Chat

Parent and Caregiver Manual

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Let's Chat: An Introduction to the Chat Program

Welcome to the myBrightlink Chat program. If you are the parent or caregiver of a young child with autism spectrum disorder (ASD), intellectual disability or similar developmental disorder, this program is for you. You're probably worried that your child is behind their peers in their development. You may also be worried about behaviors that seem over the top, such as temper tantrums that last a lot longer than typical temper tantrums. These behaviors might even interfere with your relationship with your child and other family members because of the stress they cause. Like all parents and caregivers, you want to help your child, but you might not know how.

What is Chat?

Chat is a naturalistic developmental program for parents and caregivers of children delayed in language and social-emotional development. With Chat, you will teach your child new things during your family's normal routine. This means Chat will become part of how you parent rather than special time you have to set aside to "work" with your child. The goal of the Chat program is to support you so that you can help your child progress through their development in a naturalistic way while addressing problem behaviors your child might have.

What is a Developmental Disability?

A developmental disability is any condition that starts at birth or in early childhood that causes an impairment in physical, learning, language or behavior areas. According to the CDC, about one in six children in the U.S. have one or more developmental disabilities or a developmental delay, meaning that these children are not developing like we typically expect children to develop. Sometimes these developmental delays are temporary, and the child catches up but sometimes the reason for the delay is a condition that is life-long. The good news is that when a child with a condition leading to a life-long disability receives support and help early, they make more progress and have a high quality of life as adults. Common types of developmental disabilities include:

- ADHD
- Autism spectrum disorder
- Intellectual disorders
- Hearing and visual impairments

How Was Chat Developed?

Chat was developed by a group of clinicians, including psychologists, speech therapists, marriage family therapists and early child developmental specialists. The Chat development team reviewed the large body of research on how children develop with a focus on language and social-emotional development. These focus areas were chosen because many children with developmental disabil-

ities have problems with language and social emotional communication. The specific areas of research that Chat is based on include:

1. Child developmental milestones or how typically developing young children develop.
2. How children with ASD, intellectual disabilities and developmental disabilities learn and grow.
3. How to improve language in young children with language delays.
4. How to promote social-emotional development.
5. How children learn as they play.
6. Teaching children in their natural environment during their routine day.
7. The effectiveness of interventions parents and other caregivers provide.

Chat is empirically based. All aspects of Chat are empirically based meaning that Chat was developed using what we know from research about how children develop and how conditions like ASD and language delays affect that development. In addition, the Chat developers paid particular attention to the research on how parents and caregivers can help their children learn and grow.

Where did the Chat name come from? You may be wondering where the name Chat came from. First, Chat is not an acronym. We chose the name Chat because when we chat with each other, we engage in social communication with others. Think about two people chatting-what did you think of? Did you think about two people paying attention to the same thing or topic? Maybe one person was asking for something? You probably didn't think about anyone being really upset or yelling because when we chat with each other, we usually modulate or control our emotions. You might have thought about how chatting is also a natural activity for family members during a typical day and how chatting is a social way to build relationships inside and outside the family.

Chat (verb): Talking in a friendly, informal way

The language and social skills involved in chatting are often difficult for children with ASD and other developmental disabilities. Chat was developed to help you help your child learn and grow in their language and social-emotional abilities.

ASD and Similar Developmental Disability

While many children naturally develop language and social-emotional abilities on their own, children with developmental disorders like ASD and intellectual disabilities often struggle to develop these skills or don't develop them at all. You may have noticed that your child didn't start talking the way other children do. Or your child might seem like they are in their own world not interacting with you and others. Your child may cry a lot and have temper tantrums that last much longer and are more extreme than other young children. As a parent or caregiver, you may find yourself guessing what your child needs or wants based on your child's behavior. And you may not know how to help your child. This can make it very difficult for a parent or caregiver. These concerns are common among parents and caregivers, and these are the concerns Chat was developed to address.

The Importance of Parents and Caregivers

Chat will give you the support and skills you need to work with your child and make a difference in your child's life. Young children grow and learn within their families. Their parents or other caregivers like grandparents are extremely important in a young child's life. As a parent or caregiver, you live with your young child. You see them at different times of the day and night. You come to understand what calms your child and what causes your young child distress. You know what they like and dislike. You love them, and you worry about them. And you try to help them learn and grow.

If your child has a developmental disability or delay, you may be feeling like you don't know what to do to help your child. You may even be feeling inadequate. Maybe you have said, "I need an expert to take over; I don't know how to help my child learn." Or you might feel that you can't be close to your child because your child doesn't respond to you the way other children do. It may be challenging for you to soothe your child when they are upset, making you feel like a failure. These are all common feelings and experiences for parents or caregivers of young children who have a developmental disability. Despite these normal feelings, in Chat, we believe that you are still the most important person in your young child's life, and you are the best teacher to help them learn and grow. As you learn more about teaching your child and seeing how your efforts are helping your child, your confidence will grow.

The good news about parents and caregivers. Studies of young children who are delayed in their development show that parents and other caregivers can help their child develop with support, training, and guidance. And while not all children with a developmental disability catch up with their peers, all children can make meaningful progress.

In Chat, You Won't Be on Your Own

Chat will give you the information you need to help your child learn and grow. But you won't be on your own. Chat Clinicians have a master's degree in a behavioral health field and are also qualified autism service providers or qualified autism service professionals. They also have extensive experience in child development and working with parents and children. Your Chat Clinician will provide you with training, coaching, and ongoing support. The goal is for you and your Chat Clinician to develop a collaborative partnership to best support your child's learning and growth. Your Chat Clinician will use a few key approaches, including live coaching during sessions, video feedback and help with parent-guided worksheets.

How does Chat work?

Chat is an intervention for children under the age of 6 that focuses on how young children naturally develop language and social-emotional skills through interactions with their caregivers, other family members and peers. You and your child will spend time with a Chat Clinician developing a Developmental Milestone Plan (DMP) tailored to your child and your family's typical routines.

The Chat Treatment Plan

Your child's Chat treatment plan describes where your child is with their development and what activities will help your child make progress in their development. Your child's progress will be measured by developmental milestones. A developmental milestone is a behavior, skill or ability that a child develops as they grow and mature. You will learn more about developmental milestones in the Developmental Milestones Module. The activities in your child's Chat Treatment Plan are meant to be incorporated into your everyday life. Your child's Chat Treatment Plan will also include strategies for dealing with problem behaviors. In Chat, problem behaviors are viewed through a developmental lens. For example, in Chat, we recognize that typical temper tantrums are actually a healthy sign that a child is developing, so we don't want to eliminate tantrums completely, but we do want to help you manage them in a way that works for you and your child. Like the developmental milestone goals, the problem behavior strategies will be tailored to you, your child and your family's needs.

How is Chat Different from Other Interventions?

Chat's developmental approach to learning differs from some other interventions that look at abilities like language as a set of skills and approaches skill building from a behavioral perspective. These interventions, like applied behavior analysis (ABA), focus on breaking down skills into small steps and teaching the steps using behavioral principles. Instead, Chat takes a naturalistic developmental and relationship perspective. In Chat, we focus on supporting development in the context of the family's naturalistic routines.

While you may set up some special playtime for your child, most of what you will do with your child will be during your family's daily routine. In Chat, we believe that you know your child best. So, while you will have experts supporting and helping you, your input comes first.

Is Chat Better Than Behavioral Approaches?

It's important to recognize that a naturalistic developmental approach like Chat is not better than a behavioral approach like ABA. Both approaches are based on research and can help a young child learn and grow. And neither approach can guarantee that a child with a severe delay will catch up completely with their peers. The approaches also have some things in common. For example, just like Chat and in some types of ABA, the parent or caregiver works directly with their child. This type of ABA is called Parent-Led ABA or Parent Mediated ABA. And Chat uses some behavioral techniques. One difference between the two types of intervention is the background of the clinicians who work in each. In ABA, the clinicians have specialized training in behavioral techniques. While Chat Clinicians have had some behavioral training, Chat Clinicians have a background in early childhood development and family relations.

Comparison of Chat and Behavioral Interventions

	Chat	Behavioral Interventions Like ABA
Approach	Naturalistic-developmental	Behavioral
Focuses on	How children naturally develop skills and provide the opportunity during the child's normal routine to teach Your child's strengths	Breaking skills down into small steps and using behavioral principles like reinforcement to teach skills Tends to focus on deficits
Who works directly with the child?	Parent or caregiver with support of a clinician	Parent or caregivers may work directly with the child but most of the direct work is done by a paraprofessional under the supervision of a clinician
Clinicians	Usually a clinician with a background in child development and family therapy	Usually a BCBA who has extensive training in behavioral principles and techniques
Treatment goals	Based on developmental milestones with a focus on language and social-emotional development	Skills based. May focus on language and social skills but may give equal attention to other skill areas like self-help

8 Components of Chat

There are eight key components of Chat. You will learn more about each component as you read through this Parent-Caregiver Handbook. Below is a summary of each component to get you started:

1. ***Developmental milestones.*** Developmental milestones are behaviors, skills or abilities that a child develops as they grow and mature. For examples, saying first words or learning how to crawl are both developmental milestones. In the My Child's Development module, you will learn how young children typically develop milestones for language-communication, social-emotional, cognitive-thinking and physical abilities. By learning how young children develop, you will be able to look for opportunities to help your child reach their milestones. In Chat, we focus on language communication and social-emotional developmental milestones because children with ASD and related developmental disabilities are often behind their peers in these areas. Language is particularly important because, without language, it is hard to develop thinking skills. If your child is also behind in physical skills, you may be working with an occupational therapist or physical therapist to help your child improve their physical skills. While you may see some improvement in physical skills during Chat, this is not the focus of Chat treatment.

2. ***Sensory Profile.*** We all process sensory information. Children with ASD and other developmental disabilities may process sensory information differently. Chat encourages you as a parent or caregiver to observe, understand and track your child's sensory preferences to help develop activities that support their sensory needs. Being attuned to your child's sensory preferences can help promote social engagement, imitation and language.

3. ***Naturalistic.*** One of the best ways to help your child learn and grow is by incorporating interventions into your child's normal routine. This means turning bath time, bedtime and playtime into opportunities to teach your child. In Chat, we encourage you to do two things; teach while going through your daily routine and set up playtime for you and your child. And for children ages 3-5, Chat encourages setting up play dates with other children and using preschool as an opportunity for your child to be around other children. In Chat, you will also learn about the stages of play, so you can use play as a way of helping your child reach their milestones.

4. ***Imitation.*** Children learn through imitation but children with ASD and other developmental disabilities often find imitation difficult. Because imitation plays a key role in how a child develops language, social communication and pretend play, Chat emphasizes imitation. While showing your child how to do something and having them imitate you can be a good way to teach, it turns out that you imitating your child is just as important as your child imitating you. In the imitation module, you will learn how imitating your child is a powerful way to show your child you are interested in them and is a great way to play with your child. In addition, by imitating your child and your child imitating you, your child can learn to interact socially, and language learning will become easier for your child. After all, young children learn language through social interaction.

5. ***Joint attention.*** Joint attention is when two people are paying attention to the same thing. For example, let's say there is a bird outside the window, and the parent points to the bird and says, "look there's a birdie." If the child looks at the bird, that is joint attention because both the parent and the child are attending to the same thing. In this situation, the child might also try to say "bird-ie." If that happens, we are teaching some language.

   Joint attention is often difficult for children with developmental disabilities, so your child might not look when you point at the bird. In Chat, your clinician will support you in capturing teaching opportunities and teach you the strategies to increase this skill. Joint attention is also important in play. It's hard to play together without joint attention. In Chat, you will learn how to improve your child's joint attention ability.

6. ***Social attention.*** Social attention is seeking attention from someone else and responding to someone seeking attention from you. Children with developmental disabilities struggle with this kind of attention. Some people use the term social responsiveness for social attention. Chat uses the term social attention to emphasize that attention goes both ways. Sometimes you start the social attention, and sometimes your child does. For example, when your child pulls on your shirt when you are watching TV or on the phone, they may be seeking social attention from you. Your child has started the social attention back and forth. It's very important for children to learn to ask for social attention. Many of the strategies you will learn in Chat can improve social attention. One of the reasons to gain someone's social attention is to ask for something. All young children need to know how to ask for what they want and need. As a parent or caregiver, it's important for you to understand what your child likes. Even if you can't give your child everything they want, a young child needs the skill to ask for what they want. In Chat, you will learn to teach your child how to request something. Through teaching requesting, you will also have the opportunity to get to know your child better. Understanding what someone wants is a good way to understand them. For example, maybe your child likes soft things. You might not fully understand that if your child is unable to ask for the teddy bear to play with instead of the car.

7. ***Behavioral strategies.*** You will learn simple strategies for decreasing behavior problems. These strategies will include ways to prevent problem behaviors and how to respond when behaviors occur. You and your Chat Clinician will prioritize any behaviors that could cause physical damage like biting or head-banging. You will also learn effective ways to deal with common behaviors like temper tantrums.

8. ***Play.*** You may have noticed that play has been mentioned several times. Play is very important for young children's development and a natural way children learn. Playing with your child is a great way for your child to learn and for you to feel closer to your child. There is a lot of science behind play. You will learn why play is an important part of a developmental approach, and you will learn about the stages of play that young children go through.

How Long Will We Be in the Chat Program?

You can expect to be in Chat with your child for at least six months. While some families might stay in Chat for 24 months or a little longer, most families will remain in Chat for 12-18 months. While you are in Chat, you will learn ways to parent and teach your child that you will be able to use long after you and your child have completed Chat. And your clinical case manager will be available to you for any ongoing support you might need in the future. You and your Chat Clinician will monitor your child's progress closely and discuss when it's time to graduate from the Chat Program.

How Often Will I Meet With My Chat Clinician?

Most parents meet with their Chat Clinician twice a week, but this is flexible. You will discuss the schedule of meetings when you and your Chat Clinician talk about your Chat Treatment Plan.

Watch our introductory video

Chat Modules

Chat has ten modules on different topics. You will notice that the modules are not numbered — that's because, with the exception of the Let's Chat and Child Development modules, the order you do the modules in is not as important as prioritizing with your Chat Clinician what you want to work on first. So, for example, if your child has a lot of problem behaviors that worry you, it might be best to go to the behavior modules first. If you and your Chat Clinician think some or all of your child's behaviors are related to their inability to communicate basic wants and needs, you might decide to focus on the Request module on Chatting. Bottom line, Chat is flexible; your needs and your child's needs should dictate the order of the modules not the way the modules, are ordered in the Chat curriculum.

Chat Modules

- Let's Chat: An Introduction to the Chat Program
- My Child's Development
- Why Is My Child Doing This?
- Setting Up My Child for Success: Proactive Strategies for Behavior
- Behaviors Are Hard: Responsive Strategies for Behavior
- Let's Play: Stages of Play and How tTo Engage
- My Child's Sensory Profile
- Making Chat Work For Your Family: A Naturalistic Approach
- Chatting Is More Than Talking: Social Communication
- I Do What You Do: Learning Through Imitation

Child Development: How Young Children Develop

Why Are We Starting with Child Development?

We are starting with child development because studies show that parents and caregivers who understand typical child development can better help their child with special needs. In this section, you will learn about the developmental milestones that children go through as they grow and develop.

What Is a Milestone?

A developmental milestone is a behavior, skill or ability that a child develops as they grow and mature. Milestones include abilities like learning to sit up or saying first words. Milestones are organized by the age when a typically developing child or child without special needs reaches that behavior or ability. For example, most typically developing children start eating finger food like Cheerios between 7-10 months. This is when children can pick something up and put it in their mouth. Milestones always have a range because kids are different and reach milestones within the range of different times. But if a child can't pick something up and put it in their mouth by 11-12 months, we would be concerned and want to either teach the skill or adapt it to reach the milestone.

Let's look at another example. Typically developing children start pointing at about 18 months. This is a very common way toddlers show a parent what they want. Pointing is also a very early basic form of language communication. Learning to point is often the first step in asking for something, and it's also often the first step in asking someone to look at the same thing you are looking at (joint attention). By understanding the expected age range that other children can point for what they want, you can help your child with this important milestone.

What Is the Function of a Milestone?

Every milestone has a function. In the case of pointing, the function is communicating what the child wants or bringing attention to something, like "mommy look at the bird." The pointing child may not be using words, but most parents will understand that their child wants them to see the same thing they are seeing. Milestones also build on each other. For example, the milestone of standing is readiness for walking and could also be for seeing what is on the coffee table. While a milestone can have more than one function, generally, the function of a milestone falls into these categories:

1. Communication: Examples include pointing, looking at people or things, shaking their head and first words.
2. Readiness and practice for physical skills: Examples include pulling up to a stand, throwing things and manipulating toys.
3. Social interaction: Examples include looking at people, copying others and laughing with others.
4. Independence: Examples include eating with a spoon, putting on clothes, and the favorite activity of many young children, saying NO!

By understanding developmental milestones and the function a particular milestone has for your child, you will be able to help your child reach their milestone. You and your Chat Clinician will work together on a Developmental Milestone Plan (DMP). If your child's disability prevents them from reaching a particular milestone, your Chat Clinician will work with you to find alternative ways for your child to get their needs met. For example, if your child has a disability that makes pointing physically difficult, you might teach your child to nod or shake their head when you hold up two items, so you know which one they want. Or, if making eye contact is difficult for your child, you might help your child get your attention differently. The good news is that many typical milestones can be taught or adapted and provide the same function. This means your knowledge of typical milestones will help you and your Chat Clinician accommodate your child's needs.

Learning Where Your Child Is with Developmental Milestones

The best place to start learning about child development is knowing where your child is now in their development. You probably filled out a questionnaire about your child's abilities and behavior. Talking to your Chat Clinician about what developmental milestones your child has already mastered will give you a good idea of where your child is with their development.

Your child's Chat Treatment Plan will start with milestones your child is close to mastering. You may also see some milestones on the Chat Treatment Plan that your child does but doesn't do very often. In this case, the goal may be to increase the number of times your child does something. You may also see goals on your child's Chat Treatment Plan that focus on not doing something.

For example, if your child points when they want something, but can say the word for some of the things they want, the goal may be to increase saying the word.

Milestones for Children 12 Months to 6 Years

Below you will see typical milestones for each age group. When you look over the milestones below, you will probably notice that you filled out a very similar checklist before your Chat assessment. We have included the checklist in this module for your reference. You will be asked periodically how your child is doing with their milestones. The more you are familiar with milestones, the easier it will be to see your child's progress.

Why Are the Language-Communication and Social-Emotional Milestones Highlighted?

We've highlighted language-communication and social-emotional milestones because Chat targets these milestone areas. Language communication milestones are associated with cognitive (brain) development, being able to problem solve and express wants and needs. Social milestones affect family relationships, and they also help with language development. While all the milestones are important, these two milestones are critical for a child's growth and independence.

12 Month Old

Social-Emotional Milestones

- Plays games such as "peek-a-boo"

Language-Communication Milestones

- Waves "bye-bye"
- Calls a parent "mama", "dada" or another special name
- Understands "no" by pausing briefly or stopping when "no" is said

Cognitive Milestones (Learning, Thinking, Problem-Solving)

- Looks for things that the child sees an adult hide, such as a toy under a blanket
- Puts things in a container, such as a block in a cup

Movement and Physical Development Milestones

- Pulls up to stand
- Walks holding on to furniture
- Drinks from a cup without a lid as it is being held
- Picks things up between thumb and pointer finger such as small bits of food

15 Month Old

Social-Emotional Milestones

- Copies other children while playing, such as taking toys out of a container when another child does
- Shows a caregiver an object that they like
- Claps when excited
- Hugs stuffed doll or other toy
- Shows caregiver affection through hugs, cuddles or kisses

Language-Communication Milestones

- Tries to say one or two words besides "mama" or "dada" such as "ba" for ball or "da" for dog
- Looks at a familiar object when a caregiver names it
- Follows directions given with both a gesture and words. This might look like: Child gives a caregiver a toy when they hold out their hand and say, "give me the toy"
- Points to ask for something or to get help

Cognitive Milestones (Learning, Thinking, Problem-Solving)

- Tries to use things the right way such as a phone, cup or book
- Stacks at least two small objects such as blocks

Movement and Physical Development Milestones

- Takes a few steps on their own
- Uses fingers to feed self some food

18 Month Old

Social-Emotional Milestones

- Moves away from caregiver, but looks to make sure they are close by
- Points to show caregiver something interesting
- Puts hands out to caregiver to wash them
- Looks at a few pages in a book with caregiver
- Helps caregiver dress them by pushing arm through sleeve or lifting up foot

Language-Communication Milestones

- Tries to say three or more words besides "mama" or "dada"
- Follows one-step directions without any gestures such as giving caregiver the toy when they say, "Give it to me"

Cognitive Milestones (Learning, Thinking, Problem-Solving)

- Copies caregiver doing chores, such as sweeping with a broom
- Plays with toys in a simple way, such as pushing a toy car

Movement and Physical Development Milestones

- Walks without holding on to anyone or anything
- Scribbles
- Drinks from a cup without a lid and may spill sometimes
- Feeds self with fingers
- Tries to use a spoon
- Climbs on and off a couch or chair without help

Age 2

Social-Emotional Milestones

- Notices when others are hurt or upset, such a pausing or looking sad when someone is crying
- Looks at a caregivers face to see how to react in a new situation

Language-Communication Milestones

- Points to things or pictures when they are named such as when asked "where is the bear?"
- Says at least two words together such as "more milk"
- Points to at least two body parts when they are asked to show their caregiver
- Uses more gestures than just waving and pointing, such as blowing a kiss or nodding yes

Cognitive Milestones (Learning, Thinking, Problem-Solving)

- Holds something in one hand while using the other hand. This might look like holding a container and taking the lid off
- Tries to use switches, knobs and buttons on a toy
- Plays with more than one toy at the same time – this might look like putting toy food on a toy plate.

Movement and Physical Development Milestones

- Kicks a ball
- Runs
- Walks (not climbs) up a few stairs with and without help
- Eats with a spoon

30 month old (2 ½ years)

Social-Emotional Milestones

- Plays next to other children and sometimes plays with them
- Shows caregiver what they can do by saying, "look at me!"
- Follows simple routines when told, such as helping to pick up toys when a caregiver says, "it's clean-up time"

Language-Communication Milestones

- Says about 50 words
- Says two or more words, with one action word such as "Doggie run"
- Names things in a book when a caregiver points and asks, "what is this?"
- Says words like "I", "me," or "we"

Cognitive Milestones (Learning, Thinking, Problem-Solving)

- Uses things to pretend, such as feeding a block to a doll as if it were food
- Shows simple problem-solving skills, such as standing on a small stool to reach something
- Follows two-step instructions such as "put the toy down and close the door"
- Shows that they know at least one color, such as pointing to a red crayon when asked, "Which one is red?"

Movement and Physical Development Milestones

- Uses hands to twist things, such as turning doorknobs or unscrewing lids
- Takes some clothes off by self, such as loose pants or an open jacket
- Jumps off the ground with both feet
- Turns books pages, one at a time, when a caregiver reads

Age 3

Social-Emotional Milestones

- Calms down within 10 minutes after a caregiver leaves, such as during daycare or preschool drop offs
- Notices other children and joins them to play

Language-Communication Milestones

- Talks with caregiver in conversation using at least two back-and-forth exchanges
- Asks "who," "what," "where," or "why" questions such as "Where is mommy/daddy?"
- Says what action is happening in a picture or book when asked such as "running," "eating," or "playing"
- Says first name when asked
- Talks well enough for others to understand most of the time

Cognitive Milestones (Learning, Thinking, Problem-Solving)

- Draws a circle when caregiver shows them how
- Avoids touching hot objects such as a stove when warned

Movement and Physical Development Milestones

- Strings items together, such as large beads or macaroni
- Puts on some clothes by self such a loose pants or a jacket
- Uses a fork

Age 4

Social-Emotional Milestones

- Pretends to be something else during play such as a teacher, superhero, dog
- Asks to go play with children if none are around, for example may ask "Can I play with Alex?"
- Comforts others who are hurt or sad such as hugging a crying friend
- Avoids danger such as not jumping from tall heights at the playground
- Likes to be a "helper"
- Changes behavior based on where they are such as library or playground

Language-Communication Milestones

- Says sentences with four or more words
- Says some words from a song, story, or nursery rhyme
- Talks about at least one thing that happened during their day such as "I played soccer."
- Answers simple questions such as "What is a coat for?" or "what is a crayon for?"

Cognitive Milestones (Learning, Thinking, Problem-Solving)

- Names a few colors of items
- Tells what comes next in a well-known story
- Draws a person with three or more body parts

Movement and Physical Development Milestones

- Catches a large ball most of the time
- Serves self food or pours water, with adult supervision
- Unbuttons some buttons
- Holds crayon or pencil between fingers and thumb, not a fist

Age 5

Social-Emotional Milestones

- Follows rules or takes turns when playing games with other children
- Sings, dances or acts for caregiver
- Does simple chores at home such as matching socks or clearing the table after eating

Language-Communication Milestones

- Tells a story that they have heard or made up with at least two events. This might looks like, a cat was stuck in a tree and a firefighter saved it
- Answers simple questions about a book or story after it is read or told to them
- Keeps a conversation going with more than three back-and-forth exchanges
- Uses or recognizes simple rhymes for example bat-cat, ball-tall

Cognitive Milestones (Learning, Thinking, Problem-Solving)

- Counts to 10
- Names some numbers between 1 and 5 when a caregiver points to them
- Uses words about time, such as “yesterday,” “tomorrow,” “morning” or “night”
- Pays attention for 5-1- minutes during activities such as story time or making arts and crafts (note: screen time does not count)
- Writes some letters in their name
- Names some letters when caregiver points to them

Movement and Physical Development Milestones

- Buttons some buttons
- Hops on one foot

Age 6

Social-Emotional Milestones

- 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-Communication Milestones

- 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"

Cognitive Milestones (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 and Physical Development Milestones

- 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

Potty Training Milestones: Toileting Readiness!

Most parents start to think about potty training at about age 2-3 years. There is lots of advice about how and when to start potty training. While some of the advice is helpful, much of the advice is misleading. It's helpful to think of daytime and nighttime potty training as two separate potty-training milestones since many children will use the toilet during the day but still need a pull-up or diaper at night for a while. Before you decide to start teaching your child to use the toilet, it is helpful to understand the facts and milestones around toileting.

Facts:

- Only 40-60% of children are independently using the toilet by 36 months (age 3).
- If your child has a developmental disability, toileting readiness may be delayed.
- A child's bladder continues to grow until about age 3.
- Potty training too early can create problems for both parent and child.
- Problems include accidents and children trying to hold urine or bowel movements longer than they should.

Toileting Milestones:

- 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

Problem Behaviors

One area many parents encounter is problem behaviors. However, some problem behaviors are a normal part of your child's development. Many factors play a role in problem behaviors such as emerging language skills, a desire to become independent and an undeveloped impulse control. Here are some behaviors you may notice your child engaging in.

Tantrums. Tantrums and other kinds of acting out are a normal and even healthy part of childhood. They are signs that a child is becoming more independent. Did you know that young children typically have up to 5 tantrums a day and each of those can last up to 15 minutes? That may sound like a lot, however, that is developmentally appropriate for a young child.

The important things that tantrums tell us:

- A child is testing boundaries
- Developing skills
- Developing opinions
- Exploring the world around them.

Biting. Another behavior you may encounter is biting. This behavior is very common for children under the age of three. Children bite for various reasons, such as teething or exploring a new toy or object with their mouth as they begin the understanding of cause-and-effect. They also might bite a person to see if they can get a reaction. Biting also can be a way for children to get attention or express how they're feeling. Frustration, anger, and fear are strong emotions, and young children often lack the language skills to communicate how they are feeling. So, if they can't find the words they need quickly enough or can't say how they're feeling, they may bite as a way of saying, "Pay attention to me!" or, "I don't like that! As the child develops more language skills, biting behaviors will usually stop.

Hitting. This behavior is similar to biting. When children are younger, they may hit because they cannot express how they are feeling. However, it is normal for children to continue to hit even after they develop language skills. This behavior can happen when a child is upset or has a tantrum. When a child is upset, they may lose control and find a way to express themselves, which is when you may notice your child resorts to hitting. When children reach the age of five, self-control starts to come more into play, and hitting starts to disappear from their behaviors. And, of course, it's common for siblings to hit each other.

It's helpful to know if your child is engaging in typical or atypical behavior. Sometimes parents think a behavior is part of a child's developmental disability when it is really a typical behavior that all parents deal with. That temper tantrum might be frustrating, but if it's a typical temper tantrum it is nice to know that it might be your child moving through a developmental milestone. The good news is that, whether typical or not, in Chat, you will learn to address any behavior you feel is a problem for your child and your family.

What Role Does Play Have in Helping Young Children Reach Milestones?

We talk a lot about play in Chat. Play is one of the best ways to teach a new skill, practice readiness for the next milestone or strengthen a relationship. So, here are some things to think about:

1. Play is an important component of child development.
2. Children learn through play.
3. Parents and caregivers benefit from playing with a young child as much as the child does. It can help strengthen the parent-child relationship.
4. Being silly is a great way to engage a child in play.
5. We all need to play more!

Along with the milestones we just reviewed, Play follows a developmental path in young children. One of the things you and your Chat Clinician will be talking about is your child's play stages. Here is a chart developed by Dr. Mildred Parten Newhall that shows these stages. In the module on play, you will learn more about play and how to use it to help your child learn and grow.

Your Next Module

You and your Chat Clinician have probably discussed what module you should do next. If you haven't yet, you and your Chat Clinician should talk soon. Remember, there isn't a best order. The order of the modules is based on your family's needs and what you would like to focus on next.

Regardless of your next module, you and your Chat Clinician will come back to milestones throughout the Chat program so you can see your child's progress.

Summary

Young children develop through milestones for language-communication, social-emotional, cognitive skills and movement or motor skills. In Chat, we focus on language and social-emotional milestones. By understanding how young children move through milestones, you can help your child learn and grow.

Potty Training Readiness

Readiness Checklist for Parents

- [ ] We can stick with this until the end of being potty trained is met.
- [ ] We aren't having any major life changes (moving, new baby, vacations) in the coming weeks.
- [ ] We will be patient with my child; accidents do happen
- [ ] We can give praise and celebrate my child's accomplishments

Readiness Checklist for Toddlers

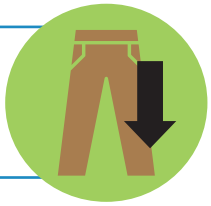
- [ ] My child stays dry for at least two hours
- [ ] My child shows interest in using the potty
- [ ] My child lets me know with me when they are wet or soiled
- [ ] My child can pull down their pants

Potty Training Tips

- [ ] Let your child to pick out their own underwear at the store
- [ ] Still use pull-ups or diapers at night, when starting
- [ ] Making a stickers potty chart can keep the child engaged with the process

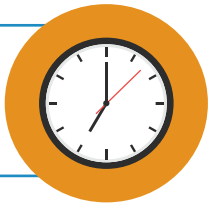
Visual Aid: Potty Training

1. Pants Down

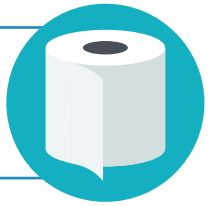


2. Sit on the Toilet

3. Wait Until Done



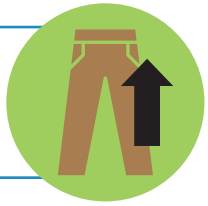
4. Use the Toilet Paper



5. Flush the Toilet

6. Wash Your Hands

7. Pants Up



Why Is My Child Doing This?

Have you ever experienced your child screaming for more than 45 minutes? It's their third meltdown, and it's not even lunchtime! Maybe your child bites you or themselves hard enough to draw blood. Or, you've just spent two hours trying to get your child to bed. By the time they're in bed, you're too tired to do anything but go to bed yourself. Then after one hour of sleep, your child is up again.

If you can relate to these or other difficult situations, you know how hard it can be to cope with behaviors that disrupt your family's life and cause stress. The good news is you and your Chat Clinician can focus on behavior reduction for these and other problem behaviors—these problem behaviors will become part of your Chat plan. For example, suppose your child's behaviors are frequent and severe. In that case, your Chat Clinician might recommend that reducing problem behaviors be the first focus area of your Chat plan or Developmental Milestones Plan (DMP).

What Is a Problem Behavior?

Many terms are used for behaviors that cause problems for children with developmental disabilities and the adults in their lives, including maladaptive behaviors, disruptive behaviors, challenging behaviors or severe behaviors. These terms pretty much mean the same thing—they describe behaviors that are different or more severe than what we see in most young children. There are also typical or age-appropriate behaviors that most children engage in. These behaviors might be difficult or irritating to adults, but they aren't associated with a developmental disability.

In Chat, we use the term problem behavior to include any behavior you as a caregiver feel is a problem. Problem behaviors include typical behaviors or severe behaviors like the examples given. It's common for children with developmental disabilities to have both types of behaviors. Typical behaviors are often related to a milestone. Learning to respond with effective parenting to typical problem behaviors is helpful, but it's also important to see these behaviors as a sign your child is growing and learning. For this reason, when you look at a behavior your child is engaging in, it's important to ask, "Is my child's behavior typical for their age or related to a milestone they are reaching?" Let's look at some examples.

Temper tantrums. It's typical for young children to have temper tantrums. In fact, if a 3-year-old doesn't have temper tantrums, that would be cause for concern. Temper tantrums tell us that a young child is developing likes and dislikes and trying to gain some control over their environment. Usually, as a child learns more language, they will start to use words to ask for something or express preferences leading to fewer tantrums. Temper tantrums can also give children the opportunity to

calm down, which is a very important skill. Typical temper tantrums for young children usually last less than 15 minutes and occur fewer than five times a day on average.

Biting and pinching. While all young children have temper tantrums, not all young children bite or pinch. However, it is common for young children to bite or pinch other children or their parents. Biting is particularly distressing for parents and other adults, but most children stop this behavior as they get older and learn to express themselves. In addition, most young children learn over time that these behaviors hurt other people. As a young child learns to understand the emotions of others and develops empathy for others, we often see these behaviors disappear. If a young child is having difficulty with expressing themselves or understanding other people, behaviors like biting or pinching others can continue. When biting is severe, frequent or continues past the age of three, the behavior is probably not the typical biting seen in young children. Instead, it might be related to language ability or not understanding other people.

Self-harm behaviors. Self-harm behaviors like severe biting, headbanging or hitting oneself can happen and should never be ignored. These behaviors can cause physical damage and usually don't go away as a child gets older. In fact, self-harm behaviors often get worse over time if they're not addressed. If your child frequently bites themselves, bangs their head, or anything else that can cause damage to themselves, let your Chat Clinician know immediately so these behaviors can be addressed.

Other behaviors. There are a lot of other behaviors that may be typical but stressful for adults. Whining, for example, is one that parents find very frustrating. The good news is that most of the tips for dealing with behaviors that might be more severe work well for typical behaviors too.

Why Does It Matter If the Behavior Is Typical or Not?

The answer is simple: If your child's behavior is typical, you and your Chat Clinician might decide not to prioritize it for reduction. Not focusing on a behavior doesn't mean that you don't need to reduce it. It just means that if your child has other behaviors that are not typical, you will probably focus on those first.

Why Does Problem Behavior Happen?

Parents often wonder, "Why is my child doing this?" The answer is often emotional dysregulation for behaviors like biting and temper tantrums. Emotional dysregulation occurs when the physical distress response of the body is out of the child's control, and it can happen to adults too. For example, if you have ever been scared, angry, or otherwise distressed, you might have cried uncontrollably or tried to run away or get so mad you felt out of control. If you felt this way, you were experiencing emotional dysregulation. This dysregulation is tied to the fight or flight response we all have. Let's look at how understanding this response can help you recognize your child's distress.

Fight or Flight Response

You may have heard about the fight or flight response (F&F). This reaction is the body's emergency response system. Our breathing increases during the F&F response, blood pressure goes up, and the body gets ready to run away or sometimes freeze or fight. When this happens, the body gets very aroused, and once it's going, you can't just stop the response. For example, a panic attack is an F&F response triggered when there is no emergency. If you ever had this experience, you know that someone telling you to calm down doesn't work and can even make you feel worse. However, as we mature and learn throughout our lives, we get better at dealing with the F&F response.

You might ask why the F&F would be triggered when there is no emergency—it turns out strong emotions or even thoughts can trigger the F&F response.

Let's say you are afraid of snakes, and you see a snake at the zoo. It's not an emergency because the snake can't get out of the cage and hurt you. But you think the snake can hurt you, and the F&F is triggered anyway. You might help yourself by telling yourself the snake can't get out or reading the description that says the snake is not poisonous to calm down. Or maybe you change your environment by looking at the penguins instead. It might take you a little time to calm down, but you will probably feel better later and enjoy the rest of your day at the zoo. Think of a young child afraid of the dark or worried that their parent won't come back when they are dropped off at preschool. If your child has a language delay, they can't use language to help themselves. Young children don't have the same ability to regulate their emotions, and children with developmental disabilities may have even more difficulty with self-regulation.

Types of strategies

The two basic strategies for emotional dysregulation and behavior problems are reactive and proactive (or preventive) strategies.

Reactive strategies. Reactive strategies are something you do after the behavior has started or already happened. These strategies react to the F&F response. The calming corner is a type of reactive strategy and supports a child's development of self-regulation. Another reactive strategy you will learn about is co-regulation. In co-regulation, you model your self-regulation and teach self-regulation skills. We will look at this and other relative strategies in *Behaviors Are Hard! Responsive Strategies for Behaviors.*

Proactive/Preventative strategies. Proactive strategies are things you do to prevent problem behavior. These strategies prevent the F&F response. For example, if you know your child has difficulty transitioning from one activity to another, you might set up transition warnings. These reminders let your child know beforehand that a change is coming, so they are not taken by surprise. When kids know that something will happen ahead of time, it's more likely that the transition will be easier. You will learn more about proactive strategies in *Setting Your Child for Success: Proactive Strategies for Behavior.*

Summary

Problem behaviors are common when a child is in the fight or flight response. The next two modules go through the two kinds of strategies for problem behaviors — reactive and proactive. Your Chat Clinician can also help you with specific strategies to address problem behaviors you are most worried about.

Coping with Tantrums

Dealing with tantrums can be very draining and stressful. You might feel you need to step in to end a tantrum right away. But if your child is safe, it can help to take a breather while you decide how to respond. Here are ideas for staying calm and keeping things in perspective:

- Accept that you can't control your child's emotions or behavior directly. You can only keep your child safe and guide their behavior.
- Accept that it takes time for change to happen. Your child has a lot of growing up to do before tantrums are gone forever. Developing and practicing self-regulation skills is a life-long task.
- Don't think that your child is doing it on purpose or is trying to upset you. Children don't have tantrums deliberately. They don't have the skills to cope with the situation or express their feelings the way adults do.
- Keep your sense of humor. But don't laugh at the tantrum; if you do, it might reward your child with attention. It might also upset your child even more if they think you're laughing at them.
- When out in public and other people give you dirty looks, ignore them. They may not have had experience with children or have forgotten what it's like to parent a young child.

Handling Tantrums

Sometimes tantrums happen, no matter what you do to avoid them. Here are some ideas for handling tantrums when they happen:

- Stay calm (or pretend to!). Take a moment for yourself if you need to. If you get angry, it will make the situation harder for you and your child. So when you speak, keep your voice calm.
- Acknowledge your child's strong feelings. For example, saying, "It's very upsetting when your ice cream falls out of the cone, isn't it?" Acknowledging their feelings can help prevent the behavior from getting more out of control and give your child a chance to reset their emotions.
- Wait out the tantrum. Stay close by, so your child knows you're there. But don't try to reason with your child or distract them. It's too late once a tantrum has started.
- Take charge when you need to. If the tantrum happens because your child wants something, don't give your child what they want. If your child doesn't want to do something, use your judgment. For example, if your child doesn't want to get out of the bath, pulling out the plug might be safer than lifting your child out of the bathtub.
- Be consistent and calm in your approach. For example, if you sometimes give your child what they want when they have tantrums, and you sometimes don't, the problem could worsen.

Setting Up Your Child For Success: Proactive Strategies For Behavior

Proactive strategies are things you do to prevent a problem behavior. While these strategies don't work every time, they can stop a problem behavior before the behavior happens. We will start our discussion of proactive strategies with sleep. Good sleep can go a long way to decrease behaviors, and good sleep is very important for a child's growth and development.

Sleep

Sleep does many helpful things, but one of the most important things good sleep does is lower the threshold for the fight or flight response (F&F). As we learned in the "Why is My Childing Doing This?" module, F&F leads to emotional dysregulation. You may have experienced this yourself. It's harder to regulate emotions when we don't get enough sleep. That's just a biological fact for all of us. In addition, we know that children with ASD and other developmental disabilities often have sleep problems. Common sleep problems in children include waking up frequently throughout the night and having difficulty falling asleep. Because poor sleep is so common in children with behavior problems, the first proactive strategy to work on is to improve your child's sleep.

How much sleep does your child need? Below are recommendations from the American Academy of Pediatrics. As you can see, young children need a lot of sleep. If your 2-year-old is not getting at least 11-14 hours, including naps, or your 3-year-old is sleeping less than 10-13 hours of sleep, including naps each day, they are not getting enough sleep. Also, keep in mind that many children are on the high end of their sleep needs. This means that for some 2-year-olds, 11 hours might be fine, but 14 hours of sleep is needed for other children. Finally, sleep is very important for learning. When we're sleeping, our brains integrate the new learning and new experiences from the previous day. Given this, sleep is especially important to young children's development since young children are constantly learning and growing every day! To set your child up for developmental success, you should do two things. First, address any long-term, chronic sleep issues with your pediatrician and Chat clinician right away. Second, make sure you are following the recommended sleep routines below.

Improving your child's sleep. The first step in improving your child's sleep is to set up a sleep routine to set times each day when they take naps and go to bed at night. This level of consistency is really important in establishing a predictable pattern for your child. All children need a regular and consistent bedtime. Your Chat Clinician can help you establish or modify your child's sleep routines. Here are some common sleep routines that can help your child know it's time for sleep:

- Turning off electronics
- Quieting the child's sleep space
- Getting them dressed for sleep
- Reading a story
- Dimming the lights
- Rocking your child

These steps let your child know that it is time to rest. Some parents sing lullabies or turn on quiet music for their child to listen to. You can develop sleep routines that help you and your child wind down together.

How much sleep does my child need? While sleep needs are individual, the American Academy of Pediatrics does have some general recommendations:

Age	Number of Hours
4-12 months	12-16 hours, including naps
1-2 years	11-14 hours, including naps
3-5 years	10-13 hours, including naps
6-12 years	9-12 hours
13-18 years	8-10 hours

Sleep diary. The sleep diary is a tool that can help you create a bedtime routine and track your child's sleeping patterns. Basically, a sleep diary is just a journal of your child's sleep, including what happened before and after they went to sleep. There are free, downloadable sleep diaries, or you can make your own with a simple calendar. Share your child's sleep diary with their doctor and Chat Clinician. The diary can be particularly helpful if your child has severe sleep problems.

Transitions Warnings

Transitioning from one activity to another can be very difficult for some children and lead to behavior problems. Letting your child know that a transition is coming up can prevent or reduce temper tantrums or other problem behaviors. A transition warning you give also helps your child understand when to transition.

What is a Transition warning? Transition warnings give your child time to adjust to the fact that a transition is coming. Transition warning can improve:

- Appropriate behavior during and after a transition
- Successful participation in social activities

Transition warnings can reduce:

- The amount of time it takes to move from one activity to another
- Challenging behavior around transitions

There are many ways to deliver a transition warning. For example, you can give your child a verbal warning ("Five more minutes at the park"), use a timer, or a visual notification like counting down. Let's look at examples of different types of transition warnings.

Examples of Verbal Transition Warnings:

- "Five more minutes, and it's time to clean up."
- "Five more minutes to finish your snack, then it's time to do homework."
- "One more time around the train track, and then it's time to get ready for bed."

Examples of Timer Transition Warnings:

- Set an alarm clock
- Set a kitchen timer
- Use a sleep timer on a radio or TV
- Use a wristwatch that has an alarm setting

Examples of Visual Transition Warnings:

- **Visual Timer:** Allows your child to see how much time remains.
- **Visual Countdown:** A tool that has squares with numbers 1 through 5. Remove numbers every two minutes or every 30 seconds.
- **Visual Schedule:** A formal schedule with pre-made printed activities or written on a white-board or paper. You can completely control the schedule. You can allow your child to choose or work together with them to create.
- **Use of objects, photos, icons or printed words:** You can give your child a photo of the next place or activity or give your child an icon to match to the next activity or an object that will be useful in the next activity.
- **Finger Countdown:** This is a warning that your parents may have used. Hold up five fingers to show five more minutes. Then, four, three, etc.
- **Checklist:** Make a list of materials needed or tasks to get out the door.

Warnings should fit the activity. Consider your child's interest level or preferences and the length and difficulty of activities. If you ask your child to transition from something they like, they might need a longer warning or countdown. For example, two minutes might not be enough for moving from a video game to bedtime. In this case, you might want to use a countdown starting at 10 minutes.

It's a good idea to involve your child as much as possible. Many children like to set the timer or turn the timer off. If you're using pictures of your child as part of the transition warning plan, let your child take a picture of you doing your activities, then take their picture. Make it as fun as possible, and don't forget to reinforce or reward your child when they transition successfully!

Grandma's rule

Grandma's rule is one your parents or grandparents might have used for you. It's the "first this, then that" rule. For example, "first you finish putting your toys in the toy box, then we will have storytime." The "first this" is something the child doesn't like to do, and the "then this" should be something the child wants or likes. Grandma's rule is a simple strategy, but it can be an effective one for some children. Keep in mind that a child behind in language skills might not understand the rule. If your child doesn't understand the "first this, then that" connection, Grandma's rule won't work and might make their behavior worse.

Saying "no"

It's hard to know when to stay firm and when to give in to your child's requests. As parents and caregivers, we constantly decide what battles to fight and what to let go. Being very intentional about when you say "no" can decrease the number of times you say "no." Saying "no" creates clear boundaries for your child and can reduce problem behaviors. For example, rather than telling your child not to touch things around the house, put away the things you don't want your child to touch. Here's another example, say your child doesn't want to wear a coat to go outside. As long as it's not extremely cold, you might say, "Okay, but it's cold, so I'll keep your coat right here in case you want to put it on later." Insisting that your child put the coat on rather than letting your child experience chilly weather is a battle you don't need to fight. However, being intentional about picking your battles also means there will be times when you have to hold firm and say "no" to your child. Here are a few examples of when no is the proper response.

- When a child's actions might hurt someone (or themselves) or break something
    - Preventing harm is the number one reason to say "no." However, children often struggle to understand or anticipate bad outcomes, so they may need adult guidance to help them make good choices.
    - After saying "no" to a child, a good option is to offer help find an alternative. This option can redirect a child towards a safer activity. For example: "No, you can't jump on the couch. You could get hurt on the table, or the couch might break. If you want to jump around, please go outside."

- When a child can do it themselves
    - It's great when a child asks us for help, and it's our job to support them. However, it's also important to guide them to do things on their own and learn to help themselves. Keep in mind that if your child is upset about something or is just recovering from an emotional meltdown, they may need help with something they can generally do by themselves. Part of helping your child get back to a calm state might be to help in these situations.
- When someone else's needs take priority at the moment
    - Our children take priority almost all of the time; however, life happens, and things come up that require parents to redirect their attention to other demands. It is important to bring this to children's attention and explain your decision in saying "no." This explanation will help them understand that other people's needs are important and valued in addition to their own needs.
- When it's a want and not a need
    - This example is an important one. When a child wants to buy or do something that doesn't align with your values, budget, or schedule, it's up to you to tell them "no," acknowledge their desire, and clearly explain why you're saying "no." For example, "No, we're not going to buy it today, but I can see why you like it! It's purple, your favorite color!"

When talking about "no," it's important to remember our actions and how they relate to the words we use end up teaching our children the meaning of those words. For example, if we tell a child "no" repeatedly but don't stop them from doing the thing we're saying "no" to, they are learning that "no" is meaningless. Our job is to follow through with actions to set clear expectations and boundaries for our children. It's one of the most important things that parents and caregivers can do. Children develop and learn best when there are clear and predictable expectations.

Other proactive strategies for success

Token economies. A token economy is a reward system you can set up for your child. This strategy only works if your child understands that they can turn in the tokens for a reward (think points or stars), though. Very young children or children with delayed language skills will not be able to understand how a token economy works.

Social stories and Story-based interventions. Story-based strategies, also called social stories, involve writing descriptions of certain behaviors and situations when they might come up. For example, you can tell a story about how to behave in a certain situation. Stories can increase communication, learning readiness, and interpersonal and self-regulation skills. Stories have also been shown to decrease problem behaviors. You can write your own stories or buy stories.

Calendars and visual schedules. A visual schedule is a visual support that lists steps, behaviors or tasks your child should perform. It can use photos, drawings or words. These are also available commercially, or you can make your own. Visual schedules are very helpful for children with limited language skills. The pictures tell the child what is coming up. That way, your child isn't surprised when it's time to stop doing one thing and start another activity. You can combine visual schedules with transition warnings.

Summary

Proactive strategies can prevent behavior problems. Getting good sleep is probably the most important strategy. No one is at their best if they aren't getting enough sleep. However, not all strategies work for all children. You may need to try a few different ones to find what works best for you and your child. If you need more help, talk with your Chat Clinician about other strategies.

Sleep Diary

Complete in the Morning

Day of the Week	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
My child got into bed last night at:	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM
Last night my child fell asleep	Easy	Easy	Easy	Easy	Easy	Easy	Easy
	After some time	After some time	After some time	After some time	After some time	After some time	After some time
	With difficulty	With difficulty	With difficulty	With difficulty	With difficulty	With difficulty	With difficulty
My child woke up during the night	# of times: # of minutes:	# of times: # of minutes:	# of times: # of minutes:	# of times: # of minutes:	# of times: # of minutes:	# of times: # of minutes:	# of times: # of minutes:
My child got out of bed today at:	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM
My child slept a total of:	Hours:	Hours:	Hours:	Hours	Hours:	Hours:	Hours:
Additional notes:							

Sleep Diary

Complete at the End of the Day

Day of the Week	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
My child exercised today	Yes/No How long?	Yes/No How long?	Yes/No How long?	Yes/No How long?	Yes/No How long?	Yes/No How long?	Yes/No How long?
My child took medication today	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
My child took a nap	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No	Yes/No
How long did they nap?							

Behaviors Are Hard!
Responsive Strategies for Behaviors

Reactive strategies are things you do after the behavior has started. While it's great to prevent a behavior, it's not always possible. This module will look at things you can do after a behavior is underway. The first two strategies focus on helping your child calm down or regulate their emotions. If you haven't read the module, Why is My Child Doing This? — it's a good time to do so. Problem behaviors often occur when a child is distressed or scared, leading to emotional dysregulation. *Why is My Child Doing This?* covers what happens when a child becomes dysregulated.

Reactive Strategies

Co-regulation. Young children often have a hard time regulating their emotions. This is true for all children, not just children behind in their development or children with a disability. We can teach children how to manage their emotions and calm down through co-regulation. You can think of co-regulation as sharing your good emotional regulation with your child.

Over time as a child's social-emotional development increases, they learn how to regulate their own emotions without adult support. We call this self-regulation. Self-regulation is a child's ability to manage their feelings, impulses and attention. When a child can self-regulate, they can better manage their behavior, follow directives, learn new things, focus on play and solve problems. But when a young child is first learning these self-regulation skills, they often need support from their caregivers. If your child is struggling with self-regulation, you can support your child through co-regulation. The first step in co-regulation is to understand your own emotional regulation.

Your regulation. How you regulate your emotions is key to helping a young child stay calm. If you do not feel in control of your emotions and feel dysregulated, you won't help your child regulate themselves.

Here are some questions to ask yourself about your self-regulation abilities: How do you regulate your own emotions?

Example: Make sure to get enough sleep or get 30 minutes of exercise each day

How does your ability to regulate your emotions change over the course of the day?

Example: Harder to regulate if I'm very tired at the end of the day

What causes your ability to regulate your emotions to change?

Example: Something upsetting happened earlier in the day

Keep in mind that you can't co-regulate if you are dysregulated yourself. Remember to do things that help you stay grounded and regulate your own emotions and behavior. For most people, this means getting enough sleep, exercising or taking some "me time" each day. It might also mean finding others who can support you, talking with friends and family or other activities that help you control your emotional responses.

Mindfulness, Sleep and Other Ways to Improve Your Emotional Regulation

Mindfulness is one of the activities shown to help people regulate their emotions. Research on parents of children with ASD or other developmental disorders has shown that practicing mindfulness a little each day lowers parent stress levels.

Other tips for improving your own emotional regulation:

1. ***Get enough sleep.*** You can improve your sleep by practicing good sleep habits but getting a good night's rest can be difficult if your child's sleep is poor. Talk to your Chat Clinician about ways to improve sleep habits for both you and your child.
2. ***Exercise.*** Exercise decreases stress and anxiety and even reduces depression. Exercise doesn't have to be an hour at the gym. A 20-minute walk works too.
3. ***Join a support group or find another parent to talk to.*** Through myBrightlink, you can connect with other patents who have a child with ASD or other developmental disorder. Talking with someone who understands your parenting experience can help you feel less alone.
4. ***Make time for yourself.*** Yes, this is hard, but it's important. Even a few minutes of "me time" each day can help.
5. ***Keep a journal.*** Make a note of when you feel less stressed, then think about what you did that helped you feel less stressed. Writing down your thoughts can help you learn what works for you.

Helping Your Child Regulate

When you feel like you have good regulation of your emotions, you can help your child through co-regulation. Here are some suggestions:

1. Talk to your child about how they are feeling. For example, in a calm voice, say, "You seem upset right now," or "I think you are feeling sad."
2. Suggest a way for your child to feel calmer. Don't just tell your child to calm down. Maybe your child feels better when they sit on your lap. If this is the case, you could say, "You feel better when you sit with me, how about if you sit on my lap for now?" or if your child has a lovey that helps them feel better, you could get the lovey for them.
3. Just be in the room with your child modeling how to be calm. For example, you can say something like, "I feel a little upset too, so I'm going to sit here with you and take deep breaths." to share out loud how you're feeling.
4. Practice calming techniques when your child isn't upset. For example, try practicing taking deep breaths together.

While these suggestions can help, the basic idea of co-regulation is if you are calm, your child will feel more peaceful. Children respond to their parent's feelings— just being calm yourself will make a difference.

What If I Can't Regulate My Emotions?

There may be times when you are so stressed you don't have a good handle on your own emotions. This situation is normal — no one has perfect emotional regulation. When you feel dysregulated, this is not the time for co-regulation. However, there are other strategies you can use in times like these.

Calming corners. Calming corners can help children self-regulate. A calming corner is NOT sending your child to the corner when they misbehave, but it is a place in the house with items that your child finds calming. Often the calming space is in the corner, but it can be elsewhere. If your child doesn't like to be far away from you or needs supervision when they're upset, the calming area should be in a place where your child can see you. They should help choose the items that go into their calming corner to feel comfortable in the space. If your child uses visual schedules, you can make one for the calming corner showing pictures of how your child likes to calm down. Another idea is to hang a poster with different types of feeling icons so your child can point to how they are feeling or have feeling books available for them to look at. Other calming items may include a stuffed animal or soft blanket or quiet activities like coloring or soft music.

Watch the video on visual schedules

Sensory bins. Sensory bins are a great way for kids to engage their senses, relax and even unintentionally practice mindfulness. Sensory bins include sensory input, which can help a child organize their feelings of where their body is in relation to things around them. When a child feels physically more organized in their body and space around them, they can become more regulated. Your Chat Clinician can help you use your child's Sensory Profile to put together a sensory bin that is relaxing and calming for them.

Sensory bottles. Similar to a sensory bin is a sensory bottle. You may have seen these on blogs or DIY sites—they are easy to make and can be included in your child's calming corner. A sensory bottle usually has small items that children can watch settle to the bottom, like glitter. Then, as they watch the glitter float, they can slow their breathing and regulate themselves and their emotions. Making a sensory bottle is a great calming activity that you can do with your child!

Repetitive Behavior

Some children, particularly those with ASD, will engage in repetitive behaviors like hand flapping or rocking. Often children do this to calm down and self-regulate. Unless the behavior is harmful (like headbanging), it's best not to stop your child from doing the repetitive behavior when they're upset. If your child engages in repetitive behaviors when not distressed, talk with your Chat Clinician about strategies to decrease these behaviors.

Taking Something Away

A common parenting approach to problem behavior is to take something your child likes away. But, if you are going to take something away, make sure:

- You don't take something important to your child's emotional needs. For example, if they have a stuffed animal or blanket to soothe themselves—these items teach self-soothing and should never be taken away. Instead, take away something important enough they care about but not something they use to emotionally regulate.
- Your child understands they can get the item back. Some young children don't know that they can get things back after being taken away. If your child thinks something they like has disappeared forever, they can become even more dysregulated. Try putting the item where the child can't reach it and setting a timer. When the timer goes off, your child can get it back. Don't take away the item for a long time—for a young child, a couple of minutes is a long time.

Remember, very young children or children with delayed language might not understand why something is being taken away or how to get it back. So, if your child doesn't understand, it's best not to use this strategy. If you plan to use this strategy, check in with your Chat Clinician for ideas.

Timeouts

For children. Many parents try timeouts, and while they can be effective, they can sometimes make things worse. Timeouts don't work when:

- Your child is very dysregulated and can't calm down by themselves. If your young child is very distressed, leaving them alone can make things worse and scary. Young children often need their caregivers to soothe them, which is why a calming corner works—if your child is in a calming corner, they are still in the room with you.
- Your child likes to be alone and finds timeouts a positive or neutral experience, or they just don't care.

For yourself. As we discussed earlier, being aware of your own regulation and dysregulation will help you know when to tap into these strategies. It's OK to take a step back to collect yourself and get regulated. Remember how airlines tell adults to put their oxygen masks on before helping others? If you don't address your own dysregulation, you won't be in the best space to co-regulate with your child. By "putting your mask on first" and taking the time to self-regulate, you'll be better able to help others.

Summary

Young children often need help from their caregivers to self-regulate. As a parent, your own emotional regulation is an important tool in helping your child regulate their emotions. Using reactive strategies like co-regulation and calming corners can help your child calm down when distressed.

Co-regulation and Self-regulation Skills

Why is it important for children to have these skills?

Well, here are a few reasons:

- Improves emotional intelligence
- Able to cope better with stress
- Improves learning outcomes at school
- Becomes more independent
- Better relationships with others
- Develops self-discipline skills
- Ability to control impulses
- Stays focused on goals
- Adapts to changes in their environment

It's important to remember that this skill is not something that your child will magically master one day. Instead, it is a journey and a skill that we all need to work on daily.

A large part of self-regulation development starts with co-regulation.
Co-regulation continues through a child's life and is a building block for future self-regulation skills. However, co-regulation is a two-way street. So how can we co-regulate with our children? First, be with and respond to their emotions by being at eye level with them, hearing and validating their feelings, naming what you are seeing, and providing a calming strategy or tool.

When you think about a baby during their infant years, they are filled with co-regulation. For example, a baby is crying and upset. So you try to calm their fears by holding them, talking to them, swaying back and forth, and working through why they are upset.

Self-regulation is the ability to manage, monitor, and react through behavior, emotions, thoughts, and energy positively for ourselves and those around us. Self-regulation is higher-level thinking that develops over time. Young children are still learning how to self-regulate through co-regulation.

As parents, we are human too. Being human does NOT mean we will respond ideally in every emotional situation. Perfection is not the end goal here. But it does mean we can be more aware of our emotional state, work through our emotions, model that for our children and help provide co-regulation with them as best we can.

Power Struggle Chart

At times you may find yourself in a power struggle with your child. It happens to all of us. During these times, what is your typical reaction? Below is a chart to fill out when you are in a power struggle with your child. Write down the situation and what your response was. Then think about a fun or playful way you could get your child to do what you ask. If you need help thinking of playful ways, ask your clinician. They can help you find ways to make power struggles playful.

Situation	How I usually respond	Something fun or playful I can do instead

Let's Play: Stages of Play and How to Engage

Having fun with your child while you help them learn and grow is one of the best parts of being a parent. Playing with your child is important because play is probably the best way for young children to learn. In addition, it turns out that play helps a child's brain develop. Plus, play strengthens the parent-child or caregiver-child relationship. And it's fun-we can all use more fun in our lives!

The Importance of Play: Science and Stages

Like milestones, there are different types and stages of play, and research by psychologists and others has given us a deep understanding of how play affects growth and development. For example, play helps brain development in young children and helps them learn language and social skills. Playing with your child can also help you feel closer to them because play is a bonding experience for both parent and child. This module will look at the types of play and the stages of play most children move through.

Three Basic Types of Play

1. ***Exploratory play.*** This involves using all the senses, like playing with sand, banging blocks together, and splashing water. Infants and toddlers do lots of exploratory play by exploring what's in their environment by using all of their senses. For example, they may look at their fingers wiggle, rub their hands over the carpet, bang an object on the table or even test the volume of their voices. As babies become more mobile, this can include jumping, climbing, kicking and throwing. Babies and children are happy exploring and being on their own during this less social stage. Exploratory play is very helpful for children with sensory needs, and many children continue this type of play as they get older.
2. ***Functional play.*** This includes playing with toys or objects according to their intended function, such as putting a puzzle together or pushing a toy car around on the floor. Functional play can be a great way for your child to learn new things. You can make a game out of almost any activity. For example, if you are teaching your child to put on their clothes, you can make a game out of it by taking a picture of a shirt, showing your child and playing "Find the shirt." You can add choice to the game by having multiple pictures, asking your child to point to one, and then going on a shirt hunt! This kind of play takes more time, but so does struggling with your child to get them dressed. The more fun you can make it, the better you and your child will feel.
3. ***Pretend play (also called imaginary or symbolic play).*** Pretend play uses an object to represent something else, like using puzzle pieces to make a bed for a doll or holding a toy car up and singing into it like a microphone. More complex pretend play can include imaginative play and role-playing. Research shows this kind of play is very important for social development and promotes joint attention. Pretend play can be more difficult for children with autism or other developmental disabilities, so pretend play is important in Chat.

Pretend Play

Symbolism. Pretend Play involves using one object to represent another. For example, a pencil becomes a magic wand, or a red block becomes an apple. Symbolism is important for language and social development. A child's ability to use their imagination helps them develop skills that lead to complex language and reading skills. For example, a child might make a stuffed animal cry saying the toy is sad because of a tummy ache. Pretend Play is all about symbols.

Understanding others. Research over the past ten years shows that a child's ability to use symbols is also related to reading social situations or people's intentions. A child might make a stuffed animal cry saying the toy is sad because he has a tummy ache. By developing the ability to understand how others feel and why others are doing the things they do, children increase their capacity for empathy.

Understanding your child. One of the most helpful things about Pretend Play is that it can give you a window into your child's world to help you understand what they're thinking. For example, let's say your child pretends to be a doctor and uses a pen to stab a doll in the arm. What could this mean? Well, if your child is going to the doctor soon, they might be worried that they will get hurt or scared of getting a shot. If you saw your child doing this, you might say, "Is the doll is scared about going to the doctor? How can we make them feel better?" Or you might wonder out loud if your child is worried by saying, "I see the doctor is hurting dolly. I wonder if you think you will be hurt when you go to the doctor." Even if your child doesn't understand everything you say, you're letting them know you understand they are scared. This situation can be an opportunity for you and your child to pretend play being at the doctor and do something like holding hands to be less afraid.

Symbolic Play Examples:

- Pretends dolls as real people (the doll talks and walks).
- Substitutions with objects (e.g., pretending a hairbrush is a microphone, a pencil is a magic wand, a block is a piece of apple)
- Substitutions without objects (e.g., holds a hand up without an object to pretend to drink, shakes hand as if shaking a saltshaker)
- Multi-scheme sequences of play (e.g., baby wakes up, eats breakfast, goes to school)
- Fantasy/sociodramatic play (e.g., pretends to be a superhero or fairy).

The Benefits of All Play

While pretend play is important, so is exploratory and functional play. All Play helps children with:

- Language
- Executive skills, like problem-solving
- Social skills

Playing with Others: Stages of Play

In addition to types of play, children go through stages of playing. Dr. Mildred Parten Newhall, a sociologist, studied the way children play, and her research gives us a picture of how children develop play skills and learn through play. In the same way that it's helpful to learn about developmental milestones, it's helpful to learn about the stages of play. Remember, ages are an estimate for typically developing children, and there is a lot of individual variation.

Unoccupied Play (Birth to 3 months)	This play lacks social interaction, objectives and language. Children engage in Unoccupied Play by observing their world and moving their bodies. Think about a happy baby watching a cat's tail moving, kicking their arms and legs with excitement.
Solitary Play (3 months to 30 months)	The child plays alone rather than with friends. Solitary Play is more focused and lasts longer than Unoccupied Play. For example, think about a 2-year-old child holding their doll while watching a group of children playing house with dolls. The child may comment on the house game while watching the other children play.
Onlooker Play (2 years)	The child may watch other children play and talk with the other children but may not fully engage in the play or game. Think about a 2-year-old girl watching a group of girls playing house with dolls holding her own doll and making comments about the house game while watching.
Parallel Play (3 years)	Parallel Play is when children play independently in the same area and with the same materials. They may observe and mimic each other, but they have their own goals, and communication is limited. For example. picture two children seated at the same table but focusing on their own Play-Doh.
Associative Play (3-4 years)	Children engage in social play with peers with shared materials but may do their own thing. Think about two children coloring together, talking, and sharing crayons but drawing their own pictures while sharing materials, ideas and conversation.
Cooperative Play (4 years and up)	Cooperative Play is the most social and organized form of play. Children share a goal and work together to reach it. They also share resources, make compromises and take turns. For example, think about children making a poster for a school project, planning and sharing while talking to each other.

Here is a chart that shows Dr. Newhall's stages and types of play. Your Chat Clinician will work with you to determine which stage of play your child is in based on the type(s) of play they usually engage in.

Play Stages	Unoccupied 0-3 Months	Solitary 3 Months-2.5 Years	Onlooker 2.5-3.5 Years	Parallel 3.5-4 Years	Associative 4-4.5 Years	Cooperative 4-4.5 Years
Types of Play	Exploratory Play					
		Combination Play				
		Cause & Effect Play				
		Functional Play				
		Self-Directed Pretend Play				
					Other Directed Play	
					Pretend Play	
						Complex Pretend Play

Spontaneous Play

Research shows that spontaneous or free play fosters creativity. Spontaneous Play is the kind of play that a child starts on their own. For example, you might be in the kitchen doing the dishes, and your child takes a spoon and hits a pot like a drummer. Maybe your child likes the sounds it makes or maybe it's the act of hitting the pot that is interesting to your child. This activity could be an opportunity for imitation. If you sat on the floor and got a pot and spoon, you would be doing two things: you would be imitating your child and letting your child know that free play is a good thing!

Play with Peers

A child's engagement in pretend play with other children helps develop social awareness with other children. In their pretend play together, children may experiment with social roles, which helps build their understanding of rules of behavior. For example, one child may take the role of the mommy or daddy and the other child the role of a baby, and together may act out how the parent talks and acts with the baby. Pretend play also allows children to act out situations with outcomes that differ from reality. By co-creating pretend play situations and roles, there are many opportunities for children to work on problem-solving, compromising and negotiating skills.

Preschool and playgroups. Because playing with peers is so important to a child's development, Chat recommends that by age 3, a child is in preschool or part of a playgroup. If your child has ASD or other developmental disability, they probably qualify for preschool through your school district at age 3. This program is part of free education guaranteed by federal and state laws. You can find out more about this in the myBrightlink article on special education or by calling your school district. Good preschools always include playtime. You may also want to join a playgroup with your child. Through myBrightlink, you can connect with other parents. Getting your children together to play is a great way to help your child develop play and social skills. Remember that play looks different for all children and their developmental age groups. Two 3-year-olds playing next to each other but not cooperatively playing is still important. Reviewing the play stages in Module Two of Chat will give you and the other parents a good idea of what to expect in a playgroup.

How to Play with Your Child

Is play harder for some children? Some children with developmental disabilities find play, mostly pretend play, difficult. You may have noticed this in your child. If play is difficult for your child, you might be asking, "How do I get my child to play with me?" Sometimes play is difficult if a child has difficulty with joint attention (paying attention to what someone else is paying attention to). It's easy to see how this can interfere with play. Also, you might have noticed that it's hard to get your child interested in a toy. One solution is to imitate their play. Finally, sometimes it's the social aspect of play that children struggle with. After all, playing together is a social activity. Here are some tips that help you and your child enjoy playtime.

1. ***Review the stages of play in this section.*** Reviewing this information can help you understand which stage your child is in. For example, if your child is young, they may not play with you as much as play next to you. That's perfectly fine and it allows you to imitate their play. Look for times when you think your child is engaging in play, stop what you are doing and imitate their play.
2. ***Make time for play.*** In addition to looking for a times when your child is playing, set time during the day to play.
3. ***Be the narrator!*** "Oh, I see the tower of blocks is getting higher and higher! Wow! One more on the top!" Describing your play gives meaning to how you are playing. For example, if your child is lining up cars, you can give it purpose by saying, "We parked the cars!" Or, "Uh-oh! There's a traffic jam!" Engaging in this way will highlight the shared activity that you and your child are doing. It also helps them to understand language and encourages them to use new vocabulary. In describing your play with your child, remember a few things. First, be aware of your child's verbal level and ability, make sure that you **simplify your language** to meet where they are. **Speak slowly** using **words they recognize,** and make sure that you **stress important words. Repeat what you say** so they can get used to the words. It is also important that you **expand on your child's language** by helping them to use new words. Examples:
    - "You're pouring tea for Bear"
    - "Now the track is getting a bridge."
    - "That tower is so big!"
    - "Cars go fast!"
4. *Ask questions.* Sometimes children need help expanding their ideas. Examples:
    - "What happens next?"
    - "Where are they going to go?"
    - "Does anyone else want to go?"
    - "What if the _____ happens?"

Expanding Your Child's Play Skills

Once your child is able to imitate familiar actions consistently, you can start to focus on expanding their play skills by modeling new actions with their toys. When encouraging them to start new types of play that may be more complex, remember where they are. Take note of their preferred activities and what has sparked their interest. Keep the actions at their developmental play level or slightly above. You want to push their play to the next level but not create frustration or cause the play to be unenjoyable.

- Increase the variety of play schemes with their favorite toy. For example, the car turns from a race car to an airplane or a submarine.
- Encourage your child to play with new toys by incorporating them with their favorite toys. For example, use Legos to build a bridge for the cars to drive under.
- Increase the complexity of their play.
- Show them how to do actions with different toys.

By following these ideas, you will be increasing the developmental play level of your child.

Exploratory Play Library

Tactile/Touch

- Sensory bins with rice, dried beans or sand
- Water table or containers filled with water
- Playing with food (yogurt, squishing fruit)
- Objects with various textures (smooth, fuzzy, bumpy, hard, squishy), such as balls and stuffed animals
- Tickling

Visual/Sight

- Bubbles
- Moving blankets up and down
- Tossing lightweight fabrics, like scarves, into the air and watch them fall
- Songs with finger/hand motions
- Playing in the dark with flashlights or glow sticks.

Auditory/Sound

- Playing different kinds of music
- Making various sounds yourself!
- Singing songs
- Banging objects together (pots and pans, blocks, etc.)

Taste & Smell

- Put out a variety of foods to try
- Sniffing something yourself and then offering it to your child to sniff (show them how to sniff and smell)

Movement

- Swinging
- Crawling, running, jumping, etc.
- Putting them on a blanket or towel and pulling them on a smooth floor
- Putting favorite toys/objects around the room to encourage them to move from one spot to another
- Putting pillows or cushion on the floor to crawl, step over or jump over
- Riding on toys

Functional Play Library

Cars, Trains & Construction Toys

- Moving them back and forth on the floor, add in "vroom" or "beep-beep" sounds
- Moving trains along a train track
- Using construction toys to dig in the sand/dirt
- Using spray bottle to wash dirty cars/diggers;- clean and a towel to dry them off

Building/Assembling

- Building towers or other structures with magnetic tiles, blocks
- Putting together train tracks
- Building with Legos/Duplos
- Puzzles

Books

- Flipping the pages
- Looking at pictures

Dolls/Babies*

- Feeding baby doll a bottle
- Covering baby doll with a blanket
- Rocking baby doll in your arms

Doll House*

- Putting dolls on the bed
- Moving them up and down the stairs
- Giving them food

Music

- Shakers, drums, whistles
- Banging a spoon on a pot

Ball Play

- Rolling, kicking, throwing a ball (start with lightweight balls, like a beach ball or bouncy ball)
- Adding two cones or cans to make a goal and kick a ball through
- Adding a laundry basket to throw the ball into

Don't forget to change environments to offer opportunities for exploration — move from bedroom to kitchen to the backyard to the bathroom!

*These activities may start to include elements of pretend play.

Pretend Play Library

Community Jobs Fire Fighter Police Officer Sanitation Worker EMT Postal Worker Doctors Nurses	• Use actual events for inspiration. Imitate what you've seen to help expand and add variation to your child's play. • Incorporate stuffed animals who need "help" or ride-on toys to take place of trucks/ • Incorporate toys to give them "checkups." • Build a mini first-aid kit. • Pretend to bump yourself and need a bandage. • Parent/caregivers or siblings can take on the role of someone needing assistance and switch roles with your child if they choose.
Transportation Bus Driver Train Engineer Pilot Boat Captain	• Use boxes as driver's seats and other props (bowls, plates, etc.) as steering wheels. • Expand the play by asking where they're going, what they're collecting, who else is coming with them, etc. • Use ride-on toys or bikes as trucks.
Animals Veterinarian Farm/Ranch Zookeeper Pretending to be Animals	• Use stuffed or toy animals to set up a farm or zoom scene. • Use materials to set up fences or barns (blankets, boxes.) • Pretend to "train" the animals for the circus • Make your own animal props with boxes, containers, etc. • Make animal masks or puppets from paper plates and socks. Wear them with your child and use animal sounds to bring them to life!
Sports Football Soccer Gymnastics Martial Arts Basketball	• Use balloons or beach balls to toss back and forth like volleyball or football • Make an obstacle and pretend to be gymnasts • Move around the house or yard like an athlete (e.g., jump up stairs like a gymnast, do karate moves down the hall)
Food/Restaurants Chef Server Customer Ice Cream Shop Food Truck	• Pretending to be in a restaurant is a great way to use household items as play items or use one's imagination without a play item if your child is ready. For example, a spoon can be a Popsicle; playing cards can be sandwiches; you can hold out your hand with an imaginary ice cream cone, etc. • Use snack or mealtime to pretend to be at a restaurant. • Prepare simple snacks and meals and pretend to be chefs. Do the same with preparing food for your pets.
Fantasy Fairytale Character Fairies Dragons/Dinosaurs Monsters Explorers	• Go outside and pretend to dig up dinosaur bones. Use a paint or makeup brush to dust off rocks. • Use dress-up (even from your own closet!) to take on the role of a fantasy character. • Use boxes or build forts to create castles or make-believe lands for your characters. • Turn into mermaids, sharks or other sea creatures in the bathtub.

Dolls, Stuffed Animals, Puppets	• These can be homemade — use socks, mittens, or paper bags to make your own based on your child's interest. • Run through daily routines with the dolls/animals such as bedtime, meals, playing together, playing house, etc. • Involve them in your child's routines (e.g., have a favorite stuffed animal pretend to eat breakfast with your child.)
Space Astronaut Alien	• Build a rocket ship out of boxes or a fort (using pillows, chairs, sheets, blankets, etc.) • Make a space helmet with tin foil or bowls. • Create physical movements to pretend to be flying in space (jump up for blast off, soar around the house, walk in slow motion like on the moon).
Family Family Roles Routines	• Take on various family roles (e.g., parents, sister/brother, baby, grandparent, aunt/uncle). • Use props as family roles (e.g., teddy bear is brother, stuffed cat is sister) • Go through various routines within your play roles
Stores Candy Store Flower Shop Toy Store Shoe Store	• Pretending to be in a restaurant is a great way to use household items as play items or use one's imagination without a play item if your child is ready. • Kitchen utensils can be different types of flowers. • Use adult shoes for a shoe shop and pretend to be shopping for shoes. • Use cotton balls, pencils, etc., as candy or toys.

Summary

Play is more than just having fun; play is an important part of teaching your child new things. When young children play, they develop new skills that lead to new milestones. While all kinds of play are important, pretend play (also called imaginary play) is very important to a young child's brain development.

Guiding Play Techniques/Practices

Here are a few practices that support attachment, shared attention and play with your child. Try using the tips below to join in your child's play.

1. **Be at your child's level.** Sit face-to-face, crouch down, or re-position yourself so you mirror your child's position and make it easier for them to share social attention with you. For example, think about playing patty cake—it works best if you are sitting to see each other's hands and facial expressions. Another example is when your child wants to show you something or tries to get your attention. Crouch or sit so you're at their level. This way, you're more accessible, and it's easier for them to share joint and social attention with you. Being at their level also gives your child a great vantage point to see you imitate them.

2. **Join your child.** Sit on the floor, run around in circles, hold hands while they jump on the bed—whatever your child loves to do, join them. Imitate them during play to show you're having fun WITH them. Your child is in the driver's seat; you're the passenger along for the ride! You might comment on what you see or hear or suggest a different route, but they decide where to go and at what speed. The same goes for when you join your child in play. Your job is not to direct or steer but be with them for the journey. Of course, there will be times when it's appropriate to offer suggestions, variations, or guide them, but these will be strategic moments to help your child progress through their development.

3. **Slow down and wait!** Slow down and wait! Parents often play at a much faster pace than children, so one of your biggest challenges may be to slow down. Match your child's pace—waiting is a great way to help build excitement and anticipation! Imagine blowing bubbles for your child. Hold the wand up, take a big, dramatic breath in as your eyes get bigger, and then pause. The goal is to build your child's anticipation! Another benefit to waiting is giving your child chances to initiate and respond. Waiting is a natural way to encourage your child to use their learning skills. Imagine that you have been working on your child handing you their shoes when they want to go outside. Rather than handing them their footwear and helping put them on in a hurry, stand near the shoes and door and wait to give them the chance to hand you their shoes.

A quick list of some of the benefits of slowing down

- Builds anticipation
- Keeps you as the follower of your child's play, rather than the director
- Gives you a chance to watch your child's cues and non-verbal behavior
- Gives your child a chance to initiate with you
- Gives your child a chance to respond to you

4. **Respond.** We always want you to respond to your child by reinforcing and encouraging their efforts. Facial expressions, positive comments and mini celebrations are quick and easy ways to respond.

Chat

Play Stages

Types of Play	Description	Examples	How to Help Your Child
Exploratory Play	Children play with toys by exploring with their senses, such as touching, mouthing, visually examining, smelling, banging, throwing, and dropping the toy or object.	• Putting their hands and feet in their mouth • Throwing cars or toys • Dropping crayons on the ground • Crinkling paper • Looking at objects in their hands • Squishing food in their hands	• Giving them food with various textures • Encouraging exploration of food with hands • Asking questions and making comments (e.g., "big truck!" "Yummy yogurt") • Commenting on any gestures they makes towards the item (e.g., "shake, shake!")
Combinational Play	Children combine toys together by nesting one object in another, putting objects in containers, lining, stacking, or putting toys in order in certain ways.	• Putting small items in a toy dump truck • Using bristle blocks • Putting shapes in a shape sorter • Putting objects in a basket • Linking up toy cars or trains together	• Making comments about what they're doing (e.g., "star goes in!" "red car, bike car, yellow car") • Playing with them and showing them new ways of playing (e.g., stacking bristle blocks differently, putting cars in a line upside down) • Collecting leaves or items from outside in a basket. Point out items they can collect, and help them put things in the basket.
Cause and Effect	Cause and effect play teaches children that their actions can cause something to happen	• Pop-up toys such as a jack-in-the-box • Toys that have switches and buttons that trigger lights and sounds • Hitting their cup on the table to hear the noise it makes	• Encouraging playing with toys that make noise or movement when an action is taken • Playing with flashlights when it gets dark • Allowing your child to play with items in the house that are not considered toys such as a wooden spoon and a pot • Having them touch your nose and make a silly sound, like honking or a doorbell sound

Functional Play	Children use common toys or objects appropriately.	• Pushing toys cars • Putting doys and toys in cars • Throwing and rolling balls • Kicking a ball • Talking on a toy phone • Pushing a toy stroller or shopping cart • Stacking blocks	• Engaging in play with them, copying their play or showing them how a toy can be used • When introducing new toys or objects, demonstrating it first then handing it to your child
Self-Directed Play	Children direct some basic pretend play action towards themselves.	• Pretending to eat • Pretending to sleep • Pretending to talk on a play phone	• Engaging with them by copying what they're doing • Letting them direct you how they want to play • Letting them pretend to be a doctor, dress you up, pretend to put you to bed
Other Directed Pretend	Children direct basic pretend play towards another person or other toys	• Pretending to feed a doll • Pretending to dress a doll • Pretending to put a stuffed animal to sleep • Pretending to put you to sleep	• Engaging with them by copying what they're doing • Letting them pretend to be a doctor, dress you up, pretend to put you to bed
Pretend Play (also called Symbolic Play)	Children to use objects, actions, or ideas to represent other objects, actions, or ideas as play	• Stacking blocks to make a building • Opening an imaginary door • Using a block as a phone • Turning a cardboard box into a castle , rocket ship, or race car	• Adding new items into their play (e.g., lantern, pillow, household objects). • Suggesting ways they can incorporate new items into their play (e.g., "what if we use this spoon as a wand?") • Giving them an empty box or cereal boxes to play with
Complex Pretend Play	Children link several pretend actions together to tell an extended story with toys	• Putting dolls in a toy car and pretend to drive to the store • Playing with race cars and take them to the pretend mechanic after a crash • Having stuffed animals pretend to go to the park, then to the pretend ice cream shop	• Asking them about what is happening or what might happen next • Following their lead! Letting them give you a role and part to play • Adding ideas/suggestions to their play (e.g., "I wonder if he needs a band-aid") instead of directing their play.

Play Stages: Requesting

Types of Play	Description	Examples	How to Help Your Child
Exploratory Play	Children play with toys by exploring with their senses, such as touching, mouthing, visually examining, smelling, banging, throwing, and dropping a toy or object.	• Banging a spoon on the table, and if it falls, pick it up and say "Spoon!" before handing it back to them • Saying the name of each food as you put it on their plate • Asking them to share what they are eating and then pretending to eat some • Blowing bubbles and then asking "More?" before blowing more	• Labeling favorite toys and objects • Labeling items and routines throughout the day, then using those names consistently • Holding an item and say what it is before handing it to them • Emphasize key words during activities and routines (e.g., naming items, activities and actions)
Combinational Play	Children combine toys together by nesting one object in another, putting objects in containers, lining, stacking, or putting toys in order.	• Offering two choices, "Do you want crackers or an apple?" for them to reach or point to and naming the items while asking • Having some toys they want next to you and naming what they reach for or what you offer them – "Do you want the red car?" • Showing them something interesting and then offering "More?" or "Again?"	• Giving your child choices • Putting things out of reach or in containers, so they need to ask for help to get what they want • Giving small amounts of snacks or toys so they can ask for more
Cause and Effect	Case and effect play teaches children that their actions can cause something to happen	• "Blow out" a flashlight (pretend to blow it out like a candle when you push the off button). Offer "more or "again" • Play freeze dance so they can verbally or gesturally request for more music • Put them in a blanket and pull them around on the ground, or get another adult to help you swing them. Model "more?" to encourage requesting	• Giving your child choices • Putting things out of reach or in containers, so they need to ask for help to get what they want • Giving small amounts of snacks or toys so they can ask for more • Showing off your fun skills and ideas so they have to ask you to do it again and again!

Functional Play	Children use common toys or objects appropriately.	• Copying their play, or doing something slightly different next to them • Adding more toys or obe-jcts while playing with your child so that they need to ask you for them • Offering choices to your child when they are getting dressed or when offering them snacks	• Giving your child choices • Putting things out of reach or in containers, so they need to ask for help to get what they want • Showing off your fun skills and ideas so they have to ask you to do it again and again • Playing with a toy similar to theirs so they can ask for a turn
Self-Directed Play	Children direct some basic pretend play action towards themselves.	• Collecting some materials as props and having it available so they can ask for them • Doing pretend play similar to how they are playing but with different actions, objects, or toys objects, and/or toys • Modeling the next stage of pretend play	• Giving your child choices • Putting things out of reach or in containers, so they need to ask for help to get what they want • Playing with a toy similar to theirs so they can ask for a turn • Adding new toys or other items while playing with your child so that they can ask for a turn or to play with them.
Other Directed Pretend	Children direct basics pretend play towards another person or other toys	• Collecting some materials as props and having it available so they can ask for them • Using their stuffed animals or toys to go through daily routines, like putting the baby to bed • Showing them new themes of pretend play that they can try	• Giving your child choices • Putting things out of reach or in containers, so they need to ask for help to get what they want • Adding new toys or other items while playing with your child so that they can ask for a turn or to play with them.

Pretend Play (also called Symbolic Play)	Children to use objects, actions, or ideas to represent other objects, actions, or ideas as play	• Joining in the pretend play theme and letting them direct you. • Adding in a fun item the child might want so they can ask for a turn	• Giving your child choices • Putting things out of reach or in containers, so they need to ask for help to get what they want • Adding new toys or other items while playing with your child so that they can ask for a turn or to play with them.
Complex Pretend Play	Children link several pretend actions together to tell an extended story with toys	• Joining in the pretend play theme and letting them direct you. • Adding in a fun item the child might want so they can ask for a turn • Asking questions about what happens next or what you might need while playing with your child encourages them to ask you to get or do something specific.	• Giving your child choices • Putting things out of reach or in containers, so they need to ask for help to get what they want • Adding new toys or other items while playing with your child so that they can ask for a turn or to play with them.

Play Stages: Social Joint Attention

Types of Play	Description	Examples	Supporting Social Attention*	How to Help Your Child
Exploratory Play	Children play with toys by exploring with their senses, such as touching, mouthing, visually examining, smelling, banging, throwing, and dropping a toy or object.	• Putting sand in their mouth • Throwing toy cars • Dropping crayons on the ground	• Using animated facial expressions and voices • Incorporating thier favorite sensory activities • Showing excitement when they come up to you or want to show you something.	• Being at the same level and face-to-face • Bringing items close to your face • Pointing to and commenting on what they are holding • Pointing to and commenting on any gestures they make towards an item
Combinational Play	Children combine toys together by nesting one object in another, putting objects in containers, lining, stacking, or putting toys in order in certain ways.	• Putting small items in a toy dump truck • Making toy cars go down a ramp • Playing with bristle blocks • Putting shapes in a shape sorter	• Using animated facial expressions and voices • Incorporating their favorite sensory activities • Showing excitement when they come up to you or want to show you something	• Putting items in a plastic egg and then closing and shaking it • Handing them items to stack or line up or helping them build, stack or line up items
Cause and Effect	Cause and effect play teaches children that their actions can cause something to happen	• Pop-up toys, light-up toys, toys with buttons or switches • Pointing to things you see while outside together • Using a wooden spoon to bang on a bowl or container	• Showing excitement when they come up to you or want to show you something • Using animated facial expressions and voices • Making sound effects while playing with your child • Showing them cause and effect by making a silly sound when they touch your nose or clap and cheer when they do something	• Saying "It went pop!" or "Look at the squirrel" and then point to the item and then back to yourself. • Showing them cause and effect by turning a flashlight on and off, or using a spoon to bang on a pot

Functional Play	"Children use common toys or objects appropriately.	• Pushing toy cars • Putting dolls in toy cars • Throwing and rolling balls	• Showing excitement when they come up to you or want to show you something • Using animated facial expressions and voices • Making sound effects while playing with your child	• Imitating their play • Making comments such as "Your car is so fast!" or "You're bouncing an orange ball" while pointing to the toy or activity • Holding up a toy and making a comment while pointing to it
Self-Directed Play	Children direct some basic pretend play action towards themselves.	• Pretending to eat • Pretending to sleep • Pretending to talk on a play phone	• Showing excitement when they come up to you or want to show you something • Using animated facial expressions and voices • Making sound effects while playing with your child • Making comments on what they're doing	• Handing toys and items to your child that are appropriate to what they are playing and draw attention to the item before giving it to them • Using something similar to join their play, such as using your phone to pretend to talk to them when they are playing with a toy phone
Other Directed Pretend	Children link several pretend actions together to tell an extended story with toys	• Putting dolls in a toy car and pretending that they are driving to the store • Pretending to shop for fruit at the supermarket and then pretending to make a smoothie • Pretending that their teddy bear needs to go to the doctor after it falls off a swing	• Showing excitement when they want to show you something or ask you to play • Using animated facial expressions and voices • Making sound effects while playing with your child • Making suggestions or asking questions (e.g., "Where do they go now?" "What happens next?")	• Imitating what they're doing, then changing it just slightly (e.g., go from stacking a tower to building an arch or tunnel) • Adding a new item while playing with your child (e.g., "Can my bear play with your kitty?") • Drawing attention to what you or your child is doing (e.g., "Yum, this smoothie is good!" or "You're being so gentle with teddy")

Pretend Play	Children to use objects, actions, or ideas to represent other objects, actions, or ideas as play	• Stacking blocks to make a building • Opening an imaginary door • Using a block as a pretend phone	• Using animated facial expressions and voices • Making sound effects while playing with your child • Making suggestions or asking questions (e.g., "Where do they go now?" "What happens next?")	• Imitating what they're doing, then changing it just slightly (e.g., go from stacking a tower to building an arch or tunnel) • Showing them new ways to use an object (e.g., a bowl as a hat and then drums) • Drawing attention to what you or your child is doing (e.g., "I'm going to make a tunnel now!" "I love your tower")

Additional supporting techniques that apply to social and joint attention *all* play types

1. Be at your child's level
2. Position yourself facing your child

My Child's Sensory Profile

All of us process sensory information through our nervous systems. When we hear music or see a beautiful flower, the sensory information is processed by our nervous system. How we process sensory information is individual to each of us. For some people, the sound of hard rock music is pleasant, and for others, their nervous system interprets those same sounds as irritating. For people who are very sensitive to sounds or other sensory information, their sensitivity can cause distress and be a barrier to learning and social interactions. For example, if your child is sensitive to sounds, they might cover their ears or run out of the room when noise becomes overwhelming.

If your child has a developmental disorder, they may process sensory information differently from other children and need help processing it. Your child's nervous system processes information is influenced by their age, sensory difficulties, and experiences. Your child might even have a sensory processing disorder. We will talk more about sensory disorders later in this section but first, let's review the seven senses.

Our Seven Senses

You might remember learning about your five senses when you were in school. But did you know that there are actually seven senses? In Chat, we will refer to these two lesser-known senses as the movement senses.

1. **Sight** (Vision)
2. **Hearing** (Auditory)
3. **Smell** (Olfactory)
4. **Taste** (Gustatory)
5. **Touch** (Tactile)
6. **Movement** (Vestibular): the sense that allows us to keep our balance, stabilize our head and body during movement, and maintain posture.
7. **Spatial Awareness** (Proprioception): This sense lets you know where your body is positioned in space; your brain uses this information to let your body move and stay balanced.

Sensory Differences and Play

Children who process sensory information differently may have delayed play, especially social play, play with toys or objects for a very short time, or focus only on one type of toy. Children with sensory processing challenges prefer toys or activities that satisfy a specific sensory need. Keep this in mind if your child only likes certain activities or seems "stuck" on certain types of toys. Ask yourself, "Is the activity satisfying a sensory need?"

For example, a child may hold toy cars close to their face to watch the wheels spin or love toys that have lots of lights. Both of these may fulfill a visual sensory need. Another example is a child who rocks their body back and forth and loves swings to feel the movement. Once you understand your child's sensory likes and needs, you can plan activities that fit that sensory need. These activities will increase your child's enjoyment, engagement and motivation. And doing these sensory activities together will help facilitate more engagement between you and your child during play. Engagement during play has the added benefit of strengthening your relationship with your child. Your Chat Clinician will work with you on understanding your child's sensory needs by building a sensory profile. The sensory profile can help you join in your child's play in meaningful ways by suggesting activities that will be enjoyable for your child. To learn more about the sensory system, check out the basic description of the sensory system is available in the YouTube link at the bottom of this module.

Under and Over-Responding

Some children overreact or underreact to sensory input. Part of understanding your child's sensory processing is learning if and when your child may be over-responsive or under-responsive. You can learn more about sensory processing differences by clicking on the "Star Institute: Sensory Processing Disorder" link at the end of this module. You will also find a Sensory Symptoms Checklist as well as other helpful information about sensory processing in the link section below.

Sensory over-responsive. Over-responsive is an exaggerated or heightened response to sensory input, sometimes called hypersensitivity. For example, if your child covers their ears or cries and shakes their head when they hear a certain sound, it may be that your child hears the sound as being too loud and this can cause over-responding. Over time, this could result in your child being fearful of all loud sounds, even sounds you don't think are very loud.

Sensory under-responsive. Under-responding, or under-reacting, is also called hyposensitivity. This decreased response occurs when a child doesn't respond or has a slower than average response to sensory input. It might feel like your child needs extra input to see an expected response. For example, your child may constantly hum or babble to create constant auditory input because otherwise, they aren't getting enough input. Being under-responsive to sensory information can lead to craving or seeking intense sensations.

This YouTube video by an occupational therapist explains sensory under and over-responding.

Learning Your Child's Sensory Preferences

By understanding your child's sensory preferences, you will be able to:

1. Tap into what your child needs in terms of sensory stimulation.
2. Find activities that work with their sensory needs rather than activities that do not meet your child's needs.
3. Choose highly motivating activities that will keep your child interested in play, thus increasing the time they spend playing with you!

Determining Your Child's Sensory Needs

Sensory profile. During your child's Chat assessment, you and your Chat Clinician filled out the Sensory Profile. The sensory profile will help determine your child's sensory needs. Where do most of the check-boxes fall? Which senses fall into the over-responsive or under-responsive category? You will need to write that at the bottom of the sensory profile. Because sensory needs can change as your child develops and grows, you and your Chat Clinician will periodically revisit the Sensory Profile.

Sensory activities. Once you and your Chat Clinician have looked at your child's sensory needs, your Chat Clinician will suggest activities based on the child's sensory needs. In addition, they may suggest that you increase activities you are already doing with your child that meet your child's sensory preferences. Below you will find a chart with sensory activities you can try with your child.

Sensory Processing Disorders

Sensory process disorders can occur with or without autism spectrum disorder (ASD) or other developmental disorders. When a child has a sensory processing disorder, sensory information goes into the brain, but their brain may not organize this information into an appropriate response. If a child has difficulty with sensory processing, they may perceive and respond inappropriately to sensory information. An example of this might be a child who makes loud sounds or hits the side of their head when they hear certain sounds. Even if your child is not diagnosed with a sensory processing disorder, if your child has ASD or a similar developmental disorder, they likely have some difficulties with sensory processing and process sensory information differently than other children.

What if I think my child has a sensory process disorder? You may be wondering if your child has a sensory processing problem separate from the common problems with sensory processing that many children with developmental delays experience. If you have concerns questions related to your child's sensory processing, please consult with your child's doctor. They may recommend an evaluation by an occupational therapist to determine if supportive services are needed. Licensed occupational therapists specialize in helping families understand their child's sensory needs.

Your Child's Sensory Activities

With your Chat Clinician, you will explore your child's sensory preferences using the chart below and choose activities based on your child's sensory preferences. This chart is not an exhaustive list but rather a starting point to explore enjoyable activities for your child.

Visual (Sight)

- Bubbles
- Playing with a beach ball or volleyball
- Dancing with scarves or ribbon attached to a stick
- Playing flashlight tag
- Mirror play

Auditory (Sound)

- Dancing, moving, drawing while listening to music
- Beating rhythms on objects like boxes
- Singing through daily routines
- Fill in the blank songs like Old MacDonald
- Making up their own rhythms (e.g. clapping hands while at the supermarket)

Olfactory (Smell)

- Smelling spice jars or citrus fruits
- Guessing what is in mystery smell bags or containers
- Exploring different flower scents

Gustatory (Taste)

- Putting various snacks in an ice cube or cupcake tray
- Using different juices or drinks to make a variety of ice pops

Tactile (Touch)

- Playing with sand, water, or shaving cream
- Finger painting or water painting
- Making mud or sand pies
- Building with blocks or Legos®
- Play-Doh®
- Hugs tickles, gentle roughhousing
- Collecting pine cones, rocks, or leaves

Vestibular (Movement)

- Swinging or spinning
- Balancing on a beam, or curb, etc.
- Jumping
- Climbing on a jungle gym
- Going down a slide
- Going up and down stairs or ramps
- Somersaults

Proprioceptive (spatial Awareness)

- Pushing, or pulling toys
- Going through an obstacle course
- Horsey rides
- Pouring stations
- Pillow fight
- Tumbling on the ground
- Ripping paper

Picky Eating: What is Cause for Concern?

It's very common for young children to be selective in what they will and will not eat. Often the reluctance to eat something is related to a child's sensory likes and dislikes. Foods feel different in the month and have smell and taste sensory profiles. Picky eating is something that most parents and caregivers learn to navigate with their children. It's important to honor your child's food preferences while also positively encouraging them to explore a variety of flavors, textures and colors of foods.

There is a difference between a picky eater and a child who has a feeding problem. Many kids are picky eaters, and so are plenty of adults. Here is some guidance from the STAR institute to help you know if your child is a picky eater or has a more serious feeding problem - which we call problem eating.

Range of foods:

- Picky eaters usually have about 30 foods they will eat.
- Problem eaters have less than 20 foods they will eat.

Taking a break:

- Picky eaters will often take a break from eating certain foods then start eating them again. So it's "I hate that!" one day and "I want that" the next day, which can be frustrating to parents but is pretty normal in young children.
- Problem eaters don't go back to foods they've stopped eating

Food groups:

- Picky eaters usually will eat at least one food from each food group. So, for example, a picky eater may not eat green vegetables but will eat vegetables that aren't green.
- Problem eaters won't eat anything from one or more food groups—for example, a child who won't eat any kind of protein.

If you think your child has an eating problem, talk with their doctor. If, on the other hand, you believe that you're dealing with picky eating, here are some questions you can ask yourself:

1. ***Is it texture or smell related?*** Some children are very sensitive to textures and smells. If you notice that your child won't eat certain foods, ask yourself if this is related to texture or the way something smells. For some very sensitive children, certain textures or smells are very irritating. Try looking for foods that have a texture and smell your child can tolerate. Over time, you can help your child learn to handle different textures and smells, but if it's simply a matter of staying away from a few textures and smells, it may be better to accommodate your child's needs. Not everyone needs to be okay with all textures and smells. Talk with your Chat Clinician if you think the problem with textures is so severe it is getting in the way of your child's learning.

2. ***Is it behavioral?*** This may be a tricky question, but sometimes a child might have a bad experience with something that makes them stay away from it. For example, if a young child burned their month on certain food, they may not want that food anymore. When this happens, the child might think that all foods look or feel like the food that burned them. Depending on how severe this problem is, you can usually accommodate this sensitivity.
3. ***Is it environmental?*** A problem that can be confusing for parents is when a child is fine with a smell or texture in one environment but not with the same thing in a different environment. For example, maybe your child is okay with the smell of a certain food at grandma's house, but the same smell is irritating to your child at home.
4. ***Is it biological?*** Many sensitivities have a biological component. For example, when someone says they hate broccoli, it may not be because it's green but rather because broccoli tastes very bitter to them. It turns out that there's a gene that makes broccoli and some other foods taste bitter. So if your child's first green veggie is broccoli and it tastes bitter, they may decide that all green veggies are bitter.

Here are a few tips to practice when framing mealtime with your child:

1. Have consistent mealtime routines every day-eat at the same time each day and have set routines leading up to and after the meal.
2. Have your child help prepare for dinner, whether it's setting the table, bringing food to the table, stirring the sauce-this will help give your child a sense of control and ownership in the mealtime process.
3. Model explorative and engaged eating. Have family meals where you all eat the same thing.
4. Try to avoid making separate meals for your child but be flexible. For example, if your child hates a particular food and everyone else in the family likes that food, it's okay to give your child an option for a substitute.
5. Make your child's preference part of meal planning. Another way to deal with food preferences is to consider your child's preferences. For example, if you have more than one child in your household, you can give each child the option to pick which food to eat for a meal once a week.
6. Give each child in your family "I don't want that" coupons so that they can use the coupon to refuse one food at a meal. Over time, the number of coupons a child gets each week can decrease and might be a way to encourage your child to try new foods. How many coupons your child gets to start with should depend on how sensitive your child is-very sensitive children might need to start with more coupons.

Summary

Learning your child's sensory profile will help you understand your child. Using toys that fulfill their sensory needs will make playing with your child more fun.

To learn more about sensory processing, click on the links below. Talk with your Chat Clinician about your child's food preferences to understand why your child may be so cautious or 'picky' in their food selections. If your child is a problem eater, they can develop real nutritional or medical issues. If your child falls into the category of a problem eater, talk with your child's doctor.

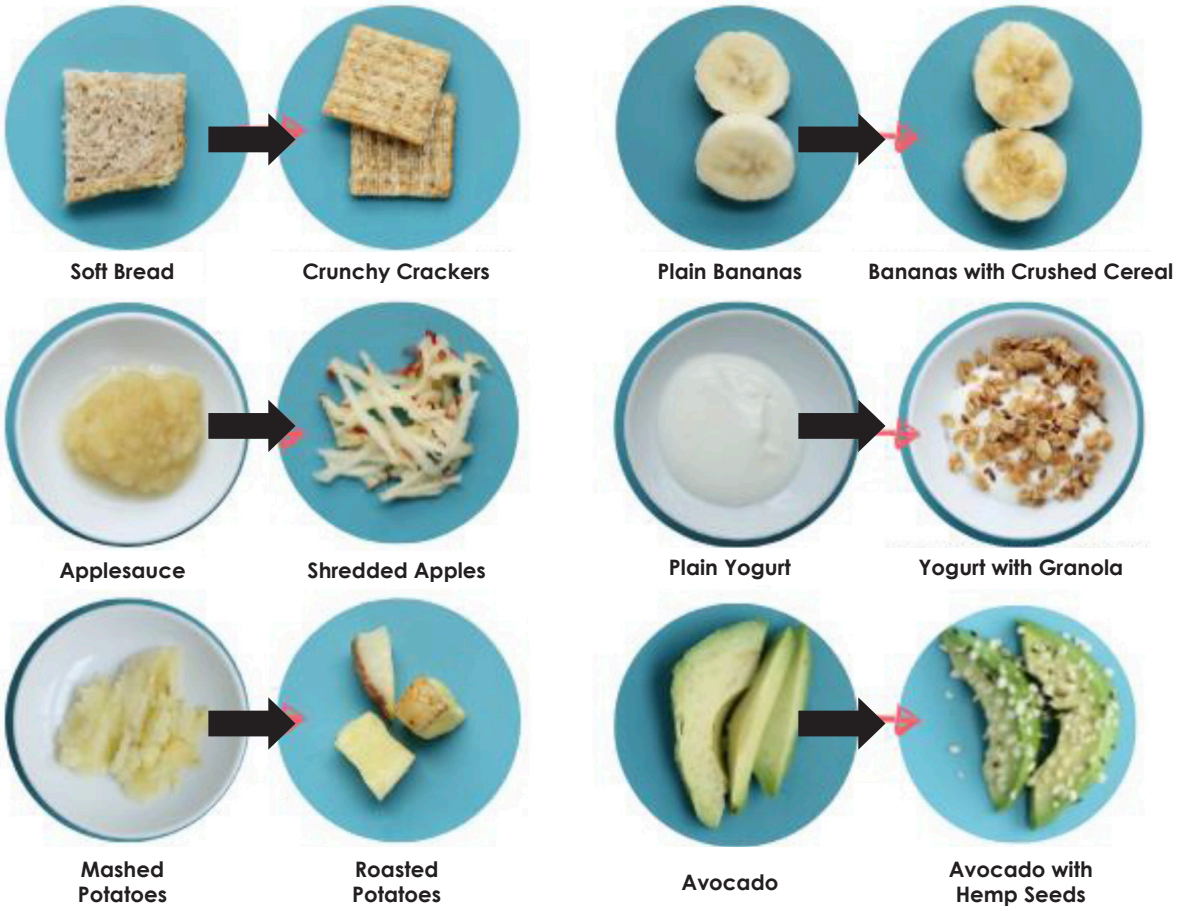
Helpful Links

- Sensory Integration & Processing: Jargon Guide
- Star Institute: Sensory Processing Disorders
- YouTube: The Sensory System
- What is Sensory Integration
- What are the 7 senses?
- Sensory issues in ASD
- Sensory Checklist Adapted from the book Raising a Sensory Smart Child: The Definitive Handbook for Helping Your Child with Sensory Processing Issues copyright (c) Lindsey Biel, OTR/L, MA, and Nancy Peske, 2005, 2009, 2018

Food Textures

Some children may be sensitive to textures when it comes to food. If you notice that your child won't eat certain foods, ask yourself if this is related to texture? For some children, certain textures are irritating to them. Try looking for foods that have a texture your child can tolerate. Over time you can help your child learn to accept different textures. Keep in mind that not everyone needs to be okay with all textures. Below is a chart with ideas on different food textures.

Talk with your Chat Clinician if you think the problem with textures is so severe it is getting in the way of your child's learning.



Picky Eaters

When it comes to children being picky eaters, it can be frustrating for caregivers to ensure their child is getting all the nutrients they need. It can take up to 7-15 times before your child tries the food you offer them. Give them time and continue offering healthy food choices to your child.

Here is a list of things to keep in mind when it comes to picky eaters:

- Establish a routine and try to stick to mealtime schedules. This way, your child can expect a meal at a specific time every day.
- Have your child go to the supermarket with you. As you go through the fruit and vegetable section, describe and talk about the food you see. Speak in a positive tone about the foods. Answer any questions when they point to or want one of the food items.
- When introducing new foods, remember to accompany them with a food you know they already like. For example, if they already like plain pasta, add a little tomato sauce on the side to have a little taste; if they prefer not to eat the rest, don't worry, at least they tasted it and are now exposed. If your child is very sensitive, put the tomato sauce in a small dish next to the plate to start.
- Minimize distractions and keep mealtimes brief; little ones like to move around and want to play. You want to make sure that sitting at the table is pleasant.
- Caregivers and adults in the house should also sit and eat the same foods you are trying to get your child to eat to see others enjoying the food served.
- Don't give or feed your child too much milk, juice, or snacks between meals, as they can interfere with them wanting to eat the meal you are preparing.
- Don't offer dessert as a reward because it gives the impression that dessert is more desirable than their food.

If you are worried about the quantity of the food they eat, keep a food diary. If you believe your child's health is at risk due to lack of food, reach out to your pediatrician immediately and let them know.

Making Chat Work For Your Family: A Naturalistic Approach

Chat is a naturalistic approach that focuses on your family's normal daily routine. From the research on how young children learn, we know that they learn best in their natural environment with the people they know the best — their family. This is why Chat was developed as a routine-based program.

What is a Routine?

A routine is a predictable activity that occurs regularly in your child's life, meaning your child knows or will learn what is about to happen and when the activity starts and ends. Most of your child's routines happen within the family, such as bedtime or mealtime, but routines also occur in other settings like preschool or a playgroup. Establishing routines for your child will:

1. Help your child transition from one activity to another.
2. Help your child feel safe.
3. Give your child a sense of control.
4. Give you the perfect time to teach your child new things.

One important routine for all young children is playtime. Setting aside time each day to play with your child is a routine that will benefit both of you.

How to Identify a Routine

Every family and child has a set of routines. Some routines are daily, some could be weekly, like going shopping, or some may happen less frequently, like visiting grandparents. Common routines include:

- Mealtime
- Toileting
- Playtime
- Bedtime
- Parent coming home from work
- Bath time
- Feeding pets
- Visiting grandparents
- Shopping
- Getting ready for/going to school or daycare

All your child's routines are opportunities to help your child reach their developmental goals.

What Influences Routines?

Many things can influence your child's and family's routine. Consider the following as you think about your family's routines:

- Your family's history and culture
- Your value system as a parent or caregiver
- Your child's personality or temperament
- Your home environment and community
- Schedules for other family members

Reviewing Routines with Your Chat Clinician

During your Chat assessment, you and your Chat Clinician reviewed your family's current daily routines to get a sense of what your child's day typically looks like and made a list of your family's routines. As your child progresses, you and your Chat Clinician will continue to update your family's routines. It's common for a family's routines to change throughout the year, often with the seasons, and as your child grows, their routines will change, so it's important to let your Chat Clinician know if a routine changes.

Deciding What to Work On

Now that you have made a list of your child and family's routines, you can start thinking about what goals from your child's Chat Treatment Plan you want to work on during the day. For example, meal-times are great times to work on making requests. If you are working on pointing as a way for your child to ask for something, you might give your child two choices of what to drink at each meal so they can practice pointing. Or, if you are working on joint attention, you might think about working on this during playtime. Joint attention is when you and your child pay attention to the same thing.

Joint attention is very important for language and social skills. A related skill is social attention, which is paying attention during a social situation. In the module "Chatting is More Than Talking," you can learn more about joint attention and social attention.

Here are some more examples of how to work with your child during routines:

- Bath Routine:
  - Making a silly noise with a bath toy before dropping it in the tub (joint attention).
  - Pretending you can't turn the water on and need help (social attention).
- Dressing Routine:
  - Turning a dressing routine into a song (Baby Shark tune: "put on pants do doo do do doo, put on pants") (social/joint attention).
  - Offering choices when getting dressed (requesting or asking).
- Home Transitions:
  - Cheering or chanting when a parent/sibling comes home ("Brother's home! Brother's home!") (social attention).
  - Offer a choice of shoes when getting ready to leave the house (requesting).

- Bedtime Routine:
  - Consistency is key when it comes to sleep routines. Having a set nap time and bedtime will allow your child to predict when to calm down and rest.
  - Your child will know when it's time to sleep if you build a routine around bedtime.
  - This routine will look different for each family, but it can include turning off lights, turning off screens/ sound, singing and reading together, and quietly saying goodnight.
  - Offering a choice of books at bedtime (requesting)
  - Tucking a favorite stuffed animal into bed with your child during their bedtime routine (joint attention)
- Playtime:
  - Pretending your finger is stuck in Play-Doh and you need help! (Joint attention)
  - Playing chase or tickle monster, running around the house or yard (Social attention)
  - Offering two colors or different drawing materials (like crayons and markers) when drawing together (Requesting)

Summary

The goal of Chat is to identify teaching times in your child's routine that will help address their developmental and behavioral goals. Routines also give your child a sense of control. When children know what is coming, they feel more relaxed and transition from one activity to another smoothly.

Helpful Link

American Academy of Pediatrics, The Importance of Family Routines

Chatting is More Than Talking: Social Communication

Why Language is Important

We think of language as using words to communicate, but it's so much more. Talking is one way we use language, but it is not the only way and much of language is about social connections. Think about how we communicate with looks, gestures, crying, laughter, and body language. We can use sign language or spoken words. Emotions and opinions are expressed through language. Think about how you communicate that you are upset. If you only used words, would someone completely understand your feelings? Think about a time when you didn't use verbal language to communicate something. What about babies? Think about how infants and young children communicate before developing spoken or sign language. Children begin developing language by watching and listening to their caregivers. When children have difficulty developing verbal language, they often use other means to communicate their wants and needs.

Understanding Your Child's Communication

It's important to identify ways your child communicates, whether that's through asking for something with looks or gestures, smiling at a fun toy, or looking at you when the big bubble in the tub pops. By figuring out how a child is communicating, you can build on the essential skills to expand their language. One way children learn language is by recognizing the verbal language of their caregivers and the connection between events and objects. For example, when you look at something, your child may look at the same thing. When you and your child are paying attention to the same thing — we call this joint attention — you are communicating. When joint attention happens, it's an opportunity to teach language. Through joint attention, requesting (asking for something), and social attention, you can help your child build on these skills and grow their language.

Three Important Skills

In this section of Chat, you will learn three important skills that will help your child improve their language and social skills:

1. Joint attention
2. Requesting
3. Social attention

All three of these skills involve attention. For example, you can't ask someone for something if they aren't paying attention, and you won't be able to tell someone about your day or describe how you're are feeling without using social attention.

Let's start by learning about joint and social attention and why they are so important.

What is Joint Attention?
Joint attention is when two people are attending to the same thing. This can be an object that has your child's interest, something your child is requesting, or possibly an event, such as a garbage truck driving up the street or looking at a book together. Joint attention can be initiated or started by either you or your child or by a third person like a sibling or grandparent.

Joint attention is very important in:

1. *Teaching a new skill.* When you're teaching something to someone, you need that person to pay attention to the same thing you're paying attention to.
2. *Most kinds of communication.* Think about chatting with someone — it would be tough to talk about a topic if you and the other person were paying attention to two different things. Chatting and most kinds of communication require joint attention.
3. *Playing with someone.* It's hard to play a game if you and your child are paying attention to different things.
4. *Requesting or asking for something.* It's hard to ask for something if you and the person you ask are paying attention to different things.

Who starts joint attention? Sometimes, the adult initiates (or starts) joint attention between adults and children, and sometimes the child initiates. As a parent or caregiver, you might begin more joint attention interactions at first, but the goal is for your child to initiate joint attention with you and other people, too!

Joint Attention Examples. Below are examples of joint attention between a parent and a child where the parent initiates joint attention:

1. During a walk, a grandparent points to a bird and says to their 2-year-old grandchild, "Look - it's a pretty bird," and the child looks where their grandparent is pointing.
2. A parent looks over at a jack-in-the-box on the floor, and their 4-year-old follows their gaze, then looks at the toy. The parent recognizes that their child might want to play with the toy. The child is making a request with joint attention.
3. While folding clothes, a 5-year old's grandparent points to the socks and the child looks at the socks.

Here are some examples of a child initiating joint attention:

1. A child is looking at their shoes. Their parent notices this, looks at the shoes says, "Those are your red shoes!" Because the parent is looking for ways their child might be requesting something, the parent then asks, "Do you want to go outside?"
2. A child is holding two blocks, and the parent looks over at the blocks and says, "You have two blocks."
3. A child sees a delivery truck pull up and looks at their parent, then back at the truck. The parent looks at the truck, points to it, and says, "Truck."

As you can see from the examples above, joint attention can be prompted with words, pointing, or just by looking at something. When your child initiates joint attention, it's helpful for you to call out what you and your child are both looking at so your child knows you are following their lead and that you are looking at the same thing. It's also very important to look for times when your child is initiating joint attention rather than you always being the one to start it.

Communication and Joint Attention. Once you and your child attend to the same thing, you can work on communication and language. Let's look at those examples from earlier:

1. During a walk, a grandparent points to a bird and says to their 2-year-old grandchild, "Look - it's a pretty bird," and the child looks where their grandparent is pointing. Once the 2-year-old looks at the bird, the grandparent says, "Bird!" and flaps their arms like they are flying. The 2-year-old giggles, tries to say "bird," and flaps their arms. Note: In this example, we see the back and forth of two people communicating or chatting with gestures.
2. A parent looks over at a jack-in-the-box that they have placed on the table and points to it while saying "toy." Their 4-year-old follows the parent's gaze and looks at the toy. The child then jumps up and tries to grab the toy. The parent notices this as a request to play with it. The parent gives their child the jack-in-the-box while saying "toy." Note: In this example, the child and parent communicate about wanting to play with a toy. The parent reinforces or rewards his child's request to play by giving them the toy.
3. While folding clothes, a 5-year-old's babysitter points to the socks, and the child looks at the socks. Then, the child picks up the socks, and their babysitter makes a game of matching socks and practicing saying colors in a very enthusiastic way to show it's fun. The babysitter might even do something silly like matching the wrong colors and then laughing and saying, "I'm so silly! These don't go together!" Note: In this example, we see how the babysitter makes play out of a routine task.
4. A child walks over to their shoes, grabs them, goes to the front door, and looks at their parent. The parent notices this and interprets this communication as a request to go outside. The parent then says, "Go outside?" and begins putting their child's shoes on. Note: In this example, the child uses joint attention and gestures to initiate a request. The parent sees this and follows through by acknowledging the request and demonstrating joint attention with the shoes.

5. A young child starts stacking blocks. Their parent sits down on the floor, looks at their child's blocks, and imitate them by stacking blocks. While they are stacking blocks, the parent says, "I am stacking blocks just like you!" The child looks at their parent's blocks. Note: In this example, we see the parent engaging with their child through imitation and language modeling, leading to the child engaging in joint attention with the blocks.

Joint Attention and Requesting (Asking) Without Words. As we can see from the examples above, sometimes joint attention is a request for something. We have all made this kind of request. Think about a time you wanted something but didn't think you should ask. Maybe you looked over at a friend who had a snack. Now you and your friend are attending to the snack your friend is enjoying. What happened? Did your friend ask if you wanted some? They probably did. Young children do this too. You can reinforce this type of asking by calling it out. For example, you might say, "You are looking at my drink. Are you thirsty too? Let's get you something to drink." In this way, you are reinforcing the joint attention requesting your child was doing. In this situation, you might find that your young child says, "NO!" or shakes their head when you ask. One of two things could be happening-either your child isn't thirsty, or they might be practicing the time-honored toddler tradition of saying NO! to every question, even when they mean yes. Saying no to everything is fun for toddlers. No one knows why this is so fun for young children, but if your child is going through the NO! stage, you can check off that milestone for your child!

What is Social Attention?

Most infants prefer attending to people rather than objects. Babies are particularly interested in the faces of people around them. It's easy to see this when you watch a baby when her mother comes into the room. The baby will look at her mom and get excited when her mother comes closer. Of course, this doesn't happen every time. Still, babies without a developmental disability will usually look at a person, particularly if it's a person the baby knows and is the beginning of social attention.

Eye contact. If your child has ASD or another developmental disability, you may have heard about the importance of eye contact to show social attention. Although eye contact is important, social attention isn't just about making eye contact. Research tells us that children change where they look as they get older. Babies tend to make more eye contact than toddlers. And in studies of young children, researchers find that looking at another person's face is as common as looking at someone's eyes. As children develop, they may also look more towards actions, such as when someone moves their hands around while talking and facial expressions, than at someone's eyes.

This suggests that as children develop, they can direct and re-direct their attention (and thus where they are looking) to the parts of an interaction they find most interesting. For example, this could mean that an older toddler might watch your hands when you use your hands to show how big something was and then shift to looking at your face when you start smiling.

Keep in mind that cultural and other factors such as gender and personality traits impact how much and when eye contact is made. For example, in some non-Western cultures, making eye contact is less important than in Western cultures, and more introverted people make less eye contact than extroverts. Because there are so many factors that go into eye contact, in Chat, we focus more on looking at faces (social attention) or other ways to show social attention and less on eye contact. However, if your child is very young and it's a good idea to give your child lots of opportunities for eye contact. You can do this by sitting your baby on your lap and getting their attention with a toy they are interested in. Don't force it, but look for indications when your baby makes eye contact with you while you smile and coo at your baby.

Who initiates social attention? Like joint attention, social attention can be initiated by the adult or the child. Here are some examples of social attention initiated by an adult:

1. An aunt taps her nephew on the shoulder, and the nephew looks up at her.
2. A parent says to their 4-year-old child, "Look at me," before asking them if they want to go out to play in the yard.
3. A father sits on the floor beside his child while playing, and the child looks over at their father.

Here are some examples of a child initiating social attention:

1. A child says, "Mommy, mommy, mommy!" when the mother tries to talk on the phone. It's a very common situation, and it's important to recognize that, in these situations, the young child is initiating social attention. You may decide to work on helping your child wait, but you should reinforce social attention by letting the child know they are heard. In the video below, you can see how the parent recognizes that the child is initiating social attention.
2. A child comes up to an adult or another child and looks at their face.
3. A child looks at their pet dog's face. Many dogs will look at the child's face in return! For some children who have difficulty with social attention with people, pets can help. Dogs in particular and some cats will look right at a person. Of course, this works best with the right pet, but if you have a dog or cat and you see your little one initiating social attention or responding to social attention with the family pet, this is a good thing.

Requesting

When we request something from someone, a couple of things have to happen. First, there needs to be some joint or social attention. You can't successfully ask for something if the other person isn't paying attention. Here are some ways you can teach your child requesting while reinforcing joint and social attention:

1. ***Pointing.*** If your child has limited language and doesn't point to things, ask your Chat Clinician about teaching pointing. Pointing is a very useful skill for requesting. Once your child has started pointing, give them lots of choices between two things. For example, hold up an egg and a box of cereal and ask, "Which one do you want, egg or cereal?" Then, hold up the egg a little higher when you say egg and hold up the cereal box when you say cereal. When your child points to one, say, "Good job, you want (say what they pointed to)."
2. ***Choices.*** Provide lots of opportunities for your child to request by providing choices.
3. ***Asking for attention.*** Asking for attention is a very important skill. First, be sure to respond to your child when they say your name or give you a non-verbal request for attention. If your child doesn't ask for attention, talk to your Chat Clinician about teaching them to tap your leg or shoulder or some other way of asking for attention. The most important thing to remember is to respond to your child when they ask for attention. Even if you have to tell your child they need to wait, make sure you acknowledge your child's request.
4. ***Pictures.*** If your child isn't talking or even if they are but have limited words, use pictures. Your child can bring you a picture of what they want.
5. ***Augmentative Alternative Communication (AAC).*** AAC devices can be as simple as a picture board with cut-out pictures or more complex like the many apps for tables that allow you to set up pictures or icons that your child can use. Some of these apps also include a voice synthesizer. Some people think that an AAC device can interfere with a young child's learning to talk, but research shows this is not the case, and an AAC device can decrease frustration by giving a child a way to communicate while working on speech.

Language Strategies

As you begin helping your child develop the early building blocks of language through joint attention, requesting, and social attention, you may wonder what strategies are important to use. Talking about what your child is doing and expanding on their verbal language are excellent strategies to support language development. When you follow what your child is interested in and describe what is going on, you help your child maintain focus. By sharing attention based on your child's interests and then modeling, describing, or discussing what you see, you are providing your child with language directly related to their interests and positively impacting their overall language development.

Language Modeling. Talk about what your child is doing rather than asking them lots of questions. You can model a word or short phrase. For example, if your child is pointing at something they want, you can say, "You want (name of what they are pointing to)." Modeling is also a great way to teach young children the back and forth of communication. Click on the link below to watch a dad teaching his son back and forth commutation in a fun way.

Video: Father Modeling Back-and-Forth Communication

Language Expansion. Expand on what words your child uses to offer a slightly more complex phrase or sentence. Once your child is saying words, you can model 2-3+ word phrases. Your modeling should be close to what your child is doing now but just a little ahead. So, if your child is using two-word phrases, you can model three-word phrases. If your child is saying very few words, it's best to model one-word names for things instead of saying a long sentence that will confuse your child.

Modeling the name of an object and responding to the child's request

Modeling a short sentence

Asking questions. Vary your question types while engaging your child. Think about modeling or expanding more frequently than asking questions.

Summary

Many children with Autism Spectrum Disorder (ASD) or related developmental disorders struggle with joint attention, social attention and requesting. These all encourage language development. Imitation is also helpful for language development. The Imitation module, "Do What You Do," is a good module for learning more about how imitation can help your child's language development.

Helpful Links

- Will Communication Devise Hamler Real Speech in a Child with Autism?
- Father Modeling Back-and-Forth Communication

Using Gestures and Signs to Support Language

- Start with gestures or signs based on your child's interests and actions that happen throughout the day vs. occasionally.
- Choose gestures or signs for words your child isn't already saying or isn't saying clearly.
- Be sure to discuss with your Chat Clinician what gestures or signs to use with your child.
- Use the gesture or sign AND the spoken word together, model multiple times.
- After modeling the gesture and word several times, check to see if your little one is understanding:
    - If your child seems to understand, then try this out with them. If they need a little help, try guiding their hands to produce the gesture and make the action/item occur. For example, your child loves going outside to play. You use the word and sign for "go" to indicate going outside to play. You use the sign and say "go," and your child heads to the back door. They are demonstrating understanding! Time to see if they can try out the sign. Next time you are ready to go outside, stand by the door, say and sign "go." Pause for a few seconds to see if your child imitates. If they don't, guide their hands to produce the sign for "go" and open the door if they tolerate this. If your child shows resistance, discuss with your Chat Clinician.
- Don't forget to watch for possible nonverbal language or gestures your child may begin producing (or might already be doing) on their own.

You do not need to limit the gestures to American Sign Language {ASL):

- Deictic or representational gestures help language development.
- It's okay if your child moves their entire hand forward instead of pointing straight ahead to indicate "go."
- Once you have a set of gestures (based on what your child is interested in) and have discussed them with your Chat Clinician, be consistent with using that gesture for the action or item.
- It doesn't need to be a specific ASL or baby sign. But if you and your child are using a certain gesture for an action, activity, or item, use that gesture consistently.
- Be flexible and have fun!

Some early gestures and signs to start with may be:

- Pointing! A simple gesture, but very effective
- General gestures: waving hand towards you for "come"
- Eat
- Drink
- Potty
- Go
- Up
- Down

Have your child use pointing to make a choice

- More — but be careful not to use this for everything! Use "More" only in the context of needing or wanting more of something and not initially requesting for an item
- All done
- Sleep
- Open
- Close
- Help

I Do What You Do: Learning Through Imitation

Imitation is a great way for your child to learn, and it can also strengthen your relationship with your child. Imitation should go both ways or be reciprocal, with you imitating your child and your child imitating you. The best way to start is to make a habit of imitating your child. You can do this in a playful way. By imitating your child, you will be entering their "world." It's a positive way to engage with your child, and it's fun!

Imitation and the Brain

Imitation helps children's brains develop, and imitating others is a great way to learn. Imitation plays a critical role in language and social development. There are brain cells called mirror neurons that fire when someone is watching another person's actions and then fire again when the observer imitates what they saw. When you imitate your child, you lay the groundwork for the reciprocal imitation that helps brain development.

Imitating Your Child Giving a Message

Studies of parents and children with developmental disabilities show that the parents imitate their children less often than parents of typically developing children. In other words, parents of children with developmental disabilities spend more time asking their child to imitate them rather than imitating their child. This is understandable. If your child has a disability, you are probably trying to do more teaching because you know your child is behind in their developmental milestones. But it turns out that while it's important to use imitation to teach your child, it's also important for you to imitate your child. By imitating your child, you tell them that you are interested in them. You are also promoting shared attention and social responsiveness.

Your Child Imitating You: It's Not About Doing It Right

It's important to remember that your child simply imitating an activity or gesture is much more important than your child doing it "right." When your child imitates you or others in the family, they engage in social interaction that often leads to language learning. For example, when you point to a dog and say "dog" and your child says, "da," they are practicing sounds and learning that there is a word for dog.

Developmental Disabilities and Social Skills

One of the common features of autism and other developmental disorders is difficulties with social-emotional interactions, imitation, gestures, restricted interests, and repetitive behaviors. Each of these deficits can lead a child to fall behind their peers in social skills, language, and the ability to play. That can make it challenging to connect with their peers and families. There is strong research that shows that improving imitation skills may lead to improvements in other social-communication skills and play skills.

Social Play

Imitation is the start of social play. Social play with young children often involves some imitation. For example, think about a baby and parent imitating each other's facial expressions. This activity quickly becomes a game-one that many babies find very funny. Playing is natural for most children, and it's an important way that children learn about the world around them. Play often starts with an interest in social interactions, like copying a facial expression or games like "peek-a-boo." Many familiar children's games also involve imitation like "Simon Says." Play is fun, but it's so much more. It is critically important to develop social communication, including language, pretend play, social interaction, and emotional exchange. Imitation during play can help your child build their play social skills.

How to Use Imitation with Your Child

There are many ways to imitate your child. Keep in mind:

- Be at your child's level
- Be face-to-face
- Imitate play with toys
- Imitate gestures and body movements
- Imitate vocalizations
- Be animated
- Only imitate appropriate behavior
- Control the situation (i.e., be consistent with rules and consequences)

When to Imitate Your Child

You can imitate your child at any time. As you imitate your child, look for times that your child imitates you. When your child imitates you, recognize this with an enthusiastic, "You did what I did!" or another positive statement.

Playtime can be an especially great time to imitate your child or have your child imitate you. During playtime, ask yourself:

- What is your child looking at right now?
- Are they playing with something?
- Are they engaging in their imagination?
- Are they doing a repetitive motion or sound that soothes them?

Whatever it is, take note. Then, if you can, go over to your child, put yourself at their physical level, and start to do what they are doing. Don't worry about feeling or looking silly! Just get on their level, face them, and imitate them.

Teaching Imitation During Daily Routines

Daily routines such as storytime, meals or snacks, bath time, or outdoor play are great times to use imitation and teach your child. There are many skills you can teach with imitation, including:

1. ***Actions with Objects.*** This is best done as a part of a back and forth socially-focused game. For example, if your child is rolling a toy car back and forth, get your own toy car and move it back and forth. You might then do something like turn your car over and say, "My car is going upside down! Isn't that silly?" to see if your child turns their car upside down. If they don't imitate you, go back to imitating them.
2. ***Sounds and Labels.*** Play a name game as you help your child get ready for bed. Hold up their pajamas and say, "Pajamas," and then cover your face with them. Peek out and say, "Pajamas!" Depending on your child's language, you can pair a label or sound with your action, like "Driving the car!" or "Beep, beep!" The goal is to use simple language, speak slowly, repeat and emphasize important words. We can use sounds to expand vocabulary, like starting with "ba" for "baby" or "buh" for ball. Then, model the whole word once they have the simplified version down. Remember that we are not giving instructions or asking questions but simply labeling. Use animated facial expressions and lots of energy while adding sounds and labels to keep it fun and playful.
3. ***Gestures and Movements.*** These can include motions like waving at others, putting arms out for hugs, high fives, or responding to something exciting by clapping. If your child doesn't gesture or has few gestures, you can increase their use by engaging them in play and then modeling (or showing) the gesture in the play setting. When playing, identify a gesture directly related to the toy that your child is playing with.
4. ***Pretend Play.*** There are lots of opportunities for reciprocal imitation during pretend play. For example, playing house and taking on the role of a baby, dog, or cat and making the corresponding real-life sounds. Or pretending to be on a farm and making farm animal sounds - children will often imitate the sounds of animals. Have fun and show your child how engaged you are with the pretend play.

Remember when your child imitates you, always praise them right away by clapping, saying "Yay!" or giving tickles, dishing out the positives your child loves.

Imitation and Play

Playtime can be a great time to imitate your child or have your child imitate you, but you can use imitation at any time. Take 5-10 minutes in a couple of different parts of your child's day to quietly observe them and take some notes.

What is my child looking at?

Are they playing with something?

What motions, actions, sounds, or words are they using?

Are they doing a repetitive motion or sound?

Time to Join In

Now join your child by positioning yourself at their eye level. Did they respond? If so, what did they do?

Did they let you join them (e.g., pick up a toy, play near them, even sit with them)? If so, what did they do?

Time to Start Imitating

Let's start by having you imitate your child. What are they doing right now? Join in and imitate what they are doing. How did it go?

How did they respond?

Did they make eye contact or smile?

Now let's have your child imitate you. Position yourself eye level to your child and make a funny face. Did they respond and try to copy your face?

Point to an object and say the name of the object in a funny voice. Did they try to imitate your voice and point to the object also?

What other imitation ideas did you try with your child?

There are many ways to imitate and play with your child. Here are some basic methods to think about and use:

- Be face to face (and at child's level)
- Imitate play with toys
- Imitate gestures and body movements
- Imitate vocalizations
- Be animated
- Only imitate appropriate behavior
- Control the situation (i.e., be consistent with rules and consequences)

If you get stuck, don't worry about it, your clinician can help you develop ideas.

Ideas from your Chat Clinician

Your Chat Clinician will fill this out when you send your worksheet back.

Helpful hints on how to expand on imitation	*Doing great — Keeping doing what you're doing!*

Chat

Songs

Songs to Imitate	
Gestures	**Songs**
Grand ol' Duke of York song • Sit on the floor or chair • Put your knees up and place your child on your knees • Move your knees up and down to the lyrics of the song	**Grand ol' Duke of York song** The Grand ol' Duke of York, he had ten thousand men, he marched them up to the top of the hill and then he marched them down again. And when they were up, they were up. And when they were down, they were down. And when they were only half-way up, they were neither up nor down.
The Itsy-Bitsy Spider • Verse 1; Join the left index fingertip to right thumb tip and the right index fingertip to the left thumb tip. Keeping one fingertip and thumb tip touching swing the other pair up to touch each other again. Repeat this "climbing" motion going "up the waterspout" • Sprinkle fingers down for the second verse and make a sweeping motion for "washed the spider out" • Make a big sunshine (circle with your arms) for the third verse. • Make your climbing fingers for the final verse	**The Itsy-Bitsy Spider** The itsy, bitsy spider climbed up the waterspout. Down came the rain and washed the spider out. Out came the sun and dried up all the rain. So, the itsy, bitsy spider went up the spout again.
Where is Thumbkin • Child & adult hold hands behind back and sings • Brings one hand to front and sings • Brings other hand to front and sings • Wiggles first thumb and sings • Wiggles second thumb and sings • Moves first had back behind back and sings • Moves second hand back behind back and sings	**Where is Thumbkin** Where is Thumbkin? Where is Thumbkin? Here I am! Here I am! How are you today sir? Very well I thank you! Run AWAY! Run AWAY! Continue with: Where is Pointer? Where is Tallman? Where is Ring Man? Where is Pinkie?

I'm Bringing Home a Baby Bumblebee • One "Bringing home" – Cup your hands • One "Ouch!" – Open your hands up • One "Smashing up"/"Squishing up" – Use hands to imitate squishing something • On "EWW!" – Stick tongue out as if disgusted • On "Licking up" – Pretend to lick hands while trying to sing	**I'm Bringing Home a Baby Bumblebee** I'm bringing home a baby bumblebee, Won't my mommy be so proud of me, I'm bringing home a baby bumblee, Ouch! He stung me! I'm squishing up a baby bumblebee, Won't my mommy be so proud of me, I'm squishing up a baby bumblebee, Eww! He's gooey! I'm lickin' up a baby bumblebee Won't my mommy be so proud of me I'm lickin' up my baby bumblebee Mmm! He's yummy!
Twinkle, Twinkle, Little Star • Open and close fingers with each word, look up and tap head with a finger • Reach up to the sky • Make a diamond shape with your hands • Open and close fingers with each word • Look up and tap head with a finger	**Twinkle, Twinkle, Little Star** Twinkle, twinkle, little star, How I wonder what you are. Up above the world so high, Like a diamond in the sky. Twinkle, twinkle, little star How I wonder what you are.
The Wheels on the Bus • Roll your hands over each other • Put your hands in front of you and swish like a windshield wiper • Make both hands into an 'L' shape and open and close them • Push your hands down and pretend you are honking a horn • Make your hands into a fist and pretend to rube them on your eyes • Bring your index finger up to your mouth when saying "sss'sh, ssss" • Roll your hands over each other	**The Wheels on the Bus** The wheels on the bus go round and round, Round and round, round and round, The wheels on the bus go round and round All through the town. The wipers on the bus go "Swish, swish, swish, swish, swish, swish," The wipers on the bus go "Swish, swish, swish" All through the town. The people on the bus go, "chat, chat, chat, chat, chat, chat, chat, chat, chat" Thew people on the bus go, "chat, chat chat" All through the town. The horn on the bus goes, "beep, beep, beep, beep, beep, beep." The horn on the bus goes, "beep, beep, beep" All through the town. The baby on the bus goes "wah, wah wah! wah, wah wah! wah, wah, wah! The baby on the bus goes "wah, wah, wah!" All through the town. The mummy on the bus goes "shh, shh, shh, shh, shh, shh, shh, shh, shh" The mummy on the bus goes "shh, shh, shh" All through the town. The wheels on the bus go round and round Round and round, round and round The wheels on the bus go round and round All through the town.

Imitation Planner

Items / Objects	Gestures	Language to Use	Ideas of When to Implement Daily Routines
Example: Spinning top	Spinning finger in circles	It's spinning!	Bath time, playtime, meal time
Example: Jumping	Adult jumps	Jump!	Outside on a walk, inside playtime
Example: Bubble play	Clapping hands together to pop bubble.	Pop!	Playtime, outside time

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