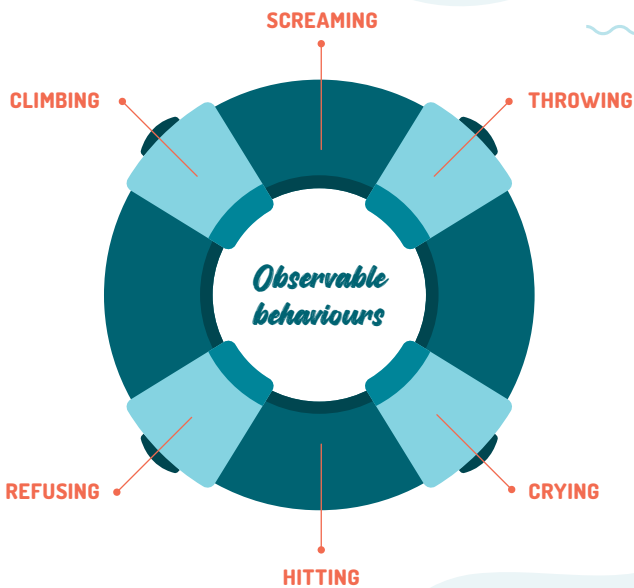


Understanding children's emotions

One way to illustrate the role of a parent is as a “captain of a ship”, for example, he/she supervises activities as well as ensure safety or comfort and “good” behaviour. As the parent navigates the boat, he or she may encounter some obstacles, including an iceberg, which is a block of ice on the water that is not always visible on the surface.



Parenting a child is similar; the focus is often on observable behaviours, such as screaming, throwing, crying, hitting, refusing, climbing, etc. However, **like an iceberg, there is a much larger part hidden beneath the surface that motivates these behaviours.**

This motivation can be understood to communicate different needs such as:

RECREATION

REST

CREATIVITY

UNDERSTANDING

LOVE

SUSTENANCE

SAFETY



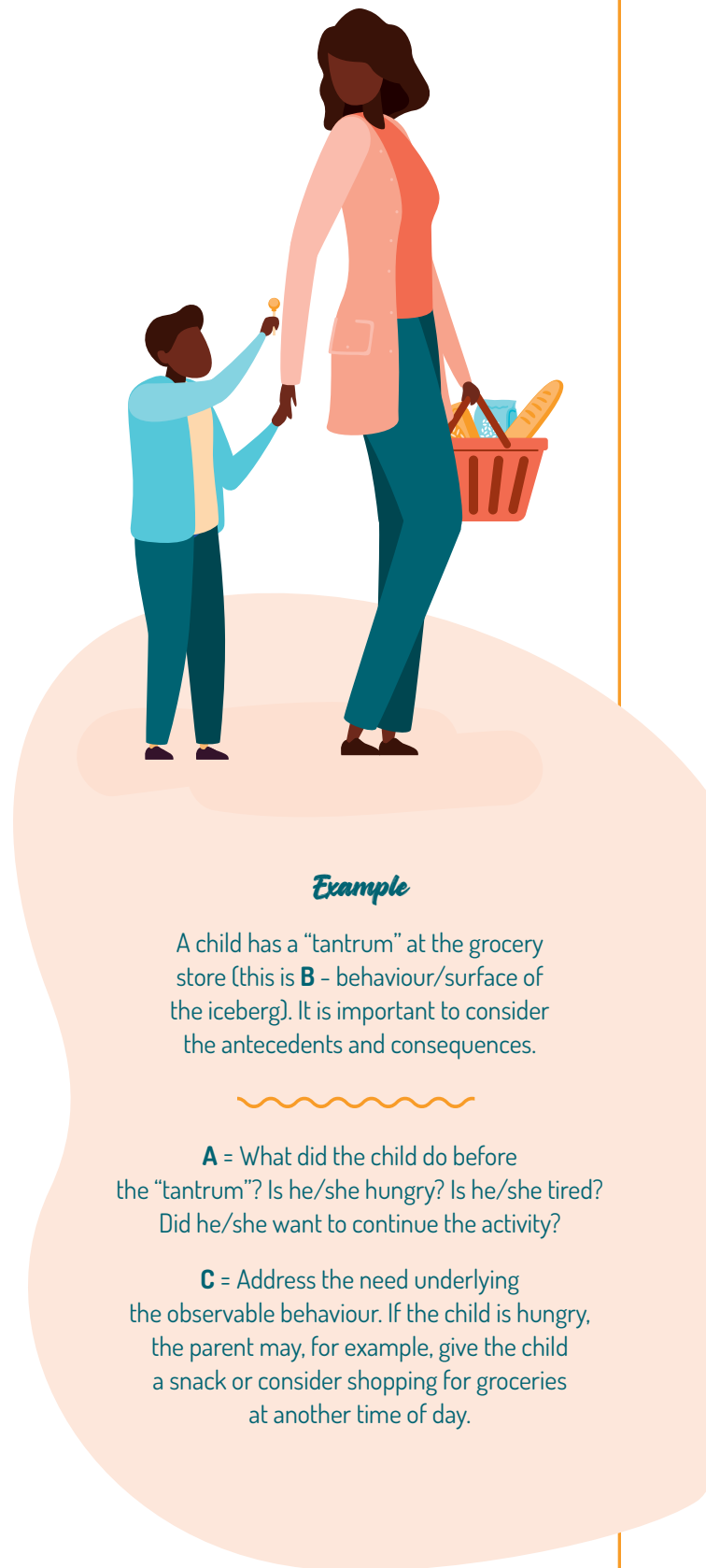
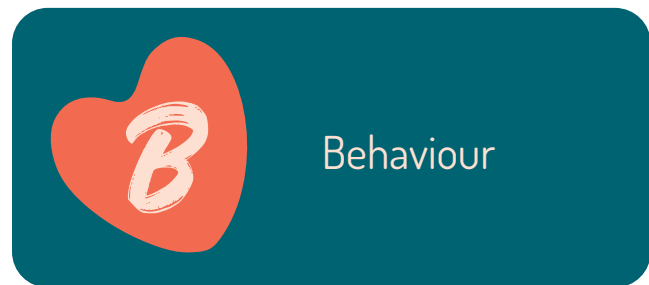
Considering that children do not always communicate their needs directly, **each behaviour is then a way to communicate them.** It becomes important for parents to be able to “dive” below the surface to understand and respond directly to the child’s need.



The ABC model

The ABC model can help to understand and address behaviours.

A represents the **antecedents** (i.e., what happens before the behaviour). **B** is the **observable behaviour**. **C** represents the **consequences** and what happens after the behaviour. Consequences can be **positive** (i.e., they increase the likelihood that the child will repeat the behaviour) or **negative** (i.e., they decrease the likelihood that the child will repeat the behaviour).



Example

A child has a “tantrum” at the grocery store (this is **B** - behaviour/surface of the iceberg). It is important to consider the antecedents and consequences.

A = What did the child do before the “tantrum”? Is he/she hungry? Is he/she tired? Did he/she want to continue the activity?

C = Address the need underlying the observable behaviour. If the child is hungry, the parent may, for example, give the child a snack or consider shopping for groceries at another time of day.

References and Additional Resources

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Emotion Coaching

What is emotion coaching?

Emotion coaching is a process that implies that emotions are normal and natural to the human experience. This technique consists of **listening to an individual's emotions to help regulate them in difficult moments**. When emotion coaching is used consistently with the child, it helps **develop emotional intelligence and improves the parent-child relationship**.



Step 1

Become aware of the child's emotions as well as your own.

A parent needs to be aware of and comfortable with their own emotions and therefore they can identify them when they felt them. It is good for the parent to consider behavioural manifestations for the emotions experienced by the child, for example, throwing an object when angry.

Step 2

Recognize emotion as an opportunity for intimacy and learning.

All emotions should be accepted; they belong to the child's experience and therefore are not a "threat" to the parent's authority. When the child is encouraged to discuss his or her emotions, this is a way to **teach the skills necessary for the child's self-regulation**. This step is a good time for the parent to **name or label** the child's perceived emotion. **Research shows that simply naming the emotion the child is feeling can help reduce its intensity and thus calm the nervous system**. Then, it is important to eventually help the child name his or her own emotions to expand his or her emotional vocabulary. A list of emotions or a chart of emotions can be useful for this purpose.

Fear
Pride
Joy
Aggressiveness
Impatience
Sadness
Frustration
Enthusiasm
Discouragement
Anxiety
Confidence



THE EARS



THE EYES



THE IMAGINATION



THE HEART



Step 3

Listen with empathy, validating the child's emotions.

This is the most important and most difficult step in emotion coaching. Active listening and non-judgment are the skills to be advocated. In a figurative way, it is about using the ears to get information, the eyes to detect physical cues of emotions, the imagination to perceive the situation from the child's point of view, the heart to feel what the child is feeling, and the words to help label the emotions.

This step involves validation of the child's emotional experience. For a parent, it means "stepping into the shoes" of the child and demonstrating their understanding.

Step 4

Meet the need for the emotion.

It is beneficial for the child to relate to the core of their emotion and need.



Anxiety

HELP TO GRADUALLY
COPE WITH THE ANXIETY-
PROVOKING SITUATION
WITH LOVE AND SUPPORT



Fear

PROTECT FROM
REAL DANGER



Anger

HELP DEFINE AND
DEFEND BOUNDARIES



Sadness

RECEIVE A HUG



Parents' expectations of the child according to their cognitive development

For each stage of cognitive development, it is generally expected that the child:



0 to 12 months

Follows fast-moving and falling objects with eyes.



Looks for family members or animals when their names are called.



Associates gestures and sounds with certain things (e.g., he meows at the cat).



1 to 2 years

Knows the function of everyday objects (e.g., fork, brush).



Knows and points to one or a few parts of his/her body.



Pretends with simple, repetitive gestures (e.g., picks up your phone, puts it to his/her ear and says, "Hello").



2 to 3 years old

Plays more and more pretend games with others by reproducing actions from his or her daily life (e.g., feeding a doll).



Incorporates familiar elements into his or her imagination, leading to a desire to role-play (e.g., cashier, parent).





3 to 4 years old

Can remember more than one instruction.



Gradually learns to develop strategies for thinking before doing something (e.g., settling a small conflict).



5 to 6 years old

Maintains attention for 20–30 minutes to complete an activity, and even longer if the activity interests him/her.



Has difficulty dealing with failure and likes to win, even cheating to win or accusing others of cheating.



Likes to be praised by others.



Argues when things don't go his/her way.



7 to 8 years old

Is calmer, more thoughtful, and more attentive.



Better control of thoughts and reactions.



Better detects what the other person is thinking and feeling in social situations. Puts himself/herself in the other person's "shoes", which makes him/her better at resolving conflicts and empathizing.

The examples are not exhaustive. Remember that not all children develop at the same rate in all areas.

References and Additional Resources

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Gavin, M.I. (2022). *Your Child's Development: 2 Years (24 Months)*. KidsHealth. <https://kidshealth.org/en/parents/development-24mos.html>



Step 5

Set boundaries while exploring strategies to solve the problem at hand using the STEPS model.



S - *Say*

Name the problem; it is important to remember that the behaviour is the “problem” being addressed, not the emotion.



T - *Think*

Think about possible solutions including the child by recalling previous successes.



E - *Evaluate*

Evaluate the advantages and inconveniences of each solution using, for example, these questions: Will this solution work? Is this solution safe? How will I feel? How will others feel?



P - *Pick*

Choose a solution and try it.



S - *See*

See if it worked. If not, choose another solution and try it.

References and Additional Resources

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Gottman, J. (1998). *Raising an Emotionally Intelligent Child*. Simon & Schuster.

Siegel, D., & Bryson, T. P. (2012). *The Whole-Brain Child: 12 Revolutionary Strategies to Nurture Your Child's Developing Mind*. Bantam.

Example

A child comes home from school crying because he lost his toy.

Step 1: “I see something is going on.”

Step 2: “You look sad.”

Step 3: “I can see why you feel sad. You loved that toy so much.”

Step 4: “Come here. Let me give you a hug, if you want.”

Step 5: “What do you think we can do now?”



Emotion Regulation

What is emotion regulation?

It is the child's ability to control strong emotions before he/she becomes overwhelmed by them.

Difficulties with emotion regulation can turn frustration into aggressivity, fear into anxiety, and sadness into a depressed mood. It develops during childhood and is an important stage in a child's development.

Between the ages of 2 and 5, a child needs the support of a parent for emotional regulation.



Emotion regulation difficulties can impact:

Family functioning
(e.g., temper tantrums)

Social functioning
(e.g., difficulty making friends)

Academic performance

Long-term mental health

References and Additional Resources

Goulet, A. (2015, October). *How children learn to control their emotions*. Naître et grandir. https://naitreetgrandir.com/fr/etape/1_3_ans/comportement/fiche.aspx?doc=ik-naitre-grandir-enfant-apprendre-maitriser-emotion#:~:text=Accueillez%20son%20%C3%A9motion%20sans%20jugement.demander%20ce%20qui%20se%20passe.

(n. n.). (2022, October 27). *How Can We Help Kids With Self-Regulation?* Child Mind Institute. <https://childmind.org/article/can-help-kids-self-regulation/>



How do you support a child develop emotion regulation skills?

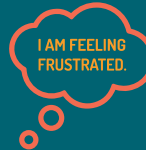
1



Helping the child to recognize their physical sensations.

We have physical sensations in our bodies that help us understand the emotions we are feeling (e.g., rapid heart rate, tense muscles and hot cheeks when frustrated).

2



Naming the emotion.

For example, by saying to the child: "You seem to be feeling frustrated right now?"

3



Helping the child identify the intensity of the emotion.

For example, using the analogy of the thermometer or the volcano.

4



Be a good role model for the child.

The parent can serve as a role model in his or her own emotion regulation to support the child in his or her emotion regulation.



Signs of mental health challenges in young children and children

The Canadian Mental Health Association suggests that “[a]pproximately 1 in 5 children and youth in Ontario has a mental health challenge. About 70% of mental health challenges have their onset in childhood or youth.” Mental health challenges are therefore **common** in children and they can have **long-term effects**. It is therefore important to check for signs that a child’s mental health is weakening so that early interventions can be possible to optimize functioning.



Physical signs

Difficulty sleeping

Changes in eating habits

Stunted growth, lack of weight gain or weight loss

Various aches and pains (stomach, head, nausea...)

Lack of energy

Social signs

Avoids social interactions

Not wanting to spend time with family or friends

Academic signs

Difficulty concentrating

Decrease in school performance

Avoids or miss school

It is important to mention that infants and children have mental health. Clinton et al. (2014) defined it as a:

“developing capacity of the child, from birth to six years of age, to form close and secure adult and peer relationships to experience, manage and express a full range of emotions, and to explore the environment and learn - all in the context of family, community, and culture”.



Mood and behaviour signs



Lots of crying or sadness



Important agitation



Intense irritability



Temper tantrums



Drastic changes in mood and personality



Stop doing enjoyed activities



Constant worrying



Talking about death or suicide
(It is important to intervene quickly by ensuring that the child is safe, to listen and respond empathetically to the emotions being expressed, and to consult a health/mental health professional).

Particularly in infants



Poor sleep patterns



Difficulty with feeding and gastric disturbances



Lack of weight gain or stunted growth



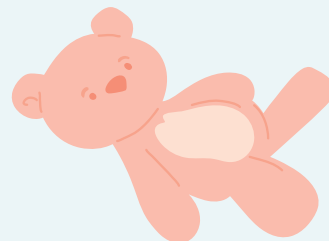
Failure to meet expected developmental milestones



Persistent crying, distress, fear, and anxiety



Important agitation





To note

At all times, **it is important to remember that it is normal for children to change in different ways during their development.**
To determine if an observation is of concern, consider:



The **intensity** of the observed change or sign ;



The **duration** and persistence of the sign or change ;



Whether the change or sign is **inappropriate** for the child's **age and developmental level** ;



Whether the change or sign is disruptive to the child's **normal functioning** or disruptive to his or her life.

References and Additional Resources

Clinton, J., et al. (2014). *Supporting Ontario's youngest minds: Investing in the mental health of children under 6*. Ontario Centre of Excellence for Child and Youth Mental Health. <https://www.cymha.ca/en/projects/early-childhood.aspx>

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Mayo Clinic Staff (2022, March 21). *Mental illness in children: Know the signs*. Mayo Clinic. <https://www.mayoclinic.org/healthy-lifestyle/childrens-health/in-depth/mental-illness-in-children/art-20046577>

Stygar, K., & Zadroga, J. (2021, April 20). *Infants have mental health needs, too*. Mayo Clinic Health System. <https://www.mayoclinichealthsystem.org/hometown-health/speaking-of-health/infants-have-mental-health-needs-too>



Cognitive Development

Cognitive development refers to the **child's ability to think and learn**. It is the development of basic functions such as perceiving information around oneself, using memory, acquiring language, categorizing items, reasoning and problem solving.

How does cognitive development occur?

0 to 2 years

Cognitive development **begins at birth**. In the first month of life, the infants display mostly **reflexive** behaviours. Then, they use their **five senses** and **movements** to understand the world around them. For example, they will tend to touch and bang objects as well as put them in their mouth. They will also use the different sounds they can produce with their voice such as crying, screaming, singing, etc. to see the effect they have on the people around them. The infants do not yet can make representations in their head. The thinking ability is therefore focused on what is happening around them in the **present moment**. Then, they develop more control over their behaviours, and they become capable of having intentions behind their actions, which demonstrates the evolution of their cognitive abilities. As they approach the age of 2, they become able to **imagine the actions they want to take before they do them**.

An important element that develops during this period is the **permanence of object**. The newborns are not aware that objects that are out of sight continue to exist. **For example, if a rattle is hidden under a blanket, the newborns believe that the rattle is not in the environment.**

Over the course of the first two years of life, they will slowly develop the ability to imagine objects in their heads and thus understand that they continue to exist even when they are out of their sight. At this point, if a parent hides a toy under a blanket, the child will understand where the toy is and will be able to retrieve it.



2 to 6 years old

At this stage, children begin to develop their **symbolic thinking**, which is the ability to represent elements mentally. They begin to use **language** more often, allowing them to represent the objects around them in words. Although the children become more and more capable of thinking, their thinking remains very concrete. At this point, the children have difficulty understanding the perspective of others and thinking logically because of the abstract nature of these concepts. At this age, **symbolic play is very important, such as pretend play and dress-up.**



How can we support the children's cognitive development?

The children's cognitive development can be supported by activities that practise basic functions according to their level of development. For example:



READING BOOKS



DOING CRAFTS
WITH ALL KINDS
OF MATERIALS



TALKING ABOUT
EMOTIONS



PLAYING
PRETEND



MEASURING FOOD
WHILE PREPARING
A MEAL



CLASSIFYING
OBJECTS

References and Additional Resources

Bergeron-Gaudin, M-È., & Montminy, N. (2021, August). *3-4 years-old: Cognitive and linguistic development*. Naître et grandir. <https://naitreetgrandir.com/fr/etape/3-5-ans/developpement/3-4-ans/fiche.aspx?doc=ik-naitre-grandir-enfant-3-4-ans-intellectuel#:~:text=Le%20d%C3%A9veloppement%20intellectuel%20de%20l,e%20raisonnement%20et%20la%20planification.>

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Attachment

Attachment or the “**emotional connection**” is a deep emotional bond between a child and a parent (referring to the adult who cares for the child) that can be developed through face-to-face and eye contact. Research shows that children feel the need to be safe and protected. This is particularly important when the baby is upset, sad, or sick. **A secure attachment can develop when a parent responds in a warm and sensitive way to their child’s needs.**



Why is attachment important?

Secure attachment is the **foundation** of children’s development. It allows them to explore the outside world while having a safe place to go. This type of attachment influences their future relationships, including greater ease in learning social skills, as well as their long-term psychological health, including their sense of security, emotion regulation, coping skills and resilience.



Determinants of attachment



Parental response

Many studies demonstrate that the parent's response to the child is the most important determinant of attachment. Parents who are more attentive to their child's needs and who respond to those needs have better attachment.



Attachment across generations

Studies suggest that a parent's own experience with their parent may influence the attachment relationship with their child.



Temperament and attachment

Other studies demonstrate that parents and their child each have their own temperament, and this can influence how they interact with others.

References and Additional Resources

Van IZendoorn, M. (2019, September). *Attachment at an Early Age (0-5) and its Impact on Children's Development*. Encyclopedia on Early Childhood Development. <https://www.child-encyclopedia.com/attachment/according-experts/attachment-early-age-0-5-and-its-impact-childrens-development>

Vasta, R., Younger, J. A., & Adler, S. (2009). *Child psychology (2nd ed.)*. John Wiley & Sons Canada, Ltd.



To promote attachment

Respond to the child's needs.

Respond quickly when the child shows distress.

Interact with the child gently, tenderly, and consistently.

Accept the child as he/she is, with his/her strengths and challenges.

Remember that the child needs a "good" parent, not a "perfect" parent.



The importance of the social environment



Social being

During the first years of life, children learn to form important relationships with the world around them. From birth, the child is a social being who adapts and learns through contact with the people around him/her. **The network of social relationships is essential for the development of the child.** An environment based on trust and benevolence allows the child to grow and learn while feeling well surrounded.

The main social environment is the family home. Parents therefore teach their children early skills, considering that they usually observe them. Research also suggests that the way parents interact influences how children will perceive, interact with and respect others.

Moreover, research demonstrates that a stimulating environment (e.g., educational games) will promote the development of a child's cognitive skills as well as a calm and positive environment will help a child to concentrate better and thus facilitate learning.



Family home



*Daycare, school,
circle of friends...*

Then, the social environment includes the community including daycare, school, circle of friends, etc. During childhood, it will then be largely influenced by the parents' choices. In general, the social environment in which children grow up influences their learning at an early age and has an effect on the way they develop relationships and their quality (e.g., communicating emotions, considering others' perspectives, resolving conflicts, cooperating, etc.).



As children grow, they spend more and more time with their friends and classmates. Research suggests that modelling is an important factor in the relationship between a child and his or her peers. It has been shown that **a child can imitate a peer up to 12 times per hour**. This relationship between the child and his/her peers is therefore inevitable and greatly influences the child's social development.

Research also suggests that having “good” friends acts as a protective factor (i.e., improve child's mental health condition) **for children with at-risk home environments.**



How can I help my child's progress in his or her social environment?



Ask the child to explain an event in front of family members or friends. This will allow the child to remember significant moments while expressing his or her opinion and emotions.

Invite the child to find solutions to conflicts with siblings or friends, which will help develop social skills and confidence.

Encourage the child to play construction games with you, which will help build communication and teamwork skills.

References and Additional Resources

Bouchard, C., & Fréchette, N. (2008). *Le développement global de l'enfant de 0 à 5 ans en contextes éducatifs*. Presse de l'Université du Québec.

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Bukowski, W. M., Motzoi, C., & Meyer, F. (2009). Friendship as process, function, and outcome. Dans K. H. Rubin, W. M. Bukowski et B. Laursen (dir.), *Handbook of peer interactions, relationships, and groups*. New York, NY: The Guilford Press.

Cloutier, R., & Drapeau, S. (2015). *Psychologie de l'adolescence (4e éd.)*. Chenelière Éducation.



Professionals supporting a child's mental health development

THERE ARE MANY PROFESSIONALS WHO CAN SUPPORT CHILDREN'S MENTAL HEALTH DEVELOPMENT.



Family physician

A physician trained to diagnose, treat, among other things, physiological diseases, and disorders as well as prescribe medication. They may refer patients to a mental health professional.



Psychiatrist

A physician trained to diagnose and treat psychiatric disorders as well as prescribe medication.



Pediatrician

A physician who specializes in treating youth and perform medical tests to rule out non-psychiatric causes of symptoms.



Psychologist

Trained to diagnose and treat psychological disorders; they cannot prescribe medication.



Neuropsychologist

A psychologist who specializes in understanding how the brain works.



Social worker

Mental health professional working to improve mental health and well-being.



Psychotherapist

Mental health professional working to improve mental health and well-being.



Occupational therapist

Health professional working to support the child to carry on with any daily activity.



Early Childhood Educator

Professional trained to plan and deliver inclusive play-based learning and care programs for children in order to promote the well-being and holistic development of children.

How can an individual involved in the child's care address concerns with the parent(s)?

There are guidelines that suggest that:



If the individual is not comfortable sharing their observations, it may be natural to mention it to the parent(s) while sharing the emotions about it. For example, "I feel a little nervous about sharing my observations with you."



It is appropriate to then add that the child's well-being is important to you and that is why you want to share your observations. For example, "I care about your child's well-being and I think it is important that I can share my observations with you."



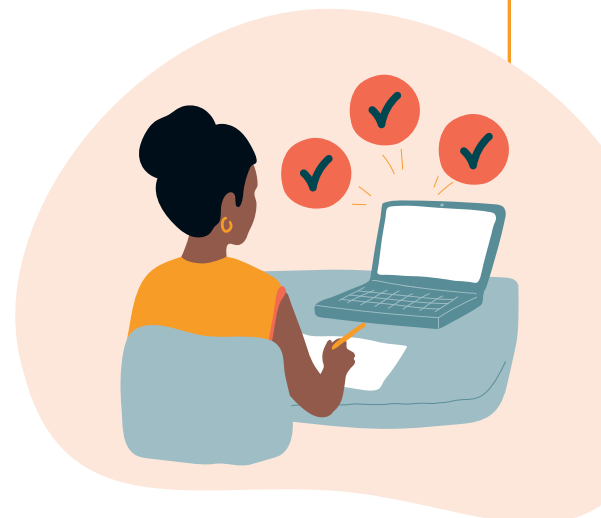
It is important to describe only behaviours that are observable. For example, "I notice that your child does this behaviour [X] when ...".



It is important to also include positive behaviours and especially those that are truly positive. For example, "Your child likes [X] so much; he/she is creative, etc."



It is helpful to refer the parent to appropriate services. This may include services or sharing online resources or books.



Important considerations:



It is important not to assume a diagnosis. Although the child may exhibit behaviours related to certain disorders, the assessment is a rigorous and complex process that involves several steps.



It is important to avoid making judgments. For example, "If the child didn't watch so much television, he or she wouldn't behave this way," etc. It is more important to encourage empathy, to try to understand the parent's experience to better support them.



It is important to avoid comparison. Although a child's developmental trajectory is the same, each child is unique and there may be variability in reaching milestones. It is not helpful for a parent to hear, "I've never seen a child act this way."

Are there key elements that could facilitate the conversation?

Other guidelines suggest:

Practise, if necessary (e.g., role-playing) talking with a colleague who may have the same observations as you.

Ask parents when it would be best for them to have a conversation with you.

Consider that parents may have different perceptions of their child's behaviours based on their values, culture, etc.

Thank parents for collaborating in the discussion.

Recognize that this may be a sensitive and delicate topic.

Speak using the I.



References and Additional Resources

THRC Partners in Professional Excellence. (2022).

Tips for Talking with Parents about Developmental Concerns.

Tips for Talking with Parents.

<https://thrc.ca/birth-2-school-toolkit/identify-concerns-early/conversations-with-parents/tips-for-talking-with-parents/>