

Behaviors in Young Children

Behavior difficulties are quite common in young children^{1,2}. Some common concerns include not listening or defiance to parental requests (no!), taking toys from others (mine!), hitting or biting, difficulty expressing anger appropriately (e.g., tantrums), and high activity levels. These behaviors not only can be typical, but can also be developmentally appropriate as they lay the groundwork for young children to develop skills of independence, negotiation, and social skills. Appropriate feedback from you in response to their limit testing helps them learn these skills!

Research shows that only about 5% of preschool-age boys are described as "very difficult to manage" by parents³ and approximately only 50% of preschoolers with these difficult behaviors will continue to show attention and/or behavior problems as they grow and develop⁴. Behaviors need to be present for at least 6 months and across setting (at home, at school) before a diagnosis of a behavior problem can be made.

Transitions and stressful events can make children's behavior worse since young children may not have the skills to verbally express their feelings and therefore tend to "show" their feelings through behaviors. The good news is that consistent, effective parenting skills can help protect against your child's behaviors getting worse. In fact, the relationship parents have with their child is really important.

If you are concerned about your child's behavior or attention, please consult a professional regarding your concerns. Research shows that approximately 60% of children who show high rates of inattentive and/or impulsive behaviors as a preschooler continue with difficulties in these areas in their school-aged years.

If you are finding it stressful to manage your child's behaviors or feel like the parenting techniques you are using are not working with your child, you are not alone. A psychologist may be able to help determine the parenting techniques that best fit your child's learning style. Research shows that children who receive early interventions tend to experience better outcomes⁵.

You can help! Research shows that spending quality one-on-one time between a parent and child for 10 to 15 minutes a day can lead to improved behavior in children⁶. The purpose of this time is for you to enjoy hanging out with your child, and for your child to receive lots of positive attention for engaging in appropriate behaviors. During this time:

DO: Play an activity with your child that does not have any rules so that you do not need to provide corrective feedback ("No", "Don't do that", "Stop it", "That was wrong"). Coloring, drawing, Legos, farm animals, blocks, dolls, and playdough are all good choices!

DO: Provide genuine praise. This is your opportunity to let your child know they are sitting appropriately, are doing a good job sharing, and that you are enjoying spending time with them at times when you really mean it.

DO: Let them lead the activity! If your child wants to color a butterfly neon green, provide them the support to do that. If they want you to color with them or on a separate sheet of paper, let them invite you to do so.

DO: Have fun with your child!

DON'T: Ask your child questions. This takes the control away from them.

DON'T: Engage in this time when you are distracted or cannot otherwise fully attend to your child.

¹ Campbell, S.B. (1990). *Behavior problems in preschool children: Clinical and developmental issues*. New York: Guilford Press.

² Koot, H.M., Van Den Oord, E. J., Verhulst, F. C., & Boomsma, D.I. (1997). Behavioral and emotional problems in young preschoolers: Cross-cultural testing of the validity of the Child Behavior Checklist/2-3. *Journal of Abnormal Child Psychology*, 25, 183-196.

³ McGee, R., Partridge, F., Williams, S., & Silva, P. A. (1991). A twelve-year follow-up of preschool hyperactive children. *Journal of the American Academy of Child & Adolescent Psychiatry*, 30(2), 224-232.

⁴ Moffitt, T. E., Caspi, A., Dickson, N., Silva, P., & Stanton, W. (1996). Childhood-onset versus adolescent-onset antisocial conduct problems in males: Natural history from ages 3 to 18 years. *Development and psychopathology*, 8(2), 399-424.

⁵ Conduct Problems Prevention Research Group. (1992). A developmental and clinical model for the prevention of conduct disorders: The FAST Track Program. *Development and Psychopathology*, 4, 509-527.

⁶ Williford, A.P., Graves, K.N., Shelton, T.L., & Woods, J.E. (2009). Contextual risk and parental attributions of children's behavior as factors that influence the acceptability of empirically supported treatments. *Vulnerable Children and Youth Studies*, 4(3), 226-237.