pay less attention in class and be more distracted during tests than will students with healthy teeth."

Rothstein reported that low-income children are five times as likely as middle-income kids to have high lead levels in their blood "diminishing their cognitive ability". Rothstein also reported that asthma is the single largest cause of chronic absenteeism. Middle-class children typically get treatment for asthma symptoms where as low-income children do not, resulting in excess absenteeism.

Rothstein also states that lawmakers can address the achievement gap with affordable housing for low-income and moderate-income families. Rothstein states: "Urban rents have risen faster than working-class incomes have, forcing many families to move frequently because they fall behind in rent payments". Rothstein notes that in some schools in minority neighborhoods, mobility rates are above 100%; for every seat in the school, two children were enrolled at some time during the school year. Rothstien advocates as the solution state and federal social and economic policies to improve health, care, provide stable housing, boost incomes for working parents, end discrimination and lift the fates of low-income children so they, too, can achieve academically.

Readiness Conditions:

Considering this orientation to readiness, it is not surprising that a second contribution was to focus on the array of contextual conditions necessary for children to be ready for school. The NEGP established three objectives to accomplish the goals. They consisted of:

1) All children will have access to high-quality and developmentally appropriate preschool programs that help prepare them for school;
2) Every parent in the Unites States will be a child's first teacher and devote time each day to helping his or her preschool child learn, and parents will have access to the training and support then need; and
3) Children will receive the nutrition, physical activity, and health care necessary to be prepared to learn; and, the number of low birth-weight babies will be significantly reduced through enhanced prenatal health systems.

Using these objectives, data collection systems were created to measure the nation's progress in creating opportunities for young children to develop and thrive prior to school entry. This emphasis shifted the focus to include inputs as well as child outcomes as measures of readiness.

The Dimensions of School Readiness

A third contribution of the NEGP was to clearly specify the elements or dimensions of school readiness. The committee offered a conceptualization that recognized the wide range of abilities and experiences upon which early learning and development rests. This work, now widely accepted and used, suggests that early development and learning embraces five dimensions: (1) physical well-being and motor development; (2) social and emotional development; (3) approaches toward learning; (4) language development; and (5) cognition and general knowledge. Conceptualized by an expert panel for use in

policy-making, this work offers a solid definition of school readiness and in underlying dimensions.

The School's Role in Readiness

Considering the importance of focusing on learning contexts and the institutions that affect early learning, the NEGP also sought to define precisely what a "ready school" meant. This emphasis was a necessary response to the increasingly common call for children to be ready for schools and schools to be ready for children. To clarify this call for ready schools, the NEGP convened a Ready Schools Resource Group that drew on previous work in defining successful practices for elementary schools, identified keys to ready schools. Properties of ready schools include: smoothing the transition from home to school; striving for continuity between early childhood programs and elementary schools; helping children make sense of their worlds; fostering a full commitment to the success of every child and teacher; using approaches that have been proven to raise achievement; and underscoring that schools are part of communities.

Additional forces rose out of societal changes that also influenced the advancing of the readiness agenda. Rising rates of maternal employment and a developing research base on early childhood intervention were two of the most significant factors that served as critical accelerators of national attention to school readiness.

Maternal Employment

Kagen and Rigby (2003) present an analysis of the societal changes relative to maternal employment. They report "with the rush of women into the workforce, the need for out-of-home care burgeoned, as did the call to maximize children's early learning experiences." For example, in the year 20000, there were about 24 million children under the age of six in the Untied States. Nearly 60% of these children lived in families where either parents (or single parent) were working or in school. Mothers have entered the labor force in growing rates over the last 50 years. In 1960, 18.6 percent of married mothers with children under six were in the labor force, compared with 45.1% in 1980 and 59.9% in 2000. A similar trend has been evidenced in the last 30 years for single mothers, of whom 44.1% were in the labor force in 1980, 52.2% in 1994, and 69.1% in 2000. There has been a particularly large increase in working mothers of very young children. In 1975, 34% of mothers with a child under three were employed, with almost double the number (61%) employed in 20000. Social scientists offer different explanations for these employment trends, including: working requirements imposed on welfare recipients, the eroding wages of men, and women's response to the growing risk of divorce, women's career aspirations, and modern-day materialism. Regardless of the reasons for this demographic change, increasing rates of maternal employment transform children's' day-to-day care arrangements.

Along with this growth in maternal employment, "a dramatic reapportioning of care" away from parents to a variety of other caregivers has been seen. Among all children from birth to age five who have not yet entered kindergarten, only 38% are cared for solely by their parents. Thus, the majority of children from birth to five receive care in a variety of settings, including: center-based programs (20%), relative care (15%) non-

relative care (11%); Head Start (3%), and multiple arrangements other than parental care (13%). Three- and four-year-old children are more likely than infants and toddlers to be in non-parental care, specifically in center care. Yet, rates of center care for infants and toddlers have tripled in the last 20 years. Clearly, growing rates of maternal employment have made increased availability of early childhood services and education imperative.

Recent Research

Recent research augments the press for school readiness as it has illustrated the importance of early brain development, the potential cost-savings associated with high-quality early interventions, and the learning gap between poor and more affluent children.

- Early brain research has established that he way the human brain develops during the first years of life has a significant impact on later learning and intellectual growth, and that brain development during this period is quite susceptible to environmental influence- including the kind of care and stimulation that children receive both at home and in out-of –home settings.
- Research on quality early childhood interventions and care has provided evidence that one way to better prepare all children for kindergarten is to offer school readiness skills in high-quality settings. This approach has been demonstrated to be cost-effective, producing far greater gains for society that the original cost of the investment, and thereby providing an economic incentive to invest early in children's lives.
- Research on children entering kindergarten has found that family risk factors such as low maternal education, welfare dependency, single parenthood, and parents who speak a primary language other than English are associated with lower proficiency in early reading math, and general knowledge. This is consistent with earlier findings that low-income children are, on a probabilistic basis, less likely to arrive at school ready and are more likely to be educationally disadvantaged or have difficulty in school. For many policy-makers this learning gap upon school entry indicates a need to intervene earlier in children's lives.
- Research conducted by Barnett, Lamy & Kwanghee (2005) examined the effects of state funded pre-kindergarten programs on young children's school readiness in five states. In the study of programs serving 4-year olds, the researchers estimated the intervention effects on children's learning. Remarkable, across all five states, significant and meaningful effects were documented in the areas of children's language, literacy and math skills. The study provided strong evidence that quality preschool programs produced broad gains in children's learning and development at kindergarten entry. The preschool programs that were studied produced the kinds of effects that could be expected to yield greater school success and later improvements in reading and math. The results of the study theorized that early print awareness and receptive vocabulary are the first link in a chain that produces the long-term school success and economic benefits documented by other preschool studies that have followed children into adulthood.

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Policy Context

Significant changes have occurred in the past 30 years because of the increasing concern about young children and the school readiness. Numerous social and political policies have been enacted, often with unintended policy consequences. Kagen and Riby (2003) reported on the investment of $17.3 billion annually in federal funds by the year 2003, most of it to support low-income children and families. The funds were appropriated for a broad set of programs related to early childhood education. In fiscal year 2002, major programs included: Child Care and Development Block grant ($4.82 billion); Head Start ($6.54 billion); Child and Adult Care Food Program ($1.74 billion), Dependent care tax credit ($2.7 billion), preschool grants and early intervention programs ($807 million); Title I preschool ($200 million); campus based child care ($25 million); apprenticeships for child care workers ($650,000); Early Learning Opportunities Act ($25 million); child care provider loan forgiveness ($1 million); Early Reading First ($75million); early childhood educator professional development ($15 million); and the U.S. Military Child Development Program ($357million).

State appropriations that support readiness have also grown (Kagen & Riby, 2003). A major source of this increase over the 1990's is the expansion in state pre-school initiatives, which grew by nearly $1 billion, from approximately $700 million in 1991-1992 to nearly $1.7 billion in 1998-1999. In the years between 1998 and 2000, it was estimated that state spending on child development and family support efforts increased by 87%. In addition, states have begun to increase spending on programs for infants and toddlers, parenting education, community health, and comprehensive early childhood systems.

Recent changes in federal legislation have focused policy attention on your children and their families. Significant examples cited by Kagen and Riby (2003) included: (1) the Personal Responsibility and Work Opportunity Reconciliation Act (PRWORA); (2) the State Health Insurance Program (SCHIP); (3) the Child Care Development Fund (CCDF); (4) dramatic increases for Head Start; and (5) the passage of the No Child Left Behind Act of 2001, which reauthorized the Elementary and Secondary Education Act (ESEA). Many of these policies provide funding mechanisms that states can use to impact the contexts in which children's school readiness develops- early childhood education systems, schools, families, and communities.

A significant change in the philosophy of the legislation is the devolution of decision making to states. The legislation offers states considerable flexibility, new policy options, increased decision making power and access to new funding streams, as well as incentives to develop strategies to help families move to greater economic security with access to health care and child care. To ensure success of the state-driven programs, most programs include a strong focus on program and policy accountability that requires states to attend to and chronicle children's progress, as well as establish accountability systems.

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Policy Challenges

Despite the recent attention to and growth in federal and state initiative to improve school readiness, Kagen & Riby (2003) report on serious complications and crises within the current system of services to young children and families. These are reported to consist of: (1) a crisis in definition; (2) a crisis in quality; (3) a crisis in coordination; and (4) tremendous state-to-state variation.

Ambiguity in Definitions of Care and Education

Historically, publicly and privately funded programs for young children have been conceptualized as two different forms of services: (1) child care programs, and (2) nursery school or preschool programs. Child care programs were traditionally defined as those targeted to low-income children to allow poor mothers to work, while nursery schools were developed in order to provide educational enrichment for middle-and upper-class children prior to their entry into school. The concept of highly enriched programs for low-income and otherwise at-risk students gradually emerged. More recently, there has been a strong movement toward providing universal pre-kindergarten. These historical and contemporary distinctions between child care and education have resulted in separate programs, funding streams and definitions, that fail to acknowledge the significant overlap that exists between caring and educating in any high quality programs for young children.

In the discussion paper Policy Matters: Setting and Measuring Benchmarks for State Policies (Kagen & Riuby, 2003) the focus was placed on the entire system of "early care and education," (ECE). This model was defined as "all forms of care and education services provided to young children ages birth to five, within a public or private setting." The nomenclature used by the project suggested support for the evolution of a comprehensive and linked set of services for children, used at parental discretion, to advance early development and school readiness. Definitions were provided since, at times; it was necessary to consider specific policies related to particular programs or sectors of care. The terms used for clarity in the report were defined as follows:

- **Early care and education** (ECE) - the entire system of care and education services provided to young children prior to entry into school.
- **Childcare** – care and education services primarily funded through federal child care funds, TANF funds, or parent fees for service to children from birth through kindergarten age, usually full-day programs.
- **Preschool programs**- programs for three- and four-year old children, regardless of funding stream.
- **Child development programs**- care and education programs for infants and toddlers (ages 0-3), regardless of funding stream.
- **Pre-kindergarten** (pre-K) - state-funded preschool programs for there-and four-year old children.
- **Head Start**- comprehensive child development program for preschool age children funded by the federal government or through state supplements to Head Start.

- **Early Head Start**- care and education programs for infants and toddlers funded by the federal government or through state supplements to Early Head Start.
- **Family child care**- childcare that takes place in the home of a childcare provider.

Crisis in Quality

Research has shown that high-quality ECE programs can offer a good start in life by helping children engage in relatively complex play, socialize comfortably with adults and other children, and develop important physical, language, and cognitive skills (Kagen & Riby, 2003). The same researchers report on a corresponding set of research that has established that few children in the U.S. are enrolled in the kind of quality programs that boost their chances for later success in school and life. Kagen and Riby (2003) reported on one four-state study that found that seven in ten centers provided mediocre care, and one in eight was so inadequate that it threatened the health and safety of the children. In family childcare, a domain reportedly often overlooked by policy makers and the public, the situation was similar. Like childcare centers, quality care varied widely. But overall, the percentage of programs judged to be of substandard quality ranged from 13 % of regulated family childcare homes to 50% of unregulated homes.

The crises in quality stem from a lack of sufficient funding and from an insufficient infrastructure that is unable to support a system of quality ECE. Essential elements of this infrastructure include: parent information and engagement; professional development and licensing; facility licensing, licensing enforcement, and program accreditation; funding and financing; and governance, planning and accountability. Gaps in the infrastructure are evident in the current "non-system" of early care and education. For example, regarding professional development, in 30 states, childcare providers are not required to hold any certificate or degree or complete special training before beginning work with young children. Seven more states require extremely minimal annual training, between six and 20 hours total. The average salary of a childcare worker in the US was $16,980 in 2003. Not surprisingly, staff turnover rates of 35% are common. Many centers and family childcare homes are not linked to other community services, including health, parent education and social services. Ongoing training is sporadic and of uneven quality. Although there are no current estimates of the percentage of regulated centers, a decade old study found that about 40% of center-based programs were legally exempt form regulations. Of family child care providers, as many as 80% to 90% are not regulated and have no contact with regulatory or supportive agencies. To make matters worse, parents often pay large percentages of their weekly wages for childcare, while ECE staff foregoes wages, parents forego quality, and children forego opportunities.

Lack of Coordination

Kagen & Riby (2003) attribute lack of a unified national policy for young children and families to the evolution of a wide assortment of services and programs has developed at the federal, state and local levels. The authors state: "This welter of diverse policy aims, target groups, and service strategies is unacceptably inefficient and wasteful, especially when resources are scarce." In is also reported that there are countless

overlaps and gaps in policy, funding streams, eligibility, fees, programming, and other crucial matters. The authors feel that this crisis in coordination results in some families receiving fragmented and inconsistent services, while other eligible families fall through the cracks and receive no services whatsoever. In addition, the field routinely competes for providers, space and children.

To address this crisis in coordination, Kagen & Rigby (2003), report that some state and local governments have created governance and planning entities that have made notable progress in linking early childhood services with health and other social services, streamlining service delivery, and increasing programmatic efficiency. Yet, Kagen and Rigby cite a recent report on coordination of services by the Children's Defense Fund that argues that, without new resources, coordination alone will not be able to increase the number, kind, or quality of EDE services. In fact, in many cases these local governance and planning entities are idiosyncratic, politically fragile and, in many cases, dependent on short-term philanthropic or corporate support.

State-to-State Variation

Kagen and Rigby (2003) also discuss the significant state-to-state variation. The authors state: "Fueled by a policy ethos that supports policy devolution, recent legislation has increased the variation among states in their programs and policies for young children and families." The authors cite a comparison of state early childhood policies published by Education Week (2002) that found significant variation on nearly every critical variable, including: access, funding levels, program standard, teacher quality, and school readiness assessment. An example presented consisted of a review of 27 states that fund a child and dependent care tax credit for families. The results indicated that the maximum credit for families with one dependent child (2001) ranged for $144 to $792. States also varied in the provision of state pre-kindergarten programs. Forty-one states fund such programs, but only one state was implementing a truly universal program for all four-year-olds, regardless of family income. It was reported that other states fund programs for three-and/or four-year-old children, with varying eligibility requirements, lengths of day, program structures, teacher qualifications, and funding levels. Funding per enrolled child ranged from $986 to $7,845 per child. State policies regarding licensing and regulations also varied. For example, in some states, exemptions from licensing were allowed for religious center; in others, exemptions were allowed for nursery schools, preschools, or pre-K. Requirements for teach training and education also varied by state. Most states did not require any level of formal education for providers in child care centers or family homes, although some states required education or training for teachers in specific programs such as state funded pre-K programs.

Kagen and Rigby (2003) felt that the variation in state efforts in ECE was problematic. States and communities with more wealth are able to, and do, invest more in children's services. This leaves poor states and communities, often where the need is greatest, without services- a case of the rich getting richer and the poor getting poorer. This wide variation among states means that service access in unequal, fueling later education inequities. Not only is access unequal, but even for those children who receive services, quality is highly varied, adding to differentials in the nature of the experiences that the NEGP thought so critical to enhance all children's readiness for school.

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A Theoretical Framework for School Readiness Policy

This section clarifies the assumptions that shape the conception of both school readiness and the linkages between school readiness and state policy choices. It also includes the design and terminology used in the policy logic model. Please refer to the attached appendix for the Policy Logic Model for "Children ready for school" (school readiness) policy analysis. The policy logic model maps essential correlates to the result: children are ready for school. Nine policy areas critical to the school readiness result are identified. For each policy area, policy features and options from which state policymakers may choose are presented. It is these policy options that state policies will be compared to assess state efforts to promote school readiness, both between states and within the same state over time.

Assumptions Underling the Policy Logic Model

- Readiness is a crucial construct that applies to all children, prenatal to age five, not only those below the poverty line.
- Readiness does not reside solely in the child, but is a condition of the environments in which children find themselves- families, early childhood settings, schools, neighborhoods, and communities. Early childhood setting includes both formal and informal childcare and pre-school contexts.
- Readiness includes multiple dimensions and is not solely the purview of the cognitive domain. Readiness embraces five dimensions: Physical and motor development, social and emotional development, approaches toward learning; language, literacy, and communication skills; and cognitive skills.
- A state's school readiness policy consists of a wide range of policy choices within multiple systems (health, welfare, and education) and includes both direct services to children and families and the infrastructure in which these services are provided.
- Because the care and education of young children cannot be separated, all high-quality programs for young children must acknowledge and incorporate both functions into their services.

Design and Terminology Used in the Policy Logic Model

Consistent with current policy ethos, the *Policy Matters* project is results oriented. It seeks to state a result clearly and to "backward map" the conceptual linkages between the desired result and the specific state policy choices whose cumulative effects produce this result. Within the policy logic model, each result is linked to outcomes that, in turn are linked to indicators. For each indicator, policy areas that contribute to the indicator, as well as policy features for each policy area are specified. Finally, for each policy feature, a set of mutually exclusive policy options on which to compare state policies aimed at promoting school readiness is presented. For each policy feature, one "goal" policy option and one "benchmark" policy option is identified.

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"Children Ready for School": Policy Logic Model

Using the terminology described above, Figure 1 presents a specific policy logic model for the school readiness result and associated outcomes, indicators, and policy areas. The result and four outcomes central to this policy logic model are described. Then, for each outcome, two indicators and areas of state policies associated with each indicator are described. The appendix contains the most salient policy features for each policy area, and an associated continuum of policy options from which states may choose.

Figure 1. *Children Ready for School Policy Logic Model*

Result	**Outcomes**	**Indicators**	**Policy Areas**
All Children are Ready for School	**Ready Systems of ECE**	• Families have access to a variety of ECE Programs • ECE supported by a and infrastr for quality	← State-funded ECE programs; child care subsidy programs; child care tax provisions ← Licensing/accreditation; professional development/compensation; ECE systems development; ECE standards and assessment; Facilities/capital investment
	Ready Schools	• Children have access to high-quality early school experiences ▪ Schools are coordinated with and linked to other services	← Kindergarten Quality ← Systems development (included with ECE systems development, listed above)
	Ready Families	▪ Families are economically stable ▪ Parents are well-informed and supported in their role as parents	← Although critical to school readiness, the policies and benchmarks associated with the ready Families and Ready Communities outcomes are detailed in the Healthy Families, Strong Family Relationships, and Family Economic Success Policy Matters papers ←
	Ready Communities	▪ Families have access to community-based health services ▪ Families live in safe and supportive communities	
↑	←	←	←
Implementations Characteristics	Adequate and flexible resources	□ Equitable access to quality services	□ Results accountability/ child-based outcomes □ Local service delivery and decision-making (parent-choice) □ Coordinated governance aligned state-to-local authority

Adapted from: *Policy Matters: Setting and measuring Benchmarks for State Policies, February 2003, pg. 16.*

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Result

This policy logic model focuses on the result: *All children are ready for school.*

Outcomes

Four outcomes operationally define the school readiness result: (1) ready systems of early care and education (ECE); (2) ready schools; (3) ready families; and (4) ready communities. These outcomes are focused on the contexts in which young children grow, learn, and develop and the degree to which these contexts are "ready" for the young children with whom they come into contact. School readiness rests on the readiness of each of these contexts and cannot be assured by focusing on only one context or on children alone. Two measurable indicators and one or more area of state policy linked to each indicator are presented in the *Policy Logic Model* contained in the appendix.

Outcome 1: Ready Systems of ECE

In the policy logic model, a "ready system of ECE" is an outcome on which school readiness depends. The concept of a "ready system" is operational zed by considering two indicators. The first indicator, families have access to a variety of ECE programs for their young children, considers the provision of ECE services in a variety of settings for young children from birth to age five. For this indicator, three policy areas are identified: (1) state-funded programs; (2) child care subsidy programs; and (3) child care tax provision. The second indicator of a ready system of ECE, ECE programs are supported by an infrastructure that ensures high-quality programs for children, focuses on infrastructure and quality enhancements. For this indicator, five policy areas associated with the establishment of an infrastructure to support quality ECE programs are examined: (1) licensing and accreditation; (2) professional development and compensation; (3) ECE systems development (which includes governance, continuity, and outreach) (4) ECE standards and assessment; and (5) facilities and capital investment.

Outcome 2: Ready Schools

In order for young children to thrive and be ready for school, schools must acknowledge the unique learning needs of young children. What works for fifth- or sixth-graders will not work for kindergarteners, so schools must take specific steps to ensure that they are ready to promote young children's formal learning. In this policy logic model, ready schools are operationalized by considering two indicators. The first indicator, children have access to high-quality early school experiences, focuses on the learning process children experience in their kindergarten classrooms. This indicator, a general policy are of kindergarten quality is considered. The second indicator, schools are coordinated with and linked to other services for children and families, considers linkages between schools and families, as well as between schools and other service

providers. Policies for this indicator are included in the policy area: ECE systems development.

Outcome 3: Ready Families

Due to the critical role of families in shaping children's lives and future outcomes, characteristics of families are key detriments of children's school readiness. In the policy logic model, two indicators of family well-being and readiness are considered. The first indicator, families are economically stable, considers poverty and the associated policies that aim to decrease the poverty rate and make work pay for low-income families. The second indicator, parents are well-informed and supported in their role as parents, focuses on all parent's access to information and supports needed as they raise their children. Although these indicators are directly tied to school readiness, another Policy Matters paper focuses exclusively on family economic success. State policy-makers should use this reference to identify policy areas, policy options, goals and benchmarks.

Outcome 4: Ready Communities

Communities in which children grow and develop impact their school readiness through access to institutional resources, as well as through the provision of safe and supportive neighborhoods. Another critical aspect of ready communities is coordinated governance and local decision-making regarding programs for young children and their families. Two indicators of ready communities are identified. The first, families have access to community-based health services, considers the important role of preventative care, treatment, prenatal and mental health services, as well as access to nutrition programs that reduce food insecurity for low-income families. The second indicator, families live in safe and supportive communities, considers crime and exposure rates, quality of housing, and the supply of institutional resources such as libraries and parks. Despite the importance of these policies for school readiness, they are being considered in two other Policy Matters papers: "Improving the Health of Families" and "Supporting Strong Family Relationships." Specific policy features, policy options, goals and benchmarks for these indicators must be addressed using those resources.

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Domain 1:
Physical Health and Development.

Introduction

During the first few years of life the human body changes continuously and dramatically. These changes are not simply a matter of growing taller or gaining more weight; they also involve a complex series of changes in body composition and proportion. Physical well-being, health and stamina are central to children's entire learning experience and are building blocks to a lifelong active and healthy lifestyle. The health of a child is essential for the young child's brain development. Good health gives children the necessary energy, stamina and endurance to participate actively in a variety of experiences crucial to the learning process.

All children are influenced by external factors such as access to and utilization of health care and various social and environment risks such as lead, pesticides, inadequate or unhealthy water supplies and violent homes and neighborhoods. Physical symptoms or medical appointments associate with poor health status may impact children's participation in learning activities in school and in life. Establishing a medical home for children, in which they receive comprehensive health care as well as diagnosis and intervention for health conditions, is critical. Similarly, when young children receive adequate nutrition and physical movement, their development is supported. Lack of such experiences may delay mastery of some skills. Supporting young children's overall physical well-being, health, and motor development is vital to their learning and development.

Definitions

Parents define "healthy" children as happy, active, free from disease, safe, and engaged in meaningful activities with the world around them. For the purposes of the North Dakota Early Learning Guidelines, three distinct categories of attributes are included in Domain 1: Physical Health, Stamina, and Safety.

Essential aspects of ***Physical Health*** are good personal hygiene and basic personal care practices, including daily living skills such as healthy sleep patterns, bathing, dressing, and dental hygiene. Also include in health and personal care is support and encouragement for children to eat a variety of nutritious foods. Recognizing and appropriately managing acute and chronic illness is also essential to promoting optimal physical health.

Early childhood is the time children develop active, healthy lifestyles. ***Stamina*** refers to the physical fitness that allows children to participate in group activities and maintain attention to, and interest in, tasks necessary to the learning process. Applying stamina,

energy, strength, and flexibility to a variety of physical activities are major elements of physical development and fitness.
Safety is a critical aspect of physical well-being and includes protecting children from exposure to harmful substances and situations and helping children learn about safety rules and regulations, know when and how to ask for help, and recognize the boundary betweens safety and danger.

Supporting Individual Differences and Diversity

Children's physical well-being, health, and stamina are impacted by vision, hearing, neurological, and other disabilities. In general, young children who experience serious delays gain significant benefits from participation in early intervention programs that provide center-based or home-based education and family support.

Global Strategies

Adults and caregivers should make every effort to optimize the growth and development of each child, providing high expectations for all children regardless of prenatal conditions, child, family and environment characteristics, and socioeconomic status.

Inappropriate use of media/screen time (television, videos, computer and video games, can negatively impact a child's physical health and development by decreasing physical activity, increasing intake of non-nutritious foods, and decreasing interactive activities. The American Academy of Pediatrics (AAP) recommends discouraging screen time for children younger than 2 and encouraging interactive activities that will promote brain development such as play, talking, singing, and reading together. For older children, the AAP recommends that caregivers limit children's' total media screen time to no more than 1 to 2 hours per day of quality children's' programming.

Strategies that should be considered for all children from birth to school entry to encourage their physical well-being, health, and safety are listed below. These strategies will help to ensure that every child receives learning experiences that meet his or her unique needs. Specific strategies individualized for specific age groups are contained in the section entitled *Supportive Practices*.

- ✓ Ensure children's health and safety by providing adult supervision and guidance
- ✓ Ensure that children have a medical home in which they receive comprehensive health care, including preventative medical and dental check-ups, immunizations, and care for acute and chronic health programs.
- ✓ Seek advice from medical and developmental experts when concerned about children's physical health, development, and well-being.
- ✓ Ensure that children receive nutritious foods that promote optimal health and development.
- ✓ Provide children with daily opportunities to play actively, promoting health-related fitness and movement.
- ✓ Ensure that the environment is safe from cultural or other forms of bias
- ✓ Become familiar with the risk factors and signs of child abuse and neglect

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I. Physical Health and Development: Children will develop optimal physical health and stamina

Purpose: Research shows that if children are healthy and safe, they will learn better. Knowledge and habits of healthy living begin early in life. When programs use good, thorough hand-washing techniques and sanitization of toys, they actually reduce the numbers of colds and cases of diarrhea in their centers. While young children are not in charge of providing themselves with a healthy environment and lifestyle, they can begin the lifelong process of developing habits of healthy living and physical activity.

Birth to 6 Months	
Indicators	**Possible Caregiver Strategies**
1. The infant fixates on human face and tracks or follows movement presented at 9-12 inches from the face. 2. The infant turns head and eyes in the direction of the parent voice. 3. The infant is comforted and appears to enjoy touch and being held by a familiar adult. 4. The infant regulates eating and sleeping patterns and emotions evidenced by the establishment of consistent routines and schedules about 50% of the time. 5. The infant grows from birth length to__-__ inches by 6 months. 6. The infant's weight increases from birth-weight to ___ to ___ lbs by 6 months of age. 7. The infant's head circumference increases from ___ to ____ by 6 months of age. 8. The infant may have first tooth by 6 months of age. 9. The infant produces different cries for different reasons. 10. The infant begins reaching for objects. 11. The infant rolls over in one direction. 12. The infant sits independently with minimal assistance.	• Help your infant make sense of his or her world by being predictable. Set up schedules that include regular feedings and naps. Create routines for daily activities at mealtime, bedtime, bath time and diapering. • Light and sound may affect the brain's sleep centers, so provide a dark, quiet sleep area. A moderate temperature is preferred, since this may also influence the brain's sleep centers. • It is important to watch for signals that the infant is ready to sleep- over stimulated infants have a difficult time calming down to rest. • Infants should be put to sleep on their back and not on their stomach. The stomach position has been associated with increased occurrences of SIDS (Sudden Infant Death Syndrome). Don't use soft bedding or toys. • Use safety seats in back seat. Never place baby in the front seat with a passenger airbag. • Keep home and car smoke-free. • Never shake baby or leave baby alone in a tub or on high places. • Keep hot liquids away from baby. • Wash hands often. • Know signs of illness, including fever, seizure, rash, unusual irritability, lethargy, failure to eat, vomiting, diarrhea, dehydration, jaundice, apnea, and cyanosis. • Never warm bottles in microwave or put baby to bed with a bottle. • Baby-proof your home now that the infant has increased dexterity, mobility, and curiosity. • Use crib exercisers that encourage the infant to push, full, press, and move working parts. • Avoid choking hazards by putting any toys or objects that are smaller than 1 inch in any dimension out of the infant's reach.

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I. Physical Health and Development

Purpose: Nutritional needs of young children require avoiding sugar-filled snacks and drinks. Safety is a continuous process of vigilance, anticipation, and knowing the appropriate expectations for each age group. The goal is to keep thing safe while still allowing for exploration.

7 to 12 Months	
Indicators	**Possible Caregiver Strategies**
1. The infant visually attends to an object for 5 seconds 2. The infant follows an auditory stimulus. 3. The infant grows from __ inches to _____ to ____ inches by 12 months. 4. The infant's weight increases from ___ to ___ -____lbs. by 12 months of age. 5. The infants head circumference increases to ___ to ____ by 12 months of age. 6. The infant pulls self up to standing posture next to furniture. 7. The infant cruises around furniture. 8. The infant drinks from a cup. 9. The infant begins feeding self finger food. 10. The infant sleeps through the night but way awaken and cry occasionally. 11. The infant moves 3 or more feet by brawling. 12. The infant brings self to a sitting position when lying on back.	• Provide objects and toys that have a variety of textures, shapes, sizes, weights, etc. • Remove objects or change activities when the infant seems over-stimulated or switch to a new location where there are fewer distractions and the choices are more limited. • Be good models of health practices through consistent hand washing, turning head when coughing, using a stool rather than standing on furniture, wiping spills to prevent falls, etc. • An infant's vision will develop with little or no help, according to most experts. But exposing the infant to a variety of interesting sights and talking to him about what he or she sees are ways that parents can make the most of an infant's developing visual skills. Television shows are not the best choice, however, since they often "cut" quickly from scene to scene, or "pan" faster than an infant can follow, and may be over-stimulating or even upsetting to infants. • The most important rule is to provide a safe environment for your infant in which to move around and explore. Child proof your home's hanging lamps and curtain cords, electrical outlets, windows, and closets or cabinets that contain cleaning solutions and other chemicals. Use gates to keep your infant away from stairs and other hazards. Chick wiring from appliances that the infant might trip over or pull on. Install devices to keep the toilet seats closed or always keep bathroom doors closed. Turn pot handles on the stove away from the front of the stove where the infant could pull them off. Be careful not to put cups of hot liquids on low tables that the infant can now pull up on, and reach. It's also a good idea to remove all breakables from low shelves, coffee tables, and surfaces.

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I. Physical Health and Development

Purpose: Research shows that if children are healthy and feel safe, they will learn better. Knowledge and habits of healthy living begin early in life. While young children are not in charge of providing themselves with a healthy environment and lifestyle, they can begin the lifelong process of developing habits of healthy living and physical activity.

13 to 24 Months	
Indicators	**Possible Caregiver Strategies**
1. The toddler grows from birth length to__-__ inches by 24 months. 2. The toddler's weight increases from birth-weight to ___ to ___ lbs by 24 months of age. 3. The toddler's head circumference increases from ___ to ____ by 24 months of age. 4. The toddler beings to explore the environment independently. 5. The toddler demonstrates more advanced movement and motor skills such as running and climbing. 6. The toddler gestures to indicate toileting needs. 7. The toddler uses two word utterances, combined with gestures, to communicate. 8. The toddler follows a 2 or 3 step direction. 9. The toddler engages in pretend play.	• As you infant begins walking, it will be essential to make sure your home is safe for typical falls. • Always provide supervision around pets, mowers, driveways, and on the street. • Never leave a child alone at home or in the car, even for brief periods of time. • Keep emergency telephone numbers handy including the medical center, poison control center, and the child's parent's telephone number. • Provide three nutritious meals a day, with 2 or 3 healthy snacks daily. • Encourage the child to feed self and drink from a cup. • Let the child decide what to eat, and don't force eating. • Avoid foods that are easy to choke on, and limit sugar. • Brush child's teeth with soft toothbrush, water only. • Make sure the room is warm enough so that you don't have to keep the infant bundled up or covered with layers of clothing and blankets. Infants need a warm environment where they can spend time wearing only limited amounts of clothing. • Your infant will benefit from many opportunities to safely move around and use his or her muscles. Play with your infant on the floor so that he or she gets plenty of exercise and interaction with you. If you are in the habit of exercising, or "working out", yourself include your infant. Have your infant lie on the floor and watch you. Periodically help your infant "exercise", while simultaneously talking and interacting with your infant.

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I. Physical Health and Development **Purpose:** Research shows that if children are healthy and feel safe, they will learn better. Knowledge and habits of healthy living begin early in life. While young children are not in charge of providing themselves with a healthy environment and lifestyle, they can begin the lifelong process of developing habits of healthy living and physical activity.	
25-30 Months	
Indicators	**Possible Caregiver Strategies**
13. Holds spoon, scoops food and brings to mouth with spilling 14. Plays on outdoor play structures (climbing, sliding, etc.) 15. Removes unfastened garments 16. Knows which faucet is hot and cold 17. Most baby teeth have grown in 18. Sleeps 9-12 hours per night 19. Stands 34-38 inches tall 20. Weighs 26-32 pounds	• Don't allow your child to eat whatever he wants. Your job is to provide good food. Your child decides how *much* of it he wants to eat. Let him eat a lot when he is in the mood, and skip a meal when he's not hungry. • Don't fight with a picky eater. However, if he is not growing and gaining weight, talk to your child's health provider. • Do not use food as a bribe or threat. Never use food to reward "good" behavior or to punish "bad" behavior. • Support children's need to move and be active • Provide opportunities and time for outdoor large motor play. • Encourage and assist your child with brushing his teeth.

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31-36 Months	
Indicators	**Possible Caregiver Strategies**
1. Uses fork to spear bite sized chunks of food 2. Hops in place on one foot 3. Verbalizes toilet needs fairly consistently 4. Follows basic health practices when reminded (washing and drying hands, brushing teeth)	• Help your child choose foods that can be easily eaten independently. • Provide children with opportunities to participate in self-help activities designed to promote the growing independence desired by toddlers such as: ▪ Washing hands and face ▪ Eating with spoon and fork ▪ Throwing away cup and napkin ▪ Taking off and putting on socks and shoes, coats, etc. ▪ Putting away toys ▪ Washing and drying dishes ▪ Bathing and drying dolls ▪ Becoming aware of the rules of safety ▪ Potty training (where and when appropriate) ▪ Brushing teeth after eating, and before bed

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37-48 Months	
Indicators	**Possible Caregiver Strategies**
1. Weighs 25-44 pounds 2. Stands 34-43 inches in height 3. Develops a full set of baby teeth 4. Sleeps 10-12 hours at night 5. Sleeps through most nights without wetting the bed (occasional accidents are still quite common) 6. Uses the toilet with some help (many boys may not be ready for toilet learning until 3 ½) 7. Has a full set of baby teeth	• Encourage physical activity habits and enjoyment that can last a lifetime. • Help your child connect learning with fun. • Teach traffic safety while pretending indoors and while on outdoor excursions. • Make sure that play areas are free of dangers such as used refrigerators, debris, and dangerous chemicals. • Keep electrical outlets covered and keep electrical cords out of main play areas. • Toys you may provide consist of: nesting toys, cups that stack, puzzles (306 pieces), matching games, small pegboard and pegs, puppets, toy animals, dolls, small table and chairs, crayons, washable felt tip markers, play dough, glue and paper, paint, paint brushes, stickers. • Include healthy snacks from cultures represented in the group or home

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48-60 Months	
Indicators	**Possible Caregiver Strategies**
1. Wipes nose independently 2. Washes and dries face 3. Brushes teeth, rinses and expels liquid 4. Has overall clean appearance 5. Stays awake and active except when napping	• Provides health education for children and families • Models appropriate health and safety practices • Identifies basic health and safety rules • Provides practice for hygiene and health skills

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I. Physical Health and Development **Purpose:** Research shows that if children are healthy and feel safe, they will learn better. Knowledge and habits of healthy living begin early in life. While young children are not in charge of providing themselves with a healthy environment and lifestyle, they can begin the lifelong process of developing habits of healthy living and physical activity.	
60-72 Months	
Indicators	**Possible Caregiver Strategies**
1. Covers mouth and nose when coughing/sneezing 2. Brushes teeth following good dental hygiene procedures 3. Uses tools typical for doctors and nurses appropriately as props in play 4. Identifies roles of a number of different health care providers 5. Recognizes that there are "good" and "bad" drugs 6. Understands that it is unsafe to accept rides, food or money from strangers 7. Recognizes that there are "good" and "bad" touches 8. Obeys traffic lights and signs	• Caregiver teaches children about basic health and safety rules • Caregiver models appropriate health and safety rules • Caregiver provides opportunities for emergency drills • Caregiver teaches children to recognize common signs of danger • Caregiver provides a variety of prompts that allow children to explore the health and safety professions and typical health and safety profession related activities

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Domain 2.

Motor Skills Development.

Introduction

An infant's development depends on both the traits he or she was born with (nature), and what he or she experiences (nurture). All areas of development, such as emotional, intellectual, motor, and language, are linked. Each depends on, and influences, the others. What children experience, including how their parents respond to them, shape their development as they adapt to the world.

An infant is born with a sensory system that is not fully developed. A newborn has vision at birth, but it is the least mature of the senses. The newborn's eyes can track or follow movement, but only within a distance of 9-12 inches from the infant's face. The eyes of a newborn cannot yet focus as well as those of an adult. As a result, objects and people that the infant sees look a bit fuzzy. Before 3 months of age, the infant sees best when looking at things "out of the corner of their eyes" (peripheral vision). They most easily notice movement and high-contrast patterns (light versus dark). At about 1 month, they may get "visually stuck" and cry because they can't stop staring at one thing! Soon, they learn to "detach" their gaze to look at something else. Older infants gradually develop a preference for staring "right at something" (central vision) and by 3 months most like to watch their hands, and can visually follow an object that is moving in a circle (such as toys on a mobile). The area of the brain that sends and receives messages about what the newborn sees will continue to develop over the next six months until the infant's vision is as clear as an adult's. Providing infants with opportunities to look at things in the world around them including your warm, smiling face helps to create an environment that supports visual development. With normal visual stimulation, better eye focus and clear vision will gradually develop.

The newborn can hear a variety of sounds. Infants can hear the rhythms and tones of mother's voice before they are born. The infant is especially sensitive to the sound of human speech, which means the sound of your voice. Infants are amazingly interested in the basic speech sounds of language. Not only do newborns hear your voice when you speak, they can also turn their heads and eyes in the direction of your voice. Talking to an infant, even if you don't think you will be understood, may help the brain develop the connections that are necessary to fine tune hearing and to understand language.

The newborn's sensitivity to touch is well developed at birth. In fact, touch is the first sense to begin developing during the prenatal period. A newborn is especially responsive to touch around the mouth, the palms of the hands, and the bottom of the feet. An infant's skin is so responsive to the stimulation of touch that the brain registers touch at the slightest pressure.

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Gross and fine motor skills have long been acknowledged as cornerstones of early development and learning and as key dimensions of school readiness. Motor development is closely linked with children's language development, cognition, social competencies, and emotional development. Through an interaction of maturation and experience, physical and motor development occurs along a relatively predictable sequence from simple to more complex. There general principles underlie the acquit ion of motor skills. First, most children develop form head to toe. For example, young children gain control of their neck muscles before they develop the skills to control their arm movements, Arm movements occur before children learn to walk. Second, children develop skills from the center of their bodies outward. For example, young children gain control of balance and their center of gravity before they develop the skills to catch and throw using their arms. Third, children develop motor skills involve large portions of their body first and then progress to skills using specific body parts. For example, young children hold objects by grasping them between fingers and palm before using the thumb and index finger in a more sophisticate pincer grasp. The order in which these abilities are developed is virtually the same for most children around the world.

Despite the existence of relatively predictable sequences of physical skills, the development of young children's physical and motor skills is highly individualized and often uneven. Growth spurts in physical development influence children's ability to master certain gross and fine motor skills. For example, for typically developing children, it is not unusual for individual differences in creeping and crawling to vary significantly.

Definitions

Sensory skills involve use of the sensory organs to take in information from the world around. Vision is the use of the eyes to receive and process visual information. Hearing is the ability to use the ear mechanism to receive and process auditory information. Touch sensation is the ability to use the sense of "feel" to receive feedback about the physical properties of objects. Other sense organs that are used to take in information from the world around us are the ability to smell odors and aromas and to taste substances.

Motor development has three distinct components: gross motor skills, fine motor skills, and sensor motor skills. Gross motor skills are characterized by movements of the entire body or large muscles of the body. They include the abilities to roll over, crawl, walk, run, jump, hop, skip and climb. Fine motor skills involve the ability to coordinate smaller muscles in the arms, hands and fingers. Fine motor skills include grasping, cutting with scissors, fastening buttons. Sensorimotor skills require the ability to use the senses such as vision, hearing, and touch, to guide movements. One of the key aspects of sensorimotor development is eye-hand coordination.

Supporting Individual Differences and Diversity

Physical and motor development includes aspects of biological maturation that reflect genetics, nutrition, health, and the environment. Even though the development of physical skills and

abilities follows a more or les predictable progression, individual rates of physical and motor development vary for a variety of reasons. Because motor development varies widely among individuals, cultures, and contexts, inappropriate and premature labeling of children must be avoided. Differences should not be understood to be deficits.

Early intervention positively reduces the effect of disabilities on children's perceptual and motor development. Children who have disabilities, developmental delays, or who are at risk for developmental delays may need assistive technology or equipment; changes in activities, space, or play objects; or other resources to support their participation in daily activities.
Movement styles, physical activity levels, and motor abilities also vary across cultures. For example, parents of some cultures are more active and physical in their interactions with young children, valuing animated and exuberant interactive patterns. In other cultural groups quietness and stillness are valued more than physical forms of interaction. Recognition, understanding, respect and support of these variations will support the physical health, well-being, and motor development of young children.

Global Strategies

Strategies that should be considered for all children from birth to school entry to encourage their motor and sensory development are listed below. These strategies will help to ensure that every child receives learning experiences that meet his or her unique needs. Specific strategies individualized for specific age groups are contained in the section entitled *Supportive Practices*.

- ✓ Provide safe environments for children, both indoors and outdoors, that facilitates physical activity and do not restrict movement for prolonged periods of time.
- ✓ Ensure that materials, both indoors and outdoors, are easily accessible to all children including height, size, and location.
- ✓ Incorporate songs games, chants, drumming, dances, or other culturally specific large motor activities into children's daily routines.
- ✓ Encourage both structured, directive motor movements (where the adult initiates the movements to be imitated), and self-initiated motor activities (where the child selects the movements).
- ✓ Children with sensory disabilities such as vision and hearing losses will require extensive support to physically explore the home environment.

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II. Motor Skill Development: Children will develop functional gross and fine motor skills.

Purpose: Physical development is integral to building children's self esteem, confidence, fitness, and well-being. As children refine their physical movements, they develop higher-order thinking skills that are necessary for future social and academic success. Fine motor development plays an integral part in the child's school performance. Children need well-rounded playtime with opportunities to develop both large and small motor control. The child's chosen play activities will have an enormous influence on the ability to focus and enjoy later schoolwork. The toys a child plays with will also affect motor development.

Birth to 6 Months	
Indicators	**Possible Caregiver Strategies**
1. The infant turns head and eyes in the direction of the parent voice. **2.** The infant, when placed in the prone (tummy) position, bears weight on shoulders and fisted hands at rest by one month and on the forearms and ulna borders of lightly fisted hands by 2 months. **3.** The infant demonstrates an immediate, strong and consistent Asymmetrical Tonic Neck Reflex (ATNR) by 2 months of age. **4.** The infant demonstrates an emerging Grasp Reflex by 2 months of age. A stimulus, such as a crayon, inserted into the radial side of the palm results in thumb and all fingers flexing and adducting, followed by synergistic flexion with the entire extremity flexing. 5. The infant demonstrates Reflexive Movements with hands. The movements consist of scratching and clutching movements elicited by touching objects. 6. The infant brings hands together at midline. 7. The infant begins reaching for objects. 8. The infant develops greater control over his/her body, evidenced by rolling, reaching and grasping for objects, and sitting with assistance. 9. Infant anticipates being lifted or fed and moves body toward caregiver when being approached. 10. Infants demonstrate improved gross motor skills including: ➢ Holding on to fingers and pulling self to sitting ➢ Standing with hands held, bouncing ➢ Infants sit supported, head steady	• It is important to remember that the reflexes will develop automatically and become integrated into volitional movement as the central nervous system or brain matures. The timing for the maturational process is built in and cannot be speeded up through stimulation. • Strategies that will facilitate the infant's passage through the reflex integration process consist of making your child physically comfortable at all times and providing a stimulating and safe environment in which to "do what comes naturally". • Make sure your child is wearing clothing that does not restrict movement. Clothing that is too tight will limit the movement range of the reflex patterns. • Use your social interaction "games" and auditory stimulus as a method for encouraging the infant to orient, turn, and later move in different directions. • While interacting with your infant, move to the left side of the infant, and then at a later time, to the right side of the infant. • It is important that an infant be placed in the prone position occasionally. Prone positioning builds muscle strength in the back and neck areas, critical for later fine motor and writing skills. • If your infant dislikes the prone position, rub or stroke his or her back continuously while in this position. Begin with just a few seconds, no more than 10 seconds, and then place the infant in a more preferred position. Then gradually increase the amount of time the infant will tolerate placement in the prone position. You may begin decreasing the continuous stroking also after your infant begins tolerating the position for 60 seconds or more.

	• While in the prone position, talk to the infant from the front, and then from each side. Try the interaction games. Present objects while the infant is in the prone position. • It is vital to remember that you must stay with your infant at all times while placed in the prone position. Never leave your child in this position alone. • Make sure the baby's hands are unrestricted and free to move when holding the baby and when interacting with baby in the supine position. • Periodically, exert gentle pressure to open the infants closed fist. Put your finger in the reflexive fist. Try other small objects or pieces of cloth. • Offer toys to your infant. Periodically place the toys out of your infants reach. Observe your infant's response. • Help your infant sit by providing support. Do the same

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II. Motor Skill Development: Children develop optimal physical health and stamina.

Purpose: Physical development is integral to building children's self esteem, confidence, fitness, and well-being. As children refine their physical movements, they develop higher-order thinking skills that are necessary for future social and academic success. Fine motor development plays an integral part in the child's school performance. Children need well-rounded playtime with opportunities to develop both large and small motor control. The child's chosen play activities will have an enormous influence on the ability to focus and enjoy later schoolwork. The toys a child plays with will also affect motor development.

7 to 12 Months	
Indicators	**Possible Caregiver Strategies**
1. The infant rolls over both ways 2. The infant bears body weight on forearms in prone position 3. The infant scoots, crawls, and may stand 4. The infant moves 3 or more feet by crawling. 5. The infant pulls self up to standing position next to furniture. 6. The infant cruises around furniture. 7. The infant sits supported, head steady 8. The infant demonstrates more advanced fine motor skills including: a. Reaching for and grasping blocks or other small toys b. Transferring objects from one hand to another c. Reaching for objects while in a prone position d. Demonstrating a refined neat-pincer grasp with thumb opposition e. Points with index finger	• Before the infant is mobile, provide lots of practice and freedom to exercise the hands, arms, torso and legs by playing on the floor in safe surroundings. • Baby-proof the house using safety locks on kitchen cabinets, drawers, and closet doors. Move breakable objects or those that can be toppled out of reach. Put safety plugs in electric sockets. Remove small objects that could cause choking. • Supervise stair climbing/crawling. • Move in rhythm and dance together to music. • Place an appealing toy just outside your infants reach to encourage your infant to move toward it. • Urge your infant to grasp, manipulate, mouth, stack, and shake, bang. Easy to operate pop-up toys will help your infant coordinate eyes movements with hand movements and help connect what he or she does with something that happens. Soft balls, especially balls that wobble when they roll, can attract and hold your infant's interest. • Give your infant bath toys that do more than just float so that your infant can be busy with his or her hands pouring water, making a water wheel turn, or squirting water. • Allow your infant to begin having finger food.

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II. Motor Skill Development: Children will develop functional gross and fine motor skills. **Purpose:** Physical development is integral to building children's self esteem, confidence, fitness, and well-being. As children refine their physical movements, they develop higher-order thinking skills that are necessary for future social and academic success. Fine motor development plays an integral part in the child's school performance. Children need well-rounded playtime with opportunities to develop both large and small motor control. The child's chosen play activities will have an enormous influence on the ability to focus and enjoy later schoolwork. The toys a child plays with will also affect motor development.	
13 to 24 Months	
Indicators	**Possible Caregiver Strategies**
1. The toddler walks independently with good quality. 2. The toddler demonstrates more complex exploration and play skills with toys and objects 3. The toddler demonstrates more advanced movement and motor skills such as running and climbing 4. The toddler turns the pages in a book 5. The toddler imitates scribbling motions 6. The toddler creeps or crawls up 4 steps without assistance 7. The toddler walks without support for 10 feet without falling 8. The toddler picks up a raisin with the ends of the thumb and index finger in an overhand approach (neat pincer grasp)	• Provide opportunities for toddlers to ambulate in clutter free environments that are conducive to exploration and gross motor movement. • Provide large muscle physical movement equipment appropriate for toddlers such as toddler jungle-gyms, large balls, and other pieces of equipment that are padded and safe for toddlers. • Also provide free access to children's books and other fine motor material such as large beads, 1-inch cubes, puzzles, etc. • Provide supervised experiences with crayons, paints, and other media that will improve fine motor skills. • Play games that involve both large and small muscles, such as inserting small blocks into containers, unwrapping paper from a cardboard box, and rubbing together things with different textures. • Play with your infant on the floor as much as possible. Make a big deal over the infant's accomplishments by clapping and cheering. This will increase your infant's interest level and enthusiasm for moving about.

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II. Motor Skill Development

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25 – 30 Months	
Indicators	**Possible Caregiver Strategies**
A. Fine Motor: Grasp, Reach, Object Manipulation 1. Grasps writing tool near writing end 2. Imitates vertical and horizontal lines 3. Uses more wrist action 4. Unscrews lid on small (1") jar or bottle 5. Turns knob to open doors 6. Places 5 rings on stand in any order 7. Separates 4 attached beads 8. Strings 4 one inch beads 9. Turns pages one at a time 10. Likes to take things apart and put them together again (puzzles, toys) 11. Turns knobs (radio, TV, stereo) 12. Imitates building a train by aligning 3 blocks and placing another block on top of the last block 13. Inserts a circle, square, and triangle into a shape sorter or form board 14. Builds a tower of 8 one inch blocks 15. Puts a 3-piece puzzle together 16. Snips with a scissor **B. Posture/Balance** 1. May prefer running to walking **C. Locomotion: Crawling, Walking, Climbing** 1. Uses heel-toe progression 2. Walks a tiptoe for 4-5 feet	• Spend time outside, where there is plenty of room to safely run, jump and climb. • Visit a neighborhood park where there are other children to play with. • Include your child in family sports, like swimming together or kickball. • Create a safe place in your home where your child can actively explore. • Take walks with your child and use them as opportunities to teach him important concepts. • Show your child how to hop like a rabbit, tiptoe like a bird, waddle like a duck, and slither like a snake and run like a deer. • Teach, model and provide many opportunities to run, gallop, throw, catch, hop, kick, dance, jump, climb, pull, carry, stretch, bend, twist, and move isolated parts of the body. • Encourage physical activity habits and enjoyment that can last a lifetime. • Provide miscellaneous materials to develop small muscle skills (cutting, tearing, drawing, lacing) • Allow a variety of prewriting materials (paint, chalk, play dough) • Craft activities require your constant supervision as a toddler often does not know when to stop squeezing the glue, when to stop snipping with a scissor, etc. • Encourage participation in simple games, finger plays and songs. • Teach through organized play and games as well as spontaneous play. • Teach traditional games as the child readiness develops. • Be aware of the types of clothing and footwear that facilitate

3. Walks backwards 10 feet 4. Walks 3 steps forward on balance beam (both feet on beam) 5. Walks upstairs 4 steps, alternating feet and using wall or rail for support 6. Climbs, runs, but can't change direction quickly 7. Sits on riding toys and pushes with feet; may ride tricycle **D. Active Motor: Throwing, Jumping, Kicking** 1. Throws a ball 5 feet without deviating from a straight course more than 20 degrees 2. Throws objects using forearms 3. Jumps a distance of 2-4" 4. Jumps in place 5. Jumps from bottom step or other stationary low object 6. Swings leg to kick a stationary ball 7. Throws a ball 7 feet without deviating from a straight course more than 20 degrees 8. Jumps down from a stable object 16-20 inches high with one foot leading; no support offered	participation in large motor activities.

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II. Motor Skill Development

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31 – 36 Months	
Indicators	**Possible Caregiver Strategies**
A. Fine Motor: Grasp, Reach, Object Manipulation 1. Discriminates shapes by tactile discrimination 2. Screws lid on jar 3. Copies circle 4. Cuts paper from one side to opposite side 5. Builds a 3 block bridge with based not touching (2 block base, 1 block on top) 6. Builds a tower of 9-10 blocks 7. Unbuttons 3 buttons in 75 seconds 8. Enjoys projects that involve paint, scissors and glue 9. Finger paints 10. Snips on a line with scissor **B. Posture/Balance** 1. Stands up from supine (on back) position (without feet rolling to side) and pulls forward to sitting position, then stands 2. Stands on one foot for 3 seconds **C. Locomotion: Crawling, Walking/Running, Climbing** 1. Walks upstairs alternating feet 2. Walks downstairs 4 steps without support, placing both feet on each step 3. Walks on tiptoe for 8 feet **D. Active Motor: Throwing, Jumping, Kicking** 1. Catches a ball with arms straight 2. Jumps down without support form stable object 18-24 inches	• Allow children to run, throw, catch, jump, and ride on riding toys. • Provide low climbing structures. • Provide modeling clay/play dough activities. • Provide blocks and puzzles. • Containers that can be filled and emptied with sand or water (under supervision) are great. • Children learn from lacing, sewing activities, cutting and pasting. • Alert your child's doctor, nurse or early childhood specialist if your child displays any of the following signs of possible developmental delay for his age range: ▪ Frequent falling and difficulty with stairs ▪ Cannot build a tower of more than 4 blocks ▪ Difficulty manipulating small objects ▪ Cannot copy a circle by age three ▪ Limited interest in toys • Teach, model and provide many opportunities to practice building with large and small blocks, modeling clay, using scissors or tongs, stringing beads, placing pegs in holes, assembling puzzles, using a computer mouse, and using a variety of writing utensils (pencils, crayons, markers) and art mediums (painting, printing, manipulating clay, stamping)

high; lands on both feet without falling 3. Kicks ball; ball travels 6 feet and does not deviate from course more than 15 degrees 4. Jumps over rope 2 inches off floor 5. Jumps 4 inches forward 6. Hops in place on one foot 3 times without losing balance	

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37-48 Months	
Indicators	**Possible Caregiver Strategies**
A. Fine Motor: Grasp, Reach, Object Manipulation 1. Uses eye hand coordination in tossing a ring 2. Shows hand preference 3. Cuts entire length of ½ inch black line within ½ inch of line in 15 seconds 4. Copies circle, square, cross 5. Strings 4-5 small beads 6. Unscrews cap off bottle in 30 seconds 7. Winds up toys (90 degrees in one turn) 8. Cuts circle along line within ½ inch of line 9. Buttons one button 10. Laces 2 holes in lacing shoe 11. Traces simple designs 12. Holds writing tool with fingers in tripod position 13. Uses tools appropriately (wooden hammers, spoon and fork, scissors, crayons, markers, pencils) 14. Performs tasks using more refined and dexterous motions (buttoning, zipping, attempts tying shoes) 15. Draws a person with head and 1-3 additional features **B. Posture/Balance** 1. Stands on one foot for 5-6 seconds 2. Stands on tiptoes with hands over head for 2 seconds without moving feet 3. Executes movements that require a stable base (raising foot to put a sock on while seated, balancing on one foot, bending from side to side while standing)	• Provide a tool center with real child-sized tools, including screwdriver, hammer, pliers, wrench, nuts, bolts, wood, and nails. Direct instruction is given as to the proper use of the tool center and adult supervision is needed at all times. • Provide opportunities to develop motor skill control by letting children peel fruits such as oranges, squeezing glue bottles and fitting interconnecting blocks. • Supply dress-up clothes with buttons, snaps, zippers and snaps. • Include whole-hand and finger activities such as finger printing, finger painting, playing with play dough, and finger plays such as "Where is Thumbkin?" • Provide opportunities for children to use technology such as tape recorders, calculators, and computers, play cameras/video recorders, telephones, and cash registers where they push buttons, dial, hold objects still, and open and close drawers. • Observe the use of child size scissors with thumb on one side and 3rd and 4th finger on other side, with 2nd finger being used to guide direction of the cutting. • Provide activities such as tightening and loosening nuts and bolts, screwing and unscrewing lids on jars, tearing paper, and squeezing objects such as clothespins, tweezers and eye droppers which will support the development of the use of thumb and forefinger pads to hold objects (pincer grasp). • Observe whether the child is holding the tools with the palm or with a tripod finger grasp. • Make a variety of writing instruments available (crayons, markers,

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C. Locomotion: Crawling, Walking/Running, Climbing 1. Stops from a full run 2. Walks on tiptoe for 9 feet 3. Walks upstairs and downstairs alternating feet without holding on to rail 4. Walks backward without stepping off taped line more than once 5. Demonstrates body spatial awareness in relationship to stationary objects 6. Experiments with galloping and skipping 7. Uses quick stops or changes in direction to avoid contact with moving objects or other people 8. Explores a variety of movements (pulling, crawling, catching balls, throwing bean bags, waving scarves, kicking balls, etc.) **D. Active Motor: Throwing, Jumping, Kicking** 1. Bounces ball to wall 2. Catches ball with elbows bent in front of body 3. Jumps over rope or hurdles 8 inches off floor 4. Jumps distance of 24 inches 5. Hops 5 feet 6. Pedals tricycle 10 feet 7. Jumps down from 16-18 inches at three years of age and 24-30 inch object without support at three and a half years of age (take off and land with both feet) 8. Hops 5 times on one foot and 3 times on other foot 9. Throws ball 10 feet (rotates shoulder and arm to rear, then follow through). Ball must not deviate more than 20 degrees 10. Jumps forward 6 inches on one foot 11. Underhand toss; hits target from 5 feet away 12. Jumps rope for two cycles 13. Stands on one foot for 2-5 seconds 14. Gallops 15. Skips 5 steps	pencils in a variety of sizes and thicknesses). • Choose a variety of appropriate puzzles for use within the learning environment. • Provide a small pitcher for children to use when pouring drinks or in tub during bath time. • Provide equipment such as paddles, balls, balloons, and tee ball stands to allow children practice with batting • Allow children to easel paint on an easel or other slanted surface. • Arrange jump ropes and hula hoops on the floor to challenge children to jump into and out of the hula hoops and over the jump ropes without touching them. • Design relay races where children can run forward on a line to complete an action such as touch a wall or pick up an object. • Provide nontraditional equipment for children to practice throwing and catching, such as balloons, bandanas, scarves and newspaper balls. • Play mirror games with children where the leader slowly moves one body part and the others mirror the movement. • Practice balancing on one foot near a wall. Allow children to utilize the wall as they need and gradually encourage free standing while balancing. • Incorporate movement games into outdoor time such as “Red Light, Green Light,” “Ring Around the Rosie,” “Follow the Leader,” “Freeze Tag,” where children can run and stop or change direction while in motion. • Play games where children respond to cues such as moving to a drumbeat or music. Children match movements with the beat, moving slowly to a slow beat and moving quickly to a fast beat and freezing when there is no beat. • Have children move in straight, curvy, and zigzag lines as they at out stories, sing songs or explore movements.

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II. Motor Skill Development

Purpose: Physical development is integral to building children's self esteem, confidence, fitness, and well-being. As children refine their physical movements, they develop higher-order thinking skills that are necessary for future social and academic success. Fine motor development plays an integral part in the child's school performance. Children need well-rounded playtime with opportunities to develop both large and small motor control. The child's chosen play activities will have an enormous influence on the ability to focus and enjoy later schoolwork. The toys a child plays with will also affect motor development.

48-60 Months	
Indicators	**Possible Caregiver Strategies**
A. Fine Motor: Grasp, Reach, Object Manipulation 1. Follows object diagonally using eyes only 2. Strings beads according to pattern using 3 shapes and 3 colors 3. Demonstrates hand dominance- right or left 4. Uses wrist motion to turn door knobs, lids 5. Draws a person with five parts 6. Unscrews nuts from bolts with thumb and index finger 7. Completes 14-20 piece puzzle 8. Holds a pencil with a three finger grasp 9. Cuts a straight and curved line with scissors **B. Posture/Balance** 1. Walks full length of balance beam that is 8 feet long and 4 inches wide 2. Pedals a 2 wheel bike with training wheels 3. Steers around a corner **C. Locomotion: Crawling, Walking, Climbing** 1. Walks up & down stairs tandem fashion alternating feet 2. Performs gross motor actions including: _____ broad jumps 12 inches, _____ jumps over a rope that is 5 inches high, _____ stands on right foot and left foot for 4-6 seconds, _____ begins to gallop, _____ throws ball overhand 3 to 10 feet by shifting weight before throwing,	• Provides adequate materials for practice of fine, postural, gross motor skills (jars with lids, buttons, zippers, scissors, drawing materials, balance beam, trikes, balls) • Provides activities that promote development of a wide range of fine, postural, gross motor skills • Provide time for planned and spontaneous activities to occur • Models fine, postural, gross motor skills

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_____ pedals trike **D. Active Motor: Throwing, Jumping, Kicking** 1. Catches ball with hands rather than arms 2. “Pumps” a swing 3. Kicks a rolling ball as running toward it	

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II. Motor Skill Development

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60-72 Months	
Indicators	**Possible Caregiver Strategies**
C. Fine Motor: Grasp, Reach, Object Manipulation 1. Builds a 10 block pyramid (4-3-2-1) 2. Uses computer mouse effectively 3. Progresses from using scribbles to shapes and pictures that represent more detailed ideas 4. Draws a person (fall, winter, spring) five or more parts, dimensional 5. Completes shapes by following the dots	• Caregiver allows children adequate time to practice fine motor skills (drawing, writing, grasping/releasing) • Caregiver initiates structured and spontaneous activities to promote growth/development and pre-academic skills • Caregiver provides a variety of materials for writing and drawing
D. Posture/Balance 1. Stand on one foot with leg bent at knee, hands on hips and eyes closed for 8 seconds 2. Stand up straight quickly (4x in 20 seconds)	• Caregiver uses games, songs and other activities to promote development of balance and postural strength • Caregiver provides a variety of surfaces to practice balance and build postural strength
C. Locomotion: Crawling, Walking, Climbing 1. Runs smoothly with changes in speed 2. Begins to skip 3. Walk sideways on balance beam 8 feet without stepping off	• Caregiver provides equipment and materials that encourage hopping, dancing, climbing, running, catching/throwing, etc. • Caregiver uses a variety of games and activities to promote development of locomotion and active motor skills (swings, trikes, climbing equipment)
D. Active Motor: Throwing, Jumping, Kicking 1. Performs gross motor actions: 2. Jumps from a height of 12 inches 3. Catches a ball with a baseball glove	• Caregiver provides activities in a variety of indoor and outdoor settings

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Domain 3.

Personal, Social and Emotional Development.

Introduction

Human beings are social creatures by nature. Throughout all phrases of life, people interact with one another. Learning how to be around others is essential. Indeed, children construct knowledge about their word through their social interactions. Healthy children in all cultures form early attachments with significant adults. For many families and cultural communities, the concept of being "well educated" includes social and emotional development, as it is the key to all other learning.

Even though emotions are a universal human phenomenon and social behavior is observed constantly in the world around us, social and emotional developments have historically been somewhat difficult to define and measure. The challenges stem from the broad range of behaviors and concepts included within social and emotional development. Emotional development includes assessing primarily internal process that is not always visible. Social and emotional variability according to cultural and situational contexts also makes it difficult to consider social and emotion responsiveness as static characteristics. Nonetheless, there is agreement that social and emotional development serves as the foundation for relationships and interactions that give meaning to children's experiences in the home, at school, and in the larger community.

The domain of emotional development is the least well-understood domain of development. Although several researchers have offered theories on how infants and young children develop emotional coping skills, we still are not certain as to the exact sequence or even the content of the domain. Many professionals have worked with children with atypical emotional development and have reported their techniques. The emphasis on most of these studies has been on atypical emotional conditions rather than typical emotional development, however.

In our study of young children, we must be sensitive to behaviors indicative of emotional development. Emotional feelings develop as a result of the infant's experiences, successes and failures, in interacting with people and objects in the environment. How the infant "feels" will evolve out of his or her inherited temperament and how effectively he or she learns to repair mismatches in social/environmental interactions. Components of the development of emotion in infants and young children, which must be examined, consist of:

A. ***Discrimination of Adult Facial Expressions***: Studies have shown that 3 month olds are able to discriminate between happy and surprise expression on familiar faces. Occasionally, 3 month olds will discriminate between sad and surprise expressions if the sad face is presented before the surprised face. This discrimination begins at the age when infants have become socially interactive and spend a lot of time engaging in "interactive games" with mom and dad. When mom and dad are using the variety of facial expressions to maintain interaction with the infant, the infant is learning to perceive and differentiate the different expressions. The infant continues to use and expand these nonverbal discrimination skills throughout life.
B. ***Behaviors Indicative of Emotional Development***: The interpersonal interaction occurring between the primary caregiver, mom and dad, and the infant during the first six months of life

are considered critical in forming the emotional bonds and experiences from which the infant learns how to relate to other people. The interaction skills lay the groundwork from which the infant will learn communication skills, cognitive skills, and skills in several other domains. They are also the precursor skills to learning to express emotional feelings. The infant develops "emotional feelings" very early in life. This has been verified in the study of clinical depression in infants, as well as in failure to thrive. The infant then learns to express these feelings through interactive behaviors. The experiences with success and failure in interaction will also have an impact on altering the emotional state as the infant develops. Basic emotions, which have been identified in infants at birth or within the first month of life, consist of pleasure, displeasure, anger, fear, joy, sorrow, and disgust. These feelings are displayed through facial expressions which are either present at birth or appear shortly thereafter. The facial expressions are considered to be reflexive at birth, lasting into the first few weeks, but serve as a barometer of the infant's feelings, accurately reflecting how he or she feels. These expressions provide meaningful social cues and are used by parents to interpret needs of the infant. The facial expressions are the earliest set of behaviors that the infant is going to learn to control. By the end of the first six months of life, the infant will have developed an understanding of the meaning of the human facial expression and voice and touch variations, and the changes they undergo to form different human emotional expressions and signals.

C. ***Temperament*** is defined as "the set of inherited personality traits that appear early in life." Temperament refers to primarily biologically based differences in reactivity and self-regulation. Some infants are referred to, as "good babies", meaning that they are basically content, demand little attention, and can be easily consoled. Other babies are said to be "difficult." They are fussy, demand a lot of attention, and are very difficult to console. Although general health, or how the infant feels, will have an impact on how he or she reacts and the amount of attention he or she demands, temperament is referring to a basic, inborn ability to adjust or adapt. Temperament is literally referring to how they react if they do not get what they want, or if it is delayed. Temperament examines "how long" it will take before they begin to cry, "how intense" the cry will be, how long it will last, and how long it will take to distract them before their mood changes.

Temperament appears to be relatively stable over time. Although some changes are observed as the newborns system matures and develops, the general temperament rating remains the same. Infants with high levels of temperament traits will have high levels of the same traits when they are adults. So one's basic temperament appears to be inherited and relatively stable throughout life. Temperament traits, which have been studied, include:

Approach/withdrawal: The infant's basic desire to initiate interaction or to readily be involved in interaction vs. the more skeptical, cautious infant who backs up, waits, and studies.

Mood*:* The jovial, happy-go-luck infant versus the serious, studious infant.

Self-comforting: The infant who readily resorts to self-comforting to handle the occasional irregularities in interaction.

Rhythmicity*:* The synchrony or joint rhythm that is part of the infant/adult dyadic interaction pattern. Implies adequate speed and timing.

Adaptability*:* The infant's resourcefulness in dealing with unique and novel situations encountered in the interactive process or force.

Intensity: The magnitude of interactive behaviors ranging from weak, half hearted attempts to intense, violent manifestations of interactive intent.

Threshold*:* The level of stimulation the infant feels comfortable with and can handle before becoming confused.
Distractibility: How quickly the infant becomes distracted or can have his or her attention diverted.
Persistence: How long the infant will continue trying to interact.

Based on typical response patterns or temperament traits, infants are categorized into one of three categories based on their general temperament characteristics.

- The *difficult baby* is fussier, more difficult to comfort, and harder to distract and soothe. The infant exhibits less self-comforting behaviors and appears moody. The infant becomes easily excitable and has a low threshold for stimulation. The infant exhibits intense manifestations of expressive behaviors.
- The *slow-to-warm-up baby* is basically "suspicious" or cautious. It is difficult to get to know the infant. The infant may exhibit discrepancies in temperament. After rapport is established, the infant is very trusting.
- The *easy baby* demonstrates a high level of approach behaviors. The infant is very adaptable and has a high threshold for stimulation. The infant can handle novel situations well and can be easily distracted. The infant is persistent and enjoys extensive interaction.

Although most researchers feel that the basis for temperament is inherited genetically, the environment plays a role in teaching infants acceptable forms of behavior to express temperament feelings. The infant will learn that some behaviors are acceptable avenues for expressing intrinsic feelings and others are not.

D. ***Readability of Infant Communicative Behaviors.*** Infants begin at a very early age to utilize social behaviors to interact with people in the environment. Initially, they use these behaviors in a reactive manner, simple reacting to discomfort, hunger, confusion, and feelings of well being. All of these behaviors are reflexive and beyond the control of the infant. When mom and dad consistently respond to these behaviors, the infant begins learning a discriminative use of the behavior. The behaviors, called cues or signals, consist of unique types of crying or whining, cooing and other vocal behaviors, as well as body movements and facial expressions. The cues become very distinctive, each cue or signal representing a special "need" or expression. The more consistently a parent responds to each behavior, the more distinctive that cue will become for the infant.

"Readability" of infant behaviors refers to the extent to which an infant's cues or signals are clearly defined and the extent to which parents respond consistently to the different cues and see them as intents to communicate. Being able to interpret the meaning of the unique behaviors and responding accordingly enhances the adult's feelings of being a successful parent. When infants are highly predictable, and produce very clear signals, the parents are able to interpret the meanings easily and quickly. In cases where the infant is predictable and "easily read," the parent is able to act in precisely the manner intended by the infant, further reinforcing the "intent" by the infant or the communicative value of the interaction.

When an infant is unpredictable and difficult to read, the parents are less sure about what it is they think the infant wants. Since they are uncertain, they many times respond in different manners to the same cure. This in turn, serves to confuse the infant in terms of what signal is supposed to be used for the specific purpose intended. It does not reinforce the development of clear-cut, distinctive cues in the infant. Over a period of time, the infant may become unresponsive from the confusion

resulting from the attempts to communicate with the caregiver. This will cause greater confusion to the parent, making the behaviors even more difficult to interpret. In cases like this, the parent will be less likely to initiate and respond to cues being given by the infant. This results in an even greater decrease in the infant's ability to learn to successfully signal or cue the adult. These social cues or signals and infant's ability to utilize them to successfully alter or direct the behavior of the parent, is the basis upon which social interaction and communication develop. The developmental progression of the various stages is included in the developmental indicators that follow.

E. ***Coping Strategies for Handling Stress***. From an early age, an infant's emotional development is intricately interwoven with attempts to interact and communicate with significant others in the environment. When interacting with mom and others, the young infant is simultaneously learning to cope with the stress that is inherent in the interaction process. Even in the very best interaction patterns, there is a necessary amount of stress. This stress is desirable. It literally teachers the infant to handle variations in interactive outcomes and teaches the infant to change behavior to accommodate to the stress. These newly acquired behaviors are referred to as "coping behaviors."

Normal interactive stress arises from many causes. It may result from mistiming of emotional signals, unclear signals, misreading of signals, or differences in goals or expectations. Providing too much situation or not quite enough stimulation may also cause stress. These stresses occur because it is impossible for the mother or infant to maintain mutual regulation over the course of an entire interaction. Theses stresses are a normal, typical part of all interactions. The stress that the infant encounters in the interactive process results from "mismatches". This means that there is a mismatch or incongruity between the infant's expectations of what should be happening in the interactions and what actually occurs. The infant expects something will happen, but it does not. Something else happens. An example would be when the infant expects mom to take her turn in the interaction by animating her face again and repeat her cooing sounds. Mom is distracted by someone entering the room and looks up to the door, momentarily ignoring the infant. Without these mismatches, the infant's repertoire of interactive behavior would never become elaborated. There would just be a continuous repetition of the exact same procedures. Although these mismatches stress the infant by causing negative emotions, they require the infant to learn coping behaviors for turning the mismatches into a math and the negative emotion into a positive emotion.

Six of the more common coping behaviors that have been identified in infants are presented below.

- **Signaling**- When a mismatch occurs, the infant will first attempt to signal the partner with emotional displays and other behaviors to correct the mismatch. These signals are used by the infant to convey to the partner that the behavior should be modified. The infant may frown to communicate dissatisfaction with the interaction and to tell the partner to change the pattern. The infant may smile and coo, signaling with a positive affect, indicating pleasure with the interaction and a desire to keep it going. The infant may demonstrate a neutral affective tone, communicating to the partner that something, anything, needs to done to get the infant involved in an interactive engagement.
- **Avert/Scan**- This is a specialized signaling behavior that involves the infant looking away from mom but not successfully maintaining attention on something else. It is used as one of the strongest of signaling behaviors indicating that the infant has tried other signaling behaviors and that "if something isn't done soon, the infant is going to abandon attempts to repair the mismatch."

- **Alternate Focus**- This is a coping behavior consisting of the infant focusing attention on something other than mom. The infant may focus on an object with or without manipulation, or may focus on part of his or her own body or a different part of mom's body. The alternate focus is a back-up behavior the infant uses to repair a mismatch when the earlier signaling behaviors did not work. It is another attempt to handle the stress of a mismatched attempt to tell mom to change what is happening.
- **Self-Comfort**- This is a behavior involving the infant using his or her own body or an object to provide self-comforting stimulation. The infant may suck on an object or body part, or use an object such as a pacifier. The infant may clasp hands together or rock from side to side. This is a back-up that is used in cases where the infant has been unsuccessful in repairing the mismatch.
- **Withdrawal**- Withdrawal behaviors are used to minimize social engagements by allowing the infant to back up and literally "withdraw". They are used when the infant has tried to cope with the stress of a mismatch by signaling and or utilizing alternate focus. Other coping strategies have not worked, so now the infant wants to back up and recoup. The infant may lose postural tone and become "floppy" looking. The infant may look "dull", "glassy-eyed," or "apathetic." Withdrawal is frequently accompanied by self-comfort behaviors.
- **Escape**- Escape behaviors are used when the stress resulting from the mismatch and unsuccessful coping strategies is so strong that self-comfort and withdrawal are not enough to alleviate the stress. The infant literally tries to get away. The infant is attempting to increase the physical distance from mom by turning, twisting, or arcing away.

The coping behaviors that the infant uses to handle the stress of a mismatch are all critical, but serve different purposes. When the infant uses emotional signaling skills and avert/scan, the infant is preserving the goal of maintaining the social engagement. The infant wants to continue interacting, but on different terms, with changes in the content of the interaction. The infant switches to objects or utilizes the other coping behaviors; the infant has given up on the goal. The infant now sacrifices the social engagement in order to maintain internal emotional regulation.

The experience of repairing mismatches has several positive benefits for the infant. First, they teach the infant to be successful. The infant's sense of mastery or competence in dealing with emotional stress is increased. Handling emotional feelings becomes a positive experience. Second, the infants coping capacities are elaborated. The infant learns new variations of coping skills and the complexity of these behaviors increases. Third, the infant internalizes a pattern of successful coping that can be used with other partners. In addition to repairing mismatches with mom and dad, the infant will be able to utilize these behaviors to keep the interactions going with grandparents, aunts and uncles, siblings, and even strangers.

Researchers have found strong and consistent evidence for stability in infant coping styles. The research shows stable patterns over time in terms of how the infants use signals, how long they will continue trying, and at what point and under what circumstances the infant will resort to self-comfort, focusing on objects and withdrawal and escape. The consistency with which individual children respond is, of course, related to basic temperament but also demonstrates the uniqueness of the emotional coping skills of individual children. Some researchers think that these basic orientations may be predicative of patterns of personality development.

Whenever an infant has a warm, trusting relationship with mother and father or other significant caregiver, the infant has no difficulty learning the coping behaviors necessary to repair mismatches and turn temporary negative emotions into successful, positive emotional feelings. But what about the infant who does not have the opportunity to develop successful coping behaviors? Some studies have shown that the infant who employs coping strategies repeatedly with no success begins to feel helpless. The

infant eventually gives up attempting to repair the mismatch and increasingly focuses coping behaviors on self-regulation in order to control the negative emotion that is being felt. The infant internalizes a pattern of coping that limits engagement with the social environment and results in a feeling of failure. Over a period of time, the infant becomes non-interactive and non-responsive. Similar results have been shown with mothers who are depressed. The attempts to interact with their infant resulted in inappropriate and inconsistent interactions, producing repeated mismatches. The infants ended up fussing, crying, and trying to get away (escape) from the interaction. The parent, who consistently ignores the infant because of indifference, alcohol abuse, or drug induced states of withdrawal, will see similar results with their infants, or infants who develop similar withdrawal patterns.

Rationale

Social and emotional development has been found to have a significant relationship to children's overall success in school and in life. During the early years, children primarily interact with heir parents, guardian, primary caregivers, other family members, and a limited number of peers. These relationships play a central role in fostering children's social and emotional well-being, providing a sense of stability and belonging, and allowing children to make the most of learning opportunities. Successful social and emotional development requires secure, consistent, responsive, and physically and emotionally nurturing relationships. With guidance, children develop skills to cooperate, negotiate, lead and follow, be a friend, and express their feelings in a socially acceptable manner.

Forming warm and responsive bonds with others has also been found to protect children emotionally from negative effects associated with poverty, violence in the home or the community, parental depression, and other stressors that endanger mental health. Resilience in children has been determined to result from spiritual and emotional anchors that children develop in their early childhood years. When encountering adverse circumstances in later life, individuals can survive if they have a "connectedness" to significant others in life, values that transcend the immediate situations, and a higher sense of purpose. The spiritual and emotional anchors are rooted in the earliest social and emotional relationships with family members.

General Definitions

Social and emotional development encompasses children's ability and desire to interact effectively with adults and other children. Social development and emotional development are closely interrelated. Skills in each area are acquired in a relatively predictable sequence. For example, children establish warm and responsive interactions with adults (social development) before they develop emotional skills such as self-concept and self-control. These emotional skills typically precede the development of relationships with peers and groups (also social development.)

Self-regulation

One of most important tasks of the first few months of life is to help the newborns feel comfortable in their new world. The infants learn to regulate their eating and sleeping patterns and their emotions, which help them, feel content, safe and secure. Newborns use their gestures (body movements), sounds

and facial expressions to communicate their feelings and needs from birth. They use different cries to let the caregiver know they are hungry, tired or bored. They ask for a break by looking away, arching their backs, frowning or crying. They socialize with the caregiver by watching faces and exchanging looks. Even as newborns, babies can "play" in many ways. They can connect sounds with their sources and enjoy adults talking and singing to them. Through interactive, turn-taking social exchanges, the infant develops a strong attachment that promotes healthy social development.

Social Development

Young children's ability to form and sustain social relationships with adults and other children is at the heart of their social development. Children's social relationships with adults can be understood in terms of children's ability to trust and interact easily with adults as well as their ability to recognize adult roles. Children look to adults for guidance, cues, and information on how to act, think, and feel.

As children grow, their ability to establish relationships with their peers also influences how children view themselves and the world. As children develop positive peer friendships, they exercise cooperation, the ability to form and maintain relationships, and the ability to negotiate in a positive manner. Cooperation with peers implies an understanding of other children's rights and the ability to balance one's own needs with those of others.

Children's recognition and appreciation of similarities and differences in other people, as well as their ability to interact comfortably with children and adults with different characteristics and backgrounds, facilitate the development of successful social relationships. Positive social relationships are formed and maintained when children develop adaptive social behavior – when they understand the effects of different behaviors, when they are able to adapt to diverse settings, and when they participate positively in group activities. Finally, social competence is demonstrated when children show empathy by understanding, respecting, and showing sensitivity towards similarities and differences.

Emotional Development

Children's ability to recognize and express their own feelings, and to understand and respond to the emotions of others, provides them with important emotional skills. Central to the understanding of emotional development is the construct of self-concept or children's overall perception of self, including traits, habits, abilities, motives and social roles. As children acquire self-concept, they are beginning to answer the question, "Who am I?" Another aspect of emotional development is self-efficacy and the belief that one can succeed in accomplishing what one sets out to do. Self-efficacy creates feelings of self-confidence and positive emotions that children need to be successful in learning tasks at home and at school.

Emotional development includes understanding emotions and the ability to manage or regulate them in both personal and social contexts. Children's ability to understand their emotions and effectively and appropriately express themselves, their attitudes, and their feelings is another important aspect of emotional well-being. Emotional expression includes expressing primary emotions (such as joy, anger, fear) emotions linked to sensory stimulation (disgust, delight, horror) and self-appraisal emotions (pride, shame, guilt).

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Supporting Individual Differences and Diversity

All children develop within and are influenced by their social and cultural experiences. Because diversity is the norm in the United States, children must learn to function in and appreciate a diverse society. Young children need to develop a positive sense of their own identity as well as a respect for others' identities. One's identity is shaped by many factors including gender, race, cultural and family background, language, religion, abilities, life experiences and circumstances. Children need to develop respect and appreciation for people with ideas and experiences that are both similar to and different from their own. Differences should not be understood to be deficits.

Children who have disabilities, developmental delays, or who are at risk for developmental delays, may require special attention to promote their social and emotional development. For example, some children with special social and emotional needs may face particular challenges in developing successful peer relationships. Children with even mild delays tend to participate less in sustained play, spend more time alone when other children are playing, express more sadness when playing (or not being allowed to play) with other children, get angry more, and use less effective conflict resolution strategies. Since positive social interactions and emotional expression are important, some children may need extra assistance in building these skills. Diagnosis and intervention for developmental delays are critical. Early intervention efforts that provide center-based or home-based social and mental health services and family support enhance young children's social and emotional behavior and functioning.

Caregivers must appreciate and respect children's unique characteristics and the diverse contexts in which children develop. The values and practices of each child's family, community, and culture shape the feelings, knowledge, and expectations that influence social and emotional development. As a consequence, children's social interaction, communication patterns, and play interests vary. Social and emotional development is contingent upon the match between children's feelings/ expressive behaviors and the expectations of the social situation in which they find themselves. Therefore, environments for young children should provide diverse, non-stereotyping atmospheres in which cultural, ethnic, racial, linguistic, age, gender, and ability differences are embraced and respected.

Global Strategies

Because children's social and emotional development are linked to the contexts, cultures, and relationships in which they grow and learn, parents and caregivers play the primary role in shaping children's positive social and emotional development.
Inappropriate use of media/screen time (television, videos, computers and video games) can negatively impact a child's social and emotional development by contributing to aggressive behavior, desensitization to violence, nightmares, and fear of being harmed. The American Academy of Pediatrics (AAP) recommends discouraging screen time for children younger that 2 years of age and encouraging interactive activities that will promote brain development (playing, talking, singing, and reading together). For older children, the AAP recommends that caregivers limit children's total media/screen time to no more than 1 to 2 hours per day of quality children's programming.

A useful guide for parents and teachers is the volume The Development of Infants and Toddlers: The First Year of Life (1989). This source contains a chapter entitled Emotional Development that describes

the development of emotional skills across the age span and contains useful activities for parents and teachers to observe and record the acquisition of these skills.

The following strategies should be used for all children from birth to school entry to encourage positive social and emotional development. Specific strategies, individualized for specific age groups, are contained in the section entitled *Supportive Practices*.

- ✓ Be sensitive, responsive, and physically and emotionally available to children.
- ✓ Make a point of spending time with your child each day just interacting, communicating, playing, and enjoying each other. The best way of teaching healthy social interaction skills and building positive self-esteem is to model the enjoyment inherent in interaction.
- ✓ Promote trust, security, and exploration through nurturing relationships, and safe and stimulating environments.
- ✓ Help children learn to accept, understand, and manage their emotions. Open communication is essential at all times.
- ✓ Offer an assortment of culturally appropriate activities, experiences and materials that represent diversity.
- ✓ Encourage acceptance and appreciation of family culture.
- ✓ Strive for an environment that respects all people and is free of bias.
- ✓ Provide ongoing opportunities for children to interact successfully with peers and adults.
- ✓ Build on what children know and can do well.
- ✓ Model and teach appropriate conflict resolution and problem-solving skills.
- ✓ Seek advice from medical and development specialists when concerned about children's social and emotional development and behavior.
- ✓ Become familiar with the risk factors and signs of child abuse and neglect.

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III. Personal, Social and Emotional Development: Children will develop adaptive personal, social and emotional skills.

Purpose: A positive self-concept and emotional development are the foundation for all learning. Social skills are necessary for participating in the most basic interchanges, such as conversations and turn-taking. Studies show that children who are socially competent and emotionally secure are better able to participate in learning experiences in positive ways. For many children, the preschool years are the first experiences in a non-family, structured social environment. In these settings they are beginning to acquire abilities, which will allow them to develop cooperation, conflict resolution, self-regulation, and responsibility skills. Although many of these skills will be learned and refined by interacting with peers, children profit from the guidance of knowledgeable and caring adults.

Birth to 6 Months	
Indicators	**Possible Caregiver Strategies**
1. The infant is comforted and appears to enjoy touch and being held by the parent. 2. The infant prefers the sight, smell, and sound of primary caregiver (usually within the first two weeks) 3. The infant smiles spontaneously to human contact, smiles in play, and smiles at self in mirror. 4. The infant can be consoled, indicated by ceasing crying and calming when comforted by an adult. 5. The infant can initiate and terminate social interactions. 6. The infant enjoys games with others such as "Where is your nose?" and "So Big!" 7. The infant shows a preference for being held by familiar people.	• Parents and/or caregivers should observe infants carefully for signs of distress. This will help in figuring out what your baby's cries are telling you. Infants do feel pain, and may cry in response to it. • If your work with infants is in a group setting where there is more than one caregiver in the infant room, be a primary caregiver for specific infants in the group. Assume primary responsibility for their daily care-giving routines such as feeding and diapering. This allows you to get to know each infant well, and in turn each infant can come to know you. Make sure there is always a familiar adult present even if the primary caregiver is absent. • Keep the group size for young infants as small as possible to allow for more intimate relationships. • Soothe your baby. When you respond to your baby's cries and meet his needs, you let him know he is loved. You can't spoil a baby. In fact, by responding lovingly to his needs, you are helping him learn skills now that allow him eventually to sooth himself. You are also promoting a strong bond and healthy brain development. • Respond to your infant during periods when he or she is feeling alert and social. • Return the infant's desire for eye contact. Respond to his or her smiles and cooing noises. • Observe your infant and try to "read" the signals he or she is sending you.

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7 to 12 Months

Indicators	Possible Caregiver Strategies
1. Infants utilize gestures, sounds, and facial expressions in interactive turn-taking and to communicate feelings including: ➢ Consistently imitating babbling sounds in turn-taking ➢ Imitating familiar words in turn-taking ➢ Smiles and laughs during turn-taking ➢ Participates in games ➢ Demonstrates anticipation of play activities 2. Infants develop more elaborate social comprehension in interactive turn-taking including: ➢ Imitates the name of familiar objects during turn-taking ➢ Covers and uncovers face during peek-a-boo ➢ Shows sensitivity to the mood of others ➢ Performs for social attention ➢ Participating in speech routine games 3. Infants exhibit anxious behavior around unfamiliar adults. 4. Infants show considerable interest in peers. 5. Infants begin to distinguish between friends and strangers.	• Be warm, affectionate, and consistent. Hugs, kisses, skin-to-skin and body-to-body contact help the infant feel secure. • Be playful and make faces while you gaze in a mirror together. • Help your infant get to know other loving adults so he or she can practice separating for short periods of time. This helps your infant learn that people leave and return. • Learn to "read" your infant's signals. Follow the infant's lead. Stick with the activities your infant likes when in a happy mood and interested in the activity. If boredom or stress sets in, stop and try the activity at another time. • Recognize that your baby may physically and emotionally tire of one activity. Stop and change activities, giving the infant a chance to re-engage when ready. • Offer the infant a change in scenery, even if it is only in another corner of the room or another place in your home. • You help your infant's emotional control when you help him or her calm down during periods of excitement, frustration, or distress. • Remember that all behavior has meaning. Asking yourself, "what is my baby trying to tell me?" will help you decide how to respond in sensitive ways. • Use a soft voice and smile. Soft music and sounds or lullabies can help, too, as well as gentle rocking. • Try softly stoking your infant's arms. Hold and sway your infant from side to side. Try swaddling your infant in a

	blanket or carrying him or her in a sling or front pack.

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13 to 24 Months

Indicators	Possible Caregiver Strategies
1. The toddler gives an object to an adult as causal action to have it activated 2. The toddler explores adult facial features. 3. The toddler plays peek-a-boo 4. The toddler discriminates between familiar and unfamiliar people 5. The toddler shows increased awareness of being seen and watched by others. 6. The toddler beings to realize other have rights and privileges. 7. The toddler identifies self with other children of the same age and sex. 8. The toddler shows awareness of the feelings of others. 9. The toddler shows strong sense of self as an individual as evidenced by saying "No" to adult requests. 10. The toddler shows empathy for familiar others, especially those perceived to be hurt or sad. 11. The toddler initiates familiar turn-taking routines. 12. The toddler associates social significance with objects evidenced by hugging or kissing a doll or stuffed animal. 13. The toddler exerts independence and control in social and play settings. 14. The toddler requests assistance from an adult.	• Give your infant the chance to be in the company of other children. • Let your infant entertain you. Clap when he or she performs and encourage your infant to repeat the performance. • Acknowledge and label your infant's feelings. "You feel mad when Daddy has to leave you. " "I will see you when you wake up from your nap." Such responses help your infant move from negative to positive states more easily and set the stage for the ability to label emotions. • Expect your infant to show more intense expressions of negative emotions and changes in mood. Learn to respond without over-reacting. • Be calm and non-punitive as you begin to teach your infant what behavior is acceptable and not acceptable. • Call your infant by name from across the room and laugh, smile and wave to let him or her know you are near. • It is hard for infants this age to "not" do something they want to do. It is easier for them to "do" something that is suggested. So, instead of only saying what they shouldn't do, emphasize what they should do. Instead of just saying "don't throw the blocks," say, "blocks are for building. Let's build with the blocks." • Always be ready with reassuring help and comfort as your child explores and learns. You are the "secure base" for your child. • Don't forget that your infant is unique; not exactly like any other infant. Your responses must be individualized to his or her needs.

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III. Personal, Social and Emotional Development

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25 – 30 Months	
Indicators	**Possible Caregiver Strategies**
A. Attachment/Adults/ Peers 1. Relates best to one familiar adult or older child at a time 2. Is shy with strangers 3. Has difficulty sharing with peers **B. Self Awareness/Expression/Regulation** 1. Follows mother/caregiver around the house and copies domestic activities in simultaneous play 2. Holds parent's/caregiver's hand outdoors to maintain contact 3. Regulates conduct to win praise 4. Tantrums when frustrated 5. Is apt to snatch, push, kick, rather than give and take in polite fashion 6. Shows facial expression and behavior indicating pity, shame and modesty 7. May be restless, rebellious and very active 8. May become resistant and dawdles 9. Asserts independence ("Me do it!") 10. Identifies boy or girl in picture book **C. Social Conventions** 1. Initiates own play activities 2. Follows simple rules given by adult for playing childhood games 3. Obeys adult requests approximately half of the time 4. Adds sounds to action ("Vroom" for trucks, talks to teddy bears, etc.)	• Gain an understanding of a child's preferences, interests, background and culture and include this understanding in the development of instruction and learning environments • Embed opportunities throughout the day to provide positive, affirming statements to children • Play with children on their level • Share information about yourself and find commonalities with children and others • Follow a child's lead during play • Acknowledge children's efforts • Know the child's strengths and weaknesses • Have conversations with children individually and on a regular basis • Let children know they are liked and appreciated • Provide direct instruction on appropriate social interaction skills for children and others • Maintain a respectful attitude toward children and others • Use positive non-verbal gestures such as smiles, nods, waves and eye contact to communicate and play with children • Point out acts of kindness and fairness in literature, everyday situations, and personal life

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5. Makes doll/toy act on self as though capable of performing actions independent of child (places brush in doll's hand, then moves doll's arms as if doll combed hair) 6. Demonstrates/verbalizes functional play plan before or while doing the act ("I am going to . . .." "I am making . . ..")	

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31-36 Months	
Indicators	**Possible Caregiver Strategies**
A. Relational Behaviors/ Attachment 1. Relates to one familiar adult at a time 2. Carries on simple conversations about here and now 3. Observes other children at play; may join in for a few minutes 4. Associative play predominates; plays well with two or three children in group 5. Shows interest in other children 6. Has difficulty sharing 7. Displays affection for caregivers **B. Self Awareness/Expression/Regulation** 1. Separates easily from mother in familiar environment 2. Practices independence by refusing to hold parent's hand, running ahead when outdoors 3. Shows facial expressions and behaviors indicating pity, shame, modesty 4. May be restless, rebellious, very active 5. Becomes resistant, dawdles 6. Throws tantrums when thwarted or unable to express urgent needs 7. Values own property 8. Expresses affection openly 9. Objects to major changes in routines **C. Social Conventions** 1. Cooperates in group activities with adult supervision	• Help children introduce themselves to guests by using their first and last name • Acknowledge children's birthdays and compare their age with others • Have children draw a family picture and help them label it with names • Give children opportunities to help with transitions • Ask children to explain their choices and preferences • Have children select a first and second choice when presented with a choice of activities • Give children opportunities to self-select activities, snacks, etc. • Allow children to develop awareness of their abilities, but not helping or assisting too soon • Encourage children to accomplish as much as they can on their own, but let them know that you are there to help each other • Pair children with siblings or classmates to work together • Interact positively with children in a 1:1 situation • Make eye contact on a child's eye level so that a child does not have to look up to an adult level

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2. Imitates adults and playmates 3. Spontaneously shows affection for familiar playmates 4. Obeys adult requests approximately half of the time 5. Uses toys in appropriate ways 6. Verbalizes play plan for assigned role (“I am mother” “You be baby” “I cook” “You watch TV”) 7. Verbalizes play plan and uses pretend props which are identified for benefit of adult (“This is our house (box)”) 8. Follows simple rules 9. Can take turns in games 10. Understands concepts of “mine” and “his/hers” 11. Plays interactive games 12. Cooperates in small group activities (2-3 children) with adult supervision	

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III. Personal, Social and Emotional Development

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37 – 48 Months	
Indicators	**Possible Caregiver Strategies**
A. Relational Behaviors/Attachment 1. Responds to and makes verbal greeting 2. Delivers simple messages 3. Begins to use expressions such as, "Please" and "Thank You" 4. Changes tone of voice and sentence structure to match listener's level of understanding 5. Plays with and talks to other children at work on a project for extended period 6. Enjoys playing alone, but near other children 7. Interacts with groups or pairs of peers based on similar interest in play 8. Begins to show cooperative play without adult supervision 9. Shows preference for some friends over others 10. Sometimes shows preference for one parent (often the parent of the opposite sex) 11. Enjoys helping with simple household tasks 12. Spends a great deal of time watching and observing 13. Makes and maintains a friendship with at least one other child 14. Seeks attention and approval of adults 15. Accepts suggestions and follows simple directions 16. Makes simple choices between two things 17. Enjoys making others laugh and being silly 18. Enjoys playing with other children briefly, but still may not cooperate or share well **B. Self Awareness/Expression/Regulation**	• Demonstrate problem-solving techniques in relationships • Acknowledge, respect and validate children's expressions of emotions • Guide and assist children in choosing words to express their emotions and those of their peers • Value children's expressions of negative emotions as teaching opportunities • Have set routines throughout the day • Provide daily opportunities for children to self select activities, clothes, etc. • Help children expand play to gradually increase time on task as appropriate • Reserve time for children to share their work and play with an adult • Communicate recognition of children's efforts • Take turns with children gradually lengthening the time between the child's turn • Model, then allow children to practice, expressing themselves based on different emotions or situations • Guide children through "What would you do?" based on everyday situations • Encourage children to tell others how they feel when they are faced with a conflict, experience success, sadness or fear • Display children's work and products • Value children's responses and provide immediate feedback or positive acknowledgement when children make attempts to

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1. Plays independently for a long period of time 2. Demonstrates fears (mechanical toys, vacuum cleaner, thunder, dark) 3. Shows affection toward younger siblings 4. Wants to be "big girl", "big boy", and acquire new skills 5. Enjoys hearing stories about self, playing "house," imitating 6. Answers the question, "Are you a boy or a girl?" correctly 7. Identifies feelings, likes and dislikes, but may not be able to explain why 8. Communicates emotions to peers in an appropriate manner 9. Describes self using several basic characteristics (first and last name, gender, age, family, talents, skills, etc.) 10. Uses materials in a self-directed manner 11. Expresses interest in ethnic identities of self and others if exposed to multicultural settings **C. Social Conventions** 1. Generally obeys adult request 2. Begins to share toys willingly 3. Increasing rough and tumble play 4. Plays with imaginary companion 5. Says "Please" when asking for something 6. Helps with small household tasks 7. Understands another's perspective 8. Accepts suggestions and follows simple directions 9. Manages transitions 10. Connects consequences to a specific behavior, but may not understand why the behavior warrants the consequence 11. Accepts the consequences of one's own actions 12. Uses multiple strategies to solve problems 13. Asks for help from other sources when solving social and/or cognitive problems 14. Follows routines independently and completes familiar routines	participate in conversations • Give children opportunities to work in small independent groups where rules are understood and they are able to practice social skills along with the task at hand • Collaborate with children in establishing developmentally appropriate rules • Incorporate rules into daily routines ("We respect each other when we sit without touching others" "We respect others when we ask them if we can play with their toys") • Post simple picture schedules at children's eye level with large pictures and 1-2 word descriptions indicating the sequence of activities for the day • Establish daily routines so that children know what to expect, but do not suppress flexibility and spontaneity at the expense of following routines • Review daily activities so that children can anticipate events (trip shopping, preschool, grandparents arrival) • Set clear, modeled, and consistent behavioral expectations • Remind children of expected behavior in certain situations • Make requests respectfully, using "please" and "thank you" • Identify emotions as they are expressed by the children in daily routines • Use literature as a tool for identifying and discussing a wide variety of emotions • Demonstrate and acknowledge acts of empathy • Model and verbalize empathetic thoughts and actions • Guide children, offering words for them when they are unable to express themselves • Validate children's feelings, but not necessarily their behavior • Provide opportunities for children to practice interpreting expressions and gestures during play, stories, music, etc • Coach children in understanding verbal and physical cues of others • Model appropriate ways to ask for help • Help children take steps to comfort others as appropriate

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48-60 Months	
Indicators	**Possible Caregiver Strategies**
A. Attachment/Adults/ Peers 1. Asks for adult help as needed 2. Recognizes others' needs and gives assistance 3. Prefers playing with other children to playing alone except when involved in a project **B. Self Awareness/Expression/Regulation** 1. Shows respect for property and rights of others by asking permission to use others' possessions 2. Verbalizes similarities and differences in people 3. Controls response to feelings and impulses 4. Engages in cooperative play 5. Asks questions about differences in gender, race, jobs and family structure **C. Social Conventions** 1. Explores new interests, activities and skills 2. Initiates appropriate tasks without being reminded 3. Attends during large group for 10 minutes 4. Waits for turn for adult attention 5. Verbalizes a play plan for assigned roles, carries out the plan and recaps what he/she has done with others	• Provides time to practice independence skills (self-help, cleaning up, hygiene, self-care) • Encourages children to help each other in completing tasks (snack time, clean-up time, activity time, free time) • Provides activities that promote gender, cultural, individual identities (books, play materials, dolls, clothing, creative arts materials) • Models appropriate feelings and avenues to express those feelings • Provides scheduled activities and individual assistance that help children to identify a range of feelings and express them appropriately (books, games, role play) • Builds trusting relationships with all children • Encourages the development of supportive relationships among all children (helping, sharing, listening) • Uses positive words and responses to guide the child and model self control • Encourages children to rely on each other • Provides scheduled and independent times where children interact with each other • Invites family and community members to come, spend time and share with the children • Provides for numerous field experiences to community businesses, programs, settings

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60-72 Months	
Indicators	**Possible Caregiver Strategies**
A. Attachment/Adults/ Peers 1. Balances his own needs with the needs of others 2. Responds verbally and positively to good fortunes of others 3. Has a best friend/group of friends 4. Interacts with familiar adults 5. Separates and reunites appropriately from primary family member **B. Self Awareness/Expression/Regulation** 1. Independently completes a project 2. Names feelings, i.e. happy, sad, angry, surprised, worried, fearful 3. Demonstrates tenderness & protectiveness toward younger children & pets **C. Social Conventions** 1. Predicts classroom routines and guides other children in routines 2. Solves conflicts by using thinking skills 3. Conforms to adult ideas	• Caregiver models appropriate behaviors that demonstrate empathy to other's needs (coming over to, listening, helping) • Caregiver models appropriate positive verbal and behavioral responses (high-five, handshakes, "great work", "neat", "I'm so happy") • Caregiver encourages children to help other children • Caregiver creates opportunities for children to complete tasks independently • Caregiver develops a trusting relationship with all children • Caregiver maintains a consistent daily routine and schedule of activities • Caregiver provides opportunities for children to problem solve and resolve conflict (real life situations, role play practice scripts)

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Domain 4:
Self-Care and Independence

Introduction

The area of self-care and independence examines the infant and toddlers integration of cognitive, motor and social skills into meaningful and functional life activities to sustain self independently. Self-care and independence skills are considered a form of "adaptive behavior" or learning to use the sensory and mental processes for functionally independent purposes. Self-care and independence skills include skills that enable the child to perform essential self-preservation and maintenance skills independently others. This domain also addressed the importance on an individuals need for independence and self-autonomy in developing a positive self-concept.

Definitions

Routines are defined as sequences of activities that we perform on a regular basis. We have the "getting out of bed routine," "the preparing breakfast routine," the "getting ready to go to work routine," and the "cleaning our house routine." A child's responses to those routines and he or she learns to participate in the routines forms the bases for what will later become know as socialization skills.

Socialization examines how we internalize the rules of society. Knowledge of the expectations that society has for our involvement in situations in life is critical. Socialization also address how we perceive those expectations and situations and the behaviors that we learn that indicate that we understand the social demands of the situation, the role that is expected of us, and the value we hole for the same outcomes that are valued by society.

Adaptive Behavior embeds the concepts of socialization and examines how a child learns to use intellectual abilities, speech and language skills, motor skills, etc., in functional ways on a day-to-day basis. We must consider adaptive behaviors in a variety of settings in which the young child lives and plays including the home, neighbors, childcare settings and grandparents' house. Community environments are also critical including such settings as church, cafes, grocery stores, and community parks and playgrounds.

Self-help skills are comprised of daily living skills that include eating, dressing, grooming, toileting, and personal hygiene. The self-help skills involve the internalization of society's values and beliefs relative to personal appearance into functional skills designed to meet societal expectations. As children get older, additional adaptive behavior skills are demanded including helping with house work, helping other family members, helping with meal preparation, and cleanup and care for clothing, pets, and personal effects.

Independence is a temporal property of behavior that examines the extent to which the individual can complete the task alone, without the assistance of others.

Supporting Individual Differences

Socialization includes any adaptive behavior that makes the young child social or teaches the child to conform to the expectations of society. It includes how a child interacts, how the child modulates behavior, and how the child learns self-help and other "helping-out" skills. We see the evolution of socialization skills in very young infants. They demonstrate their knowledge

about the rules of the family through how they learn to change their behavior to accommodate to the day-to-day stresses of routine situations. Examples include waiting in their crib in the morning and vocalizing until mom or dad comes to pick them up. They learn to wait when the rest of the family is eating, watching rather fussing, knowing they will have a turn to eat.

As the infants grow older, their behavior begins to change. The routines usually remain the same, but their day-to-day responses to the same situations become more and more complex. They learn to participate in these activities. Instead of waiting patiently for mom to prepare dinner, they may want to be in the kitchen "talking back and for" with mom. When dad is engaging in the "reading the newspaper" routine, they will no longer be content to sit in their chair. They will want to be in dad's lap "helping him" turn pages. When we examine the child's gradual behavior changes showing adaptations to situational demands, we are talking about those "first-time" behaviors. The first time they tried to set the table; the first time they crawled into the living room to watch TV after dinner; showing that they knew that was where the rest of the family was going. The first time they got their coat on by themselves prior to leaving to go to the babysitter. The first time they initiated the greeting "hi" upon seeing mom or dad.

Infants and children with disabilities will be disadvantaged in learning to participate in the daily routines with the family, thereby placing them at risk for not learning the necessary self-help skills and adaptive behaviors inherent in socialization. Because of cognitive, motor, and language delays they will not learn incidentally the way most children learn the self-care and independence skills. While most children learn by watching and observing, children with disabilities will need structured training opportunities to expand their participation in family routines. The gradual movement to greater participation with more independence must be sequentially planned and specifically taught to children with disabilities.

Global Strategies

One of the best methods for teaching self-help and independence skills is through the use of structured routines within the home environment. The chart attached at the end of this section is designed to identify ways that you can support your child in the daily routines of your family. After you have identified the family routines, your next task is to identify the skills the child is currently performing and then sequentially planning the next level of participation and independence you would like to work toward.

- ✓ Use the chart attached at the end of this section. Record your common day-to-day routines.
- ✓ Record the skills your infant or young child currently does within those routines.
- ✓ Describe variations to the routines including the people involved, the step-by-step things that are included in it, and other interesting circumstances relevant to that routine.
- ✓ Next identify outcomes that you would like to for your infant or young child.
- ✓ The last step is to identify strategies that will be used to support or infant or young child that enables him or her to participate in the same routine with a higher level of participation, or at a greater independence level.

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IV. Self-Care and Independence: Children will develop necessary self-care and independence skills for success in the home, school, and community. **Purpose:**	
Birth to 12 Months	
Indicators	**Possible Caregiver Strategies**
1. The infant begins to pull at diaper when being changed. 2. The infant begins to grab for spoon when being fed. 3. The infant begins to regulate eating and sleeping patterns and emotions (about 50% of the time). 4. The infant produces different cries for different reasons. 5. The infant demonstrates exploratory behavior with objects. 6. The infant repeats arm movements to keep a toy activated. 7. The infant drinks from a cup. 8. The infant begins feeding self finger foods. 9. The infant sleeps through the night but may awaken and cry occasionally.	• Parents and caregivers should observe infants carefully for signs of distress. This will help in figuring out what your baby's cries are telling you. Infants do feel pain, and may cry in response to it. • Soothe your baby. When you respond to your baby's cries and meet his needs, you let him know he is loved. You can't spoil a baby. In fact, by responding lovingly to his needs, you are helping him learn skills now that allow him eventually to sooth himself. You are also promoting a strong bond and healthy brain development. • Give your infant a sense of order by repeating the steps in a sequence when you play. For example, games such as peek-a-boo help him or her to anticipate and to predict what will happen next. • Use routine activities such as a diaper changes, as a time to "play"- count toes, tickle, and play with hands. • Adjust your infant's schedule as he or she changes. Be flexible but opt for an orderly lifestyle with routines, consistency, and clear patters at each new stage. • Make mealtimes, playtime, and bath-times a regular time for talking, singing, and socializing. Try not to hurry through these activities, as they constitute very important experience for your infant. • Encourage your infant to sleep for longer and longer periods at night. Help your infant comfort himself or herself with a favorite object, blanket, or pacifier. Soft music may also be beneficial. • Forego infant walkers. They don't allow babies to see their feet

	or to develop their own sense of balance. They can also be dangerous.

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IV. Self-Care and Independence: Children will develop necessary self-care and independence skills for success in the home, school, and community. **Purpose:**	
13 to 24 Months	
Indicators	**Possible Caregiver Strategies**
1. The toddler gestures to indicate toileting needs 2. The toddler exerts independence and control in social and play settings 3. By 18 months the toddler requests assistance for an adult. 4. The toddler begins to explore the environment independently. 5. The toddler remains in close contact with, then venturing further aware from the caregiver, during exploration of the environment. 6. The toddler "checks-in" with familiar adults while playing. 7. The toddler says "Me-do" when offered assistance by an adult when dressing. 8. The toddler shakes head "no" to express independence. 9. The toddler expresses displeasure for or dislike of certain activities or situations. 10. The toddler expresses enjoyment of or preferences for certain activities or situations. 11. The toddler relates personal experiences. 12. The toddler refers to self by name. 13. The toddler identifies four clothing items. 14. The toddler imitates housework activities.	• As your toddler develops more movement skills and is motivated to try to perform self-help skills independently, it is critical that we allow the toddlers the necessary opportunities in safe environment. One of the most effective practices is to have the child "help you" with a part of the task, or performing only one element in the task. • For example, if the child wants to use a fork, or a knife to cut a food item, encourage the child to perform the skills while you are guiding the child's hand position on the utensil and the movement skills the child is making. Using physical assistance still enables the child to "feel" successful and independent, but allows you to provide the necessary support or ensure safety and to prevent accidents. • Fade out the amount of assistance you provide. As the child becomes more competent, you can gradually decrease the amount of physical assistance you exert during the task. • Don't allow yourself to get into a power struggle with your young child. If the child wants to dress independently, encourage the child, even if you are in a hurry. You can speed up the process by performing the last step in the sequence, without the child objecting. For example, allow the child to put the shoes on the feet alone, while you lace the shoes. • Always praise your child's attempts at independence.

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IV. Self-Care and Independence **Purpose: This area involves a child's independence; ability to do things for one's self, and a child's ability to adapt to the environment. These independence skills will help the child to be successful in home, school and adult life.**	
25- 30 Months	
Indicators	**Possible Caregiver Strategies**
A. Eating 1. Expresses likes and dislikes; may be a fussy eater 2. Does not like food to mix (does not want potatoes to touch meat) 3. May ask exclusively for one food over a period of time, then switch preference to another food 4. Holds spoon on lower 1/3 handle; Controls turning spoon, scoops food, and brings food to mouth (may be considerable spilling) 5. Obtains drink from tap or other source without assistance 6. Discards bottle; drinks only from cup/glass 7. Holds fork in fist 8. Uses fork to spear bite-sized chunks of foods **B. Self-Care** 1. Pulls down pants when needs toileting or undressing 2. Brushes teeth with supervision; Begins to make brushing motion 3. Unbuttons large buttons 4. Blows nose in tissue held by adult 5. Finds arm holes in T-shirt 6. Removes unfastened garment 7. Washes face without assistance 8. Knows which faucet is hot/cold 9. Dries hands without assistance	• Present foods many times without forcing a child to try them • A plate with dividers may be used to separate foods • Allow a child to eat the food that they prefer. They usually switch from one preference to another within a few days. • You may want to experiment with a variety of spoons/forks with different shapes, sizes • Keep unbreakable glasses or cups within reach of a toddler to allow them the freedom to obtain a drink independently • "Sweat" pants or other pants with an elastic waist allow the child the freedom to pull down and pull up pants independently • Purchase "child" toothpaste, model and encourage brushing attempts • T-shirts with ample room allow a child the independence for putting them on and off • Praise small efforts at washing face and hands even though they may have missed portions • Teach children which faucet handle is hot and which is cold • Keep towels within reach of the faucet • Keep containers handy for materials/toys • Label containers with pictures so children can easily match container to its contents • Allow children to "pay" for small purchases while shopping • State that you "need to pay" for your purchases during shopping or eating out

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C. Clean Up 1. Helps clean up; Puts things away **D. Daily Living Skills** 1. Understands function of money	

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IV. Self-Care and Independence Purpose: This area involves a child's independence; ability to do things for one's self, and a child's ability to adapt to the environment. These independence skills will help the child to be successful in home, school and adult life.	
31-36 Months	
Indicators	**Possible Caregiver Strategies**
A. Eating 1. Sucks with straw, but may damage straw 2. Expresses likes and dislikes 3. Chews with rotary motion **B. Self-Care** 1. Pulls down pants when needs toileting 2. Daytime bowel and bladder control fairly well established 3. Verbalizes toilet needs fairly consistently 4. Puts on front button shirt 5. May be deliberately uncooperative during dressing, may tantrum 6. Buttons 1-2 buttons alone 7. Removes shirt and/or dress 8. Undresses self with exception of pull over garments 9. Assists in dressing 10. Knows where clothes go; may put jacket on 11. Brushes teeth 12. Washes hands independently 13. Gets a drink independently **C. Clean Up** 1. Puts jacket away **D. Daily Living Skills** 1. Puts possessions away when asked	• Provide straws large enough so that children may easily suck a drink • Allow children to state that the "like" or "don't like" specific foods without making it a struggle at the table • Continue the use of pants with an elastic waist for independence in toileting • Encourage buttoning when larger buttons are available • Children may learn dressing skills when practicing on dolls or dressing frames • Label children's drawers, containers so they can easily see where to store their sox, shirts, etc. • Keep a small unbreakable glass/cup close to the sink where children may want to get a drink. • A small stool may assist a child in being independent while obtaining a drink • A hook within the child's reach and labeled with the child's name will encourage him to hang up his coat • Make a game of putting toys away by timing it, assisting him, etc.

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IV. Self-Care and Independence Purpose: This area involves a child's independence; ability to do things for one's self, and a child's ability to adapt to the environment. These independence skills will help the child to be successful in home, school and adult life.	
37-48 Months	
Indicators	**Possible Caregiver Strategies**
A. Eating 1. Feeds self with spoon and small fork, spilling very little 2. Butters bread with small knife 3. Holds spoon palm down 4. Carries a filled cup 5. Pours liquid from pitcher to cup 6. Served self food without assistance 7. Licks lip to remove all particles of food/liquid 8. Gets own drink at drinking fountain **B. Self Care** 1. Urinates without toileting assistance 2. Usually dry at night 3. Snaps front buttons 4. Puts shoes on correct feet without assistance 5. Buttons large front buttons, but may have difficulty 6. Removes pullover garment 7. Independent with pull down garments 8. Unbuttons small front buttons 9. Unzips; Separates front zipper 10. Washes and dries hands 11. Turns faucet on/off 12. Wipes nose when reminded 13. Bathes self with some assistance 14. Puts on boots/shoes (but may not tie laces) 15. Dresses self completely, except for tying shoelaces 16. Feeds self (with some spilling)	• Involve all children in group jobs, delegating fairly and enabling all children to be contributors to a caring learning environment • Encourage independence with tasks that a child is able to complete by himself • Children can practice pouring water from container to container while bathing • Keep a small stool available to enable children to reach a drinking fountain • Softened butter will assist children in ease of spreading • Praise children for any small effort to toilet independently • A small mark/sticker on shoes may assist children in identifying the correct shoe for the right foot • Encourage all attempts at dressing while assisting just enough to avoid frustration • Keep a rag handy to wipe small spills when a child may spill • Have containers available and clearly labeled with words or pictures for specific toys • Provide child-sized tools (rakes, hoes, brooms) to enable children to assist with activities • Assign chores appropriate to a child's skills and attention • Help maintain orderly materials by providing appropriate space and containers • Show the clock to your child, teaching him that "when the long hand gets to the 12, we will go to the store," etc. • Model appropriate social skills while on the telephone • Have your child practice answering the phone while you "call" him

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C. Clean Up 1. Puts away toys 2. Likes to help with adult activities in house and garden 3. Helps with extra chores when asked **D. Daily Living Skills** 1. Shows understanding of function of clock 2. Answers the telephone appropriately	

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IV. Self-Care and Independence **Purpose:** Children, as they grow and develop, demonstrate the ability to carryout numerous self-care and daily living skills. Through increased competence in areas of dressing, hygiene, nutrition, toileting and the learning of basic health and safety rules independence in functioning occurs for all children that sets the stage for later growth.	
48-60 Months	
Indicators	**Possible Caregiver Strategies**
A. Eating 1. Demonstrates meal time skills including: _____ setting table, _____ using knife to spread and cut, _____ holding glass while pouring milk, _____ serves self, _____ cleans up spills without help **B. Self-Care** 1. Independently puts boots on correctly 2. Dresses self for outdoor activities 3. Cares for all toileting needs, without being reminded or assisted **C. Clean Up** 1. Puts away clean clothes without assistance when asked 2. Places clothes in dirty hamper **D. Daily Living Skills** 1. Hangs up belongings on hook 2. Looks both ways before crossing street 3. Summons to the telephone person receiving call	• Encourages children to feed themselves using utensils as appropriate • Provides activities that allow children to prepare own snacks • Provides dramatic play props for children to practice self-care and independence skills • Introduce foods with a variety of different tastes, smells, textures • Models for children and assists children in completing clean-up actions, self-care actions and daily living skills

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IV. Self-Care and Independence **Purpose:** Children, as they grow and develop, demonstrate the ability to carryout numerous self-care and daily living skills. Through increased competence in areas of dressing, hygiene, nutrition, toileting and the learning of basic health and safety rules independence in functioning occurs for all children that sets the stage for later growth.	
60-72 Months	
Indicators	**Possible Caregiver Strategies**
A. Eating 1. Cuts soft food with knife 2. Assists in food preparation requiring mixing and cooking **B. Self-Care** 1. Requires minimal supervision and help with dressing and undressing 2. Bathes without assistance 3. Selects own clothes **C. Clean Up** 1. Is responsible for one household chore 2. Make own bed when asked **D. Daily Living Skills** 1. Can initiate phone calls to others 2. Will know where to go for services 3. Understands that it is unsafe to accept rides, food or money from strangers	• Caregiver provides opportunities for children to practice using eating utensils (play dough for cutting, snack time) • Caregiver includes children in food preparation activities • Caregiver provides a variety of activities and materials that can be mixed, stirred, combined, etc. • Caregiver allows children to dress themselves to the extend they are able and provides practice opportunities for self-care activities not yet fully developed (dramatic play, zip/button/snap/tying activities) • Caregiver selects numerous “helping” activities that promote responsibility for daily task completion (watering plants, feeding pets, putting materials away) • Caregiver teaches “safety skills” to children (911 and other emergency numbers, stop/drop and roll, not talking to strangers, etc.)

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Domain 5.

Cognitive Development.

Introduction

Cognitive development refers to the evolution of intellectual abilities. It is the ability to utilize reasoning skills, problem solving skills and critical thinking skills. Although we think of cognition as being the same as later intelligence, during the early formative years, the behaviors are ever changing and less predictable.

Cognition in the early years is intricately interrelated to the other domains of development. The child develops skills in using the senses of hearing, sight, and touch to take in information and to interact with the environment. The child then learns to use these skills for function from the world around and to act on the information. The child uses the sensory experiences to communicate wants and needs, to socialize, to interact, and to just "have fun" with people in the environment. The child is also born with an inner need to structure the experiences in the environment through exploration and manipulation to satisfy the innate curiosity or internal need to understand. Cognition is the domain that examines that innate curiosity or the child's internal need to learn about his environment. It is the extent to which the infant is indeed a "stimulus seeker."

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During the first few years of life, remarkable changes occur in children's cognitive abilities. Children gain greater knowledge and understanding of their physical and social worlds and they develop skills in logic, reasoning, observation, imagination, and problem-solving. Children also learn social conventions, the kinds of knowledge that could not be reinvented by every generation of learners. Even though cognitive development is comprehensive and complex, it is often associated with a differing body of knowledge that children must acquire before entering school. Defining cognition narrowly limits a full understanding of the complexity of this domain and can limit the range of children's learning. Cognition includes both how children think and what children know.

Rationale

Cognitive development is essential for daily function and success across a range of education and social contexts. Cognitive development refers to the process through which children develop their abilities to think, assimilate knowledge, and use information. Cognitive development involves the interaction of both internal and external variables. First, children use their natural ability to think about their own actions and experiences in the physical and social worlds to construct understanding from these experiences. Here, children discover and mentally construct new concepts by experiencing and interacting with their environment; this may be regarded as "discovered knowledge." Second, children gain information directly from adults and other children to acquire knowledge that they would not otherwise learn. This learned knowledge originates in the family, community, and culture and requires guidance and instruction form others.

In order to understand the infant's cognitive abilities, we must look at other areas of development. We must examine the development of visual skills, auditory skills, and motor skills to

determine if he has the prerequisite skills to take in information from the environment surrounding him. In addition to examining the "number" of skills the infant has acquired, we must examine "how" the infant is using those skills. Is the infant acting upon the environment? Is the infant responding to the environment in a way that would indicate that he or she is trying to organize information, to make sense out of it, or to test theories about the information?

Within the two broad contexts discussed above, "discovery" and "learned" knowledge, there are multiple ways in which children acquire cognitive skills and general knowledge. For example, children learn through language, logical-mathematical analysis, and spatial representation, musical and creative thinking and the use of the body to solve problems or to make things. It is important for parents, caregivers, and educators to understand and nurture all of the different modes through which children gain knowledge and understanding of the world around them.

Because both discovered and learned knowledge are fundamental to day-to-day life in any family, community, or culture, supporting cognitive development is vital to young children's overall learning and development.

General Definition

The North Dakota Early Learning Guidelines organizes the Cognitive domain of development around four categories including Sensorimotor Processing skills, Preoperational Processing Skills, Emerging Literacy skills, and Content Area Knowledge. The Emerging Literacy category is subdivided into eight subcategories including Language, Phonological Awareness, Alphabetic Principle, Print Awareness, Comprehension, Book Awareness, Comprehension, book Behaviors, Fine Motor prewriting, and Numeracy. The category of Content Area Knowledge is also subdivided into the subcategories of Science, Social Studies, Economics, Geography, Ecology, and Technology.

Sensorimotor Processing skills – refer to the acquisition of systems of thought for organizing the perceptions being received from the environment and conceptualizing systems for responding, or acting on, the environmental stimuli. The sensorimotor stage of development comprises the first two years of life during which the infant and toddler learns the precursor skills need for representational thought and language usage. Examples of the sensorimotor processes consist of: a) object permanence, or memory that an object exists even though it is not perceptually present; b) object concept or knowledge of the social significance of the object, c) means-to-an-end or the knowledge of cause-effect, d) causality or the knowledge that the individual can cause things to happen in the environment, and e) Spatial Relationships refers to the understanding of how objects are influences by spatial attributes such as gravity, distance, position in space, and motion.

Preoperational Processing Skills- include logic and reasoning skills that enable children to create and analyze general relationships such as similarities, differences, and associations. These processes are applied to objects, events, and people. Competencies that develop with logic and reasoning are causation, critical and analytical thinking, problem solving and representational thought. These skills are considered to be the most complex kind of knowledge, making them the most difficult to describe and assess.

Emerging Literacy skills- refer to a variety of precursor skills that will be needed for learning to decode the written language contained in printed text and to encode the language in written expression.

Language,
Phonological Awareness,
Alphabetic Principle,
Print Awareness,
Book Awareness,

Comprehension,
Book Behaviors,
Fine Motor prewriting,

Numeracy- Mathematics and numeracy skills consist of the ability to understand and use numbers, mathematical operations, measurement, and properties of ordering and sequencing. These skills are essential for children to be able to navigate mathematical situations that arise in everyday life settings.

Content Area Knowledge- refers to the knowledge that is constructed and remembered across a variety of areas including:

Science- Scientific thinking and knowledge skills include the ability to understand the natural world and to make predictions. It is the development of scientific thinking that helps children apply and test their knowledge through methodical inquiry and verification. By acquiring scientific knowledge, children gain an understanding of, and information about, the earth and living things.

Social Studies- Developing knowledge of one's own family, community, and culture enables children to make sense of the various relationship structures they interact with in their daily activities. This aspect of cognitive development involves understanding human interdependence at multiple levels including family functions, community roles, and cultural appreciation.

Economics,
Geography,
Ecology, and
Technology.

Supporting Individual Differences and Diversity

Children not only differ in their rates of acquiring general knowledge, but also in the ways, in which they learn, remember, and understand. Indeed, research recognizes and labels "multiple intelligences," highlighting that individual's use and combine different kinds of intelligences to complete tasks and solve problems. For example, some children might favor logical reasoning to tackle a certain learning task while other children might take a more creative or movement-based approach. Differences in children's cognitive development are not, and should not be viewed as, deficits.

Children who have disabilities, developmental delays, or who are at risk for developmental delays, may need adaptations to support their learning. To support the learning and development of all children, it is important for children of all abilities to play and learn together. To facilitate this, caregivers and parents may need to provide more direct guidance and materials of varying degrees of difficulty to children with cognitive challenges. Young children who experience delays gain significant benefits from participation in early intervention programs, that provide center-based or home-based education, guidance, and family support.'

Knowledge and cognitive skills are complex and intertwined with children's socio-cultural context. Culture influences not only the knowledge that is valued and transmitted to children, but also how children perceive events and actions. For example, family and parental attitudes, beliefs and caregiving practice impact children's cognitive development by determining children's exposure to certain tasks, contexts, and knowledge. Given that children's cognitive abilities and understanding are context-dependent, it is imperative to provide learning opportunities that are culturally sensitive and adapt to children's varying patterns in learning, reasoning, and problem-solving abilities.

Global Strategies

Each child gains general knowledge about their physical and social worlds at different rates and in different ways. An excellent source of information on cognitive development in the first three years of life is the volume *The Development of Infants and Toddlers: The First Years of Life* (1989). This

volume contains information on theory, specific skills, and methods that parents can use to observe the development of cognitive skills in their young children. The strategies listed below may be used for all children from birth to school entry to encourage their cognitive development. The sample strategies will help to ensure that every child receives learning experiences that meet his or her unique needs:

- ✓ Take time to learn about each child's every experiences at home and the community;
- ✓ Incorporate teaching and learning strategies from children's cultural background (use song-games, chants, music, and movement in coordination with cognitive development).
- ✓ Ensure that the environment is safe from cultural or other forms of bias.
- ✓ Simplify complicated tasks by breaking them into smaller parts or reducing the number of steps.
- ✓ Engage children in a variety of activities and routines throughout the day.
- ✓ Provide hands-on and sensory experiences such as touching, holding, exploring, seeing, and tasting, smelling and manipulating for all learning activities.
- ✓ Match teaching methods to children's different abilities and ways of learning.

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V. Cognitive Development: Children will develop the cognitive processes necessary for learning, literacy, numeracy and academic achievement skills. **Purpose:**	
Birth – 6 Months	
Indicators	**Possible Caregiver Strategies**
1. The infant sucks on fingers or hand by chance. 2. The infant observes hands and fingers. 3. The infant looks to place on body where being touched. 4. The infant clasps hand together and explores fingers. 5. The infant tries to cause things to happen such as kicking a mobile and smiling. 6. The infant squeezes a rubber toy and shows pleasure. 7. The infant drops a ball and observes the fall. 8. The infant develops more precise imitation skills of facial movements and speech sounds. 9. The infant secures an object that is partially hidden with a cloth. 10. The infant repeats arm movements to keep a toy activated, keep mom singing, or other causal event. 11. The infant demonstrates exploratory behaviors with objects.	• Figure out what your baby is trying to tell you. Responding makes him feel important and tells him he is a good communicator. This builds a positive sense of self and a desire to communicate more. • Talk and sing to your baby. Tell him or her about everything that's going on around the home. Pay attention to the sights and sounds he or she likes. Find toys and everyday objects with different colors and textures and see which he or she likes best. • It is important to continue providing opportunities for your infant to visually attend and follow the movement of objects and people in the environment. • Continue to play "tracking" games by moving yourself and interesting objects back and forth. As your infant becomes proficient in tracking objects 8-12 inches away, begin trying larger distances, different types of objects, and tracking with the infant placed in different positions. • An infant's vision will develop with little or no help, according to Have face-to-face interactions where your baby can observe your expressions. • Hold your baby in positions that give the best view of faces, objects, and activities. As your infant begins to move the eyes and rotate the head at the same time, play games that help your infant track or follow objects with his or her eyes. • Show your infant what he or she looks like in a mirror. In time, your infant will learn to smile, make sounds and recognize that what he or she is seeing is a self-reflection. • Provide visually stimulating objects for your child to visually explore. Placing the objects in different locations around the infant will encourage orientation and later movement in different directions.

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V. Cognitive Development: Children will develop the cognitive processes necessary for learning, literacy, numeracy and academic achievement skills. **Purpose:**	
7 to 12 Months	
Indicators	**Possible Caregiver Strategies**
1. Infants imitate the behaviors initiated by the parent including: ➢ Plays peek-a-boo ➢ Smiling and laughing during turn-taking ➢ Attempting to name pictures and objects 2. Infants use toys in more complex ways 3. Infants demonstrate knowledge of people and objects that are not immediately present. 4. Infants perform repeated behaviors with objects (accommodation) to figure out how things work and for building self confidence. Examples include: ➢ Banging blocks and other small toys ➢ Repeatedly throwing or dropping objects to watch the movement ➢ Stirring with a spoon in a cup ➢ Banging spoon on inverted cup or tabletop. 5. Infant gets others to do things for the pleasure of cause/effect. 6. The infant demonstrates emerging problem solving skills such as: ____Placing objects in the mouth and mouthing ____Pushing or pulling an adult's hands to have a behavior instigated or repeated. ____Repeating a behavior (shows off) to maintain adult attention. ____Turning a mirror over to view the functional side. ____Turning a photograph or other picture around to view the functional side. ____Rotating three-dimensional objects to view the functional side. ____Using a hammer or stick to play a xylophone	• Talk to your infant about what has just happened or is about to happen. For example, say, "After you finish your cracker, we'll change your diaper." • Offer your baby lots of opportunities to have "hands-on" contact with many objects in the environment. This is a primary means of learning for young children. • Playing games that expand the infant's memory such as covering and uncovering toys the infant has seen you hide, playing peek-a-boo, etc. • Remember that what you may think of as a routine task, such as feeding, is for the infant a new learning opportunity each day. Slow down and try to take advantage of the social and learning aspects of these "mundane" events. • Take time to play with your child every day. Remember to name objects and use language during all of your play sessions. ➢ Give the infant toys that are safe to grab, bite, chew, throw, or drop. Balls and stacking cylinders are good choices. Stuffed animals are comforting. ➢ Play hide and seek, go-an-fetch, and seek-a-boo games. These help the infant learn that people and objects disappear and return.

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V. Cognitive Development: Children will develop the cognitive processes necessary for learning, literacy, numeracy and academic achievement skills.

Purpose:

13-24 Months	
Indicators	**Possible Caregiver Strategies**
1. By 15 months, toddlers initiate familiar turn-taking routines. 2. By 15 months, toddlers: ➢ demonstrates function use of objects ➢ follows one-step commands during play ➢ responds to request to say words ➢ responds to "give me" commands ➢ points to two action words in pictures ➢ identifies 3 body parts on self or doll 3. Skills performed by 18 months consist of: ➢ Points to, shows, and gives object ➢ Hands a toy to an adult for assistance ➢ Identifies 6 body parts ➢ Completes two requests with an object ➢ Chooses two familiar objects upon request ➢ Identifies objects by category ➢ Asks "What's that?" 4. Toddler stacks 2-3 blocks. 5. Toddler listens to a story. 6. Toddler scribbles with a crayon. 7. Toddler looks at pictures in a book. 8. Toddler dumps object from bottle without being shown. 9. The toddler demonstrate symbolic play, using one object as a signifier for another object 10. By 24 months of age the toddler: ➢ Attempts to repair broken toys ➢ Chooses one object from a group of five upon verbal request ➢ Follows novel commands ➢ Stacks 5 or 6 blocks.	• Spend time just interacting with your young infant. Play games where you imitate the infants cooing, pause, and encourage your infant to coo back to you. • Practice turn-taking with smiling behaviors, facial expressions, and vocal sounds such as clicking your tongue, smacking your lips, etc. • Engage in back-and forth interactions with gestures. For example, hold out an interesting object, encourage your baby to reach for it and then signal her to give it back. Keep each game going as long as your baby seems to enjoy it. • When your baby babbles, babble back, imitating the infant's sounds. You may also use normalized language patterns on some turns. Pretend you understand what the infant is saying, and that the infant understands what you are saying. These early conversations will teach the infant hundreds of words before they can actually speak any of them. Play word games with your infant, such as pat-a-cake or rhyming games. Give her or her chances to join with you and make sounds together. ✓ Sing songs. ✓ Read simple books to your infant. ✓ Don't use television as your substitute to stimulate language. ✓ Language within an interactive relationship is the critical aspect of language learning, not just listening to language. ✓ Show your delight with your infant's squeals, giggles, chortles and gurgles. • Spend time looking at children's books and reading. Name the pictures and the actions that are occurring. Try to be animated, and make the activity "fun". • Use exclamations, and encourage your infant to imitate

➢ Makes a horizontal and vertical stroke with crayon.	exclamations such as “oh-oh”. • Play verbal turn-taking games where you repeat the same word, or sound patterns, over and over again. Change the word or sound patterns periodically and then practice the new word. • Name objects in the child environment including people, pets, toys, and furniture. • Play verbal games such as “pat-a-cake”, “peek-a-boo,” and “so-big.” • Keep the environment generally free from lots of background noise so that your infant can clearly hear the language being used in the home.

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V. Cognitive Development

Purpose: This domain recognizes the child's search for meaning as the basis for intellectual development. The focus is on children's curiosity about the work and their ability to acquire, organize, and use information in increasingly complex ways.

48-60 Months	
Indicators	**Possible Caregiver Strategies**
A. Preoperational Processing 1. Explores materials: blocks-stack, haul, playdough-roll, squeeze, boxes-fill, empty 2. Opens padlock with key 3. Identifies common sources of common actions 4. Integrates spatial, cause-effect and representational thinking into problem solving 5. Relies less on perceptual problem-solving and more on building an integrated understanding of the rules governing how things work 6. Cuts a square within one-quarter inch of line **B. Emerging Literacy-Language** 1. Dictates individual story book 2. Classifies things to read **C. Emerging Literacy-Phonological Awareness** 1. Matches sounds in familiar songs 2. Claps syllables in name 3. Identifies some letter sounds 4. Articulates the difference between beginning and ending sounds (Child can say the word) fish/dish, can/cat, ring/rat, bat/hat) 5. Substitutes sounds in words: bat-rat, hat-hit, rag-rat 6. Verbally identifies the beginning sound of name **D. Emerging Literacy-Alphabetic Principle** 1. Copies various letters of the alphabet 2. Identifies letters in first and last name 3. Recognizes in print first, middle and last name	* Helps identify characteristics of objects, events in the environment * Provides children with opportunities to make their own choices * Provides experiences and materials for a variety of sensory experiences * Sets up activities where children can develop and practice problem-solving skills • Provides activities where children listen to sounds in their environment and language (games, songs) • Provides opportunities for children to identify, practice and experiment with sounds of their language (games, songs) • Provides a wide variety of books for children • Allows children to engage in book related activities (reading, storytelling, acting out stories, rebus stories) • Reads to children regularly each day • Uses books to learn skills in predicting what will happen next and to help children relate to their own experiences • Writes down children's dictation, explanations, labels • Encourages children to practice pre-writing skills • Displays children's written work in room • Models writing in daily activities

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E. Emerging Literacy-Print Awareness 1. Verbally identifies signs in environment 2. Verbally identifies labels in classroom and home (cereal, names, calendar) 3. Uses print forms in imaginary play (menu, lists, newspaper) 4. Verbally identifies signs in environment 5. Verbally identifies labels in classroom and home (cereal, names, calendar) 6. Uses print forms in imaginary play (menu, lists, newspaper) **F. Emerging Literacy-Comprehension** 1. Dictates familiar stories from books and experiences 2. Responds to questions relating to story 3. Completes a sentence that repeats itself in a familiar story 4. Acts out stories from a book (Three Little Pigs) **G. Emerging Literacy-Book Behaviors** 1. Attends while being read to for 4-10 minutes 2. Shows interest in reading related activities, such a independently looking at a book or drawing pictures based on a story, etc. **H. Emerging Literacy-Fine Motor/Prewriting** 1. Constructs complex structures with vertical, horizontal and symmetrical lines 2. Pretend writes following natural progression of left to right, top to bottom 3. Begins to make real letters 4. Copies letters of first name **I. Numeracy** 1. Gives 3, 5, 7 objects upon request 2. Recognizes number symbols 3. Extends patterns of object	• Offers numerous counting activities, books, games • Provides numerous songs, fingerplays that deal with numeracy

4. Names small, medium and large (What size is this?) 5. Rote counts objects to ten 6. Counts objects to five 7. Understands concepts of more, less, add, take away 8. Arranges different colored blocks according to teacher design 9. Classifies numbers 10. Understands the concept of adding 11. Understands the concept of subtracting 12. Copies symbols **J. Content Area Knowledge-Science** 1. Begins to understand simple logical problems 2. Makes comparisons among objects **K. Content Area Knowledge-Social Studies** 1. Demonstrates an awareness that different families practice different traditions 2. Enjoys stories, poems about different peoples **L. Content Area Knowledge-Economics** 1. Demonstrates an awareness of rules 2. Uses objects such as cash registers and other occupational tools to role play various occupations **M. Content Area Knowledge-Geography** 1. Places common household objects in the appropriate rooms of a house 2. Completes a simple treasure hunt map **N. Content Area Knowledge- Ecology** 1. Describes why it is important to keep passageways clear of clutter 2. Discusses why it is important to not disrupt the plants encountered when on a walk	• Plans for opportunities for children to learn patterns, grouping, one-to-one correspondence • Provides materials of various shapes and sizes (blocks, puzzles, toys) • Provides opportunities to create designs using different shapes (art, blocks, painting, drawing, copying) • Provides a variety of empty tubes, cubes, other shaped materials that allow children to construct • Identifies concepts of quantity, comparisons, predictions, sequencing, measuring • Encourages children to ask questions and fine their own solutions through exploration and reflection of actions • Provides science materials to encourage exploration (magnifying glass, mirrors, measuring tools, magnets) • Discusses changes in nature – seasons, temperatures, animals, plants

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O. Content Area Knowledge- Technology 1. Uses a computer software program to complete a learning activity 2. Uses a CD player or tape player to listen to songs or stories	

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V. Cognitive Development

Purpose: This domain recognizes the child's search for meaning as the basis for intellectual development. The focus is on children's curiosity about the work and their ability to acquire, organize, and use information in increasingly complex ways.

60-72 Months	
Indicators	**Possible Caregiver Strategies**
A. Preoperational Processing 1. Tells similarities and differences 2. Predicts what will happen next 3. Knows what to do in unfamiliar situations (emergencies) **B. Emerging Literacy-Language** 1. Substitutes story line to invent a new story ("Brown bear, Brown bear"…. **to** "Snowman, Snowman"….) 2. Points out common words in stories **C. Emerging Literacy-Phonological Awareness** 1. Discriminates middle sounds in words: cup, cap 2. Articulates the middle sounds in words 3. Names the sound spoken /mm/, /tt/, /bb/ "monkey; many, moon money. These words start with what sound? 4. Claps syllables in their name 5. Identifies beginning sound of name and/or familiar words and find another with the same sound: "My name is Mary. His name is Matt. They both begin with /mm/ and/or the same letter 6. Identifies most letter sounds **D. Emerging Literacy-Alphabetic Principle** 1. Recognizes most letters 2. Names most letters 3. Uses letters that represent sounds in writing words (phonetic spelling) **E. Emerging Literacy-Print Awareness** 1. Questions and expands knowledge of environmental print	• Caregiver provides opportunities for children to hear sounds of their native language • Caregiver provides opportunities for children to practice sounds in their and other children's name • Caregiver practices with the children separation of sounds in words (beginning/middle/end sounds, syllables) • Caregiver provides a literacy rich environment (books, writing areas and materials) • Caregiver provides an environment that is rich in environmental print, books, schedules, etc. • Caregiver engages in fingerplays, story reading, story telling using expression and enthusiasm • Caregiver asks children to make predictions about stories • Caregiver provides numerous opportunities for children to write their name and engage in other writing or pre-writing activities • Caregiver displays children's work • Caregiver has books available throughout the different areas of the class environment

2. Recalls single words from single presentation (stop sign) **F. Emerging Literacy-Comprehension** 1. Predicts what will happen in a story 2. Accurately relates familiar story **G. Emerging Literacy-Book Behaviors** 1. Attends while being read to for more than 10 minutes 2. Chooses a variety of books for reading programs 3. Independently uses the in-classroom take home reading program 4. Participates in pretend reading activities with other children **H. Emerging Literacy-Fine Motor/Prewriting** 1. Begins to do representational writing 2. Writes to communicate 3. Strings invented words together leaving spaces between words 4. Prints name independently 5. Prints various letters of the alphabet independently **I. Numeracy** 1. Makes up patterns with objects 2. Uses graphs to visually show relationships 3. Makes number comparisons between groupings of concrete objects (this is one, this is three) 4. Matches numbers with objects 5. Understands concepts of greater than, fewer, equal to 6. Knows sums to five 7. Knows subtracting from five 8. Independently prints symbols **J. Content Area Knowledge-Science** 1. Understands concepts of hot/cold, fast/slow, short/long, thin/fat, night/day 2. Identifies and describes sameness and differences of objects 3. Sorts and collected objects according to two or more attributes	• Caregiver provides numerous counting and number one-to-one correspondence opportunities within the various areas of the classroom (blocks, magnet numbers, dramatic play, writing, manipulatives, books) • Caregiver provides opportunities for children to experience differences in groupings and comparing of quantities • Caregiver references vocabulary of time, amount, number, size, etc. throughout the day • Caregiver provides opportunities to experiment with and compare different sizes and shapes • Caregiver provides opportunities for children to create using materials of different shapes and of different sizes • Caregiver provides opportunities for children to design, draw, paint and cut out different shapes as part of art activities

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4. Asks question and answers questions about measurement, comparison and size 5. Predicts changes in form which may occur with ingredients 6. Creates own set of instructions using amounts, ingredients and equipment **K. Content Area Knowledge-Social Studies** 1. Identifies similarities and differences in people's living patterns 2. Demonstrates a beginning awareness of state and country **L. Content Area Knowledge-Economics** 1. Demonstrates initial understanding of how people rely on each other to obtain goods and services 2. Describes different community jobs **M. Content Area Knowledge-Geography** 1. Describes characteristics of shapes 2. Creates by folding, cutting, drawing, models of circles, squares, triangles and rectangles using various materials. **N. Content Area Knowledge- Ecology** 1. Understands that most natural events occur in comprehensible, consistent patterns 2. Describes patterns of structure and function in living things **O. Content Area Knowledge- Technology** 1. Describes how different technologies affect people's lives (telephone, computer, TV)	• Caregiver engages children in the prediction of "what is next" in patterns and sequences • Caregivers engage children in measuring and charting activities throughout the day • Caregiver discusses with the children similarities and differences of families, careers, communities

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Domain 6. Communication Development

Communication development includes Pragmatics, Receptive Communication, and Expressive Communication.

Introduction

Language, communication, and literacy have been recognized as essential for all individuals to function in all societies. The acquisition of language and literacy skills is a complex process during which, over the course of only a few years, children make great strides in learning the meaning and structure of words, how to use words to convey meaning, and how to understand and use printed material. In acquiring language, children gain the ability to articulate ideas, share them with others, and respond to the ideas and actions of other people.

Communication is the bases from which all subsequent language develops. Communication is the "why" we want to say something to someone. It is our intent. What do we hope to accomplish? Why do we want to send the message? What do we want from the exchange?

The ability to communicate grows out of a parent's attempts to interpret the meaning of the reflexive behaviors and cries of the young infant. This concept is called "readability of infant behavior." In the initial parent/infant communication interaction, the infant cries, whines, or performs a reflexive behavior. The young infant does not initially understand that he or she is sending a message. Rather, the parent shapes these behaviors by consistently responding to the infant. Based on the parent's perceptions of what the parent thinks the infant might want or feel, the parent consistently responds to the infant. The parent literally "reads" the infants behavior and interprets the meaning of the behavior for the infant. The parents impute different interpretations to different behaviors. For example, a certain cry may be interpreted to mean that the infant is "hungry". A cry that sounds like a whine may be interpreted to mean that the infant is "lonely". A sharp whine may be interpreted to mean the infant is "afraid". The parent gradually begins to respond to the different behaviors in different ways. The infant soon learns that if he or she performs a certain behavior, or performs a similar behavior in a unique way, it causes the same thing to happen. At first, the infant uses just a few primary reflexive behaviors to tell the part what he or she wants. Over a period of time, the parent literally shapes (teaches) the infant's communicative behaviors by responding in the same way to the same signal. Soon, the infant learns to combine two or more behaviors to communicate. The infant may coo and smile or fuss and pull away to communicate "avoidance."

As the infant approaches one year of age, the gestures, vocalizations and body movements begin to represent objects or actions. Because they have been so consistently paired with the objects or actions, the infant has learned the association and can use the gesture as a reference to signify the action or object. These communicative behaviors occur immediately prior to the child' beginning to use words for symbolic communication. These naturally occurring body movement, facial expressions, and vocal variations gradually take on more complex meanings. Later on, the infant begins adding more complex and arbitrarily selected natural gestures such as pointing to objects, tugging at people, handing things to

people, waving, etc. These secondary gestures serve to provide redundancy or stress the basic, primary communicate message. Later, speech will be added. Once speech is acquired as a vehicle to transmit the messages, there will be a decrease in the primary and secondary gestural communicative behaviors although they will never be completely discontinued. Even adults utilize many of these elementary gestures in the form of body language to enhance the saliency of messages.

Communication at this level is referred to as "pre-symbolic" communication, meaning communication with no symbolic meaning. Although the child is not able to use symbolic representation, referring to things not present, he or she is learning the functions of communication. The infant is learning that control can be exerted over the environment. The child who has a good foundation in pre-symbolic communication will have learned that communication can be a very powerful instrument to control people in the environment. This will lead to an internal motivation to expand the repertoire of communication skills to increase the locus of control.

Rationale

A child who acquires language has acquired an incredibly complex and powerful system. The ability to communicate effectively- through oral language, the written word, and alternative means (especially for children with speech, language and hearing disabilities) – is essential for a broad range of activities that characterize daily living. Language plays a vital role in the development of cognition, logic and reasoning skills by providing symbols that represent concepts. Language is also a mediator of social competence. Children need to be able to not only use language as a tool to express their own thoughts, feelings, and ideas to others, but also to receive, understand, and interpret communications from other people.

Children do not acquire language skills out of context. No matter which language is being learned (e.g., English, American Sign Language, Cantonese), the vital role of children's environment cannot be neglected. Language is fundamentally embedded in children's everyday relationships and experiences. Parents, primary caregivers, and teachers play a critical role in facilitating young children's language and literacy development by providing exposure to language and print-rich environments, interactions, and opportunities. External input from the environment, teaching of specific skills, and the rich cultural ways of life promote the acquisition of language and literacy skills.

Because language and literacy competencies are essential for success in school and life, supporting language, communication, and literacy are vital to young children's learning and development.

General Definition

The North Dakota Early Learning Guidelines defines the communication process by examining three vital components: expressive language, receptive language, and pragmatics. These three components, however, are highly interrelated. For example, the development of certain language skills is essential for early literacy development, just as the ability to communicate early on in life impacts the development of vocabulary skills.

Language Development: Language is an arbitrary system composed of a set of (vocal) symbols used to represent a set of conceptual symbols (ideas) which man uses to communicate. Language contains a symbolic quality. The child uses language to make reference to perceptual events not present. Language does not develop until 18 to 24 months of age. It emerges concurrent with the consolidation of the sensorimotor stage of development. In order for the infant to be able to make reference to things not present, the infant must be able to remember that perceptual events continue to exist even if they

cannot be seen. The infant must be able to understand that the words he or she has learned to represent those objects can be substituted for an earlier level gesture or behavior for referencing.

Language is the acquisition of linguistic forms and procedures, and social rules and customs, for expressing and interpreting thoughts, feelings, and ideas. This knowledge of language has three key aspects: content (vocabulary and meaning), form (grammatical structure or syntax), and use (function). As children learn the sound system, the meaning of words and the rules of form and grammar, they begin to use language constructively is social situations.

Expressive Language: is the ability to use verbal language to communicate a message to another person in such a manner that the receiver of the message understands the intent and content of the communication.

Receptive Language is the ability to associate meaning to the words we hear. It is the ability to understand the meaning of what others say or the ability to understand the verbal language used by others such that the intent and content of the message of other individuals is accurately interpreted. Receptive language develops out of the auditory abilities that the infant learns to utilize. It also includes learning the subtle meanings of nonverbal language cues such as body posture, facial expressions, and non-verbal signals.

Communication Development: Communicative competence is dependent upon a complex set of skills including awareness of the social conventions of language usage, the ability to listen, to understand, and to follow verbal conversation. Development of communication skills requires and understanding of the social context within which communication occurs, knowledge of the goals of the interaction, and the elements of emotion in communication. Communicative competence is closely interrelated with other domains of development, such as cognitive and social and emotional development.

Pragmatics: examines the reasons for communication or the ways in which we use language to communicate. It refers to the function or variety of purposes for which we communicate. Examples of early communicative functions consist of:

"I want". The infant indicates preference for something, or the converse, dislike of an object, action or outcomes.

"Do this" or "you do." The infant employs an adult to activate an object, secure an object, or obtain an outcome.

"See". The infant draws your attention to something—for no other purpose than joint attention or inspection.

As the infant becomes proficient at using spoken words within the context of communication, the functions or purposes for using language expand. Some of the multiple uses of language include asking questions to gain knowledge, relating information to others, expressing emotion, conveying humor and positive affect and seeking clarification.

Speech is the most frequently used method for communicating language. It is the ability to verbally produce words, which are used to convey ideas. It is the mechanics of relaying information. It is simply the ability to use your voice to express or convey language. Language may be communicated using other modes such as writing, sign language, pointing to pictures or words or using your eyes to visually fixate on pictures depicting the concepts you are communicating. Speech and language are not the same. You can have wonderful language skills and still be able to speak.

Pre-verbal Skills: Although symbolic language does not develop until 18 – 24 months of age, prior to that time the infant learns numerous cognitive and social skills that will later be necessary to learn to use symbolic language. The pre-language skills serve as the beginning building blocks for later language learning. The pre-verbal skills consist of:

- Functional Play with Objects consists of a cluster of cognitive skills involving learning about objects, what they are for, and how to use them. It implies that the child will learn to associate social significance to the objects and use them in a manner in which they are used by other members of society.
- Motor Imitation consists of skills requiring the child to mimic back or to reproduce the behaviors of another person in a very precise manner. Motor imitation includes gross motor movements such as clapping, standing up, and jumping. Fine motor imitation includes reproducing behaviors performed with materials such as drawing shapes, stacking blocks, etc. Oral motor imitation includes imitating facial gestures and expressions such as opening/closing the mouth, pursing the lips, sticking out the tongue, moving the tongue. Vocal Imitation refers to reproducing sounds with the mouth, tongue and throat.
- Attending Skills are the ability to attend to the interactional process with others. The infant must be able to make eye contact with another person on a consistent basis and to maintain it for a few seconds at a time. The infant must be able to visually fixate on objects and then alternate eye contact from objects to people. The child must also be able to sit and engage in repetitive motor or vocal turn-taking with an adult. Although some children are more active than others, unless the child is able to stay with turn-taking for more than a minute, language learning opportunities will be greatly minimized.
- Turn-taking refers to the back and forth nature of using language. When you listen to adults talk, they take turns. One person talks while the other person waits and listens. When you visit with someone, you expect a response when it is his or her turn. Then the roles switch and the listener takes a turn while the other person waits and listens. Turn-taking grows out of social interaction. Later, the infant gains experience in taking urns with adults in play with objects. The infant then learns to use words with interactions with people and objects. Turk-taking examines the back and forth nature of interaction and communication.

The components of the language domain develop simultaneously from birth on, but the relative importance of each cluster varies at the different age levels. Communication begins at birth and is shaped or fully developed by the age of 18 months. Thereafter, we use multiple variations but learn no higher form of this skill. Speech also begins at birth but doesn't become important until approximate 9 moths of age. Prior to that, the infant's vocal play is used for amusement and social interaction. The infant will still be learning to communicate using crying and other pre-speech productions such as gurgling, cooing, and babbling. Speech becomes essential with the advent of those first words. The infant takes skills learned separately (vocal imitation) and begins applying them to the communication process. The infant learns that the words or vocal productions represent objects, needs, wants, and ideas. The infant then learns that he or she can use the speech productions to covey ides. Thereafter, speech and expressive language develop simultaneously. That's why they are so often thought of as being one and the same. Receptive language starts at birth and becomes increasing important until it is essential at 6 to 9 months of age. In reviewing the critical language skills from birth to 24 months, you will notice that the emphasis on component abilities shifts as the infant grows older.

Supporting Individual Differences and Diversity

Children learn words and forms of language not simply to express their thoughts, feelings, and ideas; they also learn language to meet personal and social objectives as determined by the community and culture within which they are socialized. It is not surprising then that language, communication, and literacy are closely linked to social and cultural contexts. Because of this, the manner in which children

use language to communicate varies widely. There are two very special considerations that must be acknowledged when supporting individual differences and diversity; alternative forms of communication and primary versus secondary languages.

The first consideration entails the need to separate out the role of *speech* versus *communication*. Communication refers to the process of using language to get a message across to another individual in such a manner that the individual receiving the message understands it accurately. Although "speech", or the ability to encode verbal sounds into spoken words to communicate the message, is the most common method of communicating language, it is not the only method. Many children with disabilities may need to use "alternative methods" because of difficulty in learning to use oral language. Children may use "pictures" to show others what they want, use sign language to communicate messages or use written language such as writing out the message. Although we value the acquisition of "speech" for all children, we must provide them with an alternative method communicating, using their strong learning modality, until they have acquired functional speech.

Delays in language development may indicate that a child has a hearing loss or developmental delay or a developmental disorder. Diagnosis and intervention for language delays and disorders are critically important.

Several million young children in the United States speak a language other than English in their homes. Children benefit cognitively from learning two or more languages. The ability to communicate in more than one language supports children's cognitive flexibility and meta-cognitive awareness. Children learn second languages in two ways: either by acquiring two or more languages at the same time, or by learning a second language after mastering the "home languages" (i.e. first language learned and primary language used at home). Children who follow the former pathway to dual language learning (simultaneously learning of more than one langue) are said to be "bilingual" as a first language. Children who learn two languages from birth operate with two separate language systems and it is typical they may mix words from the two languages in the same sentence. For children who follow the latter path to dual langue learning, it is important that their competence in the home language is supported while they are learning a second language. If their home languets is actively supported and valued, children will learn English faster.

The language used by children in the home largely governs how children progress from simple to more complex speech. Because language patterns vary so much and because they greatly affect learning, it is vitally important to take into account children's home language when considering their language and literacy processes and achievements.

Global Strategies

Fundamentally, every child needs nurturing and support in the development of his or her communication, language, and literacy skills. The following strategies should be used for all children from birth to school entry. These sample strategies will help to ensure that every child receives learning experiences that meet their individual needs.

- ✓ Immerse children in language- and print-rich environments
- ✓ Build and expand on what children say.
- ✓ Provide culturally and linguistically diverse models of communication, which could include voice, touch, gesture, and facial expression
- ✓ Provide special or assistive devices, when necessary, to increase children's level of communication and or participation.
- ✓ Encourage communication and participation by using culturally appropriate objects and activities from children's home environments.

- ✓ Ensure that the environment is safe from cultural or other forms of bias.
- ✓ Actively support and value children's home language by encouraging children to use it at home and across early learning settings
- ✓ Consistently and regularly encourage development in communication, language, and literacy while being sensitive to the cultural integrity of language and spoken communication.

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VI. Communication Development: Children will learn to understand the principles of language including the communication skills necessary for success in the home, school and community. Communication skills consist of both expressive and receptive communication skills. **Purpose:**	
Birth to 6 Months	
Indicators	**Possible Caregiver Strategies**
1. Infants use their gestures and body movements, sounds and facial expressions to communicate their feelings and needs. 2. Infant smiles and shows pleasure when talked to. 3. The infant demonstrates emerging receptive language skills including: ➢ Recognizing own name ➢ Searching for speaker ➢ Stopping crying when spoken to ➢ Responding to "no" 50% of the time ➢ Discriminating between threatening or friendly voices 4. The infant demonstrates interactive and communication behaviors in social turn-taking games with adults including: ➢ Maintaining eye contact ➢ Vocalizing in response to babbling behavior initiated by adult ➢ Vocalizing in response to vocalizations and speech produced by an adult ➢ Increasing and decreasing body movements in rhythm with turn taking episodes ➢ Enjoying frolic play 5. The infant develops vocal behaviors for use in communicative exchanges including: ➢ Cooing sounds ➢ Babbling sounds ➢ Vocalizes a similar sound in response to a babbling sound initiated by an adult ➢ Vocalizing to express pleasure ➢ Vocalizing to express displeasure ➢ Taking turns vocalizing with an adult	• Talk to your infant during care-giving times such as diapering and feeding. Notice how you speak to an infant. At this point the baby is most attracted to the sound, pitch and rhythm of your voice- the music of langue. • Softly sing songs and watch for the infant's response. Listen and enjoy the sounds a newborn makes in the first 2 months. • Don't feel silly talking to a tiny baby. Talking to babies about what they are seeing and experiencing promotes language development. • Music can have a soothing effect. Try singing or playing lullabies and songs that repeat patterns and rhythms. Try dancing to music. • Try various styles of music and determine if your infant likes a particular type. Keep the volume moderate to low to avoid too much stimulation. • An infant becomes very interactive from 2 to 6 months. They use smiling and cooing behaviors as social and communication skills in interacting with their parents. The infant demonstrates enjoyment with babbling, including "oohs" and ahs" and progressing to P's (pa-pa), M's (ma-ma), B's (ba-ba), and D's (da-da). The infant enjoys interactive games with the parent that involves turn-taking with babbling. The infant babbles and then pauses, waiting for the adult to respond. The infant also loves to imitate, which helps them learn new skills. For example, mom sticks out her tongue, baby imitates and mom does it again. This early turn-taking teaches the young child back and forth response patterns, laying the foundation for later conversation skills.

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VI. Communication Development: Children will learn to understand the principles of language including the communication skills necessary for success in the home, school and community. Communication skills consist of both expressive and receptive communication skills. **Purpose:**	
7 to 12 Months	
Indicators	**Possible Strategies for Caregivers**
1. Infant demonstrates emerging expressive language skills by 9 months including: ➢ Vocalizes four different syllables ➢ Vocalizes a two-syllable combination ➢ Vocalizes in response to objects that move ➢ Imitates duplicated syllables ➢ Sings along with a familiar song ➢ Uses gesture and vocalizes to protest ➢ Shouts or vocalizes to gain attention 2. Infant demonstrates emerging receptive language skills by 9 months including: ➢ Responding to a request to "come here" ➢ Stops when name is called ➢ Maintains attention to speaker ➢ Responds with gesture to "come up" or "want up" ➢ Waves in response to "bye-bye" 3. Infants demonstrate increased expressive language skills by 12 months including: ➢ Says "mama" or "dada" meaningfully ➢ Imitates consonant and vowel combinations ➢ Imitates non-speech sounds ➢ Vocalizes with intent frequently ➢ Uses a word to call a person 4. Infants demonstrate increased receptive language skills by 12 months including: ➢ Giving objects upon verbal request ➢ Performing a routine activity upon verbal request ➢ Looking at familiar objects and people when named	• Talk and sing to your baby during feeding, bathing, and dressing. Describe what you are doing and seeing during play, walks, and car trips. Experts believe that the high-pitched sing-song speech known as "parentese" is a useful way to help infants develop the basic building blocks of speech. • Talk with your child face to face. Show interest by imitating the sounds he or she makes. • Read aloud to your infant every day. Your library and bookstore have guides to best books at different ages. In addition, your pediatrician may participate in a program called "Reach Out and Read" (http:// www.reachoutandread.org). • If you wish to expose your infant to a foreign langue, begin early and do so regularly. • Encourage your infant to play with books, especially books made of thick cardboard or cloth that your infant can touch, mouth, or pat. Your infant will enjoy looking at bright colors, familiar objects (like balls or bottles), and other babies. • Spend time naming objects for your infant. Name objects used in play, looked at in books, and objects seen outdoors. Use the name of the objects in simple sentences. • Reward your infant's attempts to communicate. Ask your infant questions even if he or she will not answer you. Smile at your infant when he or she responds with sounds, gestures and facial expressions. • Sing to your infant and play songs that are repetitive. • Play games where you give the infant a simple command to "give me the doll" or "truck" or "car". Try other commands such as "give the baby a kiss" or "roll the ball". You may want to prompt your

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➢ Understanding simple questions ➢ Identifying two body parts on self 5. Infant demonstrates intense attention to adult language.	child by helping him or her perform the skill. •

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VI. Communication Development: Children will learn to understand the principles of language including the communication skills necessary for success in the home, school and community. Communication skills consist of both expressive and receptive communication skills. **Purpose:**	
13 to 24 Months	
Indicators	**Possible Strategies for Caregivers**
1. Skills performed by 18 months consist of: ➢ Points to, shows, and gives objects ➢ Uses words to protest ➢ Hands a toy to an adult for assistance ➢ Identifies 6 body parts ➢ Completes two requests with an object ➢ Chooses two familiar objects upon request ➢ Identifies objects by category ➢ Understands 50 words ➢ Says 15 meaningful words ➢ Uses consonants such as “t",”d”,"n”, and “h” ➢ Talks rather than uses gestures ➢ Imitates words overheard in conversation ➢ Asks “What’s that?” and asks for “More”. ➢ Names 5 – 7 objects upon request 2. By 21 months, the toddler: ➢ Chooses one object from a group of five upon verbal request ➢ Follows novel commands ➢ Uses two word phrases frequently ➢ Uses 50 different words ➢ Uses new words regularly ➢ Relates personal experience ➢ Uses three-word phrases occasionally ➢ Refers to self by name ➢ Uses early pronouns occasionally 3. The toddler has a vocabulary of 100 or more words by 24	• Spend time helping each child look at pictures of family members. Ask questions and help the child name or label the pictures. • Spend time looking at children’s books and reading. Name the pictures and the actions that are occurring. Try to be animated, and make the activity “fun”. • Use exclamations, and encourage your infant to imitate exclamations such as “oh-oh”. • Play verbal turn-taking games where you repeat the same word, or sound patterns, over and over again. Change the word or sound patterns periodically and then practice the new word. • Name objects in the child environment including people, pets, toys, and furniture. • Play verbal games such as “pat-a-cake”, “peek-a-boo,” and “so-big.” • Keep the environment generally free from lots of background noise so that your infant can clearly hear the language being used in the home. •

months 4. The toddler uses two word utterances, combined with gestures. **5.** The toddler engages in adult-like dialogue. **6.** The toddler uses sentence-like intonation patterns. **7.** The toddler verbalizes two different needs. **8.** The toddler imitates new words spontaneously. **9.** The toddler uses works paired with gestures in expressive communication. **10.** The toddler spontaneously names objects, persons, and actions.	

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VI. Communication Development **Purpose:** Emphasis in this domain is on acquiring language for a variety of purposes. During the preschool period, children are learning to use language to communicate needs, interact socially with others, and share ideas, thoughts and feelings. They are increasing both their spoken and written language abilities.	
25 to 30 Months	
Indicators	**Possible Caregiver Strategies**
A. Pragmatics 1. Communicates about the actions of others 2. Answers simple questions appropriately 3. Asks increasing numbers of questions (“where?” “who?”) 4. Formulates negative judgments (“Spoon, not fork”) 5. Asks for help with personal needs 6. Names at least one color correctly 7. Refers to self by using pronoun (I, Me, My) rather than proper name 8. Answers simple “who,” “what,” “where,” questions about familiar people or things 9. Adds information to the prior utterance of a communicative partner **B. Receptive Communication** 1. Understands negatives (No, Not, Can’t, Don’t) 2. Understands question forms of what and where 3. Understands simple possessive forms (Daddy’s shirt) 4. Understands complex sentences (“When we get to the store, I’ll buy you an ice cream cone”) 5. Points to smaller parts of the body when asked (chin, elbow) 6. Recognizes and identifies general family names, categories (Grandma, Uncle) 7. Understands common verbs 8. Understands common adjectives 9. Recognizes the names and pictures of most common objects 10. Understands word association through functional association (“What do you drink with?” “What do you sleep on?” “What do you brush your teeth with?”)	• Engage in conversations with the child • Model correct grammar, articulation and vocabulary • Encourage interaction by asking questions during read-alouds, conversations, etc. • Allow think time (three or more seconds) between asking a question and accepting a response • Assist the child when they ask for help with personal needs using vocabulary to explain what you are doing • Name colors of clothes, toys, etc (“Do you want this red ball or this blue ball?”) • Listen and respond to child initiated conversation • Provide interesting objects from their world for children to explore and describe • Help children formulate questions they might ask when going to the library, visiting a friend or neighbor, or on a field trip • Engage children in conversation by scripting or planning out play (“Are you the worker in the hardware store? Who can I be? What should I say?”) • Provide and read books, poems and other texts that include descriptive words • Provide hands on experiences where children will actively acquire and use new vocabulary • Be aware of language misconceptions children may have, and listen for correct usage by children • Incorporate movement activities where children learn about comparison words by using their bodies, such as challenging them to make tall, small, or smaller sized shapes with their bodies • Encourage finger plays, songs and games with movement activities

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11. Understands size differences (little doll, large dog) 12. Follows directions involving common prepositions: in, on, behind, out 13. Enjoys finger plays (songs and games that use hands) 14. Responds to action words by performing the action 15. Responds by looking when directed toward a certain object 16. Attempts to locate objects when they are discussed by others **C. Expressive Communication** 1. Jargon and echolalia are almost gone 2. Often uses personal pronouns (I, You, He, It, Me) correctly 3. Asks "what" and "where" questions 4. Uses up to 50 single words 5. Uses two-word phrases 6. Uses nouns to label objects 7. Uses two different pronouns 8. Uses two-term semantic relations that code relational meaning (noun+ attribute, agent + object, action +locative) 9. Uses regular plurals (cats, dogs, balls) 10. Uses morphemes (in, on) 11. Correctly produces phonemes (-s, d, -d, -k, f, -f, -ng, y) 12. Says "No!" to adult request 13. Uses concept "mine" to denote possessiveness 14. Answers who, what, where questions about things he/she knows 15. Speaks in two or three word sentences 16. Repeats adult phrases 17. Recites portions of nursery rhymes/finger plays 18. Recounts an event, with assistance 19. Begins to recall parts of a previously heard story 20. Requests to hear familiar stories 21. Changes intonation and tone to communicate meaning 22. Uses non-verbal gestures and body language to express needs and feelings (hugs, hands on hips, etc) 23. Addresses listener appropriately to get attention (uses child's or adult's name to get attention) 24. Uses sound effects for animals, vehicles, etc in play	• Point to pictures or objects as you describe them • Talk about new vocabulary and meanings as you look at pictures in a book • Wait for a child to make requests • Model complex sentence structures that are just above the child's level • Rephrase comments to improve the child's understanding • Re-read favorite books and other literature • Strategically place and remove objects throughout the house and room that will instigate conversations among children • Label toys, materials with children's names

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VI. Communication Development

Purpose: Emphasis in this domain is on acquiring language for a variety of purposes. During the preschool period, children are learning to use language to communicate needs, interact socially with others, and share ideas, thoughts and feelings. They are increasing both their spoken and written language abilities.

31 to 36 Months	
Indicators	**Possible Strategies for Caregivers**
A. Pragmatics 1. Tells gender when asked 2. May label and talk about own drawings when asked 3. Gives first and last name when asked 4. Regularly relates experiences from recent past **B. Receptive Communication** 1. Understands all common verbs like "run, jump, walk, etc" 2. Understands common prepositions like "under, in front of, behind" 3. Understands common adjectives of color, size, and shape 4. Carries out three simple commands given at one time 5. Shows interest in explanations that involve "why" and "how" 6. Understands concept of "one" **C. Expressive Communication** 1. Talks about his/her drawings 2. Relates experiences from recent past 3. Uses four to six word phrases or sentences 4. Uses several verb forms correctly in relating what is going on in action pictures 5. Makes negative statements ("Can't open it," "Don't touch") 6. Uses noun phrase with article ("The dog barks," "The water hot") 7. Begins to use contractions (can't, we'll, won't) 8. Uses some plural forms correctly in speech 9. Begins to use auxiliary verbs ("I hafta sleep" "Me gonna get it") 10. Uses the present progressive adding "ing" to verbs	• Label clothing, toys, materials with a child's first and last name • Point out the "family" name on the mailbox, mail, • Validate child's culture and language and see it as a valuable asset • Play games when the "girls" and "boys" do different things being sure to label the girls and boys • Sing songs and fingerplays with actions labeled • Gradually add one more command at a time until a child can carry out three simple commands • Answer the child's "why" and "how" questions to the best of your ability • Allow the child to set the table with "one" fork, spoon, knife, napkin, glass, plate, etc for each person • Talk about experiences that happened "yesterday" and will happen "tomorrow" • Enunciate clearly in conversation, exaggerating slightly those sounds that a child may be having difficulty with • Allow children to dictate a story, list or other words that you can write down

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11. Uses the past tense 12. Uses prepositions (on, in, under, behind) 13. Uses simple possessives (“Doggies’ tail,” “Daddy’s shirt”) 14. Uses verb forms correctly (“He walks,” “She walked,” “I walked”) 15. Correctly produces phonemes (-t, -r, -b, w, -ir) 16. Uses contractible auxiliary (“Mommy’s eating an apple”) 17. Spontaneous imitation decreases 18. Dictates a story for adult to write out	

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VI. Communication Development **Purpose:** Emphasis in this domain is on acquiring language for a variety of purposes. During the preschool period, children are learning to use language to communicate needs, interact socially with others, and share ideas, thoughts and feelings. They are increasing both their spoken and written language abilities.	
37 to 48 Months	
Indicators	**Possible Strategies for Caregivers**
A. Pragmatics 1. Refers more frequently to the activities of others 2. Refers more frequently to objects and events removed in time 3. Changes tone of voice and sentence structure to listener's level of understanding 4. Uses some alternative forms that take context differences into account (speaker, hearer, pronoun distinctions, articles and ellipsis based on shared information) 5. Elaborates and expands other's utterances 6. Asks questions about persons and things 7. Verbalizes opposite analogies 8. Completes simple analogies ("We eat with a ___," "We sleep on a _____.") **B. Receptive Communication** 1. Follows 3 step commands given in a complex sentence 2. Comprehends congruent and incongruent tasks ("Can you stand up and sit down at the same time?") 3. Understands temporal terms (before and after) 4. Understands "now, soon, later" 5. Understands prepositions in temporal expressions (in a week, after awhile) 6. Understands concept of more 7. Listens attentively to short stories; likes familiar stories told without any changes in words 8. Recognizes everyday sounds 9. Selects specific details in a story and repeats them 10. Responds to questions with appropriate answers 11. Gains information through listening	• Comment on children's conversations (Yes, we did that last week, didn't we?") • Continue to engage in longer conversations with the child • Read literature with opposites and exaggerate the words with gestures • Use visual schedules and point out what activities will happen "before," "after," "later" • Continue to read literature that gradually increases in length • Repeat familiar and favorite stories • Ask child what will happen next in a familiar story • Expand on stories with more information as requested • Understand that a certain amount of dis-fluency is normal, but consult a speech pathologist if it continues, appears to worsen or does not improve • Continue to label objects and materials with color words (Please hand me the green sock") • Read a variety of literature with questions, rhyme, and other variations • Have the child relay a short message from you to another person, gradually lengthening the message to be relayed • Encourage a variety of communication methods (drawing pictures, communication boards, schedules, lists, words, labeling) • Sing simple songs • Listen to a variety of music • Make tapes, cd's and records available for children to select and play

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C. Expressive Communication 1. Average sentence length is four words 2. Speaks clearly enough so that 75-80 percent of speech is understandable to the unfamiliar listener 3. Stumbles over words at times 4. Uses negative phrases other than “No” (“Don’t do that!”) 5. Names four colors 6. Uses irregular plurals (sheep, leaves, mice) 7. Uses prepositions in phrases (“The box is behind the couch”) 8. Uses possessive pronouns (his, hers, theirs) 9. Correctly produces phonemes (s, -l, -g, er) 10. Begins to use the articles “the” and “a” 11. Responds correctly to questions (who, when, where) 12. Adverbs are emerging (softly, loudly) 13. Uses “s” to make plural nouns 14. Uses “ed” on verbs to include past tense (petted, walked, cooked) 15. Consistently uses complete sentences 16. Uses imperatives (“Do it!”) 17. Enjoys singing a simple tune 18. Recounts some details of a recent event 19. Tells a short make believe story with assistance 20. Uses oral language to communicate a message 21. Participates in conversations about a variety of topics 22. Mimics animal sounds 23. Repeats words or ideas to be sure information is communicated 24. Relays simple messages (from one person to another) 25. States point of view, likes/dislikes, and opinions using words, signs or picture boards	

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VI. Communication Development **Purpose:** Emphasis in this domain is on acquiring language for a variety of purposes. During the preschool period, children are learning to use language to communicate needs, interact socially with others, and share ideas, thoughts and feelings. They are increasing both their spoken and written language abilities.	
48-60 Months	
Indicators	**Possible Caregiver Strategies**
A. Pragmatics 1. Asks questions about persons and things 2. Elaborate and expand on others' utterances **B. Receptive Communication** 1. Sequences a story using at least 3 pictures 2. Follows prepositional directions on/around/over/under 3. Names mouth, eye, ear, nose and fingers 4. Demonstrates understanding of when and why 5. Follows 3-4 assignments given at one time and carried out over time 6. Points to shoulder, hand, neck, arms, elbow, knee, chin, legs **C. Expressive Communication** 1. Retells an experience 2. Responds appropriately (verbally) to requests made by adults 3. Calls teachers and peers by name 4. Uses at least 5-6 word sentences 5. Uses "I", "me", "you", "mine" 6. Tells middle name, last name, parent's name, address, telephone number, birthday, days of week 7. Asks definitions of words 8. Asks questions about people and things 9. Uses regular plurals, past tense, ing verbs and possessives 10. Labels items when group name is given ("what are coats, shoes and pants?")	• Listens, responds to and expands on children's questions • Models appropriate language skills • Engages children in stories, songs, fingerplays, poems that model language • Introduces children to a variety of different communication styles • Introduces new vocabulary • Asks open-ended questions • Provides scheduled and free time where children engage in conversation

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VI. Communication Development **Purpose:** Emphasis in this domain is on acquiring language for a variety of purposes. During the preschool period, children are learning to use language to communicate needs, interact socially with others, and share ideas, thoughts and feelings. They are increasing both their spoken and written language abilities.	
60-72 Months	
Indicators	**Possible Caregiver Strategies**
A. Pragmatics 1. Abstract/logical thinking becoming more advanced (understand opposites and simple analogies) **B. Receptive Communication** 1. Sequences a story using four or more pictures 2. Demonstrates knowledge of numerous finger plays 3. Follows complex assignments given at on time that may be carried out over time 4. Points to hip, waist, toenails, chest, eyebrows, jaw, stomach, fingernails, back, wrist, cheek 5. Names hip, waist, toenails, chest, eyebrows, jaw, stomach, fingernails, back, wrist, cheek 6. Sorts pictures/objects with multiple elements, i.e. large, red, star **C. Expressive Communication** 1. Tells own/city, state, months of the year, current year 2. Uses compound sentences connected with *and* or *or* 3. Expresses feelings using appropriate words 4. Maintains conversation using multiple verbal turn-taking 5. Explains rules of game or activity 6. Labels a group with no pictures ("What are cookies, hamburgers and carrots?") 7. Gives function of a group with no pictures ("What are coats, shirts and pants for?") 8. Uses expanded length (more than 6 words) and complex sentences 9. Uses irregular verbs and comparative forms of words 10. Uses he, she, our, they, during spontaneous conversation	• Caregiver daily engages each child in conversations • Caregiver engages children in stories, songs, fingerplays • Caregiver provides opportunities for children to follow simple to complex directions and multi-step tasks • Caregiver provides opportunities for children to respond to questions, requests, directives • Caregiver provides a variety of opportunities for children to express themselves (role play, dramatic play, centers) • Caregiver uses the interests of the children to expand vocabulary • Caregiver communicates by using open-ended questions and statements to prompt children's conversations • Caregiver provides children with alternative means of communication according to individual children's needs • Caregiver expands children's language in length and complexity by modeling extending language utterances

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Domain 7. Approaches to Learning

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Introduction

Approaches to learning include the inclinations, dispositions, attitudes, habits, and styles that reflect the many ways that children involve themselves in learning. This domain is not about "what skills" children acquire, but how children "orient themselves" to the learning task. Families, communities, early childhood practitioners, researchers, and policymakers regard this domain as critical for children's learning and school readiness. The wide spread acknowledgement of the importance of this domain is prompting researchers and scientists to pursue work in understanding this dimension of development.

The infant is born with an innate drive to respond to the environment. The infant is born with involuntary reflexes or movements and does not realize that his body limbs are moving. The movements are spinal cord reflexes that are elicited by both internal and external conditions. The infant will not learn voluntary movement until the cerebral cortex of the brain begins maturing. The reflexes are nature's gift to the young infant. They are the first behaviors that the infant will learn to control in voluntary movement and are considered the "building blocks" from which all learning occurs.

But there is still something missing; something which science and medicine have not yet identified. Although theories have been offered, we still do not know why the infant is curious. Why does the infant utilize the eyes, ears and the sensations of movement to take in information? Why does the infant attempt to figure things out, to organize information, to respond to the incoming information?

It is the inner world of the infant about which we know so little. We can only say that the infant is, indeed, an "active stimulus seeker." The infant wants stimulation and will seek it out. The infant has an inner spark, an inner drive to conquer, to learn about the world. The urge is so strong that it is referred to as a basic need such as food and water. There are documented cases of depression and failure to thrive in young infants. These are cases where the infant is deprived of opportunities to act on the environment. The infant literally chooses to not "live." The infant knows and can regulate the amount of stimulation being taken in. Once the infant reaches the upper limit, referred to as the "threshold of stimulation" the infant will automatically begin blocking out the excess stimulation by diverting attention, or choosing to not attend. The infant needs no help with this. The infant is competent to regulate the amount.

Infants have been observed, from the very earliest age, to use two reciprocal and complementary processes or strategies in interacting with people and objects. These two processes, referred to as assimilation and accommodation, remain with the infant for life and provide the background from which all "approaches to learning" emerge.

Assimilation is defined as the process of "adapting what one is learning to what one already knows." This is the behavior that we see infants engage in when they repeat a behavior over and over. The infant learns the behaviors and the meaning by practicing and practicing. An example is mouthing objects. Infants usually learn to put their fingers in their mouths and suck. This is the behavior or skill they have learned. They then begin mouthing everything. They

mouth their hands, mom's fingers, toys, furniture. They practice this behavior over and over. Another assimilation behavior is scratching. They first learn to scratch by 1 month of age. Between 1 and 3 months, the infant begins scratching more and more things such as their face, ears, body, clothing, mom's clothing, and body parts. Other common assimilation behaviors, and the ages of common observation of the behaviors consist of:

- Scratching and clutching movements ……..……..1 months
- Vocalizing when someone talks …….……. .2 months
- Scratching face, body and clothing…….…….. .3 months
- Mouthing objects …… .4 months
- Visually inspecting own hands……...4 months
- Touching their knees ……..4 months
- Touching hands in midline …… 4 months
- Shaking objects……...5 months
- Bringing feet to mouth ……...5 months
- Playing with paper (crumpling)……...5months
- Reaching for everything ……5 months
- Smiling at self in mirror ……5 months
- Banging objects held ……..6 months
- Trying to poke finger into holes in object……11 months
- Repeating behavior an adult laughs at ……12 months
- Putting blocks into a container ……12 months
- Scribbling with a crayon ……..14 months
- Stacking 2 or 3 blocks to make a tower……17 months

Assimilation seems to be inborn. Infants have an instinctive need to explore the environment utilizing these behaviors. They set the limits on how long they must engage in the behaviors. They appear to have a great need for redundancy.

Many times, parents tell their children to stop performing these behaviors. The infants or young children spend so much time practicing these skills and will not perform the behavior the parents want them to perform. But children have a built in sense about how long they should practice. They continue performing these behaviors over and over again until they no longer feel a need to rehearse them. They are then ready to move onto other skills.

Accommodation is defined as the ability to change the behavior that you are about to perform with people or objects to align with the behavior that is modeled for you. For example, when we first ask an infant to put a block into a cup, we are asking the infant to perform a new skill. The behavior that the infant may want to perform would be assimilation, or a lower level skill- such as sucking on the block, banging it against another object such as the table, or throwing in on the floor. A critical period comes when the infant watches what others are doing and then "tries it out." The infant has performed a new skill, different from skills previously performed, utilizing the same materials. At first, this performance of the new behavior may be imprecise, inaccurate, or just an approximation. Many times parents prompt their infant or the "help" the infant. The first time may also be accidental. But, there is still the critical time when the infant performs the behavior "on his own" for the first time. The infant has "accommodated" to the newness of the task, or the new expectations.

An infant does not perform a skill for the first time and then continue the new performance. Usually they "try" the new behavior once and then back up and practice lower level skills, or continue with the assimilation of previous skills. They will drop a block into the cup once, and then go back to mouthing it and banging it. This procedure is practiced on one

trail after another. But over successive trails, the infant tries the new skill more than once before going back to the assimilation of previous skills. The infant tries two, three or four times. Then the infant may practice the previous skills for shorter periods of time before trying out the new skill.

The infants reaches a critical point where they "know how to do" the new skill. The infant performs the skill 50% or more of the time when interacting with the same materials. This point is referred to as *equilibration*. The infant spends half the time performing the new skills before reverting to the practice, or assimilation, of previous skills. After this point is reached, the infant will not have to watch others perform the new skills before trying them. The infant knows the skill well enough that he or she can perform them alone. It is at this point that the infant will begin performing the new skill more than previous skills, and the skill that was "accommodated" is now the skill that will be practiced and practiced, or assimilated. Lower level skills will not be rehearsed as frequently. The new skill is now the focus of the infant's practice. The infant will continue the assimilation for as long as the infant feels an "inner need" to rehearse, while simultaneously beginning to accommodate to the next higher level of skill.

These basic assimilation and accommodation patterns persist throughout life, in increasingly more complex patterns of behavior. The extent to which children act on the "inner need to rehearse" or "risk" performing the new behavior modeled by others are hallmarks of the predispositions or approaches to learning. The resulting manner in which children approach learning is tempered by several characteristics variable including personality characteristics, cultural variables and environmental models. Other variables that have shown to correlate with variation in learning style include gender, temperament, and attitudes and inclinations fostered early in life through family, community, and cultural patterns and values. Approaches toward learning are at the core of social, emotional, and cognitive interactions and literally define the scope of our success in life as adult learners.

Rationale

Approaches toward learning frame the child's entire being and are interrelated with all other aspects of development. They are the platform on which learning takes place and include a skill set that predisposes children toward success in school and in life. The possession of a skill does not necessarily mean that it will be used. Children must be motivated and inclined to use their knowledge and skills for lifelong learning. For example, children may have the intellectual capacity to learn and excel, but without the curiosity and motivation to explore their world, their intellectual skills will not be utilized to the fullest extent possible. A narrow focus on skills and knowledge as the end product of education may undermine children's capacity to utilize and apply their skills. By nurturing and supporting children's approaches toward learning, adults help children take their current knowledge and understanding of the world and use it as a basis for creating meaningful new experiences and ideas.

General Definition

Children's approaches toward learning encompass their motivation, attitudes, habits, and cognitive styles that are demonstrated as they engage in learning and respond to different situations. Even though the ways in which children express their approaches toward learning may vary according to their temperament or cultural contexts, the following goals are essential for children's success in school and in life. For the purposes of the North Dakota Early Learning Guidelines, and Approaches Towards Learning domain includes:

- ***Curiosity*** and ***Interest***, indicating children's sense of inquisitiveness, interest in pursuing new information, keenness for new knowledge, and desire to learn;

- ***Initiative***, indicating children's willingness to take on tasks, volunteer to participate in learning activities, and take reasonable risks in learning new information;
- ***Persistence*** and ***Attentiveness***, indicating children's ability to persist and concentrate attention to complete a task without being easily distracted or overly frustrated;
- ***Creativity*** and ***Invention***, indicating children's ability to extend existing knowledge, using imagination and moving beyond conventional thinking into forms and images not present within the current context; and
- ***Reflection*** and ***Interpretation***, indicating children's ability to absorb, think about, and understand knowledge and information to inform future actions and learning.

Supporting Individual Differences and Diversity

The concept of approaches toward learning assumes that children learn and express themselves in different ways. These differences are not, and should not be understood to be, deficits. Many early care and education environments have focused on mainstream, Eurocentric, or "middle-class" approaches toward learning, rather than embracing broad variation. It is important to emphasize that a uniform approach to early care and education in which all children are thought about in precisely the same way in undesirable. Parents and caregivers should create non-critical environments in which all children are allowed to take risks and in which creative processes are nurtured and valued, with less emphasis on conformity and finished products.

Children who have disabilities are at-risk because they do not have the physical and/or mental abilities to rehearse skills. Physically impaired children do not have the motor skills to use their bodies and hands to interact with and to manipulate the environment, required for both accommodation and assimilation. Children with cognitive deficits tend to dwell on the assimilation of basic infant behaviors, and do not attend to the accommodations of others. These children also need physical prompts to "give them the feel" of the behavior, rather than just the visual model. Hearing impaired children cannot hear the vocal/social skills, which need to be practiced. Visually impaired children cannot see the environment and will, therefore, be less motivated to practice some of these skills. Autistic children are afraid of changes in the environment, or afraid of the change in routines required by accommodating to a new behavior.

Children with disabilities require special understanding by care providers, and need adaptations to foster their engagement in learning. For example, care providers who do not understand a child's specific disability or condition may misinterpret the intentions of a child with special needs. In addition, some young children have specific learning disabilities that make it hard for these children to control their behavior and /or pay attention. In order to achieve their full potential, young children who experience delays gain significant benefits from participation in early intervention programs that provide center-based or home-based education, guidance, and family support.

Children are exposed to varying patterns and values in their immediate context of family as well as in the neighborhood, community, and environment. At the family level, differences in child-rearing practices- including parental behaviors of instruction, modeling, and responses to children's initiative- influence children's learning approaches. Culture may influence children's work styles, the way they approach and interpret experiences, and their orientation to action or reflection. Some cultures encourage children to be obedient and respectful of adult opinions while other cultures encourage children to question and dialogue with adults. Cultural patterns may also influence the way children learn. For example, come cultural settings promote learning through hands-on manipulation of materials, while others focus on visual representation, and still others focus on linguistic or more structured interactions. Whatever the cultural influence on

children's predispositions, all learning styles should be embraced as equivalent, valued and respected approaches toward learning.

Global Strategies

Approaches to Learning is a domain that is defined by individual differences in learning. In order to value all styles of learning and to embrace children's rich diversity of predispositions, attitudes, habits, and cultural patterns, the following strategies should be used for all children from birth to school entry. These examples of strategies will help to ensure that every child receives learning experiences that meet his or her unique needs.

- ✓ Interact and play with children each day, supporting and encouraging their explorations.
- ✓ Support and encourage children's creative processes, putting less emphasis on finished products.
- ✓ Take time to learn about children's everyday experiences at home and in their own community. Incorporate traditional strategies used by children's home cultures to support learning and development.
- ✓ Ensure that children are provided with caregivers that interact in consistent ways, as much as possible.
- ✓ Provide multiple ways of teaching and learning, involving all of the senses, such as looking at, listening to, touching, smelling, and tasting.
- ✓ Provide the same range of experiences to all children, even though their responses may differ and some children may need adaptations.
- ✓ Use appropriate verbal, visual, and physical cues in interactions and activities.
- ✓ Observe, recognize and support children's unique ways of approaching new information and expressing themselves, taking into consideration their temperaments, inclinations, and attitudes.
- ✓ Ensure that the environment is safe from cultural or other forms of bias.
- ✓ Use vocabulary and phrases in children's home language when introducing new ideas or concepts.
- ✓ Provide continued acknowledgments; in ways that reflect children's cultural beliefs and traditions, so all children feel valued.
- ✓ Seek medical or developmental expertise if concerned about children's learning and development.

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VII. Approaches to Learning: Children will develop multiple approaches to learning to maximize the value received from educational opportunity. **Purpose: Research shows that children with positive attitudes and behaviors toward learning are more successful in school. The opposite is also true; children who see themselves as incapable or helpless are at risk for failure. The way children view themselves, as learners will affect the way they learn. For this reason, *Approaches to Learning* is at the heart of all learning.**	
0 to 6 Months	
Indicators	**Possible Strategies for Caregivers**
1. The infant sees adults as objects of interest and novelty. 2. The infant fixates on human face and tracks or follows movement presented at 9-12 inches from the face. 3. The infant turns head and eyes in the direction of the parent's voice. 4. The infant brings hands together at midline. 5. The infant begins reaching for objects. 6. The infant repeats arm movements to keep a toy activated, keep mom singing or other causal event. 7. The infant secures an object that is partially hidden with a cloth.	• Hold, cuddle, hug and rock your infant in your arms. Watch for what the baby likes best. Caress and stroke the head and skin. Use touch when bathing, diapering, and feeding your infant. Watch for your infant's response. • Avoid leaving an infant for long periods of time in a swing or an infant seat. This keeps the infant away fro you loving touch. Hold, cuddle, hug and rock your infant in your arms. Watch for what the baby likes best. Caress and stroke the head and skin. Use touch when bathing, diapering, and feeding your infant. Watch for your infant's response. • Avoid leaving an infant for long periods of time in a swing or an infant seat. This keeps the infant away fro you loving touch. • Smile a lot. Stick out your tongue and see if your infant will copy your tongue movements. Talk a lot, raise your eyebrows, and be expressive! • Introduce toys, allowing time for your infant to get to know each one. Introduce them one at a time. Wait a few days before you introduce another one. • Let your infant explore different colors, textures, and sizes of safe objects and watch to see what he or she likes. • The loss of predictability or the absence of patterns can be stressful. Know when to ease up or stop a new activity and return to the patterns that make him or her comfortable instead of tense and unhappy. • Introduce one toy at a time so your baby can focus on, and explore, each one. Good choices include a small rattle with a handle, a rubber ring, a soft doll and a book with pictures. • Lay your baby on his or her back and hold brightly colored toys

	over your infant's chest within reach. Your infant will love reaching up and pulling them close. You will start to see what most interests your infant. • Hang a mobile three or four inches in diameter for your infant to see, reach for, and touch lightly with his or her hands. • As your infant reaches six months, try giving him or her some solid foods from a spoon. It is important that infants get their solids from a spoon rather than through a bottle in order to practice this emerging skill. Allow plenty of practice before you expect him or her to master this skill. Infants need to learn to thrust their tongue less and swallow in rhythm to the food intake. This can initially cause gagging and spitting up. •

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VII. Approaches to Learning: Children will develop multiple approaches to learning to maximize the value received from educational opportunity. **Purpose: Research shows that children with positive attitudes and behaviors toward learning are more successful in school. The opposite is also true; children who see themselves as incapable or helpless are at risk for failure. The way children view themselves, as learners will affect the way they learn. For this reason, *Approaches to Learning* is at the heart of all learning.**	
7 to 12 Months	
Indicators	**Possible Strategies for Caregivers**
1. The infant demonstrates emerging problem solving skills such as: ➢ Securing an object that is hidden under a single screen such as a piece of cloth or newspaper ➢ Using complex motor schemes such as sliding objects, crumpling paper, swinging objects, tearing, etc. ➢ Placing objects in the mouth and mouthing ➢ Pushing or pulling an adult's hand to have a behavior instigated or repeated ➢ Repeating a behavior (shows off) to maintain adult attention ➢ Turning a mirror over to view the functional side ➢ Turning a photograph or other picture around to view the functional side ➢ Rotating three-dimensional objects to view the functional side ➢ Using a hammer or stick to play a xylophone 2. The infant enjoys exploring objects with others as the basis for establishing relationships. 3. The infant demonstrates intense attention to adult language.	• Encourage your infant to imitate you. Take turns and periodically imitate your infant's behavior. If your infant is performing a favorite behavior with an object, such as mouthing a rattle, show the infant how to shake the rattle. Encourage you infant to imitate you. Your infant will soon "accommodate" by doing what you want, but will then go back to "assimilating" or practicing the old behavior. But with enough practice at imitating you, your infant will begin practicing (assimilating) the new behavior. • Examples of behaviors you can use for accommodation include. 1. Banging blocks and other small toys. 2. Repeatedly throwing or dropping objects to watch the movement 3. Stirring with a spoon in a cup, sipping from the cup, banging the cup. 4. Banging a spoon on an inverted cup, banging the spoon on the table, hiding the spoon under a cloth. 5. Kissing a doll, hugging a doll, feeding a doll. • Place an appealing toy just outside your infants reach to encourage your infant to move toward it. • Urge your infant to grasp, manipulate, mouth, stack, and shake, bang. Easy to operate pop-up toys will help your infant coordinate eyes movements with hand movements and help connect what he or she does with something that happens. Soft balls, especially balls that wobble when they roll, can attract and hold your infant's interest.

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VII. Approaches to Learning: Children will develop multiple approaches to learning to maximize the value received from educational opportunity. **Purpose: Research shows that children with positive attitudes and behaviors toward learning are more successful in school. The opposite is also true; children who see themselves as incapable or helpless are at risk for failure. The way children view themselves, as learners will affect the way they learn. For this reason, *Approaches to Learning* is at the heart of all learning.**	
13 to 24 Months	
Indicators	**Possible Strategies for Caregivers**
1. The toddler resist change, transitions are difficult. 2. The toddler secures an object that is hidden under three screens, with the object left hidden under the last screen (toddler may search in correct sequence of observed placements). 3. The toddler gains greater enjoyment from peer play and joint exploration. 4. The toddler begins to see benefits of cooperation. 5. The toddler demonstrates a functional use of objects such as trying to use a toy car or drinking from a toy cup. 6. The toddler begins to explore the environment independently. 7. The toddler uses vocalizations and words during pretend play.	• Give your infant bath toys that do more than just float so that your infant can be busy with his or her hands pouring water, making a water wheel turn, or squirting water. • Put fun toys inside large boxes to encourage infants to stretch, reach, and crawl towards and into safe places. • Give your infant sturdy and unbreakable child-sized cups, mugs, and dishes to grasp and manipulate. • Balls are excellent toys, especially those made of a soft material that won't shred or tear into small pieces. • Use a variety of small, miniature toys that your infant can play with. Make sure they are large enough such that your infant won't choke on them if he or she places them in the mouth. • Play games where you continuously hand toys to your infant, such as 1-inch cubes. Observe y our infant's behavior. Does your infant try to transfer objects from one hand to the other? Set one block down to retrieve another?

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VII. Approaches to Learning

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25 to 30 Months	
Indicators	**Possible Strategies for Caregivers**
1. Wants to do favorite activities over and over again 2. Builds with blocks both upward and sideways 3. Takes simple toys apart and put them back together 4. Places simple 3-5 piece puzzles together independently 5. Continues to try a difficult task for a brief period of time (building with blocks for 3-5 minutes) 6. Insists on some choices 7. Seeks and accepts assistance when encountering difficulties 8. Invents new uses for everyday materials with assistance (bangs on pots and pans, uses a box for a house) 9. Approaches tasks experimentally, adapting as the activity evolves 10. Displays understanding of how objects work together (gets the dustpan when adult is sweeping the floor) 11. Substitutes similar objects (uses boxes for blocks) 12. Realizes that behaviors can precede events (If Mom takes things out of the refrigerator and turns on the stove, she is going to cook lunch)	• Design the physical environment to support exploration • Organize materials within children's reach to allow free choice • Encourage children to try new activities • Help children make choices • Interact with children during play • Know children's abilities as well as likes and dislikes • Allow children to ask questions • Provide opportunities for children to use materials creatively • Rotate toys, materials and equipment regularly • Have children participate in decision making regarding experiences or extension of activities • Provide opportunities and time for children to solve problems • Allow children to revisit learning experiences and improve on earlier attempts • Remind children of past successes • Design learning activities that are challenging, but within children's abilities • Help children identify challenging factors in activities and come up with possible strategies • Design activities that require collaboration between children or adults • Model asking for and accepting help ("Would you please help me carry the groceries? It would take two trips if I did it myself! Thank you!") • Make suggestions such as "What might you use for that?" "Would this work?" "Have you tried this?"

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VII. Approaches to Learning

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31 to 36 Months	
Indicators	**Possible Strategies for Caregivers**
8. Uses questions such as "why?" and "how?" to find out about things 9. Performs multi-step tasks (takes money, rings cash register, puts money in drawer when playing) 10. Begins to use inductive reasoning (If you do this, that happens) 11. Expresses beginning understanding of cause and effect (It's quiet because you turned off the music) 12. Listens and participates in group activities 13. Enjoys opportunities for pretend play and creating things 14. Pretends and uses imagination during play 15. Alters behavior based on a past event and builds on it (This didn't work, so I will try this) 16. Relates an experience today to one that happened in the past (brush teeth before bed, washing hands before eating a meal)	• Reason out loud to model ("When I cook this meat, we can make spaghetti) • Encourage imagination with puppets, props • Use a visual schedule to assist children with the daily schedule (brush teeth before bed, story after brushing teeth, etc.) • Continue to add steps to directions given to the child as they are capable of performing more complicated tasks • Verbalize your actions as you go through daily tasks ("I need to get more paper, so we can paint this afternoon" "I will buy more soap so we can wash clothes this afternoon") • Encourage group activities by inviting other children over to the house, enrolling in community activities (library story hour, Sunday School, etc)

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37 to 48 Months	
Indicators	**Possible Strategies for Caregivers**
1. Focuses on tasks of interest to him/her 2. Remains engaged in an activity for at least 5-10 minutes 3. Completes favorite tasks and activities over and over again 4. Persists in trying to complete tasks when previous attempts have not been successful (completing a puzzle, building a tower or structure, dressing self) 5. Uses at least two strategies to solve problems 6. Participates in meal times with minimal distractions 7. Invents new activities or games 8. Uses imagination to create a variety of ideas 9. Creates acceptable rules for group activities 10. Makes up words, songs, or stories 11. Engages in extensive pretend play (playing house, dinosaurs, fireman, etc.) 12. Tells others about events that happened in the past 13. Represents things in environment with available materials, moving from simple to complex representations (building a bridge, structure or road from blocks) 14. Thinks out loud and talks through a situation 15. Works out problems mentally rather than through trial and error	• Encourage meal time together with conversations that engage the child • Extend topics beyond immediate activities by engaging the child in meaningful open-ended conversations (“What are you going to do in the morning?” “What did you do for your birthday?”) • Provide materials that can be utilized for props in pretend play (rope for fire hose, various hats, boxes, etc.) • Encourage trial and error activities to solve problems (“Let’s see if this will work” “What else do you think we could try?”) • Support imaginative activities such as pretend play and other activities

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48-60 Months	
Indicators	**Possible Strategies for Caregivers**
1. Relates new experiences to past 2. Works cooperatively with others in completing a task 3. Shows forethought when engaging in activities 4. Matches, points to and names 6 shapes 5. Uses trial and error to experiment with a variety of solutions 6. Follows through on a task until completed 7. Repeats number & word groupings modeled by the teacher 8. Recalls object placement, missing parts and identifies added object 9. Matches, points to and names 6 to 8 colors 10. Makes activity choices without teacher's help	• Uses activities to engage children's imagination • Responds to children's questions and curiosity • Provides opportunities for experimentation and exploration • Gives time for children to problem-solve

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60-72 Months	
Indicators	**Possible Strategies for Caregivers**
1. Uses imagination and inventiveness to create novel experiences 2. Modifies activities when new ideas are presented 3. Anticipates events showing an understanding of time 4. Imitates and structures a task until completion 5. Matches, points to and names 8-10 colors 6. Matches, points to and names 8 shapes 7. Demonstrates understanding of time concepts-morning, afternoon, tonight, today, tomorrow, yesterday, last night 8. Demonstrates knowledge of how objects come apart and fit together 9. Demonstrates the ability to look ahead and visualize a solution 10. Repeats number and word groupings as modeled by the teacher 11. Recalls object placement, missing parts and identifies added object	• Caregiver participates in children's activities, experiments, games, etc. modeling curiosity and exploration skills • Caregiver responds enthusiastically to individual children's curiosity and questions • Caregiver provides activities that are structured to promote exploration • Caregiver helps children identify key characteristics of objects in the environment • Caregiver provides opportunities for children to make their own choices in what and how they want to complete activities • Caregiver provides a variety of different activities and materials to promote a range of sensory experiences

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Domain 8.
Creative Expression

Creative Expression includes play, music, and art.

Introduction

The domain of creative expression goes beyond the traditional concept of child development that encompasses the acquisition of development "skills" in the formal domain areas. Creative expression begins to address the "quality of life" indicators. It examines how children "use" developmental skills to express themselves in artistic endeavors. Creative expression for young children is found in how they learn to use cognitive, motor, and social skills in play. It addresses how they learn to use motor, cognitive, and communication skills to express themselves through music and art. Creative expression is a form of "adaptive behavior". It is evidence that the young child is internalizing the development skills learned across domains to the extent that they can use these skills to enrich and quality of their lives.

Rationale

Children's ability to express and represent themselves through creative expression is a central aspect of cognition. Related to the ability to express and represent oneself through the arts is an understanding and appreciation of the arts. For some children, this includes learning the cultural arts tradition of their community or cultural group.

General Definition

The North Dakota Early Learning Guidelines addresses the development of three distinct forms of creative expression: play, music and art. This listing is certainly not all inclusive of the larger domain of creative expression, nor does it reflect a greater value that should be associated with the three sub domains identified. These three sub domains were selected because they are the most frequently observed forms of creative expression observed in programs for young children in North Dakota. Other forms of creative expression that are equally as important and should be included in early childhood programs include dance, theater, pottery, the three specific forms of creative expression used in the North Dakota Early Learning Guidelines consist of:
Play consists of using cognitive, motor, communication, and social skills and behaviors to create
Music consists of using communication, motor, and social behaviors to create musical forms of expression including singing, playing musical instruments,
Art is the ability to use cognitive and motor skills to create visual representations of

Supporting Individual Differences and Diversity

Young children demonstrate significant variation in their interests, inclinations, and aptitudes for creative expression. Creative expression is directly related to the domain Approaches to Learning. Some children thrive on experimenting with novel and different ways of performing tasks, thereby automatically bringing creative expression into every aspect of their daily lives through their basic approach to learning. These children will automatically experiment with new and different ways of making music and creating art. Their play will be embellished with ever-changing content and scenarios. Other children are more preoccupied with pleasing adults and doing things the "right" way. These children will require far more encouragement to experiment and step outside of their comfort zone in terms of how they are using their developmental skills to express themselves. A typical example is an art project using odd pieces of colored construction paper to make a flower on piece of white paper. The child who by nature likes to experiment will immediately, and often impulsively, begin arranging the bits of paper in outlandish patterns, trying to create a variety of patterns that extend the boundaries of a "flower". The more subdued child will be more concerned with the "right" way to make a flower and will be more concerned with using their cognitive and motor skills to "match" or "replicate" the pattern or model created by the teacher. Both types of children need encouragement to extend their creative skills. The child whose basic approach to learning is impulsive and experimental needs guidance in learning to reflect, study options created, and assessing the aesthetic value of his or her creations. The child whose approach to learning is methodical needs guidance on learning to "experiment" and try alternative approaches to improve upon the accepted model.

Some children with disabilities thrive when exposed to creative expression activities. There are world famous individuals with disabilities who have become renowned artists, musicians, and stage personalities. They have possessed unique talents in the creative expression domain that have been capitalized on to encourage their success. For these individuals, the creative expression talents represent strengths that have been used to build skill development in other areas. Other children with disabilities struggle with creative expression. Because of cognitive, communication, motor, and social interaction delays, they often do not understand how basic development skills can be extended into other areas of creative expression. These children need systematic instruction in learning even the most fundamental concepts inherent in play, art, and music.

Children from diverse cultural backgrounds often possess knowledge of creative expression unique to their culture that other children may not be aware of. Each culture has preferences for style of dance, drama, visual arts, and manual arts. These preferences can be used in programs to encourage the children to share their unique cultural traditions with the other children in building an attitude of respect and appreciation for unique cultural traditions.

Global Strategies

- ✓ Creative expression must be built into the fabric of all other activities in early childhood programs. Not only are the creative expression activities valuable learning opportunities for the children, they can also be interspersed in other activities and used as reinforcers, "breaks" from more demanding attention tasks, and to give the children exercise.

- ✓ Survey the cultural backgrounds of the children in your program. Visit with the parents and grandparents about the unique dances, customs, theatrical appreciation's, visual arts, and songs unique to those cultures. Arrange to have the parents, grand parents, or other friends or family members prepare and present activities to the class that communicate variations of creative expression unique to that culture.
- ✓ Include song and dance in pre-academic activities every day. Research has shown that music and movement can greatly enhance learning of pre-reading, math, and language concepts for children.
- ✓ Encourage children to engage in organized play in the classroom. Have the adults interact with the children in play to model more elaborate forms of social representation in play. Play is also a wonderful avenue for expanding children's language ability since it allows adults to expose the children to language models in a non-threatening manner.

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VIII. Creative Expression: Children will engage in creative expression processes including play, music and art. Purpose:	
0 to 12 Months	
Indicators	**Possible Strategies for Caregivers**
1. The infant expresses enjoyment of or preferences for certain activities or situations. 2. The infant uses gestures and body movements, sounds, and facial expressions to communicate feelings and needs. 3. The infant engages in interactive play behavior with parents and adult caregivers using smiling, cooing, gurgling, facial expressions and rapid body movements. 4. The infant sees adults as objects of interest and novelty. 5. The infant demonstrates exploratory behaviors with objects. 6. The infant repeats arm movements to keep a toy activated, keep mom singing, or other causal event. 7. The infant uses toys in more complex ways.	• Provide opportunities for your infant to feel various types of cloth surfaces. Examples include cotton, corduroy, silk, and flannel. • Gently rub different textures to the various parts of the infant's hands such as the closed fist, the top of the hand, and the sides of the hand, the elbow and wrists. • Observe what happens to the infant's body movements and postures when the hands are stimulated. • Make sure the baby's hands are unrestricted and free to move when holding the baby and when interacting with baby in the supine position. • Periodically, exert gentle pressure to open the infants closed fist. Put your finger in the reflexive fist. Try other small objects or pieces of cloth. • Music can have a soothing effect. Try singing or playing lullabies and songs that repeat patterns and rhythms. Try dancing to music. • Try various styles of music and determine if your infant likes a particular type. Keep the volume moderate to low to avoid too much stimulation.

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VIII. Creative Expression: Children will engage in creative expression processes including play, music and art. Purpose:	
13 to 24 Months	
Indicators	**Possible Strategies for Caregivers**
1. The toddler experiences self as a powerful, creative "doer" who explores everything. 2. The toddler engages in pretend play 3. The toddler expresses enjoyment of or preferences for certain activities or situations 4. The toddler demonstrates symbolic play with objects. 5. The toddler pretends to dance to music. 6. The toddler pretends to play a musical instrument. 7. The toddler uses two toys together in pretend play. 8. The toddler demonstrates more complex exploration and play skills with toys and objects. 9. The toddler demonstrates symbolic play, using one object as a signifier for another object. 10. The toddler attempts to repair a broken toy.	• Provide opportunities for your infant to feel various types of cloth surfaces. Examples include cotton, corduroy, silk, and flannel. • Gently rub different textures to the various parts of the infant's hands such as the closed fist, the top of the hand, and the sides of the hand, the elbow and wrists. • Observe what happens to the infant's body movements and postures when the hands are stimulated. • Make sure the baby's hands are unrestricted and free to move when holding the baby and when interacting with baby in the supine position. • Periodically, exert gentle pressure to open the infants closed fist. Put your finger in the reflexive fist. Try other small objects or pieces of cloth.

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VIII. Creative Expression **Purpose:** Play is a child's work. Through active play, children learn social skills from each other, language skills as they communicate, mathematical skills as they count and explore their environment, and physical skills as they run and jump. A child's enthusiasm and love of learning are maintained when the learning environment provides an ample choice of developmentally appropriate activities, with adequate time for a child to explore and express creativity through play, music and art.	
25 to 30 Months	
Indicators	**Possible Strategies for Caregivers**
A. Play 1. Uses unrelated objects to represent other objects (broom for a horse, cup for a pot on the stove) 2. Engages in pretend play B. Music 1. Moves to music 2. Explores various ways to move with or without music 3. Participates in simple songs using voice, instruments or assistive device 4. Imitates movement after participating in or watching others perform songs or musical movement activities or games C. Art 1. Plans creative expression by getting materials together (box of crayons and sitting at table) 2. Uses a variety of materials for tactile experiences and exploration (paint, play dough, glue, musical instruments) 3. Engages in the artistic process with enthusiasm 4. Observes and responds to artwork produced by other individuals and/or cultures	• Have materials available for the child to use as they wish (boxes, paper, clothing, etc) • Various materials/instruments/scarves should be available with which the child can experiment with sounds and movement • Make available a variety of music with which the child can listen • Model and comment on other's products ("I like the green trees in this picture" " You rolled your play dough into a large circle")

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31 to 36 Months	
Indicators	**Possible Strategies for Caregivers**
A. Play 1. Looks with fascination at colorful dramatic pictures 2. Dramatizes familiar roles such as putting baby in buggy, using dress up clothes, using a stethoscope 3. Identifies favorite storybook characters B. Music 1. Shows awareness and appreciation of a variety of live and recorded music forms 2. Exhibits interest when watching musical, dance, or theater performances by other individuals C. Art 1. Demonstrates completion of project by showing finished product (scribbles, pictures) 2. Exhibits interest when watching musical, dance, or theater performances by other individuals	• Read a variety of books with colorful pictures and comment on them • Read and re-read favorite stories and comment on the characters • Play act out familiar stories such as "The Three Bears" "The Three Billy Goats Gruff" etc. • Attend live concerts, theater, dance as available and talk about the type of music presented, characters portrayed, etc. • Display child's product when they complete it and have them comment on it

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VIII. Creative Expression **Purpose:** Play is a child's work. Through active play, children learn social skills from each other, language skills as they communicate, mathematical skills as they count and explore their environment, and physical skills as they run and jump. A child's enthusiasm and love of learning are maintained when the learning environment provides an ample choice of developmentally appropriate activities, with adequate time for a child to explore and express creativity through play, music and art.	
37 to 48 Months	
Indicators	Possible Strategies for Caregivers
A. Play 1. Participates freely in dramatic play activities (pantomimes movement of familiar things, acts out stories, re-enacts events from his/her own life B. Music 1. Participates in group music experiences (singing, finger plays, chants, musical instruments) 2. Remembers the words to songs that are repeated often 3. Asks to sing a particular song 4. Pretends to be on stage and uses a microphone to sing 5. Watches children dance, then tries to mimic dance steps 6. Hums or moves to the rhythm of recorded music 7. Wonders about or asks questions about songs and dance C. Art 1. Enjoys playing with clay or play dough (pounds, rolls, and squeezes it) 2. Tries one type of art many times (painting at easel several days in a row, using different colors or covering the whole paper with one color) 3. Performs simple elements of drama (audience, actors, stage) 4. Shows awareness of various types of art found in books, photographs and on the computer 5. Experiments with a variety of materials (watercolors, collage materials, paints, paper, scissors, glue, crayons) 6. Listens attentively at a children's concert, play or puppet show 7. Shares various forms of art found in own environment 8. Wonders about or asks questions about works of art and	• Attend group musical, theatrical or dance activities • Provide background for various musical or dance presentations • Make play dough with your child and talk about the process and products • Provide various materials with which the child can manipulate play dough (roller, sticks, fork, etc) • Explain the illustrations in familiar books and how the illustrator accomplished them • Provide a variety of music (tempo, rhythm, etc) for the child to listen, move, sing, etc. • Allow the child to experiment with a variety of artistic materials (paint, glue, play dough, water colors, finger paints, glitter, stickers, paper, scissors, crayons, markers) • Model how a simple box /chair/other common material can be a stage, puppet theater

theatre	

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VIII. Creative Expression **Purpose:** Play is a child's work. Through active play, children learn social skills from each other, language skills as they communicate, mathematical skills as they count and explore their environment, and physical skills as they run and jump. A child's enthusiasm and love of learning are maintained when the learning environment provides an ample choice of developmentally appropriate activities, with adequate time for a child to explore an express creativity through play, music and art.	
48-60 Months	
Indicators	**Possible Strategies for Caregivers**
D. Play 1. Role plays people they know 2. Initiates play based on a specific theme E. Music 1. Moves body to music 2. Uses props to express themselves through music 3. Imitates movement to a steady beat F. Art 1. Values the process of creating art more than the results 2. Experiments with a variety of mediums 3. Glues simple art projects using appropriate amounts of glue	• Provides opportunities for children to experience music and movement (games, songs) • Introduces a wide range of different music to the children • Uses music as tools for transitions • Discusses art with the children • Comments on the art created by the children • Provides opportunities for exploration of a variety of art mediums (paint, junk, drawing, cutting, folding) • Allows children to experiment with the relationships of color, size, space, balance, texture, design • Provides activities that develop balance and coordination • Provides activities that allow children to move their bodies • Provides opportunities for children to act out stories and assume various roles • Introduces children to a variety of dramatic expression from a range of cultures

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VIII. Creative Expression **Purpose:** Play is a child's work. Through active play, children learn social skills from each other, language skills as they communicate, mathematical skills as they count and explore their environment, and physical skills as they run and jump. A child's enthusiasm and love of learning are maintained when the learning environment provides an ample choice of developmentally appropriate activities, with adequate time for a child to explore an express creativity through play, music and art.	
60-72 Months	
Indicators	**Possible Strategies for Caregivers**
G. Play 1. Uses props in dramatic play following a theme 2. Engages in complex and extended role play 3. Acts out familiar stories 4. Engages in conversations with dolls, stuffed animals, other toys	• Caregiver models and encourages children to act out stories, assisting children with beginnings and endings and extended story lines • Caregiver inserts elements from a variety of cultures and positive family traditions into children's play • Caregiver plans the environment such that it provides numerous opportunities for play
H. Music 1. Demonstrates unconventional use of materials (scarves for movement) 2. Uses a variety of props with music to respond with expression (instruments, streamers) 3. Knows words of familiar songs 4. Makes up songs to go along with play activities	• Caregiver provides numerous opportunities for music throughout the day • Caregiver uses music and movement to assist children in transitioning from one activity to another • Caregiver exposes children to a variety of music
I. Art 1. Uses control and intent when producing abstract art 2. Plans and follows through with self-expressive projects 3. Demonstrates ability to produce art projects that are recognizable and tell a story	• Caregiver engages children in discussions about their art projects • Caregiver exposes children to a variety of different art forms, materials and techniques • Caregiver provides opportunities for creative artistic expression

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Observation of Indicators

The Observation of Indicators form contains a voluntary set of outcomes designed to be used by Early Head Start teachers, Child Care providers, Right Track screeners, parents and Infant Development monitors. It is designed to be used with infants and toddlers at each of the following age intervals:

2 months	9 months	18 months	24 months
6 months	15 months	21 months	

Please record your observations of the infant's skills and behaviors on the pages of the form corresponding to the age level of the infant or toddler. If the infant or toddler is slightly older than the cut-off, please administer the previous level and note the child's age.

It may be necessary to adjust the age level being administered if the infant or toddler encounters significant difficulty with the items at the designated age level. In the case of significant difficulty, please go back and administer the items at the preceding level. If the infant demonstrates all of the skills at the designated age level, it would be advantageous to go up to the next higher level and administer the items.

Name of Program: _____

Name of Observer: _____

Date of Observation: _____

Age level of Infant or Toddler: _____

Age level(s) administered: _____

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Observation of Indicators

Please rate your observation of each indicator based on the following scale:

+ Infant consistently demonstrates the targeted skill or behavior.

E Skill or behavior is emerging, being demonstrated only inconsistently.

- Skill has not yet been observed.

? Don't know. Do not understand the skill and/or criterion.

Observation at 2 months

_____The infant fixates on human face and tracks or follow movement presented horizontally at 9-12 inches from the face.

_____The infant turns head and eyes in the direction of the parent voice.

_____The infant prefers the sight, smell, and sound of the primary caregiver, usually within the first two weeks.

_____The infant is comforted and appears to enjoy touch and being held by a familiar adult.

_____The infant uses gestures and body movements, sounds and facial expressions to communicate feelings and needs.

_____ The infant sees adults as objects of interest and novelty.

_____The infant regulates eating and sleeping patterns and emotions evidenced by the establishment of consistent routines and schedules about 50% of the time.

_____The infant engages in interactive play behavior with parents and adult caregivers using smiling, cooing, gurgling, facial expressions and rapid body movements, etc.

_____The infant, when placed in the prone position (on stomach), bears weight on the forearms and ulnar borders (little finger side) of lightly fisted hands.

_____The infant demonstrates an immediate, strong and consistent Asymmetrical Tonic Neck Reflex (ATNR) by 2 months of age (When head is turned to one side, the arm on the face side is extended and the arm on the opposite side is flexed).

_____The infant demonstrates an emerging Grasp Reflex by 2 months of age. A stimulus, such as a dowel or peg, inserted into the radial side (thumb side) of the palm results in thumb and all fingers

flexing and adducting (coming together), followed by synergistic flexion with the entire extremity flexing.

_____The infant demonstrates Reflexive Movements with hands. The movements consist of scratching and clutching movements caused by touching objects.

Comments:

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Observation at 6 months

Please rate your observation of each indicator based on the following scale:

+ Infant consistently demonstrates the targeted skill or behavior.

E Skill or behavior is emerging, being demonstrated only inconsistently.

- Skill has not yet been observed.

? Don't know. Do not understand the skill and/or criterion.

_____The infant smiles spontaneously to human contact, smiles in play, and smiles at self in the mirror.

_____The infant can be consoled, indicated by ceasing crying and calming when comforted by an adult.

_____The infant can initiate and terminate social interactions.

_____The infant enjoys games such as "Where is your nose?" and "So big!"

The infant demonstrates emerging receptive language skills including:

____recognizing own name
____searching for speaker
____stopping crying when spoken to
____responding to "no" 50% of the time
____discriminating between threatening or friendly voices

_____The infant produces different cries for different reasons.

_____The infant smiles and shows pleasure when talked to.

The infant demonstrates interactive and communication behaviors in social turn-taking games with adults including:

____Maintaining eye contact
____Vocalizing in response to babbling behavior initiated by an adult.
____Vocalizing in response to vocalizations and speech produced by an adult.
____Increasing and decreasing body movements in rhythm with turn-taking episodes.
____Enjoying frolic play

_____The infant develops more precise imitation skills of facial movements and speech sounds.

The infant develops vocal behaviors for use in communicative exchanges including:

____cooing sounds
____babbling sounds
____vocalizes a similar sound in response to a babbling sound initiated by an adult.

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____vocalizing to express pleasure
____vocalizing to express displeasure
____taking turns vocalizing with an adult.

_____The infant brings hands together at midline.

_____The infant demonstrates exploratory behaviors with objects.

_____The infant begins reaching for objects.

_____The infant begins to pull at diaper when being changed.

_____The infant begins to grab at spoon when being fed.

_____The infant repeats arm movements to keep a toy activated, keep mom singing, or other causal event.

The infant develops greater control over his/her body evidenced by:
_____ rolling over in one direction
_____reaching and grasping for objects in sitting, prone and supine positions.
_____sitting independently or with minimum assistance, head steady.
_____holding on to gingers and pulling self to sitting.
_____standing with hands held, bouncing.

_____The infant secures an object that is partially hidden with a cloth.

_____The infant shows a preference fore being held by familiar people.

_____ The infant sucks on fingers or hand by chance.

_____The infant observes hands and fingers.

_____The infant looks to place on body where being touched.

_____The infant clasps hand together and explores fingers.

_____The infant tries to cause things to happen such as kicking a mobile and smiling.

_____The infant squeezes a rubber toy and shows pleasure.

_____The infant drops a ball and observes the fall.

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Observation at 9 months

Please rate your observation of each indicator based on the following scale:

+ Infant consistently demonstrates the targeted skill or behavior.

E Skill or behavior is emerging, being demonstrated only inconsistently.

- Skill has not yet been observed.

? Don't know. Do not understand the skill and/or criterion.

The infant utilizes gestures, sounds, and facial expressions in interactive turn-taking and to communicate feelings including:

____Consistently imitates babbling sounds in turn-taking.
____Imitates familiar words in turn-taking.
____Smiles and laughs during turn-taking
____Participates in games
____Demonstrates anticipation of play activity.

The infant demonstrates emerging expressive language skills including:

____Vocalizes four different syllables.
____Vocalizes a two-syllable combination.
____Vocalizes in response to objects that move.
____Imitates duplicated syllables.
____Sings along with a familiar song.
____Uses gesture and vocalizations to protest.
____Shouts or vocalizes to gain attention.

The infant demonstrates emerging receptive language skills including:

____Responds to a request to "come here"
____Stops when name is called.
____Maintains attention to speaker.
____Responds with gesture to "come up" or "want up".
____Waves in response to "bye-bye".

The infant imitates the behaviors initiated by the parent including:

____Plays peek-a-boo
____Smiles and laughs during turn-taking
____Attempts to name pictures and objects

_____The infant uses toys in more complex ways.

_____The infant visually attends to an object for 5 seconds.
_____The infant follow an auditory stimulus

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_____The infant rolls over both ways

_____ The infant brings self to a sitting position from supine.

_____The infant bears body weight on forearms in prone position.

_____The infant scoots, crawls, and may stand.

_____ The infant moves 3 or more feet by crawling.

_____The infant sits supported, head steady.

The infant demonstrates emerging problem solving skills such as:

____Securing an object that is hidden under a single screen such as a piece of cloth or newspaper.

____Using complex motor schemes such as sliding objects, crumpling paper, swinging objects, tearing, etc.

The infant performs repeated behaviors with objects (accommodation) to figure out how things work and for building self-confidence. Examples including:

_____banging blocks or small toys together.

_____repeatedly throwing or dropping objects to watch the movement.

_____stirring with a spoon in imitation.

_____banging a spoon on an inverted cup or tabletop.

_____The infant enjoys exploring objects with others as the basis for establishing relationships.

Comments:

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Observation at 12 months

Please rate your observation of each indicator based on the following scale:

+ Infant consistently demonstrates the targeted skill or behavior.

E Skill or behavior is emerging, being demonstrated only inconsistently.

- Skill has not yet been observed.

? Don't know. Do not understand the skill and/or criterion.

_____The infant demonstrates knowledge of people and objects that are not immediately present.

The infant develops more elaborate social comprehension in interactive turn-taking including:

____Imitates the name of familiar objects during turn-taking.
____Covers and uncovers face during peekaboo.
____Show sensitivity to the mood of others.
____Performs for social attention.
____Participates in speech routine games.

The infant demonstrates increased expressive language skills including:

____Says "mama" or "dada" meaningfully.
____Imitates consonant and vowel combinations.
____Imitates non-speech sounds
____Vocalizes with intent frequently.
____Uses a word to call a person.

The infant demonstrates increased receptive language skills including:

____Giving objects upon verbal request
____Performing a routine activity upon verbal request.
____Looking at familiar objects and people when named.
____Understanding simple questions.
____Identifying two body parts on self.

The infant performs repeated behaviors with objects (accommodation) to figure out how things work and for building self confidence. Examples include:

____Banging blocks and other small toys.
____Repeatedly throwing or dropping objects to watch the movement
____Stirring with a spoon in a cup.
____Banging spoon on inverted cup

The infant demonstrates emerging problem solving skills such as:

____Placing objects in the mouth and mouthing

DRAFT

____Pushing or pulling an adult's hands to have a behavior instigated or repeated.
____Repeating a behavior (shows off) to maintain adult attention.
____Turning a mirror over to view the functional side.
____Turning a photograph or other picture around to view the functional side.
____Rotating three-dimensional objects to view the functional side.
____Using a hammer or stick to play a xylophone

The infant demonstrates more advanced fine motor skills including:
____reaching for and grasping blocks or other small toys.
____transferring objects from one hand to another.
____reaching for objects while in a prone position
____demonstrating a refined grasp with thumb opposition.
____points with index finger.

_____The infant demonstrates intense attention to adult language.

_____The infant pulls self up to standing position next to furniture.

_____The infant cruises around furniture.

_____The infant drinks form a cup.

_____The infant begins feeding self finger food.

_____The infant sleeps through the night but may awaken and cry occasionally.

_____The infant exhibits anxious behavior around unfamiliar adults.

_____The infant shows considerable interest in peers.

_____The infant begins to distinguish between friends and strangers.

Comments:

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Observation at 15 months

Please rate your observation of each indicator based on the following scale:

+ Infant consistently demonstrates the targeted skill or behavior.

E Skill or behavior is emerging, being demonstrated only inconsistently.

- Skill has not yet been observed.

? Don't know. Do not understand the skill and/or criterion.

____The toddler initiates familiar turn-taking routines.

____The toddler associates social significance with objects evidenced by hugging or kissing a doll or stuffed animal.

____The toddler shakes head "no" to express independence.

____The toddler demonstrates functional use of objects such as trying to use a comb or brush, driving a toy car, or drinking from a toy cup.

____The toddler follows one-step commands during play.

____The toddler responds to requests to say words.

____The toddler responds to "give me" commands.

____The toddler points to two action words in pictures.

____The toddler identifies three body parts on self or a doll.

____The toddler says 8-10 words.

____The toddler names one object frequently.

____The toddler imitates new words spontaneously.

____ The toddler is beginning to walk independently.

_____The toddler begins to explore the environment independently.

_____The toddler scribbles with a crayon.

Comments:

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Observation at 18 months

Please rate your observation of each indicator based on the following scale:

+ Infant consistently demonstrates the targeted skill or behavior.

E Skill or behavior is emerging, being demonstrated only inconsistently.

- Skill has not yet been observed.

? Don't know. Do not understand the skill and/or criterion.

_____The toddler uses words paired with gestures in expressive communication.

_____The toddler spontaneously names objects, persons, actions, etc.

_____The toddler follows a 2 or 3 step direction.

_____The toddler gives an object to an adult as causal action to have it activated.

_____The toddler engages in pretend play.

_____The toddler walks independently with good quality.

_____The toddler gets from sitting to hands and knees position.

_____The toddler secures an object that is hidden under three screens, with the object left hidden under the last screen (toddler may search in correct sequence of observed placements).

_____The toddler explores adult facial features.

_____The toddler expresses displeasure for or dislike of certain activities or situations.

_____The toddler expresses enjoyment of or preferences for certain activities or situations.

_____The toddler plays peek-a-boo.

_____The toddler discriminates between familiar and unfamiliar people.

_____The toddler requests assistance from an adult.

_____The toddler remains in close contact with, then venturing further away from the caregiver, during exploration of the environment.

DRAFT

_____The toddler points to, shows, and gives objects.

_____The toddler uses words to protest.

_____The toddler hands a toy to an adult for assistance.

_____The toddler identifies 6 body parts.

_____The toddler completes two requests with on object.

_____The toddler chooses two familiar objects upon request.

_____The toddler identifies objects by category.

_____The toddler understands 50 words.

_____The toddler says 15 meaningful words.

____ The toddler uses consonants such as “t”, “d”, “n”, and “h”.

____The toddler talks rather than uses gestures.

____The toddler imitates words overheard in conversation.

____The toddler asks “What’s that?”

____The toddler asks for “more”.

____The toddler names 5 to 7 objects upon request.

____The toddler listens to a story.

____The toddler stacks 2 or 3 blocks.

____The toddler dumps an object from a bottle without being shown.

Comments:

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Observation at 21 months

Please rate your observation of each indicator based on the following scale:

+ Infant consistently demonstrates the targeted skill or behavior.

E Skill or behavior is emerging, being demonstrated only inconsistently.

- Skill has not yet been observed.

? Don't know. Do not understand the skill and/or criterion.

____ The toddler engages in adult-like dialogue.

____ The toddler uses vocalizations and words during pretend play.

____ The toddler uses turn-taking with conversations.

____ The toddler pretends to dance to music.

____ The toddler pretends to play a musical instrument.

____ The toddler imitates housework activities.

____ The toddler uses two toys together in pretend play.

____ The toddler identifies four clothing items.

____ The toddler understands the commands "sit down" and "come here".

____ The toddler understands the meaning of actions words.

____ The toddler identifies pictures when named.

____ The toddler uses single words frequently.

____ The toddler uses sentence-like intonation patterns.

____ The toddler imitates two-three word phrases.

____ The toddler verbalizes two different needs.

____ The toddler uses two-word phrases occasionally.

Comments:

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Observation at 24 months

Please rate your observation of each indicator based on the following scale:

+ Infant consistently demonstrates the targeted skill or behavior.

E Skill or behavior is emerging, being demonstrated only inconsistently.

- Skill has not yet been observed.

? Don't know. Do not understand the skill and/or criterion.

_____The toddler has a receptive vocabulary of 100 or more words by 24 months.

_____The toddler uses two-word utterances, combined with gestures, to communicate.

_____The toddler exerts independence and control in social and play settings.

_____The toddler demonstrates more complex exploration and play skills with toys and objects.

_____The toddler demonstrates more advanced movement and motor skills such as running and climbing.

_____The toddler demonstrates symbolic play, using one object as a signifier for another object.

_____The toddler turns the pages in a book.

_____The toddler imitates scribbling motions.

_____The toddler creeps or crawls up 4 steps without assistance.

_____The toddler walks without support for 10 feet without falling.

_____The toddler picks up a raisin with the ends of the thumb and index finger in an overhand approach (neat pincer grasp).

____ The toddler gestures to indicate toileting needs.

____ The toddler attempts to repair broken toys.

____ The toddler chooses one object from a group of five upon verbal request.

____ The toddler follows novel commands.

____ The toddler uses two-word phrases frequently.

DRAFT

____ The toddler uses 50 different words.

____ The toddler uses new words regularly.

____ The toddler relates personal experience.

____ The toddler uses three-word phrases occasionally.

____ The toddler refers to self by name.

____ The toddler uses early pronouns occasionally.

____The toddler "checks in" with familiar adults while playing.

____The toddler says "me-do" when offered assistance by an adult while dressing.

____The toddler stacks 5 or 6 blocks.

____The toddler makes a horizontal and vertical stroke.

____The toddler shows increased awareness of being seen and watched by others.

____The toddler beings to realize other have rights and privileges.

____The toddler identifies self with other children of the same age and sex.

____The toddler shows awareness of the feelings of others.

____The toddler shows strong sense of self as an individual as evidenced by saying "No" to adult requests.

____The toddler shows empathy for familiar others, especially those perceived to be hurt or sad.

Comments:

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Supportive Practices for Parents

0 to 2 months

What is my role as a parent?

Parents and families are the child's first and most important role model and teacher. Families have an extremely important role to play in providing the social and emotional support needed in order to learn and grow. Parents are the child's first teacher, and perhaps the most influential teacher the child will encounter on his or her life journey.

The following suggestions are designed as a set of general guidelines for use by parents, grandparents, siblings and other extended family members. Each age interval signifies the outcomes typically expected of a child upon reaching the upper age level cited. For example the skills listed under category 1, 0 to 2 months are the skills typically in place when a child reaches his or her 2nd month birthday. The skills in the next category, 2 to 6 months, include the skills typically seen in children when they turn 6 months.

Each skill that is identified contains suggestions for what you can do to provide stimulation, instructional practice, and enrichment activities to generalize the child's skills. Every attempt has been made to offer suggestions for activities that can be incorporated into the daily living routines of your family and activities that provide parents an opportunity to "play" and "interact" with their child. The workbook style format is designed to provide space for you as a family member to record your observations and responses to the self-reflection questions.

How does my child develop?

An infant's development depends on both the traits he or she was born with (nature), and what he or she experiences (nurture). All areas of development, such as emotional, intellectual, motor, and language, are linked. Each depends on, and influences, the others. What children experience, including how their parents respond to them, shape their development as they adapt to the world.

An infant is born with a sensory system that is not fully developed. A newborn has vision at birth, but it is the least mature of the senses. The newborn's eyes can track or follow movement, but only within a distance of 9-12 inches from the infant's face. The eyes of a newborn cannot yet focus as well as those of an adult. As a result, objects and people that the infant sees look a bit fuzzy. Before 3 months of age, the infant sees best when looking at things "out of the corner of their eyes" (peripheral vision). They most easily notice movement and high-contrast patterns (light versus dark). At about 1 month, they may get "visually stuck" and cry because they can't stop staring at one thing! Soon, they learn to "detach" their gaze to look at something else. Older infants gradually develop a preference for staring "right at something" (central vision) and by 3 months most like to watch their hands, and can visually follow an object that is moving in a circle (such as toys on a mobile). The area of the brain that sends and receives messages about what the newborn sees will continue to develop over the next six months until the infant's vision is as clear as an adult's. Providing infants with opportunities to look at things in the world around them including your warm, smiling face helps to create an environment that

supports visual development. With normal visual stimulation, better eye focus and clear vision will gradually develop.

The newborn can hear a variety of sounds. Infants can hear the rhythms and tones of mother's voice before they are born. The infant is especially sensitive to the sound of human speech, which means the sound of your voice. Infants are amazingly interested in the basic speech sounds of language. Not only do newborns hear your voice when you speak, they can also turn their heads and eyes in the direction of your voice. Talking to an infant, even if you don't think you will be understood, may help the brain develop the connections that are necessary to fine tune hearing and to understand language.

The newborn's sensitivity to touch is well developed at birth. In fact, touch is the first sense to begin developing during the prenatal period. A newborn is especially responsive to touch around the mouth, the palms of the hands, and the bottom of the feet. An infant's skin is so responsive to the stimulation of touch that the brain registers touch at the slightest pressure.

One of most important tasks of the first 2 months is to help newborns feel comfortable in their new world. The infant learns to regulate their eating and sleeping patterns and their emotions, which help them, feel content, safe and secure. Newborns use their gestures (body movements), sounds and facial expressions to communicate their feelings and needs from birth. They use different cries to let the caregiver know they are hungry, tired or bored. They ask for a break by looking away, arching their backs, frowning or crying. They socialize with the caregiver by watching faces and exchanging looks. Even as newborns, babies can "play" in many ways. They can connect sounds with their sources and enjoy adults talking and singing to them. Through interactive, turn-taking social exchanges, the infant develops a strong attachment that promotes healthy social development.

What should my infant be able to do at 2 months of age?

- Infants visually track or follow movement presented horizontally at 9-12 inches from the face.
- Infants turn their heads and eyes in the direction of the parent voice.
- The infant is comforted and appears to enjoy touch and being held by a familiar adult.
- Infants use their gestures and body movements, sounds and facial expressions to communicate their feelings and needs.
- Infants regulate their eating and sleeping patterns and emotions evidenced by the establishment of consistent routines and schedules.
- Infants engage in interactive play behavior with parents and adult caregivers using smiling, cooing, gurgling, facial expressions and rapid body movements, etc.
- Infants placed in the prone position (on stomach) bear weight on the forearms and ulnar borders (little finger side) of lightly fisted hands.
- Infants demonstrate an immediate, strong and consistent Asymmetrical Tonic Neck Reflex (ATNR) by 2 months of age (When head is turned to one side, the arm on the face side is extended and the arm on the opposite side is flexed).
- Infants demonstrate an emerging Grasp Reflex by 2 months of age. A stimulus, such as a dowel or peg, inserted into the radial side (thumb side) of the palm results in thumb and all fingers flexing and adducting (coming together), followed by synergistic flexion with the entire extremity flexing.
- Infants demonstrate Reflexive Movements with their hands. The movements consist of scratching and clutching movements caused by touching objects.

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What can my infant see? A newborn has vision at birth, but it is the least mature of the senses. The newborn's eyes can track or follow movement, but only within a distance of 9-12 inches from the infant's face. The eyes of a newborn cannot yet focus as well as those of an adult. As a result, objects and people that the infant sees look a bit fuzzy. Before 3 months of age, the infant sees best when looking at things "out of the corner of their eyes" (peripheral vision). They most easily notice movement and high-contrast patterns (light versus dark). At about 1 month, they may get "visually stuck" and cry because they can't stop staring at one thing! Soon, they learn to "detach" their gaze to look at something else.

Visual behaviors to observe: Does my infant visually track or follow movement presented horizontally at 9-12 inches from the face?

What Can I Do?

- ✓ Hold or place the infant about 9-12 inches from your face. This distance keeps you in the infant's visual field. Don't worry if his eyes wander independently or if he looks at you "out of the corner of his eye" in the first couple of months. By 2 months, the infant will like to look at your face if you widen your eyes and move your mouth.
- ✓ Move your head slowly so the infant can follow it from side to side or up and down. Use a mobile and encourage your infant to follow an object with his eyes by slowly moving an object or stuffed animal.
- ✓ Offer your baby lots of different objects for him to look at, touch and even grip in his palms. He can focus best on things that are 8 to 12 inches away.
- ✓ Play "tracking" games by moving yourself and interesting objects back and forth. First he will use his eyes to follow. Eventually he will move his head from side to side. This helps strengthen his neck muscles as well as exercise his visual abilities.

Questions to ask yourself:

1. What does my infant appear to be looking at out of the "corner of his eyes?

2. What object does my infant appear to enjoy looking at and visually following?

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What can my infant hear? The newborn can hear a variety of sounds. Infants can hear the rhythms and tones of mother's voice before they are born. The infant is especially sensitive to the sound of human speech, which means the sound of your voice. Infants are amazingly interested in the basic speech sounds of language. Not only do newborns hear your voice when you speak, they can also turn their heads and eyes in the direction of your voice. Talking to an infant, even if you don't think you will be understood, may help the brain develop the connections that are necessary to fine tune hearing and to understand language.

Auditory behaviors to observe: Does my infant turn his or her head and eyes in the direction of my voice?

What Can I do?

- ✓ Talk to your infant during care-giving times such as diapering and feeding. Notice how you speak to an infant. At this point the baby is most attracted to the sound, pitch and rhythm of your voice- the music of langue.
- ✓ Softly sing songs and watch for the infant's response. Listen and enjoy the sounds a newborn makes in the first 2 months.

Questions to ask yourself:

1. What does my infant appear to enjoy listening to?

2. Does my infant appear to enjoy the times when I talk, when I sing, or when I play music?

3. How do I know that my child can hear?

4. What behavior does my infant exhibit that gives me that information?

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What can my infant feel? The newborn's sensitivity to touch is well developed at birth. In fact, touch is the first sense to begin developing during the prenatal period. A newborn is especially responsive to touch around the mouth, the palms of the hands, and the bottom of the feet. An infant's skin is so responsive to the stimulation of touch that the brain registers touch at the slightest pressure.

Touch behaviors to observe: *Does my infant receive comfort and appears to enjoy touch and being held by a familiar adult?*

What Can I Do?

- ✓ Hold, cuddle, hug and rock your infant in your arms. Watch for what the baby likes best. Caress and stroke the head and skin. Use touch when bathing, diapering, and feeding your infant. Watch for your infant's response.
- ✓ Avoid leaving an infant for long periods of time in a swing or an infant seat. This keeps the infant away fro you loving touch.

Questions to ask yourself:

1. What kind of touch does my infant seem to enjoy?

   How do I know that?

2. Does my infant appear to be consoled or comforted with holding, cuddling, and rocking?

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What social and emotional skills does my infant have? The infant learns to regulate their eating and sleeping patterns and their emotions, which help them feel content, safe and secure. Newborns socialize with the caregiver by watching faces and exchanging looks. Even as newborns, babies can "play" in many ways. They can connect sounds with their sources and enjoy adults talking and singing to them. Through interactive, turn-taking social exchanges, the infant develops a strong attachment that promotes healthy social development.

Social and emotional behaviors to observe: Does my infant regulate his and her eating and sleeping patterns and emotions evidenced by the establishment of consistent routines and schedules? Does my infant engage in interactive play behavior with parents and adult caregivers using smiling, cooing, gurgling, facial expressions and rapid body movements, etc.?

What Can I Do?

- ✓ Parents should observe infants carefully for signs of distress. This will help in figuring out what your baby's cries are telling you. Infants do feel pain, and may cry in response to it.
- ✓ Soothe your baby. When you respond to your baby's cries and meet his needs, you let him know he is loved. You can't spoil a baby. In fact, by responding lovingly to his needs, you are helping him learn skills now that allow him eventually to sooth himself. You are also promoting a strong bond and healthy brain development.

Questions to ask yourself:

1. What soothes your baby?

   How do you know?

2. What most distresses him or her?

3. What experiences does your baby seem to like?

4. What kinds of toys seem to attract your baby's attention?

5. What kind of play do you enjoy most with your infant?

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What communication skills can I expect? Newborns use their gestures (body movements), sounds and facial expressions to communicate their feelings and needs from birth. They use different cries to let the caregiver know they are hungry, tired or bored. They ask for a break by looking away, arching their backs, frowning or crying. They socialize with the caregiver by watching faces and exchanging looks. Even as newborns, babies can "play" in many ways. They can connect sounds with their sources and enjoy adults talking and singing to them. Through interactive, turn-taking social exchanges, the infant develops a strong attachment that promotes healthy social development.

Communication behaviors to observe: Does my infant use his or her gestures and body movements, sounds and facial expressions to communicate feelings and needs? Does my infant engage in interactive play behavior with parents and adult caregivers?

What Can I Do?

- ✓ Figure out what your baby is trying to tell you. Responding makes him feel important and tells him he is a good communicator. This builds a positive sense of self and a desire to communicate more.
- ✓ Talk and sing to your baby. Tell him about everything that's going on around him. Pay attention to the sights and sounds he likes. Find toys and everyday objects with different colors and textures and see which he likes best.

Questions to ask yourself:

1. How does your baby communicate with you?

2. What kinds of interactions does he like best?

   How do you know?

3. How does he let you know when he has had enough?

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How much movement should I expect from my infant? The young infant's gross motor and fine motor behaviors are characterized by all reflexive movements. The reflexes are nature's gift to the infant. They are present at birth, or develop automatically, shortly after birth. The reflexes will be later integrated into volitional movement, controlled by the child. Meanwhile, until the child develops the necessary control, the reflexes are teaching the child critical motor and movement attributes such as "how movement should feel", "how much pressure is needed for movement," and how the different parts of the body must work together to perform almost every known movement.

Movement Patterns to observe: Does my infant demonstrate an immediate, strong and consistent Asymmetrical Tonic Neck Reflex (ATNR)? (When head is turned to one side, the arm on the face side is extended and the arm on the opposite side is flexed). Does my infant, when placed in the prone position (on stomach), bear weight on the forearms and ulnar borders (little finger side) of lightly fisted hands?

What Can I Do?

- ✓ It is important to remember that the reflexes will develop automatically and become integrated into volitional movement as the central nervous system or brain matures. The timing for the maturational process is built in and cannot be speeded up through stimulation.
- ✓ Strategies that will facilitate the infant's passage through the reflex integration process consist of making your child physically comfortable at all times and providing a stimulating and safe environment in which to "do what comes naturally".
- ✓ Make sure your child is wearing clothing that does not restrict movement. Clothing that is too tight will limit the movement range of the reflex patterns.
- ✓ Make sure the room is warm enough so that you don't have to keep the infant bundled up or covered with layers of clothing and blankets. Infants need a warm environment where they can spend time wearing only limited amounts of clothing.
- ✓ Provide visually stimulating objects for your child to visually explore. Placing the objects in different locations around the infant will encourage orientation and later movement in different directions.
- ✓ Use your social interaction "games" and auditory stimulus as a method for encouraging the infant to orient, turn, and later move in different directions.
- ✓ While interacting with your infant, move to the left side of the infant, and then at a later time, to the right side of the infant.
- ✓ It is important that an infant be placed in the prone position occasionally. Prone positioning builds muscle strength in the back and neck areas, critical for later fine motor and writing skills.
- ✓ If your infant dislikes the prone position, rub or stroke his or her back continuously while in this position. Begin with just a few seconds, no more than 10 seconds, and then place the infant in a more preferred position. Then gradually increase the amount of time the infant will tolerate placement in the prone position. You may begin decreasing the continuous stroking also after your infant begins tolerating the position for 60 seconds or more.
- ✓ While in the prone position, talk to the infant from the front, and then from each side. Try the interaction games. Present objects while the infant is in the prone position.
- ✓ It is vital to remember that you must stay with your infant at all times while placed in the prone position. Never leave your child in this position alone.

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Questions to ask yourself:

What positions does my infant seem to enjoy?

Does my infant seem to enjoy being on his tummy?

Does “talking” to my infant or “showing toys” to my infant encourage any movement?

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What can my infant do with his or her hands? The infants reaching and touching skills from birth to 2 months are reflexive, uncontrollable movements, similar to the gross motor reflexes. The fine motor reflexes consist of opening and closing of the palms, hand movements, and reflexive scratching and clutching movements.

Hand behaviors to observe: Does my infant demonstrate an emerging Grasp Reflex? (A stimulus, such as a dowel or peg, inserted into the radial side (thumb side) of the palm results in thumb and all fingers flexing and adducting (coming together), followed by synergistic flexion with the entire extremity flexing). Does my infant demonstrate Reflexive Movements with his or her hands? (The movements consist of scratching and clutching movements caused by touching objects.)

What Can I Do?

- ✓ Provide opportunities for your infant to feel various types of cloth surfaces. Examples include cotton, corduroy, silk, and flannel.
- ✓ Gently rub different textures to the various parts of the infant's hands such as the closed fist, the top of the hand, and the sides of the hand, the elbow and wrists.
- ✓ Observe what happens to the infant's body movements and postures when the hands are stimulated.
- ✓ Make sure the baby's hands are unrestricted and free to move when holding the baby and when interacting with baby in the supine position.
- ✓ Periodically, exert gentle pressure to open the infants closed fist. Put your finger in the reflexive fist. Try other small objects or pieces of cloth.

Questions to ask yourself:

1. What kinds of surfaces does your infant like to touch?

2. Does you baby move more when watching something, listening to something, or playing with you?

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2 to 6 months

Unique Characteristics of Infants from 2 to 6 months:

Between the ages of two and six months, rapid changes take place in all areas of your baby's development, including the brain. Scientists believe that different parts of a baby's brain mature at different rates. As a result, you may see sudden spurts in your baby's development in the areas of physical control, thinking, communicating, and relating to others. You will see your baby exploring more and expressing a wider range of feelings as his or her physical, mental, and emotional systems continue to mature.

What should my infant be able to do at 6 months of age?

- The infant smiles spontaneously to human contact, smiles in play, and smiles at self in the mirror.
- The infant can be consoled, indicated by ceasing crying and calming when comforted by an adult.
- The infant demonstrates emerging receptive language skills including:
  - ____recognizing own name
  - ____searching for speaker
  - ____stopping crying when spoken to
  - ____responding to "no" 50% of the time
  - ____discriminating between threatening or friendly voices
- The infant produces different cries for different reasons.
- The infant demonstrates interactive and communication behaviors in social turn-taking games with adults including:
  - ____Maintaining eye contact
  - ____Vocalizing in response to babbling behavior initiated by an adult.
  - ____Vocalizing in response to vocalizations and speech produced by an adult.
  - ____Increasing and decreasing body movements in rhythm with turn-taking episodes.
  - ____Enjoying frolic play

- The infant develops more precise imitation skills of facial movements and speech sounds.
- The infant develops vocal behaviors for use in communicative exchanges including:
  - ____cooing sounds
  - ____babbling sounds
  - ____vocalizes a similar sound in response to a babbling sound initiated by an adult.
  - ____vocalizing to express pleasure
  - ____vocalizing to express displeasure
  - ____taking turns vocalizing with an adult.

- The infant brings hands together at midline.
- The infant demonstrates exploratory behaviors with objects.
- The infant begins reaching for objects.

- The infant repeats arm movements to keep a toy activated, keep mom singing, or other causal event.
- The infant develops greater control over his/her body evidenced by rolling, reaching and grasping for objects, and sitting with assistance.
- The infant secures an object that is partially hidden with a cloth.

What can my infant see?

Scans of the brain have shown that the visual part of the newborn's brain is the most highly active. Between 3 and 6 months of age, an infant's eyes should be aligned (not "crossed") and able to focus together on one object. Between two and six months, babies develop increased skill in scanning, tracking an object with their eyes, and focusing on objects. They can see in color, perceive depth, and adjust to different distances. By the time your baby is three or four months of age, his or her vision will be similar to an adult's. The infant is beginning to combine what he or she sees with taste, sound, and the feel of textures. This is called sensory integration. An infant who is still not focusing his or her eyes together on an object by 6 months of age should be referred to a vision specialist. It is important to begin treatment of common eye problems such as misaligned or "crossed" eyes as early as possible, since this affects the visual input he or she is receiving.

Visual behaviors to observe:

Has my baby become proficient in visually following objects and people? Is my baby using vision when interacting with people and objects? Is my infant able to consistently focus both eyes together on an object?* Does my infant visually track or follow movement presented horizontally at various distances and in various planes or locations?*

What can I do?

- ✓ It is important to continue providing opportunities for your infant to visually attend and follow the movement of objects and people in the environment.
- ✓ Continue to play "tracking" games by moving yourself and interesting objects back and forth. As your infant becomes proficient in tracking objects 8-12 inches away, begin trying larger distances, different types of objects, and tracking with the infant placed in different positions.
- ✓ An infant's vision will develop with little or no help, according to most experts. But exposing the infant to a variety of interesting sights and talking to him about what he or she sees are ways that parents can make the most of an infant's developing visual skills. Television shows are not the best choice, however, since they often "cut" quickly from scene to scene, or "pan" faster than an infant can follow, and may be over-stimulating or even upsetting to infants.
- ✓ Have face-to-face interactions where your baby can observe your expressions.
- ✓ Hold your baby in positions that give the best view of faces, objects, and activities. As your infant begins to move the eyes and rotate the head at the same time, play games that help your infant track or follow objects with his or her eyes.
- ✓ Show your infant what he or she looks like in a mirror. In time, your infant will learn to smile, make sounds and recognize that what he or she is seeing is a self-reflection.

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Questions to ask yourself:

What does my infant enjoy looking at?

What movement have I observed my infant follow with his or her eyes?

What can my infant hear?

By three months of age, a baby's brain can distinguish several hundred spoken words; many more than are present in his native language. The brain organizes itself around those words heard most frequently and begins to create an auditory map to process language efficiently. There is no research at this point that indicates that one kind of music or another promotes early brain development. What is important is that the baby responds positively to whatever music is played.

Auditory behaviors to observe:

Does my infant appear to enjoy listening to language, music, and other sounds from nature?

What can I do?

- ✓ Don't feel silly talking to a tiny baby. Talking to babies about what they are seeing and experiencing promotes language development.
- ✓ Music can have a soothing effect. Try singing or playing lullabies and songs that repeat patterns and rhythms. Try dancing to music.
- ✓ Try various styles of music and determine if your infant likes a particular type. Keep the volume moderate to low to avoid too much stimulation.

Questions to ask yourself:

How much of what you say do you think your infant really understands?

What aspects of language do you think your infant is attending to?

The rhythm or the tone?

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What can my infant sense (taste, touch, and motion)?

There is not much clinical evidence about the degree to which an infant's sense of taste and smell are maturing. We do know, however, that an infant responds favorable to gentle motion. Swings provide soothing movement that many infants love. Too much time in a swing, however, limits an infant's experience of movement to only one direction: back and forth. It might also limit the experience of being held, talked to, played with, and touched. Prolonged movement should be avoided during sleep periods. Movement/vibration during sleep, such as a moving swing or stroller, "forces the brain into a lighter sleep state" and makes such sleep less restful.

Sensory behaviors to observe:

Does my infant appear to enjoy various textures? Does my infant appear to enjoy motion? What kind of motion?

What can I do?

- ✓ To stimulate other senses you can use a light touch on the infant's skin using fabrics and materials with different textures. Try materials like tissue, felt, or fur. If the infant dislikes any of these, stop the activity.
- ✓ Rather than use a swing for hours, you may achieve the same calming effect by walking with your infant in your arms or rocking him or her when possible. Some infants enjoy the closeness of being near to your body in a sling or front pack.

Questions to ask yourself:

Have I observed any indication that my infant can smell?

If offered different substances to smell, is there any reaction?

What is the infant's reaction?

What social and emotional skills does my infant have?

The part of your baby's brain that will eventually help him or her to manage and control emotions is undergoing a growth spurt. The infant begins to enjoy socializing with others and has a strong interest in looking at human faces. Experts believe that facial and other cues help the infant connect with the world around him or her and make important emotional attachments to caring adults, especially the parents. The infant learns that his or her actions, such as smiling and cooing or crying and fussing, bring emotional reactions from the adults around him.

In another area of emotional development, the infant is beginning to learn some internal controls, such as how to handle the normal distress and excitement that comes from such daily routines as bath-time, playtime, and feeding. The experiences he or she has with you every day will help the infant begin to develop other emotions in the next few months, including feelings of happiness, sadness, excitement, and fearfulness.

Social behaviors to observe:

Does my infant smile spontaneously to human contact, smile in play, and smile at self in the mirror?
Can my infant be consoled, indicated by ceasing crying and calming when comforted by an adult?
Can my infant produce different cries for different reasons?

What can I do?

- ✓ Respond to your infant during periods when he or she is feeling alert and social.
- ✓ Return the infant's desire for eye contact. Respond to his or her smiles and cooing noises.
- ✓ Observe your infant and try to "read" the signals he or she is sending you.
- ✓ Recognize that your baby may physically and emotionally tire of one activity. Stop and change activities, giving the infant a chance to re-engage when ready.
- ✓ Offer the infant a change in scenery, even if it is only in another corner of the room or another place in your home.
- ✓ You help your infant's emotional control when you help him or her calm down during periods of excitement, frustration, or distress.
- ✓ Remember that all behavior has meaning. Asking yourself, "what is my baby trying to tell me?" will help you decide how to respond in sensitive ways.
- ✓ Use a soft voice and smile. Soft music and sounds or lullabies can help, too, as well as gentle rocking.
- ✓ Try softly stoking your infant's arms. Hold and sway your infant from side to side. Try swaddling your infant in a blanket or carrying him or her in a sling or front pack.

Questions to ask yourself:

Is my infant beginning to communicate emotions?

What types of emotions am I able to distinguish?

How does my infant communicate those emotions?

What cognitive skills does my infant have?

At this stage, your infant enjoys living in a predicable world that has some order to it. Because he or she is able to sleep for longer periods of time and can go longer between feedings, the infant is establishing a new schedule for eating, sleeping, and experiencing the world. The infant's developing mental abilities are helping organize what he or she sees, hears, smells, touches, and tastes. The infant will appear more alert. In comfortable and secure surroundings, he or she will be especially responsive to people, objects, and new experiences. The infant will examine things closely, begin to use muscles better and think about reaching for things.

Play takes many forms for 2-6 month-old infants. During this age period they will explore objects by mouthing everything they can place their hands on. It is important to make sure toys are clean and that items they might choke on are kept out of reach. Infants play by repeating their actions, such as dropping an object or swatting at the mobile over and over again. This is call *assimilation*. The infants

enjoy literally "practicing" behaviors by doing them over and over again. They are beginning to realize that their actions have an effect on the people and objects in their environment.

Cognitive skills to observe:

Is my infant beginning to develop more precise imitation skills, such as facial movements and speech sounds? Does my infant secure an object that is partially hidden with a cloth? Does my infant appear to enjoy repeating behaviors with objects?

What can I do?

- ✓ Help your infant make sense of his or her world by being predictable. Set up schedules that include regular feedings and naps. Create routines for daily activities at mealtime, bedtime, bath time and diapering.
- ✓ Light and sound may affect the brain's sleep centers, so provide a dark, quiet sleep area. A moderate temperature is preferred, since this may also influence the brain's sleep centers.
- ✓ It is important to watch for signals that the infant is ready to sleep- over stimulated infants have a difficult time calming down to rest.
- ✓ Infants should be put to sleep on their back and not on their stomach. The stomach position has been associated with increased occurrences of SIDS (Sudden Infant Death Syndrome).
- ✓ Give your infant a sense of order by repeating the steps in a sequence when you play. Fore sample, games such as peek-a-boo help him or her to anticipate and to predict what will happen next.
- ✓ Use routine activities such as a diaper changes, as a time to "play"- count toes, tickle, and play with hands.
- ✓ Smile a lot. Stick out your tongue and see if your infant will copy your tongue movements. Talk a lot, raise your eyebrows, and be expressive!
- ✓ Introduce toys, allowing time for your infant to get to know each one. Introduce them one at a time. Wait a few days before you introduce another one.
- ✓ Let your infant explore different colors, textures, and sizes of safe objects and watch to see what he or she likes.
- ✓ The loss of predictability or the absence of patterns can be stressful. Know when to ease up or stop a new activity and return to the patterns that make him or her comfortable instead of tense and unhappy.

Questions to ask yourself:

What are the *assimilation* behaviors, or behaviors that my infant appears doing over and over again?

Has my infant developed routines?

What communication skills can I expect?

Experts believe that infants have an easier time than adults in learning language. The 2-6 month period is a prime time for language learning. At first, infants are capable of hearing the sounds of many different languages. If they are not used, the connections in the brain for sounds of others languages become weaker while the connections for the language they are hearing grow stronger. Babbling sounds usually appear at the end of the third month. Those "ooohs" and "ahhhs" are called cooing. When the infant adds consonants to these vowel sounds, he or she will choose "p", "b", and "m" most frequently. The amount of time an infant spends babbling increases each month. Soon, the cooing sounds like syllables strung together. These along with other baby sounds like gurgles and laughing aloud, are the beginnings of the first words, phrases, and sentences. The infant will be listening more intently to sounds. Grunts, growls, and complaints will express displeasure.

Communication skills to observe:

Is my infant beginning to understand some language? Is my infant demonstrating interactive and communication behaviors in social turn-taking games? Is my infant developing vocal behaviors for use in communicative exchanges?

What can I do?

- ✓ An infant becomes very interactive from 2 to 6 months. They use smiling and cooing behaviors as social and communication skills in interacting with their parents. The infant demonstrates enjoyment with babbling, including "ooohs" and aaahs" and progressing to P's (pa-pa), M's (ma-ma), B's (ba-ba), and D's (da-da). The infant enjoys interactive games with the parent that involves turn-taking with babbling. The infant babbles and then pauses, waiting for the adult to respond. The infant also loves to imitate, which helps them learn new skills. For example, mom sticks out her tongue, baby imitates and mom does it again. This early turn-taking teaches the young child back and forth response patterns, laying the foundation for later conversation skills.
- ✓ Spend time just interacting with your young infant. Play games where you imitate the infants cooing, pause, and encourage your infant to coo back to you.
- ✓ Practice turn-taking with smiling behaviors, facial expressions, and vocal sounds such as clicking your tongue, smacking your lips, etc.
- ✓ Engage in back-and forth interactions with gestures. For example, hold out an interesting object, encourage your baby to reach for it and then signal her to give it back. Keep each game going as long as your baby seems to enjoy it.
- ✓ When your baby babbles, babble back, imitating the infant's sounds. You may also use normalized language patterns on some turns. Pretend you understand what the infant is saying,

and that the infant understands what you are saying. These early conversations will teach the infant hundreds of words before they can actually speak any of them.

- ✓ Play word games with your infant, such as pat-a-cake or rhyming games. Give her or her chances to join with you and make sounds together.
- ✓ Sing songs.
- ✓ Read simple books to your infant.
- ✓ Don't use television as your substitute to stimulate language. Language within an interactive relationship is the critical aspect of language learning, not just listening to language.
- ✓ Show your delight with your infant's squeals, giggles, chortles and gurgles.

Questions to ask yourself:

How do you and your baby enjoy communicating with each other?

What do you say or do, that gets the biggest reaction from your infant?

How much time do you have to interact with your infant, read stories, and "talk"?

How much motor coordination should I expect from my infant?

During the 2-6 month period, you will see tremendous physical development. Your infant's deliberate movements replace the automatic reflex movements of a newborn. The infant's gross motor movements (large muscles) are developing in strength and in coordination. The infant kicks actively and eventually rolls over from back to tummy. The infant is preparing to creep and to crawl.

Head control develops first. At two months, the infant struggles to raise his or her head and shoulders off the mattress. By five months, the infant increasingly controls the muscles in the trunk and lower back. The infant can sit propped up in a chair and balance himself/herself. The infant eventually stands up with help.

Movement skills to observe:

Is my infant developing greater control over his/her body evidenced by increased head control, rolling and sitting with assistance?

What can I do?

- ✓ Your infant will benefit from many opportunities to safely move around and use his or her muscles. Play with your infant on the floor so that he or she gets plenty of exercise and interaction with you.
- ✓ If you are in the habit of exercising, or "working out", yourself include your infant. Have your infant lie on the floor and watch you. Periodically help your infant "exercise", while simultaneously talking and interacting with your infant.
- ✓ Offer toys to your infant. Periodically place the toys out of your infants reach. Observe your infant's response.
- ✓ Help your infant sit by providing support. Do the same thing for the crawling and standing position.

Questions to ask yourself:

How does my infant try to get at toys out of reach?

Is my infant an active infant that enjoys trying to move around?

What can my infant do with his or her hands?

Babies this age love to explore. They learn from looking at, holding and putting their mouths on different objects. The infant's small muscles are developing. At three months, the infant fingers his toys and plays with his fingers. He brings objects to his mouth. The infant eventually holds objects more securely, using the thumb. With a deliberate reach, the infant can now secure, grab, hold, and transfer a toy from one hand to another. The movements of the muscles that control sucking and swallowing become more coordinated as well.

Hand skills to observe:

Does my infant bring hands together at midline, demonstrate exploratory behaviors with object, begins reaching for objects, and repeats arm movements to keep a toy activated, keep mom singing, or other causal event.

What can I do?

- ✓ Introduce one toy at a time so your baby can focus on, and explore, each one. Good choices include a small rattle with a handle, a rubber ring, a soft doll and a book with pictures.
- ✓ Lay your baby on his or her back and hold brightly colored toys over your infant's chest within reach. Your infant will love reaching up and pulling them close. You will start to see what most interests your infant.
- ✓ Hang a mobile three or four inches in diameter for your infant to see, reach for, and touch lightly with his or her hands.
- ✓ As your infant reaches six months, try giving him or her some solid foods from a spoon. It is important that infants get their solids from a spoon rather than through a bottle in order to practice this emerging skill. Allow plenty of practice before you expect him or her to master this

skill. Infants need to learn to thrust their tongue less and swallow in rhythm to the food intake. This can initially cause gagging and spitting up.

Questions to ask yourself:

What kind of toys or objects does your baby seem most interested in reaching for? How do you know?

What toys or objects does my infant enjoy manipulating?

What specific hand/finger and/or mouth behaviors is my infant using in the exploration?

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6 to 9 months

Unique Characteristics of Infants from 6 to 9 months:

Between the ages of 6-9 months the infant demonstrates rapid development, encompassing all areas of functioning. You will notice big strides in receptive language, motor development, learning and social relatedness. The infants' brains at this age are forming huge numbers of connections that allow for the rapid development. Your infant's head will grow relatively quickly compared with the rest of the body. Inside the skill, the infant is forming billions of connections with other cells within the brain and elsewhere in the body. Scientists explain that this process of making connections is key to an infant's development: physical, intellectual, emotional, and social.

With increasing physical coordination and the ability to sit for periods of time, your infant is no longer quite so dependent on others. The infant begins to see himself or herself as separate and distinct from others. The infant's curiosity and increasing mobility make it necessary that close supervision be provided as the infant explores the world around. Scientists are convinced that an infant's brain is not a tiny adult brain ready to grow in size. Although it has certain inherited characteristics, every infant's brain is influenced by the range of experiences provided in the home. Not all parts of the brain develop at the same time. As a result infants do not grow in a smooth or steady fashion or on exact timetables. Child development experts watch for skills and abilities to appear within an overall time frame, not at a precise time. Moreover, some sections of an infant's brain and the skills associated with them develop later in infancy or during childhood and adolescence.

As the infant matures, experts believe everyday experiences affect what happens inside the infant's head. Parents who see that their infant's life is filled with love, attention and interesting experiences provide a context for learning and development.

What should my infant be able to do at 6 months of age?

- Infants utilize gestures, sounds, and facial expressions in interactive turn-taking and to communicate feelings including:
  - Consistently imitating babbling sounds in turn-taking.
  - Imitating familiar words in turn-taking.
  - Smiles and laughs during turn-taking
  - Participates in games
  - Demonstrates anticipation of play activity.

- Infant demonstrates emerging expressive language skills including:
  - Vocalizes four different syllables.
  - Vocalizes a two-syllable combination.
  - Vocalizes in response to objects that move.
  - Imitates duplicated syllables.
  - Sings along with a familiar song.
  - Uses gesture and vocalizations to protest.
  - Shouts or vocalizes to gain attention.
- Infant demonstrates emerging receptive language skills including:
  - Responding to a request to "come here"

- Stops when name is called.
- Maintains attention to speaker.
- Responds with gesture to "come up" or "want up".
- Waves in response to "bye-bye".

- Infants imitate the behaviors initiated by the parent including:
  - Plays peek-a-boo
  - Smiling and laughing during turn-taking
  - Attempting to name pictures and objects
- Infants use toys in more complex ways.
- Infants visually attend to an object for 5 seconds.
- Infants follow an auditory stimulus
- Infants roll over both ways
- Infants bear body weight on forearms in prone position.
- Infants scoot, crawl, and may stand.
- Infants sit supported, head steady.
- Infants demonstrate emerging fine motor and problem solving skills such as:
  - Securing an object that is hidden under a single screen such as a piece of cloth or newspaper.
  - Dropping or throwing objects with no visual monitoring of action.
  - Using complex motor schemes such as sliding objects, crumpling paper, swinging objects, tearing, etc.

What can my infant sense?

Infants rely on all their senses to learn about their world. They rely heavily on vision and hearing, but they also use touch, smell, and taste to gather information. The infant learns about the world by using all of the senses and by actively exploring the people and object in the environment. Banging, dropping, poking, tasting, and smelling provided plenty of stimulation to the developing brain. You will notice that your infant still likes to repeat actions with objects (assimilation) over and over again. As your infant gains experiences in watching the performance of these repeated behaviors, great eye-hand coordination will develop.

By the seventh month, the part of your infant's brain that controls vision enables him or her to see as well as a teenager. The infant is visually alert almost half of the waking hours. The infant can use his or her eyes to follow objects at many distances and speeds. The part of the brain that controls hearing is fairly well developed, and the infant is leaning to tell the source of the sounds heard. He or she is very interested in human voices and can pay close attention to them when the environment is not too noisy.

Sensory behaviors to observe:

1. Can my infant visually attend to an object for 5 seconds or more? What kind of object holds my infant's interest?
2. Does my infant follow an auditory stimulus? What sounds hold my infants attention?

What can I do?

- ✓ Baby-proof your home now that the infant has increased dexterity, mobility, and curiosity.
- ✓ Use crib exercisers that encourage the infant to push, full, press, and move working parts.
- ✓ Give the infant noise-making toys, including bells, music boxes, and rattles.

- ✓ Select hard and soft toys of different textures.
- ✓ Avoid choking hazards by putting out of reach any toys or objects that are smaller than 1 inch in any dimension.

Questions to ask yourself:

What exploratory behaviors you have observed your infant perform?

Does your infant "watch" when using his or her hands to manipulate objects?

Does your infant enjoy making sounds with objects by banging or activating the toy?

What social and emotional skills does my infant have?

Your infant's personality is blossoming. He or she is developing ideas about who he or she is, who cares about him or her, and who is a stronger. The infant expresses positive and negative feelings and enjoys being with people who love him or her. The infant imitates the facial expressions of others. With this new sense of identity, the infant communicates when he or she needs help and may even shout for attention. The infant knows the difference between adults and children and is playful with friendly children and smiles and reaches out to them.

During this phase attachments to parents and loved ones deepen as the infant develops a powerful bond with the most significant persons in his or her life. This attachment may brain on "separation protest" when mom or dad leave. At the same time, the infant becomes wary and/or fearful of strangers. This behavior indicates a maturation of the brain's memory center.

Your infant is unique in terms of emotional "tone" or temperament. You are now able to recognize and generally predict the way in which the infant will react to new faces or changes in routines, such as bath or bedtime. This allows the parent to better prepare the infant and respond to those preferences.

Social behaviors to observe:

1. Does my infant utilize gestures, sounds, and facial expressions in interactive turn-taking and to communicate feelings?
2. Does my infant's attempts to communicate with me include imitating babbling sounds in turn-taking? Imitating familiar words in turn-taking? Smiling and laughing during turn-taking? Participating in games?
3. Does my infant demonstrated anticipation of play activity? How?

What can I do?

- ✓ Be warm, affectionate, and consistent. Hugs, kisses, skin-to-skin and body-to-body contact help the infant feel secure.
- ✓ Give the infant toys that are safe to grab, bite, chew, throw, or drop. Balls and stacking cylinders are good choices. Stuffed animals are comforting.
- ✓ Play hide and seek, go-an-fetch, and seek-a-boo games. These help the infant learn that people and objects disappear and return.
- ✓ Be playful and make faces while you gaze in a mirror together.

- ✓ Call your infant by name from across the room and laugh, smile and wave to let him or her know you are near.
- ✓ Give your infant the chance to be in the company of other children.
- ✓ Let your infant entertain you. Clap when he or she performs and encourage your infant to repeat the performance.
- ✓ Help your infant get to know other loving adults so he or she can practice separating for short periods of time. This helps your infant learn that people leave and return.

Questions to ask yourself:

How would I describe my infant's temperament? Is my infant an "easy to please" baby or a fussy baby?

How do I know my baby feels emotionally secure?

What cognitive skills does my infant have?

Just when you think that everything is finally going according to schedule, your infant's needs change. Suddenly, you must reorganize everyday routines and establish new patterns for your infant. Your infant can concentrate for longer periods of time and attend to more details. Your infant's memory is keener and he or she expects events to be repeated such as feedings, diaper changes, and naptime. At first your infant only remembers what happened in the immediate past. Soon, however, the infant recalls events observed at an earlier time, even if he or she is not the center of the action. In time you will notice that the infant imitates people or actions seen or remembered from an earlier time.

Your infant also begins to connect causes with effects. Seeing a toy might make the infant smile and wriggle because he or she associates it with playtime. The infant's diapering schedule is changing because the infant stays dry for one or two hours. The infant's sleep patterns may also change. Many infants have trouble going to sleep during this phase. They are so excited by the new world they are discovering that they may protest being put down for a nap or going to sleep at the usual time at night. The infant may also wake up more frequently during the night, wanting familiar caregiver to play. Parents can respond to these sleep changes by encouraging their infants to go back to sleep on their own.

Cognitive skills to observe:

1. Does my infant imitate the behaviors initiated by me including playing peek-a-boo, smiling and laughing during turn-taking and attempting to name pictures and objects?
2. Is my infant beginning to use toys in more complex ways? What are some examples?
3. Can my infant visually attend to an object for 5 seconds or more? What kind of object holds my infant's interest?

What can I do?

- ✓ Adjust your infant's schedule as he or she changes. Be flexible but opt for an orderly lifestyle with routines, consistency, and clear patters at each new stage.
- ✓ Make mealtimes, playtime, and bath-times a regular time for talking, singing, and socializing. Try not to hurry through these activities, as they constitute very important experience for your infant.

- ✓ Repeat favorite games, words, songs, sounds and actions until your infant tires of them. Play "so-big" games, "bye-bye", ball, and building games.
- ✓ Read aloud to your infant from books, magazines, cereal boxes, signs, and words found throughout your home and community. Don't be surprised if your baby wants to read the same book over and over again – repetition is important for learning.
- ✓ Encourage your infant to sleep for longer and longer periods at night. Help your infant comfort himself or herself with a favorite object, blanket, or pacifier. Soft music may also be beneficial.

Questions to ask yourself:

Have I observed that my infant can "remember" things? What are the actions, items, or people my infant seems to remember? What behaviors did my infant perform that led me to believe he or she "remembered".

What communication skills can I expect?

Your infant uses the syllables *ma, mu, da, di* and *ba* often and with use they become easier to understand. Your infant soon groups up to four or more syllables together. Vowels and consonants are uttered randomly at first and sounds may come out in one breath. During the seventh month, your infant says "dada" or "mama". Your infant has great fun imitating sounds or sounds in sequence using various sounds and inflections. Your infant's first words (mommy, daddy, bye-bye, ball, cookie) appear around eight months, a time when your infant shows that he or she understands simple instructions. The infant now associates sounds with objects such as "choo-choo" for the word "train". The infant imitates coughing or tongue clicks as well as other sounds in the environment. He or she will use sounds to emphasize feelings or responses. Singing tones fascinate the infant. Some infants begin to carry out simple commands by nine months, such as retrieving a familiar object.

At birth, infants can perceive many more speech sounds than adults – too many, in fact. The more you talk to infants, the better they become at focusing only on the sounds of their native language because the experience of hearing speech sounds strengthens some neural pathways at the expense of others. Between six and twelve months infants begin to lose some ability to detect differences in the speech sounds of a foreign language, but at the same time they become better at detecting the sounds of their native language.

Before six moths, infants can recognize familiar words, but will understand few of them. The link between sound and meaning begins in the second six months, perhaps reflecting early maturation of language areas in the brain.

Communication skills to observe:

1. Is my infant developing emerging expressive language skills including: vocalizing four different syllables, a two-syllable combination, and vocalizing in response to objects that move.
2. Does my infant imitate duplicated syllables?
3. Does my infant sing along with a familiar song, use gestures and vocalizations to protest and shouts or vocalizes to gain attention?
4. Is my infant developing emerging receptive language skills including: responding to a request to "come here", stopping when name is called, maintaining attention to speaker and responding with gesture to "come up" or "want up".
5. Does my infant wave in response to "bye-bye"?

What can I do?

- ✓ Talk and sing to your baby during feeding, bathing, and dressing. Describe what you are doing and seeing during play, walks, and car trips. Experts believe that the high-pitched sing-song speech known as "parentese" is a useful way to help infants develop the basic building blocks of speech.
- ✓ Talk with your child face to face. Show interest by imitating the sounds he or she makes.
- ✓ Read aloud to your infant every day. Your library and bookstore have guides to best books at different ages. In addition, your pediatrician may participate in a program called "Reach Out and Read" (http:// www.reachoutandread.org).
- ✓ If you wish to expose your infant to a foreign langue, begin early and do so regularly.
- ✓ Encourage your infant to play with books, especially books made of thick cardboard or cloth that your infant can touch, mouth, or pat. Your infant will enjoy looking at bright colors, familiar objects (like balls or bottles), and other babies.
- ✓ Spend time naming objects for your infant. Name objects used in play, looked at in books, and objects seen outdoors. Use the name of the objects in simple sentences.

Questions to ask yourself:

How do you and your baby enjoy communicating with each other?

What do you say or do, that gets the biggest reaction from your infant?

How much time do you have to interact with your infant, read stories, and "talk"?

Make a list of all of the sounds and sound combinations that your infant says/

How much motor coordination should I expect from my infant?

The progression of motor development during this period is influenced by your infant's developing brain. When infants are born, the areas of the brain that will eventually control and coordinate voluntary movements are not yet well developed. These motor areas of the brain mature in a head-to-toe progression, meaning that brain areas controlling movement of the head and neck muscles mature before those controlling arm and trunk muscles, which in turn mature more rapidly than areas controlling the legs. This progression begins at birth, and by 6-12 months, has reached the areas controlling trunk and leg muscles, which are critical to most of the gross motor milestones of this period.

The cortex of your infant's brain is making connections with distant parts of the body. Gradually, the newborn's uncontrolled jerkiness and early reflex actions give way to motor control. Not all muscle groups, however, will develop at the same time. Your infant will move through stages from sitting to walking. At each point, the infant's brain systematically refines the circuits for particular movements from reaching to running. Your infant learns about the world my moving around in it. You will be able to mark the infant's progress from creeping, twisting, rolling and crawling, to walking semi-independently when guided by an adult's hand. Locomotion helps the infant change form being an observer most of the time to becoming an infant acting on the environment. Towards the end of this

phase, the infant might stand briefly with or without help. Cruising along the furniture or moving by making a series of side steps is common, too.

Movement is important for an infant. The more an infant is allowed to practice emerging motor skills, the more fine-tuned the motor circuits in the brain become. Practice and exercise help your infant's movement's progress from awkward and clumsy to skilled and coordinated. Exercise also helps strengthen the trunk and limb muscles that are crucial to these developing gross motor skills, so plenty of opportunity to practice moving about freely should be provided throughout the day.

Movement skills to observe:
1. Does my infant roll over both ways?
2. Does my infant bear body weight on forearms in prone position?
3. Does my infant scoot, crawl, or stand?
4. Does my infant sit when supported, head steady?

What can I do?
- ✓ Before the infant is mobile, provide lots of practice and freedom to exercise the hands, arms, torso and legs by playing on the floor in safe surroundings.
- ✓ Baby-proof the house using safety locks on kitchen cabinets, drawers, and closet doors. Move breakable objects or those that can be toppled out of reach. Put safety plugs in electric sockets. Remove small objects that could cause choking.
- ✓ Supervise stair climbing/crawling.
- ✓ Move in rhythm and dance together to music.

Questions to ask yourself:

Keep a list of the new motor skills your infant is learning.
What motivates your infant to move about in the environment?
What have you done to provide a safe environment in which to allow your child to move about?

What can my infant do with his or her hands?

This phase begins with the accomplishment of simple abilities such as holding a bottle and reaching out clumsily to grab an object to play with, to actually using a pincer grasp to get small items using the thumb and one or two fingers. The infant holds a rattle for several minutes. The infant learns to get objects using the palm and all of the fingers. New skills evolve as the infant clasps hands and bangs objects together. The infant often holds an item in each hand at the same time. With an index finger, the infant points and pokes, hooks, and pulls objects.

Hand skills to observe:
1. Is my infant developing emerging fine motor and problem solving skills such as securing an object that is hidden under a single screen such as a piece of cloth or newspaper?
2. Does my infant like to drop or throw objects?

3. Does my infant use complex motor schemes such as sliding objects, crumpling paper, swinging objects, tearing, etc?
4. What items does your infant like to pick up?

Can your infant retrieve objects placed at a distance?

What can I do?

- ✓ Place an appealing toy just outside your infants reach to encourage your infant to move toward it.
- ✓ Urge your infant to grasp, manipulate, mouth, stack, and shake, bang. Easy to operate pop-up toys will help your infant coordinate eyes movements with hand movements and help connect what he or she does with something that happens. Soft balls, especially balls that wobble when they roll, can attract and hold your infant's interest.
- ✓ Give your infant bath toys that do more than just float so that your infant can be busy with his or her hands pouring water, making a water wheel turn, or squirting water.
- ✓ Allow your infant to begin having finger food.

Questions to ask yourself:

What items does your infant like to pick up?

Can your infant retrieve objects placed at a distance?

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9 to 12 months

Unique Characteristics of Infants from 9 to 12 months:

Between the ages of nine and twelve months, your infant will tell you in many different ways that he or she is growing up and more aware of the world around. The infant continues to collect vast amounts of information through all the senses and uses what is learned to make things happen. You and other loving caregivers help the infant make sense of all the input being received. The infant learns to "read" your words, gestures, and facial expressions. He or she increasingly looks your way and pauses to consider your reactions before doing something. A budding memory and new ability to recall past experiences add a new dimension to your infants functioning.

As the infant's brain increases in size and complexity, it allows the infant greater control over the objects and people in the environment. The frontal cortex of the brain, the areas associated with the ability to regulate and express emotion, think and plan, is showing increasing activity. At the same time, the motor areas of the infant's brain has matured in a head-to-toe sequence and is now sufficiently well developed to enable control over the trunk and arm muscles, to be flowed by control over leg muscles.

Parents and other caregivers must assure that the infant's environment is safe for all the mobility and exploration needs. It's also important to remember that not all of your infant's behaviors at this point are easy to handle. The infant may suddenly become moody or develop sleep problems, as his b rain development enables him to remember that you are gone or that he or she wants someone or something that is no longer there. Remind yourself that this growth often comes in uneven steps. The infant may even seem to regress or stand still in one area of development while moving ahead in another. For example, the infant may seem to be less interested in verbal interaction as he or she is working on pulling to standing or walking. But the excitement of this period of development is apparent to baby and parent alike.

What should my infant be able to do at 12 months of age?

- Infants demonstrate knowledge of people and objects that are not immediately present.
- Infants develop more elaborate social comprehension in interactive turn-taking including:
  - Imitates the name of familiar objects during turn-taking.
  - Covers and uncovers face during peek-a-boo.
  - Show sensitivity to the mood of others.
  - Performs for social attention.
  - Participating in speech routine games.
- Infants demonstrate increased expressive language skills including:
  - Says "mama" or "dada" meaningfully.
  - Imitates consonant and vowel combinations.
  - Imitates non-speech sounds
  - Vocalizes with intent frequently.
  - Uses a word to call a person.
- Infants demonstrate increased receptive language skills including:
  - Giving objects upon verbal request

- Performing a routine activity upon verbal request.
- Looking at familiar objects and people when named.
- Understanding simple questions.
- Identifying two body parts on self.

- Infants perform repeated behaviors with objects (accommodation) to figure out how things work and for building self-confidence. Examples include:
    - Banging blocks and other small toys.
    - Repeatedly throwing or dropping objects to watch the movement
    - Stirring with a spoon in a cup.
    - Banging spoon on inverted cup
- Infants demonstrate emerging problem solving skills such as:
    - Placing objects in the mouth and mouthing
    - Pushing or pulling an adult's hands to have a behavior instigated or repeated.
    - Repeating a behavior (shows off) to maintain adult attention.
    - Turning a mirror over to view the functional side.
    - Turning a photograph or other picture around to view the functional side.
    - Rotating three-dimensional objects to view the functional side.
    - Using a hammer or stick to play a xylophone
- Infants demonstrate more advance fine motor skills including:
    - reaching for and grasping blocks or other small toys.
    - transferring objects from one hand to another.
    - reaching for objects while in a prone position
    - demonstrating a refined grasp with thumb opposition.
- Infants demonstrate improved gross motor skills including:
    - holding on to fingers and pull self to sitting position.
    - standing with hands held, bouncing.

What can my infant sense (taste, touch, and motion)?

Your 9-12 month old infant is investigating what is similar and different about the way things feel, smell, look, sound, and taste. This includes objects- and even people! Infants, of course, have their own preferences for the types and levels of sensory stimulation they prefer and this may vary over time and depend on a variety of factors. Some, infants, in fact, are easily over-stimulated and overwhelmed by too much sensory input and will show this by becoming fussy, looking away, or becoming distracted. Each infant is different in the precise way in which he or she takes in information about the world.

The part of your infant's brain that controls vision enables the infant to see as well as a teenager. The infant is visually alert for half of the waking hours and is increasingly skilled at using the eyes to follow objects at varying distances and speeds. It is not necessary to employ activities such as showing your infant flash cards to stimulate learning. Infants learn best using all of their senses and actively exploring the everyday objects in their environment with people who love them.

Sensory behaviors to observe:

Observe how your infant explores objects through various senses such as taste, smell, listening, and touching.*

Observe the level at which your infant's becomes over stimulated.*

What can I do?

- ✓ Provide objects and toys that have a variety of textures, shapes, sizes, weights, etc.
- ✓ While you play with your infant, label the sensory aspects of the objects being used. For example, use descriptors such as "soft", "hard", "heavy", "rough", and "shiny."
- ✓ Remove objects or change activities when the infant seems over-stimulated or switch to a new location where there are fewer distractions and the choices are more limited.
- ✓ Play different kinds of music to help your infant learn about various sounds. Remember, however, if the sound is too loud, the infant may not be able to hear voices clearly.
- ✓ Imitation games played back and forth are a wonderful and fun way to help your infant explore.

Questions to ask yourself:

What sensory exploration behaviors does my infant seem to enjoy?

Have I been able to detect a preference my infant may have to certain smells, tastes, sounds, or touch?

When does my infant become over-stimulated? What do I do?

What social and emotional skills does my infant have?

At this stage, your infant is capable of demonstrating more varied emotions and moods- both positive and negative. You may see your infant showing affection for specific people and a talent for attracting and keeping the attention of people he or she likes. At the same, time, fear and uneasiness around strangers is common, especially if they come too close. The infant may become upset if the parents leave, to a degree that the infant has not show before. Maturation of memory centers in the brain help the infant distinguish between people he or she knows well and those he or she doesn't know.

As the frontal cortex of the brain increases its activity, the infant is better able to regulate his or her own comfort levels and to sooth him or herself with help from an attachment figure or object. The infant's increasing interest in exploring the world and asserting independence is enabled by the physical development, which allows the infant to move away from and return to, trusted loved ones. Unpleasant situations that would have caused an automatic cry earlier may now result in the infant turning the head or frowning to show disapproval, frustration, or stress.

Many parents find themselves saying "no" for the first time during this period. Suddenly forbidden or treasure items are now within reach of the crawling or walking infant. Trying to child proof your home by visualizing it from the perspective of an exploring infant may help reduce the number of times you have to say "no"

As a parent, you may experience a mixture of excitement, relief, and even loss as your infant moves from being "dependent" on you to being an "independent" one-year old. Recognition of these sometimes conflicting feelings can help you as a parent monitor your reactions to your infant's growth and behavior.

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Social behaviors to observe:

1. Does my infant demonstrate knowledge of people and objects that are not immediately present?
2. Is my infant developing an understanding of the social nature of interactive turn-taking including? I would notice this in my infant's ability to:
    - Imitating the names of familiar objects during turn-taking.
    - Covering and uncovering the face during peek-a-boo.
    - Showing sensitivity to the mood of others.
    - Performing for social attention.
    - Participating in speech routine games.

What can I do?

- ✓ Learn to "read" your infant's signals. Follow the infant's lead. Stick with the activities your infant likes when in a happy mood and interested in the activity. If boredom or stress sets in, stop and try the activity at another time.
- ✓ Acknowledge and label your infant's feelings. "You feel mad when Daddy has to leave you. " "I will see you when you wake up from your nap." Such responses help your infant move from negative to positive states more easily and set the stage for the ability to label emotions.
- ✓ Expect your infant to show more intense expressions of negative emotions and changes in mood. Learn to respond without reacting excessively.
- ✓ Be calm and non-punitive as you begin to teach your infant what behavior is acceptable and not acceptable.
- ✓ It is hard for infants this age to "not" do something they want to do. It is easier for them to "do" something that is suggested. So, instead of only saying what they shouldn't do, emphasize what they should do. Instead of just saying, "don't throw the blocks," say "blocks are for building. Let's build with the blocks."
- ✓ Always be ready with reassuring help and comfort as your child explores and learns. You are the "secure base" for your child.
- ✓ Don't forget that your infant is unique; not exactly like any other infant. Your responses must be individualized to his or her needs.

Questions to ask yourself:

1. Do I say "no" to my infant a lot during the day? What causes me to have to say "no"?

2. Can I childproof my house better so I don't have to say "no" so many times?

3. What are the situations that cause my infant stress? How do I console my infant?

What cognitive skills does my infant have?

At this stage, your infant's schedule will undoubtedly need some adjusting as development proceeds. It is useful to establish basic routines upon which your infant can rely. Memory is more developed now and your infant expects that events such as meals, diaper changes, and naps will be repeated. You will also notice that your infant repeats actions while playing. Whether the infant is learning to move from

place to place or is doing something with his or her hands, the infant will need to practice these new skills.

Play takes many forms for your infant at this age. Watch as your infant points, pokes, touches, pries, and even mouths objects or toys over and over again. Your infant will begin "accommodating" more often when you are playing with him or her. Accommodation means that the infant will imitate your actions with an object. If the infant likes to repeatedly bang blocks on the table and you model putting a block in the cup, your infant will "accommodate" or change his or her behavior and do what you did. This will occur once or twice, and then the infant will go back to assimilating the previous behavior, banging the block on the table.

Stairs become increasingly interesting and your infant will want to climb them over and over again or cruise around the crib many times. Repetition and imitation are forms of learning by "doing." They help the infant understand the characteristics of objects, and personal abilities and limitations. Reason requires repetition for the brain to select the most efficient neural pathways for processing information. The infant may appear to "tune you out" at times. Rather than engage in the prolonged social interactive games that you are familiar with, the objects in the infant's environment, and the actions the infant can perform with those objects, may take center stage. Don't be alarmed. This is perfectly natural. Eventually the infant will incorporate these new behaviors with objects into the old, familiar social interactions.

Cognitive skills to observe:
Is my infant performing repeated behaviors with objects (accommodation) to figure out how things work and for building self-confidence?
Is my infant demonstrating emerging problem solving skills such as mouthing objects, pushing or pulling an adult's hands to have a behavior instigated or repeated, or repeating a behavior (shows off) to maintain adult attention?

Does my infant perform exploratory behaviors such as turning a mirror over to view the functional side or turning a photograph or other picture around to view the functional side, rotating three-dimensional objects to view the functional side, or using a hammer or stick to play a xylophone?

What can I do?

- ✓ Talk to your infant about what has just happened or is about to happen. For example, say, "After you finish your cracker, we'll change your diaper."
- ✓ Offer your baby lots of opportunities to have "hands-on" contact with many objects in the environment. This is a primary means of learning.
- ✓ Playing games that expand the infant's memory such as covering and uncovering toys the infant has seen you hide, playing peek-a-boo, etc.
- ✓ Encourage your infant to imitate you. Take turns and periodically imitate your infant's behavior. If your infant is performing a favorite behavior with an object, such as mouthing a rattle, show the infant how to shake the rattle. Encourage you infant to imitate you. Your infant will soon "accommodate" by doing what you want, but will then go back to "assimilating" or practicing

the old behavior. But with enough practice at imitating you, your infant will begin practicing (assimilating) the new behavior.

- ✓ Examples of behaviors you can use for accommodation include.
  - Banging blocks and other small toys.
  - Repeatedly throwing or dropping objects to watch the movement
  - Stirring with a spoon in a cup, sipping from the cup, banging the cup.
  - Banging a spoon on an inverted cup, banging the spoon on the table, hiding the spoon under a cloth.
  - Kissing a doll, hugging a doll, feeding a doll.
- ✓ Remember that what you may think of as a routine task, such as feeding, is for the infant a new learning opportunity each day. Slow down and try to take advantage of the social and learning aspects of these "mundane" events.
- ✓ Take time to play with your child every day. Remember to name objects and use language during all of your play sessions.

Questions to ask yourself:

What are the behaviors I have been able to get my infant to imitate?

What were the previous behaviors the infant was practicing?

What games or toys does my infant prefer?

What communication skills can I expect?

This is the stage of development where you will see your infant demonstrate an intense or prolonged attention to speech. The infant will learn to give toys to the parent upon request, look at objects that are named, and learn to understand simple commands or requests. Your infant will begin to make appropriate verbal responses to some requests such as saying "bye-bye". You will also observe your infant using gestures, changes in postures and visual fixation to make want known.

You will also observe your infant vocalizing to toys and people throughout the day, using long verbal patterns. Although you may not recognize the sounds your infant makes, they are the building blocks for meaningful language that will come later. When your infant strings sounds together you may actually hear the "melody" of your own language or of another language that your infant hears frequently. Respond to your infant and encourage your infant to respond back. Your verbal interactions with your infant help begin the process of the infant's learning to understand and replicate the connections between sounds and words.

Communication skills to observe:
Is my infant developing increased expressive language skills including:

- ➢ Can my infant say "mama" or "dada" meaningfully?
- ➢ Can my infant imitate consonant and vowel combinations?
- ➢ Can my infant imitate non-speech sounds?

- Can my infant vocalize with intent frequently?
- Can my infant use a word to call a person?
-

Is my infant developing increased receptive language skills including:

- Giving objects upon verbal request?
- Performing a routine activity upon verbal request?
- Looking at familiar objects and people when named?
- Understanding simple questions?
- Identifying two body parts on self?

What can I do?

- ✓ Reward your infant's attempts to communicate. Ask your infant questions even if he or she will not answer you. Smile at your infant when he or she responds with sounds, gestures and facial expressions.
- ✓ Sing to your infant and play songs that are repetitive.
- ✓ Play games where you give the infant a simple command to "give me the doll" or "truck" or "car". Try other commands such as "give the baby a kiss" or "roll the ball". You may want to prompt your child by helping him or her perform the skill.
- ✓ Spend time looking at children's books and reading. Name the pictures and the actions that are occurring. Try to be animated, and make the activity "fun".
- ✓ Use exclamations, and encourage your infant to imitate exclamations such as "oh-oh".
- ✓ Play verbal turn-taking games where you repeat the same word, or sound patterns, over and over again. Change the word or sound patterns periodically and then practice the new word.
- ✓ Name objects in the child environment including people, pets, toys, and furniture.
- ✓ Play verbal games such as "pat-a-cake", "peek-a-boo," and "so-big."
- ✓ Keep the environment generally free from lots of background noise so that your infant can clearly hear the language being used in the home.

Questions to ask yourself.

What are some of the words you think your child is saying?

What time of the day, or during which activities, does your child seem to do the most talking?

What verbal games does your child enjoy?

How much time do you have to interact with your infant, read stories, and "talk"?

How much motor coordination should I expect from my infant?

Your infant is learning to explore the world with a growing sense of independence. Physically, the infant is dramatically increasing control over the large muscles as the cortex of the brain is making connections with distant parts of the body. This has enabled the infant to sit up independently, probably crawl, and learn to pull up and stand without help. Later in this stage, the infant may spend many hours cruising around the crib or around a room. The infant does this by holding on to railings, furniture, and objects. Stair climbing may be a favorite activity at this age.

Walking may begin as the infant gains more control over balance and gravity. This maturation is motor development comes about as the result of motor pathways in the brain, brain stem, and spinal cord becoming better able to control and coordinate the movements necessary for sitting, crawling, and walking.

Movement skills to observe:

Is my Infant's developing improved gross motor skills including:

- holding on to fingers and pulling self to sitting position?
- standing with hands held, bouncing?
- Cruising around furniture?

What can I do?

- ✓ The most important rule is to provide a safe environment for your infant in which to move around and explore. Child proof your home's hanging lamps and curtain cords, electrical outlets, windows, and closets or cabinets that contain cleaning solutions and other chemicals. Use gates to keep your infant away from stairs and other hazards. Chick wiring from appliances that the infant might trip over or pull on. Install devices to keep the toilet seats closed or always keep bathroom doors closed. Turn pot handles on the stove away from the front of the stove where the infant could pull them off. Be careful not to put cups of hot liquids on low tables that the infant can now pull up on, and reach. It's also a good idea to remove all breakables from low shelves, coffee tables, and surfaces.
- ✓ Play games that involve both large and small muscles, such as inserting small blocks into containers, unwrapping paper from a cardboard box, and rubbing together things with different textures.
- ✓ Play with your infant on the floor as much as possible. Make a big deal over the infant's accomplishments by clapping and cheering. This will increase your infant's interest level and enthusiasm for moving about.
- ✓ Forego infant walkers. They don't allow babies to see their feet or to develop their own sense of balance. They can also be dangerous.

Questions to ask yourself:

Does my infant enjoy large muscle activities?

Does my infant get enough exercise?

Is my house conducive to allowing my infant to physically move around independently?

What can my infant do with his or her hands?

The infant's small or fine muscles are developing rapidly. The infant is becoming better able to grip small items between the forefinger and thumb (pincher grasp). The infant's ability to grasp with the

whole hand and release objects improves during this stage. Your infant can now begin to feed himself or herself finger foods, hold the bottle, and grasp a cup handle.

Hand skills to observe:

Is my infant developing more advance fine motor skills including:

- reaching for and grasping blocks or other small toys?
- transferring objects from one hand to another?
- reaching for objects while in a prone position?
- demonstrating a refined grasp with thumb opposition?
-

What can I do?

- ✓ Put fun toys inside large boxes to encourage infants to stretch, reach, and crawl towards and into safe places.
- ✓ Give your infant sturdy and unbreakable child-sized cups, mugs, and dishes to grasp and manipulate.
- ✓ Balls are excellent toys, especially those made of a soft material that won't shred or tear into small pieces.
- ✓ Use a variety of small, miniature toys that your infant can play with. Make sure they are large enough such that your infant won't choke on them if he or she places them in the mouth.
- ✓ Play games where you continuously hand toys to your infant, such as 1-inch cubes. Observe y our infant's behavior. Does your infant try to transfer objects from one hand to the other? Set one block down to retrieve another?

Questions to ask yourself:

What toys does my infant like to play with?

Can my infant pick up small objects, such as a raison?

Can my infant transfer objects from one hand to the other?

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12 to 18 months

Unique Characteristics of Toddlers from 12 to 18 months:

During the period from 12 months to 18 months, your infant will begin moving about the environment independently, thus earning your infant the title of a "toddler". This period will bring a new series of milestones in a number of other areas as well, including language, feeding and overall independence. While these changes may bring some struggles, they are also markers of your toddler's blossoming maturing.

By 12 months, an area of the brain called the hippocampus (also referred to as the seat of memory) has matured enough that it is possible for toddlers to recall actions and events that occurred a few hours or even a day earlier. Within the 12-18 month range, this ability to recall another person's earlier action and repeat it some time later (referred to as "deferred imitation") becomes well established. This means that young toddlers have the potential to learn from what they have seen others do. You may demonstrate the use of a particular toy such as blowing a whistle or placing a peg in a hole. While your toddler may not repeat the action immediately, he or she may display it in some form at a later time in the day or week.

Toddlers like to repeat complex actions over and over again. They never tire of hearing a good story or throwing a ball. These repetitive experiences strengthen the connections in the underlying neural circuits- motor, sensory, language, and so forth- making it easier and easier for he toddler to throw the ball or understand the story with each repetition. Repetition allows children to pay attention to what is new, perhaps increasing the complexity of the information they can process. As their connections or synapse grow stronger, these frequently used pathways probably become easier to access, and so the child expends less effort with each attempt.

The best type of learning environment for young toddlers is one that allows them to explore and play in a safe, responsive setting. Young toddlers do not require formal "teaching" in order to develop memory or thinking skills. They need you to listen attentively, talk with them during routines, and be sensitive to the types of activities that engage their attention and hold their interest.

What should my infant be able to do at 15 and 18 months of age?

By 15 months, your toddler will:

- ✓ Initiate turn-taking routines and hug dolls, animals, or people.
- ✓ By 15 months, your toddler will shake head "no" to protest.
- ✓ Follow one-step commands during play.
- ✓ Responds to request to say words
- ✓ Responds to "give me" commands
- ✓ Points to two action words in pictures.
- ✓ Identifies three body parts on self or a doll
- ✓ Says 8-10 words
- ✓ Names one object frequently
- ✓ Imitates new words spontaneously.

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By 18 months, your toddler will:

- ✓ spontaneously name objects, persons, actions, etc.
- ✓ increase vocabulary from just a few words to 50 or more words by age 18 months.
- ✓ follow a 2 or 3 step direction.
- give an object to an adult as causal action to have it activated.
- engage in pretend play.
- walk independently.
- pull self to standing position next to furniture.
- get from sitting to hands and knees position.
- secure an object that is hidden under three screens, with the object left hidden under the last screen (toddler may search in correct sequence of observed placements).
- move 3 or more feet by crawling.
- explore adult facial features.
- express displeasure for or dislike of certain activities or situations.
- express enjoyment of or preferences for certain activities or situations.
- play peek-a-boo.
- discriminate between familiar and unfamiliar people.
- request assistance from an adult
- Other skills your toddler will perform by 18 months consist of:
    - ✓ Points to, shows, and gives objects.
    - ✓ Uses words to protest
    - ✓ Hands a toy to an adult for assistance
    - ✓ Identifies 6 body parts
    - ✓ Completes two requests with on object.
    - ✓ Chooses two familiar objects upon request.
    - ✓ Identifies objects by category
    - ✓ Understands 50 words
    - ✓ Says 15 meaningful words
    - ✓ Uses consonants such as “t”, “d”, “n”, and “h”
    - ✓ Talks rather than uses gestures
    - ✓ Imitates words overheard in conversation
    - ✓ Asks, “What’s that?”
    - ✓ Asks for “more”.
    - ✓ Names 5 to 7 objects upon request.

What can my toddler sense (taste, touch, and motion)?

Your 12-18 month old toddler is continuing to investigate what is similar and different about the way different things feel, smell, look, sound, and taste. As you have probably seen, this includes objects – even people! Toddlers have their own preferences for the types and levels of sensory stimulation they prefer. You may have already noticed that this may vary over time and depend on a variety of factors. Some toddlers, in fact, are easily over-stimulated and overwhelmed by too much sensory input and will show this by becoming fussy, looking away, becoming distracted, etc. Each toddler is different in the precise way in which they take in information about the world around them.

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In is not necessary to employ activities such as showing your toddler flash cards to stimulate learning, or to "teach" toddlers specific academic skills such as colors and shapes. Young children learn best using all of their senses and actively exploring the everyday objects in their environment with people who can talk about their experiences and responds positively to them.

Sensory behaviors to observe:

Does my toddler actively explore different textures, shapes, sizes, and weights.*

What can I do?

- ✓ Provide objects and toys that have a variety of textures, shapes, sizes, weights, etc. It is not necessary to always use commercially available toys and materials. Toddlers love the materials and objects readily available in any household such as old boxes, pots and pans, pieces of scrap material, etc.
- ✓ While you play with your toddler, label and describe objects with words.
- ✓ Remove objects or change activities when your toddler seems over-stimulated or switch to a new location where there are fewer distractions and the choices are more limited.
- ✓ Play different kinds of music to help your toddler learn about various sounds. (Be aware that when using music for background sound, it can be hard for a toddler to hear voices clearly.)
- ✓ Imitation games played back and forth are a wonderful and fun way to help your toddler explore.
- ✓ Use props, such as play telephones, food, and hats, to explore pretend or fantasy play. Be open to new ways of playing with and exploring objects.
- ✓ You can refer to colors and shapes in the course of your natural daily conversation. ("Do you want a red apple or a green apple?" or "Can you hand be the blue ball?")
- ✓ If you have any concerns about your toddler's vision or hearing, talk to your pediatrician or other health care clinician.

Questions to ask yourself:

What are the sensory behaviors that my toddler likes to explore?

What social and emotional skills does my toddler have?

This period in development can bring lots of frustration for toddlers. It can stem from the fact that they are still developing language skills and thus may have a hard time expressing their needs, desires, and emotions, or from not being able to do or have something they want. As a parent, it is important to try to understand the immature yet developing behaviors the toddler is using to deal with very strong emotions.

The 12 – 18 month period is a time when inhibition (controlling one's own behavior) is just beginning to take hold. For example, even when the toddler "knows" that biting a friend is unacceptable, the toddler may not be able to override the initial desire to bite. Toddlers are notoriously poor at controlling (inhibiting) their impulses. This inhibition is probably a function of the brain's frontal lobes, which undergo a great deal of maturation during the 12-18 month period. Although it is still difficult for them, toward the end of this period, toddlers can begin to learn to control some of their socially unacceptable behaviors (such as biting, hitting, and screaming) when they are consistently shown how to do so.

Toddlers can sometimes restrain themselves when told "no" (although they will also want to test you), but it is especially difficult for them to control themselves when they are tired, hungry or upset, which is when tantrums are likely to occur. This is an opportunity for you to intervene. By observing your toddler, it may be possible to identify the signs of a frustrating situation before it occurs or gets out of hand. When a toddler is overtired, you may need to ask him or her to sit on your lap and look at a book. If your toddler is playing with a friend and tensions begin to run high, it may be time to redirect them with a song or movement game.

Still, parents cannot always avoid toddler outbursts. In fact, experiencing frustration and tantrums is an important process for toddlers in learning how to cope with and get through difficult situations. When parents and other caregivers can be available to the toddler during a tantrum (not necessarily giving in to it but identifying with the depth of feeling expressed), the toddler will be able to develop trust that parents and caregivers will be available when they feel out of control and need help coping with their emotions.

By 12 to 14 months of age young toddlers are demonstrating very strong emotional attachment to mom or dad. (Signs of a toddler's attachment first appear around 8 months and peak at 15 months.) Maturation of the brain's frontal lobes likely accounts for heightened attachment, and is reflected in the toddlers thinking and behavior. Toddlers can now remember you after you leave them, at a child care center for instance, and anticipation of this separation at drop-off time may be extremely stressful for them.

The anxiety of separation presents itself in the toddler as a fear of being left or deserted, and each separating may be intense. This is why it is important to know that toddlers are beginning to develop skills in areas of memory, language and symbolic play (thinking, talking about or playing out scenes about parents and loved ones). The maturation of these skills during the second year will help them cope more smoothly with these separations.

By15 months, most toddlers have begun to assert their independence around feeding. They may refuse to eat any foods that they cannot eat by themselves, or they may choose to eat a very limited range of foods. Parents who have been very diligently trying to feed their child a healthy diet may worry now that their child seems to exist on very little to eat. Your concerns about your toddler's eating may relate to both nutrition and your toddler's growing wish for power and control in the relationship with you. To address the nutritional questions of whether your infant is getting enough to eat, your pediatric clinician can monitor your toddler's growth and offer reassurance by reviewing the toddler's growth charts with you.

As you consider your toddler's eating habits, be aware that the desire for independence is an important developmental milestone- becoming one's own person. Its is likely that you may also see this push for control in other arenas such as refusing to sit in the car seat or stroller, unwillingness to lie still for a diaper change, or wanting to do things for self. In this context, you will see that this is not a battle over food, but rather a normal response in your toddler's growing desire for self-control and autonomy.

Social behaviors to observe:

Does my toddler explore adult facial features?

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Does my toddler express displeasure for or dislike of certain activities or situations?
Does my toddler express enjoyment of or preferences for certain activities or situations?
Does my toddler enjoy interactive social games such as peek-a-boo?
Does my toddler discriminate between familiar and unfamiliar people?
Does my toddler request assistance from an adult?
Does my toddler shake head "no" to demonstrate protest?
Does my toddler hand a toy to an adult for assistance?

What can I do?

- ✓ Prior to leaving your toddler at a child care center or elsewhere, allow your toddler to bring something with from home- a stuffed animal or special blanket (transitional object) to let him or her know that home is still there.
- ✓ Provide pictures of yourself, siblings, pets, and extended family members. These pictures can be hung in the child's cubby at childcare or assembled in a "home book".
- ✓ Talk with the care provider about home routines, special events, etc. so that they can be brought up to the toddler during the day as a bridge between home and childcare.
- ✓ Play games that focus on concepts such as object permanence, Games such as peek-a-boo, hide and seek or dramatic play with animal figures leaving and returning reinforce that objects and people continue to exist even when we can't see them.
- ✓ Selecting a responsive caregiver plays a significant role in making transitions easier. A strong relationship with a care provider who is loving, warm, and reassuring can actually cushion some of the toddler's stress response and ease the transition. Ideally, your caregiver will be sensitive to your toddler's individual needs, whether it is to kiss mommy three times and read a favorite book, or to rush to a beloved stuffed animal or blanket.
- ✓ Work with your care provider to encourage and support a good-bye routine with your toddler. Some parents leave without saying good-bye. Although this may avoid an emotional scene, it may also create mistrust in the toddler. Some toddlers will become overly aware and anxious about any signs of separation and worry about it often. Thus toddlers are better served when you let them know that partings occur and when you help build their confidence in handling separations.
- ✓ As toddlers begin to experiment with food, they may express strong likes and dislikes. Offer small bites of new foods and let your child decide if he or she wants more.
- ✓ Expose your toddler to new foods as you both discover your toddler's preferences. You may not like the idea of eating cold oatmeal "lumps", but many toddlers thoroughly enjoy eating their cereal if they can feed it to themselves with their fingers. Try such toddler favorites as firm tofu, pasta noodles, bits of soft, boiled chicken, parboiled vegetables, bananas, or American cheese.
- ✓ Offer foods again that have been previously refused. Toddlers often quickly change their minds about food likes and dislikes.
- ✓ Young toddlers need to practice the eye-hand coordination skills involved in bringing slippery bits of food to their mouths with their fingers or a spoon. Be prepared for the mess by covering the floor under the high chair with a sheet or newspaper.
- ✓ Try not to make food a battleground. Toddlers will not starve themselves and will eat when they are hungry. Many toddlers need frequent, small meals spaced throughout the day rather than three large meals a day.

- ✓ Involve your toddler in food preparation. Make food servings bite sized so they can be eaten as finger food. Toddlers work very hard to master their environment; help them achieve success in self-feeding by proving foods that the toddler can easily eat.
- ✓ At this age, toddlers need the fat and protein in whole milk that is essential to the growing and myelinating brain. Nonfat and low fat milks are not recommended for use during the first two years of life because of the lower calorie density compared with high fat products.

Questions to ask yourself:

1. How does my toddler react to being left at the childcare facility or with a baby sitter?
2. What do I do to make the transition easier?
3. What are the "favorite" objects that I could use to provide security and continuity to my toddler when I leave?

What cognitive skills does my toddler have?

Around 12 months of age, toddlers begin to think in more complex ways. They will spend time using objects as tools, for example, using a stick to try to get an out-of-reach toy. Toddlers of this age are aware that if they pull on a string the attached toy will come along, which makes pull-toys very popular for this age group. Toddlers will also begin to experiment with objects to see what they can do. For example, the toddler will throw a ball to the ground and see that it bounces, and then throw a doll to see what it will do.

You can support developing thinking and problem solving skills by expressing an interest and following the toddler's lead in play activities. Provide opportunities to engage in play with interesting and challenging materials – objects that encourage young toddlers to manipulate, interact, or figure something out- such as blocks, puzzles, water and sand play and props for dramatic play. Be careful, however, not to overload the play environment with too many toys or activities. Keep some put away and rotate what they play with periodically. You will present a greater challenge (and create greater excitement) when you add some new activities or toys that the toddler hasn't explored in a while.

Cognitive skills to observe:
Is my toddler initiating turn-taking routines by 15 months of age?
Is my toddler giving an object to an adult as causal action to have it activated?
Is my toddler engaging in pretend play?
Is my toddler securing an object that is hidden under three screens, with the object left hidden under the last screen (toddler may search in correct sequence of observed placements)?
Is my toddler demonstrating functional use of objects?
Is my toddler identifying three body parts on self or a doll by 15 months and 6 body parts by 18 months?

What can I do?

- ✓ The best way to stimulate cognitive development in your toddler is to spend quality time each day "playing" with your toddler. It is important that you get down on the floor with your toddler as often as possible and enter into the interactions with materials together.
- ✓ The most effective way of helping your toddler learn problem-solving skills is to model the behaviors to be performed with the toys or materials. This means to "show" the toddler how

something works. Have your toddler watch you as your take a puzzle apart and put it together. After your toddler has watched you do it, help your toddler complete the task. You may need to offer extensive help the first time, but gradually your toddler will learn to perform the task independently.

- ✓ Remember that that activities used to stimulated language development also help the infant learn critical thinking and problem solving skills. Talk about and describe the things your toddler is seeing and hearing in the world around. Talk about what you your toddler is doing as the action is being performed.
- ✓ Use the turn-taking social interactions that you and your toddler have become proficient at in your play to expand the imitation skills expected of your toddler. Begin taking turns pushing cars, making them go "fast" and "slow". Practice driving or placing them "on" the garage, "over" the garage, "behind" the garage, and even "under" the garage. As you are having your toddler perform the more abstract imitation skills, you are also facilitating language skills and concept formation.
- ✓ When your toddler gives you an object to have you activate it, honor your toddler's request. Your toddler is demonstrating a cognitive skill referred to as "causality", or knowing that you are a causal action to have the object activated and that the toddler can "use" you to effect change in the environment.
- ✓ Engage in pretend play with your toddler. Pretend you are fixing dinner, fixing a flat tire, cleaning the lawn, washing clothes, having a party, going shopping, etc. Use whatever props are available or substitute items.
- ✓ Set up instances where your toddler has to "work" to get at a favorite toy or object such as securing an object that is hidden under three screens. This might consist of placing an object in a bag (while your infant is watching), then placing the bag in a box and then covering the box with a cloth. Encourage and help your infant remove the barriers to get the object.
- ✓ Another fun game is to place three wash clothes on the table. Then place a fun object in the palm of your hand. With your toddler watching you, pretend you are putting the object under the first cloth, but keep it in your palm. Then do the same with the second cloth and finally the third cloth (actually leaving it under the third cloth). Watch how your toddler proceeds to find the object. Try variations of this game where you leave it under the middle cloth. What happens if you don't leave it under any of the clothes? Where does your toddler look if it cannot be found at all?
- ✓ Model how to use a variety of objects including household utensils, tools, toys, etc. Give your toddler as much experience as possible practicing the functional use of objects.
- ✓ Remember that toddlers love repetition. Repeat the favorite songs, rhymes, stories and games over and over again.

Questions to ask yourself:

1. What are the problem solving skills that I have observed my toddler perform?
2. Does my toddler enjoy "figuring things our" or would he or she rather rely on someone to "fix-it"?
3. Does my toddler enjoy engaging in activities that require critical thinking such as finding objects misplaced, getting objects out of reach, combining objects that go together, etc?

What communication skills can I expect?

Speech is an important form of stimulation for young toddlers. It sets into action hearing, language and social/emotional centers of the brain all at once. By twelve months, the brain is already "wired-in" to a toddler's native language. That is, it can detect native speech sounds much better than those from a foreign language. Although the human brain is prepared from birth to learn language, the particular words and language a toddler masters depend completely on the actual speech heard- especially the words that are spoken directly to him or her.

Between 13 and 20 months a toddler's brain becomes ever more focused or specialized in the way it responds to words. This change allows speech to be processed more rapidly and thus makes it possible for young toddlers to better understand what is being said to them. This process of hearing words and understanding their meaning is called receptive language. In contrast, the process of speaking is called expressive language. Do not be concerned by the fact that your young toddler may not yet be saying a lot of words. At this age, it is natural for young toddlers to understand much more of what is being said to them than they are yet able to say on their own. Watch for non-verbal signs that your toddler understands you, such as pointing at or moving towards a ball while you ask, "Where's the ball?"

Beginning around 12 months of age those streams of babbling you have listening to gradually transform into your young toddlers first "words". As you listen, you will note the vocalizations sound like an adult's in terms of the rise and fall of the tone of voice. You may still have difficulty identifying the specific words that are being said, however.

As you begin to understand those first spoken words, you will find that they usually involve the name of a person, object, or action. They may include social expressions such as "hi" and "bye-bye", or the infamous "no". By approximately 18-20 months, young toddlers may be speaking anywhere from 20-50 words, with an explosion of words soon to follow. What an accomplishment!

It is important to remember that some young toddlers may say no words at all before 18 months. Indeed, young toddlers can be very different in terms of when they speak their first words, put two words together, and begin to speak in sentences. This difference is normal, and is not a sign of the amount of language each child understands.

By talking with your young toddler, you are supporting not only rapidly developing communication and thinking skills, but also the toddlers sense of self. Through practice, the toddler becomes aware of the power of language of both gathering information and communicating needs.

Conversing with toddlers is not always easy. Sometimes you need to act as if your toddler is your peer. This means that even if you do not always understand what the toddler is saying, you can listen, make eye contact, and respond as best you can. This will give the toddler the message that what he or she has to say is important, and it will encourage the toddler to continue communicating. Indeed, your conversations will help the toddler continue to develop both receptive and expressive language skills. Research suggests that talking with toddlers influences the growth of vocabulary. The more words a toddler hears while engaged in "conversations" with the parents and care providers, the larger his or her vocabulary will be and the faster it will continue to grow. It is important to understand that listening to the T.V., or to the conversations with other adults will not do the job. Language must be responsive to the interest of the toddler.

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Language learning at this age is based on the repetition of sounds and words. Toddlers at this age often point to objects and/or ask some variation of "wha dat?" in their desire to learn the names of objects. They delight in simple songs, finger plays and games involving sounds and words. Learning to name an object gives the toddler enormous power to get what he or she wants. Toddlers often practice new words or phrases before falling off to sleep or while riding in the car, repeating words over and over again.

Communication skills to observe:

- Is my toddler using words paired with gestures in expressive communication?
- Is my toddler spontaneously naming objects, persons, actions, etc?
- Has my toddlers' vocabulary increased from just a few words to 50 or more words by age 18 months?
- Does my toddler follow a 2 or 3 step direction?
    - ✓ Follow one-step commands during play?
    - ✓ Responds to request to say words?
    - ✓ Responds to "give me" commands?
    - ✓ Points to two action words in pictures?
    - ✓ Says 8-10 words?
    - ✓ Names one object frequently?
    - ✓ Imitates new words spontaneously?

Does my toddler, by 18 months of age:

- ✓ Point to, show, and give objects upon request?
- ✓ Use words to protest
- ✓ Completes two requests with on object.
- ✓ Choose two familiar objects upon request.
- ✓ Identify objects by category
- ✓ Understand 50 words
- ✓ Say 15 meaningful words
- ✓ Use consonants such as "t", "d", "n", and "h"
- ✓ Talk rather than uses gestures
- ✓ Imitate words overheard in conversation
- ✓ Ask, "What's that?"
- ✓ Ask for "more".
- ✓ Name 5 to 7 objects upon request.

What can I do?

- ✓ Physically get down on your toddler's eye level as opposed to looking down. Make eye contact when talking. Place yourself face to face with your toddler.
- ✓ Talk about and describe the things your toddler is seeing and hearing in the world around.
- ✓ Talk about what your toddler is doing as the action is being performed. For example, "Good work – you are making that truck go!" or "What a big girl (or boy)- you are eating your macaroni."
- ✓ Talk about what you are doing such as, "Daddy's helping you work on the puzzle."

- ✓ Try to figure out what your toddler is saying. Listen to the tone of voice: Is your toddler asking a question, stating a command or voicing a protest? Watch as your toddler tries to speak: Is he or she pointing to something? What is he or she looking at? These are clues to the meaning of your toddler's expressive language. The intonations, pointing, and gestures are letting you know that something is being requested or that your toddler wants to talk about the object being referenced.
- ✓ When your toddler gets older, you can begin asking him or her to use words- instead of hitting or taking another's toy- for self-expression. Your conversations with your toddler now will help him or her later learn how to put those feelings and needs into words.
- ✓ Toddlers love repetition. Repeat favorite songs, rhymes, and stories.
- ✓ Show your interest and excitement at your toddler's attempts to communicate.
- ✓ Use every opportunity to label objects and events for your toddler- in the grocery store, as you drive or ride in the car, while looking at picture books- name the things being seen. Point out trucks of different colors or sizes; label those foods that your toddler is familiar with as you put them in the shopping cart. Narrate daily events such as the steps in changing a diaper or taking a bath. Your child will repeat these words, each time becoming more proficient at using and pronouncing the correct word. In addition, expand on what your toddler is saying by labeling actions, feelings, etc.

Questions to ask yourself.

1. How well can I understand what my toddler is trying to communicate?
2. What are the nonverbal cues my toddler uses to increase my understanding?
3. Does my toddler ever appear frustrated when trying to communicate?
4. Keep track of the new words that you hear your toddler begin using spontaneously.

How much motor coordination should I expect from my toddler?

Walking is one of the most exciting events in early life for both young toddlers and their parents. While it may mark the start of the transition from infancy to young toddlerhood, an infant's first steps are just the beginning of a complex motor skill that continues to develop throughout the second year of life. As the toddler takes those first steps, you may notice a stiffness and clumsiness to their walking movements: they lift their knees high and step down with the front part of the foot hitting the ground first. By two years of age, however, you will notice that they begin to step more smoothly, landing first with the heel and moving to the toe. Their footstep or stride becomes much more coordinated and they are able to more easily navigate around- instead of tripping over- obstacles in their path.

This improved ease and coordination of step is influenced in part by the continuing myelination of the brain's motor pathways. Myelin is a dense, fatty substance that helps neurons send and receive messages faster and more clearly, so that motor circuits in both the brain and spinal cord gradually become better at controlling and coordinating the movements necessary for walking. Although maturation is important, a young toddler's coordination and smoothness of step is also influenced by practice. Practice helps strengthen muscles and improve the sense of balance. So while it in not necessary to "teach" toddlers to walk, it is important to provide lots of opportunities for young toddlers to practice walking skills. The on-going maturation of motor pathways in the brain and spinal cord,

along with the opportunity to exercise and practice these developing motor skills, will help your toddler develop quality movements.

The seriousness with which toddlers approach such complex motor tasks as running, climbing stairs, and getting in and out/off of furniture demonstrate their push to master these new, more complex action patterns. They also need to test out these skills in new situations. Although the toddler may have mastered climbing onto the chair at home, he or she will still have to practice the skill at someone else's house or in the restaurant. Running on grass is different from running on carpet and the action will be repeated in many different settings, even those that are not appropriate for running such as a parking lot or in the grocery store.

Practicing skills that will improve coordination requires space to move about. Open space that is free of objects with sharp edges, such as tables and toy or bookshelves, provides a safe environment in which your young toddler can practice developing coordination and gross motor skills

Movement skills to observe:
Is my toddler moving 3 or more feet by crawling?
Is my toddler walking independently?
Is my toddler pulling self to standing position next to furniture?
Is my toddler getting from sitting to hands and knees position?

What can I do?

- ✓ Take walks with your young toddler. Stop to examine the interesting things seen along the way.
- ✓ Provide a variety of toys that can be pushed and pulled, such as toy shopping carts, doll strollers, or small wagons, and riding toys that can be propelled with the feet.
- ✓ Provide plenty of safe low places for climbing under, over, inside of, on top of, and around.
- ✓ Place favorite toys in different parts of the room and ask your toddler to bring the toys back to you.
- ✓ Set a big basket of objects to be dumped and carried a bout.
- ✓ Toddlers like to practice their new skills in a variety of settings – in the yard, on the playground, on the stairs to the childcare center, or at Grandma's house. They have an enormous tolerance for repetition, even when adults have long tired of the activity.
- ✓ Acknowledge how hard your toddler is working to master new skills and how proud you are of the efforts. Young children develop a positive self-image through their interactions with the environment and through relationships with the adults who care for them. Recognizing how hard a child is striving to learn adds to the toddler's sense of who he or she is- a learning who can success with practice and hard work.
- ✓ You may have ambivalent feelings as your once dependent infant demonstrates growing independence by literally walking away from you. It is natural to have concerns about you toddler "not needing you" as much anymore. Be reassured that the toddler still needs your care, nurturance, and support in toddler hood.

Questions to ask yourself:

What motor skills does my toddler enjoy "practicing"?

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In what different settings have I observed my toddler practicing this skill?

What can my toddler do with his or her hands?

The toddler's small or fine muscles are also developing rapidly during this period with increased maturity of the cerebral cortex. The toddler is becoming better able to use both hands together in interacting with toys and materials. You will not that your toddler will learn to hold an object with one hand and manipulate it with the other hand. In addition to transferring an object from one hand to the other, the toddler will now be able to hold more that one object in each hand. The toddlers "release" skills will also improve rapidly, enabling the toddler to pick up and release small objects such as blocks or beads into a container in rapid succession. This will also enable the toddler to stack blocks one on top of the other and place pegs in a pegboard and shapes into a form board.

The toddler will develop a precise hand grasp during this period. The grasp will use the forefinger and thumb on one side and the index and second finger in opposition. When holding a crayon or pencil, the object will be held in the middle with a pincer grasp rather than a whole palm grasp. This refined grasp will enable the toddler to do many other things such as unwrap an object, dangle objects by a string, and secure small objects such as raisons and drop them into a small neck container. The toddler will use this grasp to hold crayons and scribble and to turn the pages of a book.

Hand skills to observe:

Does my toddler remove three pegs from a peg board?*
Does my toddler place six blocks or other small items in a cup?*
Does my toddler pick up and hold two small objects in one hand?*
Does my toddler turn the pages of a book?*
Does my toddler place the round block in a three-piece form board?*
Does my toddler build a tower of three cubes?*
Does my toddler imitate scribbling with a crayon and paper?*

What can I do?

- ✓ Provide objects or toys that allow your toddler to fill, dump, or stack. Excellent toys are 1-inch wooden cubes in a variety of colors, sand, and other small objects such as Lego blocks, small miniature animals, and other small items available in quantity.
- ✓ Make sure all of the small objects given to your toddler are large enough such that if they were placed in the mouth, would not cause your toddler to choke. If smaller objects are used, allow your toddler access only under close supervision.
- ✓ Provide your toddler with toys that involve repeated construction and disassembly. Examples include a simple three-piece form board, a pegboard, a shape box, etc. Have your child practice putting the shapes or objects in and taking them out. Remember, your toddler may spend a lot of time practicing these new skills.
- ✓ Play games with your toddler where you build a tower with blocks, align blocks in a row, and then put the blocks in a cup. Show your child the skills, and then have your child imitate you. Build these fine motor behaviors into your turn-taking routines.

- ✓ Spend time with your toddler reading books. Encourage your toddler to hold the book and turn the pages.
- ✓ Spend time helping your toddler to scribble with a crayon. Encourage your toddler to hold the crayon or marker with an appropriate grasp and to imitate various strokes such as a scribble, a horizontal stroke and a vertical stroke. Use a variety of colors, writing utensils, and surfaces such as chalk on a chalkboard, finger paints, and markers on old newspapers.
- ✓ Use household food products for the toddler to practice pouring. Use rice, macaroni, or cereal. Have your toddler pour the food from a glass into a cup. Try pouring from a bowl into a small neck bottle. Expect a mess but have fun!

Questions to ask yourself:

1. Does my toddler enjoy activities that involve fine motor skills or using his or her hands?
2. What are some of the hand skills my toddler enjoys doing?
3. Does my toddler engage in these behaviors for extended period of time or become easily bored or frustrated?
4. Does my toddler appear to be sensitive or dislike touching any surfaces or materials?
5. Would I describe my toddler as being "coordinated" or are fine motor skills still difficult?

18 to 24 months

Unique Characteristics of Toddlers from 18 to 24 months:

Toward the end of the second year of your toddler's life, you will notice new discoveries every day. Your toddler will be filled with energy and excitement as he or she discovers all of the new skills possible. As large muscles become stronger and small muscles more coordinated, a new range of activities opens up which includes running, jumping, climbing, scooping, and pouring. You'll see your toddler's vocabulary grow each day, and soon your toddler will put two or more words together. You will enjoy lengthy "conversations" with your toddler as you attentively listen and respond to what your toddler is trying to say. You will also notice that your toddler now remembers more and more.

Play times will take on a new dimension as your toddler begins to "pretend" and understand symbols. However, playing may also produce some frustration as your toddler struggles with ownership and self-control. Take heart- these are ways your toddler is forming a self-identity and independence, and with your encouragement and guidance, can learn to share and take turns.

Amazing things are happening in the brain during this time. New circuits are building which allow your toddler to have more coordinated movement; the cerebellum is maturing, which helps his or her timing; more connections are forming in the cerebral cortex to help give your toddler a better understanding of language; and associations are forming in the frontal, parietal, and temporal lobes which enables your toddler to pretend.

What should my toddler be able to do at 24 months of age?

- The toddler has a vocabulary of 100 or more words by 24 months.
- The toddler uses two-word utterances, combined with gestures, to communicate.

- The toddler exerts independence and control in social and play settings.
- The toddler demonstrates more complex exploration and play skills with toys and objects.
- The toddler demonstrates more advanced movement and motor skills such as running and climbing.
- The toddler demonstrates symbolic play, using one object as a signifier for another object.
- The toddler turns the pages in a book.
- The toddler imitates scribbling motions.
- The toddler creeps or crawls up 4 steps without assistance.
- The toddler walks without support for 10 feet without falling.
- The toddler picks up a raisin with the ends of the thumb and index finger in an overhand approach (neat pincer grasp).
- By 21 months, the toddler:
    - ✓ Engages in adult-like dialogue
    - ✓ Uses vocalizations and words during pretend play
    - ✓ Uses turn-taking with conversations.
    - ✓ Pretends to dance to music
    - ✓ Pretends to pay a musical instrument
    - ✓ Imitates housework activities
    - ✓ Uses two toys together in pretend play
    - ✓ Identifies four body parts and clothing items on shelf
    - ✓ Understands the commands “sit down” and “come here”
    - ✓ Understands the meaning of actions words
    - ✓ Identifies pictures when named
    - ✓ Uses single words frequently
    - ✓ Uses sentence-like intonation patterns
    - ✓ Imitates two-three word phrases
    - ✓ Verbalizes two different needs
    - ✓ Uses two-word phrases occasionally
- Gestures to indicate toileting needs.
- By 24 months of age the toddler
    - ✓ Attempts to repair broken toys
    - ✓ Chooses one object from a group of five upon verbal request
    - ✓ Follows novel commands
    - ✓ Uses two-word phrases frequently
    - ✓ Uses 50 different words
    - ✓ Uses new words regularly
    - ✓ Relates personal experience
    - ✓ Uses three-word phrases occasionally
    - ✓ Refers to self by name
    - ✓ Uses early pronouns occasionally
    - ✓ Mean length of 1.25 –1.5 morphemes per utterance.

What can my toddler sense (taste, touch, and motion)?

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Your 18-24 month old toddler is continuing to investigate what is similar and different about the way different things, feel, smell, look, sound, and taste. As you have probably seen, this includes objects- and even people! Toddlers, of course, have their own preferences for the types and levels of sensory stimulation they prefer. You may have already noticed that this may vary over time and depend on a variety of factors. Some toddlers, in fact, are easily over-stimulated and overwhelmed by too much sensory input and will show this by becoming fussy, looking away, and becoming distracted. Each toddler is different in the precise way in which the world is perceived.

It is not necessary to employ activities such as showing your toddler flash cards to stimulate learning or to "teach" toddlers specific academic skills such as colors and shapes. Young children learn best using all of their senses and actively exploring the everyday objects in their environment with people who can talk about their experiences and responds positively to them.

Sensory behaviors to observe:

Continued exploration of the sensory properties of objects and people in the environment.*

What can I do?

- ✓ Provide objects and toys that have a variety of textures, shapes, sizes, weights, etc.
- ✓ While you play with your toddler, label and describe objects with words.
- ✓ Remove objects or change activities when your toddler seems over-stimulated or switch to a new location where there are fewer distractions and choices are more limited.
- ✓ Play different kinds of music to help your toddler learn about various sounds.
- ✓ Imitation games played back and forth are a wonderful and fun way to help your toddler explore.
- ✓ Use props, such as play telephones, food, and hats, to explore pretend or fantasy play. Be open to new sways of playing with and exploring objects.
- ✓ If you have concerns about your toddler's vision or hearing, talk to your pediatrician or other health care clinician.

Questions to ask yourself:

Observe the variety of sensory experiences that your toddler seems to enjoy. Are any of the sounds, sights, or touch of objects or materials in the environment a negative experience for your toddler?

What social and emotional skills does my toddler have?

At approximately 18 months, your toddler will display signs that he or she is developing an awareness of self. One of the signs of this growing awareness is the emergence of words like "me" and "I" in your toddler's vocabulary. Another, more difficult sign is the discovery of the word "mine."

Along with this increasing awareness of self come issues of ownership and sharing- or more accurately not sharing. This possessiveness may seem quite strong at times as your toddler claims objects and toys as his or her own. In fact, this focus on ownership may be one way in which your toddler comes to better understand self as a separate person, distinct form others, and expresses a growing independence

and autonomy. Though this expression may appear to be "selfish" and can be difficult to cope with at times, once your toddler becomes more secure in knowing what is and is not his or hers, sharing more readily with others will begin.

Self-control, which is also just beginning at this age, plays a role in the task of sharing. It will be very difficult for your toddler to wait for even a few seconds in the presence of a much-desired object. Although your toddler may understand you when you tell him or her not to take form others, your toddler may have great difficulty stopping the behavior. This self-control comes with time and brain maturation, and in particular, development of the frontal lobes of the brain. This area of the brain is beginning to work in a meaningful way during this phase, and will continue to mature throughout childhood and adolescence!

There is a wide range of other feelings happening during this period. Sometimes these feelings can be very strong. Your toddler may feel very proud of a tower that has been built but get very frustrated and upset when it tumbles to the ground, or even angry if someone topples if over. Also, budding independence is mixed with still wanting to be "the baby". Your toddler may want to do everything for self one minute, but want to be held in your arms the next minute.

Social behaviors to observe:

Does my toddler exert independence and control in social and play settings?
Does my toddler gesture to indicate toileting needs?
Does my toddler relate personal experiences?
Does my toddler refer to self by name?

What can I do?

- ✓ Be patient and tolerant in your expectations of sharing. Provide a model of sharing in your interactions with family members and friends.
- ✓ Provide lots of guidance. Initiate games of sharing and turn-taking.
- ✓ Use distraction or redirection to calm or avoid disputes.
- ✓ Look for signs of tiredness or illness, as both can affect tolerance for sharing.
- ✓ Let your toddler help you with sweeping, making a snack, or other work around the house so your toddler can feel "big" while maintaining special rituals like bedtime story to allow your toddler to continue to feel like the "baby".
- ✓ Help your toddler put feelings into words. Use phrases such as: "You're frustrated that your tower fell. Why don't we build another one?"

Questions to ask yourself:

1. When does my toddler have most difficulty with sharing toys or materials?

2. What do I do to help my toddler learn to share?

3. Are there certain objects or favorite toys or people that my toddler has a special sense of "ownership" to the degree that it causes stress?

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What cognitive skills does my toddler have?

At this stage, your toddler is beginning to use representational thought, meaning your toddler knows that objects and people exist, even if they are not immediately present. This concept also enables your toddler to "pretend" to be someone else. You will note a sudden spurt in creative play using representational thought and delayed imitation.

At this age, your toddler is beginning to understand that symbols stand for the objects and things experience in the environment. Your toddler may look at pictures of family members and identify a specific individual without confusing the picture with the actual person. You may notice that your toddler will say "hello" to mommy on a toy telephone, pretend to eat a plastic cookie, or engage in other types of "dramatic play." This process of symbolic representation is still in its beginning states, but it is the base upon which elaborate fantasy play will be built later.

The growing ability to engage in abstract thought and play depends on association areas of the brain in the frontal, parietal, and temporal loves, areas that develop quite slowly. During your toddler's second year, this budding ability to think symbolically will take second seat to more basic sensory and motor experiences such as pouring and sifting sand and climbing through tunnels.

You will also notice that your toddler's memory is very good in specific areas, like remembering animals from a trip to the zoo. However, your toddler may have trouble understanding and describing that the trip was last week. Details of certain events seem to be more memorable that the timing of events. Conscious memory is still not full developed. This probably reflects slow maturation of the hippocampus (a critical memory area of the brain, located in the temporal lobes) and its connection to the cerebral cortex. However, experiences that do stand out serve as an important base from which your toddler will construct ideas about the world.

Cognitive skills to observe:
Does my toddler demonstrate more complex exploration and play skills with toys and objects?
Does my toddler attempt to repair broken toys?
Does my toddler demonstrate symbolic play, using one object as a signifier for another object?
Does my toddler exhibit symbolic thought evidenced by pretend activities such as:

- ✓ pretends to dance to music?
- ✓ pretends to play a musical instrument?
- ✓ imitates housework activities?
- ✓ uses two toys together in pretend play?

Does my infant demonstrate emerging concepts including the ability to:

- ✓ identify four body parts and clothing items on self?
- ✓ understand the commands "sit down" and "come here"?
- ✓ understand the meaning of actions words?
- ✓ choosing one object from a group of five upon verbal request?
- ✓ follow novel commands?

What can I do?

- ✓ It is important to spend time listening, talking, and helping your toddler explore his or her surroundings.

- ✓ Hands-on experiences are needed- toddlers learn best by trying things themselves in an environment that is safe for discovery. Provide a variety of sensory, motor, and pretend play opportunities.
- ✓ Take your toddler on outings to learn about new places and people.
- ✓ Encourage your toddler to repeat things over and over, allowing for the practice of skills. This is still a natural instinct you toddlers of this age.
- ✓ Music and pretend play will be great fun for your toddler. Sing songs, "make believe", and practice nursery rhymes. Association of melody and lyrics encourages young brains to take hold and store the words of songs better than those of regular conversation. This is the reason toddlers will remember information that is "sung" more so than information that is "spoken" in conversation.
- ✓ Follow your toddler's lead. See what your toddler is interest in and use this as an opportunity to explore together. For example, does your toddler like the leaves in the yard? Hunt for different kinds of leaves together and bring them into the house. Play at sorting leaves and talk about their shapes. Talk about how they turn colors in the Fall. Take a walk and look for trees turning color. Go to the library and find books about trees. Your toddler will learn from your excitement about all that the two of you are learning together.
- ✓ Refer to colors and shapes in the course of your natural daily conversations. Examples include: "Do you want a red apple or a green apple?" or "Can you hand be the blue ball?" Toddlers will learn their colors, shapes, size concepts, and other quantitative concepts through incidental learning, or through hearing adults describe objects using the appropriate descriptors. Rather than trying to formally "teach" your toddler these concepts, provide abundant exposure to high quality language models that use the concepts within the context of normally occurring daily experiences.

Questions to ask yourself:

1. What does my toddler enjoy doing during "pretend play"?

2. Does my toddler enjoy music, rhymes, and the finger-plays?

3. What are some things my toddler remembers with ease?

4. What exploration behaviors does my toddler enjoy engaging in with me?

What communication skills can I expect?

Toddlers vary greatly in their paths to understanding and using language. The number of words a toddler uses between 18-24 months of age is related to many factors, such as whether your toddler is a boy or a girl, outgoing or shy, or part of a small or large family. It is not unusual for many (though not all) girls to be ahead of boys in the use of words and expressive language skills. Likewise, if your toddler is more social and outgoing, more words will be observed. Being an only child may mean that adults offer the toddler more opportunities to converse; whereas if a toddler is one of many, siblings may

"talk for" the toddler. These are just a few of the reasons for the significant variety among toddlers in the number of words used.

Between 18-24 months of age, most toddlers say around 50 words. Your toddler may say more words earlier or may not produce 50 words until close to 24 months, all of which is considered "normal" development. The important thing is that you notice an increase every month in the number of words your toddler says. If you suspect a language delay, share your concerns with your pediatrician.

After your toddler beings using about 50 words, you will notice a "vocabulary explosion." New words are spoken every day. Interestingly, researchers have noticed that this vocabulary explosion occurs at about the same time as an increase in the number of synapses (connections between brain cells) occurs in an important language center of the brain known as Wernicke's area. The Wernicke's area plays an important role in the understanding of word meanings, and in most people is located on the left side of the cerebral cortex.

You may also notice your toddler putting two words together, such as "more juice" or "fall down." Once again, there is a wide range as to when different toddlers begin to do this. While most start combing words somewhere between 18-24 months of age, with some doing so as early as 14-15 months, and others as late as 24-26 months.

Communication skills to observe:

- Did my toddler, by 21 months of age:
  - ✓ engage in adult-like dialogue?
  - ✓ use vocalizations and words during pretend play?
  - ✓ use turn-taking with conversations?
  - ✓ identify four body parts and clothing items on self?
  - ✓ understand the commands "sit down" and "come here"?
  - ✓ understand the meaning of actions words?
  - ✓ identify pictures when named?
  - ✓ use single words frequently?
  - ✓ use sentence-like intonation patterns?
  - ✓ imitate two-three word phrases?
  - ✓ verbalize two different needs?
- Uses two-word phrases occasionally
- Does my toddler have a vocabulary of 100 or more words by 24 months?
- Does my toddler use two-word utterances, combined with gestures, to communicate?
- Does my toddler, at 24 months of age:
  - ✓ use two-word phrases frequently?
  - ✓ use 50 different words?
  - ✓ use new words regularly?
  - ✓ relate personal experiences?
  - ✓ Use three-word phrases occasionally?
  - ✓ Use early pronouns occasionally?
  - ✓ Have a mean length of 1.25 –1.5 morphemes per utterance?

What can I do?

- ✓ Your role as a parent, to listen to and talk with your toddler, is critical during the 18-24 month age period. It is known that the amount and quality of language that is used in conversations with children during late infancy and early toddler-hood influences their rate of verbal language development. Language is perhaps the area of development most open to intervention and most flexible in its timelines for skills development.
- ✓ Listen to your toddler. Be patient and try to really understand what your toddler is saying. Encourage expression and don't speak for the toddler.
- ✓ Talk with your toddler. One of the most important things you can do is be an active language partner. A special effort may be needed if the toddler tends to be shy or quiet, and the conversation may be one-sided, but describe what he or she is doing and keep an open door for conversation.
- ✓ Repeat, expand, or restate what your toddler says. For example, when your toddler says, "Me down," you can say, "Yes, you got down all by yourself." This lets your toddler know that you are listening and trying to understand what is being said.
- ✓ Read or tell stories to your toddler each day.
- ✓ Use language play with your toddler: rhymes, finger plays, poems, and songs that you read, recite, act-out, or make up.
- ✓ If you are concerned with your child's language development, talk to your pediatrician or child care provider for guidance and suggestions about how you can help support your child's early language development. Screening and assessment programs are also available to you.

Questions to ask yourself.

What does my toddler enjoy talking about?
What language games does my toddler most enjoy?
Am I noticing an increased vocabulary as the weeks progress? What are some examples of new words that my toddler has learned?

How much motor coordination should I expect from my toddler?

You may notice that your toddler is becoming very energetic. Movement is extremely important to many toddlers' sense of well being, particularly in the 12 to 24 month period. Providing safe areas for movement where your toddler is not cramped or confined to a seat may make you both happier and reduce the number of tantrums.

Your toddler needs the freedom to move about indoors as well as outside, whenever possible. It is important to allow the toddler plenty of opportunities for movement in a safely arranged space where large muscle movements are possible. This allows the toddler to explore the surroundings, refine coordination, release some of the energy that keeps him or her on the go, and develop new motor skills such as running, jumping and climbing. Each new motor skill develops out of previous skills as neural circuits in the brain become more highly coordinated and muscles grow progressively stronger. These new skills also contribute to the toddler's sense of mastery and growing feelings of competence.

Movement skills to observe:
Does my toddler demonstrate more advanced movement and motor skills such as running and climbing?
Does my toddler creep or crawl up 4 steps without assistance?

Does my toddler walk without support for 10 feet without falling?

What can I do?

- ✓ Have inside and outside play times with plenty of room to crawl, walk, run, and jump.
- ✓ Create a soft indoor play area using pillows mats, and mattresses.
- ✓ Provide large blocks and blankets for building forts and other indoor play structures. With safe "obstacle courses" and challenges, your toddler will be less likely to find ones that are not safe.

Questions to ask yourself:

Does my toddler enjoy large muscles activities such as running, jumping, and climbing?

What skill has my toddler recently mastered that he or she is "proud" of?

What can my toddler do with his or her hands?

You will notice that your toddler is gaining more control and coordination with the many small muscles in the fingers, hands, and wrists. Skills performed with the hands are called "fine motor" skills. Drawing, buttoning, poking, and using utensils are all ways of exercising fine motor skills. This slow but steady increase in hand control is related to the continuing development of motor systems in the brain and to the opportunity to practice such fine motor movements.

During this stage, the brain's motor systems continue to be highly influenced by myelination. Myelin is a dense, fatty substance that helps neurons send and receive messages faster and more clearly, so that motor circuits in the brain gradually become better at controlling and coordinating movements. Another feature of brain development that contributes to the toddler's improving motor skills is the development of the cerebellum, an area of the brain important in the timing and coordination of most motor tasks.

Practice is also critical for the toddler to improve fine motor control and coordination. The more the toddler practices these skills, the better tuned the motor circuits in the brain will become. Your toddler may show preferences for some activities over others. All sorts of fine motor activities will provide feedback to the toddler's developing brain and motor system.

Hand skills to observe:

Does my toddler turn the pages in a book?
Does my toddler imitate scribbling motions?
Does my toddler pick up a raisin with the ends of the thumb and index finger in an overhand approach (neat pincer grasp)?

What can I do?

- ✓ Provide toys and materials such as crayons and paper, dolls and doll clothes, nesting toys, play dough, snap together blocks, small blocks, small toy figures and cars that foster opportunities to practice fine motor skills. As always, be aware of safety with toys, and have appropriate adult supervision.

- ✓ Provide opportunities for your toddler to grasp, hold, pour, scoop, squeeze, and otherwise manipulate a variety of safe materials. Sand boxes, water basins and play dough are great for this.
- ✓ Provide eating utensils for self-feeding and opportunities which allow your toddler to eat snacks and drink independently.
- ✓ Let your toddler watch you writing or drawing a picture. Observation and subsequent imitation are powerful teaching tools.
- ✓ Allow your toddler to turn the pages of books as you read. Thicker paged books, such as board books, work well at this age.

Questions to ask yourself:

What fine motor activities does my toddler enjoy?

What activities, or exposure to materials, have I not provided for my toddler?

What fine motor activities do we enjoy performing together?

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I. Physical Health and Development **Purpose:** Research shows that if children are healthy and feel safe, they will learn better. Knowledge and habits of healthy living begin early in life. While young children are not in charge of providing themselves with a healthy environment and lifestyle, they can begin the lifelong process of developing habits of healthy living and physical activity.	
25-30 Months	
Indicators	**Possible Caregiver Strategies**
21. Holds spoon, scoops food and brings to mouth with spilling 22. Plays on outdoor play structures (climbing, sliding, etc.) 23. Removes unfastened garments 24. Knows which faucet is hot and cold 25. Most baby teeth have grown in 26. Sleeps 9-12 hours per night 27. Stands 34-38 inches tall 28. Weighs 26-32 pounds	• Don't allow your child to eat whatever he wants. Your job is to provide good food. Your child decides how *much* of it he wants to eat. Let him eat a lot when he is in the mood, and skip a meal when he's not hungry. • Don't fight with a picky eater. However, if he is not growing and gaining weight, talk to your child's health provider. • Do not use food as a bribe or threat. Never use food to reward "good" behavior or to punish "bad" behavior. • Support children's need to move and be active • Provide opportunities and time for outdoor large motor play.

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II. Motor Skill Development

Purpose: Physical development is integral to building children's self esteem, confidence, fitness, and well-being. As children refine their physical movements, they develop higher-order thinking skills that are necessary for future social and academic success. Fine motor development plays an integral part in the child's school performance. Children need well-rounded playtime with opportunities to develop both large and small motor control. The child's chosen play activities will have an enormous influence on the ability to focus and enjoy later schoolwork. The toys a child plays with will also affect motor development.

25 – 30 Months	
Indicators	**Possible Caregiver Strategies**
A. Fine Motor: Grasp, Reach, Object Manipulation 17. Grasps writing tool near writing end 18. Imitates vertical and horizontal lines 19. Uses more wrist action 20. Unscrews lid on small (1") jar or bottle 21. Turns knob to open doors 22. Places 5 rings on stand in any order 23. Separates 4 attached beads 24. Strings 4 one inch beads 25. Turns pages one at a time 26. Likes to take things apart and put them together again (puzzles, toys) 27. Turns knobs (radio, TV, stereo) 28. Imitates building a train by aligning 3 blocks and placing another block on top of the last block 29. Inserts a circle, square, and triangle into a shape sorter or form board 30. Builds a tower of 8 one inch blocks 31. Puts a 3-piece puzzle together 32. Snips with a scissor **B. Posture/Balance** 2. May prefer running to walking **C. Locomotion: Crawling, Walking, Climbing** 1. Uses heel-toe progression 2. Walks a tiptoe for 4-5 feet	• Spend time outside, where there is plenty of room to safely run, jump and climb. • Visit a neighborhood park where there are other children to play with. • Include your child in family sports, like swimming together or kickball. • Create a safe place in your home where your child can actively explore. • Take walks with your child and use them as opportunities to teach him important concepts. • Show your child how to hop like a rabbit, tiptoe like a bird, waddle like a duck, slither like a snake and run like a deer. • Teach, model and provide many opportunities to run, gallop, throw, catch, hop, kick, dance, jump, climb, pull, carry, stretch, bend, twist, and move isolated parts of the body. • Encourage physical activity habits and enjoyment that can last a lifetime. • Provide miscellaneous materials to develop small muscle skills (cutting, tearing, drawing, lacing) • Allow a variety of prewriting materials (paint, chalk, play dough) • Craft activities require your constant supervision as a toddler often does not know when to stop squeezing the glue, when to stop snipping with a scissor, etc. • Encourage participation in simple games, finger plays and songs. • Teach through organized play and games as well as spontaneous play. • Teach traditional games as the child readiness develops. • Be aware of the types of clothing and footwear that facilitate

3. Walks backwards 10 feet 4. Walks 3 steps forward on balance beam (both feet on beam) 5. Walks upstairs 4 steps, alternating feet and using wall or rail for support 6. Climbs, runs, but can't change direction quickly 7. Sits on riding toys and pushes with feet; may ride tricycle **D. Active Motor: Throwing, Jumping, Kicking** 9. Throws a ball 5 feet without deviating from a straight course more than 20 degrees 10. Throws objects using forearms 11. Jumps a distance of 2-4" 12. Jumps in place 13. Jumps from bottom step or other stationary low object 14. Swings leg to kick a stationary ball 15. Throws a ball 7 feet without deviating from a straight course more than 20 degrees 16. Jumps down from a stable object 16-20 inches high with one foot leading; no support offered	participation in large motor activities.

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III. Personal, Social and Emotional Development

Purpose: A positive self-concept and emotional development are the foundation for all learning. Social skills are necessary for participating in the most basic interchanges, such as conversations and turn-taking. Studies show that children who are socially competent and emotionally secure are better able to participate in learning experiences in positive ways. For many children, the preschool years are the first experiences in a non-family, structured social environment. In these settings they are beginning to acquire abilities, which will allow them to develop cooperation, conflict resolution, self-regulation, and responsibility skills. Although many of these skills will be learned and refined by interacting with peers, children profit from the guidance of knowledgeable and caring adults.

25 – 30 Months	
Indicators	**Possible Caregiver Strategies**
A. Attachment/Adults/ Peers 4. Relates best to one familiar adult or older child at a time 5. Is shy with strangers 6. Has difficulty sharing with peers **B. Self Awareness/Expression/Regulation** 11. Follows mother/caregiver around the house and copies domestic activities in simultaneous play 12. Holds parent's/caregiver's hand outdoors to maintain contact 13. Regulates conduct to win praise 14. Tantrums when frustrated 15. Is apt to snatch, push, kick, rather than give and take in polite fashion 16. Shows facial expression and behavior indicating pity, shame and modesty 17. May be restless, rebellious and very active 18. May become resistant and dawdles 19. Asserts independence ("Me do it!") 20. Identifies boy or girl in picture book **C. Social Conventions** 7. Initiates own play activities 8. Follows simple rules given by adult for playing childhood games 9. Obeys adult requests approximately half of the time 10. Adds sounds to action ("Vroom" for trucks, talks to teddy bears, etc.)	• Gain an understanding of a child's preferences, interests, background and culture and include this understanding in the development of instruction and learning environments • Embed opportunities throughout the day to provide positive, affirming statements to children • Play with children on their level • Share information about yourself and find commonalities with children and others • Follow a child's lead during play • Acknowledge children's efforts • Know the child's strengths and weaknesses • Have conversations with children individually and on a regular basis • Let children know they are liked and appreciated • Provide direct instruction on appropriate social interaction skills for children and others • Maintain a respectful attitude toward children and others • Use positive non-verbal gestures such as smiles, nods, waves and eye contact to communicate and play with children • Point out acts of kindness and fairness in literature, everyday situations, and personal life

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11. Makes doll/toy act on self as though capable of performing actions independent of child (places brush in doll's hand, then moves doll's arms as if doll combed hair) 12. Demonstrates/verbalizes functional play plan before or while doing the act ("I am going to . . .." "I am making . . ..")	

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IV. Self-Care and Independence Purpose:	
25- 30 Months	
Indicators	**Possible Caregiver Strategies**
A. Eating 9. Expresses likes and dislikes; may be a fussy eater 10. Does not like food to mix (does not want potatoes to touch meat) 11. May ask exclusively for one food over a period of time, then switch preference to another food 12. Holds spoon on lower 1/3 handle; Controls turning spoon, scoops food, and brings food to mouth (may be considerable spilling) 13. Obtains drink from tap or other source without assistance 14. Discards bottle; drinks only from cup/glass 15. Holds fork in fist 16. Uses fork to spear bite-sized chunks of foods **B. Self-Care** 10. Pulls down pants when needs toileting or undressing 11. Brushes teeth with supervision; Begins to make brushing motion 12. Unbuttons large buttons 13. Blows nose in tissue held by adult 14. Finds arm holes in T-shirt 15. Removes unfastened garment 16. Washes face without assistance 17. Knows which faucet is hot/cold 18. Dries hands without assistance **C. Clean Up** 2. Helps clean up; Puts things away **D. Daily Living Skills** 1. Understands function of money	• Present foods many times without forcing a child to try them • A plate with dividers may be used to separate foods • Allow a child to eat the food that they prefer. They usually switch from one preference to another within a few days. • You may want to experiment with a variety of spoons/forks with different shapes, sizes • Keep unbreakable glasses or cups within reach of a toddler to allow them the freedom to obtain a drink independently • "Sweat" pants or other pants with an elastic waist allow the child the freedom to pull down and pull up pants independently • Purchase "child" toothpaste, model and encourage brushing attempts • T-shirts with ample room allow a child the independence for putting them on and off • Praise small efforts at washing face and hands even though they may have missed portions • Teach children which faucet handle is hot and which is cold • Keep towels within reach of the faucet • Keep containers handy for materials/toys • Label containers with pictures so children can easily match container to its contents • Allow children to "pay" for small purchases while shopping • State that you "need to pay" for your purchases during shopping or eating out

V. Cognitive Development **Purpose:** This domain recognizes the child's search for meaning as the basis for intellectual development. The focus is on children's curiosity about the world and their ability to acquire, organize, and use information in increasingly complex ways.	
25-30 Months	
Indicators	**Possible Caregiver Strategies**
A. Sensorimotor Processing 1. Experiments with effect of own actions on objects and people 2. Observes others actions to see the effect they will have on objects and people 3. Knows playing with certain desirable or forbidden objects will get adult's attention 4. Expresses beginning understanding of cause and effect (It's hot because the heater was turned on) 5. Imitates behavior seen in another place and time 6. Notices and describes how items are the same or different ("This ball is smaller than that one," "My shoes are the same as those") 7. Generalizes ideas based on past experiences (watches caregiver wash an apple before eating, then washes an apple the next time) 8. Connects objects and ideas (toothbrush for brushing teeth, mittens to play in the snow) 9. Uses active exploration and trial and error to solve problems 10. Communicates to request assistance 11. Reacts to people in costume as if they are the characters they portray 12. Reacts to puppets as if they are real and not extensions of an adult or another child **B. Emerging Literacy- Language** 1. Recites portions of nursery rhymes /finger plays 2. Finds details in favorite picture books 3. Attends while caregiver reads a short story	• Respond to children's attempts to communicate using gestures, actions, or words • Talk with children in their home language and/or English and encourage children's use of home language • Encourage children to discuss and add to stories that are read to them • Expose children to various types of literature to the child (stories, poetry, songs) • Point out the names of things, signs, labels, in the neighborhood, school, store • Call attention to the books, magazines, and newspapers in the child's environment • Repeat nursery rhymes and play word games • Read rhymes and begin to leave off the last word and let the child fill in the rhyming word • Provide a variety of books to stimulate the child's interest • Label the child's pictures/drawings • Allow your child to see you reading various written materials (recipes, lists, directions, novels, newspapers) • Play a variety of music with different tempos and clap along, stamp feet, wave scarves to the tempos • Clap out children's names with a clap for each syllable • Sing the alphabet song for your child • Read signs in the environment (STOP, Target, Wal-Mart, EXIT) • Ask simple questions about a story just read to the child • Allow the child to experiment with a book, letting them turn the pages and showing them the right side up of the book • Support young children's interest in scribbles and pretend writing

4. Tells what actions are taking place in a story, dramatic play, experience 5. Understands that words can be written down 6. Understands the difference between newspapers, books and other printed mail 7. Word sentences follow rules of grammar 8. Engages in extended conversation with joint attention and turn taking 9. Attends to and follows 3 or more step complex directions 10. Recites phrases 11. Pretends to "read" 12. Tells own story from personal experience 13. Begins to recall parts of a previously heard story 14. Requests to hear familiar stories 15. Recounts an event, with assistance **C. Emerging Literacy-Phonological Awareness** 1. Recites phrases from familiar rhymes 2. Completes a familiar rhyme by providing the last word 3. Participates in rhyming games and songs with other children 4. Imitates tempo and speed of sound (clapping hands fast and clapping hands slowly, speaking fast and speaking slowly) **D. Emerging Literacy-Alphabetic Principle** 1. Uses symbols or pictures to represent oral language 2. Recites the alphabet song, with or without assistance 3. Begins to understand the print represents words (pretend to read, identifies signs in the environment, etc.) **E. Emerging Literacy -Print Awareness** 1. Recognizes print in the neighborhood, community, an environment (signs, store names) 2. Notices both words and pictures on a page 3. Understands the difference between newspapers, books and printed material	• Play games with scribbles, taking turns copying each others scribbles • Make large horizontal and vertical movements with various writing tools • If the child has difficulty making horizontal and/or vertical movements, a toy car can be used to drive on a horizontal or vertical "road" • Give children adequate time to explore and experiment with manipulatives before starting directed work • Count out "1, 2" as you walk • State "2" as you give the child 2 crackers, 2 socks, 2 shoes, etc. • Point out the difference in size of adult's and child's shoes (big, little, shortest, longest) • Design experiences where children explore and experience their environment to identify spatial relationships such as "How many chairs will fit by this table?" • Model and encourage mathematical language throughout the day • Expand and extend a child's understanding of mathematical language within the context of the child's experiences such as "Do you want a whole glass of milk or a ½ glass of milk?" "Would you like more crackers than I have or less/fewer crackers?" • Incorporate math based language experiences, including finger plays, songs, stories (5 Little Speckled Frogs, 3 Little Pigs) • Hide hidden objects in sand, beans or rice. Children can find and sort the objects found by size, color, shape or type. • Take walks in the neighborhood or community to observe natural objects and events • Help children experience the world of nature • Discuss objects and events that have been observed indoors and outdoors • Verbally talk about weather conditions ("It is really foggy today" "I like the rainy weather") • Post a daily schedule/calendar, which consists of words and pictures. Children can help make changes as necessary so that they see the consistency in the schedule, changes, etc. • As you travel, mention landmarks that are "near" and those that are

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F. Emerging Literacy-Comprehension 1. Follows two-step directions with complex sentence structures (noun + adverbs) ("Put your books on the shelf quickly," "Pour the milk slowly") 2. Answers simple questions about a story or book just read to them 3. Asks questions that demonstrate knowledge of recent events or circumstances ("Where did the puppy go?" "Why did the boy cry?") **G. Emerging Literacy-Book Behaviors** 1. Recites phrases- pretends to "read" 2. Tells own story from personal experience 3. Knows the right side up of a book 4. Turns pages, usually a single page at a time 5. Enjoys books about different things (animals, occupations, etc.) 6. Responds to emotional expressions in books 7. Asks to be read to 8. Requests favorite book to be read repeatedly 9. Looks at books, magazines and other printed matter without assistance 10. Looks through books and other print material as though reading 11. Memorizes phrases from favorite books 12. Makes comments on books 13. Uses books during play 14. Selects books and magazines when asked to select favorite objects/toys **H. Emerging Literacy-Fine Motor/Prewriting** 1. Scribbles and makes marks on paper purposefully 2. Uses scribbles and pictures to make lists, letters, and shapes 3. Tells others what scribbles mean 4. Imitates and copies lines and circles on paper 5. Uses a variety of writing tools (markers, crayons, pencils, paint brush) 6. Draws horizontal and vertical lines 7. Paints using whole arm to make strokes	"far" • Play games while traveling such as "I spy" so the child becomes aware of surroundings • Select age appropriate jobs for the child to accomplish (picking up toys, passing out napkins) • Show children assistive technology and how it assists accomplishments for all (tools, specific assistive technology for disabled)

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I. Numeracy 1. Child understand the meaning of "two" 2. Can give two objects upon request 3. Child counts two objects 4. Recognizes some quantities and states number (sees two objects and says "two") 5. Points to big or little object upon request 6. Begins to associate "all gone" with empty 7. Imitates counting rhymes and songs 8. Identifies quantity and comparisons of quantity (all, some, none, more, less 9. Uses size words such as "many, big, and little" appropriately 10. Fills and empties containers 11. Compares the size of various every day objects (puts different people's shoes side by side to see which is longest) 12. Matches simple two dimensional shapes in form boards and puzzles (circles, squares, triangles, rectangles) 13. Identifies at least two geometric shapes (circle, square) 14. Creates and copies simple shapes made by others 15. Collects items that have common characteristics (color, shape, type) 16. Arranges objects in lines 17. Sorts objects by one attribute (color, shape) 18. Recognizes small, medium and large objects **J. Content Area Knowledge-Science** 1. Uses all five senses to examine different objects with attention to detail 2. Observes and manipulates objects to identify similarities or differences 3. Observes and examines natural phenomena through senses (notices different types of insects) 4. Enjoys a variety of sensory experiences 5. Asks simple questions about the natural works ("Where did the rainbow go?" ""Why is it thundering?")	

6. Observes and manipulates objects and events to answer simple questions about the natural world 7. Explores and investigates physical properties of living and non-living things 8. Demonstrates understanding of how things grow and change 9. Asks questions about the earth 10. Identifies weather conditions (sun, rain, snow, fog, ice) **K. Content Area Knowledge-Social Studies** 1. Anticipates recurring events in typical routines 2. Follows a visual schedule to identify what happened before and what will happen after current events 3. Connects new experiences to past experiences **L. Content Area Knowledge-Economics** 1. Recognizes relationship between supply and demand (understands that they cannot have another piece of cheese because it is all gone) **M. Content Area Knowledge-Geography** 1. Distinguishes between near and far 2. Experiments with physical relationships (under/over, in /out, inside/outside) 3. Distinguishes different environments by the people or signs that are a part of that environment (sees pictures of birds and says, "They fly in the air") 4. Recognizes own house when approaching 5. Recognizes familiar buildings and landmarks in neighborhood **N. Content Area Knowledge-Ecology** 1. Helps with home and class routines that keep the house/classroom clean (picks up toys) 2. Discards trash in appropriate receptacle 3. Recognizes and responds to characteristics of the environment (dirt, mud, very tall tree, noisy birds, etc.) **O. Content Area Knowledge-Technology**	

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1. Plays with battery operated toys and learning materials with assistance 2. Operates a simple tape/CD player to listen to recorded stories or songs with assistance 3. Shows curiosity of assistive technology and how it helps people	

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V. Cognitive Development **Purpose:** This domain recognizes the child's search for meaning as the basis for intellectual development. The focus is on children's curiosity about the world and their ability to acquire, organize, and use information in increasingly complex ways.	
25-30 Months	
Indicators	**Possible Caregiver Strategies**
A. Sensorimotor Processing 13. Experiments with effect of own actions on objects and people 14. Observes others actions to see the effect they will have on objects and people 15. Knows playing with certain desirable or forbidden objects will get adult's attention 16. Expresses beginning understanding of cause and effect (It's hot because the heater was turned on) 17. Imitates behavior seen in another place and time 18. Notices and describes how items are the same or different ("This ball is smaller than that one," "My shoes are the same as those") 19. Generalizes ideas based on past experiences (watches caregiver wash an apple before eating, then washes an apple the next time) 20. Connects objects and ideas (toothbrush for brushing teeth, mittens to play in the snow) 21. Uses active exploration and trial and error to solve problems 22. Communicates to request assistance 23. Reacts to people in costume as if they are the characters they portray 24. Reacts to puppets as if they are real and not extensions of an adult or another child **B. Emerging Literacy- Language** 16. Recites portions of nursery rhymes /finger plays 17. Finds details in favorite picture books 18. Attends while caregiver reads a short story 19. Tells what actions are taking place in a story, dramatic play, experience	• Respond to children's attempts to communicate using gestures, actions, or words • Talk with children in their home language and/or English and encourage children's use of home language • Encourage children to discuss and add to stories that are read to them • Expose children to various types of literature to the child (stories, poetry, songs) • Point out the names of things, signs, labels, in the neighborhood, school, store • Call attention to the books, magazines, and newspapers in the child's environment • Repeat nursery rhymes and play word games • Read rhymes and begin to leave off the last word and let the child fill in the rhyming word • Provide a variety of books to stimulate the child's interest • Label the child's pictures/drawings • Allow your child to see you reading various written materials (recipes, lists, directions, novels, newspapers) • Play a variety of music with different tempos and clap along, stamp feet, wave scarves to the tempos • Clap out children's names with a clap for each syllable • Sing the alphabet song for your child • Read signs in the environment (STOP, Target, Wal-Mart, EXIT) • Ask simple questions about a story just read to the child • Allow the child to experiment with a book, letting them turn the pages and showing them the right side up of the book • Support young children's interest in scribbles and pretend writing • Play games with scribbles, taking turns copying each others scribbles • Make large horizontal and vertical movements with various writing

20. Understands that words can be written down
21. Understands the difference between newspapers, books and other printed mail
22. Word sentences follow rules of grammar
23. Engages in extended conversation with joint attention and turn taking
24. Attends to and follows 3 or more step complex directions
25. Recites phrases
26. Pretends to "read"
27. Tells own story from personal experience
28. Begins to recall parts of a previously heard story
29. Requests to hear familiar stories
30. Recounts an event, with assistance

C. Emerging Literacy-Phonological Awareness

5. Recites phrases from familiar rhymes
6. Completes a familiar rhyme by providing the last word
7. Participates in rhyming games and songs with other children
8. Imitates tempo and speed of sound (clapping hands fast and clapping hands slowly, speaking fast and speaking slowly)

D. Emerging Literacy-Alphabetic Principle

4. Uses symbols or pictures to represent oral language
5. Recites the alphabet song, with or without assistance
6. Begins to understand the print represents words (pretend to read, identifies signs in the environment, etc.)

E. Emerging Literacy -Print Awareness

4. Recognizes print in the neighborhood, community, an environment (signs, store names)
5. Notices both words and pictures on a page
6. Understands the difference between newspapers, books and printed material

F. Emerging Literacy-Comprehension

4. Follows two-step directions with complex sentence structures

tools

- If the child has difficulty making horizontal and/or vertical movements, a toy car can be used to drive on a horizontal or vertical "road"
- Give children adequate time to explore and experiment with manipulatives before starting directed work
- Count out "1, 2" as you walk
- State "2" as you give the child 2 crackers, 2 socks, 2 shoes, etc.
- Point out the difference in size of adult's and child's shoes (big, little, shortest, longest)
- Design experiences where children explore and experience their environment to identify spatial relationships such as "How many chairs will fit by this table?"
- Model and encourage mathematical language throughout the day
- Expand and extend a child's understanding of mathematical language within the context of the child's experiences such as "Do you want a whole glass of milk or a ½ glass of milk?" "Would you like more crackers than I have or less/fewer crackers?"
- Incorporate math based language experiences, including finger plays, songs, stories (5 Little Speckled Frogs, 3 Little Pigs)
- Hide hidden objects in sand, beans or rice. Children can find and sort the objects found by size, color, shape or type.
- Take walks in the neighborhood or community to observe natural objects and events
- Help children experience the world of nature
- Discuss objects and events that have been observed indoors and outdoors
- Verbally talk about weather conditions ("It is really foggy today" "I like the rainy weather")
- Post a daily schedule/calendar, which consists of words and pictures. Children can help make changes as necessary so that they see the consistency in the schedule, changes, etc.
- As you travel, mention landmarks that are "near" and those that are "far"
- Play games while traveling such as "I spy" so the child becomes

(noun + adverbs) ("Put your books on the shelf quickly," "Pour the milk slowly") 5. Answers simple questions about a story or book just read to them 6. Asks questions that demonstrate knowledge of recent events or circumstances ("Where did the puppy go?" "Why did the boy cry?") **G. Emerging Literacy-Book Behaviors** 15. Recites phrases- pretends to "read" 16. Tells own story from personal experience 17. Knows the right side up of a book 18. Turns pages, usually a single page at a time 19. Enjoys books about different things (animals, occupations, etc.) 20. Responds to emotional expressions in books 21. Asks to be read to 22. Requests favorite book to be read repeatedly 23. Looks at books, magazines and other printed matter without assistance 24. Looks through books and other print material as though reading 25. Memorizes phrases from favorite books 26. Makes comments on books 27. Uses books during play 28. Selects books and magazines when asked to select favorite objects/toys **H. Emerging Literacy-Fine Motor/Prewriting** 8. Scribbles and makes marks on paper purposefully 9. Uses scribbles and pictures to make lists, letters, and shapes 10. Tells others what scribbles mean 11. Imitates and copies lines and circles on paper 12. Uses a variety of writing tools (markers, crayons, pencils, paint brush) 13. Draws horizontal and vertical lines 14. Paints using whole arm to make strokes **I. Numeracy**	aware of surroundings • Select age appropriate jobs for the child to accomplish (picking up toys, passing out napkins) • Show children assistive technology and how it assists accomplishments for all (tools, specific assistive technology for disabled)

19. Child understand the meaning of “two” 20. Can give two objects upon request 21. Child counts two objects 22. Recognizes some quantities and states number (sees two objects and says “two”) 23. Points to big or little object upon request 24. Begins to associate “all gone” with empty 25. Imitates counting rhymes and songs 26. Identifies quantity and comparisons of quantity (all, some, none, more, less 27. Uses size words such as “many, big, and little” appropriately 28. Fills and empties containers 29. Compares the size of various every day objects (puts different people’s shoes side by side to see which is longest) 30. Matches simple two dimensional shapes in form boards and puzzles (circles, squares, triangles, rectangles) 31. Identifies at least two geometric shapes (circle, square) 32. Creates and copies simple shapes made by others 33. Collects items that have common characteristics (color, shape, type) 34. Arranges objects in lines 35. Sorts objects by one attribute (color, shape) 36. Recognizes small, medium and large objects **J. Content Area Knowledge-Science** 11. Uses all five senses to examine different objects with attention to detail 12. Observes and manipulates objects to identify similarities or differences 13. Observes and examines natural phenomena through senses (notices different types of insects) 14. Enjoys a variety of sensory experiences 15. Asks simple questions about the natural works (“Where did the rainbow go?” “”Why is it thundering?”) 16. Observes and manipulates objects and events to answer simple questions about the natural world	

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5. Operates a simple tape/CD player to listen to recorded stories or songs with assistance 6. Shows curiosity of assistive technology and how it helps people	

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VI. Communication Development **Purpose:** Emphasis in this domain is on acquiring language for a variety of purposes. During the preschool period, children are learning to use language to communicate needs, interact socially with others, and share ideas, thoughts and feelings. They are increasing both their spoken and written language abilities.	
25 - 30 Months	
Indicators	**Possible Caregiver Strategies**
A. Pragmatics 10. Communicates about the actions of others 11. Answers simple questions appropriately 12. Asks increasing numbers of questions (“where?” “who?”) 13. Formulates negative judgments (“Spoon, not fork”) 14. Asks for help with personal needs 15. Names at least one color correctly 16. Refers to self by using pronoun (I, Me, My) rather than proper name 17. Answers simple “who,” “what,” “where,” questions about familiar people or things 18. Adds information to the prior utterance of a communicative partner **B. Receptive Communication** 17. Understands negatives (No, Not, Can’t, Don’t) 18. Understands question forms of what and where 19. Understands simple possessive forms (Daddy’s shirt) 20. Understands complex sentences (“When we get to the store, I’ll buy you an ice cream cone”) 21. Points to smaller parts of the body when asked (chin, elbow) 22. Recognizes and identifies general family names, categories (Grandma, Uncle) 23. Understands common verbs 24. Understands common adjectives 25. Recognizes the names and pictures of most common objects 26. Understands word association through functional association (“What do you drink with?” “What do you sleep on?” “What do you brush your teeth with?”)	• Engage in conversations with the child • Model correct grammar, articulation and vocabulary • Encourage interaction by asking questions during read-alouds, conversations, etc. • Allow think time (three or more seconds) between asking a question and accepting a response • Assist the child when they ask for help with personal needs using vocabulary to explain what you are doing • Name colors of clothes, toys, etc (“Do you want this red ball or this blue ball?”) • Listen and respond to child initiated conversation • Provide interesting objects from their world for children to explore and describe • Help children formulate questions they might ask when going to the library, visiting a friend or neighbor, or on a field trip • Engage children in conversation by scripting or planning out play (“Are you the worker in the hardware store? Who can I be? What should I say?”) • Provide and read books, poems and other texts that include descriptive words • Provide hands on experiences where children will actively acquire and use new vocabulary • Be aware of language misconceptions children may have, and listen for correct usage by children • Incorporate movement activities where children learn about comparison words by using their bodies, such as challenging them to make tall, small, or smaller sized shapes with their bodies • Encourage finger plays, songs and games with movement activities

27. Understands size differences (little doll, large dog) 28. Follows directions involving common prepositions: in, on, behind, out 29. Enjoys finger plays (songs and games that use hands) 30. Responds to action words by performing the action 31. Responds by looking when directed toward a certain object 32. Attempts to locate objects when they are discussed by others **C. Expressive Communication** 25. Jargon and echolalia are almost gone 26. Often uses personal pronouns (I, You, He, It, Me) correctly 27. Asks "what" and "where" questions 28. Uses up to 50 single words 29. Uses two-word phrases 30. Uses nouns to label objects 31. Uses two different pronouns 32. Uses two-term semantic relations that code relational meaning (noun+ attribute, agent + object, action +locative) 33. Uses regular plurals (cats, dogs, balls) 34. Uses morphemes (in, on) 35. Correctly produces phonemes (-s, d, -d, -k, f, -f, -ng, y) 36. Says "No!" to adult request 37. Uses concept "mine" to denote possessiveness 38. Answers who, what, where questions about things he/she knows 39. Speaks in two or three word sentences 40. Repeats adult phrases 41. Recites portions of nursery rhymes/finger plays 42. Recounts an event, with assistance 43. Begins to recall parts of a previously heard story 44. Requests to hear familiar stories 45. Changes intonation and tone to communicate meaning 46. Uses non-verbal gestures and body language to express needs and feelings (hugs, hands on hips, etc) 47. Addresses listener appropriately to get attention (uses child's or adult's name to get attention) 48. Uses sound effects for animals, vehicles, etc in play	• Point to pictures or objects as you describe them • Talk about new vocabulary and meanings as you look at pictures in a book • Wait for a child to make requests • Model complex sentence structures that are just above the child's level • Rephrase comments to improve the child's understanding • Re-read favorite books and other literature • Strategically place and remove objects throughout the house and room that will instigate conversations among children • Label toys, materials with children's names

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VII. Approaches to Learning

Purpose: Research shows that children with positive attitudes and behaviors toward learning are more successful in school. The opposite is also true; children who see themselves as incapable or helpless are at risk for failure. The way children view themselves, as learners will affect the way they learn. For this reason, *Approaches to Learning* is at the heart of all learning.

25 - 30 Months	
Indicators	**Possible Strategies for Caregivers**
13. Wants to do favorite activities over and over again 14. Builds with blocks both upward and sideways 15. Takes simple toys apart and put them back together 16. Places simple 3-5 piece puzzles together independently 17. Continues to try a difficult task for a brief period of time (building with blocks for 3-5 minutes) 18. Insists on some choices 19. Seeks and accepts assistance when encountering difficulties 20. Invents new uses for everyday materials with assistance (bangs on pots and pans, uses a box for a house) 21. Approaches tasks experimentally, adapting as the activity evolves 22. Displays understanding of how objects work together (gets the dustpan when adult is sweeping the floor) 23. Substitutes similar objects (uses boxes for blocks) 24. Realizes that behaviors can precede events (If Mom takes things out of the refrigerator and turns on the stove, she is going to cook lunch)	• Design the physical environment to support exploration • Organize materials within children's reach to allow free choice • Encourage children to try new activities • Help children make choices • Interact with children during play • Know children's abilities as well as likes and dislikes • Allow children to ask questions • Provide opportunities for children to use materials creatively • Rotate toys, materials and equipment regularly • Have children participate in decision making regarding experiences or extension of activities • Provide opportunities and time for children to solve problems • Allow children to revisit learning experiences and improve on earlier attempts • Remind children of past successes • Design learning activities that are challenging, but within children's abilities • Help children identify challenging factors in activities and come up with possible strategies • Design activities that require collaboration between children or adults • Model asking for and accepting help ("Would you please help me carry the groceries? It would take two trips if I did it myself! Thank you!") • Make suggestions such as "What might you use for that?" "Would this work?" "Have you tried this?"

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VIII. Creative Expression

Purpose: Play is a child's work. Through active play, children learn social skills from each other, language skills as they communicate, mathematical skills as they count and explore their environment, and physical skills as they run and jump. A child's enthusiasm and love of learning are maintained when the learning environment provides an ample choice of developmentally appropriate activities, with adequate time for a child to explore and express creativity through play, music and art.

25 - 30 Months	
Indicators	**Possible Strategies for Caregivers**
J. Play 3. Uses unrelated objects to represent other objects (broom for a horse, cup for a pot on the stove) 4. Engages in pretend play K. Music 5. Moves to music 6. Explores various ways to move with or without music 7. Participates in simple songs using voice, instruments or assistive device 8. Imitates movement after participating in or watching others perform songs or musical movement activities or games L. Art 5. Plans creative expression by getting materials together (box of crayons and sitting at table) 6. Uses a variety of materials for tactile experiences and exploration (paint, play dough, glue, musical instruments) 7. Engages in the artistic process with enthusiasm 8. Observes and responds to artwork produced by other individuals and/or cultures.	• Have materials available for the child to use as they wish (boxes, paper, clothing, etc) • Various materials/instruments/scarves should be available with which the child can experiment with sounds and movement • Make available a variety of music with which the child can listen • Model and comment on other's products ("I like the green trees in this picture" " You rolled your play dough into a large circle")

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I. Physical Health and Development **Purpose:** Research shows that if children are healthy and feel safe, they will learn better. Knowledge and habits of healthy living begin early in life. While young children are not in charge of providing themselves with a healthy environment and lifestyle, they can begin the lifelong process of developing habits of healthy living and physical activity.	
31 - 36 Months	
Indicators	**Possible Caregiver Strategies**
5. Uses fork to spear bite sized chunks of food 6. Hops in place on one foot 7. Verbalizes toilet needs fairly consistently 8. Follows basic health practices when reminded (washing and drying hands, brushing teeth)	• Help your child choose foods that can be easily eaten independently. • Provide children with opportunities to participate in self-help activities designed to promote the growing independence desired by toddlers such as: ▪ Washing hands and face ▪ Eating with spoon and fork ▪ Throwing away cup and napkin ▪ Taking off and putting on socks and shoes, coats, etc. ▪ Putting away toys ▪ Washing and drying dishes ▪ Bathing and drying dolls ▪ Becoming aware of the rules of safety ▪ Potty training (where and when appropriate)

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II. Motor Skill Development

Purpose: Physical development is integral to building children's self esteem, confidence, fitness, and well-being. As children refine their physical movements, they develop higher-order thinking skills that are necessary for future social and academic success. Fine motor development plays an integral part in the child's school performance. Children need well-rounded playtime with opportunities to develop both large and small motor control. The child's chosen play activities will have an enormous influence on the ability to focus and enjoy later schoolwork. The toys a child plays with will also affect motor development.

31 – 36 Months

Indicators	Possible Caregiver Strategies
A. Fine Motor: Grasp, Reach, Object Manipulation 11. Discriminates shapes by tactile discrimination 12. Screws lid on jar 13. Copies circle 14. Cuts paper from one side to opposite side 15. Builds a 3 block bridge with based not touching (2 block base, 1 block on top) 16. Builds a tower of 9-10 blocks 17. Unbuttons 3 buttons in 75 seconds 18. Enjoys projects that involve paint, scissors and glue 19. Finger paints 20. Snips on a line with scissor **B. Posture/Balance** 3. Stands up from supine (on back) position (without feet rolling to side) and pulls forward to sitting position, then stands 4. Stands on one foot for 3 seconds **C. Locomotion: Crawling, Walking/Running, Climbing** 4. Walks upstairs alternating feet 5. Walks downstairs 4 steps without support, placing both feet on each step 6. Walks on tiptoe for 8 feet **D. Active Motor: Throwing, Jumping, Kicking** 7. Catches a ball with arms straight 8. Jumps down without support form stable object 18-24 inches	• Allow children to run, throw, catch, jump, and ride on riding toys. • Provide low climbing structures. • Provide modeling clay/play dough activities. • Provide blocks and puzzles. • Containers that can be filled and emptied with sand or water (under supervision) are great. • Children learn from lacing, sewing activities, cutting and pasting. • Alert your child's doctor, nurse or early childhood specialist if your child displays any of the following signs of possible developmental delay for his age range: ▪ Frequent falling and difficulty with stairs ▪ Cannot build a tower of more than 4 blocks ▪ Difficulty manipulating small objects ▪ Cannot copy a circle by age three ▪ Limited interest in toys • Teach, model and provide many opportunities to practice building with large and small blocks, modeling clay, using scissors or tongs, stringing beads, placing pegs in holes, assembling puzzles, using a computer mouse, and using a variety of writing utensils (pencils, crayons, markers) and art mediums (painting, printing, manipulating clay, stamping)

high; lands on both feet without falling 9. Kicks ball; ball travels 6 feet and does not deviate from course more than 15 degrees 10. Jumps over rope 2 inches off floor 11. Jumps 4 inches forward 12. Hops in place on one foot 3 times without losing balance	

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III. Personal, Social and Emotional Development

Purpose: A positive self-concept and emotional development are the foundation for all learning. Social skills are necessary for participating in the most basic interchanges, such as conversations and turn-taking. Studies show that children who are socially competent and emotionally secure are better able to participate in learning experiences in positive ways. For many children, the preschool years are the first experiences in a non-family, structured social environment. In these settings they are beginning to acquire abilities, which will allow them to develop cooperation, conflict resolution, self-regulation, and responsibility skills. Although many of these skills will be learned and refined by interacting with peers, children profit from the guidance of knowledgeable and caring adults.

31 - 36 Months	
Indicators	**Possible Caregiver Strategies**
A. Relational Behaviors/ Attachment 8. Relates to one familiar adult at a time 9. Carries on simple conversations about here and now 10. Observes other children at play; may join in for a few minutes 11. Associative play predominates; plays well with two or three children in group 12. Shows interest in other children 13. Has difficulty sharing 14. Displays affection for caregivers **B. Self Awareness/Expression/Regulation** 10. Separates easily from mother in familiar environment 11. Practices independence by refusing to hold parent's hand, running ahead when outdoors 12. Shows facial expressions and behaviors indicating pity, shame, modesty 13. May be restless, rebellious, very active 14. Becomes resistant, dawdles 15. Throws tantrums when thwarted or unable to express urgent needs 16. Values own property 17. Expresses affection openly 18. Objects to major changes in routines **C. Social Conventions** 13. Cooperates in group activities with adult supervision	• Help children introduce themselves to guests by using their first and last name • Acknowledge children's birthdays and compare their age with others • Have children draw a family picture and help them label it with names • Give children opportunities to help with transitions • Ask children to explain their choices and preferences • Have children select a first and second choice when presented with a choice of activities • Give children opportunities to self-select activities, snacks, etc. • Allow children to develop awareness of their abilities, but not helping or assisting too soon • Encourage children to accomplish as much as they can on their own, but let them know that you are there to help each other • Pair children with siblings or classmates to work together • Interact positively with children in a 1:1 situation • Make eye contact on a child's eye level so that a child does not have to look up to an adult level

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14. Imitates adults and playmates 15. Spontaneously shows affection for familiar playmates 16. Obeys adult requests approximately half of the time 17. Uses toys in appropriate ways 18. Verbalizes play plan for assigned role (“I am mother” “You be baby” “I cook” “You watch TV”) 19. Verbalizes play plan and uses pretend props which are identified for benefit of adult (“This is our house (box)”) 20. Follows simple rules 21. Can take turns in games 22. Understands concepts of “mine” and “his/hers” 23. Plays interactive games 24. Cooperates in small group activities (2-3 children) with adult supervision	

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IV. Self-Care and Independence Purpose:	
31 - 36 Months	
Indicators	**Possible Caregiver Strategies**
A. Eating 4. Sucks with straw, but may damage straw 5. Expresses likes and dislikes 6. Chews with rotary motion **B. Self-Care** 14. Pulls down pants when needs toileting 15. Daytime bowel and bladder control fairly well established 16. Verbalizes toilet needs fairly consistently 17. Puts on front button shirt 18. May be deliberately uncooperative during dressing, may tantrum 19. Buttons 1-2 buttons alone 20. Removes shirt and/or dress 21. Undresses self with exception of pull over garments 22. Assists in dressing 23. Knows where clothes go; may put jacket on 24. Brushes teeth 25. Washes hands independently 26. Gets a drink independently **C. Clean Up** 2. Puts jacket away **D. Daily Living Skills** 2. Puts possessions away when asked	• Provide straws large enough so that children may easily suck a drink • Allow children to state that the "like" or "don't like" specific foods without making it a struggle at the table • Continue the use of pants with an elastic waist for independence in toileting • Encourage buttoning when larger buttons are available • Children may learn dressing skills when practicing on dolls or dressing frames • Label children's drawers, containers so they can easily see where to store their sox, shirts, etc. • Keep a small unbreakable glass/cup close to the sink where children may want to get a drink. • A small stool may assist a child in being independent while obtaining a drink • A hook within the child's reach and labeled with the child's name will encourage him to hang up his coat • Make a game of putting toys away by timing it, assisting him, etc.

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V. Cognitive Development

Purpose: This domain recognizes the child's search for meaning as the basis for intellectual development. The focus is on children's curiosity about the world and their ability to acquire, organize, and use information in increasingly complex ways.

31-36 Months	
Indicators	**Possible Caregiver Strategies**
A. Preoperational Processing 1. Uses action or words to justify choices 2. Makes choices when given options (which one to eat, which one to play with) 3. Applies new information or vocabulary to an activity 4. Uses information gained through one modality and applies it to new context via another modality (tries to model a structure like one seen in a book) **B. Emerging Literacy-Language** 1. Reads along with adult to familiar stories 2. Pretends to read favorite books 3. Attends community or center story times 4. Points to name or letters in a name 5. Identifies familiar labels 6. Grammar and sentence structure close to adult models with some over-generalizations ("goed" for "went") 7. Follows multiple step directions with prepositions 8. Uses several verb forms correctly in relating what is going on in action pictures 9. Begins to follow the sequence of events in an orally narrated story 10. Uses a tape or CD player to listen to recorded stories (may require some assistance) **C. Emerging Literacy-Phonological Awareness** 1. Begins to make up words that rhyme with familiar names and words (may be nonsense rhyming words) 2. Begins to identify words, items with the same beginning sound (ball and book)	• Use language in everyday activities with children and talk about their actions, thoughts, and ideas • Provide opportunities for children to talk and interact with other children and adults • Read to children often for pleasure and for information • Make book reading time special for the child • Visit a library often and check out books to read • Ask children questions about the stories read together • Verbally model why you are choosing certain foods, items • Encourage children to participate in activities that involve reading and writing, such as making a grocery list • Play games that experiment with sounds (rhyming games, substituting beginning sounds) • Sing the alphabet song, gradually leaving out a letter and having the child fill it in • Talk about "tall" letters, "round" letters etc. • Spell out the child's name as you write it, spell out other names, labels as you write or read them • As you read to the child, use your finger, hand to follow along with print from top to bottom, left to right • Read the title of a book and tell the child it is the "title" of the book • Encourage scribbling and attempts to draw lines and shapes for letters • Write out stories or lists that your child dictates • Play "Everyone in the Family/room" by preparing a bag of materials with one of each item for each family member/doll. The adult can say "Everyone in the family has a hat" and the child gives a hat to everyone. • Play dominoes with up to 5 objects on a side

3. Enjoys books that focus on sounds 4. Imitates clapping/tapping/drumming/stomping sounds of different tempos **D. Emerging Literacy-Alphabetic Principle** 1. Recites all letters of the alphabet 2. Knows that alphabet letters are a category of symbols/pictures that can be individually named 3. Associates the names of letters with their shapes 4. Correctly identifies ten or more letters of the alphabet 5. Begins to understand that letters have a name and a sound **E. Emerging Literacy-Print Awareness** 1. Knows that the left page is read before the right page of a book 2. Knows that text progresses from top to bottom on a page 3. Identifies a variety of printed materials (books, magazines, cereal boxes) **F. Emerging Literacy-Comprehension** 1. Follows directions that involve two or three step sequences (may or may not be related) 2. Responds to questions with verbal answers or gestures 3. Extends/expands the thought or idea expressed by another **G. Emerging Literacy-Book Behaviors** 1. Begins to understand that books have a beginning, middle and end 2. Asks and answers questions about the story 3. Recalls familiar words in a book when read to 4. Produces multiple word response to printed materials 5. Anticipates what comes next in known stories, with assistance 6. Expresses the title of a favorite book 7. Gives opinion on books in terms of sections liked and enjoyed 8. Demonstrates an understanding that we hear and see words by pointing randomly to text while it is being read out loud (spoken word is represented by print)	• Have children prepare for an activity or meal by placing appropriate materials at each person's place • Play "war" with cards that have up to 5 dots on each card. The child with more dots wins the opponent's card • Allow child to experiment with a ruler, yardstick, measuring tape • Encourage children to sort and return items they have used to their proper place and container • Encourage children to ask questions and find answers through active experimentation • Share information on observations pictorially, verbally, and through other representations • Encourage children to ask questions and make predictions • Make pictures of the child available as they have grown (baby, toddler, preschool pictures) • Encourage caring for the environment by not littering, putting trash in receptacles, • Sort recyclable materials (paper, bottles, cans) • Model telephone usage and practice answering the phone

DRAFT

H. Emerging Literacy-Fine Motor/Prewriting 1. Copies simple shapes 2. May attempt to draw lines and circle shapes for letters 3. Dictates a story for adult to write out 4. Draws simple pictures or scribbles word-like marks to communicate a message or an idea 5. Labels pictures as representation or oral language 6. Adjusts body position to enable writing/drawing on paper 7. Pretends to write on paper, without regard to location or direction 8. Asks adult to label pictures that he/she has drawn **I. Numeracy** 1. Uses one-to-one correspondence in sorting items (passing out napkins, spoons, glasses, etc.) 2. Fills several different containers with solids or liquids 3. Rote counts to five 4. Counts 3 objects 5. Follows directions using positional terms like top, bottom, near, far 6. Shows interest in counting books, singing counting songs, playing with phone, calculator, etc. 7. Identifies things that are big or small, heavy or light, and tall or short with assistance 8. Explores measuring tools (measuring cup, ruler) 9. Nests up to five cups 10. Identifies three geometric shapes (circle, square, triangle) 11. Imitates drawing simple shapes (circle, square, +) 12. Identifies categories of objects (ball, doll, puzzle are all toys) (dog, cat, cow are all animals) 13. Matches object and picture 14. Identifies common colors **J. Content Area Knowledge-Science** 1. Shows interest in objects found and observed (insects, rocks, shiny objects)	

2. Answers open ended questions about objects examined in the environment
3. Demonstrates ability to think before engaging in an activity
4. Makes guesses about what might happen based on past experiences
5. Comments on what it takes to make things grow ("My plant needs water." "The fish need food.")
6. Participates in stories and legends about the natural environment by asking "why" questions ("Why is the grass green?" "Why is it thundering?")
7. Identifies or labels earth's materials (water, rocks, dirt, leaves, sand)

K. Content Area Knowledge-Social Studies

1. Experiments with general terms related to the elements of time ("After school we are going to Grandma's" "Today we are going shopping")
2. Tells stories from the past, indicating awareness of time ("A long time ago . . ..")
3. Makes predictions about what may occur
4. Shows awareness of time by identifying how someone looked in the past compared to now (shows baby picture of self)
5. Recognizes and uses objects for barter or trade during play, with assistance

L. Content Area Knowledge-Economics

1. Is aware of different denominations of currency
2. Is aware of materials that have economic uses (purses, money, wallet, checkbook, credit cards, receipts)

M. Content Area Knowledge-Geography

1. Shows interest in investigating geography tools (map, globe, compass)
2. Recognizes familiar buildings (school, library, church, mall, stores)

DRAFT

N. Content Area Knowledge- Ecology 1. Uses natural objects for play (makes mud pies, house out of sticks, flowers for necklace) 2. Expresses awareness of caring for the environment inside and outside (puts trash in outside receptacle) 3. Shows awareness of materials that are recycled (plastic juice bottles, cans, newspapers) **O. Content Area Knowledge- Technology** 1. Makes age appropriate mechanical toys work 2. Says “hello” “goodbye” on the telephone instead of gesturing 3. Shows awareness of assistive technology and how it helps people	

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VI. Communication Development **Purpose:** Emphasis in this domain is on acquiring language for a variety of purposes. During the preschool period, children are learning to use language to communicate needs, interact socially with others, and share ideas, thoughts and feelings. They are increasing both their spoken and written language abilities.	
31 - 36 Months	
Indicators	**Possible Strategies for Caregivers**
A. Pragmatics 5. Tells gender when asked 6. May label and talk about own drawings when asked 7. Gives first and last name when asked 8. Regularly relates experiences from recent past **B. Receptive Communication** 7. Understands all common verbs like "run, jump, walk, etc" 8. Understands common prepositions like "under, in front of, behind" 9. Understands common adjectives of color, size, and shape 10. Carries out three simple commands given at one time 11. Shows interest in explanations that involve "why" and "how" 12. Understands concept of "one" **C. Expressive Communication** 19. Talks about his/her drawings 20. Relates experiences from recent past 21. Uses four to six word phrases or sentences 22. Uses several verb forms correctly in relating what is going on in action pictures 23. Makes negative statements ("Can't open it," "Don't touch") 24. Uses noun phrase with article ("The dog barks," "The water hot") 25. Begins to use contractions (can't, we'll, won't) 26. Uses some plural forms correctly in speech 27. Begins to use auxiliary verbs ("I hafta sleep" "Me gonna get it") 28. Uses the present progressive adding "ing" to verbs	• Label clothing, toys, materials with a child's first and last name • Point out the "family" name on the mailbox, mail, • Validate child's culture and language and see it as a valuable asset • Play games when the "girls" and "boys" do different things being sure to label the girls and boys • Sing songs and fingerplays with actions labeled • Gradually add one more command at a time until a child can carry out three simple commands • Answer the child's "why" and "how" questions to the best of your ability • Allow the child to set the table with "one" fork, spoon, knife, napkin, glass, plate, etc for each person • Talk about experiences that happened "yesterday" and will happen "tomorrow" • Enunciate clearly in conversation, exaggerating slightly those sounds that a child may be having difficulty with • Allow children to dictate a story, list or other words that you can write down

DRAFT

29. Uses the past tense 30. Uses prepositions (on, in, under, behind) 31. Uses simple possessives (“Doggies’ tail,” “Daddy’s shirt”) 32. Uses verb forms correctly (“He walks,” “She walked,” “I walked”) 33. Correctly produces phonemes (-t, -r, -b, w, -ir) 34. Uses contractible auxiliary (“Mommy’s eating an apple”) 35. Spontaneous imitation decreases 36. Dictates a story for adult to write out	

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VII. Approaches to Learning

Purpose: Research shows that children with positive attitudes and behaviors toward learning are more successful in school. The opposite is also true; children who see themselves as incapable or helpless are at risk for failure. The way children view themselves, as learners will affect the way they learn. For this reason, *Approaches to Learning* is at the heart of all learning.

31 - 36 Months	
Indicators	**Possible Strategies for Caregivers**
17. Uses questions such as "why?" and "how?" to find out about things 18. Performs multi-step tasks (takes money, rings cash register, puts money in drawer when playing) 19. Begins to use inductive reasoning (If you do this, that happens) 20. Expresses beginning understanding of cause and effect (It's quiet because you turned off the music) 21. Listens and participates in group activities 22. Enjoys opportunities for pretend play and creating things 23. Pretends and uses imagination during play 24. Alters behavior based on a past event and builds on it (This didn't work, so I will try this) 25. Relates an experience today to one that happened in the past (brush teeth before bed, washing hands before eating a meal)	• Reason out loud to model ("When I cook this meat, we can make spaghetti) • Encourage imagination with puppets, props • Use a visual schedule to assist children with the daily schedule (brush teeth before bed, story after brushing teeth, etc.) • Continue to add steps to directions given to the child as they are capable of performing more complicated tasks • Verbalize your actions as you go through daily tasks ("I need to get more paper, so we can paint this afternoon" "I will buy more soap so we can wash clothes this afternoon") • Encourage group activities by inviting other children over to the house, enrolling in community activities (library story hour, Sunday School, etc)

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VIII. Creative Expression **Purpose:** Play is a child's work. Through active play, children learn social skills from each other, language skills as they communicate, mathematical skills as they count and explore their environment, and physical skills as they run and jump. A child's enthusiasm and love of learning are maintained when the learning environment provides an ample choice of developmentally appropriate activities, with adequate time for a child to explore and express creativity through play, music and art.	
31 - 36 Months	
Indicators	**Possible Strategies for Caregivers**
D. Play 4. Looks with fascination at colorful dramatic pictures 5. Dramatizes familiar roles such as putting baby in buggy, using dress up clothes, using a stethoscope 6. Identifies favorite storybook characters E. Music 3. Shows awareness and appreciation of a variety of live and recorded music forms 4. Exhibits interest when watching musical, dance, or theater performances by other individuals F. Art 3. Demonstrates completion of project by showing finished product (scribbles, pictures) 4. Exhibits interest when watching musical, dance, or theater performances by other individuals	• Read a variety of books with colorful pictures and comment on them • Read and re-read favorite stories and comment on the characters • Play act out familiar stories such as "The Three Bears" "The Three Billy Goats Gruff" etc. • Attend live concerts, theater, dance as available and talk about the type of music presented, characters portrayed, etc. • Display child's product when they complete it and have them comment on it

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I. Physical Health and Development

Purpose: Research shows that if children are healthy and feel safe, they will learn better. Knowledge and habits of healthy living begin early in life. While young children are not in charge of providing themselves with a healthy environment and lifestyle, they can begin the lifelong process of developing habits of healthy living and physical activity.

37 - 48 Months	
Indicators	**Possible Caregiver Strategies**
8. Weighs 25-44 pounds 9. Stands 34-43 inches in height 10. Develops a full set of baby teeth 11. Sleeps 10-12 hours at night 12. Sleeps through most nights without wetting the bed (occasional accidents are still quite common) 13. Uses the toilet with some help (many boys may not be ready for toilet learning until 3 ½) 14. Has a full set of baby teeth	• Encourage physical activity habits and enjoyment that can last a lifetime. • Help your child connect learning with fun. • Teach traffic safety while pretending indoors and while on outdoor excursions. • Offer your child opportunities to lead things such as setting the table for lunch or snack, helping to fold towels and dishcloths, helping gather coats and bags for younger children and allowing him to have a piece of paper and pencil that they can list their "jobs" for the day. Tasks that they may do may take a bit more time, but the rewards to the three-year-old child may be well worth it. • Make sure that play areas are free of dangers such as used refrigerators, debris, and dangerous chemicals. • Keep electrical outlets covered and keep electrical cords out of main play areas. • Toys you may provide consist of: nesting toys, cups that stack, puzzles (306 pieces), matching games, small pegboard and pegs, puppets, toy animals, dolls, small table and chairs, crayons, washable felt tip markers, play dough, glue and paper, paint, paint brushes, stickers. • Include healthy snacks from cultures represented in the group

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II. Motor Skill Development **Purpose:** Physical development is integral to building children's self esteem, confidence, fitness, and well-being. As children refine their physical movements, they develop higher-order thinking skills that are necessary for future social and academic success. Fine motor development plays an integral part in the child's school performance. Children need well-rounded playtime with opportunities to develop both large and small motor control. The child's chosen play activities will have an enormous influence on the ability to focus and enjoy later schoolwork. The toys a child plays with will also affect motor development.	
37 - 48 Months	
Indicators	**Possible Caregiver Strategies**
A. Fine Motor: Grasp, Reach, Object Manipulation 16. Uses eye hand coordination in tossing a ring 17. Shows hand preference 18. Cuts entire length of ½ inch black line within ½ inch of line in 15 seconds 19. Copies circle, square, cross 20. Strings 4-5 small beads 21. Unscrews cap off bottle in 30 seconds 22. Winds up toys (90 degrees in one turn) 23. Cuts circle along line within ½ inch of line 24. Buttons one button 25. Laces 2 holes in lacing shoe 26. Traces simple designs 27. Holds writing tool with fingers in tripod position 28. Uses tools appropriately (wooden hammers, spoon and fork, scissors, crayons, markers, pencils) 29. Performs tasks using more refined and dexterous motions (buttoning, zipping, attempts tying shoes) 30. Draws a person with head and 1-3 additional features **B. Posture/Balance** 4. Stands on one foot for 5-6 seconds 5. Stands on tiptoes with hands over head for 2 seconds without moving feet 6. Executes movements that require a stable base (raising foot to put a sock on while seated, balancing on one foot, bending from side to side while standing)	• Provide a tool center with real child-sized tools, including screwdriver, hammer, pliers, wrench, nuts, bolts, wood, and nails. Direct instruction is given as to the proper use of the tool center and adult supervision is needed at all times. • Provide opportunities to develop motor skill control by letting children peel fruits such as oranges, squeezing glue bottles and fitting interconnecting blocks. • Supply dress-up clothes with buttons, snaps, zippers and snaps. • Include whole-hand and finger activities such as finger printing, finger painting, playing with play dough, and finger plays such as "Where is Thumbkin?" • Provide opportunities for children to use technology such as tape recorders, calculators, computers, play cameras/video recorders, telephones, and cash registers where they push buttons, dial, hold objects still, and open and close drawers. • Observe the use of child size scissors with thumb on one side and 3rd and 4th finger on other side, with 2nd finger being used to guide direction of the cutting. • Provide activities such as tightening and loosening nuts and bolts, screwing and unscrewing lids on jars, tearing paper, and squeezing objects such as clothespins, tweezers and eye droppers which will support the development of the use of thumb and forefinger pads to hold objects (pincer grasp). • Observe whether the child is holding the tools with the palm or with a tripod finger grasp. • Make a variety of writing instruments available (crayons, markers,

DRAFT

C. Locomotion: Crawling, Walking/Running, Climbing 9. Stops from a full run 10. Walks on tiptoe for 9 feet 11. Walks upstairs and downstairs alternating feet without holding on to rail 12. Walks backward without stepping off taped line more than once 13. Demonstrates body spatial awareness in relationship to stationary objects 14. Experiments with galloping and skipping 15. Uses quick stops or changes in direction to avoid contact with moving objects or other people 16. Explores a variety of movements (pulling, crawling, catching balls, throwing bean bags, waving scarves, kicking balls, etc.) **D. Active Motor: Throwing, Jumping, Kicking** 16. Bounces ball to wall 17. Catches ball with elbows bent in front of body 18. Jumps over rope or hurdles 8 inches off floor 19. Jumps distance of 24 inches 20. Hops 5 feet 21. Pedals tricycle 10 feet 22. Jumps down from 16-18 inches at three years of age and 24-30 inch object without support at three and a half years of age (take off and land with both feet) 23. Hops 5 times on one foot and 3 times on other foot 24. Throws ball 10 feet (rotates shoulder and arm to rear, then follow through). Ball must not deviate more than 20 degrees 25. Jumps forward 6 inches on one foot 26. Underhand toss; hits target from 5 feet away 27. Jumps rope for two cycles 28. Stands on one foot for 2-5 seconds 29. Gallops 30. Skips 5 steps	pencils in a variety of sizes and thicknesses). • Choose a variety of appropriate puzzles for use within the learning environment. • Provide a small pitcher for children to use when pouring drinks or in tub during bath time. • Provide equipment such as paddles, balls, balloons, and tee ball stands to allow children practice with batting • Allow children to easel paint on an easel or other slanted surface. • Arrange jump ropes and hula hoops on the floor to challenge children to jump into and out of the hula hoops and over the jump ropes without touching them. • Design relay races where children can run forward on a line to complete an action such as touch a wall or pick up an object. • Provide nontraditional equipment for children to practice throwing and catching, such as balloons, bandanas, scarves and newspaper balls. • Play mirror games with children where the leader slowly moves one body part and the others mirror the movement. • Practice balancing on one foot near a wall. Allow children to utilize the wall as they need and gradually encourage free standing while balancing. • Incorporate movement games into outdoor time such as “Red Light, Green Light,” “Ring Around the Rosie,” “Follow the Leader,” “Freeze Tag,” where children can run and stop or change direction while in motion. • Play games where children respond to cues such as moving to a drumbeat or music. Children match movements with the beat, moving slowly to a slow beat and moving quickly to a fast beat and freezing when there is no beat. • Have children move in straight, curvy, and zigzag lines as they at out stories, sing songs or explore movements.

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III. Personal, Social and Emotional Development

Purpose: A positive self-concept and emotional development are the foundation for all learning. Social skills are necessary for participating in the most basic interchanges, such as conversations and turn-taking. Studies show that children who are socially competent and emotionally secure are better able to participate in learning experiences in positive ways. For many children, the preschool years are the first experiences in a non-family, structured social environment. In these settings they are beginning to acquire abilities, which will allow them to develop cooperation, conflict resolution, self-regulation, and responsibility skills. Although many of these skills will be learned and refined by interacting with peers, children profit from the guidance of knowledgeable and caring adults.

37 – 48 Months	
Indicators	**Possible Caregiver Strategies**
A. Relational Behaviors/Attachment 19. Responds to and makes verbal greeting 20. Delivers simple messages 21. Begins to use expressions such as, "Please" and "Thank You" 22. Changes tone of voice and sentence structure to match listener's level of understanding 23. Plays with and talks to other children at work on a project for extended period 24. Enjoys playing alone, but near other children 25. Interacts with groups or pairs of peers based on similar interest in play 26. Begins to show cooperative play without adult supervision 27. Shows preference for some friends over others 28. Sometimes shows preference for one parent (often the parent of the opposite sex) 29. Enjoys helping with simple household tasks 30. Spends a great deal of time watching and observing 31. Makes and maintains a friendship with at least one other child 32. Seeks attention and approval of adults 33. Accepts suggestions and follows simple directions 34. Makes simple choices between two things 35. Enjoys making others laugh and being silly 36. Enjoys playing with other children briefly, but still may not cooperate or share well **B. Self Awareness/Expression/Regulation**	• Demonstrate problem-solving techniques in relationships • Acknowledge, respect and validate children's expressions of emotions • Guide and assist children in choosing words to express their emotions and those of their peers • Value children's expressions of negative emotions as teaching opportunities • Have set routines throughout the day • Provide daily opportunities for children to self select activities, clothes, etc. • Help children expand play to gradually increase time on task as appropriate • Reserve time for children to share their work and play with an adult • Communicate recognition of children's efforts • Take turns with children gradually lengthening the time between the child's turn • Model, then allow children to practice, expressing themselves based on different emotions or situations • Guide children through "What would you do?" based on everyday situations • Encourage children to tell others how they feel when they are faced with a conflict, experience success, sadness or fear • Display children's work and products • Value children's responses and provide immediate feedback or positive acknowledgement when children make attempts to

12. Plays independently for a long period of time 13. Demonstrates fears (mechanical toys, vacuum cleaner, thunder, dark) 14. Shows affection toward younger siblings 15. Wants to be "big girl", "big boy", and acquire new skills 16. Enjoys hearing stories about self, playing "house," imitating 17. Answers the question, "Are you a boy or a girl?" correctly 18. Identifies feelings, likes and dislikes, but may not be able to explain why 19. Communicates emotions to peers in an appropriate manner 20. Describes self using several basic characteristics (first and last name, gender, age, family, talents, skills, etc.) 21. Uses materials in a self-directed manner 22. Expresses interest in ethnic identities of self and others if exposed to multicultural settings **C. Social Conventions** 15. Generally obeys adult request 16. Begins to share toys willingly 17. Increasing rough and tumble play 18. Plays with imaginary companion 19. Says "Please" when asking for something 20. Helps with small household tasks 21. Understands another's perspective 22. Accepts suggestions and follows simple directions 23. Manages transitions 24. Connects consequences to a specific behavior, but may not understand why the behavior warrants the consequence 25. Accepts the consequences of one's own actions 26. Uses multiple strategies to solve problems 27. Asks for help from other sources when solving social and/or cognitive problems 28. Follows routines independently and completes familiar routines	participate in conversations • Give children opportunities to work in small independent groups where rules are understood and they are able to practice social skills along with the task at hand • Collaborate with children in establishing developmentally appropriate rules • Incorporate rules into daily routines ("We respect each other when we sit without touching others" "We respect others when we ask them if we can play with their toys") • Post simple picture schedules at children's eye level with large pictures and 1-2 word descriptions indicating the sequence of activities for the day • Establish daily routines so that children know what to expect, but do not suppress flexibility and spontaneity at the expense of following routines • Review daily activities so that children can anticipate events (trip shopping, preschool, grandparents arrival) • Set clear, modeled, and consistent behavioral expectations • Remind children of expected behavior in certain situations • Make requests respectfully, using "please" and "thank you" • Identify emotions as they are expressed by the children in daily routines • Use literature as a tool for identifying and discussing a wide variety of emotions • Demonstrate and acknowledge acts of empathy • Model and verbalize empathetic thoughts and actions • Guide children, offering words for them when they are unable to express themselves • Validate children's feelings, but not necessarily their behavior • Provide opportunities for children to practice interpreting expressions and gestures during play, stories, music, etc • Coach children in understanding verbal and physical cues of others • Model appropriate ways to ask for help • Help children take steps to comfort others as appropriate

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IV. Self-Care and Independence Purpose:	
37-48 Months	
Indicators	**Possible Caregiver Strategies**
A. Eating 9. Feeds self with spoon and small fork, spilling very little 10. Butters bread with small knife 11. Holds spoon palm down 12. Carries a filled cup 13. Pours liquid from pitcher to cup 14. Served self food without assistance 15. Licks lip to remove all particles of food/liquid 16. Gets own drink at drinking fountain **B. Self Care** 17. Urinates without toileting assistance 18. Usually dry at night 19. Snaps front buttons 20. Puts shoes on correct feet without assistance 21. Buttons large front buttons, but may have difficulty 22. Removes pullover garment 23. Independent with pull down garments 24. Unbuttons small front buttons 25. Unzips; Separates front zipper 26. Washes and dries hands 27. Turns faucet on/off 28. Wipes nose when reminded 29. Bathes self with some assistance 30. Puts on boots/shoes (but may not tie laces) 31. Dresses self completely, except for tying shoelaces 32. Feeds self (with some spilling) **C. Clean Up** 4. Puts away toys 5. Likes to help with adult activities in house and garden	• Involve all children in group jobs, delegating fairly and enabling all children to be contributors to a caring learning environment • Encourage independence with tasks that a child is able to complete by himself • Children can practice pouring water from container to container while bathing • Keep a small stool available to enable children to reach a drinking fountain • Softened butter will assist children in ease of spreading • Praise children for any small effort to toilet independently • A small mark/sticker on shoes may assist children in identifying the correct shoe for the right foot • Encourage all attempts at dressing while assisting just enough to avoid frustration • Keep a rag handy to wipe small spills when a child may spill • Have containers available and clearly labeled with words or pictures for specific toys • Provide child-sized tools (rakes, hoes, brooms) to enable children to assist with activities • Assign chores appropriate to a child's skills and attention • Help maintain orderly materials by providing appropriate space and containers • Show the clock to your child, teaching him that "when the long hand gets to the 12, we will go to the store," etc. • Model appropriate social skills while on the telephone • Have your child practice answering the phone while you "call" him

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6. Helps with extra chores when asked **D. Daily Living Skills** 3. Shows understanding of function of clock 4. Answers the telephone appropriately	

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V. Cognitive Development

Purpose: This domain recognizes the child's search for meaning as the basis for intellectual development. The focus is on children's curiosity about the world and their ability to acquire, organize, and use information in increasingly complex ways.

37-48 Months	
Indicators	**Possible Caregiver Strategies**
A. Preoperational Processing 1. Matches an object to a picture of that object 2. Can solve problems if they are simple, concrete, real and immediate 3. Interested in similarities and differences 4. Distinguishes same and different concepts 5. Can distinguish, match and name colors 6. Interested in features of animals that make them unique 7. States his age 8. Identifies objects that influence or effect other objects (food coloring makes the frosting blue) 9. Asks "why" questions to show effort at understanding causation 10. Explains the effects that simple actions may have on objects (If you turn off the light, it will be dark) 11. Recognizes which element of an object causes the effect in simple relationships (pebbles inside the box make the noise when you shake it) 12. Compares experiences (building a bridge with one child compared to building a bridge with another child) 13. Organizes objects by more than one attribute (color <u>and</u> shape) 14. Uses comparative words (faster, slower) 15. Generates a strategy based on one learning event and extends it to a new learning opportunity (learns that mixing red and yellow paint makes orange and later tries mixing red and yellow frosting) 16. Explores various ways to solve a problem and selects one option 17. Seeks assistance from another child or an adult to solve problems 18. Modifies actions based on new information and experiences	• Play concentration/memory games with only a few choices to turn over, gradually adding more items to match as the child progresses • Talk about a variety of topics and illustrate ways to use language to ask questions, give answers, make statements, share ideas, use pretend fantasy or word play • Build on children's interests by introducing new vocabulary and ideas • Provide for children to engage in turn-taking and dialogue in conversation • Encourage children to talk about and predict what will happen next in a story • Write down dictation of child (lists, stories, labels) • Help children learn about sequences in books, such as beginning, middle and end • Provide opportunities for children to repeat familiar rhymes and experiment with beginning word sounds • Sing the alphabet song while pointing to the letters of the alphabet • Spell out loud children's names while printing them, items as you write them on a list, labels of pictures, etc. • Label children's toys, items to help them recognize their own name • Encourage children's interest and attempts to copy or write letters and their own name • Play auditory games with words that sound similar ("Find the four" "Find the floor") • Play alphabet bingo while showing the child the letter at the same time you label it • Provide a visual schedule to be followed from left to right, top to bottom • Provide a variety of writing utensils. If the child has difficulty with

(changes base of tower when it continues to fall down) **B. Emerging Literacy-Language** **C. Emerging Literacy-Phonological Awareness** 1. Participates in and creates songs, rhymes, and games that play with sounds of language (claps out sounds or rhythms of language) 2. Identifies initial sound of words, with assistance (book begins with /b/ sound) 3. Makes three or more letter-sound correspondences (Dominic, dog and donut all begin with /d/) 4. Finds objects in a picture with the same beginning sound, with assistance 5. Differentiates between similar sounding words (four and floor) **D. Emerging Literacy-Alphabetic Principle** 1. Knows that alphabet letters are a special category of symbols/pictures that can be individually named 2. Begins to associate letter names with social print seen (Target begins with "T", there is an "m" in McDonald's) 3. Recites all letters of the alphabet 4. Associates the names of letters with their shapes 5. Correctly identifies ten or more letters of the alphabet 6. Identifies letters to match the said aloud letter name **E. Emerging Literacy-Print Awareness** 1. Identifies some individual letters in a book 2. Shows understanding that letters make up words 3. Identifies words that look similar and different with assistance 4. Recognizes several signs and symbols in the environment 5. Recognizes own name when spelled out in letters 6. Imitates common reading activities appropriately in play (pretends to read recipes, directions for putting things together, etc)	grasp, place the writing surface on a slant to allow the grasp to correct itself • Allow child to write a "list" for you with symbols representing the items on the list • Integrate mathematics throughout the day, such as counting out snacks/crackers, naming the shapes of cheese, blocks etc., seriating objects during dramatic play for the baby, mommy, daddy, counting beats in musical rhythms, counting how many steps from the door to the table, counting the chairs by the table, counting plates on the table, finding circles around the environments, counting certain items, finding patterns, shapes, etc. • Provide various sizes of cups, pitchers for pouring and experimenting in water play, bath time, etc. • Point out that there are 5 plates for 5 people, • Ask children to count out and group a desired number of objects (crackers, crayons) for each one • Provide play money for children to use in a play store where they can pretend to buy items (3 dolls cost 3 dollars) • Provide a wide variety of concrete objects and guide children as they explore attributes such as texture, size, shape, color, patterns, sounds and use. • Make a variety of tools available for children's use (magnifying glasses, binoculars, maps) • Mark off days on a calendar until a specified event • Sort coins by name before putting them in a bank or have a different container for each type of coin

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7. Uses signs in the environment for information (elevator buttons, exit signs) 8. Knows the difference between printed letters and drawings 9. Shows awareness of the difference between own writing and conventional print 10. Shows awareness of at least two different writing systems (especially appropriate for English Language Learners) 11. Follows a visual schedule from left to right, top to bottom **F. Emerging Literacy-Comprehension** **G. Emerging Literacy-Book Behaviors** 1. Knows the first and last page of a book 2. Understands that print progresses from left to right and top to bottom 3. Uses pictures to predict a story 4. Recites some words in familiar books from memory 5. Fills in the blanks/missing information in a familiar story 6. Identifies major characters in stories 7. Begins to understand the sequence of stories (beginning, middle, end) 8. Makes up an ending for a story 9. Pretends to read a familiar book 10. Enjoys a variety of genres (poetry, folk, fairy tales, concept books, magazines) 11. Makes connections between characters in books or movies, with people in real life 12. Questions if characters in books and movies are real or not **H. Emerging Literacy-Fine Motor/Prewriting** 1. Adult pencil grasp 2. Draws basic geometric shapes 3. "Pretends" to write stories by scribbling 4. Attempts to copy one or more letters of the alphabet and, or, numbers 5. May write name or familiar letters 6. Begins to draw representational figures	

7. Labels pictures by using letter like marks
8. Uses pretend pre-writing activities during play to show print conventions in home language
9. Uses letter like symbols to make lists, letters, and stories
10. Copies some environmental print/symbols

I. Numeracy

1. Can count 2-3 objects
2. Names some numerals
3. Recognizes that a single object is "one" regardless of size, shape, or other attributes
4. Understands that numbers represent quantity
5. Applies numbers and counting concepts to daily life (counts the number of children who have raised their hand)
6. Differentiates some letters from numerals
7. Recognizes, names and write some numbers
8. Uses activities that explore and develop vocabulary for length and weight
9. Uses measuring tools in play activities (measuring cups, measuring tape, rulers, yardsticks)
10. Labels objects using size words (big, little, short, tall)
11. Identifies and labels different kinds of two dimensional shapes (circle, rectangle, triangle, square)
12. Compares shape and size of objects
13. Creates builds or draws shapes (circle, triangle, square, cross)
14. Orders 4 shapes from smallest to largest or largest to smallest
15. Creates own pattern with a variety of materials
16. Tells which comes next in an AB pattern (red, blue, red, ____)
17. Classifies objects that go together (bat/ball, bread/butter, dirty clothes/washing machine)
18. Recognizes charts and graphs as a way to collect, organize, record and describe information

J. Content Area Knowledge-Science

1. Identifies and distinguishes senses (tastes, sounds, textures, sights, smells)

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2. Uses tools to explore environment (magnifying glass, magnets, tweezers, scales) 3. Participates in experiments provided by adults and describes observations (baking soda and vinegar volcano, food coloring and celery) 4. Recognizes charts and graphs as a way to collect, organize, record and describe information 5. Asks questions and finds answers through active exploration 6. Records information from an experience (drawing, storytelling, writing, photographing, on the computer, graphing, charting, etc) 7. Makes predictions and develops generalizations based on past experiences (growing seeds) 8. Uses vocabulary that shows recognition of scientific principles to explain why things happen (uses words such as float, sink, melt, freeze) 9. Identifies things as living or non-living based on their characteristics (grows, breathes, moves) 10. Describes characteristics of plants, animals, and people ("That man is really tall," "This flower is yellow," "That horse is big," "That tree is tall") 11. Notices similarities, differences, and categories of plants and animals 12. Demonstrates understanding of changes in the appearance, behavior, and habitats of living things (seeds/plants, spider/spider web, fish/water, newly mowed grass) 13. Asks questions about growth and change in plants and animals 14. Assumes responsibilities for care of living things (feeds fish, waters plants) with assistance and reminders 15. Investigates properties of rocks, dirt and water 16. Recognizes and provides simple descriptions of states of matter ("Water is wet," "This dirt is dry,") 17. Makes simple observations of the characteristics and movement of the sun, moon, stars and clouds 18. Uses common weather related vocabulary to discuss changes in the weather and seasons (rainy, foggy, cloudy, snowy, windy)	

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K. Content Area Knowledge-Social Studies 1. Retells a simple story (roughly in a sequential order) 2. Uses time-related words and concepts (first/last, morning/night, yesterday/today) although may not always be accurate 3. Gives simple accounts of what happened that day (verbally, pictures, assistive technology) 4. Establishes causal patterns between the past, present and future events, with assistance 5. Uses phrases that suggest awareness of the past ("When I was little . . ." "When I was a baby . . .") 6. Shows awareness of time keeping materials (points to watch and asks what time it is, looks at calendar and asks how many days until _____) **L. Content Area Knowledge-Economics** 1. Demonstrates awareness of money being needed to purchase goods or services 2. Plays store or restaurant with play or real money, receipts, credit cards, telephones, computers 3. Demonstrates understanding that coins of different sizes and colors have different names 4. Identifies at least two types of currency (penny, dollar, quarter) 5. Talks about what he/she wants to be when they grow up 6. Demonstrates understanding of sharing and interdependence 7. Is aware that there are substitutes for money (credit cards, debit cards, checks, coupons) **M. Content Area Knowledge-Geography** 1. Uses words to indicate direction, position, and size, although not always accurate 2. Creates representations of locations and space during play (builds roads out of blocks, makes hills and bridges with blocks or in sand box) 3. Names street, neighborhood, city or town where he/she lives 4. Understands physical relationships (on/under, inside/outside,	

first/last, top/bottom) 5. Participates in walks and, or, field trips to places in the community and recalls landmarks at conclusion of trip 6. Matches objects to their usual geographic locations (toothbrush to bathroom, bed in bedroom, couch in living room, stove in kitchen, tree in yard) 7. Develops awareness of some characteristics of own geographic region ("It is hot here," "We get lots of snow,") 8. Recognizes where he/she is while traveling in familiar areas, most of the time (recognizes landmarks while traveling to the mall, library, etc) 9. Recognizes that roads have signs, names or numbers to help identify a route 10. Recognizes that houses/apartments have numbers to help identify locations **N. Content Area Knowledge- Ecology** 1. Shows awareness of environment by noticing features of own home and other familiar places 2. Recognizes things that do not belong in the environment (trash/litter) 3. Participates in protecting equipment and materials from weather or other natural phenomena (puts bicycle or tricycle in shed or garage, puts toys in covered sand box) 4. Helps to sort cans, bottles, and paper into the proper recycling containers **O. Content Area Knowledge- Technology** 1. Communicates with family members or other familiar people using telephone or other communicative device with assistance 2. Identifies some materials as natural or as human-made and explains how he/she knows the difference 3. Describes stories, images, or sounds experienced with technology 4. Uses accurate vocabulary to identify technology (camera, computer, printer, television, telephone, CD player, radio,	

communication board) 5. Shows awareness of a variety of technology devices (cash registers, adding machines, calculators, mechanical toys, voice activated materials, wheel chairs, standers) 6. Constructs simple objects or tools to assist in a task	

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VI. Communication Development **Purpose:** Emphasis in this domain is on acquiring language for a variety of purposes. During the preschool period, children are learning to use language to communicate needs, interact socially with others, and share ideas, thoughts and feelings. They are increasing both their spoken and written language abilities.	
37 - 48 Months	
Indicators	**Possible Strategies for Caregivers**
A. Pragmatics 9. Refers more frequently to the activities of others 10. Refers more frequently to objects and events removed in time 11. Changes tone of voice and sentence structure to listener's level of understanding 12. Uses some alternative forms that take context differences into account (speaker, hearer, pronoun distinctions, articles and ellipsis based on shared information) 13. Elaborates and expands other's utterances 14. Asks questions about persons and things 15. Verbalizes opposite analogies 16. Completes simple analogies ("We eat with a ___," "We sleep on a _____.") **B. Receptive Communication** 12. Follows 3 step commands given in a complex sentence 13. Comprehends congruent and incongruent tasks ("Can you stand up and sit down at the same time?") 14. Understands temporal terms (before and after) 15. Understands "now, soon, later" 16. Understands prepositions in temporal expressions (in a week, after awhile) 17. Understands concept of more 18. Listens attentively to short stories; likes familiar stories told without any changes in words 19. Recognizes everyday sounds 20. Selects specific details in a story and repeats them 21. Responds to questions with appropriate answers 22. Gains information through listening	• Comment on children's conversations (Yes, we did that last week, didn't we?") • Continue to engage in longer conversations with the child • Read literature with opposites and exaggerate the words with gestures • Use visual schedules and point out what activities will happen "before," "after," "later" • Continue to read literature that gradually increases in length • Repeat familiar and favorite stories • Ask child what will happen next in a familiar story • Expand on stories with more information as requested • Understand that a certain amount of dis-fluency is normal, but consult a speech pathologist if it continues, appears to worsen or does not improve • Continue to label objects and materials with color words (Please hand me the green sock") • Read a variety of literature with questions, rhyme, and other variations • Have the child relay a short message from you to another person, gradually lengthening the message to be relayed • Encourage a variety of communication methods (drawing pictures, communication boards, schedules, lists, words, labeling) • Sing simple songs • Listen to a variety of music • Make tapes, cd's and records available for children to select and play

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C. Expressive Communication 26. Average sentence length is four words 27. Speaks clearly enough so that 75-80 percent of speech is understandable to the unfamiliar listener 28. Stumbles over words at times 29. Uses negative phrases other than “No” (“Don’t do that!”) 30. Names four colors 31. Uses irregular plurals (sheep, leaves, mice) 32. Uses prepositions in phrases (“The box is behind the couch”) 33. Uses possessive pronouns (his, hers, theirs) 34. Correctly produces phonemes (s, -l, -g, er) 35. Begins to use the articles “the” and “a” 36. Responds correctly to questions (who, when, where) 37. Adverbs are emerging (softly, loudly) 38. Uses “s” to make plural nouns 39. Uses “ed” on verbs to include past tense (petted, walked, cooked) 40. Consistently uses complete sentences 41. Uses imperatives (“Do it!”) 42. Enjoys singing a simple tune 43. Recounts some details of a recent event 44. Tells a short make believe story with assistance 45. Uses oral language to communicate a message 46. Participates in conversations about a variety of topics 47. Mimics animal sounds 48. Repeats words or ideas to be sure information is communicated 49. Relays simple messages (from one person to another) 50. States point of view, likes/dislikes, and opinions using words, signs or picture boards	

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VII. Approaches to Learning **Purpose:** Research shows that children with positive attitudes and behaviors toward learning are more successful in school. The opposite is also true; children who see themselves as incapable or helpless are at risk for failure. The way children view themselves, as learners will affect the way they learn. For this reason, *Approaches to Learning* is at the heart of all learning.	
37 - 48 Months	
Indicators	**Possible Strategies for Caregivers**
16. Focuses on tasks of interest to him/her 17. Remains engaged in an activity for at least 5-10 minutes 18. Completes favorite tasks and activities over and over again 19. Persists in trying to complete tasks when previous attempts have not been successful (completing a puzzle, building a tower or structure, dressing self) 20. Uses at least two strategies to solve problems 21. Participates in meal times with minimal distractions 22. Invents new activities or games 23. Uses imagination to create a variety of ideas 24. Creates acceptable rules for group activities 25. Makes up words, songs, or stories 26. Engages in extensive pretend play (playing house, dinosaurs, fireman, etc.) 27. Tells others about events that happened in the past 28. Represents things in environment with available materials, moving from simple to complex representations (building a bridge, structure or road from blocks) 29. Thinks out loud and talks through a situation 30. Works out problems mentally rather than through trial and error	• Encourage meal time together with conversations that engage the child • Extend topics beyond immediate activities by engaging the child in meaningful open-ended conversations (“What are you going to do in the morning?” “What did you do for your birthday?”) • Provide materials that can be utilized for props in pretend play (rope for fire hose, various hats, boxes, etc.) • Encourage trial and error activities to solve problems (“Let’s see if this will work” “What else do you think we could try?”) • Support imaginative activities such as pretend play and other activities

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VIII. Creative Expression **Purpose:** Play is a child's work. Through active play, children learn social skills from each other, language skills as they communicate, mathematical skills as they count and explore their environment, and physical skills as they run and jump. A child's enthusiasm and love of learning are maintained when the learning environment provides an ample choice of developmentally appropriate activities, with adequate time for a child to explore and express creativity through play, music and art.	
37 - 48 Months	
D. Play 2. Participates freely in dramatic play activities (pantomimes movement of familiar things, acts out stories, re-enacts events from his/her own life E. Music 8. Participates in group music experiences (singing, finger plays, chants, musical instruments) 9. Remembers the words to songs that are repeated often 10. Asks to sing a particular song 11. Pretends to be on stage and uses a microphone to sing 12. Watches other children dance, then tries to mimic the dance steps 13. Hums or moves to the rhythm of recorded music 14. Wonders about or asks questions about songs and dance F. Art 9. Enjoys playing with clay or play dough (pounds, rolls, and squeezes it) 10. Tries one type of art many times (painting at easel several days in a row, using different colors or covering the whole paper with one color) 11. Performs simple elements of drama (audience, actors, stage) 12. Shows awareness of various types of art found in books, photographs and on the computer 13. Experiments with a variety of materials (watercolors, collage materials, paints, paper, scissors, glue, crayons) 14. Listens attentively at a children's concert, play or puppet show 15. Shares various forms of art found in own environment 16. Wonders about or asks questions about works of art and	• Attend group musical, theatrical or dance activities • Provide background for various musical or dance presentations • Make play dough with your child and talk about the process and products • Provide various materials with which the child can manipulate play dough (roller, sticks, fork, etc) • Explain the illustrations in familiar books and how the illustrator accomplished them • Provide a variety of music (tempo, rhythm, etc) for the child to listen, move, sing, etc. • Allow the child to experiment with a variety of artistic materials (paint, glue, play dough, water colors, finger paints, glitter, stickers, paper, scissors, crayons, markers) • Model how a simple box /chair/other common material can be a stage, puppet theater

theatre	

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Other State Early Learning Guidelines for Young Children

Arizona	*Early Childhood Education Standards* http://www.ade.az.gov/earlychildhood/downloads/ECE-Standards.pdf
Arkansas	*Arkansas Early Childhood Education Framework* http://www.arkansas.gov/childcare/ARKANSAS%20EARLY%20CHILDHOOD%20EDUCATION%20FRAMEWORK.pdf *Arkansas Framework for Infant and Toddler Care* http://www.arkansas.gov/childcare/bench.pdf
California	*Desired Results Developmental Profiles* Introduction to the Desired Results is at http://www.cde.ca.gov/sp/cd/ci/desiredresults.asp Reference materials and forms (including the profiles) are accessible from http://www.cde.ca.gov/sp/cd/ci/drdpforms.asp
Colorado	*Building Blocks to Colorado's Content Standards* http://www.cde.state.co.us/earlychildhoodconnections/early.htm
Connecticut	*The Connecticut Framework: Preschool Curricular Goals and Benchmarks* http://www.state.ct.us/sde/deps/early/Frmwrkbench.pdf *Guidelines for the Development of Early Learning for Infants and Toddlers (Draft)* http://www.wheelerclinic.org/children/ELGdraft2forweb.pdf
Delaware	*Early Learning Foundations for School Success* http://www.doe.state.de.us/early_childhood/Standards/28372_Schoolbook.pdf
Florida	*Florida School Readiness Performance Standards* http://www.schoolreadiness.org/lc/lc_performance.asp
Georgia	*The Standards of Care Program* http://www.osr.state.ga.us/Documents/PreK/ContentStandardsRvd.doc *Growing Smart and Healthy Babies* http://health.state.ga.us/pdfs/familyhealth/hccg/growinghealthysmart.0103.pdf
Hawaii	*Hawaii Preschool Content Standards for Center Based Programs* http://www.goodbeginnings.org/standards.htm
Idaho	*Idaho Early Learning Standards* http://www.sde.state.id.us/SpecialEd/content/early.asp
Illinois	*Illinois Early Learning Standards* http://www.illinoisearlylearning.org/standards/index.htm
Indiana	*The Foundations for Young Children to the Indiana Academic Standards*

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	http://www.doe.state.in.us/primetime/docs/PreschoolFoundations.doc
Iowa	*Iowa Early Learning Standards* http://www.iowachildnetwork.org/new_page_5.htm
Kentucky	*Early Childhood Standards* http://www.education.ky.gov/KDE/Instructional+Resources/Early+Childhood+Development/default.htm
Louisiana	*Louisiana Standards for Infants and Toddlers* http://www.dss.state.la.us/documents/OFS/StandardsforInfantsandToddlers.pdf *Louisiana Standards for Programs Serving Four-Year-Old Children* http://www.doe.state.la.us/DOE/assessment/standards/PDFs/PrekStandards6-02-02.pdf
Maine	*Maine's Learning Results: High Standards for All Students* http://www.state.me.us/education/lres/lres.htm
Maryland	*Guidelines for Healthy Child Development and Care For Young Children (Birth – Three Years of Age)* http://www.dhr.state.md.us/cca/pdfs/guidechild.pdf *Maryland Model for School Readiness* http://www.mdk12.org/instruction/ensure/MMSR/index.html
Massachusetts	*Early Childhood Program Standards for Three and Four Year Olds* http://www.doe.mass.edu/els/standards/ecp_standards.pdf *Guidelines for Preschool Learning Experiences* http://www.doe.mass.edu/els/standards/ple_guidelines.pdf
Minnesota	*Minnesota Early Childhood Indicators of Progress: A Resource Guide* http://education.state.mn.us/content/086302.pdf
Mississippi	*Mississippi Pre-Kindergarten Curriculum* http://www.mde.k12.ms.us/acad/ID/curriculum/LAER/MsPreK.pdf
Missouri	*Pre-K Standards* http://www.dese.state.mo.us/divimprove/fedprog/earlychild/PreK_Standards.html
Montana	*Early Learning Guidelines (2003)* http://www.montana.edu/wwwecp/pdfs/MTEarlyLearningGuidelines.pdf
Nebraska	*Nebraska's Early Learning Guidelines 3-5 Year Olds* http://www.nde.state.ne.us/ech/ELGuidelines/index.htm
Nevada	*Nevada Pre-Kindergarten Content Standards* http://www.doe.nv.gov/equity/Pre-K%20Standards.pdf

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New Jersey	*Early Childhood Education Program Expectations: Standards of Quality* http://www.nj.gov/njded/ece/expectations/ *Abbott Preschool Program Implementation Guidelines* http://www.state.nj.us/njded/ece/abbott/guidelines/guidelines.htm
New Mexico	*Best Practices: Essential Elements of Quality* http://www.gisd.k12.nm.us/standards/preK/index.html
New York	*Preschool Planning Guide: Building a Foundation for Development of Language and Literacy in the Early Years* http://www.emsc.nysed.gov/ciai/pub/presch1.pdf http://www.emsc.nysed.gov/ciai/pub/presch2.pdf
North Carolina	*Preschool Standards* http://www.ncpublicschools.org/success/standards/index.htm
Ohio	*Early Learning Content Standards/Prekindergarten Academic Content Standards* http://www.ode.state.oh.us/ece/standards1/
Oklahoma	*Oklahoma Pre-Kindergarten Curriculum Guidelines* http://title3.sde.state.ok.us/early/Pre-Kcurriculumguidelines.pdf
Pennsylvania	*Early Childhood Learning Continuum Indicators for Reading, Writing, Speaking and Listening and Mathematics* http://www.pde.state.pa.us/nclb/lib/nclb/earlychildhoodcontinuum.pdf
Rhode Island	*Rhode Island Early Learning Standards* http://www.ridoe.net/child_family/earlychild/ELS_Booklet.pdf
South Carolina	*South Carolina Learning Standards for 4 and 5 Year Olds* http://www.myscschools.com/offices/ece/
South Dakota	*South Dakota Early Learning Guidelines* http://www.usd.edu/sdaeyc/guidelines.pdf
Tennessee	*Tennessee Early Childhood Early Learning Developmental Standards* http://www.state.tn.us/education/ci/cistandards2001/earlychildhood/ciearlychidcover.htm
Texas	*Prekindergarten Curriculum Guidelines* http://www.tea.state.tx.us/curriculum/early/prekguide.html
Utah	*Prekindergarten Guidelines* www.schools.utah.gov/curr/preschool-kindergarten/PDF/PreKindergartenGuidelinesFINALDRAFT.p.
Vermont	*Vermont Early Learning Standards* http://www.state.vt.us/educ/new/pdfdoc/pgm_earlyed/vels_03.pdf *Vermont's Framework of Standards and Learning Opportunities*

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	http://www.state.vt.us/educ/new/pdfdoc/pubs/framework.pdf
Virginia	*Virginia's Foundation Blocks for Early Learning* http://www.pen.k12.va.us/VDOE/Instruction/Elem_M/FoundationBlocks.pdf
Washington	*Washington State Early Learning and Development Benchmarks* (Draft) http://www.k12.wa.us/EarlyLearning/pubdocs/EarlyLearningBenchmarks.pdf
West Virginia	*Early Learning Standards Framework: Content Standards and Learning Criteria for West Virginia Pre-Kindergarten* http://wvde.state.wv.us/policies/p2520.15_ne.doc
Wisconsin	*Wisconsin Model Early Learning Standards* http://www.dpi.state.wi.us/dpi/dltcl/bbfcsp/pdf/ecelstan.pdf
Wyoming	*Wyoming Early Childhood Readiness Standards* http://www.k12.wy.us/eqa/nca/pubs/standards/earlychild.pdf