Early Childhood Development Milestones & Applied Behavior Analysis Treatment

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Presenters

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- Degrees in Early Childhood Development & Counseling, and Education in Curriculum & Instruction

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- M.Ed., LBA, BCBA
- 20 years' experience working with infants, children, and adults with special needs or at risk
- 10+ years in ABA
- Degrees in Psychology, Education, and Behavior Analysis
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Objectives

- Participants will be able to identify typical developmental milestones for children aged 18 months – 7 years
- Participants will be able to differentiate normal maladaptive behavior for developmental age from excessive behavior concerns
- Participants will be able to ascertain when ABA treatment may be indicated
- Participants will be able to recognize appropriate vs. inappropriate treatment goals and behavior definitions
- Participants will be introduced to resources relating to each age range

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Things to Keep in Mind

When we discuss an age range a milestone will fall in, that does not mean that it cannot happen before or after the milestone that is being presented.

> **Example:** When looking at a 2 year old milestones some 18 month old children may already start developing some of these skills. However there may be some children that might not meet some of these milestones until they are 3 years and 2 months.

It is around these age ranges when these milestones are being developed.

Milestones for 18 Months

Social and Emotional

- Likes to hand things to others as play
- Temper tantrums
- Afraid of strangers
- Shows affection to familiar people
- Pretend plays, such as feeding a doll
- Points to show others when something is interesting
- Explores alone but with parent close by

Language and Communication

- Says single words or word approximations (imitation)
- Says and shakes head “no”
- Points to show someone what they want
- Copies sounds and words
- Understands common phrases used in routine situations

Milestones for 18 Months

Cognitive (learning, thinking, problem-solving)

- Knows what ordinary things are for; for example: telephone, brush, spoon
- Shows interest in a doll or stuffed animal by pretending to feed
- Points to one body part
- Scribbles on their own
- Can follow 1-step verbal commands without any gestures; for example, sits when you say “sit down”

Movement/ Physical Development

- Walks alone
- May walk up steps and run
- Pulls toys while walking
- Can help undress themselves
- Drinks from a cup
- Eats with a spoon

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Maladaptive Behaviors

Normal

- Biting
- Tantrums
- Hitting
- Grabbing
- Expressive defiant language (mine, no, don't touch)
- Sucking on toys
- Short attention span (will wander off)

Excessive

- *Tantrums over 15 mins and over five times a day* are abnormal temper tantrums (Daniels, Mandleco & Luthy 2012)
- Eloping
- Placing hands around someone's neck (choking)
- Pica

Research on Elopement

> Toddlers leave their caregiver's side because they are excited and love the freedom of running. They are not doing this to "be bad" or to "make the caregivers mad." They don't have the brain power to associate running away with danger. They don't realize the risks they take by running away.
>
> (Klein 2015)

When Intervention May be Considered

- ✓ Does not point to show things to others
- ✓ Cannot walk
- ✓ Does not know what familiar things are for
- ✓ Does not imitate others
- ✓ Unable to gain new words
- ✓ Does not have at least 6 words
- ✓ Does not notice or mind when a caregiver leaves or returns
- ✓ Loses skills previously acquired

What Should ABA Treatment Target?

Skill Deficits

- **Basic Verbal Behaviors**: Mands, Tacts, Intraverbals, Listener behaviors (following simple instructions)
- **Social / Play Skills**: Joint attending, expanding play interests (for clients with rigid play), imitation
- **PECS/Signs** (if child is non-vocal)

Behavioral Excesses

- Severe tantrum behavior
- Self-injurious behavior
- Dangerous elopement
- Pica (in collaboration with OT, PCP, etc.)
- Biting (or other serious aggression)

Importance of Defined Behavior

Antoni: 20 months old; male client

Inappropriate Goals	"Antoni will reduce instances of elopement to 0 times per session across three weeks of treatment."	"Antoni will reduce duration of tantrum behavior to 1 time per week across four weeks of treatment."	"Antoni will refrain from mouthing objects that are not meant to be in his mouth."
Discussion	It is developmentally normal for a 2 year old child to have a short attention span, and not developmentally appropriate for them to sit / stand in one location for long periods of time.	It is normal and expected for toddlers to have tantrums several times per day. Particularly, children diagnosed with ASD may have a speech delay which would lead to frustration = tantrum. Better to focus on teaching basic verbal operants.	Defining behavior is essential – this mouthing could be a perfectly typical developmental behavior or a dangerous behavior depending on what is being mouthed by child.

Keep in Mind

ABA can certainly teach replacement behavior (such as manding) and also coach parents in behavior reduction techniques for addressing tantrums. But it is not reasonable or appropriate to reduce tantrum behavior in children this age to zero.

It would actually be concerning if a child this age never engaged in some form of tantrum behavior.

> The message is that “normal” problem behaviors for children are expected and we should not hold our clients with ASD to a standard neurotypical children cannot even meet.

Normal or Not?

My toddler is 19 months old and does not play with other children, she'd rather play alone, is something wrong with her?

No, it is completely normal, children at this age have a challenging time playing cooperatively with others, they like to have all the toys they are playing with to themselves. They are still at the age where they are trying to figure out how to socialize with others.

What can I do?

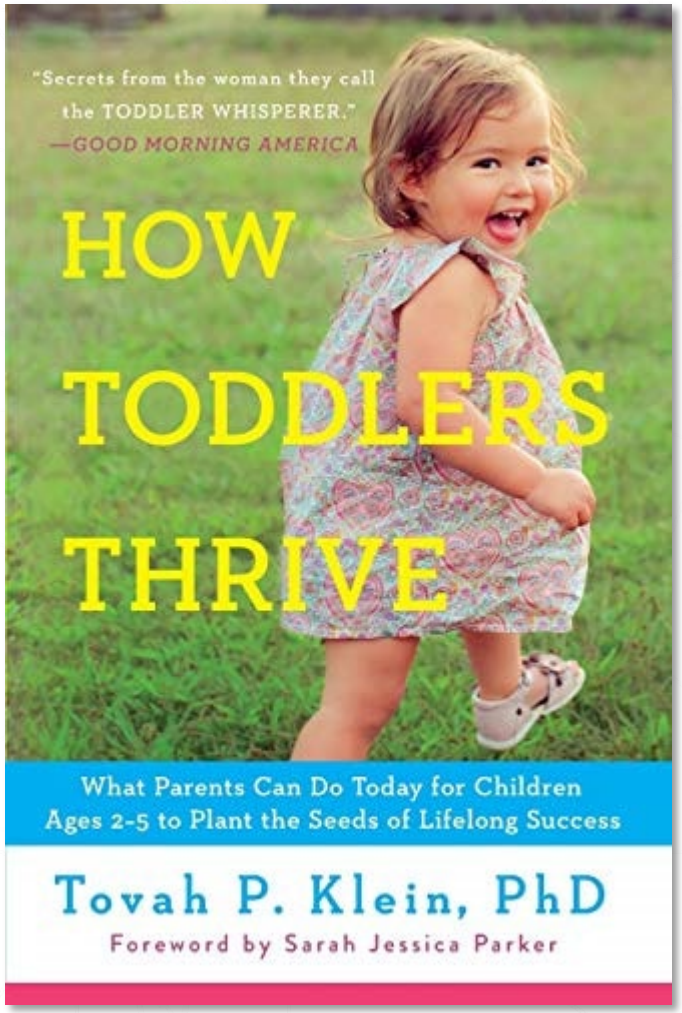
Continue to provide opportunities for your child to interact with peers. You can encourage sharing and cooperation with priming and gentle mediation – encouraging and labeling the behaviors you're wanting to see.

Suggested Resource

How Toddlers Thrive

What Parents Can Do Today for Children Ages 2-5 to Plant the Seeds of Lifelong Success

(Tovah Klein 2015)



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Milestones for Age 2

Social and Emotional

- Copies others, especially adults and older children
- Gets excited when with other children
- Shows more independence
- Plays primarily beside (parallel to) other children, but is beginning to include other children

Language and Communication

- Points to things or pictures when they are named
- Knows names of familiar people and body parts
- Says phrases / sentences with 2 to 4 words
- Follows simple instructions
- Repeats words overheard in conversation

Milestones for Age 2

Cognitive (learning, thinking, problem-solving)

- Begins to sort shapes and colors
- Completes sentences and rhymes in familiar books
- Plays simple make-believe games
- Builds towers of 4 or more blocks
- Follows two-step instructions

Movement/ Physical Development

- Stands on tiptoe
- Kicks a ball
- Begins to run
- Climbs onto and down from furniture without help
- Walks up and down stairs while holding on
- Throws ball overhand
- Makes or copies straight lines and circles

Other Maladaptive Behaviors at 2 Years

Normal

- Takes or hides personal items
- Does not recognize personal space
- Tantrums
- Aggression (hitting, kicking, head butting, biting)
- Knowing they are engaging in “bad” behavior – running away or hiding
- Non-compliance (demonstrating independence)

Maladaptive Behaviors

Excessive

- Placing hands around someone's neck (choking)
- Tantrums that last longer than 15 minutes or more than 5 times per day

When Intervention May be Considered

- ✓ Does not use 2-word phrases (for example, “drink milk”)
- ✓ Does not follow simple instructions
- ✓ Does not know what to do with common things, like a brush, phone, fork, spoon
- ✓ Does not walk steadily
- ✓ Does not copy actions and words
- ✓ Loses skills previously acquired

What Should ABA Treatment Target?

Skill Deficits

- **Social / Play skills:** making bids for play, beginning sharing skills, expanding play / material interest repertoire
- **Communication**: continue with basic verbal behavior, fade use of PECS/signs if possible, continue listener behavior like following two-step instructions
- Can begin early education around **toileting** if readiness signs are present
- **Eating independence** – feeding self, expressing likes/dislikes, meal routines

Behavioral Excesses

- Excessive tantrums
- Aggression that causes injury
- Dangerous Elopement
- Stereotypy

Application of Milestones to ABA Goals

Georgia: 2.5 years old, female client

Inappropriate Goals	"When given the instruction "wait please," Georgia will wait for a desired object for up to 30 minutes with an absence of maladaptive behaviors."	"Georgia will engage in a moderately preferred or non-preferred activity for up to 15 minutes with a peer."
Appropriate Goals	"In response to a one-step instruction involving physical movement ("come here," "give me _____," put _____ in"), Georgia will begin to complete the instruction within 5 seconds of delivery."	"In response to an active motivating operation, Georgia will vocally mand for access to objects in 4/5 opportunities."

Normal or Not?

My 2 1/2-year old has bitten two children at preschool over the last two weeks, why is he acting like this?

It is very common for a 2-year-old to bite others. Some children bite instinctively, because they have not developed self-control. While others may bite to express anger or frustration because they lack the language skills needed to express their feelings.

What can I do?

It's certainly unpleasant to have your child be the one biting others. Model words and phrases he can use to express wants/needs. Label and reinforce appropriate coping behaviors. You can also model this with dolls or stuffed toys.

Early Signs of Toilet Training Readiness

- Stays dry for at least 2 hours at a time
- Recognizes that they are urinating or having a bowel movement
- Hides or seeks privacy when having a bowel movement
- Shows interest in the potty routine

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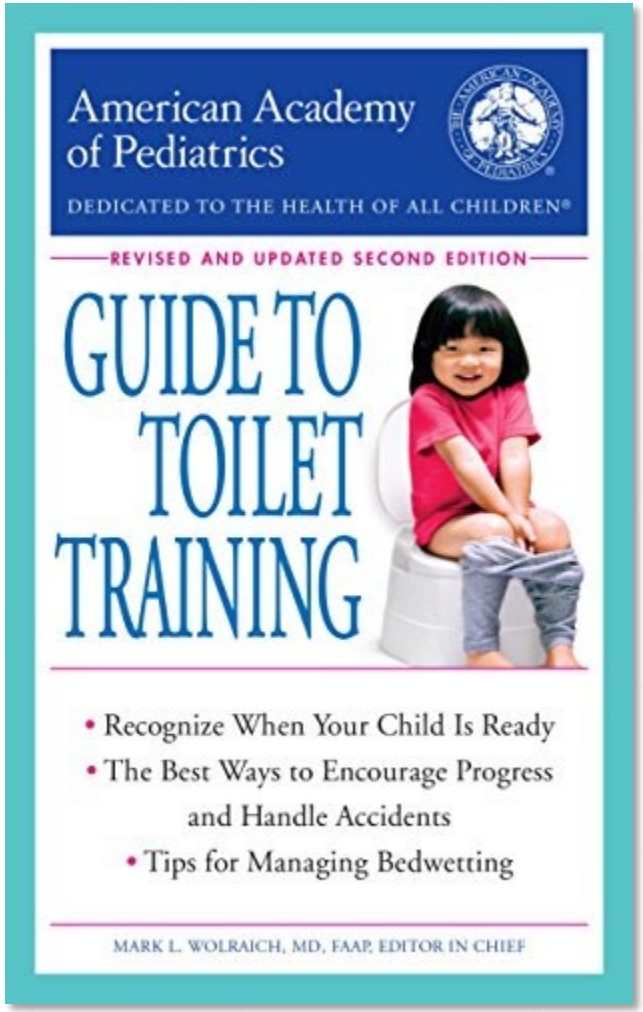
Potty Training

- Children refuse to potty train and may regress at any point in the potty training process
- Attempting to potty train a child too soon can result in serious issues
- If children feel pressured, they may attempt to "control" the situation by withholding elimination
- Consequences of early toilet training include constipation, kidney damage, and urinary tract infections resulting from the fact that toddlers try to hold their urine or bowel movements longer than they should. (Hodges 2012)

Suggested Resource

The American Academy of Pediatrics Guide to Toilet Training

(American Academy of Pediatrics)



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Suggested Resource

It's No Accident

Breakthrough Solutions To Your Child's Wetting, Constipation, UTIs, And Other Potty Problems

(Steve J. Hodges & Suzanne Schlosberg)

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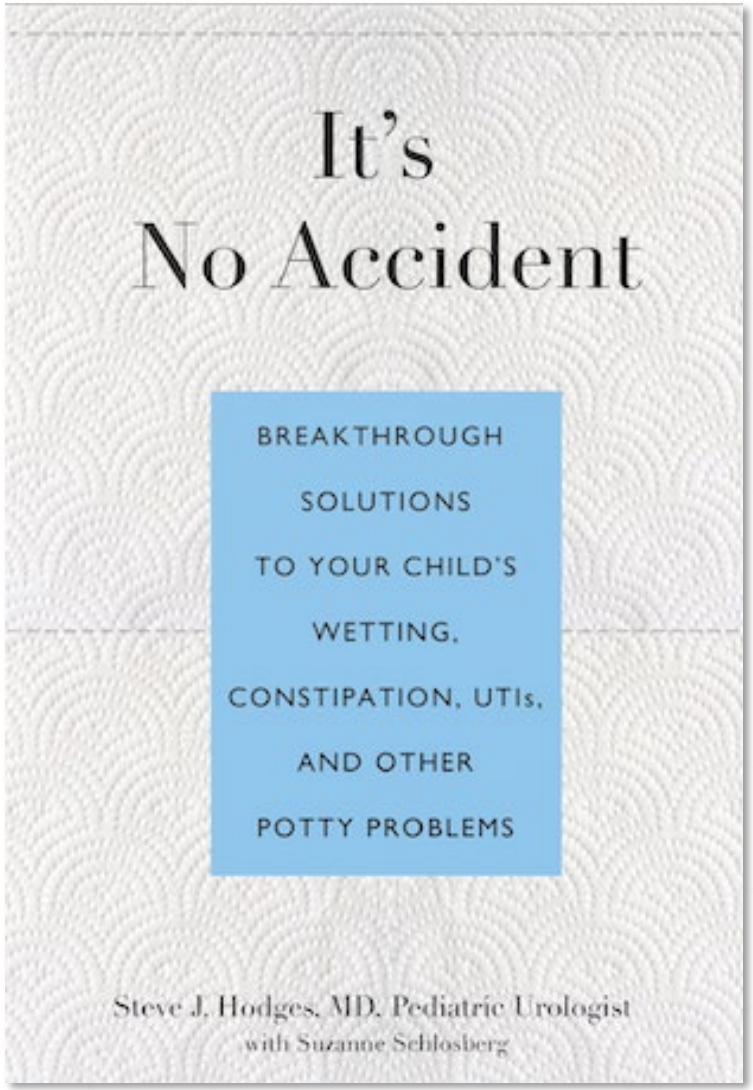

Milestones for Age 3

Social and Emotional

- Copies adults and friends
- Shows affection for friends without prompting
- Takes turns in games
- Shows concern for crying friend
- Understands the idea of “mine,” “his,” or “hers”
- Shows a wide range of emotions
- Separates more easily from parents

Language and Communication

- Follows instructions with 2 or 3 steps
- Can name most familiar things
- Understands words like “in,” “on,” and “under”
- Says first name, age, and gender
- Names friends
- Says words like “I,” “me,” “we,” and “you,” and some plurals (cars, dogs, cats)
- Carries on a conversation using 2 to 3 sentences

Milestones for Age 3

Cognitive (learning, thinking, problem-solving)

- Can work toys with buttons, levers, and moving parts
- Plays make-believe with dolls, animals, and people
- Does puzzles with 3 or 4 pieces
- Copies a circle with pencil or crayon
- Turns book pages one at a time
- Builds towers of more than 6 blocks
- Screws and unscrews jar lids or turns door handle

Movement/ Physical Development

- Climbs well
- Runs easily
- Pedals a tricycle (3-wheel bike)
- Walks up and down stairs, one foot on each step

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Other Maladaptive Behaviors at 3 Years

Normal

- Non-compliance (demonstrating independence)
- Tantrums
- Scared or shy when being dropped off a new places (preschool)

Maladaptive Behaviors

Excessive

- Leaving marks on other's body
- Harming animals
- Property destruction
- Rigid physical behaviors
- Repetitive speech
- Tantrums that last longer than 15 minutes or more than 5 times per day

When Intervention May be Considered

- ✓ Falls down frequently or has trouble with stairs
- ✓ Does not understand simple instructions
- ✓ Drools or has very unclear speech
- ✓ Does not play pretend or make-believe
- ✓ Cannot work simple toys (such as peg boards, simple puzzles, turning handle)
- ✓ Does not want to play with other children or with toys
- ✓ Does not speak in sentences
- ✓ Does not make eye contact

What Should ABA Treatment Target?

Skill Deficits

- **Social / Play skills:** early cooperative play, sharing/turn taking, representative / imaginative play
- **Communication**: basic verbal behavior if speech delay present, listener behavior (2-3 step instructions),
- Can begin early education around **toileting** if readiness signs are present
- **Feeding –** participation in mealtime routine, using utensils

Behavioral Excesses

- Excessive tantrums
- Aggression that causes injury
- Self Injury (sometimes combined with tantrums)
- Dangerous Elopement
- Stereotypy

Importance of Defined Behavior

Karomo, 3 years, 8 months old; male client

Inappropriate Goals	"Karomo will tolerate being told "no" in 10/10 opportunities across 5 treatment sessions."	"Karomo will reduce instances of non-compliance to 2 times per week across four weeks of treatment sessions."
Discussion	While at age three children can understand the concept of "no," it is not reasonable to expect them to accept denial of access to items or persons 100% of the time without protest. Also, "tolerating" is not a behavior – this should be defined topographically so all parties know what "tolerating" looks like.	It is developmentally natural for children to assert independence by not complying with every demand placed on them. Again, "non-compliance" can take many forms and should be defined clearly.

Normal or Not?

Every time we go to Target my 3-year-old screams if she does not get a toy before we leave the store.

On the car ride to Target talk to your children about what you need to get from the store, the purpose you are going to Target, make a list, let her hold the list. Make it clear to your children before you get there, that this trip you are not getting a toy. Set the expectations before walking in.

Give your child something else besides a toy to look forward to when the Target trip is done. For instance, "OK when we get home we will paint a picture for Nana! Now let's have a quick happy Target run!"

Suggested Resource

An Early Start for Your Child with Autism

Using Everyday Activities to Help Kids Connect, Communicate, and Learn

(Sally J. Rogers, Geraldine Dawson, Laurie A. Vismara)

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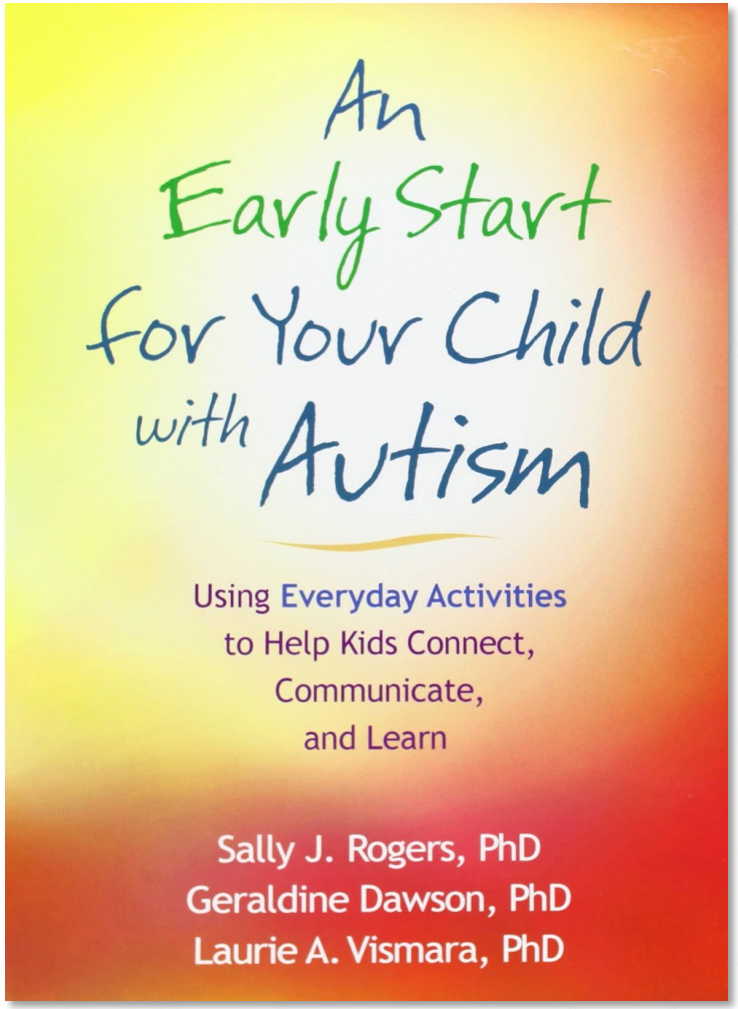

Milestones for Age 4

Social and Emotional

- Pretends play as caregivers
- Is more and more creative with make-believe play
- Would rather play with other children than by themselves
- Can identify what is real and what is make-believe

Language and Communication

- Knows some basic rules of grammar, such as correctly using “he” and “she”
- Sings a song or says a poem from memory such as the “Itsy Bitsy Spider” or the “Wheels on the Bus”
- Tells stories
- Can say first and last name

Milestones for Age 4

Cognitive (learning, thinking, problem-solving)

- Names some colors and some numbers
- Starts to understand time
- Understands the idea of “same” and “different”
- Draws a person with 2 to 4 body parts
- Uses scissors
- Starts to copy some capital letters
- Plays board or card games
- Tells you what they think is going to happen next in a book

Movement/ Physical Development

- Hops and stands on one foot up to 2 seconds
- Catches a bounced ball most of the time
- Uses a fork
- Pours, cuts with supervision, and mashes own food

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When Intervention Could be Considered

- Cannot jump in place
- Shows no interest in interactive games or make-believe
- Ignores other children or does not respond to people outside the family
- Only wants to play with the same toy all the time
- Fixates on toys by colors and or sizes
- Will line toys up restrictively
- Resists dressing, sleeping, and using the toilet
- Has trouble scribbling
- Cannot retell a favorite story
- Does not follow 3-part commands
- Does not understand “same” and “different”
- Does not use “me” and “you” correctly
- Speaks unclearly
- Loses skills previously acquired

What Should ABA Treatment Target?

Skill Deficits

- **Communication**: giving instructions, tacting in phrases or sentences, following multiple step instructions, intraverbal behavior w/ adults and peers, EFFC / LRFFC
- **Play / Social Skills**: independent play (up to 10 minutes), imaginative play, cooperative play with peers
- **Self Care / Daily Living**: simple household chores (cleaning up after self), preparing simple snacks, following safety instructions (looking both ways in crosswalk, staying in car seat/booster)

Behavioral Excesses

- Restrictive, repetitive behavior
- Physical aggression
- Self Injurious behavior
- Severe vocal protest or verbal abuse of others
- Excessive duration or occurrences of tantrums

Application of Milestones to ABA Goals

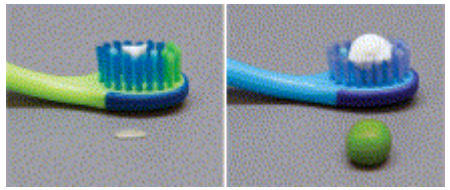
Karen, four years old; female client

Inappropriate Goals	"When presented with a task analysis for tooth brushing, Karen will complete a tooth brushing routine independently."	"Karen will engage in a non-preferred activity for up to 30 minutes with an absence of whining or requesting to be all done."
Appropriate Goals	"In response to an instruction involving a preposition ("put the book *in* the box"), Karen will complete the instructions correctly across 6 prepositions."	"In response to a statement or question from a peer, Karen will intraverbally respond to the peer across 5 opportunities."

Brushing Teeth

- Brush 2 times a day (morning and night) with fluoride toothpaste to prevent cavities
- Floss between their teeth daily once you see two teeth that touch
- Move the brush back and forth gently in short strokes. Brush the top, front, and back sides of each tooth.
- Make regular visits to your child's dentist. As soon you see your baby's first tooth – and no later than your child's first birthday

For children younger than 3 years, about the size of a grain of rice. For children 3 to 6 years of age, you should place no more than a pea-sized amount.



According to the ADA (American Dental Association) by age 6 or 7, children should be able to brush their own teeth twice a day – with supervision until about age 10 or 11.

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Normal or Not?

My 4-year-old will scream and cry if I try to dress her, I don't know what to do?

This is very common for this age; they are asserting their independence and wanting to do things on their own. As hard as it is, let them pick out their own clothes and dress themselves in the morning. This is part of their development.

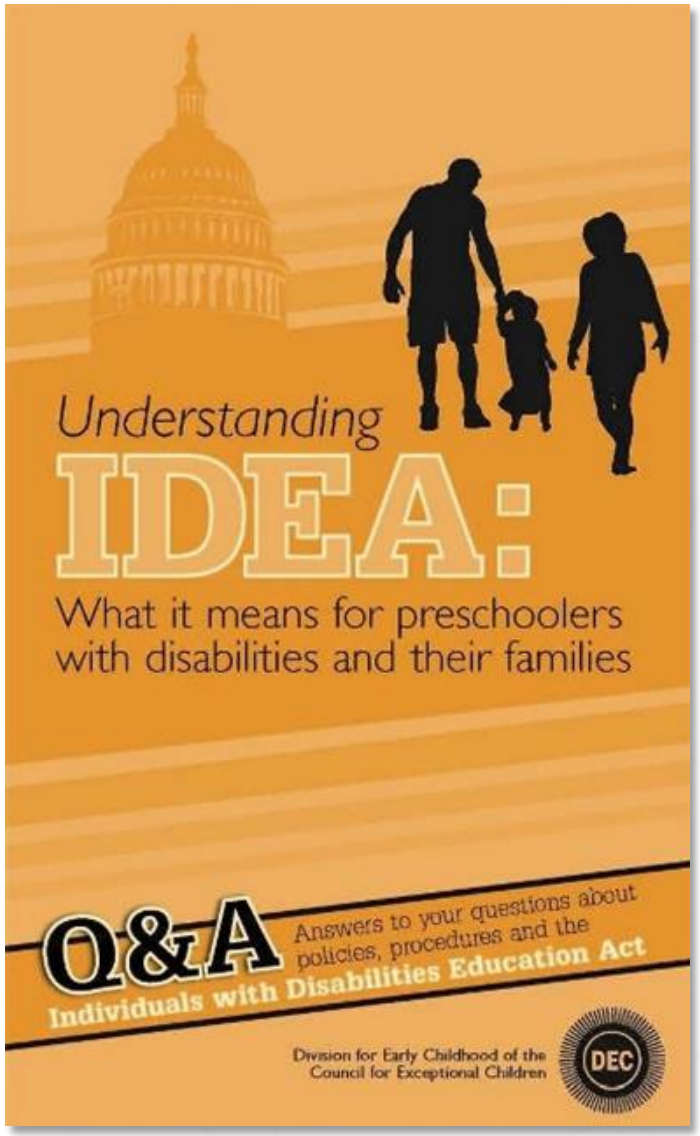
Try having your child pick out their clothes the night before – talking about what you will do the next day ("It's going to be raining so we need warmer clothes!") and encouraging their independence. It's OK if they don't always match!

Suggested Resource

Understanding IDEA:

What it means for preschoolers with disabilities and their families

(Sharon Walsh & Ross Taylor)



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Milestones for Age 5

Social and Emotional

- Wants to please friends
- Wants to be liked by friends
- More likely to agree with and enforce rules
- Likes to sing, dance, and act
- Is aware of gender (respect gender being on a spectrum – consider cultural issues)
- Shows more independence
- Is sometimes demanding and sometimes very cooperative

Language and Communication

- Speaks very clearly
- Tells a simple story using full sentences
- Uses future tense; for example, “Grandma will be here”
- Says all speech sounds in words
- Talks in different ways, depending on the listener and place

Milestones for Age 5

Cognitive (learning, thinking, problem-solving)

- Counts 10 or more things
- Can draw a person with at least 6 body parts
- Can print letters and numbers
- Copies a triangle and other geometric shapes
- Knows about things used every day, like money and food
- Can prepare simple snacks or meals

Movement/ Physical Development

- Stands on one foot for 10 seconds or longer
- Hops; may be able to skip
- Can do a somersault
- Uses a fork and spoon and sometimes a table knife
- Swings and climbs

Other Maladaptive Behaviors at 5 years

Normal

- Talks back
- Has occasional tantrums
- Will argue when they feel something is unfair

Maladaptive Behaviors

Excessive

- Seeks out harm to someone else
- Verbally abusive
- Bullying
- Dangerous elopement (Running away from home, running into traffic)
- Tantrums over 15 mins and more than once a day

When Intervention May be Considered

- Does not show a wide range of emotions
- Shows extreme behavior (unusually fearful, aggressive, shy, or sad)
- Unusually withdrawn and not active
- Is easily distracted, has trouble focusing on one activity for more than 5 minutes
- Does not respond to people when addressed
- Cannot tell what is real and what is make-believe
- Regression in toileting
- Cannot give first and last names
- Does not use plurals or past tense properly
- Does not talk about daily activities or experiences
- Does not draw pictures
- Cannot wash and dry hands, or get undressed without help
- Does not play a variety of games and activities

What Should ABA Treatment Target?

Skill Deficits

- **Communication**: asking and answering questions with adults and peers, describing events or items, focus toward social skills and personal independence
- **Social skills**: organized play with peers, games with rules, sustaining play for longer, giving directions to others
- **Self Care / Daily Living**: understanding dangerous situations, dressing self, identifying safety items (signs, crosswalks, etc.)

Behavioral Excesses

- Restrictive, repetitive behavior
- Physical aggression
- Self Injurious behavior
- Severe vocal protest or verbal abuse of others
- Extreme rigidity around rules (can lead to social deficits)

Importance of Defined Behavior

Stephen, 5 years, 3 months old; male client

Inappropriate Goals	"Stephen will refrain from bullying behavior when in social situations with peers."	"Stephen will reduce instances of SIB to no more than 1 time per week."	"Stephen will engage in tattling fewer than 1 time per session during social skills group."
Discussion	It's definitely important to teach children appropriate social skills as bullying can start very early. However, it's key to differentiate between a child protecting himself from actually engaging in bullying.	SIB can have many topographies and the range of severity makes it essential to clearly define.	Frequent tattling can be irritating to others of course, but children also need to know who is able to protect them if they are uncomfortable. Teach child what should be told to an adult and also the social skills to work through problems with peers.

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Normal or Not?

My 5.4-year-old will angrily leave the table or area when she loses a game, it can be a board game, or a sports game, should I be concerned?

Children at this age are starting to learn about winning and losing. So it very common for a child at this age to be upset when the game is not going their way. Talk to them about their feelings, talk about fairness, talk about winning and losing.

It's OK for children this age to be very focused on rules and fairness. When planning to interact with peers, prime your child for what to expect and what they can do if they are upset about a game or activity.

Suggested Resource

First 5 California

Phone: 916-263-1360

Email: info@ccfc.gov

Website: www.first5california.com

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Milestones for Age 6

Social and Emotional

- Has the ability to resolve conflict in socially-acceptable ways
- Is aware that other people have different perspectives, thoughts and feelings about ideas and circumstances
- Communicates needs and emotions to others under supportive and fairly positive situations
- Describes self based on external characteristics, such as physical attributes, name, possessions and age

Language and Communication

- Has a receptive vocabulary of approximately 20,000 words
- Sequences numbers
- Understands the meaning of most sentences
- Should be sounding out simple words like “hang”, “neat”, “jump,” and “sank”

Milestones for Age 6

Cognitive (learning, thinking, problem-solving)

- Understands ‘left’ and ‘right’
- Understands concepts of time
- Able to sit at a desk, follow teacher instructions, and independently do simple in-class assignments
- Understands concepts like yesterday, today, and tomorrow

Movement/ Physical Development

- Buttons clothes, washes face, and puts toys away
- Reaches and grasps in one continuous movement
- Catches a ball with hands
- Makes precise marks with crayon, confining marks to a small area

Other Maladaptive Behaviors at 6 Years

Maladaptive Behaviors

Excessive

- Stealing
- Disordered eating (over or restrictive)
- Aggression (particularly toward younger children)
- Self-Injury

When Intervention Could be Considered

- Not responding to their name being called, despite having normal hearing
- Rarely using gestures or facial expressions when communicating
- Avoiding eye contact
- Having repetitive movements
- Preferring to have a familiar routine and getting very upset if there are changes to this routine
- Not being aware of other people's personal space, or being unusually intolerant of people entering their own personal space

A Word about Intellectual Disabilities

> For those children who can be thought of as having "low-functioning autism…designation is more closely tied to level of concomitant intellectual disability, not the severity of autism symptoms. It is well-understood by clinicians, though seldom emphasized to parents, that level of concomitant intellectual disability will be at least as prognostically determinative as the autism itself.

(Seigal, The Politics of Autism)

A Word about Intellectual Disabilities

If a child has an intellectual disability,
age 6-7 is the time for ABA treatment to move to teaching functional life skills geared toward accessing quality of life factors.

Application of Milestones to ABA Goals

Marie, six years old; female client

Inappropriate Goals	"Marie will demonstrate independent community safety behavior by approaching the street, stopping, looking both ways for approaching cars, and crossing the street."	"Marie will refrain from leaving her desk chair during the allotted homework time at home in 100% of opportunities."
Appropriate Goals	"After reviewing her safety rules in the home, Marie will practice street/parking lot safety by approaching the street while staying close to an adult (or holding their hand) and look both ways before confirming with the adult that there are no cars coming."	"In response to being informed by an adult of a minor change to Marie's after school routine, Marie will complete the altered routine with an absence of tantrum behaviors."

Safety:
Children Crossing the Street

According to American Academy of Pediatrics and Pedestrian Safety:

- Children who are four to six years of age are entering a time when their physical and mental abilities allow basic walking safety skills to be introduced, discussed and practiced. This age group needs to walk with an adult who will make safety a priority

Children seven to nine years old can continue expanding their pedestrian abilities and knowledge through more education and practice. As with younger children, seven to nine year olds are developing at different rates and gaining pedestrian skills at varying times throughout this time period.

Agran (2018) states children age ten and older continue to develop their physical, cognitive and psychosocial abilities. They are improving their processing, attention, and decision making skills, all of which are essential to pedestrian safety. Some children in this age group may be walking with little or no supervision.

Normal or Not?

When I ask my 6.5-year-old if he finished his homework, he always tells me yes, then I find out later he lied to me.

Lying can become automatic if your child learns that it's an easy way to make himself look better, or to avoid doing something that he doesn't want to do, or to prevent getting into trouble for something he's already done. Let him know that if he doesn't always tell the truth, people won't believe what he says. Look at his motivation for lying, and make sure he doesn't achieve his goal.

Additionally, lying is actually an adaptive skill children learn at this age to protect themselves – either physically or emotionally. If your child is lying several times per day there might be cause for concern, but occasional lying is normal. Ensure your child sees you as a safe person with whom to make mistakes.

Suggested Resource

The Whole-Brain Child

Revolutionary Strategies to Nurture Your Child's Developing Mind

(Daniel J. Siegel and Tine Payne Bryson, 2011)

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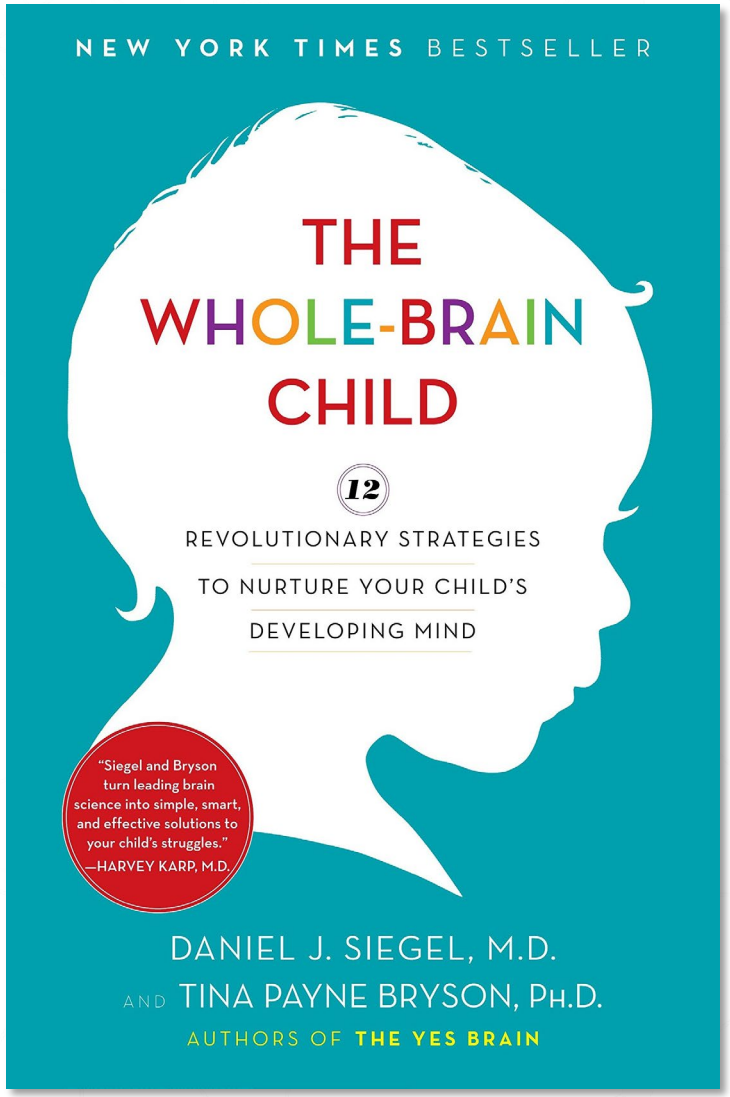

Milestones for Age 7

Social and Emotional

- Desires to be perfect and is quite self-critical
- Worries more; may have low self-confidence
- Tends to complain; has strong emotional reactions
- Understands the difference between right and wrong
- Waits for their turn in activities
- Starts to feel guilt and shame

Language and Communication

- Uses extensive vernacular
- Can describe points of similarity between two objects
- Begins to grasp that letters represent the sounds that form words

Milestones for Age 7

Cognitive (learning, thinking, problem-solving)

- Demonstrates a longer attention span
- Uses serious, logical thinking; is thoughtful and reflective
- Able to understand reasoning and make the right decisions
- Can tell time; knows the days, months, and seasons
- Able to solve complex problems

Movement/ Physical Development

- Demonstrates good balance
- Can ride a bike
- Demonstrates coordination of large and small muscles
- Sports involving physical control

Other Maladaptive Behaviors at 7 years

Maladaptive Behaviors

Normal

- Argues with caregivers
- Refusing to follow directions or doing chores (“non-compliance”)
- Conflicts with siblings and peers

What Should ABA Treatment Target?

Skill Acquisition

- **Communication**: waiting for desired objects or activities for longer periods of time, increasing conversation skills with peers or if client has ID, focusing on mands and tacts that help client access needs
- **Self Care / Daily Living**: making simple snacks or meals, using light kitchen appliances safely, increasing independence in hygiene routines, picking out clothes to wear

Behavioral Excesses

- Restrictive, repetitive behavior – particularly those behaviors can could be socially stigmatizing
- Non-compliance that inhibits client's safety, hygiene, and/or health
- Conflict resolution with peers – (replacement behaviors for shouting at them, aggression, etc.)
- Elopement that threatens client's safety

Normal or Not?

Why is my 7-year-old being so defiant?

Your child may defy your orders or simply ignore what you expect them to do. Sometimes this behavior is an indication of your child is trying to test their boundaries with their parents and see if they can get away with it. Your child is also establishing their likes and dislikes and thus defying what you may expect them to do.

Give your child opportunities to control their environment and make choices – but limit choices. For instance "OK, do you want to do your bath tonight or tomorrow morning?" And then follow through!

Suggested Resource

Parents Helping Parents

408-727-5775

info@php.com

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Summary

- There are typical “ranges” for when children reach developmental milestones
- “Normal” behavior concerns *can* be addressed with ABA but we should not hold children to a higher standard than what is considered typical
- Behaviors targeted by ABA should be clearly defined
- There are many resources available to treatment professionals and families that can provide perspective on developmental milestones
- Goals addressing maladaptive behaviors should take into account typical behavior for the child’s age

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