2005

Managing Behaviours of Young Children

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Publication Details
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Young children with disabilities may present challenging behaviours at home and in preschool settings for any number of reasons.

Some lack communication skills needed to express themselves. Others have not experienced group settings before and are used to having their needs met immediately. Some children respond to crowded settings with aggression or withdrawal.

Health factors such as illness and chronic conditions and hunger and sleepiness can also contribute to behavioural difficulties. Caregivers must deal with these problem behaviours in young children.

Why is it important to deal with challenging behaviours?

Caregivers are in a unique position to assist young children in learning appropriate social behaviours and in controlling aggression and other anti-social behaviour.

If serious behaviour problems are not addressed early, long-lasting conduct problems may result. According to Walker (2002), “children do not grow out of behaviour problems – they grow into them”.

We know that appropriate social behaviours are associated with better performance at school, teachers feeling more positive about children and less rejection from normally developing children (peers).

Positive peer relationships are seen as so important that Guralnick (1999) feels that peer-related social competence should be the goal of early childhood intervention programs.

What social skills are valued in young children?

These may vary but most parents, teachers and caregivers list the following:

- empathy-recognition of the feelings of others,
- being able to work in groups,
- delayed gratification for example waiting in lines,
- turn-taking,
- being able to give and respond to a greeting, and
- accepting other’s decisions and suggestions.

What can be done to help children, teachers and parents?

There are many strategies that can be used by teachers, parents and caregivers if children are exhibiting challenging behaviours.

1) Peer-mediated interventions

This technique is used in preschool settings where a socially competent peer implements the intervention. The teacher provides instructions to the socially competent child, prompts them to go and, for example, share a toy with the child and then reinforces the socially competent child for doing this.

2) Introduce the problem solving approach

Teaching children how to go about solving their own problems instead of telling them what they need to do helps children learn to manage themselves (Hune and Nelson, 2002). One system for problem solving involves the following steps:

- stop,
- look,
- think, and
- act.
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**Early Childhood Services** for children from birth to six years.
- Early childhood intervention and support for very young children.
- An inclusive preschool for children with and without special needs.
- An assessment and consultancy service for families who are concerned about their young child’s development.
- Specialist early childhood teaching and therapy.

**School Age Services** for children from Kindergarten to Year 12 who have low support needs.
- Comprehensive assessments.
- Small group tuition and therapy.
- Occupational and speech therapy programs combining specialist education services and therapy.
- Outreach programs.

- The Ronald McDonald Learning Program for seriously ill children and the Reading for Life Program for children falling behind in their reading.

**Family Services** helping and supporting families and health professionals.
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For example, we can see two children arguing over who is going to be the mum in the home centre and we know that argument is likely to turn into something more serious. Caregivers can use this technique to encourage children to problem-solve this situation.

3) **Teach children to negotiate**

Often young children want the same toy or activity. This can result in tears or aggression. We can teach children to ask for what they want and how to share and take turns.

4) **Help children to understand others’ points of view**

Talk about your own feelings, the feelings of children when things happen and the feelings of characters in books at home and in group story reading.

5) **Preventative Strategies**

**Grandma’s Rule**

A common preventative strategy is Grandma’s Rule. This is, if you eat your vegetables you will get your dessert. For example, you tell a child he/she will be able to go outside and ride his/her bike after he/she has picked up the blocks.

**Delay Cues**

If a child is tired of sitting still or tired of shopping and you can see that they are near their limit, you can say, “Just one more shop and we can have a ride on the aeroplane”. Or a teacher can say “just one more minute and then you can play with what you want”. This helps a child develop self-control and is certainly better than having to punish a child or have a child who throws a tantrum in a shopping centre.

**Giving children choices**

Some children show challenging behaviour when they are asked to do something by a parent or teacher. If you can offer a choice then the child gains a sense of control and challenging behaviour can be avoided. Caregivers should offer only a few choices. Examples of effective choices are the following.

- Do you want to take your nap in your cot or on the floor?
- Do you want milk or juice to drink?

**Parent Involvement**

When a family and pre-school teachers work together to help a child with challenging behaviour then the child is more likely to use the skill outside the preschool setting. Consistency between all adults involved with the child is absolutely essential.

**Conclusion**

Teachers, parents and caregivers are in a unique position to promote a foundation of appropriate social behaviour that will help young children as they develop and mature.

If all adults who are involved with these children show consistency in how they respond then the children are more likely to use the skills that they learn in their homes, preschools and in the community.

*Dr. Rose Dixon is a Lecturer in Special Education at the Faculty of Education, University of Wollongong. She has a wide range of experience in teaching young children with disabilities in Support Units and as an Itinerant teacher of the Deaf for the NSW Department of Education and Training. She has published papers relating to the development of social skills in young children, as well as the development of self-concept. She has also published chapters relating to Quality Teaching and Special Education.*

**References**


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