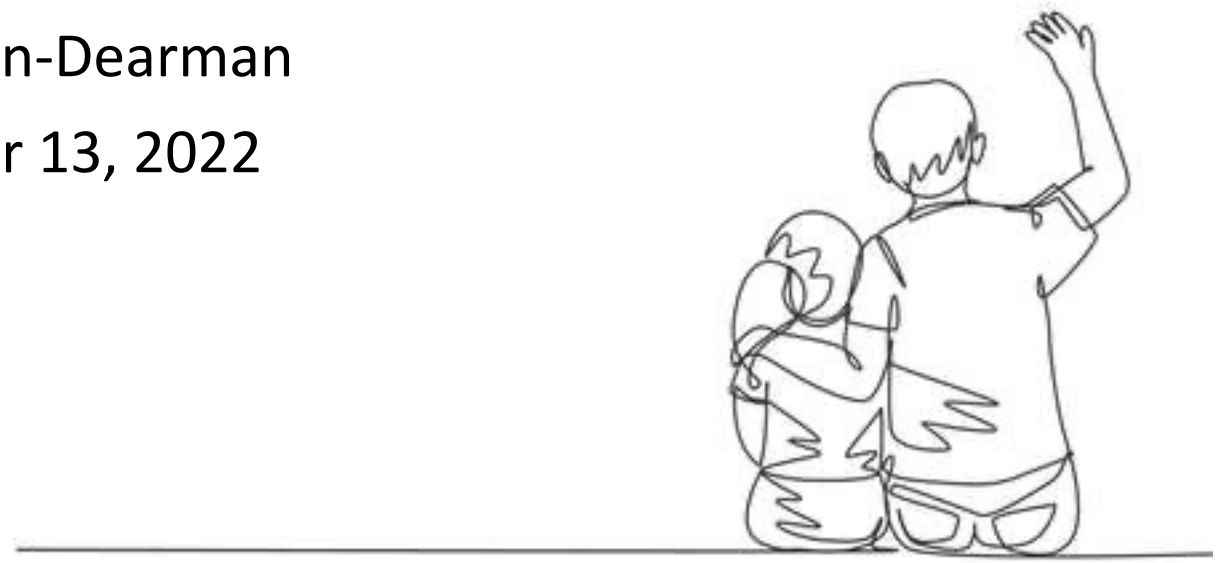
Pediatric Cases and the Updated Canadian Perspective on Developmental Attainments

A. Hanlon-Dearman

October 13, 2022



Faculty/Presenter Disclosure

- **Faculty:** Ana Hanlon-Dearman

- **Relationships with commercial interests:**
  - None

Learning Objectives

1. To introduce the newest Canadian update on developmental attainments
2. To discuss behavioural milestones – executive function, self-regulation and social skills
3. To apply learning to developmental cases

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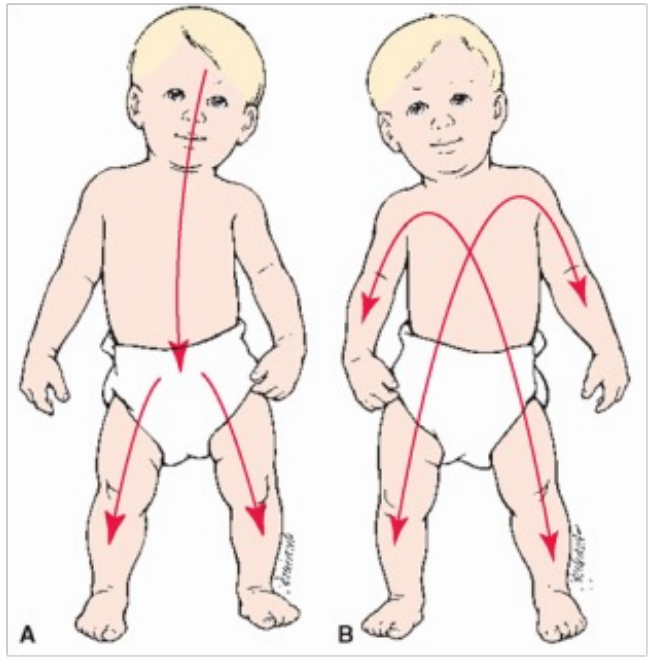
Why developmental milestones?

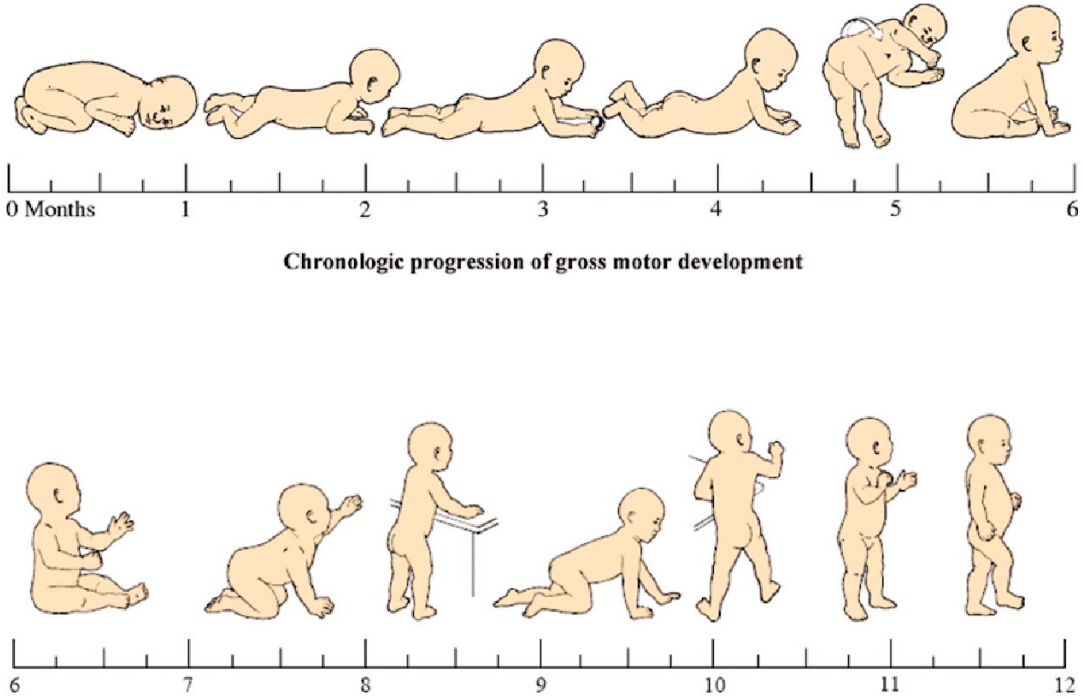
- Marks neurologic development and integration with motor, language, and cognitive skills
- Focuses anticipatory guidance
- Cues opportunities for early intervention

Developmental progression

Cephalocaudal



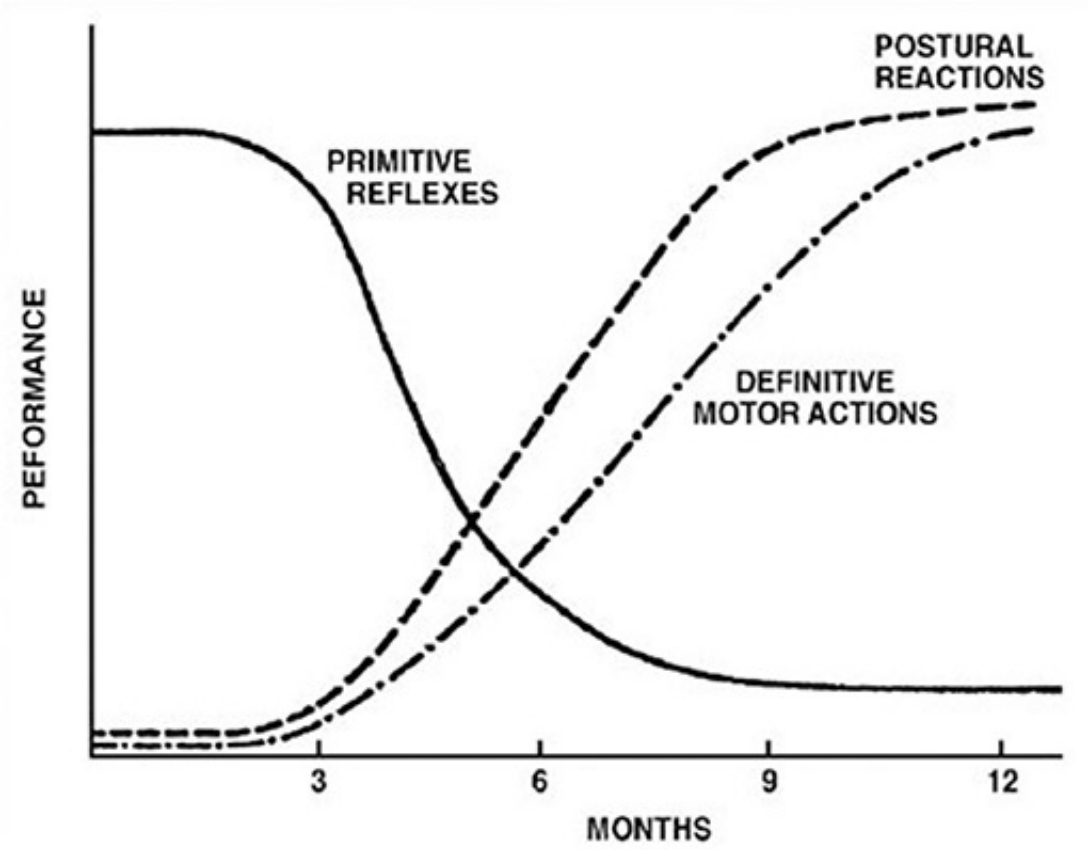
Proximodistal



Chronologic progression of gross motor development

https://therapiesforkids.com.au/gross-motor-milestones/

Primitive and Protective Reflexes, in brief



Parachute Reflex, protective extension

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Original Article

OXFORD

Original Article

Updated evidence-based developmental attainments for children: First 6 years

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“Go For Chocolate Cake For Sure!”

(Dosman, 2022)

- **Go**: Gross Motor
- **For**: Fine Motor/Visual Motor
  - Vision, visual motor integration, motor control, play, self-care
- **Chocolate**: Communication
  - Hearing, social communication, receptive/expressive language, speech
- **Cake**: Cognitive
  - Reasoning/problem solving, attention, memory, play, books
- **For**: Feeding, Eating, and Sharing Meals
  - Self-feeding, sharing meals
- **Sure**: Social Emotional
  - Parent-child relationship, co-regulation, self-regulation, social interaction, social play

24 Months Milestones (Dosman, 2022)

Supplementary Table 3. Early Childhood (24,30,36 Months) Developmental Attainments**

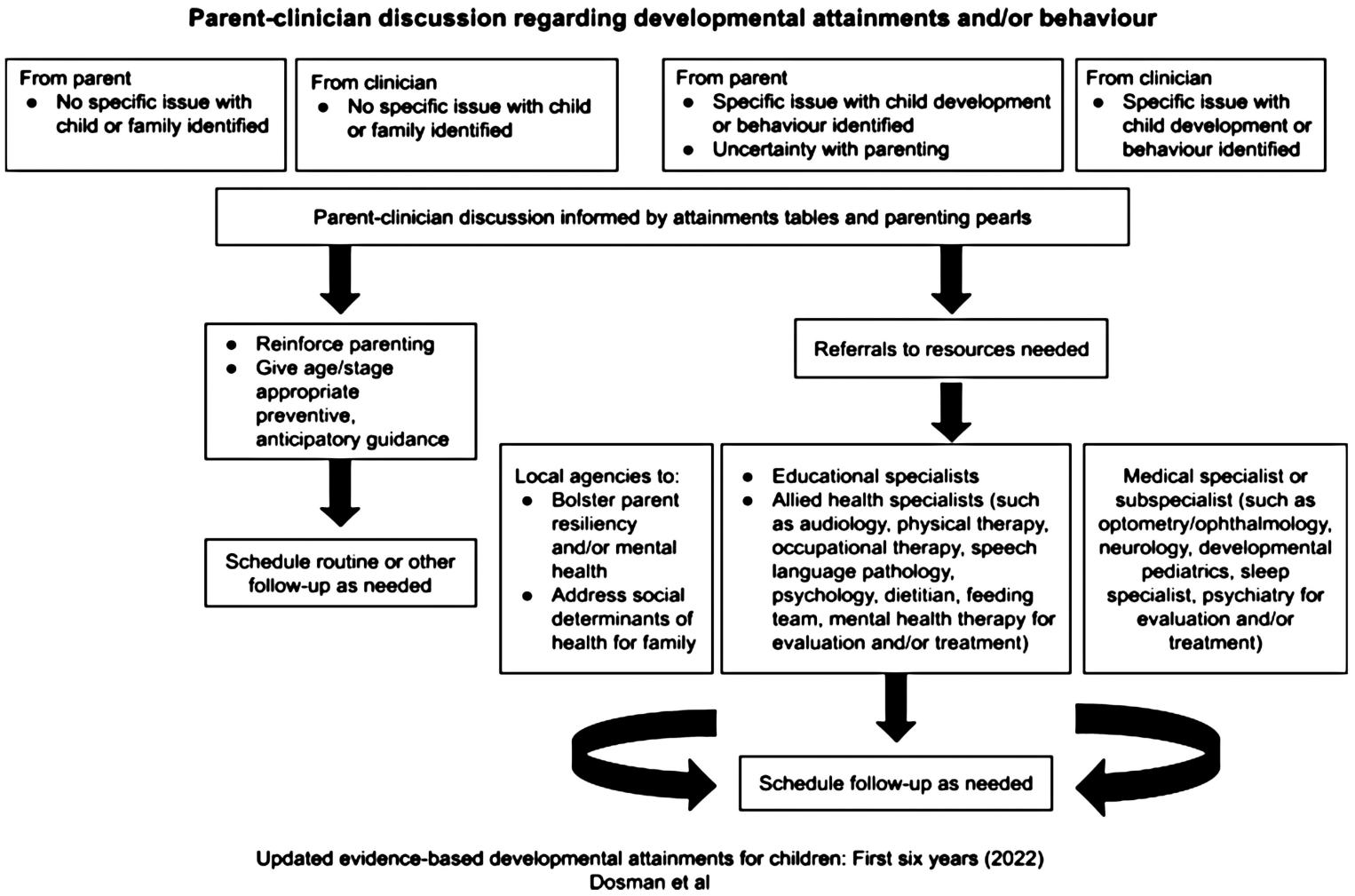
GROSS MOTOR Go*	FINE MOTOR / VISUAL-MOTOR For*	COMMUNICATION Chocolate*	COGNITIVE Cake*	FEEDING, EATING, AND SHARING MEALS For*	SOCIAL-EMOTIONAL Sure*
24 Months					
Gait: -Runs [19-20m] (19)(A-50th) and stops without bumping into or falling [21m] (28)(B-AVG) **Motor control:** -Jumps up 2" on the spot and down 7" step [23-24m] (19)(A-50th) -Walks up stairs marking time (placing both feet on each step), no railing [23-24m] (19)(A-50th) **Play:** -Kicks large stationary ball forward 3 feet [23-24m] (19)(A-50th) -Throws tennis ball overhand [19-20m] and underhand [23-24m] 3 feet forward (19)(A-50th) -Pushes and steers stroller or wagon [24m] (28)(B-AVG) -Plays chasing games, enjoys	**Motor control:** -Turns knob to open door [22m] (28)(B-AVG), because he can pronate and supinate the wrist sufficiently (3)(B-AVG) -Turns light switches on and off [20m] (28)(B-AVG) **Play:** -Stacks 6 cubes [21-22m] (19)(A-50th), imitates lining up 4+ objects in a row [20m] (28)(B-AVG) -Uses paint, paper, sand, water, play dough for the sensory experience (squeezing, pinching, feeling - hopefully not eating! §) [21m] (28)(B-AVG); simple toys allow imagination to develop [12-36m]; brain growth is stimulated by what he is most interested in (31)(B-AVG) **Self-care:** -Helps dress [shirt 12m,24m, pants 18m,24m] (27)(A-90th); a minority≠ wash and dry hands thoroughly, put on shoes (correct feet), manage (buckles/unbuckles) seatbelt [24-30m] (27)(A-90th); some consistently indicate need to void (bladder, bowel) [24-30m 25th %ile] (27)(A-90th) -Toilet learning readiness requires sphincter control for 1-2 hours of dry diapers, enjoys sitting on potty/toilet with feet on floor/stool, tries to pull down clothes, signals need to be taken to washroom or goes there independently,	**Social communication**: -Initiates more frequent communication (several x / min) than at 18 months during free play with responsive adult [18-24m] (12)(C-OLD) -He starts to learn conversation skills; he recognizes that a pause indicates it is time to take his turn; he recognizes the need for and uses communication repairs [12-24m] (4)(B-YNG); for example, when he didn't get the attention he wanted from his vocalization or point, he takes another 'serve' to get his parent to 'return;' some of the many common repair strategies are he repeats the original communication attempt, adds more information (uses different word, adds a gesture such as leading by the hand toward, directs more emphasis with facial expression, intonation, or increased volume), or changes communication partner (gives to dad if mom does not open it) ¥ **Receptive language**: -Receptive language precedes expressive language (he understands more than he can say) [12-24m] (4)(B-YNG) and is closely linked to cognitive development (11)(C-OLD) **Expressive language:** -Speaks 50 words [21-24m] (26)(B-OLD), mostly 1-2 syllable words [12-24m] (4)(B-YNG); many of his words will have come from books read frequently (31)(B-AVG) -Speaks 2 word phrases [21-24m] (26)(B-OLD) (such as 'more milk' or 'no bed'), uses nouns and verbs (such as 'mama go' as mother leaves child with another when going to work, 'baby (s)eep/deep' to mean baby is sleeping, or 'puppy bahk' when puppy is barking) [12-24m] (4)(B-YNG) ¥ -Receptive and expressive language will develop exponentially between 25 and 36 months, to speaking longer words and sentences and too many words to count (4)(B-YNG); the estimated number of words in phrase or sentence could be recorded by the clinician	**Reasoning**: -Pre-operational stage of cognitive development is characterized by development of language, imagination, and drive for autonomy [2-6y] (18)(B-NO) -Knows that object continues to exist when moved from place to place (looks for object in many places even though he had not seen it move locations) [2nd half of 2nd year] (14)(C-AVG) -A 'magician,' he starts pretending [1-2y] and will believe all unexplainable events are caused by people (such as clouds in sky are made from breath seen in cold weather) [2-3y]; by 6 years, a 'realist,' he will believe only in what he can see evidence for, instead of magic (14)(C-AVG) -A 'scientist,' he will investigate to figure out what's inside and how things work [2-3y] 14)(C-AVG) -Knows that 'seeing leads to knowing' (such as when child wants to show a picture to his parent who is covering their eyes, he understands to move parent's hands) (early stage for future theory of mind) [2y] (49)(B-YNG) **Problem solving:** -Strategies without rehearsal (pauses to plan an action without physically trying it out first) [12-24m] (5)(B-OLD) (22)(B-OLD) √ **Memory:** -Understands first-then concept because of sequential time memory (such as 'first put away the toys, then we go outside;' recollection of order of events allows sense of	**Feeding:** -Has the chewing and swallowing skills to eat most foods (exception choking hazards), chews with lips closed [24m] (13)(C-OLD) **Self-feeding:** -Uses spoon with spilling [18m, 24m] Note: Developmental attainments may be variable depending on cultural practices and how the roles are shared between the parent and child β **Eating:** -Selective eating starts (food variety eaten varies based on personal preferences) [24m] (13)(C-OLD); parent is responsible for when and what is served, child is responsible for what and how much he eats,	**Parent-child relationship**: -Still returns to 'secure base' of caregiver to 'refuel' safety when playing [1-2y] (5)(B-OLD) -Increasingly uses social referencing [12-24m] (5)(B-OLD) (early stage for future theory of mind) (36) (B-YNG) -Being age 12 months-3 years is a time of increasing independence, drive for autonomy, and wish for control (31)(B-AVG) **Self-regulation:** -Can recover from emotional distress [24m] (16)(B-OLD) but will still need parent's help calming when tired, frustrated, or stressed [24-36m] (5)(B-OLD) -Predictable daily routines help him feel secure and reduce stress, tantrums, and anxiety [12-36m] (31)(B-AVG) -Internalizes parent's 'no' into his self-talk ('Don't touch' or 'no push(ing)' in rebuking tone of his parent) used consciously *after* his impulsive act; at 4-6 years, he will use it for self-control (self-talk before the act, to stop the impulse) (14)(C-AVG) -Lacks self-control, which is dependent on parent presence to approve or disapprove and even then he may lack control over his strong urges (such as grabbing the toy) [2-3y] (14)(C-AVG) -Starts to show self-conscious emotions (pride in doing a task [19-24m] (5)(B-OLD) or embarrassment, shame, guilt [18m-4y] (5)(B-OLD) after a misbehaviour is discovered [2-3y] (14)(C-AVG) (early stage for future moral responsibility in late adolescence, when he will use his conscience of right and wrong to guide his own conduct (18)(B-NO)) -Self-control and conscience (shame and guilt for misbehaviour not discovered by others, which prevents impulsive acts) will develop through teaching received from parent whom he

Why…..

- "…even when parent and clinician have no concerns, anticipatory guidance proactively supports optimal development because typical and predictable problems will emerge in each developmental stage" (Dosman, p. 287)

https://www.child-bright.ca/bright-coaching/

Graphical Abstract



Updated evidence-based developmental attainments for children: First six years (2022)
Dosman et al

Paediatr Child Health, Volume 27, Issue 5, September 2022, Pages 285–290, https://doi.org/10.1093/pch/pxac038

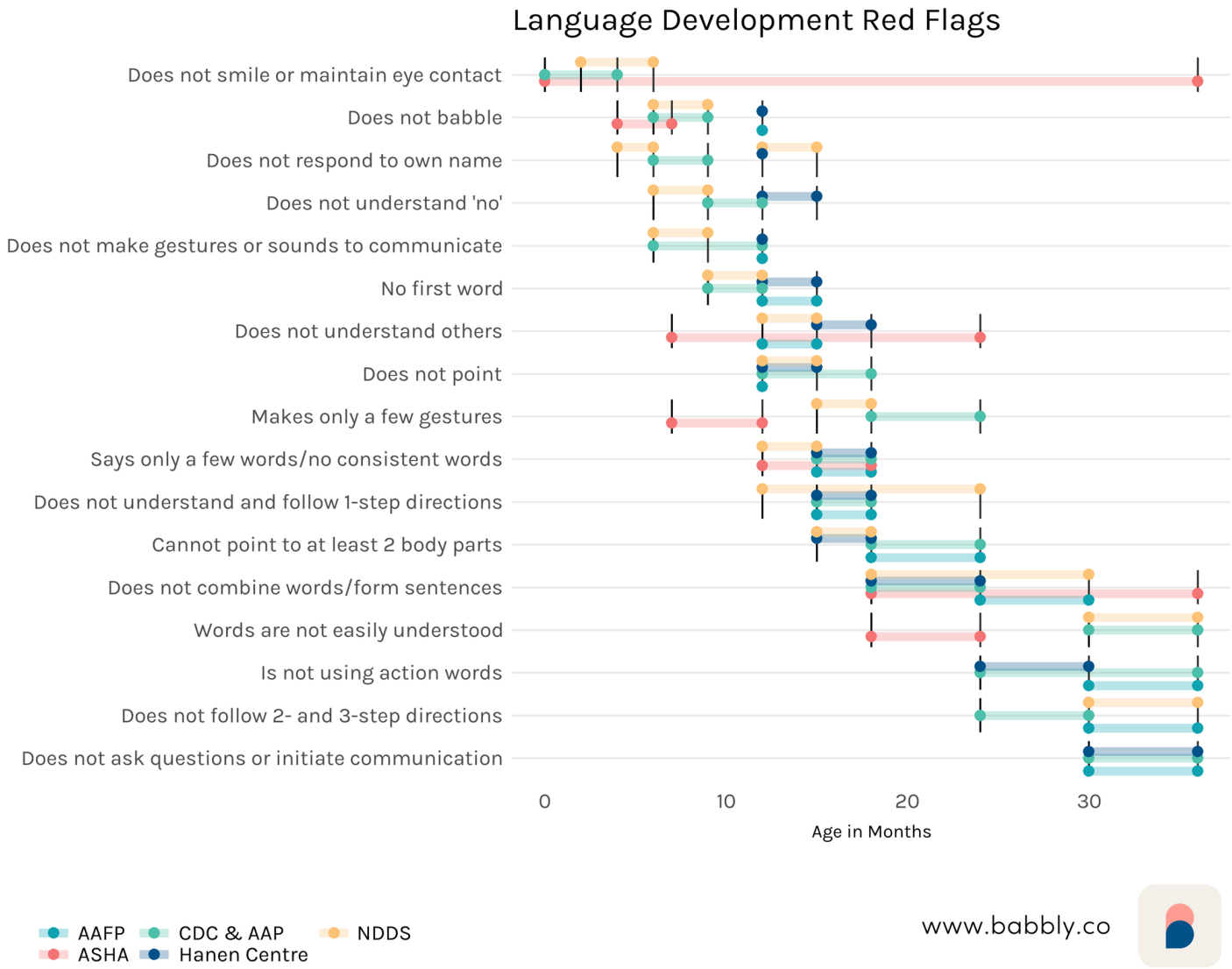
Liam 2 years

- Rolled at 3 months
- Sat at 6 months
- Never crawled
- Cruised 10 months, briefly
- Walked at 10 months

- Occasional babbling
- No words

- Not feeding himself
- Sleeps through night
- Not showing interest in toilet training

Red Flags



www.babbly.co

Norman

- Rolled 4 weeks
- Sat 6/7 months
- Crawled 5/6 months
- Cruised 6 months
- Walked 10 months

- First words 12 months
- Combined words 3 years
- Sentences 4 years

- Toilet trained himself
- Feeds self
- Sleeps through the night

George 5 years

- Rolled 6 months
- Sat 10 months
- Crawled 12 months
- Cruised 12 months
- Walked 16 months

- Babbled 4 months
- First words 11 months
- Sentences 2 ½ years

- Toilet trained 4 ½
- Feeds self finger 1 year
- Feeds self utensils 3 ½ years
- Dresses self – Velcro, no fasteners

- “parenting that shapes behaviour and mediates adverse environmental risks is the critical factor for young children, which supports optimal development of the brain and of the external skills the child uses” (Dosman, p. 287)

Gage 3 1/2

- Rolled 1 month
- Sat 4-5 months
- Crawled 5 months
- Cruised? Brief
- Walked 8 months

- Babbled “early”
- First words 9 months
- Sentences 18 months
- Very social

- Resists toilet training
- Feeds self “early” doesn’t like utensils
- Hard to fall asleep and wakes early

Flo 4 years

- Rolled at 4 weeks
- Sat 7 months
- Crawled 8 months
- Cruised 9 months
- Walked 15 months

- Babbled 6 months
- First words 12 months
- 2-3 words 20 months
- Sentences 2 1/2

- Toilet trained 2- 21/2
- Feeds self 15-18 months
- Dresses ?
- Never slept through the night

Damian 5 years

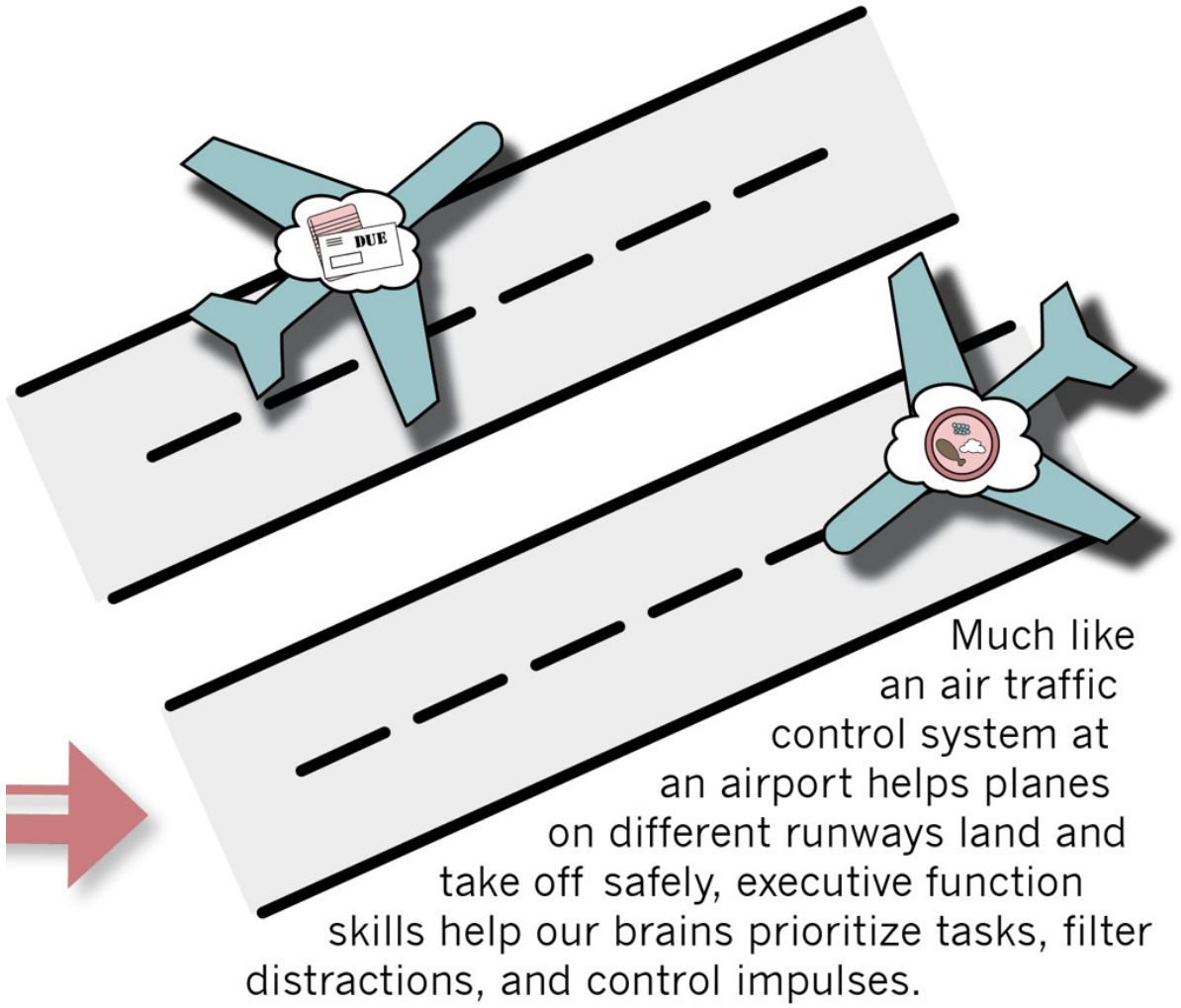
- Rolled 1 month
- sat 6 months
- Crawled 6-7 months
- Cruised 9 months
- Walked 12 months

- First words 12 months
- Sentences 2-3 years
- Yells and cries

- Independent eating, toileting, dressing
- Hates bedtime

Executive Functioning and Self-Regulation

- EF refers to a set of skills that include:
  - Planning ahead
  - Organizing
  - Self-regulation
  - Working memory
  - Focusing and filtering distractions



https://developingchild.harvard.edu/resources/what-is-executive-function-and-how-does-it-relate-to-child-development/

Executive functions work together

- the blueprint is neurological, but the EF develop through experience and practice with responsive caregivers

Serve and return

- Babies learn to pay attention
- Adults provide organization and scaffolding of skills
  - Establishment of routines
  - Breaking down tasks into manageable chunks
  - Encouraging games that promote imagination, role playing, following rules, controlling impulses/self-regulation

Executive Functioning Skill Development by Age

	PLANNING	TIME MANAGEMENT	TASK INITIATION	ORGANIZATION	PROBLEM SOLVING	FLEXIBILITY	WORKING MEMORY	EMOTIONAL CONTROL	IMPULSE CONTROL	ATTENTIONAL CONTROL	SELF MONITORING
INFANT (0-24 MONTHS)	• focusing for objects • pointing & grabbing			• shows interest in color, size, shapes • beginning matching skills	• engages in cause and effect play • figuring out 'how things work' through simple body movements and basic play skills	• Older children in this age range play simple role play or imaginative play games	• plays hide-and-seek and simple recall games • participates and enjoys familiar rhymes and songs			• plays simple games like peek-a-boo and pat-a-cake • imitation and copying behaviors emerge	
TODDLER (2-4 YEARS)	• understands simple instructions and can run simple errands	• beginning understanding of time concepts including seasons, days, weeks, etc. • follows visual picture schedules to order tasks. • practices waiting.	• able to independently start and complete tasks that take up to 10 minutes	• understands categories and patterns • can sort toys and objects by function, form, and class • cleans up toys and belongings with adult assistance	• completes simple puzzles and games that combine language and movement to accomplish a goal. • decision making and turn-taking during play promote basic problem solving	• Beginning skills to shift between activities. • Sometimes able to manage transitions and unexpected changes without upset.	• follows along to songs and fingerplays with many steps and movements.	• labels own emotions and the emotions of others • may often have tantrums or upset when frustrated, tired, or overwhelmed requiring adult comfort to soothe.	• plays active inhibition games like musical chairs, and freeze dance • learns to inhibit safety-related behaviors like touching a hot stove and street safety.	• able to direct attention to objects and activities for longer periods of time. • Responds to adult cues and redirections back to 'pay attention' when needed.	• talks about own feelings and connects simple behaviors with emotions. • plays along with other children, directing play and accepting play ideas.
EARLY LEARNER 5-12 YEARS	• able to follow a planned out set of steps to meet an end goal. • plays fast moving games and games requiring strategy and planning ahead.	• developing time estimation and a sense of how long tasks will take. • beginning skills to manage leisure time and required tasks.	• able to independently start and complete tasks that take up to 30-60 minutes	• organize and sequence stories • can follow simple checklists • gathers materials for familiar routines, often with adult assistance and reminders	• identifies and defines problems to many simple social and academic tasks; • emerging skills to brainstorm and break apart problems to identify solutions.	• Participates in organized social activities like sports, clubs, and activities where unpredictable events occur. Often uses adult support to dynamically adjust.	• Independent with puzzles, logic games, and coordinated group activities. • able to collect information and apply it to new settings.	• learns to control tantrums and frustrations without adult comfort.	• follows safety rules and most social norms for behavior. • behavior maintains when teachers or adults are not around	• able to save money for desired objects. • developing note taking, reminders, and planning tools to help sustain attentional control.	• able to complete activities like journaling to reflect on own behavior. • checks own work for simple mistakes.
TEEN 13-18	• able to independently plan out the steps of homework or important project to meet an end goal. • Works in a group of peers to plan social activities and events.	• estimates how long it takes to complete tasks and adjusts working speed to fit. • understands and works to avoid the consequences of ineffective time management.	• able to independently start tasks that take up to 60-90 minutes to complete	• follows complex school schedules combined with home routines. • able to use systems for organizing schoolwork and activities.	• independently identifies problems at home, work, and with friends. • able to sort out many conflicts and make decisions about complex problems independently, make seek adult guidance.	• Able to manage many unpredictable changes to schedules and routines, but may sometimes need adult support to identify strategies to dynamically adjust.	• able to collect information and apply it to new settings. • independent with puzzles, logic games, and coordinated group activities	• greater understanding of others emotions, including empathy and a desire for social change. • may experience 'adult feelings' but not have experience yet in how to manage them.	• greater risk-taking behaviors • may begin to test some adult safety behaviors and social norms • may engage in self-talk to help manage impulses	• able to save money for desired objects as well as creates and executes plans to earn money for desired items. • Beginning mindfulness of distractions, but may need adult support to avoid them.	• able to monitor performance and adjust/improve. • Uses tools to monitor behavior. • May recruit adult feedback or need reminders from coaches, parents, friends, teachers, etc.
YOUNG ADULT 18+	• able to develop and maintain multiple different plans at one time to meet many different goals • able to establish and meet long-term goals.	• seeks out and implements tools and systems to manage time more efficiently • uses routines and modifies schedules dynamically to meet changing demands.	• initiates and completes tasks despite adverse conditions and distractions. • prioritizing and planning occurs ahead of beginning most activities	• maintains neat and orderly systems for daily living tasks. • when areas of life like email household chores get out of hand, can re-organize as needed.	• generates solutions to complex problems. • persists in developing new and creative strategies to ongoing problems.	• modifies schedules dynamically to meet changing demands. • Unpredictability causes occasional stress, but able to handle most changes easily.	• greatest working memory capacity in early adulthood. • able to collect, store, and synthesize information from multiple sources to accomplish tasks and goals.	• emotional modulation in most settings including controlling outbursts and managing frustration in healthy ways.	• manages impulsive behaviors across a variety of settings. • Withholds rushing through things • inhibits reckless and dangerous behaviors.	• Able to sustain attention in the face of many distractions • Eliminates or reduces distractions when needed	• checks work for mistakes. • monitors and compares own behavior to others performance.

Scaffolding Behaviour

- Offer “just the right amount” of help
  - Problem solve – resilience through failing and trying again
  - Decrease scaffolding as child becomes independent

- Ways to scaffold:
  - Demonstrating (and narrating while you’re doing it)
  - Offer choices
  - Ask “I wonder….” questions
  - Switch things up

Letting Go – Can there be too much support?

- Stanford study (Obradović et al, 2021): researchers observed parents' behavior when kindergarten-age children were actively engaged in playing, cleaning up toys, learning a new game and discussing a problem
- Children of parents who stepped in *too much* to provide instructions, corrections or suggestions or to ask questions – *despite the children being appropriately on task* – displayed more difficulty regulating their behavior and emotions at other times
- Children also performed worse on tasks that measured delayed gratification and other executive functions, skills associated with impulse control and the ability to shift between competing demands for their attention.

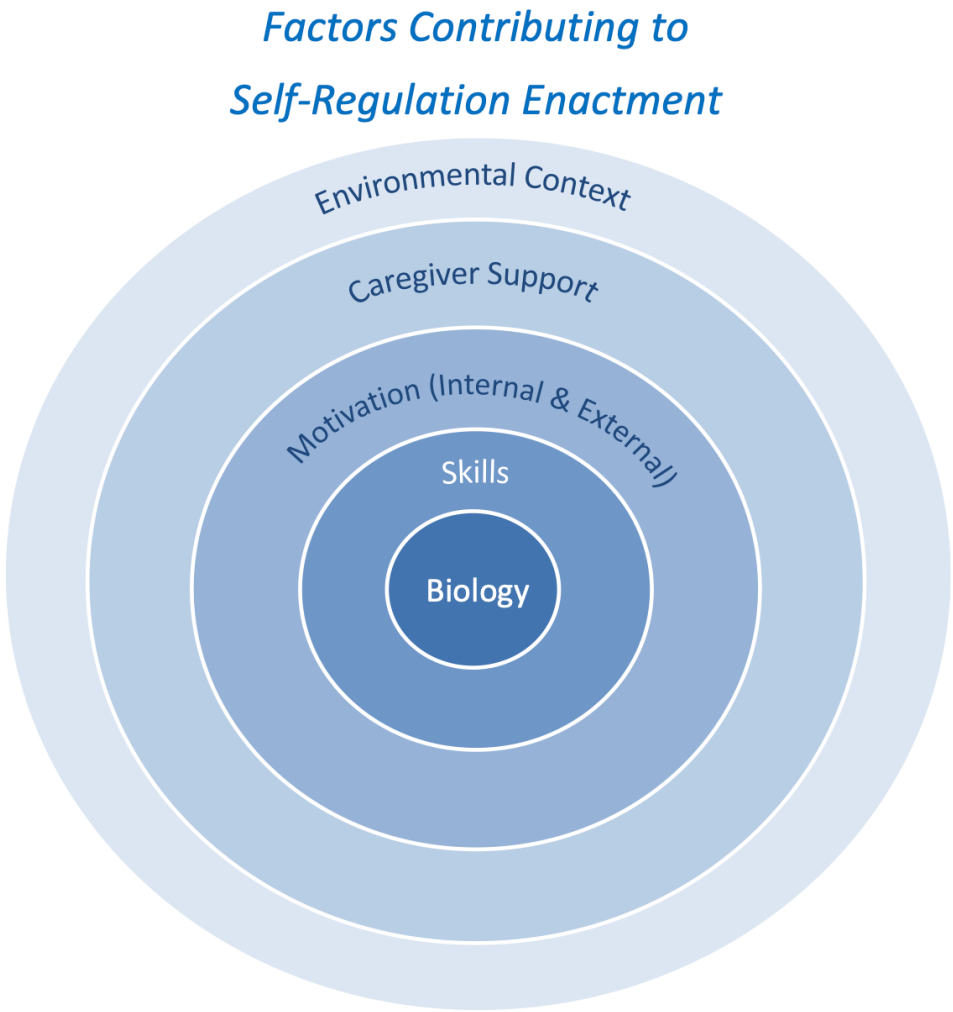
Self-Regulation

- Self-regulation: the ability to monitor and modulate which emotions one has when you have them, and how you experience and express them

- children learning self-regulation skills need structured environments, supportive relationships, direct instruction and coaching in a progression of self-regulation skills

- Ability to do this effectively with age promotes resilience in face of adversity

(https://www.parentingforbrain.com/self-regulation-toddler-temper-tantrums/

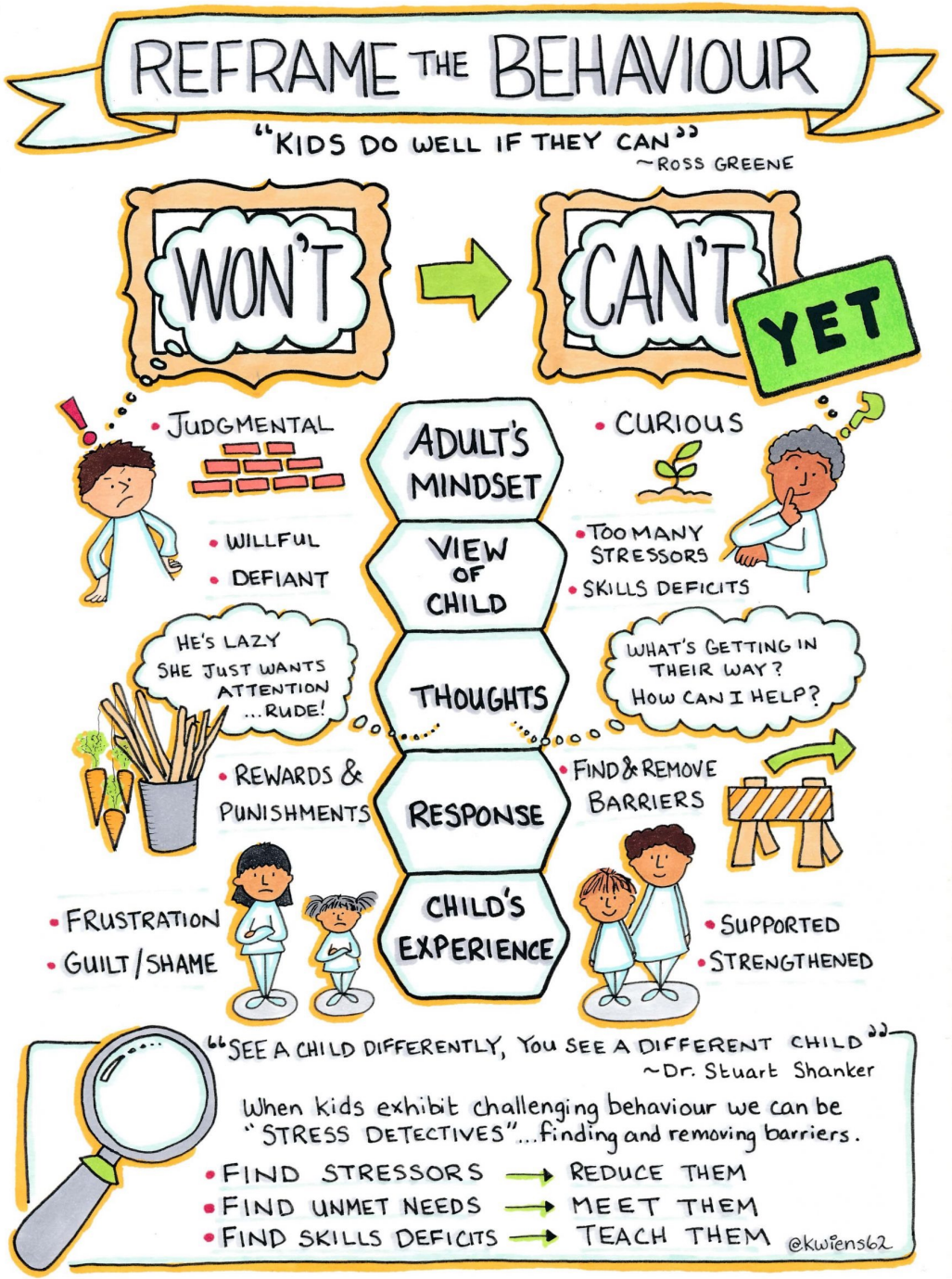


https://fpg.unc.edu/sites/fpg.unc.edu/files/resources/reports-and-policy-briefs/PromotingSelf-RegulationIntheFirstFiveYears.pdf

Self-Regulation Milestones

- Infancy:
  - Shifting attention or averting gaze when overwhelmed
  - Self-soothing by sucking fingers or a pacifier to reduce distress
- Toddlerhood:
  - Focusing attention for short periods
  - Adjusting behavior to achieve goals
  - Beginning to label feelings
  - Briefly delaying gratification
  - Turning to adults for help with strong feelings
- Preschool-aged children:
  - Recognizing a growing array of feelings in self and others
  - Identifying solutions to simple problems
  - With support, using strategies like deep breaths and self-talk to calm down
  - Focusing attention and persisting on difficult tasks for increased lengths of time
  - Perspective-taking and early empathy

“See a Child Differently, You see a Different Child” (S. Shankar)



Misbehaviour

The key to *misbehaviour* is that the child *could* have acted differently: that she was *aware* that she shouldn't have done something, and was perfectly capable of acting differently.

Stress behaviour

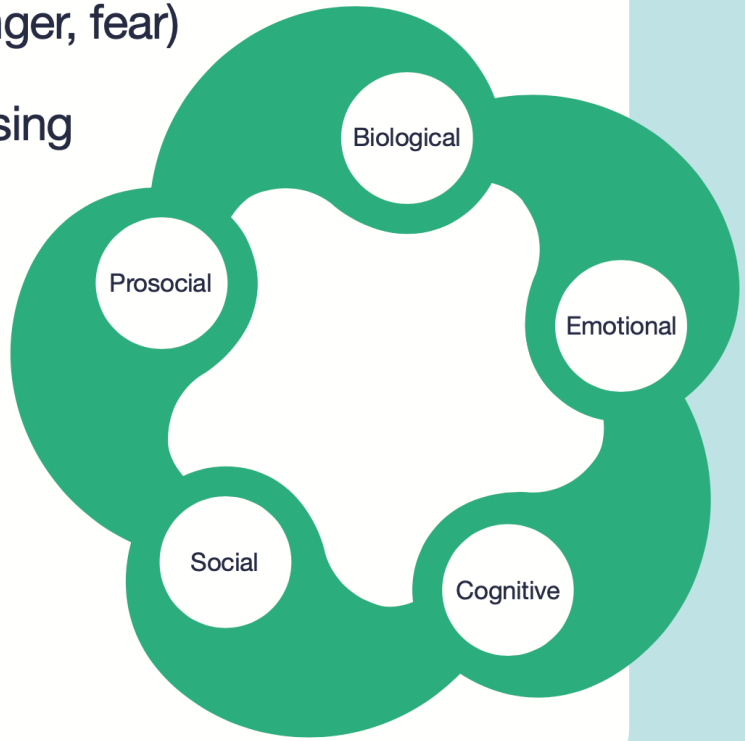
The key to *stress behaviour* is that the child *is not* fully aware of what she is doing, or why: she has *limited* capacity to act differently.

Stress behaviour is caused by too high a stress–load. The big challenge in doing Self–Reg is figuring out why our child's stress is so high.

https://self-reg.ca/wp-content/uploads/2020/06/Infographic_Parent.pdf

5 Primary Domains of Stress

* **Biological**—noises, crowds, too much visual stimulation, not enough exercise
* **Emotional**—strong emotions, both positive (over–excited) & negative (anger, fear)
* **Cognitive**—difficulty processing certain kinds of information
* **Social**—difficulty picking up on social cues, or understanding the effect of his behaviour on others
* **Prosocial**—Difficulty coping with other peoples' stress



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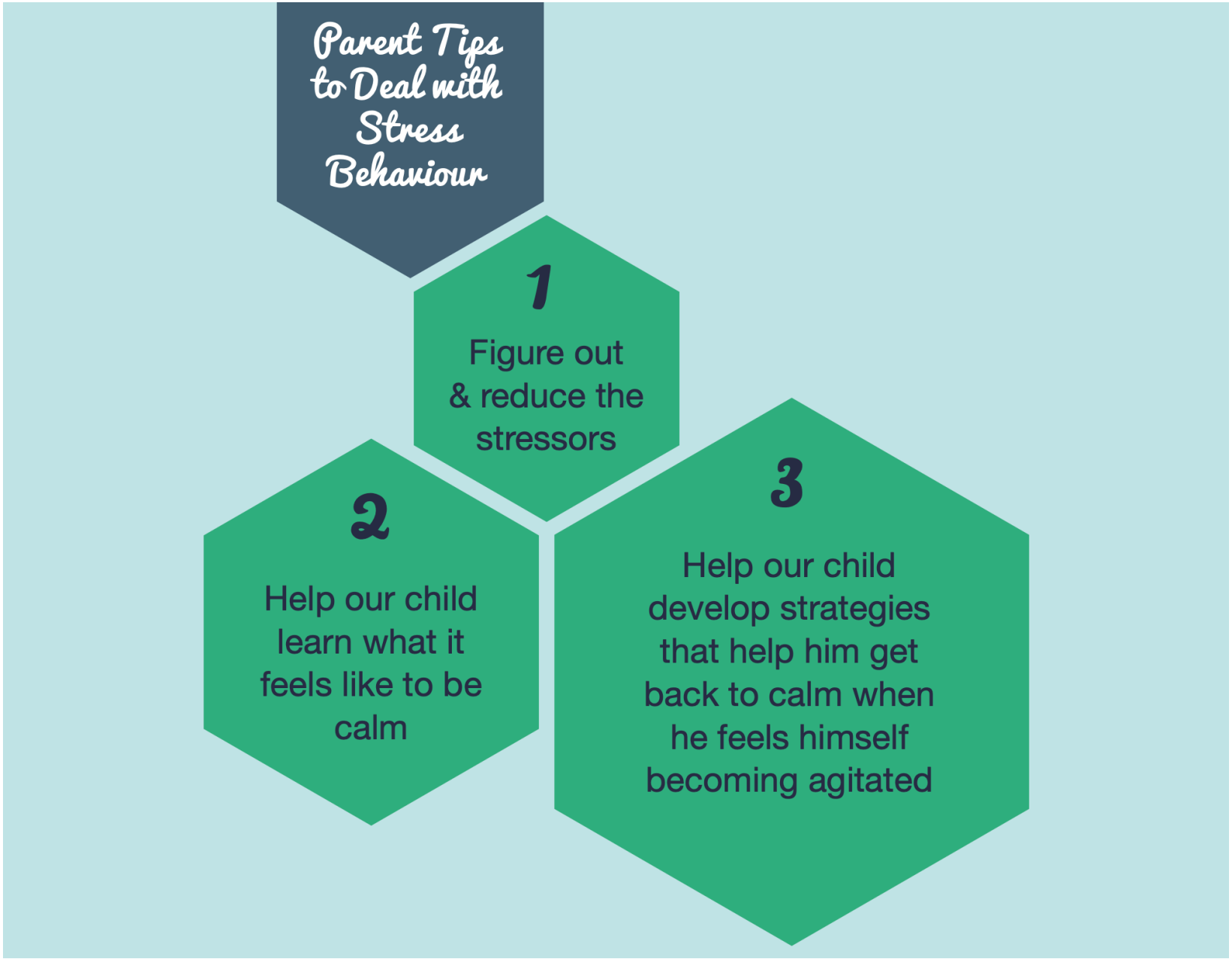

https://self-reg.ca/wp-content/uploads/2020/06/Infographic_Parent.pdf

POSITION STATEMENT

Screening for disruptive behaviour problems in preschool children in primary health care settings

Posted: Nov 27, 2017

PODCAST

A joint statement with the Canadian Academy of Child and Adolescent Psychiatry.

Principal author(s)

Alice Charach, Stacey Ageranioti Bélanger; Canadian Paediatric Society, John D McLennan, Mary Kay Nixon; Canadian Academy of Child and Adolescent Psychiatry, Mental Health and Developmental Disabilities Committee

Paediatr Child Health 2017;22(8):478–484

https://cps.ca/en/documents/position/disruptive-behaviour

Table 1

Parent-reported examples of normative versus problem indicators for disruptive behaviours in preschool children

Dimension	Normative misbehaviour	Problem indicator
Noncompliance	Says 'no' when told to do something	Misbehaves in ways that are dangerous (e.g., refuses to hold a parent's hand and instead runs into the street)
Aggression	Acts aggressively when frustrated, angry or upset	Acts aggressively to try to get something he or she wants
Temper loss	Loses temper or has a tantrum when tired, hungry or sick	Has daily temper tantrums; has tantrums that last >5 minutes*

*There is no consensus regarding the threshold at which a child's tantrums shift from being normative to atypical. However, factors considered during assessment include frequency (e.g., daily or in repeated clusters), intensity (e.g., with aggressive behaviours, such as hitting, biting or kicking) and duration (e.g., >5 minutes per bout).

Data adapted from ref. (16).

https://cps.ca/en/documents/position/disruptive-behaviour

Key positive parenting strategies

- Set clear, consistent, and simple limits
- Give simple developmentally appropriate reasons for limits eg when you put your toys in the box it’s easier to find them later
- State limits positively eg. it’s time to put the blocks away vs don’t leave the blocks on the floor
- Focus on the behaviour not the child
- Say what is expected rather than ask
- Provide appropriate choices
- Give enough time to respond to expectations
- Ignore minor incidents
- Reinforce appropriate behaviour with words and gestures
- Encourage child to use you as a resource
- Be alert -- proximity

When you have to intervene

- Get a child's attention in a positive way
- Use proximity and touch
- Use reminders
- Acknowledge feelings before setting limits
- Redirection
- Reinforce limits
- Offer appropriate choices
- Use natural and logical consequences
- Limit use of toys
- Model problem solving skills
- Provide opportunities for child to make amends

Evidence Based Parenting Support

- 'TripleP'(https://www.triplep-parenting.ca/can-en/triple-p/ and www.manitobatriplep.ca),
- the Incredible Years Parent Programs (http://incredibleyears.com)
- Programs offered in remote and rural areas through Strongest Families (http://strongestfamilies.com).

Parenting skills taught
1. Ensure positive and nurturing parent–child interactions
2. Set developmentally appropriate expectations for the child
3. Provide clear, consistent expectations, limits and routines
4. Identify triggers for positive and negative behaviours (e.g., fatigue, hunger, disappointment)
5. Use positive parenting skills such as giving salient rewards (e.g., praise or affordable items/activities) for select positive child behaviours
6. Reduce negative or harsh parent–child interactions
7. Ignore negative behaviours that are minor (i.e., 'Pick your battles')
8. Implement time-outs selectively (i.e., for specific behaviours such as hitting) with clear parameters (e.g., limited duration of time in time-out)
9. Work as a team with other parents and caregivers
10. Communicate with child care staff or schoolteachers

https://cps.ca/en/documents/position/disruptive-behaviour

Final thoughts: Developmental Milestones and Behaviour

- A child's developmental and behavioural milestones are influenced by their biology and genetics as well as their environment, and the adults who care for them
- Children's experience in their family and culture influences their behaviour
- We can coach and support parents to shape their child's behavior and self-efficacy

Other resources

- Books: https://www.apa.org/pubs/magination/browse?query=subject

- Attachment:
- https://attachmentnetwork.ca
- https://aulneau.com
- https://newdirections.mb.ca

- Anxiety:
- https://adam.mb.ca/programs/coaching-confidence

Thank you

https://www.friendshipcircle.org/blog/2017/08/07/on-the-importance-of-joy-for-children-with-special-needs/