

Early Child Development Issues

When a young child is suffering from a mental health issue, he or she may not be able to communicate his or her feelings to you in a way that you understand. Luckily, young children are good at showing their parents when they are in a healthy state—they are curious, enchanting, persistent, and confident. When young children are in an unhealthy state, they can be listless, distracted, aggressive, or insecure.

Even though all children go through the same development stages, every child goes through those stages at his or her own pace. Some children develop quickly and others at a slower pace. Sometimes, those children who develop at a slower pace may catch up with other children their age. However, in some cases, there may be a delay in development. A developmental delay occurs when a child does not develop basic skills (for example, walking or talking) by a

certain age. If you feel there is an extreme difference between the social, emotional, or motor skills development of your child and other children of the same age, then it is possible he or she may have a mental health issue.

TIP

Check in with your childcare provider about your child's development. As the provider spends a good amount of time interacting with your child, he or she may be the first to notice if your child is behind other children his or her age in terms of development.

Knowing when to seek help for your child

If you suspect that your child has a mental health issue, it may be hard to know when to seek help. If your child has some of the following symptoms, it may be time to talk to your child's pediatrician about your child's symptoms:

- Extreme anxiety or worry
- Constant hyperactivity
- Appearing distracted when others try to interact with him or her
- Constant nightmares
- Frequent anger, aggression, or disobedience
- Constant temper tantrums that cannot be explained
- Significant changes in eating or sleeping habits
- Significant change in performance at school
- Inability to handle daily stresses or problems
- Constant complaining about physical problems (for example, stomachaches or headaches)
- Acting withdrawn or depressed
- Alcohol or drug abuse
- Self-injurious behaviors



Understanding your child's temperament

The information on the following pages can help you compare your child's development with other children his or her age. It can also help you identify any symptoms that may be a cause for concern.

A mental health issue in a young child means that he or she is unable to experience, regulate, and express emotions appropriately; form close relationships with his or her caregivers; explore and act on his or her environment; and learn.

Possible mental health diagnoses within this symptom cluster include:

- Autism Spectrum Disorders (Pervasive Developmental Disorders) (p54)
- Feeding Disorders (p72)
- Reactive Attachment Disorder (RAD) (p86)

RESOURCES

Early Childhood Institute at The Providence Center
401-276-4020
www.providencecenter.org

Learn the Signs. Act Early.
(Centers for Disease Control and Prevention Campaign)
www.cdc.gov/ncbddd/autism/actearly

Zero to Three
www.zerotothree.org

Every child is born with a certain temperament. Temperament is a manner of thinking, behaving, or reacting that is characteristic of a certain child. Temperaments are based on a child's biological make up and are the genetic aspects of a child's personality (nature rather than nurture).

There are three types of child temperaments that most children fall in to:

- **THE EASY CHILD** readily adapts to new experiences, generally displays positive moods and emotions, and has normal eating and sleeping patterns.
- **THE DIFFICULT CHILD** tends to be very emotional, irritable, and fussy and cries a lot. The difficult child also tends to have irregular eating and sleeping patterns.
- **THE SLOW-TO-WARM-UP CHILD** has a low activity level and tends to withdraw from new situations and people. The slow-to-warm-up child is slow to adapt to new experiences, but then slowly accepts them after repeated exposure.

Understanding your child's temperament can help you understand your child's behaviors and anticipate his or her reactions to different situations. Temperament is not an excuse for a child's misbehavior, but it does provide direction for how you as a parent can respond to misbehavior. It can help you guide and teach your child in a way that respects the child's individual differences.

In addition, it may be helpful to look at your own temperament. Some "behavioral problems" actually stem from a mismatch between a parent's temperament and a child's. For example, a highly active child may irritate a slow-paced parent.

The American Academy of Pediatrics recommends that all children get a developmental screening.

A developmental screening tells if a child is learning basic skills when he or she should be. During the screening, your child's pediatrician carefully watches as your child plays, talks, moves, and interacts with others. When a developmental problem is recognized early, children can get the help they need to grow, learn, and reach their full potential.

Accomplishments, Difficulties, and Concerns in the Early Years

As a parent, it may be helpful to know what types of accomplishments and difficulties are expected as part of normal child development. This can help you determine when you may need to be concerned about your child's mental health. Although every child is different, the information below explains what can generally be expected for your child from birth to age 5.

Birth to Six Months

Children are working hard to observe and interact with their world. They are learning to comfort themselves, sleep at regular times, let their caregivers know when they need something, and adjust to family routines.

ACCOMPLISHMENTS

By six months, most children:

- Sleep through the night
- Have regular daily schedules
- Roll over
- Sit with help
- Reach for items out of reach
- Babble and coo
- Support themselves on their legs with help
- Look for dropped objects
- Eat cereals and strained foods
- Show strong interest in others, particularly their caregivers

EXPECTED DIFFICULTIES

- Common illnesses, such as colds or fevers that upset sleep schedules
- Crying
- Irregularities in development in different areas
- Sibling jealousy

POSSIBLE CONCERNS

- Medical illnesses
- Infant colic
- Not growing or gaining weight as expected
- Not making any sounds or babbling
- Significant delays in motor development

Six to Twelve Months

Children are exploring their world through movement, while still paying close attention to their caregivers' whereabouts. Children have established sleeping, eating, and play time routines, and have begun to show their personalities.

ACCOMPLISHMENTS

By twelve months, most children:

- Walk holding on to furniture
- Pull to a standing position
- Play simple games (for example, peek-a-boo or patty-cake)
- Wave bye-bye
- Say small words (for example, mamma, dada, juice, or baba)
- Show interest in books
- Scribble with a crayon
- Respond to simple commands or requests
- Can sip from a cup with a lid
- Can pick up small objects easily

EXPECTED DIFFICULTIES

- Minor interruptions in sleep schedules due to common illnesses or teething
- Minor bumps and bruises because of greater activity
- More separation fears, particularly separation from the primary caregivers
- More interested in activity than food
- Fussiness related to food choices
- Messy eating
- Acting out when objects are taken away

POSSIBLE CONCERNS

- Accidents that cause serious injury
- Significant delays in development, such as:
 - » Lack of verbal activity
 - » Inability to sit without help
 - » Inability to support themselves on their legs with help
 - » Extreme disinterest in social interactions
- Lots of feeding problems, resulting in poor growth



Twelve Months to Three Years

Children's language, movement and independence are growing rapidly during this time. They are typically very knowledgeable and demanding of their wants and needs.



ACCOMPLISHMENTS

By 3 years, most children:

- Speak and are understood most of the time
- Can carry on a simple conversation
- Help dress themselves (for example, pull up their own pants or put on their own shirt)
- Feed themselves without help
- Show their preferences for friends and activities
- Can throw a ball and participate in simple games
- Jump, run, and climb on play equipment
- Participate in activities with other children for short periods of time
- Draw simple shapes
- Play by themselves for short periods of time
- Have begun toilet training

EXPECTED DIFFICULTIES

- Interruptions in sleep schedules, due to common illnesses, teething, vacations, etc.
- Tantrums that occur at embarrassing times for parents (for example, when in public or when with in-laws)
- Occasional hyperactivity and distractibility
- Minor aggressive behavior, particularly when the child is frustrated
- Minor disrespect to parents or other adults
- Messy eating
- Picky eating
- Occasional irritability and arguing, particularly when tired or hungry
- Not wanting to use the toilet
- Occasional toileting accidents
- Stuttering

POSSIBLE CONCERNS

- Significant delays in development, such as:
 - » Limited verbal ability
 - » Excessive tantrums involving self-injurious behaviors
 - » Extreme disinterest in social interactions
 - » Excessive activity placing the child at risk for injury

Three to Five Years

Children are moving away from being completely focused on themselves and moving more towards playing with others. As they show their independence and explore their surroundings, they are also dependent and rely on the safety of a “home base.” Their sometimes challenging behavior is a result of exploring boundaries and developing relationships with other children.

ACCOMPLISHMENTS

By 5 years, most children:

- Have begun some form of formal education
- Show interest in academic skills (for example, writing their own name, recognizing letters, or counting)
- Speak fluently
- Have some friends
- Participate in family routines
- Become occupied with imaginary play
- Can run, jump, throw a ball, and climb play equipment easily
- Use words to control their own behaviors and the behaviors of others
- Show concerns about issues related to injury, loss, or death
- Show that they care about others feelings

EXPECTED DIFFICULTIES

- Arguing in an effort to influence parents and others
- Bedtime struggles
- Minor fears
- Times of high energy and activity level
- Not paying attention, particularly during activities that they do not like to do
- Sibling arguments
- Not listening to parents
- Lying from time to time, particularly to get out of trouble
- Occasional crying or angry outbursts associated with frustration or disappointment

POSSIBLE CONCERNS

- Significant delays in development, such as:
 - » Delayed language development
 - » Persistently poor peer relationships
 - » Poor coordination
- Inability to form friendships
- Persistent aggression
- Self-injurious behaviors
- Persistent disobedience and rebelliousness
- Fears that result in the avoidance of age-appropriate activities (for example, school or friendships)