

WHAT IS NORMAL BEHAVIOR?

Many caregivers and parents find it difficult to know if a child is "normal" or in need of special help. Below are some suggestions for evaluating a child's behavior in determining if the child needs special help. Remember to keep the child's age in mind. For example, it is normal for a one year old to suck his/her thumb, but by the age of six, this behavior should not appear. You also need to evaluate how severe the problem is. How often does it occur? It is suggested that you deal with only one behavior problem at a time.

PHYSICAL:

1. Does the child have any speech problems?
 - a. Does he/she point instead of talking?
 - b. Does he/she talk at all?
2. How coordinated are his/her small motor skills?
 - a. Can he/she draw circles, squares, etc.?
 - b. Can he/she string beads?
 - c. Can he/she cut with scissors?
3. Can the child jump, run, and tumble?
4. Are his/her visual motor skills developing (can he/she classify, tell colors, etc.)?

SELF CARE:

1. Is he/she toilet trained?
 - a. Does he/she have frequent "accidents"? How many times a day?
 - b. Does he go by himself/herself?
2. How are his/her eating patterns?
 - a. Is he/she eating solid foods?
 - b. Does he/she chew his/her food?
 - c. Does he/she have a bottle at three years of age?
3. Can he/she dress himself/herself?

INTELLECTUAL

1. How long is the child's attention span?
 - a. Can he/she sit and listen to a story?
 - b. Can he/she answer questions about the story, the field trip, etc.,?

BEHAVIOR:

1. Which child gives you the trouble?
2. Which child don't you notice?
3. Which child is always a loner?
4. Which child always has an excuse?
5. Which child must ALWAYS be first and ALWAYS win?
6. Which child does not like to get dirty?
7. Which child cannot tolerate mother separation after a normal adjustment period?
8. Which child needs extra affection?

Some typical problems which indicate the need for outside help are:

1. A child who is behaving and operating at a level significantly below his/her age level. For example, a seven-year-old boy who acts like a four-year-old in terms of his/her word knowledge, general information, dependency, and the way he/she gets along with other children.
2. A child who gets into fights constantly and is completely unruly despite your repeated efforts to help him/her settle down and be cooperative.
3. A child who looks unhappy, apathetic or fearful, cries easily, hardly speaks to anyone, and withdraws from all group participation.
4. A child who has unusually poor coordination, stumbles and falls easily, has difficulty pronouncing his/her words clearly, finds it hard to sit still for any length of time.
5. A child who persistently lies, cheats, or steals and cannot make friends with the other children.
6. A child who is tense and nervous, stutters, or bites his/her nails excessively or has temper tantrums regularly with little provocation
7. A child who make up stories all the time about himself/herself, and family which exaggerate his/her importance.
8. A child who is persistently overaggressive and destructive despite your efforts to reassure him/her and win his/her friendship.
9. A child who continually seems preoccupied with daydreaming and has little interest in what is going on around him/her.
10. A child who is extremely fussy about everything being done "just so" and in certain order or who exhibits tics.

TERMS AND DEFINITIONS:

1. **EXCEPTIONAL CHILDREN:** Those who differ from the average physically, intellectually, socially or emotionally to such a degree as to require special academic programs and/or other special services in order to perform at a level commensurate with their abilities.
2. **RETARDED:** A child who performs below the average intellectually. The retardation appears during the early childhood and the child develops various skills at a slow rate (walking, talking, etc.). Some skills may not be below average.
 - a. The child may have features which resemble the Mongolian race of Asia.
 - b. The child may be slow to sit up, pull up, crawl, walk, talk, or toilet.
 - c. The child may have difficulty eating, chewing, or swallowing.
 - d. The child may have dry, scaly skin.
 - e. The child may have an exceptionally small head and a wrinkled scalp.
 - f. Behavior of some retarded children in a group may be at extremes.

3. **GIFTED:** Children who function at a higher level intellectually than the general population. The gifted child may also be creative or have other special talents.
 - a. The child learns rapidly and easily and retains the information learned without much drill.
 - b. The child may be somewhat impatient with details as noted in hand writing, spelling, and math.
 - c. The child enjoys reading and has a rich vocabulary.
 - d. The child collects, observes, and keeps records and has a wide range of interests.
 - e. The child reasons things out and thinks clearly.
 - f. The child is friendly and has a good sense of humor.
 - g. The child may be outspoken.
 - h. The child may be restless or inattentive in a group since his/her needs are not being met with average group work.
 - i. The child excels academically.
 - j. The child may be creative or have a special talent.
 - k. The child is independent, determined, and resourceful.

4. **LEARNING DISABLED:** A child who has a learning disability has average or near average intelligence, but has problems that make it difficult to perform as if he/she had normal intelligence. The child may have problems in perceiving, forming concepts, building language, may be hyperactive and easily distracted. It may be difficult for this child to learn to read, write, spell or do mathematics.
 - a. The child appears to have at least average intelligence.
 - b. The child may be awkward and demonstrate poor coordination of fine and gross motor movements, as well as eye-hand coordination problems.
 - c. The child may be restless in aimless ways.
 - d. The child may be hyperactive.
 - e. The child may appear only to echo what is said to him/her.
 - f. The child may appear to have a hearing loss at times. (Some children with hearing disabilities do have hearing loss.)
 - g. The child may perseverate on a task or movement.
 - h. The child's drawing may appear to be disconnected.
 - i. In storytelling periods or other activities, the child may be easily distracted by his/her surroundings.
 - j. The child may have difficulty seeing objects in pictures, even though he/she has no visual problems.

5. **VISUALLY IMPAIRED:**
 - a. The child appears to be brushing something away from his/her eyes.
 - b. The child blinks more than usual.
 - c. The child rubs his/her eyes frequently.
 - d. The child squints frequently.
 - e. The child appears to frown frequently.
 - f. The child frequently turns away from or shields his/her eyes from the light.
 - h. The child has red, swollen eyes.

- i. The child frequently has sties.
 - j. The child frequently has bloodshot or watery eyes.
 - k. The child talks of things looking blurry.
 - l. The child is unable to talk about pictures that other children in a story group can see and describe.
 - m. The child frequently bumps into things.
 - n. The child turns his/her head close in a peculiar way to look at something.
6. **HEARING IMPAIRED:** Some comments that may be made about children with hearing problems are: stubborn, too engrossed in play to answer, has no need to talk since he/she is given what he/she wants, so and so in the family did not talk until he/she was four or five. Such comments may be made to the parents by well meaning people. However, the loss needs to be detected and recommendations begun early for the child to experience a life that is equal with his/her ability.
- a. The child may have lack of speech or speech that is hard to understand.
 - b. The child does not consistently respond when his/her name is called.
 - c. The child reacts only to certain kinds of sounds.
 - d. The child will look up and check visually even when playing.
 - e. The child may be checked by a doctor and be found to have abnormally formed ears.
 - f. The child may have a history of high fever illness or one of diseases, ear infections, etc.
 - g. The child may watch other children on group activity and then copy what he/she sees.
 - h. The child may appear to be inattentive. (Remember--he/she does not know some of the rules if he/she was born with a hearing loss.)
 - i. The child may talk louder than his/her peers. (This is especially true of the child in the hard of hearing range. The deaf child may make "funny" sounds with his/her voice.)
 - j. The child asks for some things to be repeated.
6. **CRIPPLED:** A child who has malformations of malfunctions of the bones, joints, or muscles is said to be crippled or to have orthopedic problems.
- a. The infant is unable to suck properly.
 - b. The child has difficulty sitting, pulling up, crawling, or walking.
 - c. The child's temperature may suddenly go very high. He/she may develop a rash and may feel pain or tenderness in one or more joints.
 - d. The child may have a tingling sensation in fingers, hands, or feet.
 - e. The child has unexplained weight loss.
 - f. The child, after learning, begins to be unable to drink through a straw.
 - g. The child may have a "flat" smile.
 - h. The child may have poor speech.
 - i. The child may have poor balance.
 - j. The child may have an unusual gait when walking.
 - k. The child may have unusual movements over which he/she appears to have no voluntary control.

7. **CHRONICALLY ILL:** A child who has an ongoing disease for which there is no known cure: diabetes, heart disease, allergies, kidney disorders, cancer, etc.
- Parents may comment that a child tastes salty when kissed.
 - The child may seem to be unable to get rid of a cough or cold.
 - The child may fail to gain weight.
 - The child may frequently complain or pains in a specific place.
 - The child may have rapid breathing or wheezing.
 - The child's stomach may become swollen.
 - The child may seem to be dizzy.
 - The child may have a birthmark or mole that changes in appearance.
 - The child may have nausea or vomiting for no apparent reason.
 - The child's bathroom habits may change.
 - The child may have a blood discharge of any type.
8. **SPEECH IMPAIRED:** Speech is said to be impaired when it is so different from the speech of other people that it is noticeable and causes the child to be poorly adjusted.
- ARTICULATION DISORDERS**
- Omissions--Omitting a letter of sound in any position.
 - Substitution--The speaker may put in incorrect sounds.
 - Distortions--The speaker does not clearly say a sound.
 - Additions--The speaker adds sounds.
 - Stuttering--The speaker may hesitate, repeat, prolong, or block sounds.
- VOICE DISORDERS**
- Pitch--the speaker may consistently speak in a voice higher or lower than normal.
 - Loudness--the speaker's voice may be consistently too loud or too soft.
 - Quality--the speaker may have a breathy, harsh, hoarse, or nasal sounding voice.
 - Duration--the speaker may take a longer or shorter period of time to say sounds or words or before pauses.
9. **EMOTIONALLY DISTURBED:** When a child's reactions to self, environment, or other people is inappropriate and unacceptable to peers and adults.
- The child may be extremely shy or very outgoing.
 - The child may like objects better than people.
 - The child may find changes unpleasant.
 - The child may require much attention to complete a task.
 - The child may dislike school.
 - The child may fail for no apparent reason.
 - The child may be jealous.
 - The child may be overly-competitive.
 - The child may be very unhappy.

10. **SOCIALLY MALADJUSTED:** When a child is unable or refuses to behave by standards of conduct set up in the school.
- a. The child may be a member of a family that rejects the children, does not respect authority, is not stable, and does not provide consistent discipline.
 - b. The child may be hostile, defiant, resentful, suspicious, stubborn, unconventional, and disruptive.
 - c. The child may be truant from school.
 - d. The child may misbehave to gain notice and acceptance from peers.
 - e. The child refuses to meet standards of conduct.