Early Childhood Developmental Milestones

Welcome!

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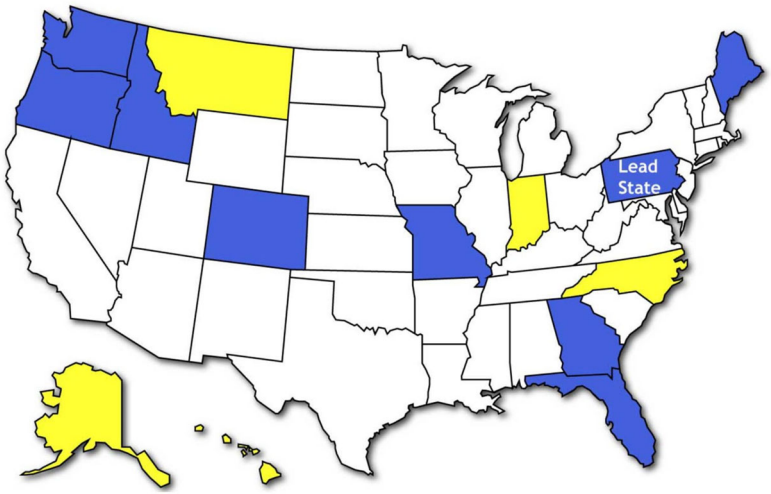
Attendance

Please enter:

- First & last name
- Your role
- State you work in

Preschool Initiative

- PI Lead State:
  Pennsylvania
- PA State MEP Director:
  Carmen Medina
- PI Coordinator:
  Michele Cheney



PI CIG Goals

- Expand the capacity of state and local MEPs to serve migrant PK children.
- Ensure that more services are provided to migrant 3 to 5-year-old children.
- Disseminate information on evidence-based and promising practices.

Today's Goals

The goals of this module are to:

- Increase participant understanding of the developmental milestones that occur between the ages of three and five

- Recognize ways in which culture can impact those milestones

WHERE
WHAT
WHEN
WHY
HOW
WHO

Milestones are an Important Resource

Families know their children

Common Language

Professionals know positive child development

The Milestones are not:

- A guide to child development or a developmental checklist. Children's development is highly individualized and unique to each child.
- An assessment tool or for use to determine children's eligibility for various programs or services.
- A curriculum

Preschoolers (3-5 years of age) Developmental Milestones

- Developmental milestones are things most children can do by a certain age.
- Children reach milestones in how they play, learn, speak, behave, and move (like crawling, walking, or jumping).
- As children grow, their world will begin to open up. They will become more independent and begin to focus more on adults and children outside of the family.
- They will want to explore and ask about the things around them.
- Their interactions with family and those around them will help to shape their personality and their own ways of thinking and moving.

Developmental Milestones Domains

- Social/Emotional
- Language/Communication
- Cognitive
- Movement/Physical Development

Social/Emotional

Age 3	Age 4	Age 5
• copies adults and friends • shows affection for friends without prompting • takes turns in games • shows concern for crying or injured friend • understands the idea of “mine” and “his” or “hers” • shows a wide range of emotions • dresses and undresses self • separates easily from mom, dad, or family members	• enjoys doing new things • plays “mom” or “dad” • is more and more creative with make-believe play • would rather play with other children than by himself • cooperates with other children • often can’t tell what’s real and what’s make-believe	• want to please and be like friends • more likely to agree with rules • likes to sing, dance, and act • is aware of gender • can tell what’s real and what’s make-believe • shows more independence

Language/Communication

Age 3	Age 4	Age 5
• follows instructions with 2 or 3 steps • understands words like “in”, “on”, and “under” • says first name, age, and sex • says words like “I”, “me”, “we”, and “you” and some plurals (cars, dogs, cats) • talks well enough for strangers to understand most of the time • carries on a conversation using 2 to 3 sentences	• knows some basic rules of grammar, such as correctly using “he” and “she” • sings a song or says a poem from memory such as the “Itsy, Bitsy Spider” or the “Wheels on the Bus” • tells stories • can say first and last name	• speaks very clearly • tells a simple story using full sentences • uses future tense; for example, “Grandma will be here.” • says name and address

Cognitive

Age 3	Age 4	Age 5
• can work toys with buttons, levers, and moving parts • plays make-believe with dolls, animals, and people • does puzzles with 3 or 4 pieces • understands what “two” means • copies a circle with pencil or crayon • turns book pages one at a time • builds towers or more than 6 blocks • screws and unscrews jar lids or turns door handles	• names some colors and some numbers • understands the idea of counting • starts to understand time • remembers parts of a story • understands the idea of “same” and “different” • draws a person with 2 to 4 body parts • uses scissors • starts to copy some capital letters • plays board or card games • tells you what he/she thinks is going to happen next in a book or story	• counts 10 or more things • can draw a person with at least 6 body parts • can print some letters or numbers • copies a triangle and other geometric shapes • knows about things used every day, like money and food

Movement/Physical Development

Age 3	Age 4	Age 5
• climbs well • runs easily • pedals a tricycle (3-wheel bike) • walks up and down stairs, one foot on each step	• hops and stands on one foot up to 2 seconds • catches a bounced ball most of the time • pours, cuts, with supervision, and mashes own food	• stands on one foot for 10 seconds or longer • hops; may be able to skip • can do a somersault • uses a fork and spoon and sometimes a table knife • can use the toilet independently • swings and climbs

Developmental Concerns

Individuals with Disabilities Education Act

Child with a disability for children aged three through nine (or any subset of that age range, including ages three through five, may…include a child—

1) Who is experiencing developmental delays as defined by the State and as measured by appropriate diagnostic instruments and procedures in one or more of the following areas: physical development, cognitive development, communication development, social or emotional development, or adaptive development; and
2) Who, by reason thereof, needs special education and related services.

Age 3:
Talk to nurse or doctor if you notice your child;

- Falls down a lot or has trouble with stairs
- Drools or has very unclear speech
- Can’t work simple toys (such as simple puzzles, turning handle)
- Doesn’t speak in sentences
- Doesn’t understand simple instructions
- Doesn’t play pretend or make-believe
- Doesn’t want to play with other children or with toys
- Doesn’t make eye contact
- Loses skills he/she once had

Age 4:
Talk to nurse or doctor if you notice your child;

- Can’t jump in place
- Has trouble scribbling
- Shows no interest in interactive games or make-believe
- Ignores other children or doesn’t respond to people outside the family
- Resists dressing, sleeping, and using the toilet
- Can’t retell a favorite story
- Doesn’t follow 3-part commands
- Doesn’t understand “same” and “different”
- Doesn’t use “me” and “you” correctly
- Speaks unclearly
- Loses skills he/she once had

Age 5:
Talk to nurse or doctor if you notice your child;

- Doesn't show a wide range of emotions
- Shows extreme behavior (unusually fearful, aggressive, shy or sad)
- Unusually withdrawn and not active
- Is easily distracted, has trouble focusing on one activity for more than 5 minutes
- Doesn't respond to people, or responds only superficially
- Can't tell what's real and what's make-believe
- Doesn't play a variety of games and activities
- Can't give first and last name
- Doesn't use plurals or past tense properly
- Doesn't talk about daily activities or experiences
- Doesn't draw pictures
- Can't brush teeth, wash and dry hands, or get undressed without help
- Loses skills he/she once had

Influences on Child Development

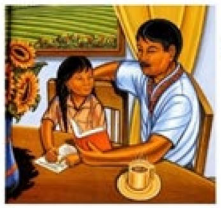
- Culture beliefs:
  - Emphasis of certain values and skills, that are passed on from parents
- Parenting style:
  - Refers to the way in which parents choose to raise their children. The way that people parent is an important factor in their children's socioemotional growth and development.
- Race and other identities
  - Are closely linked to class, and people of color are statistically much more likely to lack access to basic resources and experience economic hardship. These resources include everything
    - from proper nutrition and healthcare
    - to good education systems and neighborhood parks

FUNDS OF KNOWLEDGE

ACERVO CULTURAL

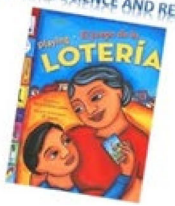
DICHOS WISDOM

GEOGRAFÍA



LOTERÍA CIENCIAS Y LA LECTURA

LOTERIA, SCIENCE AND READING



TROMPOS Ciencias e Ingeniería

DOMINÓ

Name: _____ Date: _____

Funds of Knowledge	
Home Language	*E.g., Arabic; Spanish; Navajo; Italian*
Family Values and Traditions	*E.g., holiday celebrations; religious beliefs; work ethic*
Caregiving	*E.g., swaddling baby; giving baby pacifer; co-sleeping*
Friends and Family	*E.g., visiting grandma; barbecues; sports outings*
Family Outings	*E.g., shopping; beach; library; picnic*
Household Chores	*E.g., sweeping; dusting; doing dishes*
Educational Activities	*E.g., going to the museum; taking a walk in the neighborhood*
Favorite TV Shows	*E.g., watching Dora; Sesame Street; Sid the Science Kid*
Family Occupations	*E.g., fishing; office; construction; policeman*
Scientific Knowledge	*E.g., recycling; exercising; health*
	Additional Funds of Knowledge

González, N., Moll, L., & Amanti, C. (Eds). (2005). Funds of knowledge: Theorizing practices in households, communities and classrooms. Mahwah, NJ: Erlbaum.

Exploring Funds of Knowledge

1) Review the 10 categories of *Funds of Knowledge*
2) Think about *Funds of Knowledge* for you and your family
3) Fill in your *Funds of Knowledge* on the lines provided. Skip categories that don't pertain to you or your family.

Strategies to Consider

- **First** take into consideration the families beliefs and values.
- **Second** is the child's delay related to his/her caregiving and culture?
- **Next** ask what they expect in development for this particular age. Once you get an answer from the family, relate it to the typical American culture and explain that as a program these are the observations and concerns.
- **Finally** work with the family in understanding the impact taking into consideration their cultural beliefs and respecting that.

Questions to Consider

What are some ways to support:

- Leesa's development
- Family support
- Teacher strategies

3 year old Leesa

Child Profile:

Leesa is a three year old girl, who just arrived from Oaxaca, Mexico. She is an only child and lives with her mom and dad in a farm labor camp. Leesa's family speaks Mixteco and Spanish in the home. The family is very close and rarely spends time with other families in the camp. Leesa is energetic, curious and eager to make new friends. A migrant recruiter visits the camp regularly and has identified the family as migrant eligible. During the home visit, he observed Leesa limping on her right foot and is concerned it may be broken or sprained. The recruiter connected the family to Migrant Head Start and to the local clinic.

Family Perspective:

(mom) I am very nervous about taking Leesa to a school. In Oaxaca, she didn't attend school and she's never been away from me before. But I know we don't have any other options, since me and my husband will be working all day. Today we visited the classroom and filled out a lot of paperwork. The teachers speak Spanish and Leesa has been learning, but I'm worried she will forget Mixteco.

(dad) We came up north to work and provide better opportunities for Leesa. The recruiter came to visit us at the camp and noticed Leesa limping and gave us the address to the clinic. When we were in Oaxaca, Leesa was climbing on a tree in our backyard and fell. My wife took her to her sister so she could give her some medicine and massage her ankle. We didn't have the money to take her to the doctor. She hasn't complained about it, so I think she's fine. We don't have money to pay for the doctor visit or medical insurance.

Teacher Perspective:

I just met Leesa and her family. She will be coming to the program tomorrow. The migrant recruiter who referred them to the program provided a copy of the eligibility certificate and some observation notes. He's concerned Leesa has unmet medical needs and would like the family to take her to the clinic. I noticed Leesa limping on her right foot and asked her what happened. She told me she fell from a tree in Mexico. If the family doesn't take her to the clinic, I will need to make a report to Child Protective Services. Her unmet medical needs is a concern and considered neglect.

Debrief

Enter in the chat box, one key “take away” from the vignette activity.

Key Components for Successful Migrant Programs

- Establish relationships in order to understand cultural and social processes
- Access Funds of Knowledge
- Encourage and value home language
- Home school connection

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Resource Information

Developmental Milestone Information was obtained through the Centers for Disease Control and Prevention.

http://www.cdc.gov/ActEarly

The contents of this document were developed under a grant from the Department of Education. However, those contents do not necessarily represent the policy of the Department of Education, and you should not assume endorsement by the Federal Government.