Educators Guide

Developmental Milestones

3 months: Raises head while lying on tummy, smiles back at people
6 months: Rolls over, coos and babbles, turns head toward sounds
9 months: Creeps or crawls, sits without help, says Mama or Dada
12 months: Feeds self with fingers, waves bye-bye, plays peek-a-boo
18 months: Walks without help, says 10-20 words, imitates others, points
2 years: Refers to self by name, returns a kiss or hug, pretends in play
3 years: Uses toilet in day, has simple conversations, uses phrase speech
4 years: Retells a favorite story, takes turns, dresses self
5 years: Follows three-step directions, cuts with scissors

“Red Flags”

- Not meeting developmental milestones
- Oversensitivity to noise
- Frequent temper tantrums
- Appearing “deaf” at times
- Tip toe walking
- Overly intense/ unusual interests
- Regression or loss of skills

Psycho-Developmental Evaluations detect developmental delays and developmental disabilities.
Is a teacher responsible for identifying abnormal child development?

Parents commonly view teachers as the expert professional monitoring their child’s development. Teachers, along with pediatricians, are oftentimes the only professionals a child has had any interaction with (and pediatrician visits are oftentimes too abbreviated to catch all abnormalities). Therefore, teachers play a critical role in alerting parents to any developmental concerns. Many parents assume their child is “just fine” if their child’s teacher never mentions any concerns.

How should teachers communicate with parents about concerning behavior?

Many schools have policies and procedures in place for handling this very situation. The most valuable information a teacher can provide are clear descriptions of specific behaviors that are concerning or unusual (e.g., He tends to play by himself, rather than joining the group”). There is no need to hypothesize about a possible clinical diagnosis. Rather, it is important to simply state this behavior is concerning to you, and recommended further evaluation. You can make referrals for a more comprehensive evaluation.

If a child’s issues are significant (particularly if a child is at-risk of having to leave the school setting), this should be clarified to the parent. Parents also appreciate hearing how, in the interim, you plan to address the behavioral concerns (e.g., “I’m going to try and create group activities that involve his favorite toy”). This helps parents recognize that your concerns are not just complaints about the child’s behavior, but rather reflect your professional knowledge about child development.

What if a teacher is not sure if a child is developing appropriately?

Every child develops in a unique way, and many times children with very mild developmental atypicalities function relatively fine within the context of a developmentally appropriate childcare setting. However, even children with mild developmental atypicalities are at-risk for the development of significant learning issues later on. Early interventions can be the best defense against longer-term problems. Therefore, alerting parents to even “suspected” concerns allows them the opportunity to seek more specialized assessment and ultimately provide the most comprehensive care for their child, should they need it.

How can teachers support children with special needs in their classroom?

Some children with special needs are best educated in regular classrooms, along-side typically developing peers, whereas other children do best in a more therapeutic school setting. For special needs children who are integrated into the typical setting, a collaborative approach is best whereby teachers, parents, and outside therapists work together to develop strategies and learning goals that can be addressed across settings.

Teachers can also foster development by recognizing that some children simply need more explicit instruction in skills we commonly assume will develop naturally (e.g., socialization, play, communication). Children are most successful when teachers focus on teaching what the child needs to learn to be successful, rather than over focusing on what this child is doing wrong.