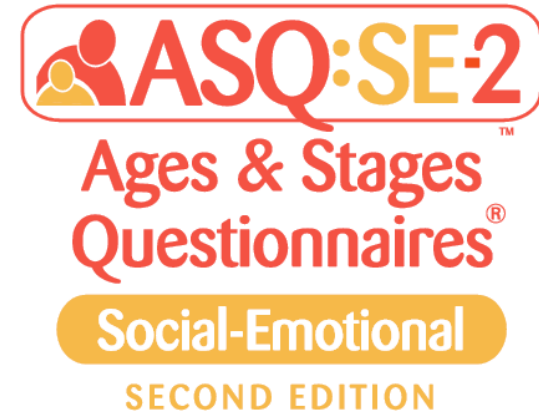


# An Introduction to ...



Dina Hartford-Stipetic, Educational Consultant  
Early Intervention Technical Assistance

## Training Objectives



- Choose one new strategy for engaging families in screening activities
- Describe three purposes of universal screening
- List the basic steps of completing and scoring the ASQ tools
- Identify resources to share with results and follow-up activities with families

## Screening

- a quick snapshot of a child's overall behavior and development
- assists with identification of children who **may need** further evaluation

## Evaluation

- determines the existence of a delay or disability and eligibility for services
- identifies a child's strengths and needs across all areas of development.

## Assessment

- an ongoing review of a child's development over time
- Identifies present levels and what to expect next in development

## Why Universal Screening is Important

- Identifies delays early
- Helps to ensure better futures
- Recommended by AAP
- Helps parents take active role
- Boosts parent-child bonding
- It is easy and quick

## 6 things every parent should know about developmental screening

- **It identifies delays early**, when interventions can help the most.
- **It helps ensure better futures.** Studies show\* that children who receive early treatment for developmental delays are more likely to graduate from high school, hold jobs, and live independently.
- **It's recommended by the AAP.** The American Academy of Pediatrics recommends that *all* infants and young children be screened for delays as a regular part of their ongoing health care.
- **It helps parents take an active role in guiding child development.** Using a parent-completed screener like ASQ gives parents a chance to share their unique insights about their child and learn more about key developmental milestones.
- **It boosts parent-child bonding.** Parent-completed screenings are a great bonding experience for parents and children. (ASQ also offers fun and effective learning activities parents and children can do together between screenings.)
- **It's easy and quick.** Screening isn't a long, time-intensive process. It can be completed in many settings, from homes to a doctor's waiting room, and parents can fill out most screening questionnaires in under 15 minutes.

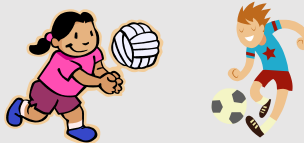


# Universal Screening

**Beyond Cutoff**  
*(high risk)*

**Monitor Area**  
*(low risk)*

**Not Near cutoff**  
*(no risk)*



**Refer to EI for**  
**Evaluation**

**Monitor (re-screen) &**  
**On-Going Assessment**

**Eligible for EI**

**Mild delay or on-schedule**

## What are the ASQ-3 and ASQ:SE-2?

- Parent or caregiver completed **developmental screening** tools that encourage discussion of children's development
- Used to **accurately identify children at risk** for developmental or social-emotional delay

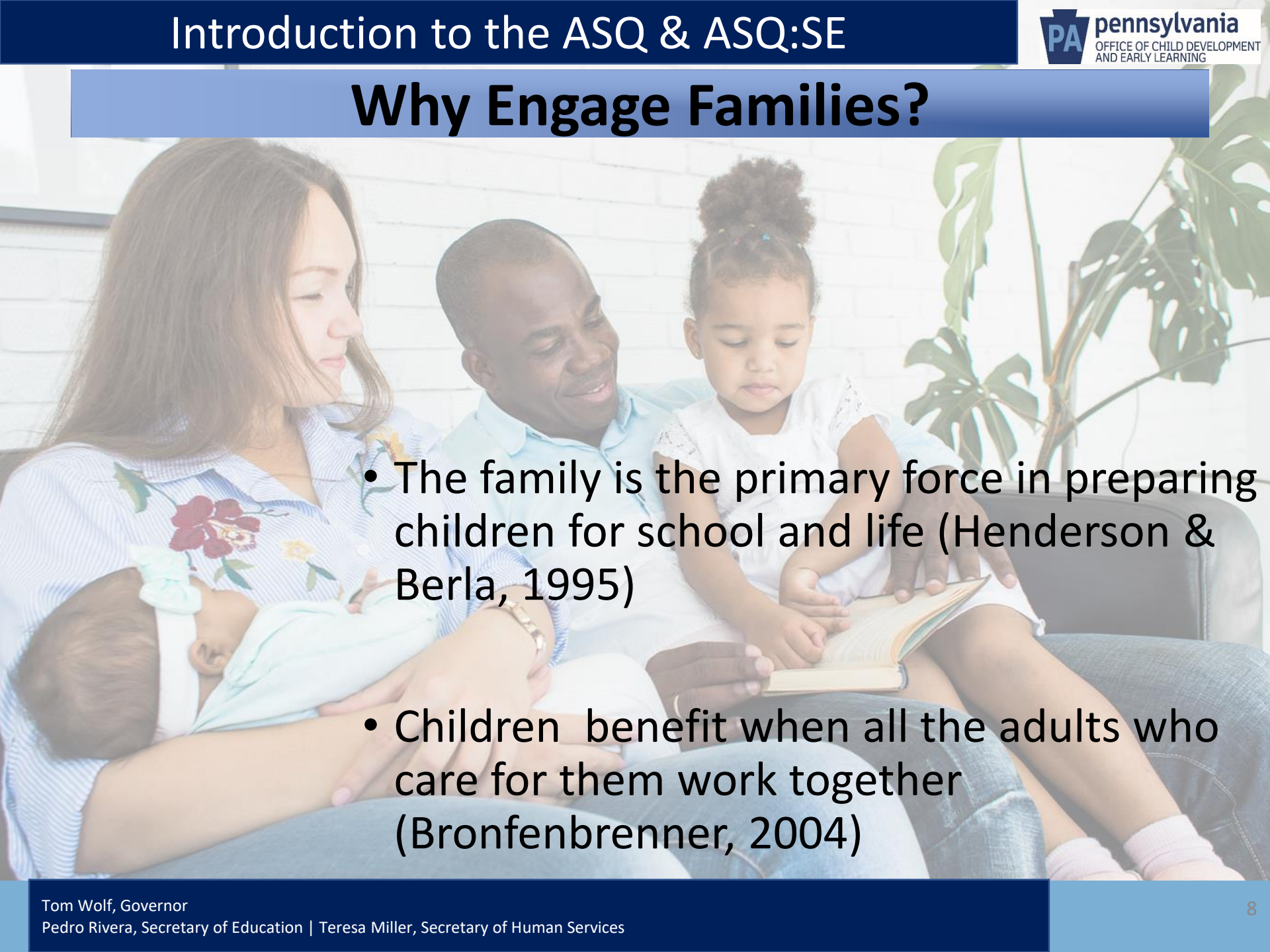
## Parent Completed Tool

- Parents are the experts on their children...Research supports this!
- Creates an expectation that parents will share knowledge about their children
- 93% agreement between parents and professionals on the ASQ-3





## Why Engage Families?

- 
- The family is the primary force in preparing children for school and life (Henderson & Berla, 1995)
  - Children benefit when all the adults who care for them work together (Bronfenbrenner, 2004)



# Provide Appropriate Level of Support

- Low literacy
- Cultural and language differences
- Impaired mental functioning
- Mental health issues
- Involvement with child protective agencies

<https://agesandstages.com/wp-content/uploads/2017/10/Helping-Parents-Complete-ASQ.pdf>

## MIECHV Performance Indicators/Outcomes

III – School Readiness and Achievement	12. Developmental Screening	Performance Indicator	Percent of children enrolled in home visiting with a timely screen for developmental delays using a validated parent-completed tool	Number of children (index child) enrolled in home visiting with at least one screening within the AAP-defined age groups during the reporting period	Number of children (index child) enrolled in home visiting reaching the specified time frame during the reporting period
III – School Readiness and Achievement	13. Behavioral Concerns	Performance Indicator	Percent of home visits where primary caregivers were asked if they have any concerns regarding their child’s development, behavior, or learning	Number of home visits where primary caregivers enrolled in home visiting were asked if they have any concerns regarding their child’s development, behavior, or learning	Total number of home visits during the reporting period
VI – Coordination and Referrals	18. Completed Developmental Referrals	Systems Outcome	Percent of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool) who receive services in a timely manner	Number of children enrolled in home visiting who a) received individualized developmental support from a home visitor; b) were referred to early intervention services and received an evaluation within 45 days; OR c) were referred to other community services who received services within 30 days (and met the conditions specified in the denominator)	Number of children enrolled in home visiting with positive screens for developmental delays (measured using a validated tool)

# Similarities and Differences Between



The ASQ<sup>®</sup>-3 and ASQ<sup>®</sup>:SE-2 tools help parents and professionals to build a picture of children's development and abilities. While these tools share some common features, they also have unique differences that are important to know!

## Similarities

- Parent-completed
- Used in **diverse settings** (early learning, parenting, pediatrics, public health)
- **Flexible administration** (print, online, with or without support)
- Written at 4<sup>th</sup>–6<sup>th</sup> grade reading levels
- **Culturally sensitive**
- **Screening process** opens discussion with parents about child's development
- **Monitoring zone** points to areas that would benefit from practice or support
- **Referral area** indicates need for ongoing assessment (and possible services)
- **Overall section** captures parent concerns, qualitative details about child's skills/behavior
- **Follow-up** includes parent concerns
- Extensively researched with **high reliability and validity**

## Unique features of



- Screens **5 developmental areas**
- **21 questionnaire intervals** screen from 1–66 months
- **Number of items consistent** across questionnaire intervals
- Items address **competence skills**
- Item response options: **Yes, Sometimes, Not Yet**
- Scoring of item responses is **consistent**
- Before answering, **items must be tried** with child
- Answers based on **observation of child's skills**
- Results of multiple questionnaires (parent, teacher, other caregiver) **can be combined** for scoring
- Scores **below cutoff** in any area indicate need for **follow-up**

## Unique features of



- Screens **1 developmental area**
- **9 questionnaire intervals** screen from 1–72 months
- **Number of items varies** across questionnaire intervals
- Items mix **social competence and problem behaviors**
- Item response options: **Often or Always, Sometimes, Rarely or Never**
- Scoring of item responses **varies**
- Items may be **answered based on recent memory of child's behavior**
- Answers based on **observation and personal interpretation of behavior**
- Results of multiple questionnaires (parent, teacher, other caregiver) **should not be combined** for scoring
- Scores **above cutoff** indicate need for **follow-up**

Learn more about the ASQ tools at [www.agesandstages.com](http://www.agesandstages.com)

## Developmental Areas/Domains

- **Communication:** Your child's language skills, both what your child understands and what he can say
- **Gross motor:** How your child uses his or her arms and legs and other large muscles for sitting, crawling, walking, running, and other activities
- **Fine motor:** Your child's hand and finger movement and coordination
- **Problem solving:** How your child plays with toys and solves problems
- **Personal-social:** Your child's self-help skills and interactions with others







**Social Emotional Domain**

## Behavioral Areas

- Self Regulation
- Compliance
- Adaptive Functioning
- Autonomy
- Affect
- Social Communication
- Interaction with People



# Let's review the






## Parts of each questionnaire Family Information Sheet

21

different questionnaires/age intervals



**ASQ-3** Ages & Stages  
Questionnaires®

**18** 17 months 0 days through 18 months 30 days  
Month Questionnaire

Please provide the following information. Use black or blue ink only and print legibly when completing this form.

Date ASQ completed: \_\_\_\_\_

**Child's information**

Child's first name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Child's last name: \_\_\_\_\_

Child's date of birth: \_\_\_\_\_

If child was born 3 or more weeks prematurely, # of weeks premature: \_\_\_\_\_

Child's gender:  Male  Female

**Person filling out questionnaire**

First name: \_\_\_\_\_ Middle Initial: \_\_\_\_\_ Last name: \_\_\_\_\_

Street address: \_\_\_\_\_

Relationship to child:

Parent  Grandparent or other relative  Guardian  Foster parent  Teacher  Other  Child care provider

City: \_\_\_\_\_ State/Province: \_\_\_\_\_ ZIP Postal code: \_\_\_\_\_

Country: \_\_\_\_\_ Home telephone number: \_\_\_\_\_ Other telephone number: \_\_\_\_\_

E-mail address: \_\_\_\_\_

Names of people assisting in questionnaire completion: \_\_\_\_\_

**Program Information**

Child ID #: \_\_\_\_\_ Age at administration in months and days: \_\_\_\_\_

Program ID #: \_\_\_\_\_ If premature, adjusted age in months and days: \_\_\_\_\_

Program name: \_\_\_\_\_

>101180100

Ages & Stages Questionnaire®, Third Edition (ASQ-3™) Squires & Bricker  
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# ASQ-3 Features

- Each questionnaire:  
5 domains with 6 questions
- Questions ordered from easy to more difficult
- Questions #5 and #6 are **average skills** for child that age
- 3 response options:  
Yes, Sometimes, Not Yet

## PROBLEM SOLVING

	YES	SOMETIMES	NOT YET	
1. Does your baby pass a toy back and forth from one hand to the other?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
2. Does your baby pick up two small toys, one in each hand, and hold onto them for about 1 minute?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
3. When holding a toy in his hand, does your baby bang it against another toy on the table?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
4. While holding a small toy in each hand, does your baby clap the toys together (like "Pat-a-cake")?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
5. Does your baby poke at or try to get a crumb or Cheerio that is inside a clear bottle (such as a plastic soda-pop bottle or baby bottle)?	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
6. After watching you hide a small toy under a piece of paper or cloth, does your baby find it? (Be sure the toy is completely hidden.)	<input type="radio"/>	<input type="radio"/>	<input type="radio"/>	—

PROBLEM SOLVING TOTAL —

## Overall section

- Includes open-ended questions and no scoring
- Focuses on health and developmental issues (hearing, vision, behavior), quality of a child's skills, and general parent concerns that may require follow-up



### OVERALL

Parents and providers may use the space below for additional comments.

1. Do you think your child hears well? If no, explain:  YES  NO

2. Do you think your child talks like other toddlers his age? If no, explain:  YES  NO

3. Can you understand most of what your child says? If no, explain:  YES  NO

4. Do you think your child walks, runs, and climbs like other toddlers her age? If no, explain:  YES  NO

5. Does either parent have a family history of childhood deafness or hearing impairment? If yes, explain:  YES  NO

6. Do you have concerns about your child's vision? If yes, explain:  YES  NO

## Information Summary sheet

Age interval and brief identifying information

Basic instructions for scoring and bar graph to record scores for each area and indicate where score falls in relation to cutoff

Abbreviated overall section

Place to record follow-up decisions and actions

### 18 Month ASQ-3 Information Summary

17 months 0 days through 18 months 30 days

---

Child's name: \_\_\_\_\_ Date ASQ completed: \_\_\_\_\_  
 Child's ID #: \_\_\_\_\_ Date of birth: \_\_\_\_\_  
 Administering program/provider: \_\_\_\_\_ Was age adjusted for prematurity when selecting questionnaire?  Yes  No

**1. SCORE AND TRANSFER TOTALS TO CHART BELOW:** See ASQ-3 User's Guide for details, including how to adjust scores if item responses are missing. Score each item (YES = 10, SOMETIMES = 5, NOT YET = 0). Add item scores, and record each area total. In the chart below, transfer the total scores, and fill in the circles corresponding with the total scores.

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	13.06		●	●	●	●	●	●	●	●	●	●	●	●	●
Gross Motor	37.38		●	●	●	●	●	●	●	●	●	●	●	●	●
Fine Motor	34.32		●	●	●	●	●	●	●	●	●	●	●	●	●
Problem Solving	25.74		●	●	●	●	●	●	●	●	●	●	●	●	●
Personal-Social	27.19		●	●	●	●	●	●	●	●	●	●	●	●	●

**2. TRANSFER OVERALL RESPONSES:** Bolded uppercase responses require follow-up. See ASQ-3 User's Guide, Chapter 6.

<p>1. Hears well? <span style="float: right;">Yes <b>NO</b></span> Comments: _____</p> <p>2. Talks like other toddlers his age? <span style="float: right;">Yes <b>NO</b></span> Comments: _____</p> <p>3. Understand most of what your child says? <span style="float: right;">Yes <b>NO</b></span> Comments: _____</p> <p>4. Walks, runs, and climbs like other toddlers? <span style="float: right;">Yes <b>NO</b></span> Comments: _____</p> <p>5. Family history of hearing impairment? <span style="float: right;"><b>YES</b> No</span> Comments: _____</p>	<p>6. Concerns about vision? <span style="float: right;"><b>YES</b> No</span> Comments: _____</p> <p>7. Any medical problems? <span style="float: right;"><b>YES</b> No</span> Comments: _____</p> <p>8. Concerns about behavior? <span style="float: right;"><b>YES</b> No</span> Comments: _____</p> <p>9. Other concerns? <span style="float: right;"><b>YES</b> No</span> Comments: _____</p>
---	---

**3. ASQ SCORE INTERPRETATION AND RECOMMENDATION FOR FOLLOW-UP:** You must consider total area scores, overall responses, and other considerations, such as opportunities to practice skills, to determine appropriate follow-up.

If the child's total score is in the    area, it is above the cutoff, and the child's development appears to be on schedule.  
 If the child's total score is in the    area, it is close to the cutoff. Provide learning activities and monitor.  
 If the child's total score is in the    area, it is below the cutoff. Further assessment with a professional may be needed.

**4. FOLLOW-UP ACTION TAKEN:** Check all that apply.

\_\_\_\_\_ Provide activities and rescreen in \_\_\_\_\_ months.  
 \_\_\_\_\_ Share results with primary health care provider.  
 \_\_\_\_\_ Refer for (circle all that apply) hearing, vision, and/or behavioral screening.  
 \_\_\_\_\_ Refer to primary health care provider or other community agency (specify reason): \_\_\_\_\_  
 \_\_\_\_\_ Refer to early intervention/early childhood special education.  
 \_\_\_\_\_ No further action taken at this time  
 \_\_\_\_\_ Other (specify): \_\_\_\_\_

**5. OPTIONAL:** Transfer item responses (Y = YES, S = SOMETIMES, N = NOT YET, X = response missing).

	1	2	3	4	5	6
Communication						
Gross Motor						
Fine Motor						
Problem Solving						
Personal-Social						

P101180700 Agree & Stay on Questionnaire, Third Edition (ASQ-3™), Squires & Bricker © 2009 Paul H. Brookes Publishing Co. All rights reserved.



# 6 easy steps to screening success!

**STEP 1** Choose the right questionnaire for the child's age.

Photocopy or print it...



...or use ASQ Online.

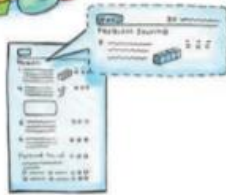
**STEP 2** Give it to the parent to complete and return.



**STEP 3** Parent fills out the questionnaire at home.



They're clear, quick, and easy to do!



**STEP 4** Score the questionnaire when the parent returns it.

Score by hand in minutes...



...or in seconds with ASQ Online.

**STEP 5** Share results with the parent.

Discuss referral options if there are developmental concerns.



**STEP 6** Give parents fun ASQ-3™ Learning Activities.

Help them boost development at home between screenings!



Screening with ASQ:  
6 Easy Steps

Step  
1

## Choose the Correct Questionnaire

There's an app for  
that!

<http://agesandstages.com/free-resources/asq-calculator/>

## Age Calculator

Always choose the right ASQ-3 questionnaire for a child's age with this quick, convenient Age Calculator on [www.agesandstages.com](http://www.agesandstages.com)!

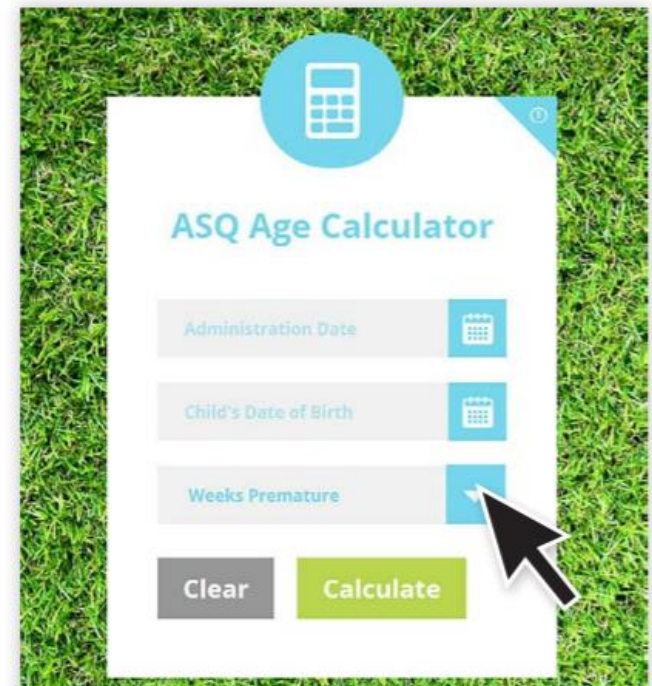
**Step 1:** Enter the date you'll administer ASQ-3

**Step 2:** Enter the child's birth date

**Step 3:** Enter how many weeks premature (if applicable)

**Step 4:** Calculate

The calculator instantly tells you which questionnaire to use!



Step  
2

## Support parent completion of tool

- Share the purpose of screening
- Give parents guidance and make them feel prepared to successfully complete a screening.
- Explain how ASQ-3 works.
- Review 3 response options on ASQ-3 questionnaires and what they mean.
- Tell parents that you'll share the results with them.

Step  
2

## Support parent completion of tool

- Questionnaires are clearly worded and easy to complete
- Written at 4<sup>th</sup> -6<sup>th</sup> grade reading level
- Some items include pictures

### PROBLEM SOLVING

1. Does your baby pick up a toy and put it in his mouth?



2. When your baby is on her back, does she try to get a toy she has dropped if she can see it?

3. Does your baby play by banging a toy up and down on the floor or table?



4. Does your baby pass a toy back and forth from one hand to the other?



5. Does your baby pick up two small toys, one in each hand, and hold onto them for about 1 minute?



6. When holding a toy in his hand, does your baby bang it against another toy on the table?



*“You are an active partner in your child’s learning and development. By completing ASQ-3 questionnaires, you are making sure your child is off to the best possible start!”*

## Review response options:

- **Yes** if your child is performing the skill
- **Sometimes** if your child is performing the skill but doesn't yet do it consistently
- **Not yet** if your child does not perform the skill yet

You will answer each question “yes,” “sometimes,” or “not yet,” based on what your child is able to do now. Your answers help show your child’s strengths and areas where he or she may need practice.

To answer each question, you can try fun and simple activities with your child. These activities encourage your child to play, move around, and practice day-to-day skills.



Step  
3

## Parent completes questionnaire

### 8 Month Questionnaire

#### COMMUNICATION

	YES	SOMETIMES	NOT YET	
1. If you call to your baby when you are out of sight, does she look in the direction of your voice?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	—
2. When a loud noise occurs, does your baby turn to see where the sound came from?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	—
3. If you copy the sounds your baby makes, does your baby repeat the same sounds back to you?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	—
4. Does your baby make sounds like "da," "ga," "ka," and "ba"?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	—
5. Does your baby respond to the tone of your voice and stop his activity at least briefly when you say "no-no" to him?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	—
6. Does your baby make two similar sounds like "ba-ba," "da-da," or "ga-ga"? (The sounds do not need to mean anything.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	—
				COMMUNICATION TOTAL —

## Score questionnaire; review overall section and interpret results

Step  
4

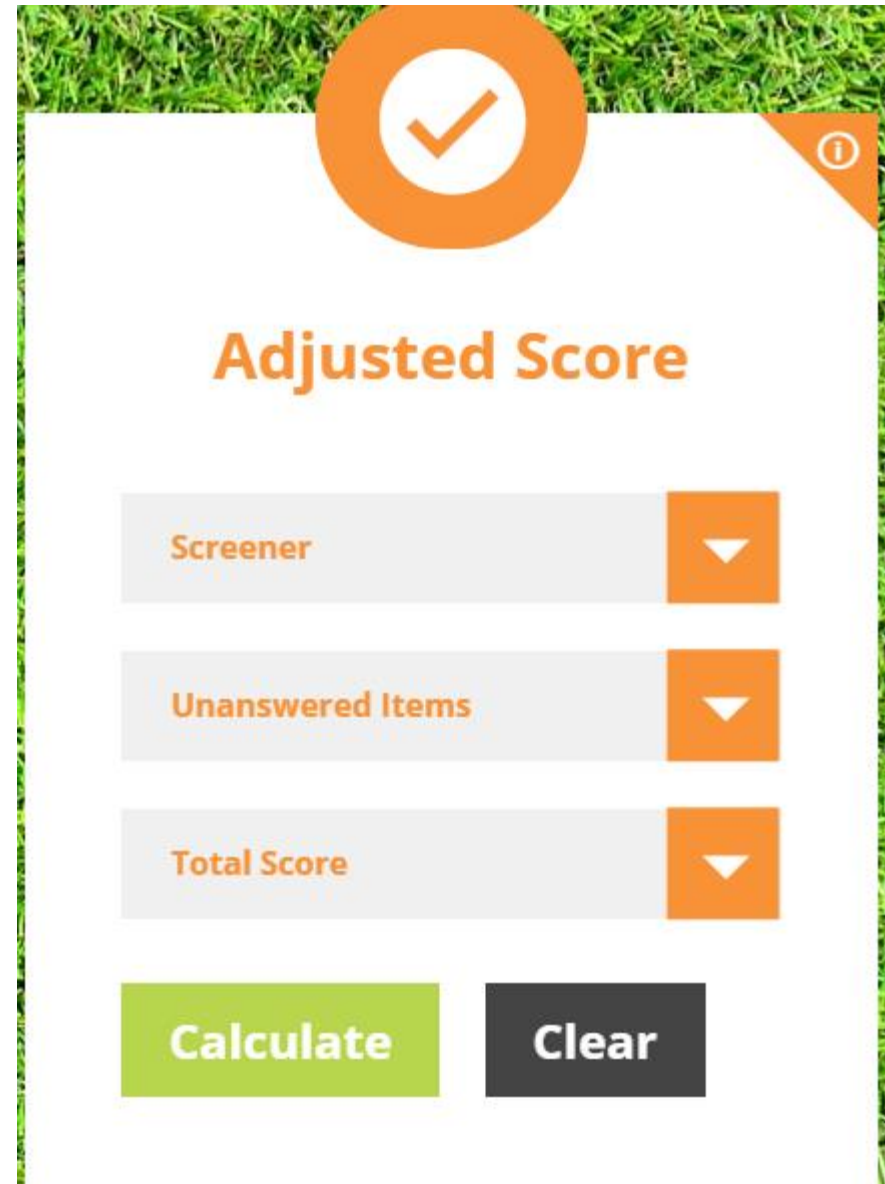
1. Review questionnaire for omitted items and attempt to get response if appropriate
2. Correct items on questionnaires with asterisks which contain specific completion instructions for hierarchy of skills (ex. 8 month gross motor)



## Scoring Domains with Omitted Items

There's an app for that!

<http://agesandstages.com/free-resources/asq-calculator/>



**Adjusted Score**

Screener

Unanswered Items

Total Score

Calculate Clear

## Let's practice scoring

### COMMUNICATION

	YES	SOMETIMES	NOT YET	
1. If you call to your baby when you are out of sight, does she look in the direction of your voice?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<u>5</u>
2. When a loud noise occurs, does your baby turn to see where the sound came from?	<input checked="" type="radio"/>	<input type="radio"/>	<input type="radio"/>	<u>10</u>
3. If you copy the sounds your baby makes, does your baby repeat the same sounds back to you?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<u>5</u>
4. Does your baby make sounds like "da," "ga," "ka," and "ba"?	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<u>0</u>
5. Does your baby respond to the tone of your voice and stop his activity at least briefly when you say "no-no" to him?	<input type="radio"/>	<input checked="" type="radio"/>	<input type="radio"/>	<u>5</u>
6. Does your baby make two similar sounds like "ba-ba," "da-da," or "ga-ga"? (The sounds do not need to mean anything.)	<input type="radio"/>	<input type="radio"/>	<input checked="" type="radio"/>	<u>0</u>
				<u>25</u>
	COMMUNICATION TOTAL			



Step  
5

## Discuss Results and Follow-up Options

Step  
6

## Share Activities & Offer Resources

**4. FOLLOW-UP ACTION TAKEN:** Check all that apply.

- Provide activities and rescreen in \_\_\_\_\_ months.
- Share results with primary health care provider.
- Refer for (circle all that apply) hearing, vision, and/or behavioral screening.
- Refer to primary health care provider or other community agency (specify reason): \_\_\_\_\_
- Refer to early intervention/early childhood special education.
- No further action taken at this time
- Other (specify): \_\_\_\_\_

**5. OPTIONAL:** Transfer item responses (Y = YES, S = SOMETIMES, N = NOT YET, X = response missing).

	1	2	3	4	5	6
Communication						
Gross Motor						
Fine Motor						
Problem Solving						
Personal-Social						

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# Now let's review the



## What is Social-Emotional Learning?

- <https://www.youtube.com/watch?v=ikehX9o1Jbl>

**Social/emotional development is the developing capacity of the child from birth through five to:**

form close and secure relationships;

experience, regulate, and express emotions in socially and culturally appropriate ways; and

explore the environment and learn - all in the context of family, community, and culture.

CSEFEL Definition adapted from ZERO TO THREE, 2001



## Why Screen Social-Emotional Development?

- Federal policies in IDEA Part C, CAPTA and Head Start require SE screening
- More than 30% of parents in Early Intervention find it difficult to manage their child's behavior
- Children with disabilities at increased risk of disruptions in caregiver relationships

ASQ-3™ and ASQ:SE-2™ Training Materials by J Squires, J Farrell, J Clifford, S Yockelson, E Twombly, and L Potter  
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## Challenges in Screening Social Emotional Development

Challenging behavior can be typical development:

- Infants cry to get needs met
- Toddlers aren't able to share; they may bite and have tantrums
- Preschoolers whine, make demands, grab, push and hit

ASQ-3™ and ASQ:SE-2™ Training Materials by J Squires, J Farrell, J Clifford, S Yockelson, E Twombly, and L Potter  
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Expecting more from children than they are capable of can lead to lots of frustration for both parents and children. Parents agree:

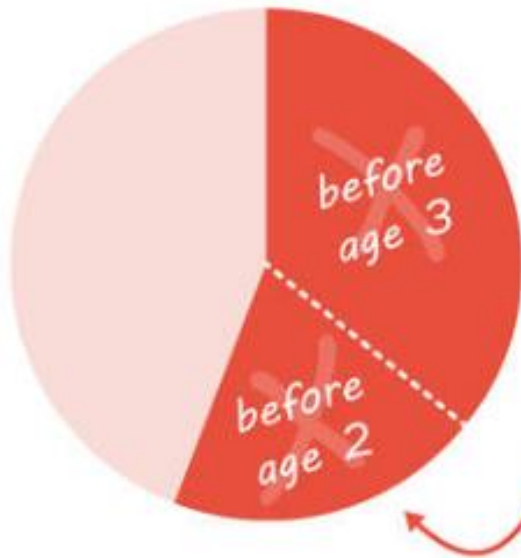
**45%** of parents tell ZERO TO THREE they want to know how and when children develop self-control...

**44%** of parents want to know what skills to expect at different ages.

To learn about how and when children develop self-control, and what you can do to nurture this skill, visit

[www.zerotothree.org/DevelopingSelfControl](http://www.zerotothree.org/DevelopingSelfControl)

## When do children have the impulse control to resist the desire to do something forbidden?



**56%** of parents believe children have the impulse control to resist the desire to do something forbidden *before age 3*.

Within that group, **36%** of parents believe that children *under age 2* have this kind of self-control.

ACTUAL  
age this  
develops

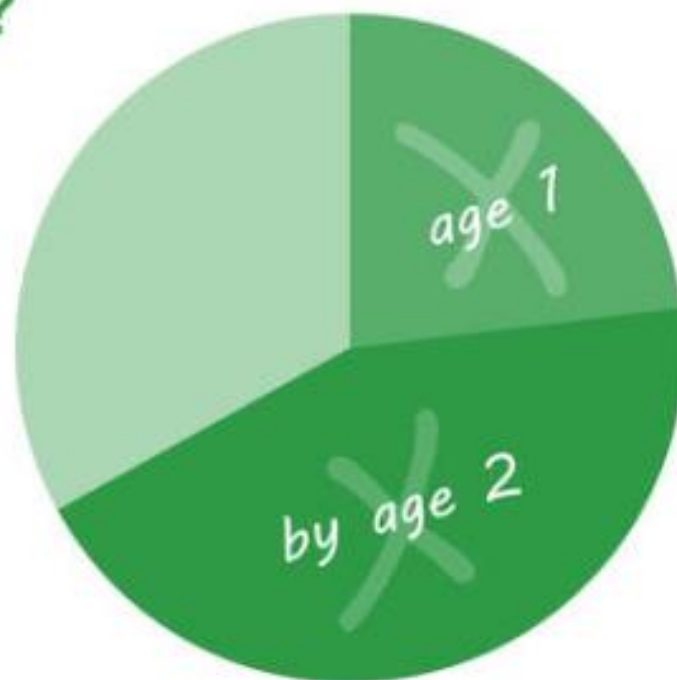
**3<sup>1/2</sup>-4  
years**

However, brain research shows that these skills start developing between **3.5 and 4 years**, and take many more years to be used consistently.

## When are children able to control their emotions?

**24%** of all parents believe children are able to control their emotions, such as not having a tantrum when frustrated, at *1 year or younger*.

**42%** of parents believe children have this ability *by 2 years*.



✓ **ACTUAL**  
age this  
develops

**3<sup>1</sup>/<sub>2</sub>-4**  
years

Research shows this type of self-control is also just starting to develop between **3.5 and 4 years**.



# ASQ:SE2 Features

- Same basic components as ASQ-3
- 9 Questionnaires/Age Intervals
- Number of questions vary based on age
- 3 response options:
  - Rarely/Never, Sometimes, Often/Always
  - Additional box to note a caregiver concern



# Behavioral Areas of

ASQ®:SE-2 items can be categorized in one or more behavioral areas, which serve as a conceptual framework. Understanding these behavioral areas can be helpful to families as you interpret and discuss results with them.

## AUTONOMY



A child's ability or willingness to self-initiate or respond without guidance (moving to independence).

*Sample item:* "Does your child check to make sure you are near when exploring new places, such as a park or a friend's home?"

## COMPLIANCE



A child's ability or willingness to conform to the direction of others and follow rules.

*Sample item:* "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



A child's success or ability to cope with physiological needs (sleeping, eating, elimination, safety).

*Sample item:* "Does your child sleep at least 8 hours in a 24-hour period?"

## SELF-REGULATION



A child's ability or willingness to calm or settle down or to adjust to physiological or environmental conditions or stimulation.

*Sample item:* "Does your child cry, scream, or have tantrums for long periods of time?"

## AFFECT



A child's ability or willingness to demonstrate his or her own feelings and empathy for others.

*Sample item:* "Is your child interested in things around her, such as people, toys, and foods?"

## INTERACTION



A child's ability or willingness to respond to or initiate social responses with parents, other adults, and peers.

*Sample item:* "Does your child talk to or play with other familiar adults?"

## SOCIAL-COMMUNICATION



A child's ability or willingness to interact with others by responding to or initiating verbal or nonverbal signals to indicate interests or needs, feelings, and affective or internal states.

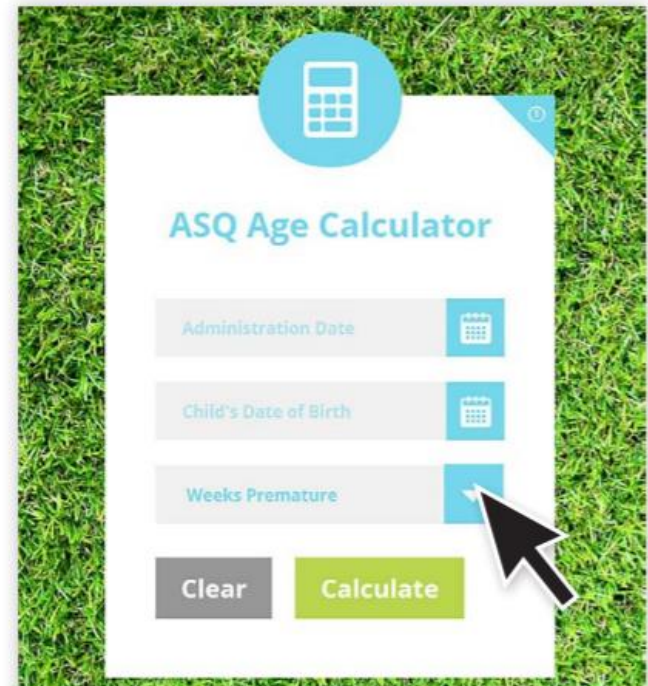
*Sample item:* "Does your child try to show you things by pointing at them and looking back at you?"

Behavioral Area	Abbreviated Item	Age Interval									
		2m	6m	12m	18m	24m	30m	36m	48m	60m	
<i>Social-communication (continued)</i>	Pretends objects are something else?					30	32	34	34	34	
	Has simple back-and-forth conversations with you?						3	4	2	2	
	<b>Total number of social-communication items</b>	<b>2</b>	<b>6</b>	<b>8</b>	<b>7</b>	<b>6</b>	<b>6</b>	<b>5</b>	<b>4</b>	<b>4</b>	
<i>Interaction</i> Parents and other adults	Smiles at you and family members? Laughs or smiles [with you and family members, when playing with you]?		2	1	3	3					
	Seems to enjoy watching or listening to people? Likes to play games such as Peekaboo? Likes hearing stories [and, or] singing songs?	6	7	7	22	22	6				
	Stays upset more than an hour when you leave?				2	5					
	Enjoy [feeding times, mealtimes] together?	12	13	13	14	12	16	14	12	14	
	Likes to play near or be with family and friends? Greets familiar adults? Talks or plays with familiar adults?			3	20	6	4	3	3	4	
	Looks for you when stranger comes near? Friendly with strangers?			2	4	2	7	6	6	6	
	Likes to be around other children? Plays next to other children?				24	24	26				
	Can name a friend? Takes turns and shares during play with children?							26	27	31	
	Other children like to play with child?							27	29	28	
	Likes to play with other children?							28	30	29	
<b>Total number of interaction items</b>	<b>2</b>	<b>3</b>	<b>5</b>	<b>7</b>	<b>7</b>	<b>5</b>	<b>6</b>	<b>6</b>	<b>6</b>		
<i>General concerns and Overall comments</i>	Anyone shared concerns about behaviors?	16	23	27	31	31	33	35	36	36	
	Parent concerns about [eating, sleeping, or toileting behaviors/habits]?	17	24	28	32	32	34	36	37	37	
	Parent worries about [baby, child]?	18	25	29	33	33	35	37	38	38	
	What parent enjoys about [baby, child]?	19	26	30	34	34	36	38	39	39	
	<b>Total number of general concerns and Overall items</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	<b>4</b>	
<b>Total number of ASQ:SE-2 items per interval</b>		<b>19</b>	<b>26</b>	<b>30</b>	<b>34</b>	<b>34</b>	<b>36</b>	<b>38</b>	<b>39</b>	<b>39</b>	

## Choose the Correct Questionnaire

There's an app for  
that!

<http://agesandstages.com/free-resources/asq-calculator/>



# Support Parent Completion

1. Please read each question carefully and check the response that best describes your child's behavior:

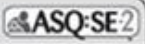
- Often or always: My child performs this behavior often or always.
- Sometimes: My child sometimes performs this behavior (not consistently).
- Rarely or never: My child rarely performs this behavior or has never performed the behavior.

2. Concerns: Check the circle to the right of a question if the behavior is a concern.

3. Some questions have blank spaces for you to provide examples of your child's behavior. Please be sure to explain your response(s).

## 24 Month QUESTIONNAIRE

21 months 0 days through 24 months 30 days



Questions about behaviors children may have are listed on the following pages. Please read each question carefully and check the box  that best describes your child's behavior. Also, check the circle  if the behavior is a concern.

**Important Points to Remember:**

For questions that are not specific, answer based on what you know about your child's behavior.

Answer questions based on your child's usual behavior, not behavior when your child is sick, very tired, or hungry.

Caregivers who know the child well and spend more than 15-20 hours per week with the child should complete ASQ:SE-2.

Please return this questionnaire by: \_\_\_\_\_

If you have any questions or concerns about your child or about this questionnaire, contact: \_\_\_\_\_

Thank you and please look forward to filling out another ASQ:SE-2 in \_\_\_\_\_ months.

	OFTEN OR ALWAYS	SOMETIMES	RARELY OR NEVER	CHECK IF THIS IS A CONCERN	
1. Does your child look at you when you talk to him?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	—
2. Does your child seem too friendly with strangers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	—
3. Does your child laugh or smile when you play with her?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	—
4. Is your child's body relaxed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	—
5. When you leave, does your child stay upset and cry for more than an hour?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	—
6. Does your child greet or say hello to familiar adults?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	—
7. Does your child like to be hugged or cuddled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	—
8. When upset, can your child calm down within 15 minutes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="radio"/>	—

TOTAL POINTS ON PAGE: \_\_\_\_\_

P201240100      Ages & Stages Questionnaire: Social-Emotional, Second Edition (ASQ:SE-2™), by Squires, Bricker, and Twombly  
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“As a parent or caregiver, you are the best source of information about your child. That’s why ASQ:SE-2 is designed for you to complete.”



## ASQ:SE2 assesses both

Competence:

Behavior we expect/  
promote

Ex: Does your child  
like to be hugged or  
cuddled?

Problem behavior:

Behaviors we would  
not expect/promote

Ex: Does your child  
cry, scream, or have  
tantrums for long  
periods of time?



## Score questionnaire, review Overall section and interpret results

ASQ:SE-2 questionnaires have both scored and unscored items. The scored items address two types of behaviors:

### Competence behaviors—

Things that are beneficial for a child to do

Sample item:

*Does your child like to be hugged or cuddled?*

Response Point Value:

Often or Always: 0 points  
Sometimes: 5 points  
Rarely or Never: 10 points

### Problem behaviors—

Things that a child should not do

Sample item:

*Does your child cry, scream, or have tantrums for long periods of time?*

Response Point Value:

Often or Always: 10 points  
Sometimes: 5 points  
Rarely or Never: 0 points


To help you score the questionnaire, each response option has a letter assigned to it:

Z = 0 points

V = 5 points

X = 10 points

 Tip: Z stands for zero

 Tip: V stands for Roman numeral V

 Tip: X stands for Roman numeral X

## Concerns

**24 Month QUESTIONNAIRE** 21 months 0 days through 24 months 30 days **ASQ:SE-2**

Questions about behaviors children may have are listed on the following pages. Please read each question carefully and check the box  that best describes your child's behavior. Also, check the circle  if the behavior is a concern.

**Important Points to Remember:**

- For questions that are not specific, answer based on what you know about your child's behavior.
- Answer questions based on your child's usual behavior, not behavior when your child is sick, very tired, or hungry.
- Caregivers who know the child well and spend more than 15-20 hours per week with the child should complete ASQ:SE-2.
- Please return this questionnaire by: \_\_\_\_\_
- If you have any questions or concerns about your child or about this questionnaire, contact: \_\_\_\_\_
- Thank you and please look forward to filling out another ASQ:SE-2 in \_\_\_\_\_ months.

	OFTEN OR ALWAYS	SOME TIMES	RARELY OR NEVER	CHECK IF THIS IS A CONCERN
1. Does your child look at you when you talk to him?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
2. Does your child seem too friendly with strangers?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
3. Does your child laugh or smile when you play with her?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
4. Is your child's body relaxed?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
5. When you leave, does your child stay upset and cry for more than an hour?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
6. Does your child greet or say hello to familiar adults?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
7. Does your child like to be hugged or cuddled?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
8. When upset, can your child calm down within 15 minutes?	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

TOTAL POINTS ON PAGE \_\_\_\_

P201240100 Ages & Stages Questionnaire with Social-Emotional, Second Edition (ASQ:SE-2™), by Squires, Bricker, and Twombly. Copyright © 2015 by Paul H. Brookes Publishing Co., Inc. All rights reserved. page 1 of 8


**CHECK IF THIS IS A CONCERN**

V

V

- Concerns are marked with a "V" to ensure that 5 points are added to any item score parents check as a concern.

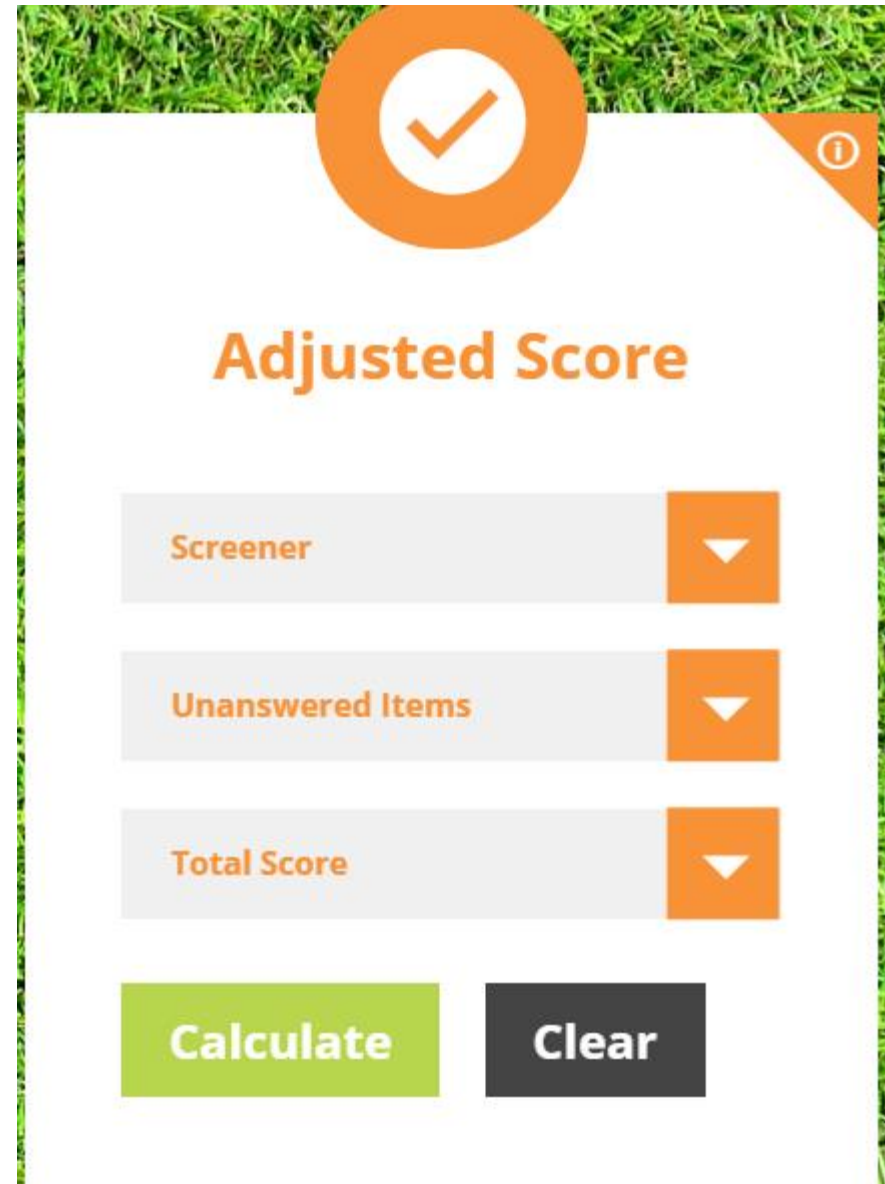
## Let's practice scoring

	OFTEN OR ALWAYS	SOME-TIMES	RARELY OR NEVER	CHECK IF THIS IS A CONCERN	
8. Does your child settle herself down after exciting activities? 	<input type="checkbox"/> z	<input type="checkbox"/> v	<input checked="" type="checkbox"/> x	<input type="radio"/> v	<u>10</u>
9. Does your child cry, scream, or have tantrums for long periods of time?	<input type="checkbox"/> x	<input type="checkbox"/> v	<input checked="" type="checkbox"/> z	<input type="radio"/> v	<u>0</u>
10. Does your child do things over and over and get upset when you try to stop him? For example, does he rock, flap his hands, spin, or _____? (Please describe.) _____ _____	<input type="checkbox"/> x	<input type="checkbox"/> v	<input checked="" type="checkbox"/> z	<input type="radio"/> v	<u>0</u>
11. Does your child stay with activities she enjoys for at least 3 minutes (other than watching shows or videos, or playing with electronics)?	<input type="checkbox"/> z	<input checked="" type="checkbox"/> v	<input type="checkbox"/> x	<input type="radio"/> v	<u>5</u>

## Scoring when omitted Items

There's an app for that!

[http://agesandstages.com/  
free-resources/asq-  
calculator/](http://agesandstages.com/free-resources/asq-calculator/)



The screenshot shows a mobile application interface for calculating ASQ scores. At the top, there is a large orange circle with a white checkmark. Below it, the text "Adjusted Score" is displayed in orange. There are three dropdown menus, each with a grey background and an orange arrow pointing down. The first dropdown is labeled "Screener", the second is "Unanswered Items", and the third is "Total Score". At the bottom, there are two buttons: a green "Calculate" button and a dark grey "Clear" button. The background of the app is white with a green grass border at the top and bottom.

## Overall questions

**OVERALL** Use the space below for additional comments.

34. Do you have concerns about your child's eating and sleeping behaviors or about her toilet training?

If yes, please explain:

YES  NO

---

---

---

35. Does anything about your child worry you? If yes, please explain:

YES  NO

---

---

---

36. What do you enjoy about your child?

---

---

---





## Interpreting results

### Things to Consider:

- Opportunity
- Setting/Time Factors
  - Is the child hungry? Tired?
  - At home or childcare?
- Environmental Factors
  - Stressful Event?
  - Older siblings that do the talking?




- Developmental Factors
- Health Factors
  - Medical Concern or Health Condition?
- Family/Cultural Factors
  - First Time Parents
  - Parents involved in other systems
  - Low Literacy
  - Linguistic Differences
- Parent Concerns

# Information Summary

- Guides staff step-by-step, from score interpretation through follow-up decision-making:
  - Clear page-by-page scoring table and total score box
  - New scoring graphic and visual interpretation of results
  - Area to record concerns
  - Area to review referral considerations
  - Area to record follow-up actions

24 Month Information Summary

21 months 0 days through 26 months 30 days



Child's name: \_\_\_\_\_ Date ASQ:SE-2 completed: \_\_\_\_\_

Child's ID #: \_\_\_\_\_ Child's date of birth: \_\_\_\_\_

Person who completed ASQ:SE-2: \_\_\_\_\_ Child's age in months and days: \_\_\_\_\_

Administering program/provider: \_\_\_\_\_ Child's gender:  Male  Female

---

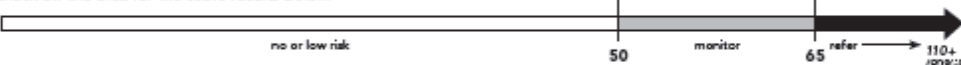
**1. ASQ:SE-2 SCORING CHART:**

- Score items (Z = 0, V = 5, X = 10, Concern = 5).
- Transfer the page totals and add them for the total score.
- Record the child's total score next to the cutoff.

TOTAL POINTS ON PAGE 1			
TOTAL POINTS ON PAGE 2			
TOTAL POINTS ON PAGE 3			
TOTAL POINTS ON PAGE 4			
<b>Total score</b>			

Cutoff	Total score
65	

**2. ASQ:SE-2 SCORE INTERPRETATION:** Review the approximate location of the child's total score on the scoring graphic. Then, check off the area for the score results below.



The child's total score is in the  area. It is below the cutoff. Social-emotional development appears to be on schedule.  
 The child's total score is in the  area. It is close to the cutoff. Review behaviors of concern and monitor.  
 The child's total score is in the  area. It is above the cutoff. Further assessment with a professional may be needed.

**3. OVERALL RESPONSES AND CONCERNS:** Record responses and transfer parent/caregiver comments. YES responses require follow-up.

1-31. Any Concerns marked on scored items?    YES    no    Comments: \_\_\_\_\_

32. Eating/sleeping concerns?    YES    no    Comments: \_\_\_\_\_

33. Other worries?    YES    no    Comments: \_\_\_\_\_

**4. FOLLOW-UP REFERRAL CONSIDERATIONS:** Mark all as Yes, No, or Unsure (Y, N, U). See pages 000-000 in the ASQ:SE-2 User's Guide.

Setting/time factors (e.g., Is the child's behavior the same at home as at school?)

Developmental factors (e.g., Is the child's behavior related to a developmental stage or delay?)

Health factors (e.g., Is the child's behavior related to health or biological factors?)

Family/cultural factors (e.g., Is the child's behavior acceptable given the child's cultural or family context? Have there been any stressful events in the child's life recently?)

Parent concerns (e.g., Did the parent/caregiver express any concerns about the child's behavior?)

**5. FOLLOW-UP ACTION:** Check all that apply:

Provide activities and rescreen in \_\_\_\_\_ months.

Share results with primary health care provider.

Provide parent education materials.

Provide information about available parenting classes or support groups.

Have another caregiver complete ASQ:SE-2. List caregiver here (e.g., grandparent, teacher): \_\_\_\_\_

Administer developmental screening (e.g., ASQ-3).

Refer to early intervention/early childhood special education.

Refer for social-emotional, behavioral, or mental health evaluation.

Other: \_\_\_\_\_

P201240600
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## ASQ Summary Page: results

1. **SCORE AND TRANSFER TOTALS TO CHART BELOW:** See ASQ-3 User's Guide for details, including how to adjust scores if item responses are missing. Score each item (YES = 10, SOMETIMES = 5, NOT YET = 0). Add item scores, and record each area total. In the chart below, transfer the total scores, and fill in the circles corresponding with the total scores.

Area	Cutoff	Total Score	0	5	10	15	20	25	30	35	40	45	50	55	60
Communication	33.06	25	●	●	●	●	●	●	●	●	●	●	●	●	●
Gross Motor	30.61	45	●	●	●	●	●	●	●	●	●	●	●	●	●
Fine Motor	40.15	60	●	●	●	●	●	●	●	●	●	●	●	●	●
Problem Solving	36.17	45	●	●	●	●	●	●	●	●	●	●	●	●	●
Personal-Social	35.84	55	●	●	●	●	●	●	●	●	●	●	●	●	●

3. **ASQ SCORE INTERPRETATION AND RECOMMENDATION FOR FOLLOW-UP:** You must consider total area scores, overall responses, and other considerations, such as opportunities to practice skills, to determine appropriate follow-up.

- If the baby's total score is in the  area, it is above the cutoff, and the baby's development appears to be on schedule.
- If the baby's total score is in the  area, it is close to the cutoff. Provide learning activities and monitor.
- If the baby's total score is in the  area, it is below the cutoff. Further assessment with a professional may be needed.

## ASQ:SE Summary Page: Results

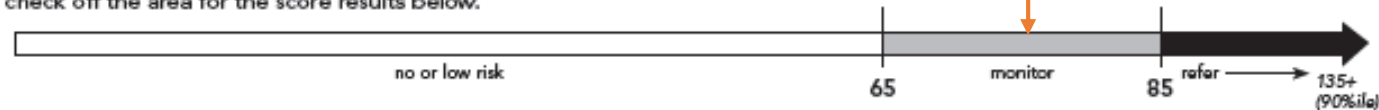
### 1. ASQ:SE-2 SCORING CHART:

- Score items (Z = 0, V = 5, X = 10, Concern = 5).
- Transfer the page totals and add them for the total score.
- Record the child's total score next to the cutoff.

TOTAL POINTS ON PAGE 1	10
TOTAL POINTS ON PAGE 2	25
TOTAL POINTS ON PAGE 3	20
TOTAL POINTS ON PAGE 4	20
<b>Total score</b>	<b>75</b>

Cutoff	TOTAL SCORE
85	75

### 2. ASQ:SE-2 SCORE INTERPRETATION: Review the approximate location of the child's total score on the scoring graphic. Then, check off the area for the score results below.



- The child's total score is in the  area. It is below the cutoff. Social-emotional development appears to be on schedule.
- The child's total score is in the  area. It is close to the cutoff. Review behaviors of concern and monitor.
- The child's total score is in the  area. It is above the cutoff. Further assessment with a professional may be needed.





## Discuss Results with Parent

- Remember, the parent completed
- Listen, read subtle cues, reflect back
- If you share concerns, be specific
- Think about where the parent is in the process
- Know community resources



“If your child’s social-emotional development is on target, there is nothing more you need to do. If there are concerns, then the provider will help you with next steps.

When children get support early possible for behavioral concerns, problem behaviors may be prevented from getting more difficult as children get older.”

- Begin discussion by celebrating the child
  - What do you appreciate about child? What things have you observed about him/her?
- Review results together- begin with strengths
  - Responses “Yes” on ASQ-3
  - ASQ:SE2 “z=0”
  - Problem behavior** - Rarely or never
  - Competence** - Often or always
- Discuss items of concern
  - Responses “Not yet” on ASQ-3
  - ASQ:SE2 “x=10”
  - Problem behavior** – Often or always
  - Competence** – Rarely or never

- Discuss answers to open-ended questions
- Review summary sheet together and discuss child's score and cut off scores
- Discuss factors that may have affected results (if any)
- Allow time for questions or concerns
- Together, **WITH** the family, consider follow up options

Remember: Parents take the lead and direct the referral process—you're there to help them take the next steps.



# Share activities and resources with parents

- Share fun learning activities for home/school
- Share results with child's health care provider
- Share community resources

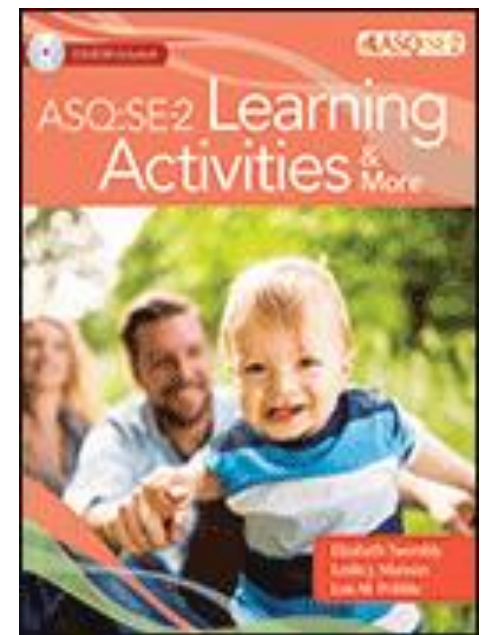
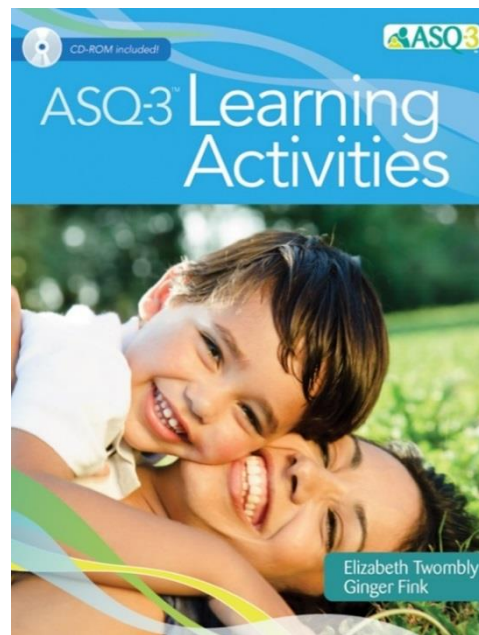
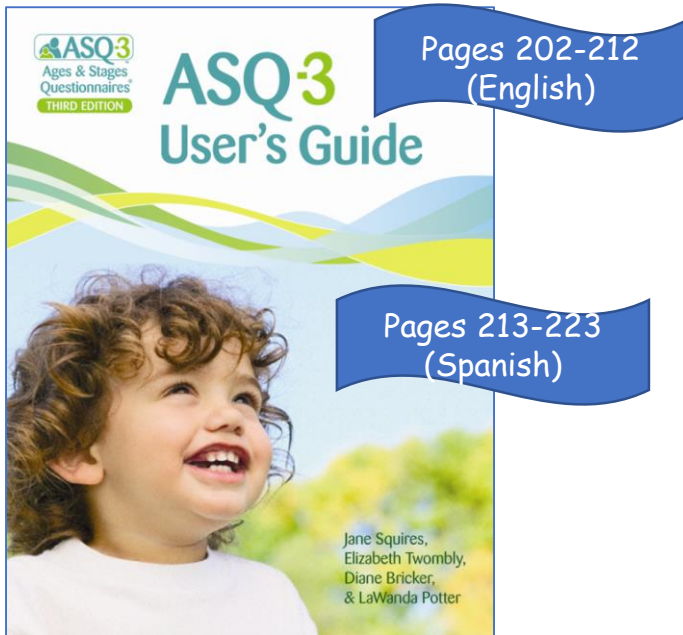
**FOLLOW-UP ACTION TAKEN:** We will discuss the next steps (marked below) based on your child's ASQ:SE-2:

- Try the activities provided and complete another ASQ:SE-2 in \_\_\_\_\_ months.
- Share your child's ASQ:SE-2 results with his or her primary health care provider.
- Refer your child to his or her primary health care provider for the following reason: \_\_\_\_\_
- Contact the following community agency for information on parenting groups or other support.  
List contact information here: \_\_\_\_\_
- Have another caregiver complete ASQ:SE-2. Please bring results to next meeting.  
List caregiver here (e.g., grandparent, teacher): \_\_\_\_\_
- Complete a developmental screening for your child (e.g., ASQ-3).
- Refer your child to early intervention/early childhood special education for further assessment.  
List contact information here: \_\_\_\_\_
- Refer your child for social-emotional, behavioral, or mental health evaluation.  
List contact information here: \_\_\_\_\_
- Other: \_\_\_\_\_

**FOLLOW-UP ACTION TAKEN:** We will discuss the next steps (marked below) that we are suggesting based on your child's ASQ.

- Try the developmental activities provided and look forward to receiving another ASQ to complete in \_\_\_\_\_ months.
- We will share your child's ASQ results with the primary health care provider.
- We recommend that your child be referred for (circle all that apply) hearing, vision, and/or behavioral screening.
- We recommend that your child be referred to the primary health care provider or another community agency for the following reason: \_\_\_\_\_
- We recommend that your child be referred to early intervention/early childhood special education for further assessment.
- No further action is needed at this time.
- Other: \_\_\_\_\_

## Follow-Up to Screening: *Learning Activities*



ASQ-3™ and ASQ:SE-2™ Training Materials by J Squires, J Farrell, J Clifford, S Yockelson, E Twombly, and L Potter  
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## Activities for Infants 12–16 Months Old



<p>Babies love games at this age (Pat-a-Cake, This Little Piggy). Try different ways of playing the games and see if your baby will try it with you. Hide behind furniture or doors for Peekaboo; clap blocks or pan lids for Pat-a-cake.</p>	<p>Make puppets out of a sock or paper bag—one for you and one for your baby. Have your puppet talk to your baby or your baby's puppet. Encourage your baby to "talk" back.</p>	<p>To encourage your baby's first steps, hold your baby in standing position, facing another person. Have your baby step toward the other person to get a favorite toy or treat.</p>	<p>Give your baby containers with lids or different compartments filled with blocks or other small toys. Let your baby open and dump. Play "putting things back." This will help your baby learn how to release objects where he wants them.</p>	<p>Loosely wrap a small toy in a paper towel or facial tissue without tape. Your baby can unwrap it and find a surprise. Use tissue paper or wrapping paper, too. It's brightly colored and noisy.</p>
<p>Babies enjoy push and pull toys. Make your own pull toy by threading yogurt cartons, spools, or small boxes on a piece of yarn or soft string (about 2 feet long). Tie a bead or plastic stacking ring on one end for a handle.</p>	<p>Tape a large piece of drawing paper to a table. Show your baby how to scribble with large nontoxic crayons. Take turns making marks on the paper. It's also fun to paint with water.</p>	<p>Arrange furniture so that your baby can work her way around a room by stepping across gaps between furniture. This encourages balance in walking.</p>	<p>Babies continue to love making noise. Make sound shakers by stringing canning rims together or filling medicine bottles (with child-proof caps) with different-sounding objects like marbles, rice, salt, bolts, and so forth. Be careful to secure lids tightly.</p>	<p>This is the time your baby learns that adults can be useful! When your baby "asks" for something by vocalizing or pointing, respond to his signal. Name the object your baby wants and encourage him to communicate again—taking turns with each other in a "conversation."</p>
<p>Play the naming game. Name body parts, common objects, and people. This lets your baby know that everything has a name and helps her begin to learn these names.</p>	<p>Make an obstacle course with boxes or furniture so that your baby can climb in, on, over, under, and through. A big box can be a great place to sit and play.</p>	<p>Let your baby help you clean up. Play "feed the wastebasket" or "give it to Mommy or Daddy."</p>	<p>Make a surprise bag for your baby to find in the morning. Fill a paper or cloth bag with a soft toy, something to make a sound, a little plastic jar with a screw-top lid, or a book with cardboard pages.</p>	<p>Play "pretend" with a stuffed animal or doll. Show and tell your baby what the doll is doing (walking, going to bed, eating, dancing across a table). See if your baby will make the doll move and do things as you request. Take turns.</p>
<p>Cut up safe finger foods (do not use foods that pose a danger of your baby's choking) in small pieces and allow your baby to feed himself. It is good practice to pick up small things and feel different textures (bananas, soft crackers, berries).</p>	<p>Let your baby "help" during daily routines. Encourage your baby to "get" the cup and spoon for mealtime, to "find" shoes and coat for dressing, and to "bring" the pants or diaper for changing. Following directions is an important skill for your baby to learn.</p>	<p>Your baby is learning that different toys do different things. Give your baby a lot of things to roll, push, pull, hug, shake, poke, turn, stack, spin, and stir.</p>	<p>Most babies enjoy music. Clap and dance to the music. Encourage your baby to practice balance by moving forward, around, and back. Hold her hands for support, if needed.</p>	<p>Prepare your baby for a future activity or trip by talking about it beforehand. Your baby will feel like a part of what is going on rather than being just an observer. It may also help reduce some fear of being "left behind."</p>

## NEWSLETTER

## Your Toddler's Social-Emotional Development

## 27 to 33 months

Your child is learning what they can do and is more confident in their abilities. They are proud of their big kid skills. Your child also wants control. They want to do things their way and on their timeline. It can be frustrating when your child tells you "no" or wants to do things "by myself." The trick is to give your child a little control while still being in control yourself. For example, always offer two acceptable choices when requesting something of your child: "Do you want to put on your red shirt or your blue shirt?" This small choice provides a little bit of control that feels good to your independent toddler.



## "Keep on Trying"

Your toddler is taking on more challenges, and these challenges can trigger big feelings. It may not take much for your child to become discouraged and give up on a task that is hard or to say, "You do it." Encourage and support your child: "Keep on trying. You can do it." Stay close and, if needed, help them before they do give up. Let your toddler know you have confidence in their abilities. When your child learns something new, let them know how proud you are.

## First Friends

Make times when your child can be with other children their age. Your child may enjoy attending music, movement, or dance classes with other children. If that is not possible, consider trips to the park or dancing together during play dates. Such activities are low-stress for your child, since there is little need to share toys or other belongings.

## Calm First, Talk Later

Your child is learning to express and control their big feelings. This is a very hard thing to do! If your child is upset, help them calm down before trying to talk to them. Hold them lovingly in your arms and breathe together. "You're okay sweetie. Mommy's here." Talk about and practice calming ideas at times when your child is not upset. Ideas include deep breathing, using words to talk about feelings, taking a break, or switching to a new activity.

## Exploring the World

Give your toddler opportunities to explore new activities and places. Take your child to a park, the library, or other fun places. New places may be scary for your child at first. Keep them close and let them watch before joining in activities. Show your child how to greet new people, such as a clerk at a store. It is okay if your child is shy at first. When they are ready, they will let you know.

## What Is Social-Emotional Development?

Social-emotional development is your child's ability to

- Experience, express, and manage emotions
- Develop positive relationships with you and others
- Explore their environment with curiosity and confidence

## Social-emotional skills

- Develop through positive and loving interactions with you and others
- Are key to your child's success in school and in life

(continued)

## Helping Your Baby Grow

## Activities for 0 to 3 months

From birth, babies are interested in exploring your face, voice, and body. Your baby tells you a lot through body movements and sounds. Watch and listen to them during playtime and other daily activities. Who is this little person? Respond to sounds your baby makes, and let them know you are trying to understand. Through back-and-forth interactions with your baby, you become connected, or attached, to each other. Encourage family members to show love for the new baby (and each other). Your positive back and forth interactions with your baby are key to their social-emotional development.



0-3 months

## Talk Time

Your baby can see your face, smell you, feel your skin, and hear your voice. They can even sense how you are feeling. Talk, sing, look at, and smile at your baby. Say their name. Watch and wait to see what your baby does. Do they look at your face and eyes? Is your baby listening to you? When you move, do they try to follow your voice with head movements? Your baby doesn't like to be far from you.

## Silly Faces

At 2 weeks, your baby can see clearly 8 to 10 inches away. Hold them close to your face and watch what they do. If your baby opens their mouth, open your mouth. Stick out your tongue. Watch and wait a bit. Does your baby try to copy you? They may not be able to copy you at first, but keep trying!

## Tummy Playtime

Place your baby on their tummy on a clean blanket on the floor. Lie down next to them, talk, and watch what your baby does. When they start to pick up their head, let them know you noticed. "You picked up your head!" Celebrating new skills with your baby as they grow builds confidence. Now they can look at the world in a whole new way. *Never leave your baby alone on their tummy.*

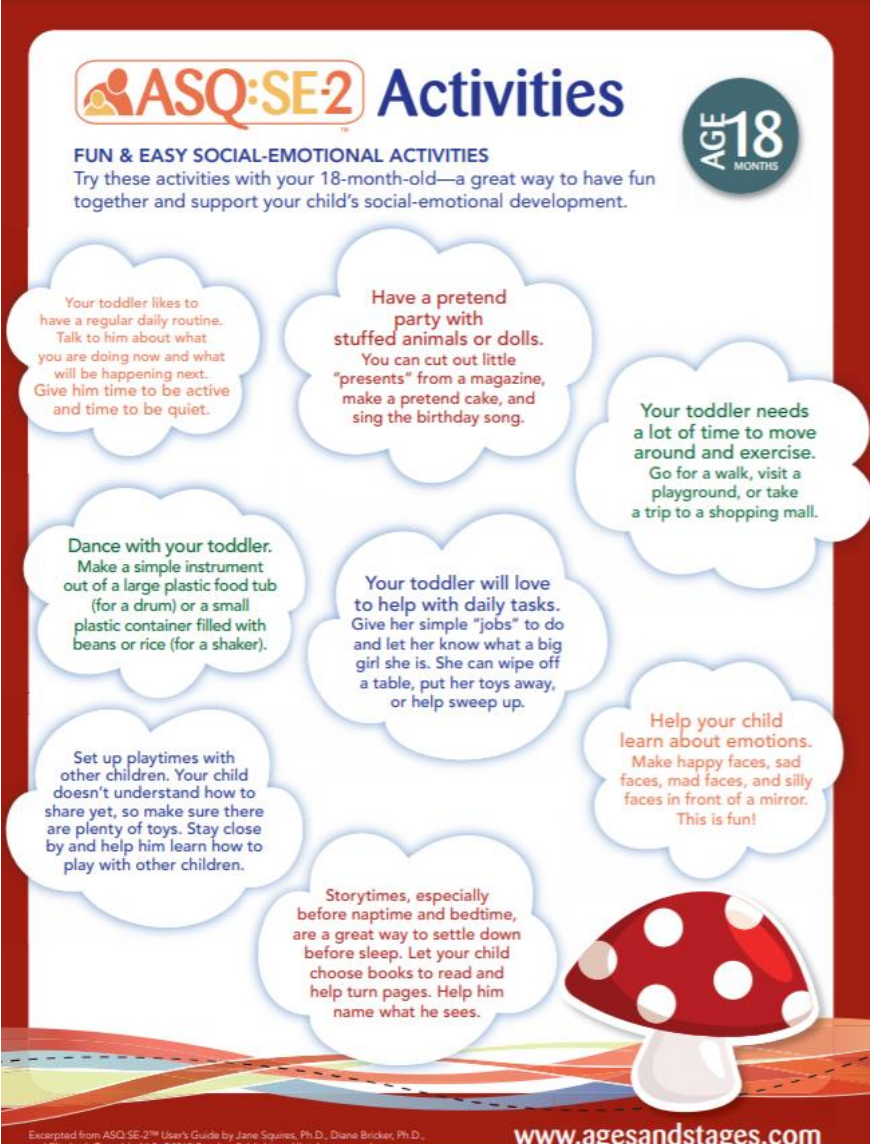
## Storytime

Your baby is never too young to listen to a story or look at pictures in a book. They will feel warm, safe, and calm in your arms. Reading books is an activity you and your baby can do every day as a routine, to help you get close and connect. Your baby listens to the tone of your voice and hears the words you are saying. At this age, they focus best on simple black-and-white pictures or big, brightly colored pictures.



# Free Activities

<http://archive.brookespublishing.com/documents/asqse2-activities.pdf>



**ASQ:SE-2 Activities**

**AGE 18 MONTHS**

**FUN & EASY SOCIAL-EMOTIONAL ACTIVITIES**  
Try these activities with your 18-month-old—a great way to have fun together and support your child's social-emotional development.

Your toddler likes to have a regular daily routine. Talk to him about what you are doing now and what will be happening next. Give him time to be active and time to be quiet.

Have a pretend party with stuffed animals or dolls. You can cut out little "presents" from a magazine, make a pretend cake, and sing the birthday song.

Your toddler needs a lot of time to move around and exercise. Go for a walk, visit a playground, or take a trip to a shopping mall.


Dance with your toddler. Make a simple instrument out of a large plastic food tub (for a drum) or a small plastic container filled with beans or rice (for a shaker).

Your toddler will love to help with daily tasks. Give her simple "jobs" to do and let her know what a big girl she is. She can wipe off a table, put her toys away, or help sweep up.

Help your child learn about emotions. Make happy faces, sad faces, mad faces, and silly faces in front of a mirror. This is fun!

Set up playtimes with other children. Your child doesn't understand how to share yet, so make sure there are plenty of toys. Stay close by and help him learn how to play with other children.

Storytimes, especially before naptime and bedtime, are a great way to settle down before sleep. Let your child choose books to read and help turn pages. Help him name what he sees.



www.agesandstages.com

Excerpted from ASQ:SE-2™ User's Guide by Jane Squires, Ph.D., Diane Bricker, Ph.D.



# ASQ Activities

AGE 1

## HELP YOUR CHILD LEARN AND GROW!

Try these fun and easy activities with your 1-year-old—a great way to have fun together and encourage your child's healthy development.

### Let your baby "help"

during daily routines. Encourage your baby to "get" the cup and spoon for mealtime, to "find" shoes and coat for dressing, and to "bring" the pants or diaper for changing.

**Following directions** is an important skill for your baby to learn.

### Babies love games at this age (Pat-a-Cake, This Little Piggy).

Try different ways of playing the games and see if your baby will try it with you. Hide behind furniture or doors for Peekaboo; clap blocks or pan lids for Pat-a-cake.

Tape a large piece of drawing paper to a table. Show your baby how to **scribble** with large nontoxic crayons. Take turns making marks on the paper. It's also fun to paint with water.

Make puppets out of a sock or paper bag—one for you and one for your baby. Have your puppet talk to your baby or your baby's puppet. Encourage your baby to "talk" back.

Babies enjoy **push and pull toys**. Make your own pull toy by threading yogurt cartons, spoons, or small boxes on a piece of yarn or soft string (about 2 feet long). Tie a bead or plastic stacking ring on one end for a handle.

This is the time your baby learns that adults can be useful! When your baby "asks" for something by vocalizing or pointing, respond to his signal. **Name the object** your baby wants and encourage him to communicate again—taking turns with each other in a "conversation."

Cut up safe **finger foods** (do not use foods that pose a danger of your baby's choking) in small pieces and allow your baby to feed himself. It is good practice to pick up small things and feel different textures (bananas, soft crackers, berries).



Excerpted from ASQ-3™ User's Guide by Jane Squires, Ph.D., Elizabeth Twombly, M.S.



# Free activities

<https://agesandstages.com/wp-content/uploads/2015/02/Toolkit-activity-sheets.pdf>

## Stick with ASQ-3!

Share these quick and easy tips with parents today!

www.agesandstages.com  
800-638-3775

BROOKES © 2011 Brookes Publishing Co.



Say "hi" and wave when entering a room with your baby. Encourage your baby to imitate. Help your baby wave to greet others. Waving "hi" and "bye" are early gestures.

8-12 months ASQ-3

Play the "show me" game when looking at books. Ask your toddler to find an object in a picture. Take turns. Let your toddler ask you to find an object in a picture. Let him turn the pages.



20-24 months ASQ-3

Encourage your child to try the "elephant walk," bending forward at the waist and letting your arms (hands clasped together) swing freely while taking slow and heavy steps. This is great to do with music.

30-36 months ASQ-3

Play "bucket hoops." Have your child stand about 6 feet away and throw a medium-size ball at a large bucket or trash can. For fun outdoors on a summer day, fill the bucket with water.



48-60 months ASQ-3

Hold your baby in your lap and softly shake a rattle on one side of his head, then the other side. Shake slowly at first, then faster. Your baby will search for the noise with his eyes.



1-4 months ASQ-3

Tape a large piece of drawing paper to a table. Show your baby how to scribble with large nontoxic crayons. Take turns making marks on the paper. It's also fun to paint with water.



12-16 months ASQ-3

Make your toddler an outdoor "paint" set by using a large wide paint brush and a bowl or bucket of water. Your toddler will have fun "painting" the side of the house, a fence, or the front porch.



20-24 months ASQ-3

While cooking or eating dinner, play the "more or less" game with your child. Ask who has more potatoes and who has less. Try this using same-size glasses or cups, filled with juice or milk.



36-48 months ASQ-3

Encourage your child to learn her full name, address, and telephone number. Make it into a singing or rhyming game. Ask your child to repeat it back to you when you are riding in the car or on the bus.



48-60 months ASQ-3

Gently rub your baby with a soft cloth, a paper towel, or nylon. Talk about how things feel (soft, rough, slippery). Lotion feels good, too.



4-8 months ASQ-3

A favorite pull toy often is a sn wagon or an old puller for collecting things. Your toddler can practice putting objects in and out of it. It can also be used to store favorite items.



16-20 months ASQ-3

Wrap tape around one end of a piece of yarn to make it stiff like a needle and put a large knot at the other end. Have your child string large elbow macaroni, buttons, or beads. Make an edible necklace out of Cheerios.



24-30 months ASQ-3

Make a book "about me" for your child. Save pictures, leaves, magazine images of a favorite food, and drawings your child makes. Put them in a photo album, or glue sheets of paper and staple together.



36-48 months ASQ-3

After washing hands, practice writing letters and numbers in pudding or thinned mashed potatoes spread on a cookie sheet or cutting board. Licking fingers is allowed!



60-66 months ASQ-3

# Free activity stickers

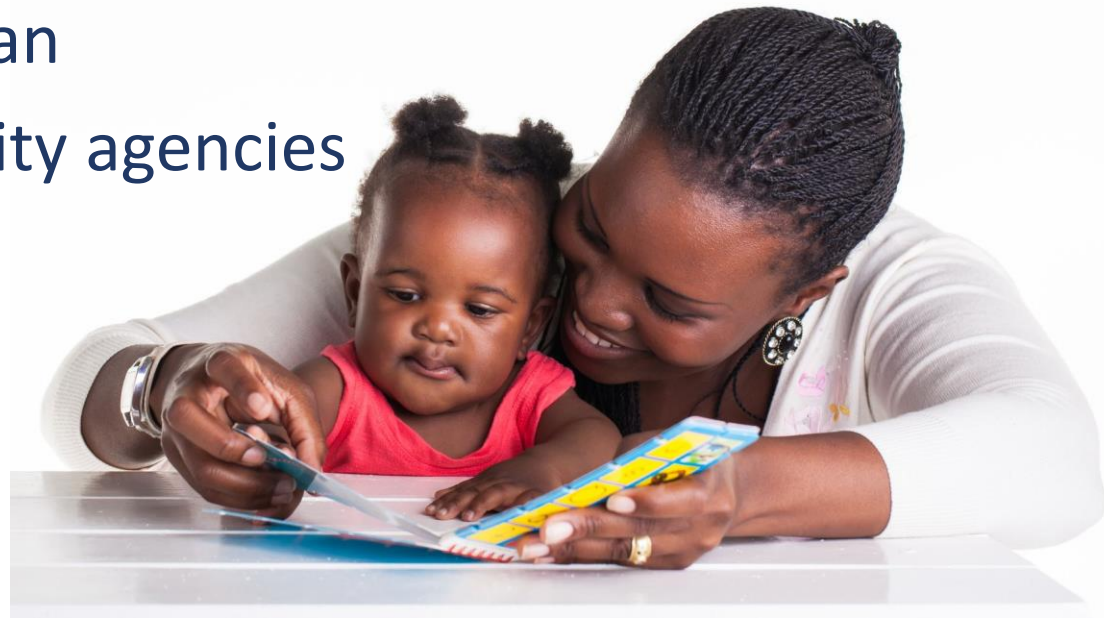
<https://agesandstages.com/wp-content/uploads/2015/02/ASQ-web-stickers.pdf>



# Follow-Up to Screening: *Referrals*

If results are in monitor area or **below** cutoff on **ASQ** or **above cutoff on ASQ:SE2** discuss referral considerations:

- Early Intervention or Early Childhood Special Education
- Behavioral Health
- Primary Care Physician
- Other local community agencies



<https://agesandstages.com/wp-content/uploads/2018/01/Dev-Screening-Toolkit-2018.pdf>

<http://www.brookespublishing.com/campaigns/free-social-emotional-screening-toolkit/>

<https://www.facebook.com/agesandstagesquestionnaires>

Videos and Webinars  
<http://bit.ly/asqvideos>

## Free Social-Emotional Screening Toolkit!

Early identification of social-emotional challenges can make a huge difference in the life of a young child. With this free toolkit, you'll get more than 25 pages of resources that help you conduct successful screening with ASQ:SE-2, the trusted, widely used social-emotional screener for children from 1 month to 6 years.

Use these tip sheets, parent handouts, and activities to effectively implement ASQ:SE-2, involve families in the screening process, and boost a child's social-emotional development between screenings. Whether you're new to social-emotional screening or looking to enhance your current system, these resources will help you make the most of ASQ:SE-2—and ensure that the children in your program have the best chance at success in school and life.

## Download your toolkit now!

First name \*

Last name \*

Job Title \*

--Select Your Job Title--

School/Company/Organization

Address 1 \*

Address 2

City \*

Country

Zip/postal code \*

Email address \*

Yes! I'd like to sign up for email

Yes  No



For more information on the ASQ3 and ASQ:SE2 please visit  
[www.agesandstages.com](http://www.agesandstages.com)



The Office of Child Development and Early Learning (OCDEL) provides families access to high quality services to prepare children for school and life success.