1

IN A DAYCARE SETTING

Considering all the elements involved in a child's day

Child

- Chronological age
- Brain maturation
- Neurodiversity/ Sensitivity
- Level of emotional and social development
- Family history (trauma)
- Stuck or guarded emotionally
- Etc.

Context

- Physical impact of the space
- Sensory input
- Level of structure/ predictability
- Social impact (makeup of the group, dynamics with peers)
- Opportunities for the children to release
- Support from other staff

Adult

- Relationship with the child (engaged their attachment)
- Level of stress
- Level of insight
- Capacity to be reflective
- Preventive vs. reactive
- Aim at co-regulation vs. behaviour management
- Type of response (posture, tone, etc.)

Outcome

- Shift in child/adult dynamic
- Possibly an escalation or a de-escalation in the child's behaviour
- Outcome becomes problematic or is resolved
- Debrief/follow-up?

2

PART 1: Making Sense of the Child

3

THE CHILD

Self-reflection question (2min)

- When students are dysregulated, how do I typically interpret their behavior?

4

COMMON CHALLENGES WITH THE ADULT'S RESPONSE:

The child is:
- not listening
- being aggressive
- etc.

=

How can I stop/fix it?

THE PROBLEM:
child's behaviour

THE ANSWER:
behavioural strategy

5

COMMON MYTHS AND MISCONCEPTIONS ABOUT CHILDREN'S BEHAVIOUR

1. The child's reaction came out of nowhere; they had no reason to behave like that.
2. Children can choose to behave properly.
3. This has happened before; the child should get it by now.
4. Children should be able to ask for help when they need it.
5. The child has no excuse to behave that way; they don't have a history of trauma nor a diagnosis.
6. Children who are not disciplined will never learn.
7. We must address the inappropriate behaviour immediately, if not we're giving it permission.
8. Managing emotions has to be taught and the goal of SEL is self-regulation.

Children's behaviour is communication.
Understanding the why helps us respond with empathy and support.

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What is wrong with this student?
What We See
Defiance
Withdrawal
Constant Interruptions
Refusal
What might be going on for this student?
What is Being Communicated
Sensory overload
Fear
Unmet relational needs
Reliving a traumatic memory
Behavior is never random. It is a last-resort attempt to communicate an unmet need.
All behavior is a form of communication, and all communication is an opportunity for connection.
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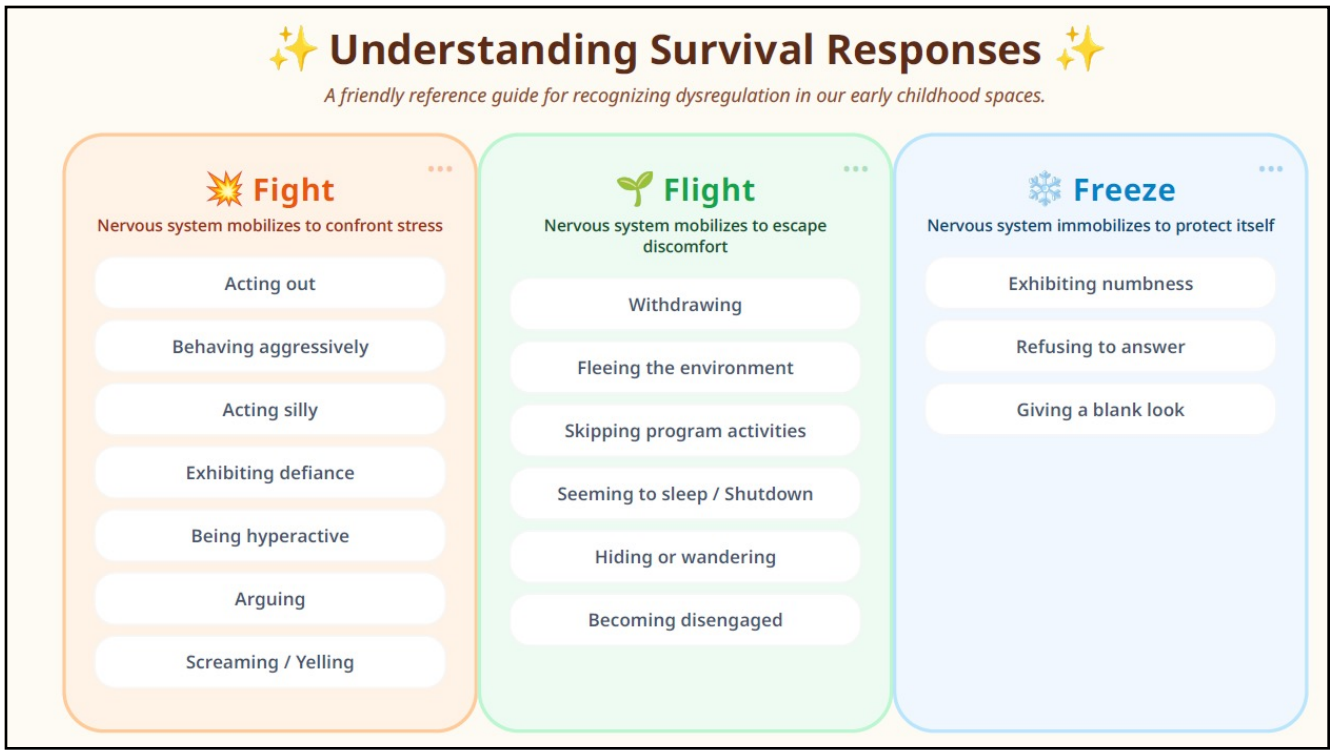
✨ Understanding Survival Responses ✨
A friendly reference guide for recognizing dysregulation in our early childhood spaces.
💥 Fight
Nervous system mobilizes to confront stress
Acting out
Behaving aggressively
Acting silly
Exhibiting defiance
Being hyperactive
Arguing
Screaming / Yelling
🌱 Flight
Nervous system mobilizes to escape discomfort
Withdrawing
Fleeing the environment
Skipping program activities
Seeming to sleep / Shutdown
Hiding or wandering
Becoming disengaged
❄️ Freeze
Nervous system immobilizes to protect itself
Exhibiting numbness
Refusing to answer
Giving a blank look

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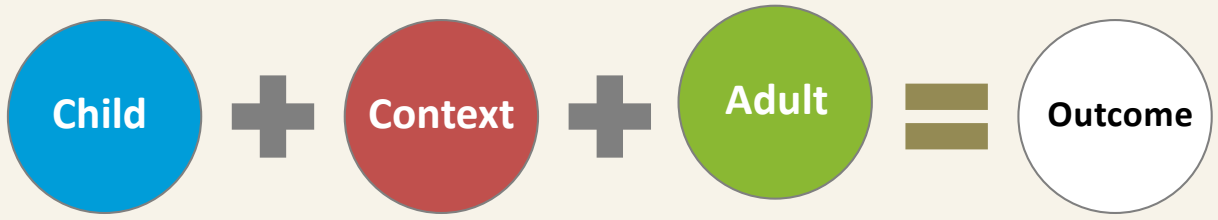
LET'S SHIFT THE QUESTION:



What is the child trying to communicate?

What do I know about this child?

How is the context impacting the situation?

Is support available?

What is going on with me in this current situation?

How can this be addressed preventively?

9

The Lens Shift: From Management to Support

Traditional Lens	Co-Regulation Lens
What's wrong with this student?	What is happening for this student?
How do I stop this behavior?	What does this behavior communicate?
How do I gain compliance?	How do I create safety?
How do I enforce consequences?	How do I support regulation and learning?

This perspective does not eliminate responsibility; it recognizes that students are most capable of taking responsibility when they feel safe and connected.

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PART 1:

THE CHILD

- Chronological age
- Brain maturation (capacity for perspective taking)
- Neurodiversity/ Sensitivity
- Level of emotional and social development
- Family history (trauma)
- Stuck or guarded emotionally
- Capacity to cope and adapt
- Other individual differences

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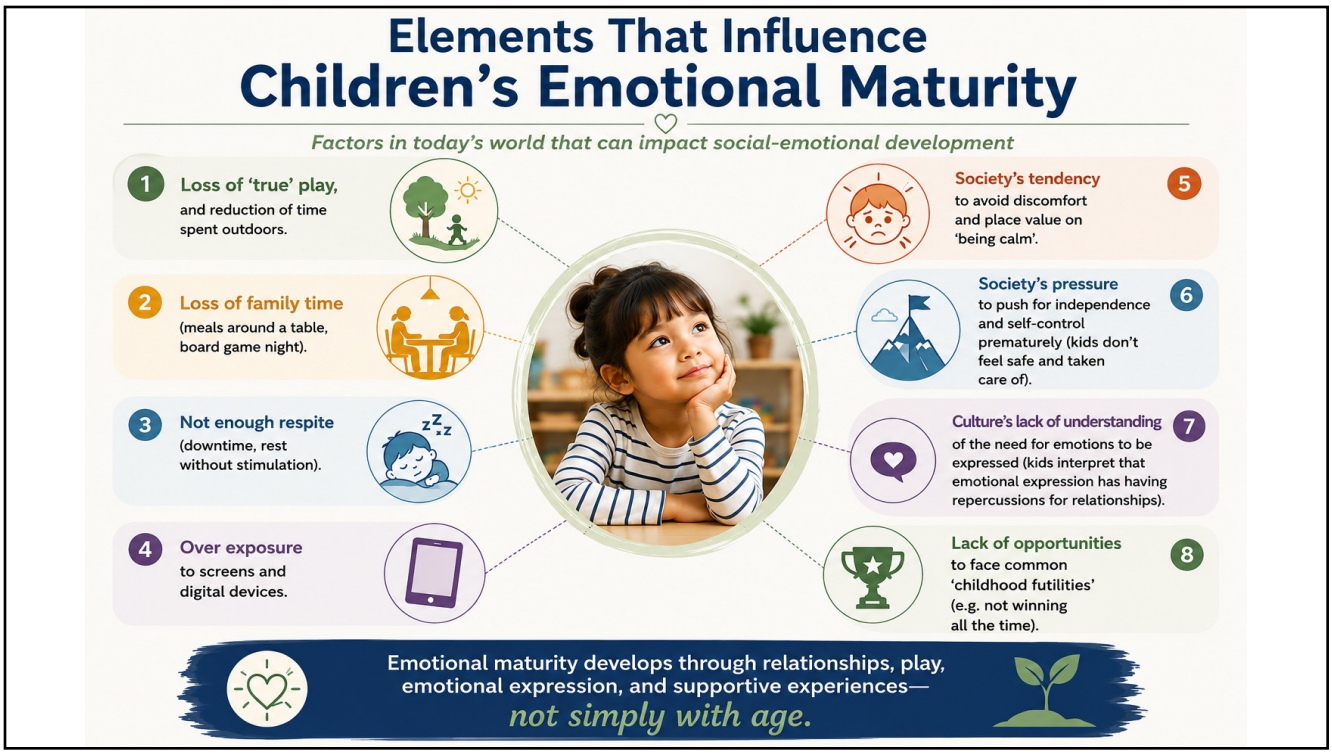

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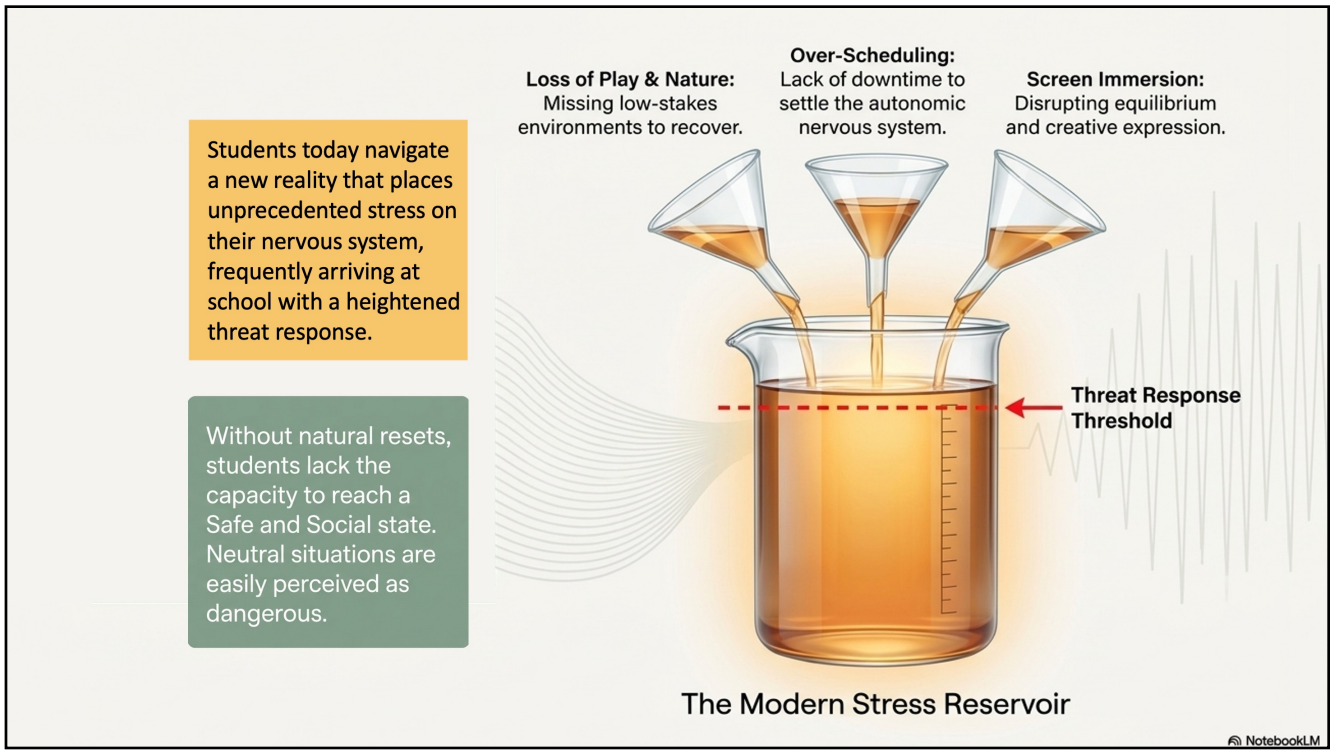

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VULNERABLE CHILDREN EXPERIENCE STRESS ALL DAY LONG

- Chronological age
- Neurodiversity/ Sensitivity
- Trauma

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THE CHILD

Individual exercise (10 min)

Student Experience Mapping:
Imagine a full school day from the perspective of a vulnerable student **and consider how their environment impacts them.**

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Judgment last to develop

The area of the brain that controls "executive functions" — including weighing long-term consequences and controlling impulses — is among the last to fully mature.
Brain development from childhood to adulthood:

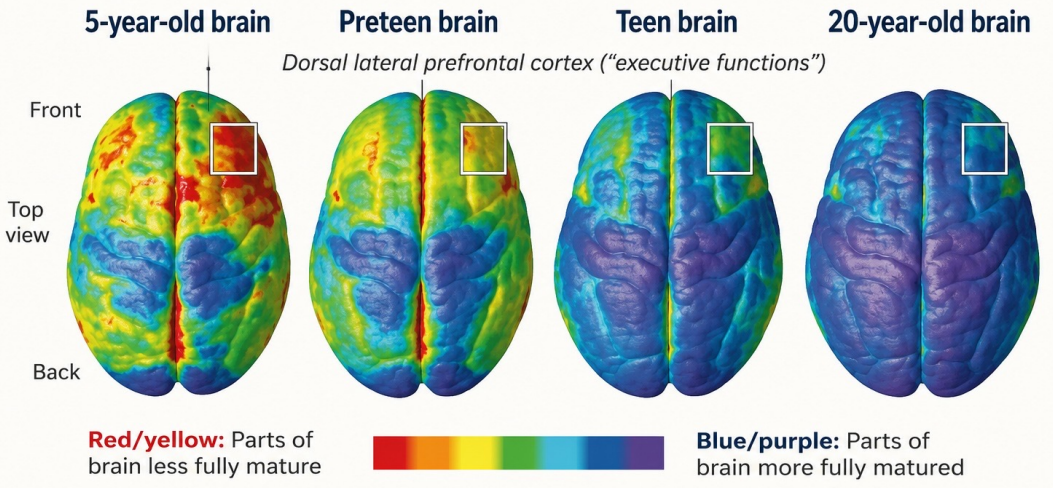

Image from the National Institute of Mental Health; Paul Thompson, Ph.D., UCLA Laboratory of Neuro Imaging

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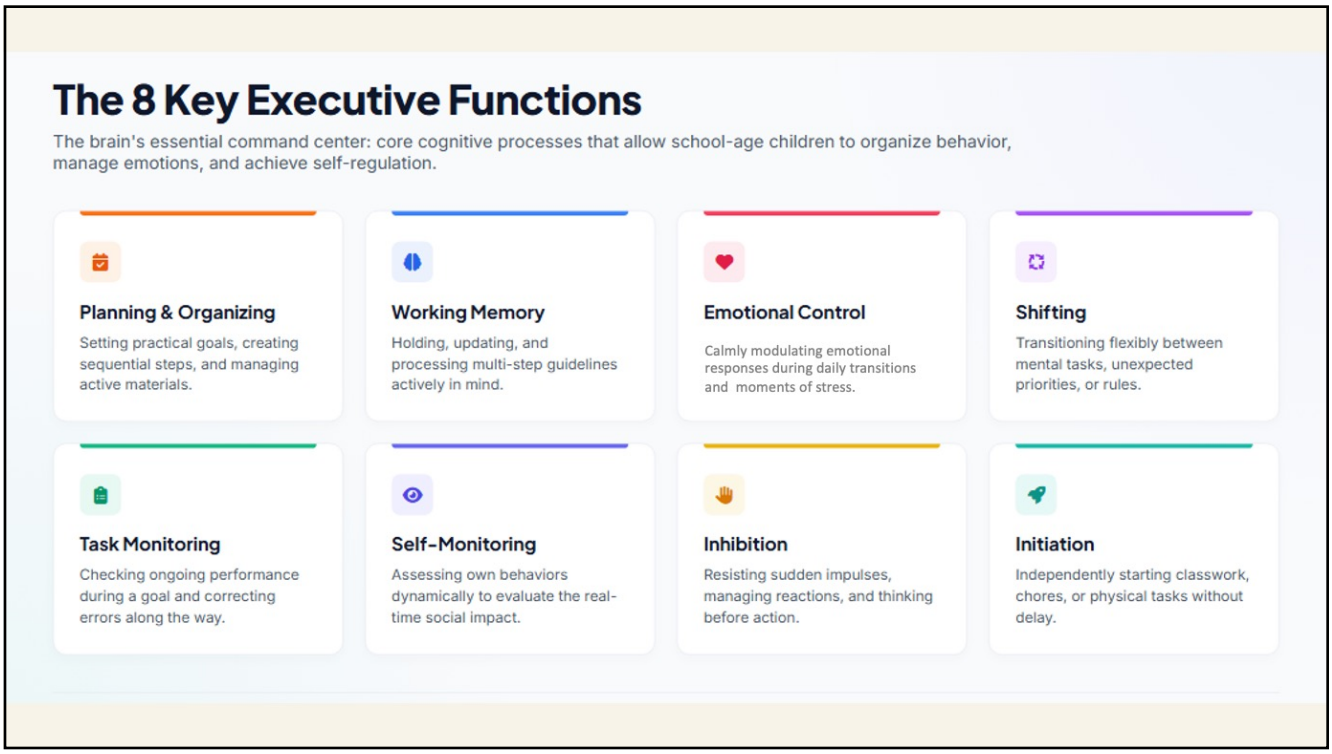
The 8 Key Executive Functions
The brain's essential command center: core cognitive processes that allow school-age children to organize behavior, manage emotions, and achieve self-regulation.
Planning & Organizing
Setting practical goals, creating sequential steps, and managing active materials.
Working Memory
Holding, updating, and processing multi-step guidelines actively in mind.
Emotional Control
Calmly modulating emotional responses during daily transitions and moments of stress.
Shifting
Transitioning flexibly between mental tasks, unexpected priorities, or rules.
Task Monitoring
Checking ongoing performance during a goal and correcting errors along the way.
Self-Monitoring
Assessing own behaviors dynamically to evaluate the real-time social impact.
Inhibition
Resisting sudden impulses, managing reactions, and thinking before action.
Initiation
Independently starting classwork, chores, or physical tasks without delay.

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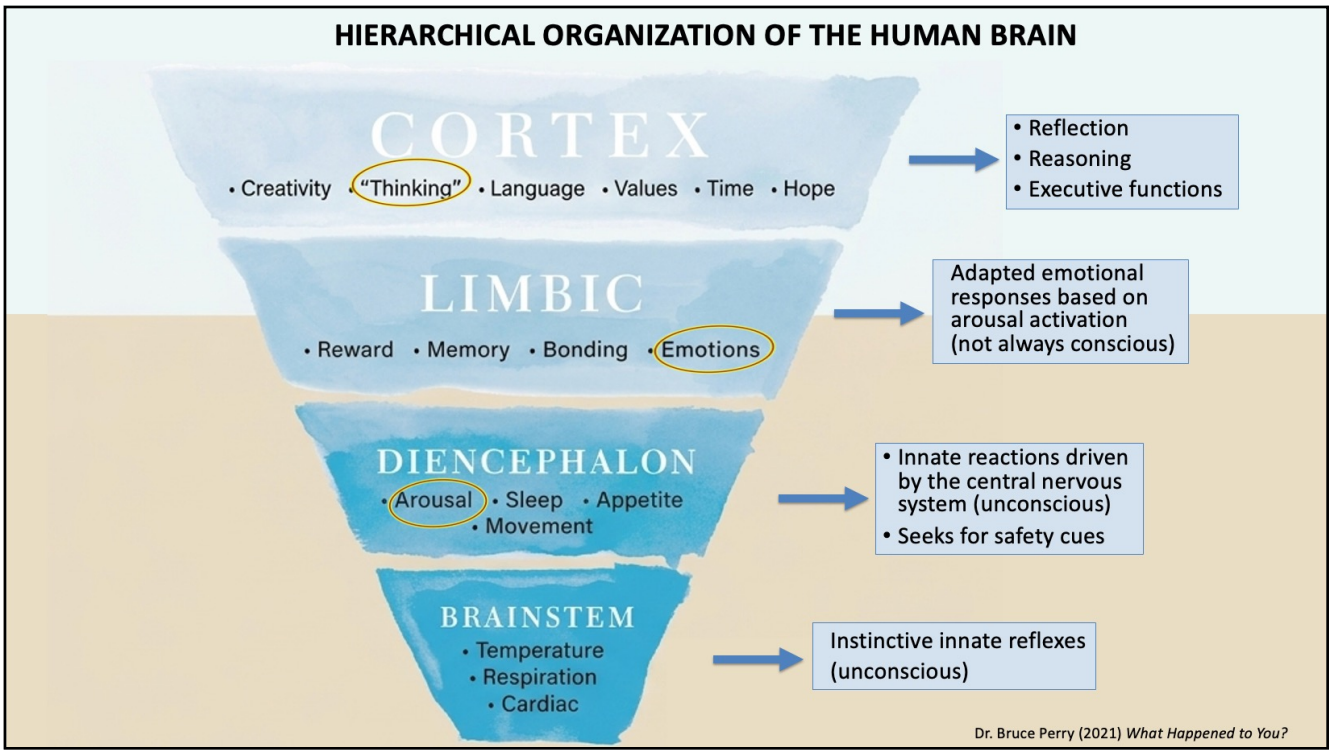
HIERARCHICAL ORGANIZATION OF THE HUMAN BRAIN
CORTEX
• Creativity • "Thinking" • Language • Values • Time • Hope
• Reflection
• Reasoning
• Executive functions
LIMBIC
• Reward • Memory • Bonding • Emotions
Adapted emotional responses based on arousal activation (not always conscious)
DIENCEPHALON
• Arousal • Sleep • Appetite • Movement
• Innate reactions driven by the central nervous system (unconscious)
• Seeks for safety cues
BRAINSTEM
• Temperature
• Respiration
• Cardiac
Instinctive innate reflexes (unconscious)
Dr. Bruce Perry (2021) What Happened to You?

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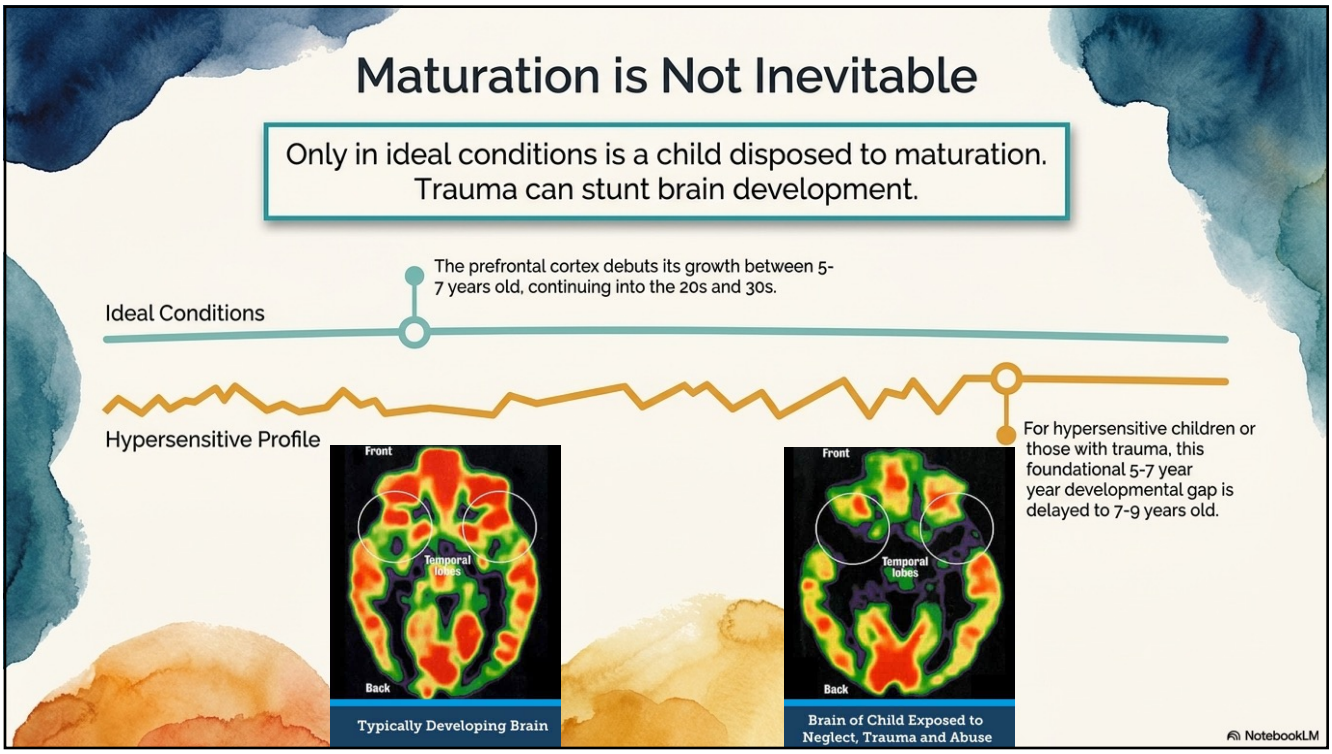
Maturation is Not Inevitable
Only in ideal conditions is a child disposed to maturation. Trauma can stunt brain development.
The prefrontal cortex debuts its growth between 5-7 years old, continuing into the 20s and 30s.
Ideal Conditions
Hypersensitive Profile
For hypersensitive children or those with trauma, this foundational 5-7 year year developmental gap is delayed to 7-9 years old.
Front
Temporal lobes
Back
Typically Developing Brain
Front
Temporal lobes
Back
Brain of Child Exposed to Neglect, Trauma and Abuse
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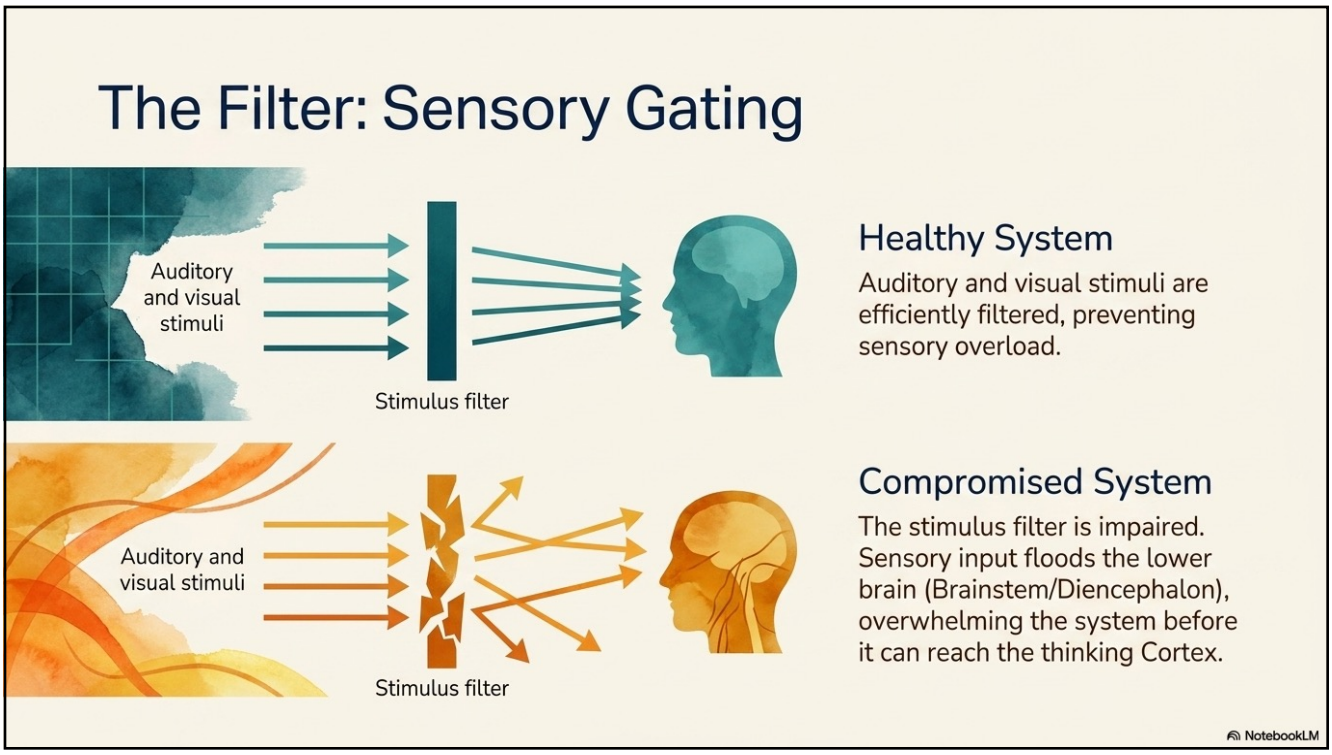
The Filter: Sensory Gating
Auditory and visual stimuli
Stimulus filter
Healthy System
Auditory and visual stimuli are efficiently filtered, preventing sensory overload.
Auditory and visual stimuli
Stimulus filter
Compromised System
The stimulus filter is impaired. Sensory input floods the lower brain (Brainstem/Diencephalon), overwhelming the system before it can reach the thinking Cortex.
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NEUROLOGICAL PROFILES

Sensory Processing Profiles

SENSORY SENSITIVE

Over-Responsive

Input feels too intense

- Covers ears to block or escape loud sudden noises
- Exhibits fear or distress from daily environmental sounds
- Highly sensitive to tactile stimuli like clothing fabrics
- Prefers low light and avoids direct eye contact

LOW REGISTRATION

Under-Responsive

Input is missed or un-processed

- Difficulty tracking directions; benefits from repetition
- Generates own acoustic stimuli (humming or self-talk)
- Often fails to notice minor bumps, pushes, or touches
- Appears disconnected from immediate physical surroundings

SEEKS INPUT

Sensory Craving

Actively searches for intense sensation

- Prefers devices and TV at high, intense volumes
- Struggles to control talking pace or take turns
- Constantly touches external textures and surfaces
- Unintentionally invades others' personal boundaries

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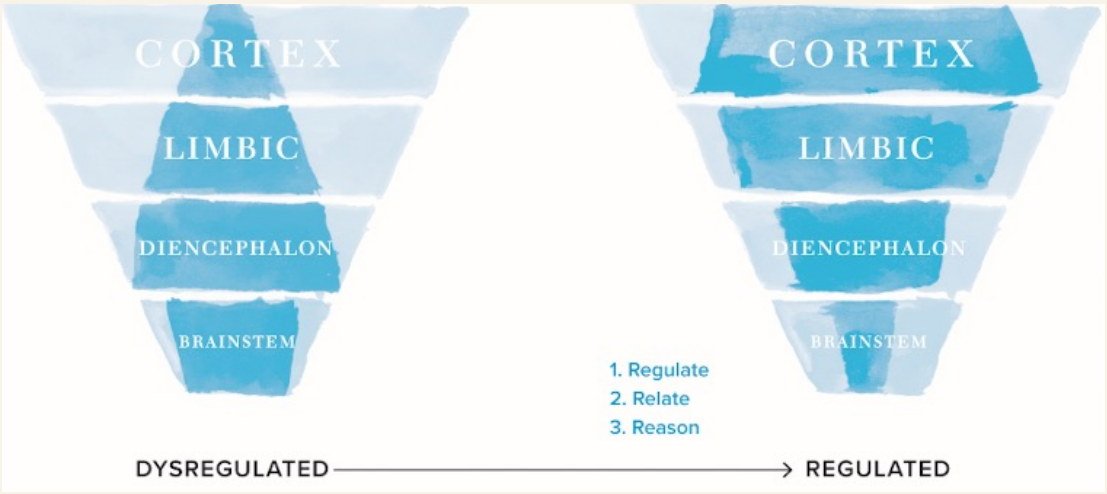

Neuroscience has helped dispel the myth that we need to think better to behave better.

When children are dysregulated, they have lesser access to their 'thinking brain'. Therefore, the key is rather helping children feel safe and grounded through structure/routine, predictability and adult support/co-regulation.

Dr. Bruce Perry (2021) *What Happened to You?*

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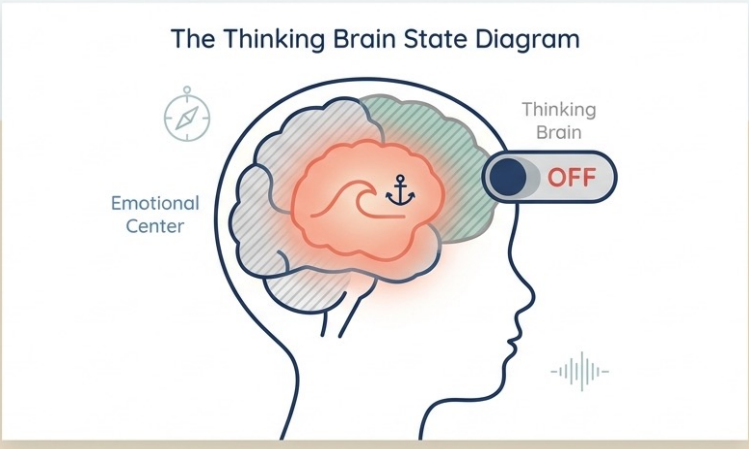
The thinking brain shuts down during emotional distress

When a child is overwhelmed, their thinking brain is not fully working. They cannot process logic, learn lessons, or answer questions.



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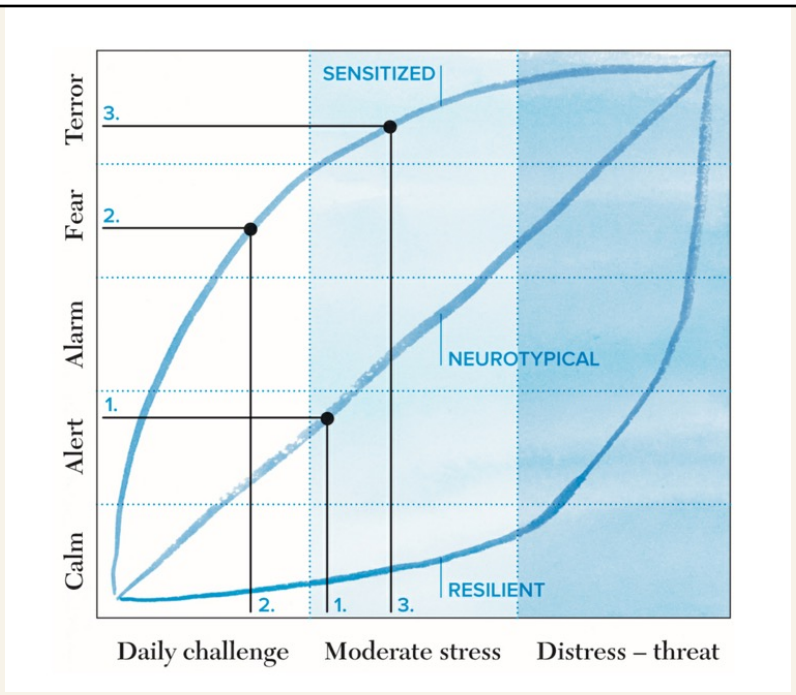

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THE CHILD

Small group activity (10 min)

Expectations vs. Biology:
Refer to the brain scans of the "Youth Brain" (amygdala) next to the "Adult Brain" (prefrontal cortex). Have a group discussion about specific rules or expectations in your setting that might be demanding adult-level emotional regulation from brains that physically have not built those pathways yet.

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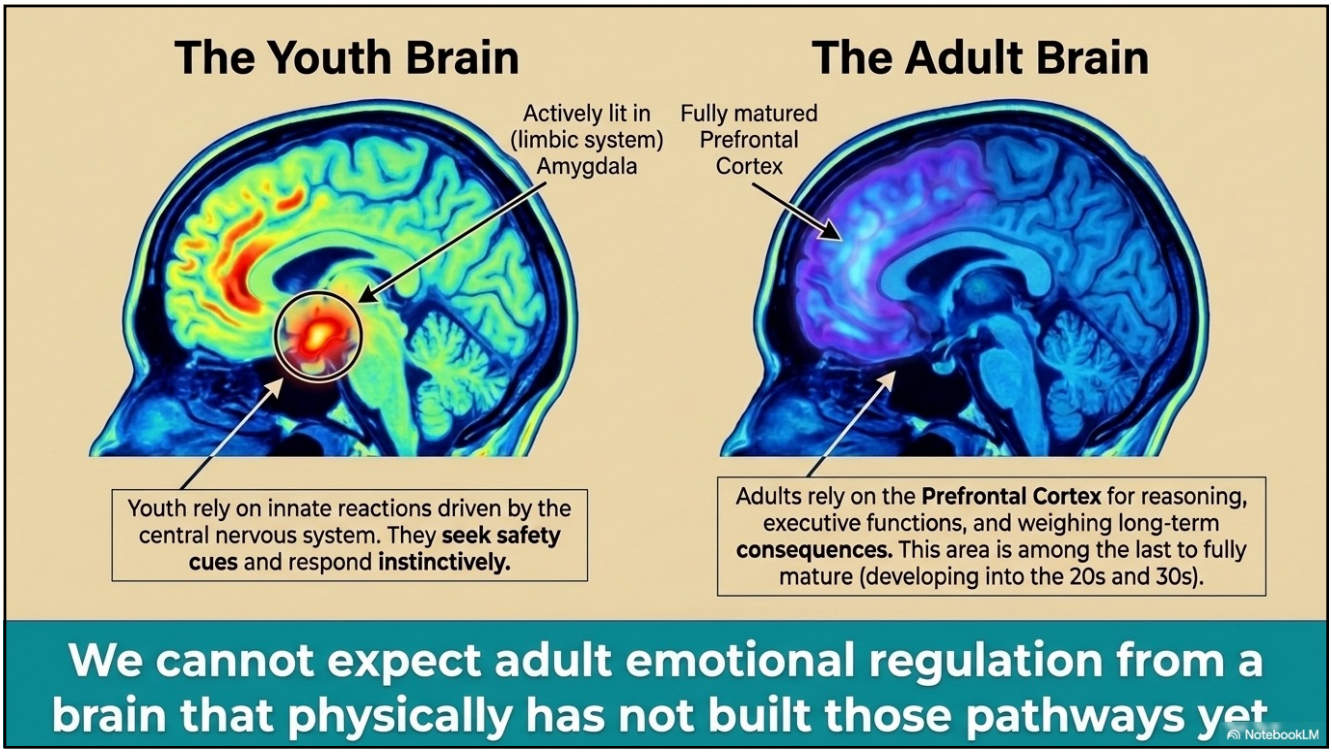

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