Self-Regulation

A child with good self-regulatory skills can control and manage their emotions. The child can stay calm or can calm down quickly after exciting events or big feelings. This ability to calm down allows the child to focus their attention on important information in their environment. For example, when a child is calm they can listen to a caregiver, follow directions, focus on an activity, keep their body safe, or learn new information. Babies (and toddlers) need a lot of support from their primary caregivers to be able to self-regulate. As preschool children become more skilled at communicating their needs and feelings, they become better able to calm down and soothe on their own—even when they have big feelings. A child’s ability to calm down and focus may vary with different caregivers or settings. Some children are sensitive to lights, sounds, temperatures, tactile stimulation, or other environmental conditions. Some children’s personalities “fit” better with certain caregivers or parenting styles.

ASQ®:SE-2 items in this area address the child’s ability or willingness to calm or settle down or adjust to physiological or environmental conditions or stimulation. A few examples of self-regulation items you may find on the ASQ:SE-2 questionnaires are:

- Does your baby have trouble falling asleep at naptime or at night?
- Does your child cry, scream, or have tantrums for long periods of time?
- Does your child move from one activity to the next with little difficulty (for example, from playtime to mealtime)?
Compliance

A child’s ability to cooperate with requests during daily activities supports healthy parent-child relationships. When children are not cooperative and push back on requests, daily activities become stressful and frustrating for both parents and toddlers. Toddlers are usually willing to cooperate (comply) as long as expectations are developmentally appropriate and the child understands what is being asked of them. Having consistent routines at home and school helps children begin to learn what is expected of them and makes it easier to comply. For example, a toddler may learn that first they wash their hands and then it is time to sit down to eat. Preschoolers begin to learn simple, consistent rules (use walking feet inside, use words to ask for something, no hitting) and why these rules are in place. Children want attention from their caregivers. When children are consistently given positive attention for doing the right thing, they become willing to do the right thing more and more often.

ASQ®:SE-2 items in this area address a child’s ability or willingness to conform to the direction of others and follow rules. A few examples of compliance items you may find on the ASQ:SE-2 questionnaires are:

- Does your child follow simple directions? For example, does she sit down when asked?

- Does your child do what you ask him to do? For example, does he wash his hands or wait to take a turn when asked?
Adaptive Functioning

Adaptive, or “self-help,” skills are behaviors that children need to meet their basic physical needs. When a child is experiencing problems in adaptive functioning, consider both the child’s physical health and emotional well-being as potential causes. For example, stressful life situations (such as a lack of positive interactions with a child’s primary caregiver) may cause a child to experience feeding or sleeping problems. A child may also have adaptive functioning issues due to underlying health conditions such as reflux or sleep apnea. Either way, the root cause of adaptive problems needs to be determined and appropriate intervention provided to support both the child’s health and well-being and the parent–child relationship.

ASQ®:SE-2 items in this area address the child’s success or ability to cope with physiological needs, such as sleeping, eating, elimination, safety. A few examples of adaptive functioning items you may find on the ASQ:SE-2 questionnaires are:

- Does your baby have trouble sucking from a breast or bottle?
- Does your child stay away from dangerous things, such as fire and moving cars?
- Does your child sleep at least 8 hours in a 24-hour period?
Autonomy

The process of gaining independence and separating from primary caregivers occurs over many years. Children need to feel secure and safe to have the confidence to explore and move towards independence. Children move into this “autonomous” phase during the toddler years. At this age, children are interested in trying things by themselves and want some control over activities. This is the age when toddlers commonly say, “No!” or “Me do it” or “Mine.” These phrases, while sometimes frustrating for caregivers, are positive signs of a child’s emerging confidence, individuality, and positive social-emotional development. In new environments, toddlers will begin to move away from their caregivers but are careful to look back to make sure their caregivers are paying attention and keeping them safe. Children also come running back to the “safe base” of their caregiver when overwhelmed. In this stage, it can sometimes be difficult for parents to find a healthy balance between “letting go” and “staying connected” with their young children.

ASQ®:SE-2 items in this area address a child’s ability or willingness to self-initiate or respond without guidance (move towards independence). A few examples of autonomy items you may find on the ASQ:SE-2 questionnaires are:

- Does your child check to make sure you are near when exploring new places, such as a park or a friend’s home?
- Does your child cling to you more than you expect?
- Is your child too worried or fearful?
Affect

Children experience a range of emotions such as sadness, fear, anger, joy, excitement, curiosity, and pride. Learning how to express a range of emotions—especially the difficult ones such as anger and sadness—is the first step in learning how to manage them. Babies are driven to watch their primary caregiver’s face carefully and copy facial expressions. Toddlers begin to understand feelings they are experiencing and may be able to name some basic feelings (I’m mad) and accept comfort from their caregivers. Preschoolers learn that other people have feelings too and that these feelings may differ from their own feelings. Preschoolers learn how to empathize—that is, they can recognize someone else’s feelings and respond to those feelings with care. For example, a child may try to get a bandage for a friend who has fallen or give a hug to a parent who is sad. Empathy is an important skill that is needed to develop healthy relationships with friends and family. Children learn empathy from their primary caregivers—from the time a child is born, caregivers respond to their child’s physical and emotional needs.

ASQ®:SE-2 items in this area address the child’s ability or willingness to demonstrate his or her own feelings and empathy for others. A few examples of affect items you may find on the ASQ:SE-2 questionnaires are:

- Does your baby like to be picked up and held?
- Is your child interested in things around her, such as people, toys, and foods?
- Does your child show concern for other people’s feelings? For example, does he look sad when someone is hurt?
Social-Communication

From the time they are born, babies try to communicate with their caregivers. Social-communication interactions go back and forth between the child and caregivers, and between the child and family/friends. Interactions include the child’s responses to others and the child’s initiations with others. The child communicates about their interests (their likes and dislikes, thoughts and ideas), sensations (hunger, tiredness, heat, cold, pain), or their internal feelings (happy, sad, mad, scared, proud). Newborns communicate through their cries or other body movements. Toddlers begin to use simple words, simple phrases, or gestures (such as pointing to show a caregiver something) to communicate, and preschoolers start to be able to use full sentences to communicate.

ASQ®:SE-2 items in this area address the child’s ability or willingness to interact with others by responding to or initiating verbal or nonverbal signals to indicate interest or needs, feelings, and affective or internal states. A few examples of social-communication items you may find on the ASQ:SE-2 questionnaires are:

- **When you talk to your baby, does he look at you and seem to listen?**
- **Does your child let you know how he is feeling with words or gestures? For example, does he let you know when he is hungry, hurt, or tired?**
- **Does your child play with objects by pretending? For example, does your child pretend to talk on the phone, feed a doll, or fly a toy airplane?**
Interaction with People

Newborns and young babies are interested in their primary caregivers and other close family members. Even newborns seek out and look at the faces of their caregivers and try to imitate their facial expressions. As babies get older their vision improves, and their interest in and curiosity about other people—especially children—gets stronger. Toddlers want to be near other children, and they enjoy playing side by side with them. Preschoolers become increasingly interested in developing friendships outside their family. Preschoolers also begin to engage in cooperative play and can share, trade, and negotiate disagreements with other children.

ASQ®:SE-2 items in this area address the child’s ability or willingness to respond to or initiate social responses to parents, other adults or peers. A few examples of interaction items you may find on the ASQ:SE-2 questionnaires are:

- Does your baby seem to enjoy watching or listening to people? For example, does he turn his head to look at someone talking?

- Does your child talk or play with other adults she knows well?

- Does your child play next to other children?