

# Social and Emotional Development in Young Children

## The CSEFEL Pyramid Model



### INTENSIVE INTERVENTION

**Intervention:** help for the few children who need professional support to help them develop self-regulating and social skills

### TARGETED SOCIAL EMOTIONAL SUPPORTS

**Prevention:** help for the children who need detailed instruction to help them develop self-regulating and social skills

### HIGH QUALITY SUPPORTIVE ENVIRONMENTS NURTURING AND RESPONSIVE RELATIONSHIPS

**Promotion:** address the needs for most children as they develop social and emotional skills. Therefore it is just above the base of the pyramid

### EFFECTIVE WORKFORCE

**Base:** the Foundation of the Support System

### Pyramid base

#### Early Childhood Personnel and Families Use Effective Practices

When child care providers use the strategies and techniques learned in the CSEFEL training, they build a solid foundation for children's social and emotional development.

### Promotion

Children need nurturing relationships and high quality environments to thrive.

#### Nurturing and Responsive Relationships

Relationships are at the heart of healthy development. Child care providers create nurturing relationships with children when they:

- establish a trusting relationship by actively supporting children's explorations
- incorporate lessons in children's play activities
- respond to children's words and infants' babbling
- promote all children's early attempts to talk
- encourage children as they learn new skills
- build trusting relationships with families

#### High Quality Environments

Environments that are supportive and nurturing are the next level of support. High quality environments include:

- schedules and transitions that are predictable and supportive
- positive and clear rules and expectations
- acceptance of all children
- curricula that foster all areas of child development
- effective teaching strategies that are developmentally appropriate and culturally sensitive
- promotion of active learning and appropriate behavior
- supportive guiding and teaching of social skills
- engaging activities that help children learn

### Prevention

Strategies and activities can be used to teach children how to self-regulate and learn social skills. This helps prevent children from turning to challenging behaviors.

#### Targeted Social and Emotional Supports

All young children depend on adults to teach them how to express their feelings and regulate their emotions. Some children may need added support in these common problem areas:

- identifying and expressing emotions
- regulating emotions and behaviors
- solving social problems
- knowing how to begin and maintain social interactions
- developing strategies for handling disappointment and anger
- building friendship skills

### Interventions

Most children do well when the promotion, the blue levels, and prevention, the green level, of the pyramid are in place. A small number of children continue to have behavior issues.

#### Interventions Designed For an Individual Child

Some children's behavior will continue to be challenging. Assessment will identify what kinds of support each individual child needs. A family member, the child's teacher, and other providers will work as a team to develop an intervention, or behavior support plan. The plan will focus on helping the child build needed skills.

Children develop social and emotional skills with guidance from the adults who care for them. Warm responsive relationships with caregivers provide a safe base. Developing these relationships with children who have challenging behaviors requires skill and patience. Children are more likely to listen and learn needed skills from adults they trust.

## Promoting Social and Emotional Health: 5 Part Series

### PART 1

## A Trained Child Care Work Force – Will's Story

The CSEFEL pyramid model rests on the solid foundation of a trained workforce. CSEFEL trained early childhood educators are the key ingredient for success. With understanding, early childhood educators see why and how to create supportive environments. They learn ways to strengthen their relationships with young children as well as strategies for helping children build social and emotional skills. They become ready and able to help children build the confidence they need to explore and learn about themselves and others.

Will attends childcare in NC. Until recently, he had been having a hard time getting along with his classmates and teachers. Many things upset him. He did not like it when a teacher tried to redirect him in his activities. It made him mad to find a child using the computer - his favorite activity! Will would kick, and push the child away. When children joined him in play, they had to do it his way or he would yell, hit, throw toys and knock over chairs.

Will also had a hard time focusing his attention. He was disruptive during group activities. When teachers tried to engage him, Will would hit and spit at them. Afterwards, he had a hard time settling down.

Will's teachers called in their regional behavior specialist. The behavior specialist's first recommendation was that Will be evaluated by his pediatrician. The evaluation resulted in a diagnosis of attention deficit hyperactivity disorder (ADHD). This explained at least some of the issues underlying his challenging behaviors. Children with ADHD often need extra support in learning to focus their attention, to regulate their emotions and to manage their behaviors. To keep him from being singled out, a plan was developed that would help Will and support all the children.

The behavior specialist taught the child care providers how to recognize early signs that a child is becoming upset. She taught them to use soothing sensory activities to help the child settle down. Then the behavior specialist introduced the "turtle technique".

### ***Tucker Turtle Takes Time to Tuck and Think.***

*Tucker used to get mad and hit and yell at his friends, but then he learned to think like a turtle. When he was upset, he would STOP himself from using his hands and voice. He would tuck into his shell, take three deep breathes to calm down, and then think of a better way to solve the problem.*



After the children learned the turtle technique, they would say, "Think like a turtle!" to the child who was upset. The children kept a record of who used the technique, how often, and why. Will was often the record keeper. Soon the board was full of the names of children who had needed to "tuck in". Each day at circle time, they talked about what caused the problem and what they did to make it better. It was a success and Will became a star! Everyone's attitude about Will changed. Will and his classmates were developing social and emotional competence, skills they will use for the rest of their lives. The teachers were learning effective techniques for addressing challenging behaviors and supporting social and emotional health, which they can use throughout their careers.

#### **Looking for Training?**

Brenda Dennis: [dennis@mail.fpg.unc.edu](mailto:dennis@mail.fpg.unc.edu)

Margaret Mobley: [mam@mebtel.net](mailto:mam@mebtel.net) (Healthy Social Behavior Specialist)

Lanier DeGrella: [lanierd@childcareservices.org](mailto:lanierd@childcareservices.org) (Infant Toddler Specialist)

#### **Online Resources**

CSEFEL's teacher resources: [www.vanderbilt.edu/csefel/](http://www.vanderbilt.edu/csefel/)

TACSEI (Technical Assistance Center on Social Emotional Intervention for Young Children): [www.challengingbehavior.org](http://www.challengingbehavior.org)

## Promoting Social and Emotional Health: 5 Part Series

### PART 2

## *Building Nurturing and Responsive Relationships*

Positive, supportive relationships between caregivers, the children and their families, and the staff, are essential for healthy social and emotional development. Within them, children feel secure. They feel valued. Adults who take time to get to know the children have more influence on their behavior. Children want to get positive attention from these trusted adults. They pay attention to them and want to please them. In addition, with the support of secure relationships, children develop confidence and a positive self-concept. When children feel good about themselves, they are less likely to engage in challenging behaviors. Providers can take time to build healthy relationships with the children. This prevents many common behavior problems. It also promotes healthy social and emotional

A behavior specialist in North Carolina recently received a desperate call from a child care provider who was at her wits ends. She loved children; being a teacher was all she had ever wanted to do, but she did not know what to do about the children with challenging behaviors. Her classroom had spun out of control. A job she once longed for was now a job she was ready to quit!

Fortunately she did not quit. Instead, she called the local behavior specialist. The specialist knew that the provider's first step was to build relationships with the children and their families. This would help to resolve some of the behavior issues. It might also renew the provider's love of teaching. She and the provider looked at the materials on building relationships from the Center for Social and Emotional Foundations for Early Learning. They decided to send home the form, "*My Teacher Wants to Know*". Parents were very happy to fill out the form and share information about their children, including what they liked and disliked. With positive, open communication between the teacher and parents, they were able to talk about the children. At drop off and pick up, parents began volunteering information about the child's sleep and their plans for the evening. The provider felt more comfortable with the parents. She gained knowledge about the children, which guided her decisions in how to meet their needs.



The next step was to identify the children with the most difficult behaviors. The behavior specialist advised the caregiver to keep a journal, with each page divided into two columns. In the first column, the provider wrote down all the negative thoughts she had about

individual children. Next, she reframed the negative statements into positive ones. Instead of saying, "He never does what I ask him to do", she said, "He does not understand my expectations." Then, the provider wrote down ten positive statements about each child. As she worked through this process, she started to change the way she thought about the children. This allowed her to change the way she taught them. Instead of telling them what they could not do, she let the children know what she expected to see in the classroom.

Some of the children had more serious behavior problems. They needed more attention. The provider scheduled five minutes of individual time for each of these children. During this time, each child received her full attention. She followed their lead in play and in discussions. As she re-established positive relationships with them, the children's challenging behaviors decreased. Now she understood that her negative thoughts had been breaking down positive relationships with the children. With renewed relationships, the provider had the tools she needed to understand and to help the children.

#### References for Part 3:

Alter P., Conroy M. *Preventing Challenging Behavior in Young Children: Effective Practices*. Retrieved September, 2009 from [www.challengingbehavior.org/do/resources/documents/rph\\_preventing\\_challenging\\_behavior.pdf](http://www.challengingbehavior.org/do/resources/documents/rph_preventing_challenging_behavior.pdf)

Bovey T., Strain P. *Using Environmental Strategies to Promote Positive Social Interactions*. Retrieved September 3, 2009 from [www.vanderbilt.edu/csefel/briefs/wwb6.pdf](http://www.vanderbilt.edu/csefel/briefs/wwb6.pdf)

## Promoting Social and Emotional Health: 5 Part Series

### PART 3

### *Promoting High Quality Supportive Environments – A Teacher’s Tale*

The environments children find themselves in can trigger challenging behaviors or positive behaviors. Creating an environment that promotes positive behavior and fosters healthy social interactions takes organization and planning. Children require less adult supervision when their environments are developmentally appropriate and supportive. Providers are free to nurture and interact with the children. Children can concentrate on making friends and learning. Everyone has a better day!

A teacher in a three-star center was having problems with her class. Although she was experienced and had her K-3 certification, she was unable to keep the children in her class from going “bonkers”! She was simply beside herself and called the local behavior specialist for help.

The behavior specialist observed in the classroom. She noticed many environmental issues that, if changed, would better support the children. Furniture placement was an issue; a wide area of floor space had become a racetrack inviting children to run the length of the room. Murals of monkeys tussling over bananas, swinging through trees, and jumping and doing flips covered the walls. Their performance was a perfect demonstration of every type of large motor activity. As she watched, she realized the children were perfectly modeling the monkeys’ antics. The room had recently been the gym. Clearly, the children thought it still was. Now the children’s behavior made sense.

The behavior specialist recommended some changes to the environment. The child care provider and behavior specialist talked to the children about changing the room. They created social stories about changing classrooms and discussed cooperation. The staff covered the murals with paper and used it to display the children’s art. They created a cozy area, posted a visual schedule of daily activities, and arranged the furniture to eliminate the wide-open floor space.

A little ceremony marked the official transition of the space from a gym to their classroom. Tucker Turtle and the Solution Kit were introduced to help the children learn to cooperate. The provider used materials from the CSEFEL “Teachers Tool Kit” to make other changes in the classroom environment.

With provider reinforcement, the classroom atmosphere quickly changed. At their last consultation, the provider told the behavior specialist that she had been ready to leave teaching. With her new skills and tools, the provider is now more confident in her ability to solve problems and create positive environments for children. In addition, the children are happier and calmer!

#### *Tips for Setting up a High Quality, Supportive Environment*

##### **Physical environment**

- arrange classrooms and outdoor environment so caregivers can visually supervise children
- limit the number of children in learning centers
- control noise levels indoors
- keep room temperature comfortable
- dress appropriately for the weather
- provide appropriate lighting
- arrange toys and materials to invite children to play with them
- organize materials for independent use

##### **Schedules**

- maintain a predictable, consistent daily schedule, with room for flexibility
- post pictures of the schedule
- offer choices within the schedule
- offer large and small group activities

##### **Rituals and Routines for younger children**

- provide structure to routines
- ease transitions by using rituals
- foster community and communication through rhymes, and games

##### **Rules for preschool children**

- decide on rules with the children
- start with 1 or 2 rules
- use positive feedback
- repeat rules until the children understand and follow them

##### **Promote social interactions**

- pair a child who is learning social skills with one who has strong social skills
- encourage interactions by limiting the number of centers
- offer group activities that require cooperation, such as
  - creating a mural on a large sheet of paper
  - acting out a play
  - building a zoo with blocks and animals

##### **Keep children engaged**

- rotate centers and materials to stimulate interest
- provide toys and materials that support children’s interests



## Promoting Social and Emotional Health: 5 Part Series

### PART 4

## Targeted Social Emotional Supports – Problem Solving

Sometimes children need to be taught specific social and emotional skills. Supportive relationships and environments provide a safe place to practice and learn these skills. With adult guidance and instruction children can learn how to name and express their emotions. They can learn skills that will help them play cooperatively with other children and how to solve social problems that arise. Some children readily learn to ride a bike, draw, or get along with people. Others have difficulty. Systematic and focused instruction is especially helpful for children who have a difficult time learning a new skill, including a social skill. Social skills include:

- identifying and expressing emotions
- self-regulation
- social-problem solving
- initiating and maintaining interactions
- cooperative responding
- ways for handling disappointment and anger
- friendship skills

Early childhood teachers can draw from a wide variety of methods to teach social skills. Adults can model desired behavior or use a puppet to model the behavior. Songs, finger plays, and flannel board activities help some children learn and practice skills. Games or children's literature may be helpful to other children. The CSEFEL website, [www.vanderbilt.edu/csefel/](http://www.vanderbilt.edu/csefel/), offers suggestions of practical strategies to use in the classroom. They offer downloadable materials in English and Spanish. View their video clips to see how classroom teachers use these materials.

Miss Green, a first year teacher working with the behavior specialist, had been working through the CSEFEL Inventory of Practices to make her classroom a supportive environment. She felt confident that her classroom was setup to promote positive behavior. She dedicated specific time in her day to develop positive relationships with all of her students, even the couple of children who seemed to always be breaking the rules.

Still there seemed to be one time of the day that was particularly chaotic for all of her children - outside play time. All twelve of her three year olds wanted to ride trikes, but there were only six trikes available. Every day it seemed there were fights and crying over the trikes. To purchase six more trikes was too costly and not in the budget. She had to figure out what to do. Saying "we all share at school" just was not enough.

The behavior specialist and Miss Green discussed some possible ways she could teach appropriate expectations about outside play and the use of the trikes. The



behavior specialist helped Miss Green write a social story book. It was customized with real pictures of the school and the trikes and it talked about the issue.

The book simply stated that once there was a school where everyone cried and fought at outside time because of the trikes. Crying and fighting made people unhappy or mad. The class had to work together to come up with a solution to the problem. The book then stated how a waiting list board was made and how each child would be assured a turn on the trikes. Miss Green read the book everyday when she first introduced it. She made it accessible to the children by placing it in the book area.

Using name cards, trike pictures, a timer, and a board the class created their waiting list board. After a week of practice, the children were eager to draw their card and place it on the board. Those who had to wait were calmer, knowing they would get a turn.

Later in the month there was a loud dispute over the computer. Miss Green said, "It sounds like we have a problem. What can we do to fix it?" One boy suggested, "Hey maybe we can write a book and make a board." Miss Green smiled. Her children were becoming real problem solvers. She could not wait to share this with the behavior specialist.

## Promoting Social and Emotional Health: 5 Part Series

### PART 5

### *Intensive Individualized Intervention – Ryan’s Story*

A small number of children may continue to have challenging behavior after the other levels of the pyramid are in place in a classroom. These children often do not know how to express their strong feelings or needs in an appropriate way. They may need an intensive individualized intervention. By observing the child, caregivers can identify the meaning of the challenging behavior. They can determine what skills the child may need to develop. A team of adults who interact with the child can put together a plan to help the child, based on their observations. This plan may include:

- strategies to teach the child social and emotional skills
- ways to arrange the environment and schedule to support the child
- an assessment of the child by a mental health professional

The team approach offers the child consistent support at child care and at home. The goal of the intervention is to help the child be successful in expressing and managing difficult feelings.

Four year old Ryan’s behavior was changing. His teachers and his parents noticed the difference in him. Ryan’s parents were involved in a heated divorce. The battle between the parents was dividing the family. Ryan has one older brother and two older step-sisters. Although Mom and Dad professed they did not argue in front of Ryan, they agreed there had been a definite change in his behavior since the problems began at home. His teachers noticed that Ryan might be calm one minute and very upset the next. Once he lost control of his behavior, Ryan and those around him suffered.

For several months the teachers went to great lengths to avoid upsetting Ryan. Eventually the behavior specialist was asked to observe in the classroom and work with the teachers. Together they examined the teacher/child relationship and worked to strengthen it. They looked carefully at the environment and reduced potential conflicts. The teachers learned how to help



the children identify their feelings and emotions and express them appropriately. Still Ryan continued to use challenging behaviors.

With Ryan’s needs in mind, the teachers and the behavior specialist worked with the children on impulse control and anger management. Though these steps were helpful, Ryan continued to have very rough periods in his day. His behavior became disruptive and frightened the children. The teachers were concerned about keeping the other children safe. The teachers and the behavior specialist decided that Ryan needed an intensive individualized intervention.

A team consisting of parents, co-teachers, program director, and the behavior specialist created a behavior support plan. Everyone agreed to follow consistently. The team met regularly to compare notes. Each team member shared information about triggers and changes in Ryan’s behavior. They discussed what was working and what else they might do to help Ryan. Each member of the team understood the need to for confidentiality. Over time they grew to trust each other. Ryan’s parents set aside their difficulties to work on Ryan’s behalf. Some essential information was revealed during the meetings. Ryan had witnessed some frightening violence. This helped explain some of his outbursts. After several months of everyone working together, Ryan’s world became a web of devoted and caring adults. Each level of the pyramid was in place and working in Ryan’s favor, enabling Ryan to make lasting progress. He regained control of his impulses and learned to manage his anger. Over time his anger lessened. The team’s efforts to strengthen Ryan’s social and emotional skills met with success.



If children do not know how to wash their hands, we teach them.

If children do not know how to say the alphabet, we teach them.

If children do not know how to cross the street, we teach them.

If children do not know how to behave, we....

teach them?.... punish them?

Why is it so hard to finish that last sentence as

automatically as it is for the others?

*Adapted from Tom Herner (NASDE President) Counterpoint 1998, p.2*