

## The First 1,000 Days: Bright Futures Examples for Promoting EBCD

The promotion of early brain and child development (EBCD) is an essential element of pediatric care. Coupled with supporting the development of a positive, nurturing relationship between the parent and child, health professionals must foster a strong foundation for children's lifelong learning, behavior and health. The basic science is clear: during the first few years of life, safe, stable, and nurturing relationships promote healthy brains by decreasing toxic stress and encouraging foundational mental skills.

Because translating this science within the busy medical home can be a challenge, the following grid was developed. This grid, developed by the American Academy of Pediatrics Early Brain and Child Development Leadership Workgroup, distills the information from a wide array of resources into a practice-friendly framework for pediatricians.<sup>1</sup> This grid is **not** intended to be a comprehensive resource, but rather provides examples of some evidence-informed actions consistent with the Bright Futures guidelines that proactively address the child-parent/caregiver relationship and the child's development.

EBCD is used in this grid as a mnemonic device for actions health professionals should take to support early brain development: **Explore** the quality of the child's socio-emotional home environment, **Build** relationships, **Cultivate** development, and **Develop** parent confidence and competence.

For more early brain and child development information and resources, visit the EBCD Web site at [www.aap.org/ebcd](http://www.aap.org/ebcd) and the Bright Futures Web site at [www.brightfutures.aap.org](http://www.brightfutures.aap.org).

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<b>PEDIATRICIANS are Encouraged to →</b>	<b>E</b> xplore the child's environment	<b>B</b> uild relationships / reciprocity	<b>C</b> ultivate development	<b>D</b> evelop parenting confidence
<b>General Principles →</b>	<b>W</b> hat pediatricians might briefly assess during well child care	<b>H</b> ow pediatricians might strengthen the parent-child bond or attachment	<b>W</b> hat pediatricians might teach parents about development	<b>H</b> ow pediatricians might support parents as they nurture their child's development
<b>Brief Description</b> →  <b>Well Child Care Visit</b> ↓	Assess foundational needs: *Food and sleep *Safety *Social and emotional supports *Strengths and barriers to success	Describe (or notice) parent-child interactions, emphasize the importance of responsive caregiving, and support the parent-child relationship ("dyadic dance")	Explain current and emerging developmental skills	1) Praise and encourage age-appropriate but responsive caregiving. 2) Praise and encourage parental self-care and the nurturing of social supports
<b>Prenatal/Newborn/Week 1</b>	Assess for food (plans to breastfeed?), safety, and parental supports	Explain that relationships and everyday interactions build the baby's brain	Explain the importance of parent-baby interaction during the infant's "quiet-alert" state	Encourage parents to consider the way they were parented. Explore what they plan TO do and NOT to do as parents.
<b>2-4 weeks</b>	Assess overall parental well-being (maternal depression or substance use?)	Encourage responsive caregiving (responding promptly to cries of distress builds trust)	Prepare parent for the emerging social smile	Find opportunities to reassure and praise the parents, and encourage them to support each other
<b>2 months</b>	Assess for family adjustment – parent self-care, return to work/childcare, time with partner, impact of new infant on siblings	Encourage smiling back at the baby's social smile (the beginning of the parent-child interaction, or "dyadic dance," that leads to cooing, feeding and speaking)	Anticipate cooing conversations	Enjoy interactions with an increasingly social baby

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<b>General Principles →</b>	<b>What pediatricians might briefly assess during well child care</b>	<b>How pediatricians might strengthen the parent-child bond or attachment</b>	<b>What pediatricians might teach parents about development</b>	<b>How pediatricians might support parents as they nurture their child's development</b>
<b>4 months</b>	Assess the parent's perception of the baby's temperament	Encourage attention to the baby's coos and cues – irritability may indicate boredom	Encourage reaching for objects that are safe and easy to hold	Recommend regular bedtime routine
<b>6 months</b>	Ask if there is a quiet, predictable, and safe sleep environment with bedtime routines	Support fun feeding interactions (use feeding time as a happy, interactive time with the baby)	Anticipate the development of social-emotional distress (eg, separation anxiety, stranger anxiety)	Support the enjoyment of books
<b>9 months</b>	Ask if the environment is safe for exploration (crawling)	Respond to the child's emotional cues (eg, stranger anxiety) and offer brief reassurance. When the child is seeking your reaction to strangers (social referencing), note it and smile	Acknowledge the continued development of strong emotions like frustration, anger and fear	Be aware of your facial expressions. Social referencing indicates that your child is reading your emotions and feeling your stress
<b>12 Months</b>	Ask about in-person "face time" vs. virtual "screen time"	Never sneak away - give the baby clear cues before separating from them	Encourage language by responding to child's non-verbal cues or asking child to point ("where is ...?")	Recognize and praise child's good behavior, providing time in, and using redirection for negative behaviors
<b>15 Months</b>	Ask about beliefs and practices concerning discipline (eg, use of yelling or spanking)	Acknowledge all attempts by the child to communicate and respond to the child's use of language and sound	Capitalize on safe exploration of the physical world by encouraging labeling ("what is that?")	Praise parents for allowing exploration and welcoming child when he/she seeks comfort and security

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<b>18 months</b>	Assess for consistency in setting limits for unsafe (eg, electrical outlets) or impulsive (eg, hitting or biting) behaviors	Encourage playful learning through pointing, naming, and labeling. Providing positive attention for desired behaviors is "time-in"	Explain that emotions can be overwhelming; support efforts to teach self-soothing, like "time-out"	Support parents in selectively ignoring negative attention-seeking behaviors
<b>24 months</b>	Ask about parents' plans for or progress with potty training	Encourage pretend play by following the child's lead during play	Support self-dressing and feeding, but avoid forcing potty training	Support parents' ability to calmly and safely respond to a child's frustrations by acknowledging all the child's attempts to communicate using words
<b>30 months</b>	Assess parents' social supports and ability to cope with tantrums, toilet training and other challenging behaviors	Try to take strong emotions out of conflicts and remain calm and safe	Provide and supervise playtime with others	Support parents by recognizing that many parents find this age challenging, and encourage parents to resist the temptation to use electronic devices (eg, TV) as a means of avoiding challenging behaviors
<b>36 months</b>	Assess for quality early childhood education experiences	Support the recognizing, normalizing, and labeling of emotions to promote the child's use of basic emotional language	Children are focused on themselves (egocentric), making play with others difficult. Play dates and opportunities to play with peers build foundational social-emotional skills	Support parental attempts to recognize and encourage/praise the child's positive behaviors (eg, playing nicely)

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## Suggested Resources to Help Promote These Concepts

- Bright Futures Guidelines, 3<sup>rd</sup> edition. Promoting Family Support - [http://brightfutures.aap.org/pdfs/Guidelines\\_PDF/2-BF\\_Promoting\\_Family\\_Support.pdf](http://brightfutures.aap.org/pdfs/Guidelines_PDF/2-BF_Promoting_Family_Support.pdf)
- Circle of Security Parenting Video- <http://www.youtube.com/watch?v=cW2BfxsWguc>
- Connected Kids - <http://www2.aap.org/connectedkids/>
- Early Brain and Child Development Web Site - <http://www.aap.org/ebcd>
- Incorporating recognition and management of perinatal and postpartum into pediatric practice - <http://pediatrics.aappublications.org/content/126/5/1032.full.pdf+html?sid=40e5dde5-3c2d-486d-8d07-59bea786c0a7>
- Partnering with Parents: Apps for Raising Happy, Healthy Children (Institute for Safe Families) - <http://www.instituteforsafefamilies.org/materials/partnering-with-parents>
- Promoting First Relationships - <http://pfrprogram.org/>
- Reach Out and Read (strategies to promote early literacy) - <http://www.reachoutandread.org/>
- References for Evidence-Based Programs for Young Children - [http://pediatrics.aappublications.org/content/125/Supplement\\_3/S155.full.pdf+html?sid=80ab934d-c265-40d6-99ed-ff83d1553136](http://pediatrics.aappublications.org/content/125/Supplement_3/S155.full.pdf+html?sid=80ab934d-c265-40d6-99ed-ff83d1553136)
- "Still Face" Experiment Video- <http://www.youtube.com/watch?v=apzXGEbZht0>
- Zero to Three - <http://www.zerotothree.org/>

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