

# Toddler Development (13-36 months)



# Toddler Development

Presented by **Square One**, a non-profit school readiness initiative in Virginia Beach, Virginia, that provides professional development training to those who work with young children ages 0-5 and their families.

Square One is a division of the Virginia Business Coalition on Health (VBCH).

Visit [www.SqOne.org](http://www.SqOne.org) and [www.myvbch.org](http://www.myvbch.org)

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\* “Toddler Development” Course developed in 2012-2013.

# Toddler Development

This self-paced online training course is designed to provide information on **Toddler Development (13-36 months)**, in a one hour format, focusing on the development of a toddler-aged child.

It is important for early childhood educators, home visiting agency staff, parents/caregivers and others who work with young children to understand toddler-age development, including developmental milestones.

As you progress through this online course, please note that the **“review” quiz questions** will help you “practice” for the final quiz.

You will be asked to follow the link to take the “Final Quiz” on the last slide in this presentation. A certificate will be sent to you via your email address after receiving an 80% or better score on the quiz.

# Toddler Development

Welcome to “Toddler Development (13-36 mo.)” ...

So, what do you know about toddler-aged children?

What things are challenging  
for you when you work  
with a toddler?



# Toddler Development

Toddlers are children in the 13-36 month age range.  
Their growth and development is amazing.

Some of the characteristics that describe the toddler include the fact they become easily bored, are curious, and have a short attention span.

The course competencies and learning objectives will focus on developmental milestones and challenging issues related to toddlers such as temper tantrums, biting, sleep difficulties, and toilet training.

Safety concerns will be discussed as well.

# Toddler Development

## Competencies and Learning Objectives

1. The trainees can identify age appropriate developmental milestones in each domain.
2. Trainees will be able to demonstrate an understanding of normal physical development.
3. Trainees will be able to demonstrate an understanding of normal social/emotional development.
4. Trainees will be able to demonstrate an understanding of normal cognitive development.
5. Trainees will be able to demonstrate an understanding of normal language development.
6. Trainees will be able to recognize deviations from normal development and possible need to refer for early intervention.

# The Toddler Development

So let's see what you know about toddler age children.

The following slide has a brief true/false quiz. Do you know the answers??




# Toddler Development

- \_\_\_ 1. There is a strong possibility that a child is developmentally delayed if he/she is not walking by the age of 13 months.
- \_\_\_ 2. A child is ready to be toilet trained even if his/her diaper is not dry during a nap.
- \_\_\_ 3. You don't have to worry about the toddler getting into anything poisonous as long as you put the poisons out of a toddler's reach.
- \_\_\_ 4. The best way to handle a child who bites is to bite them back.






# Toddler Development



Would you believe...  
all the answers are FALSE!

You'll learn more about toddlers as  
you progress through this course...



So, let's look at  
the developmental  
milestones!

# Toddler Milestones



## Physical Development

- 12-18 mo.- Walks alone; Can climb up stairs;  
Begins to run
- 18-24 mo.- Can build towers out of blocks;  
Drinks well from cup; Scribbles;  
Can jump
- 24-36 mo.- Throws, kicks & catches a ball;  
Walks and runs well
- 3 years - Pedals tricycle; Can stand on  
tip-toes; Begins to use scissors

# Toddler Milestones

## Cognitive Development

- 12-18 mo. - Starts pretending; Recognizes own face in mirror; Likes to explore drawers and boxes
- 18-24 mo. - Puts two-to-three piece puzzles together; Begins to understand use of certain objects; Can point to body parts when asked; Can understand 2-step directions; Understands symbols, the relationship of objects and their meaning
- 24-36 mo. - Begins to problem solve; Understands possession “mine”
- 3 years - Copies a circle; Undresses completely; Dresses partially; Washes & dries hands; Matches & sorts items



# Toddler Milestones

## Language Development

12-18 mo. - Likes to sing; Says 4-6 simple words;  
Says “no” & shakes head; Can follow simple directions;  
Imitates animal sounds

18-24 mo. - Says about 50 words; Makes 2-word phrases;  
Asks for common foods by name

24-36 mo. - Says 250-900 words; Uses three-word  
sentences; Answers simple questions;

3 years - Uses understandable speech; Says “please”  
& “thank you;” Names colors; Constantly  
asks “why”?



# Toddler Milestones

## Social and Emotional Development

12-18 mo.- Copies & imitates others; Likes to look at books together;  
Starts to exhibit a temper when angry; Laughs at funny things

18-24 mo.- Begins clinging to parents; May use blanket or stuffed animal as security  
object in place of parent; Uses parallel play; May have temper tantrums



25-36 mo.- Says “no” frequently; Does not  
understand sharing

3 years - Shows independence from parents;  
Group play; Shares toys; Takes  
turns; Plays well with others;  
May have fears of certain things  
(the dark; monsters under bed)

# Toddler Developmental Delays

Indicators of developmental delays in 1-2 year old children:

- No response to sound at any age
- No words spoken by the age of 18 to 24 months
- Does not follow simple commands by 2 years old
- Poor voice quality at any age
- Not talking in at least two-word sentences by age 2 or does not communicate with others
- Shows no emotions or feelings for others



# Toddler Developmental Delays

Any child of toddler age who is suspected of having a developmental delay should be referred to an Early Childhood Intervention Program for a screening.

- Ask a pediatrician to suggest professionals in the area.
- In the Commonwealth of Virginia, all children age 2 and above may be screened FREE by their City or County Public School System.
- It is important to get early intervention services as soon as possible.



# Toddler Brain Development and Early Literacy

Researchers in brain development emphasize that early language development relates to the mother's role. There is a “biological base for mother-child interactions that lay the foundations for communication.” Although being warm and caring is quite important, exposure to early language is necessary. There are many ways in which to accomplish this purpose.



- Use attention getting phrases (Hello, Good-bye, Look!)
- Talk and sing to a child as you change diapers, dress, feed, or play with them
- Play games of sharing and taking turns
- Read books everyday!
- Describe actions as you do an activity with a child- (“Let me help you put on your blue shirt...First, we put your right arm in a sleeve and then we put your left arm in the other sleeve.”)
- Point to objects and say the name- (“See the red wagon”)
- Play music and sing songs together
- Say nursery rhymes and make up silly songs



# Let's Review...

## True or False?

1. Interactions lay the foundation for communication and early language development.
2. If a child cannot follow simple commands by age 2, a developmental delay may exist.
3. A child can undress completely by the age of 24 months.
4. By the age of 2, a child should be able to say 100 words.
5. Early intervention services can help children identified with disabilities.

# Answers to review questions...

- 1) True- Interacting with caregivers does lay the foundation for communication/language development.
- 2) True- A child should be able to follow simple directions by age 2.
- 3) False- A child may not be able to undress themselves completely until age 3
- 4) False- By age 2, a child should be able to say 50 words.
- 5) True- Early intervention is the key! Seek advice from a professional, if you suspect a delay in development.

# Toddler Development

So....how did you do?



Now that you have seen some toddler milestones of development, we will explore some of the challenges for toddlers, beginning with “sleep.”

# Toddler: Sleep Issues

1. The trainees can describe sleep cycles and sleep challenges in the toddler.
2. Trainees will be able to illustrate knowledge of normal sleep habits.
3. Trainees will be able to identify the causes of nightmares and night terrors.
4. Trainees will be able to describe effective ways to deal with nightmares and night terrors.

# Toddler: Sleep Issues



Parents can't wait till their child finally sleeps through the night....

So, at what age does a child normally sleep through the night?

# Toddler: Sweet Dreams

Normal sleep varies by the age of the child. By the time a child is 13 months old, they are usually sleeping through the night.

A child sleeps about 10-12 hours each night. Additionally, children nap up to 4 hours each day, although children tend to take fewer naps after the age of 12 months.

As the child turns 3 years old, they normally sleep about 10 hours during the night and may take a one hour nap.

Having a bedtime routine is a necessary component of a healthy sleep schedule.



# Toddler: Sweet Dreams

Nightmares are scary dreams that awaken children and make them afraid to go back to sleep. Although they may happen for no special reason, they sometimes occur when the child has seen or heard things that upset him/her.

The presence of nightmares on an occasional basis is normal.

They may relate to developmental stages of the child. For example, toddlers may dream about separation from their parents and preschoolers may dream about monsters or the dark.

Nightmares usually happen during the last hour of sleep, known as REM (dream time) sleep.

# The Toddler: Sweet Dreams

A night terror, however, is a partial waking from sleep with behaviors such as screaming, kicking, panic, sleep walking, thrashing, or mumbling.

Night terrors usually occur within two hours of the time a child goes to sleep.

They are harmless and each episode will end in deep sleep.

They are considered normal until age 6.





# The Toddler: Sweet Dreams

## Strategies for Night Terrors

Ways to help a child during night terrors:

1. Try to help your child return to normal sleep. Do not try to wake your child, rather, turn the light on so that the child is less confused by shadows. Make soothing comments. Hold your child if it seems to help. Shouting at the child will only cause the child to be more upset.
2. Protect the child from injury as they may run into a wall or fall during the night terror. Try to direct them back to bed.
3. Night terrors may be triggered when the child becomes overly-tired. Be sure the child goes to bed at a regular time. Younger children may need to take daily naps.
4. To stop night terrors: For several nights, note how many minutes it is from the time your child falls asleep until the start of the night terror. Begin to awaken the child every 15 minutes before the expected time of the night terror. Keep the child fully awake and out of bed for 5 minutes. Continue waking the child like this for 7 consecutive nights.



# The Toddler: Sweet Dreams



Helpful tips that encourage healthy sleep habits:

- Provide a nap time and bedtime schedule
- Start a quiet time such as listening to quiet music or reading a book about 20-30 minutes before bedtime – **Watching TV should not be a part of the quiet time!**
- After the quiet time, follow a bedtime routine, such as diaper change, going to the bathroom, brushing teeth
- Say goodnight, turn off the light, and leave the room
- Security objects such as a special blanket or stuffed animal can be part of the bedtime routine
- It is important for children to be put to bed awake so they learn to fall asleep themselves

# Let's Review...

Multiple Choice:

1. Children usually sleep through the night at age:  
(a) 10 months; (b) 13 months; (c) 24 months; (d) 3 years
2. Nightmares in children usually take on characteristics of their development.  
Therefore, toddler nightmares are usually about:  
(a) separation from parents; (b) monsters; (c) scary animals; (d) heights
- 3) Nightmares are considered normal until:  
(a) age 2; (b) age 3; (c) age 6; (d) age 8

# Review question answers...

1. (b) Children usually sleep through the night by 13 months old
2. (a) Nightmares of toddlers are usually about being separated from parents.
3. (c) Nightmares are still considered normal until age 6.

# Toddler Safety

1. The trainees can recognize safety concerns that occur in the toddler age child
2. Trainees will be able to recognize normal toddler curiosity.
3. Trainees will be able to demonstrate an understanding of how toddlers are more likely to have accidents and injuries.
4. Trainees will be able to identify strategies to help parents create a safe environment for the toddler.

# Toddler Safety

Toddler-aged children are especially likely to have accidents and injuries because they are just learning to walk, and are quite curious.

- They enjoy jumping, climbing and exploring new places.
- They are often impulsive and do not have the wisdom to have good judgment about what they should and shouldn't do.
- They must depend on caring and patient adults to protect them.



# Toddler Safety



Bicycle



Firearms



Falls



Burns

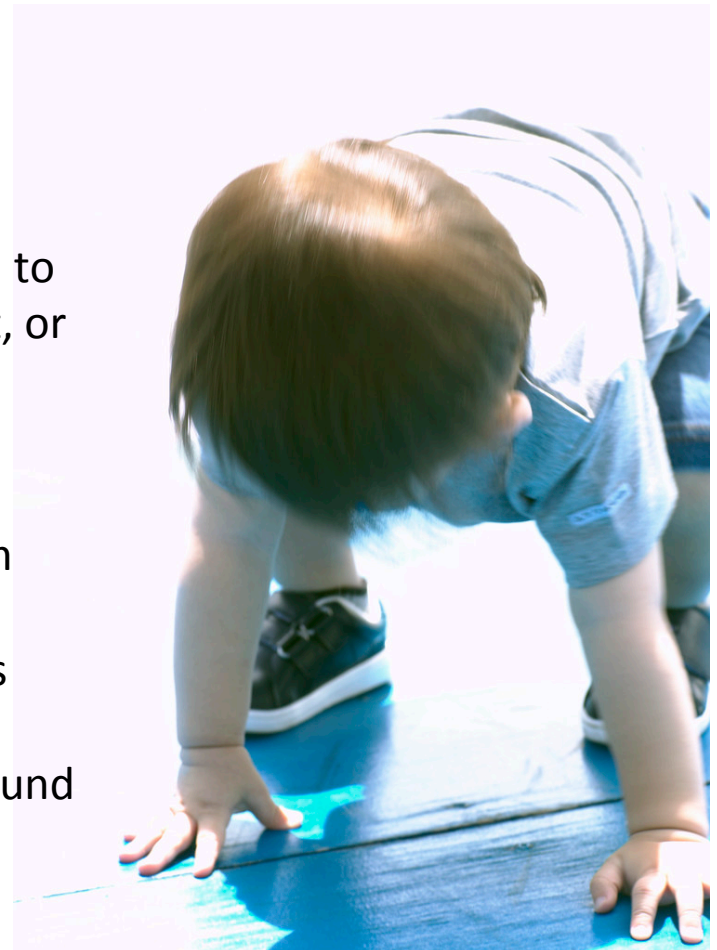


# Toddler Safety - Falls

Falls are the leading cause of injury among the toddler-age group and toddlers are more likely to fall out of windows, or be injured on the playground.

## Safety Tips –

- Install padding on sharp corners of furniture
- Remove clutter from floor and stairs
- Lock doors – (up high if necessary)
- Make the surface under play equipment soft enough to absorb a fall, i.e., use a rubber mat, sand, saw dust, or wood chips under play equipment
- Use safety gates on stairways
- Install window guards
- Do not rely on window screens to keep children from falling out of windows
- Set rules with your child about playing near windows
- Fence in a play area/soft surface
- Always supervise children during trips to the playground
- Make sure play equipment is age-appropriate





# Toddler Safety - Firearms



- It is estimated that 40% of all homes in the U.S. have some type of firearm, of which one in four is a handgun.
- Children who live in homes with guns are in more danger of being shot by themselves, by their friends, or by family members than being injured by an intruder.
- Children may be unable to distinguish between a toy gun and a real gun.
- Unintentional shootings cause 20% of all firearm-related deaths among children ages 14 and younger.

# Toddler Safety - Firearms

## TIPS -

- Keep guns out of the home.
- If you must keep a gun, keep it unloaded and locked in a place separate from the ammunition.
- Educate the child about the dangers of guns. Tell the child if he/she sees a firearm- do not touch it, leave the area, and tell an adult immediately.
- Check with neighbors/friends/relatives- Even if your home is free of firearms, always check with parents of homes where the child may visit.
- Safety devices, i.e., gun locks, lock boxes, and gun safes should be used for every firearm in the home.

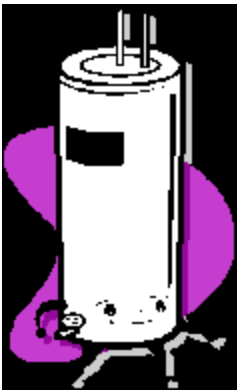


# Toddler Safety - Burns

A burn injury usually results from an energy transfer from a heat source to the body.

The kitchen can be a dangerous place for a child, especially if you are cooking. If a child is close by, there is a possibility that hot liquids, grease, and hot foods can spill on him/her and cause serious burns.

Remember that kitchen appliances, such as irons and wall heaters, remain hot long after their use, and a curious child could get burned.



Hot water heaters are often turned to water temperatures that are too high. Make sure the hot water heater is set to no more than 120 degrees.

# Toddler Safety - Burns



## TIPS -

- Find something safe for a child to do while you are cooking
- Teach a child about hot/cold items
- Keep kitchen appliances out of a child's reach
- Reduce the temperature of your hot water heater to 120 degrees or below
- Install and maintain your smoke alarms
- Develop a fire escape plan for your family
- Keep electrical outlets covered with safety plugs
- Keep matches out of a child's reach

If the child does get burned, immediately put **cold water on the burned area**, cover loosely with a bandage and call the doctor!



# Toddler Safety - Poisoning

Children have lots of curiosity and enjoy exploring the world. Toddlers grab anything that looks interesting. Each year the poison control centers receive more than 1.1 million calls about accidental poisonings among children ages 5 and under.

Every 30 seconds a child is poisoned in the U.S. Most of the poison control calls occur between the hours of 4 and 10 p.m., since this is a busy family time and children may not be supervised as closely as they need to be. The Poison Control Center staff has coined this time “the arsenic hour.”

The national toll-free **Poison Control Center** locator number is: **1-800-222-1222.** **If a child has collapsed or is not breathing, call 911 immediately.**



# Toddler Safety-Poisoning

## Lead Poisoning Alert...

Today at least 4 million households have children living in them that are being exposed to lead. There are approximately half a million U.S. children ages 1-5 with blood lead levels above 5 micrograms per deciliter ( $\mu\text{g}/\text{dL}$ ), the reference level at which CDC recommends public health actions be initiated.

- Children can get lead in their bodies by breathing or swallowing lead dust, or by eating soil or paint chips with lead in them.
- Children ages 1-3 who live in low-income housing built before 1978 are especially at risk.
- Lead exposure can affect nearly every system in the body. (Damages brain and nervous systems, causes learning problems, slowed growth, hearing problems)  
Consult a medical professional, if necessary.

Source: Centers for Disease Control and Prevention (CDC)- <http://www.cdc.gov/nceh/lead/>

# Toddler Safety - Bicycles



A child can be injured by riding a tricycle into the street or behind a car, since the driver cannot see the child through the rear view mirror.

Do not allow your child to play or to ride his/her tricycle in the street – let the child play in a fenced yard or playground.

Bike helmets need to be worn to protect the heads of children and adults.

# Toddler Safety- Car Seats

Car crashes present one of the greatest dangers to a child's safety. A child's brain and body can receive a devastating blow from a sudden stop or crash even at low rates of speed.

The key to keeping a child safe in a car is to use an age-appropriate child safety restraint that is properly installed.

*(A local fire station or AAA office will help you properly install a child's safety seat.)*





# Toddler Safety - Car Seats



## TIPS –

- Make sure the car seat is properly installed
- Car safety seats and seat belts should be replaced following a crash, as they may have become stretched or damaged
- Use a car safety or booster seat and seat belt each time your child rides in a car
- A rear-facing car safety seat must not be placed in the front passenger seat of any vehicle equipped with a passenger-side front air bag.
- Convertible seats can be used for toddlers by turning it around into the forward-facing position. Caution should be taken to make sure the shoulder straps are adjusted properly and that the seat belt is routed properly
- Booster seats should always be placed in the back seat of the car.

(Check your state laws about required weight/ages of child for car seat use.)

# Let's Review...

## True or False-

1. Toddlers are more likely to have accidents because they are curious, just learning to walk, and can be impulsive.
2. Every two minutes, a child is poisoned in the U.S.
3. The main cause of injury to a toddler is from a car accident.
4. If you must keep a gun, keep it unloaded and locked in a place separate from the ammunition.



5. It is not as important for a toddler to wear a helmet when riding a tricycle because they don't ride very fast and they never go in the street.

# Review question answers...



1. True- Toddlers very often have accidents.
2. False- Sadly, a child in the U.S. is poisoned every 30 seconds.
3. False- The major cause of injury to a toddler is falls, most often from windows or on playgrounds.
4. True- If you must have a gun in the house, guns should be locked up.
5. False- A toddler should always wear a bike helmet. Adults need to be firm and consistent with this rule and model the wearing of helmets too.

# Toddler Issues - Biting

1. Trainees will be able to identify possible reasons why toddlers bite other children/parents.
2. Trainees will be able to identify effective methods for prevention and/or intervention with biting in toddlers.

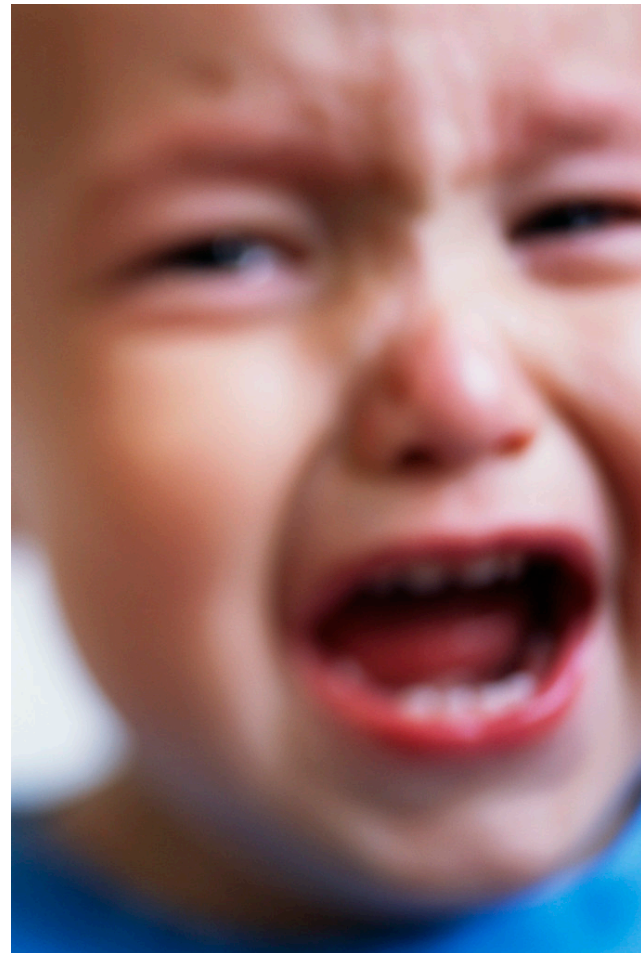
# Toddler Issues - Biting

Experts say that “many children go through a biting phase.”

Some children bite as a way to explore the world, or relieve the pain of teething.

Most agree that **frustration** is, perhaps, the most common reason for biting, explaining that toddlers communicate physically - they point, push, shove and bite.

Even though they are aware that the other child cries when he is bitten, they do not associate this with the fact that they have hurt the other child. Our culture may affect how we respond.



# Toddler Issues - Biting

## The Experimental Biter

Infants and toddlers are interested in exploring the world. Since they put everything in their mouths, they sometimes bite in the process.



At some point, infants try to bite the breast of a mother who is breastfeeding. They may need to experiment with their muscles which are developing. The biting may also be a result of teething pain. Sometimes it may even seem like a game to the child.

## Strategies:

- Tell the child “No- biting hurts.”
- Be firm
- Offer other things that they can safely bite... such as teething rings

# Toddler Issues - Biting

## The Frustrated Biter

These children most likely lack the coping skills to deal with their desire for adult attention. They do not have the language necessary to express their feelings.

Since toddlers are not usually ready to play in a cooperative way with other children in a group, they may respond with biting when another child takes their toys.

## Strategies:

- Respond promptly to biting
- Keep playtimes short and groups small
- Supervise young children's play closely
- If biting occurs, say "No-biting hurts" and remove the child from the situation right away. Explain to the child that "We do not bite people, we bite food."
- Stay calm and help your child explore better ways to handle the situation or his/her emotions so that the next time the response will be different.
- Help to console the other child that was bit and inform all parents involved.



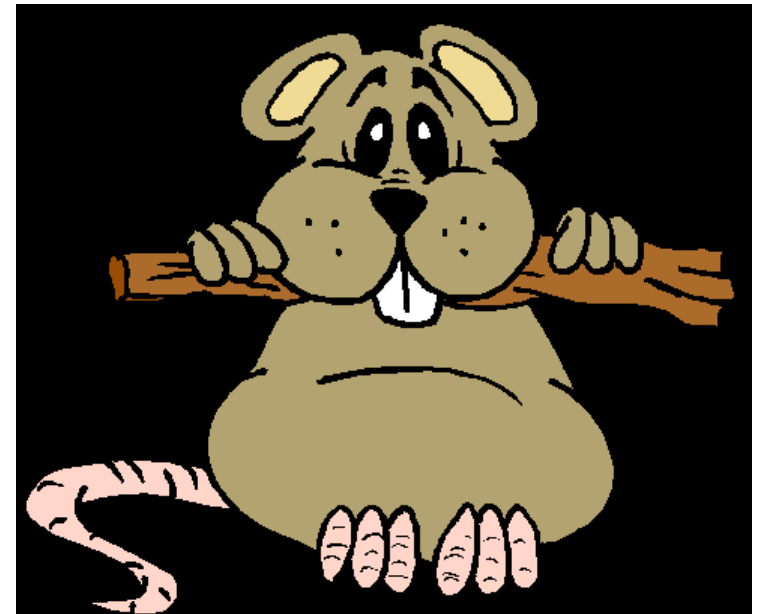
# Toddler Issues - Biting

## Powerless Biter

This biting tends to occur when a child is in need of feeling powerful. Sometimes the youngest child in the family uses biting to gain power. Some children may feel a strong need for autonomy and control.

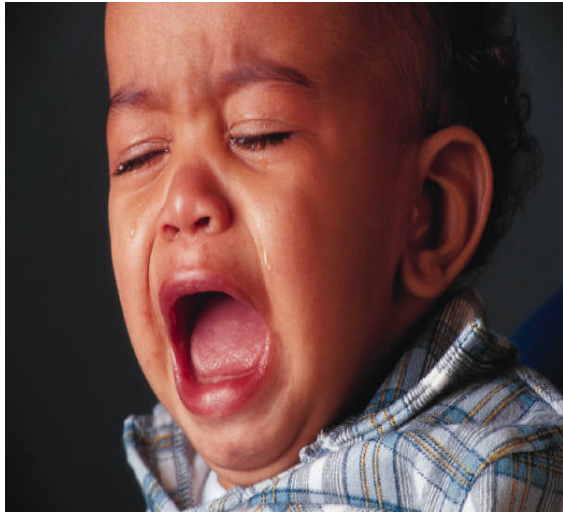
## Strategies:

- Make sure your child feels protected and is not always being “picked on” by others
- Explain the situation to bigger or older children and get their help in making things more equal
- If biting occurs, tell your children that he/she is not to bite
- Remove child from the situation right away
- Help your child explore other ways to handle the situation





# Toddler Issues - Biting



## The Stressed Biter-

Biting may occur because the child is under some type of emotional stress. In this case, the biting is an expression of distress or pain. The child may appear very angry or upset.

## Strategies:

- \* Try to find out what is bothering the child
- \* Watch for what happens right before the biting occurs
- \* Help a child find other ways to express his/her feelings
- \* Let him/her know that biting is wrong and remove him/her from the situation right away

**Never bite a child back for biting someone else.**

***This may teach him/her to bite others.***

# Toddler Oral Care

“Baby teeth” are **just as important** as permanent adult teeth.

Clean a toddler’s mouth and gums twice a day using a wet cloth.

Once first tooth appears, brush teeth with water and a soft brush.

At age 2, use a pea-sized amount of toothpaste with fluoride.

Children should not swallow toothpaste.

**SHOW** a child how to brush and **watch closely** to make sure they are doing a thorough job.

Offer water with fluoride (tap water) instead of sweet drinks.

Have a “well baby” check up for teeth by age 1.



# Toddler Oral Care

## How can you comfort a baby who is teething?

- Teething may occur from five months to 2 ½ years of age
- Teething signs may be sore gums, restless, irritable, sleeplessness, not eating well or loose bowel movements
- Rub your baby's gums with finger and thumb
- Take a clean washcloth, roll it, and freeze it,... let the baby chew on it
- Use a teething ring
- Consult with a medical provider



# Let's Review...

## Multiple Choice:

1. The most common “type” of biting is:

- (a) experimental; (b) frustrated;
- (c) powerless; (d) stressed

2. All of these are good strategies to deal with biting except:

- (a) saying “NO” to the child; (b) providing diversions; (c) removing the child from the situation; (d) biting the child back

3. Teething usually occurs between which of the following ages:

- (a) 5 months to 2 ½ years; (b) 6 months to 18 months; (c) 6 months to 2 years;
- (d) 1 year to 3 years



# Review question answers...

1. (b) The frustrated biter is the most common type.
2. (d) It is never OK to bite a child back.
3. (a) Teething usually occurs between 5 months and 2 ½ years old.



Good job!!!

# Toddler Issues -Toilet Training



Now, let's look at toilet training, a process which can be smooth or challenging... based on how it is handled!

# Toddler Issues -Toilet Training

## Goals and Learning Objectives:

1. The trainee can describe age appropriate toilet training methods.
2. Trainees will be able to identify physical indicators that could show the toddler is ready for toilet training.
3. Trainees will be able to understand that toileting accidents that occur during toilet training are normal.
4. Trainees will be able to identify strategies which encourage toilet training.
5. Trainees will be able to develop an understanding of how cultural differences impact philosophies and decisions about toilet training.

# Toddler Issues -Toilet Training

People of different cultures, as well as other family members, such as grandparents and significant others seem to have definite opinions about toilet training.

Toileting is, perhaps, the child's first demonstration of independence.

The child, for the first time, has power.

The child can choose to hold on or let go.

Sometimes parents get into power struggles with their child by trying to force them to use the potty.

Most children have the muscle control to regulate themselves between eighteen months and three years of age. Children with disabilities, however, may take even a year longer. Also, certain medical conditions may delay or prohibit a child from developing the needed muscle control for self-regulation.





# Toddler Issues -Toilet Training

## READINESS SIGNALS FOR TOILET TRAINING

1. Child walks well in order to get to the bathroom/potty
2. Child is able to sit down and play quietly for about five minutes
3. Child is able to help dress and undress self
4. Child can communicate the need to go to the potty
5. Child is able to control muscles used for going to the potty
6. Child asks to have diaper changed or tells you that bowel movement or urine is coming
7. Child shows discomfort when diaper is wet or dirty
8. Child likes to imitate parents and older children
9. Child follows you into the bathroom and sees how the toilet is used
10. Child wants to do things to make parents happy or to get praise
11. Child is able to understand and follow simple directions
12. Child is able to remain dry for about two hours at a time



# Toddler Issues - Toilet Training

## Toilet Training Tips:

- 1) If there are siblings, allow the younger child to hear you praise the older child for using the potty.
- 2) It is preferable to use a potty chair on the floor rather than putting the child on the toilet. This makes the child more comfortable and secure.
- 3) Allowing the child to play with the potty helps him/her get use to it.
- 4) Never strap your child on the potty chair- they should be free to get up anytime.
- 5) The child should not sit on the potty for more than 5 minutes at a time.
- 6) Children often learn to go to the potty for bowel movements before urine, so this may be a good place to start.



# Toddler Issues - Toilet Training

## Toilet Training Tips (cont.)

7) If your child has a usual time for a bowel movement, take him/her to the potty at this time.

8) If your child wants to sit on the potty, you may stay beside him/her and talk or read to the child.

9) It is good to use words for what your child is doing, i.e., “pee pee,” “potty,” but remember that your child will be using these words in public, so choose words carefully to avoid embarrassment later.

10) If your child gets off the potty without having a bowel movement or urinating, do not scold the child... try another time.

11) Since children learn from copying adults, it may be helpful to allow your child to sit on the potty while you are on the toilet.



# Toddler Issues - Toilet Training

## Toilet Training Tips (cont.)

- 12) Initially, teach boys to sit down for passing urine, as, at first, it is difficult to control starting and stopping while standing. Boys will try to stand to urinate when they see other boys standing.
- 13) Some children learn by pretending to teach a doll to go potty.
- 14) Make going to the potty a part of your child's daily routine, i.e., first thing in the morning, after meals and naps, and before going to bed.
- 15) Once toilet training has begun, you may want to begin using training pants for your child. Wearing underpants is a sign of growing up, and most children like being called a "big girl or big boy."
- 16) If a child has an accident while using training pants, do not punish the child. Be calm.



# Toddler Issues - Toilet Training

## Toilet Training Tips (cont.)



- 17) Keep rewarding and praising your child for each step he/she accomplishes, i.e. pulling down pants, sitting on the potty.
- 18) Children should be taught to wipe from front to back and to wash their hands after using the toilet.
- 19) Most children have daytime bowel control by age 3 or 4.
- 20) Nighttime control usually comes much later and may not occur until the child is 4 or 5 years old.
- 21) Even when the child is toilet trained, they may have accidents when excited or playing, or when ill or in difficult emotional situations.

**The key is to be calm and take your time with toilet training!**

# Let's Review...



## True or False-

1. Toilet training is often the child's first demonstration of independence and power.
2. Try to take the child to the potty at a time when he/she usually has a bowel movement.
3. Toilet training works if a child is made to stay on the potty until he/she urinates and/or has a bowel movement.
4. A child usually has complete bowel and bladder control, both day and night, by age 3.
5. The key to successful toilet training is to be calm and take your time!

# Review question answers...

1. True—Absolutely! Toilet training is a time when a toddler shows independence.
2. True- If your child has a usual time for a bowel movement, take him/her to the potty at this time. You don't want to get into a power struggle with a child.
3. False- The child should not sit on the potty for more than 5 minutes at a time.
4. False- Most children have daytime bowel control by age 3 or 4.  
Nighttime control usually comes much later and may not occur until the child is 4 or 5 years old.
5. True- Yes...Take your time and stay calm with a child who is being toilet trained.



# Toddler Issues -Temper Tantrums

## Goals and Learning Objectives:

1. The trainees can understand the dynamics of the toddler temper tantrum.
2. Trainees will be able to explore situations that encourage temper tantrums.
3. Trainees will be able to demonstrate effective strategies used in dealing with toddler temper tantrums.



# Toddler Issues: Temper Tantrums

Temper tantrums are a way a young child lets out strong emotions before he/she is able to express them in socially acceptable ways.

Although these expressions of kicking, screaming or stomping may look out of control, temper tantrums are actually part of a child's normal development. As children grow and develop, they become more independent and want to do more than they can handle emotionally and physically. What results is frustration!

This frustration is expressed in a variety of ways. It is, of course, worse if the child is tired, hungry or sick.



# Toddler Issues: Temper Tantrums



Temper tantrums usually begin at about age 1 and continue until about age 3. Normally, most children stop having tantrums by age 4, as they have learned the necessary self-control by this age.

It is not uncommon for the temper tantrums to occur only with the parent. The child is simply trying to communicate his/her feelings. It is important for parents to understand what causes the temper outbursts.

Of course, public places, such as grocery stores, are favorite places for a child to have a tantrum. These places also provide extra stimulation for the child because of the bright lights, noise, and people.

# Toddler Issues: Temper Tantrums

## PREVENTING TEMPER TANTRUMS:

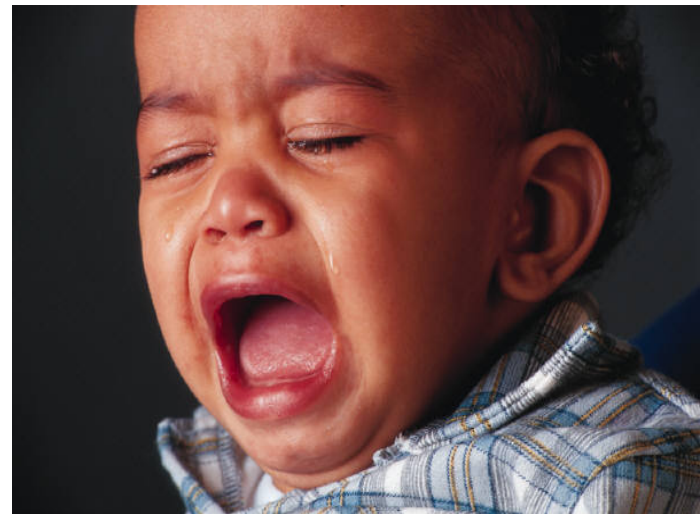
- Stick to routines for meals and sleep times- avoid long outings, delayed meals and naps
- Distract your child with a toy
- Have reasonable expectations- do not expect your child to be perfect
- Help your child avoid frustration by preparing your child for changes before they happen



# Toddler Issues: Temper Tantrums

## STRATEGIES TO DEAL WITH TEMPER TANTRUMS:

- Stay calm
- Ignore the child until he/she is calmer
- Do not hit or spank a child
- Do not give in to the tantrum, as this rewards unacceptable behavior
- Do not “bribe” your child to stop the tantrum, as the child learns to act inappropriately for a reward
- Remove potentially dangerous objects from your child or your child’s path
- If a tantrum happens in a store, just leave.



# Toddler Issues: Temper Tantrums

Oppositional behavior is not following rules set forth by parents/teachers. The oppositional behavior may be described by the child responding “no” to a request, or continuing to display an unwanted behavior despite repeated requests to discontinue the behavior. The toddler age is often coined “the terrible two’s” because of this oppositional behavior.



While some oppositional behavior is “normal,” if it continues past the toddler age, or if the behavior becomes more severe, and/or more frequent and lengthy, a referral for professional services may be needed.

# Let's Review...

## Multiple Choice:

1. Temper tantrums are considered “normal” for children ages:  
(a) 1-2 years; (b) 2-3 years; (c) 1-3 years;  
(d) 3-4 years
2. A good strategy to prevent temper tantrums is:  
(a) stay calm; (b) bribe the child; (c) spank the child; (d) all of above
3. Oppositional behavior is characterized by:  
(a) the child not following the parents' rules;  
(b) saying “no” to a request; (c) continuing to display unwanted behavior; (d) all of the above



# The Toddler: Temper Tantrums

Let's see how you did....



1. (c) Temper tantrums usually begin at about age 1 and continue until about age 3.
2. (a) Stay calm. Bribing and spanking are never good options.
3. (d) All of the above

# Toddler Development

We hope that you have found this course helpful in dealing with specific issues of toddler-aged children.

Remember to stay calm with this age child!

Toddler's need lots of love and attention. Have fun too!

[Time to go to the last slide of the course to take the final quiz...](#)

Good luck!





# Bibliography

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- Weininger, Otto. (1999) "Today's Parent" Magazine: "Steps and Stages: Biting," and "Steps and Stages: Temper Tantrums."

# Family Resources

American Academy of Pediatrics- [www.aap.org](http://www.aap.org)

Center for Effective Parenting- [www.parenting-ed.org](http://www.parenting-ed.org)

Centers for Disease Control and Prevention- [www.cdc.gov](http://www.cdc.gov)

Comprehensive Health Investment Project (CHIP) of Virginia- [www.chipofvirginia.org](http://www.chipofvirginia.org)

Community Service Boards in Virginia- [www.dmhmrzas.virginia.gov](http://www.dmhmrzas.virginia.gov)

Children's Hospital of the King's Daughters- [www.chkdc.org](http://www.chkdc.org)

Healthy Families of Virginia- [www.preventchildabuseva.org](http://www.preventchildabuseva.org)

Infant & Toddler Connection- [www.va-itsnetwork.org](http://www.va-itsnetwork.org)

Kids Priority One- [www.kidspriorityone.org](http://www.kidspriorityone.org)

National Association for the Education of Young Children (NAEYC)- [www.naeyc.org](http://www.naeyc.org)

National Parent-Teacher Association- [www.pta.org](http://www.pta.org)

Parents as Teachers- [www.parentsasteachers.org](http://www.parentsasteachers.org)

Poison Control- [www.vapoison.org](http://www.vapoison.org)

Smart Beginnings- [www.smartbeginnings.org](http://www.smartbeginnings.org) (Virginia)

# Family Resources

Square One- [www.SqOne.org](http://www.SqOne.org) (Hampton Roads, VA)

The Planning Council- [www.theplanningcouncil.org](http://www.theplanningcouncil.org) (Hampton Roads, VA)

The UP Center- [www.theupcenter.org](http://www.theupcenter.org) (Hampton Roads, VA)

ToySafety (A Project of the National Association of State Public Interest Research Groups) -  
[www.toysafety.net](http://www.toysafety.net)

Virginia Association for Early Childhood Education- [www.vaece.org](http://www.vaece.org)

Virginia Beach Parenting Information/Events- [www.vbparents.com](http://www.vbparents.com)

Virginia Department of Education- [www.pen.k12.va.us/](http://www.pen.k12.va.us/)

Virginia Department of Health- [www.vdh.gov](http://www.vdh.gov)

Virginia Department of Mental Health, Mental Retardation and Substance Abuse Services-  
[www.dhmrsas.virginia.gov](http://www.dhmrsas.virginia.gov)

Virginia Department of Social Services- [www.dss.virginia.gov](http://www.dss.virginia.gov)

Zero to Three - [www.zerotothree.org](http://www.zerotothree.org) (Washington, D.C.)

# Disclaimer

All health-related information contained within this “online training” is intended to be general in nature and utilized as an educational tool. Every effort has been made to ensure that the material within this website is accurate and timely as of October 2012.

This information should not be used as a substitute for a visit with a healthcare professional. Your healthcare provider should be consulted regarding matters concerning the medical condition, treatment and needs of you and your family.

All educational information is regarded as best practice information for a toddler age child but always check with a professional, if concerns arise with a child’s development.

# Thanks for participating...

Time to take the final quiz...

You will need to answer 8 out of 10 questions correctly to receive a passing score.

A certificate for 1 hour of in-service training will be awarded after passing the quiz via your email.

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**When you are ready to take the quiz, go to:**

**<http://sqone.org/g/tdt13>**

**Good luck!**