

Feeding & Sleeping Challenges

Food insecurity

- Social story with mealtimes
- Access to non-preferred healthy snacks
- Transitional object after mealtime

Sleep

- Maintain consistent and soothing bedtime routine
- No screen time at least 1 hour before bedtime
- Guided muscle relaxation / imagery before bed
- Bath with lavender and chamomile

Supporting Emotional Regulation

- Model use of coping skills (e.g., lion breath, squeeze and relax)
- Affect narration – build emotional vocabulary (“you’re showing me you feel happy”)
 - Use of social stories
 - Use of play to prepare for new experience or process difficult experience
 - Validate child’s subjective fears
- Grounding (through touch, drawing attention to breath, identifying what they can see, smell, feel, hear, etc.)



Challenging Behaviors

- Drug / alcohol exposure can exacerbate normal behavioral challenges
- An escalated adult CANNOT de-escalate an escalated child
- All behavior has an **underlying need**
 - Meet the need, curb the expression of the behavior
 - It is the adult's job to teach alternative ways to meet that need
- **Do not make or take the child's behavior personally**
- Disempower a behavior by not reacting negatively
- Amidst a challenging interaction with a child, gauge how you feel. This is often a window into the child's emotional experience

Limit Testing



- **All children** this age engage in limit testing because they are:
 - Figuring out boundaries and limits and cause and effect
 - Overwhelmed by own desires and emotions
 - Severely lacking in impulse control
 - Asserting independence (e.g., “I do it myself”)
 - Increased exploration of environment
 - Experiencing self-conscious emotions (jealousy, embarrassment)
 - Poor interoception – struggle to recognize their own hunger, fatigue, etc.



Proactive Strategies

- Clearly state expectations (e.g., we hold hands in the parking lot)
 - Use social stories / visual cues (e.g., stop sign on all doors)
- Anticipate needs
 - Transitional prompts (e.g., we are leaving the park in 5 minutes, 1 minute)
 - Transitional objects (e.g., stuffed animal, blanket)
 - Physical energy release, sensory play, or focused attention after stressful events

A-C-T Strategy

Acknowledge

- Acknowledge the emotion / desire
 - I understand you really want to keep playing blocks. You are having so much fun! You feel sad it is time to clean up.

Communicate

- Calmly communicate the limit
 - Now it's time for dinner and we clean up our toys before dinner.

Teach

- Teach an alternative behavior or provide targeted choices
 - Do you want to have a race to clean up the blocks or play hungry block box?

Care Strategies:

- Create new associations through patterned, repetitive experience
 - Importance of consistent routine
- Consider and attend to emotional need underlying behavior
- Use positively stated language to minimize power struggles
- HALT: Hungry, Angry, Lonely, or Tired
 - Vulnerable to making poor choices



Move it to Lose it

Provide regular opportunities for physical play and sensory play

Kinetic sand, water play, finger painting with pudding, etc.



Regulating the stress response system /
vagus nerve

Focus on gut health (e.g., yogurt with probiotic)

Opportunities to laugh out loud

Shake / Dance / Stomp it out

Humming and singing



The Power of Play



- Play provides:
 - Role experimentation
 - Cause and effect
 - Coping and preparation (e.g., play around upcoming Dr visit)
 - Teaches social & problem-solving skills
- Brain stem activities – drumming, rocking, bouncy horse, hammock
- Increases sense of “felt safety”
- Forms connections – insight into child’s inner world

Supporting Attachment Development

- Play is primary connection time for this age group (even 5 minutes of uninterrupted child-led play can have a profound impact)
- Child will explore more in this phase but still important to be emotionally available for connection (secure base behavior)
- Promote child's sense of felt safety:
 - Anticipatory guidance - talk child through what comes next
 - Asking questions about their needs and reactions / narrating if needed
- Maximize shared positive affect (e.g., activities that inspire joy for both)
- Validate child's subjective fears
- Engage child in basic exploration of emotional need underlying behavior

Care Strategies for Toddler & Preschool Phase:

Attend

Attend to low-level behavioral cues

- E.g., body tension, startle response, frustration

Provide

Provide opportunity for developmental milestone practice

- When child is practicing new skill in undesired way, offer choices between other ways to practice skill

Prepare

Children who have been substance exposed can react very strongly to novelty, transitions, and changes in environment. Provide anticipatory guidance.

References

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Online Resources

- Mother & Baby Substance Exposure Initiative (<https://www.cmqcc.org/content/substance-exposure>)
- <https://www.cmqcc.org/content/substance-exposure>
- Effects of alcohol exposure <https://www.cdc.gov/ncbddd/fasd/alcohol-use.html>
- <https://www.urmc.rochester.edu/encyclopedia/content.aspx?ContentTypeID=90&ContentID=P02387>
- https://www.aacap.org/AACAP/Families_and_Youth/Facts_for_Families/FFF-Guide/Drinking-Alcohol-in-Pregnancy-Fetal-Alcohol-Effects-093.aspx
- Data on San Diego County
https://www.sandiegocounty.gov/content/sdc/hhsa/programs/cs/child_welfare_services/previous-cws-dashboards.html
- Happiest Baby (5 S's) <https://www.happiestbaby.com/blogs/baby/the-5-s-s-for-soothing-babies>

Questions?



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