YOUTH SUCCESS MOVEMENT

When Behavior Is Hard

Most of it is ordinary. Some of it has a cause worth finding.

For parents of children from two to five

We do not diagnose anything. We help you know what is worth mentioning.

If you are having a hard week, you are not doing this wrong.

Start here: most of this is ordinary

It does not feel ordinary at the time. It is.

Around 2

Tantrums arrive and are frequent. Says no to everything. Cannot wait. Hits or bites when frustrated.

There is almost no self-control yet. They are running on yours.

Around 3

Often the peak. Big feelings, poor recovery, rigid about routines, falls apart at transitions.

Most families find three harder than two. That is normal.

Around 4

Shorter and less frequent. Some waiting is possible. Testing limits on purpose now.

Self-control is starting to be theirs. It is unreliable.

Around 5

Recovers more often than not. Plays by rules. Can name what they feel — unless tired.

Regulation is largely internal now, and still collapses.

More than eight in ten preschoolers have tantrums. Fewer than one in ten have them every day.

Which means the existence of tantrums tells you almost nothing. It is their shape that tells you something — and that is the next slide.

Three is usually harder than two. Nothing has gone wrong.

What makes it more than ordinary

Not how loud it is. The shape of it.

- Hurting themselves during it — head-banging, biting or scratching themselves
- Hurting others or breaking things in most of them, not occasionally
- Lasting well beyond about twenty-five minutes. Ordinary ones average around ten
- Several a day, on most days, well past the third birthday
- Cannot be brought down by any adult, ever — not "hard to settle"
- Unhappy or irritable most of the time between them, not just during

Not signals

— How loud it is

— How embarrassing it is in public

— Whether other people's children seem easier

— Whether you lost your temper too

Any one of these regularly is worth raising with your doctor. Not because something is wrong — because it is outside the ordinary range.

It is the shape, not the volume.

There are two jobs here, not one

Almost every parenting program does the first one well and stops there.

Track one — manage it now

Specific things to do before, during and after difficult moments. Warnings before transitions. Naming the feeling. Settling first and teaching second.

This works, and there is a free program in Wisconsin that teaches it properly. Use it.

Track two — find out why

Whether something is making this harder than it needs to be. Sleep, hearing, language, attention — things that are common, checkable and treatable.

Almost nobody does this part. It is the reason techniques sometimes do not work.

Run both. Techniques applied to an untreated cause feel like they are not working.

A parent who does track one alone often concludes they are simply bad at this. Very often they are managing something nobody has looked for.

Manage it now. And find out what you are managing.

What actually helps, and where to get it free

The techniques are real, they are teachable, and in Wisconsin they cost nothing.

Warn before every change

Five minutes, then two. Being surprised causes more meltdowns than the thing itself does.

Name the feeling first

"You are furious that we have to go." Then deal with the behavior. Naming is how they learn to do it.

Settle first, teach second

A child who is still upset cannot learn anything from a consequence. Get calm, then talk.

Notice what goes right, out loud

Specific and immediate. Children with difficult behavior hear correction constantly and praise almost never.

Two choices, not an open question

"Coat or sweater?" rather than "will you get dressed?" Keeps the choice real and the outcome yours.

Guard sleep above everything

Most hard days started the night before. This is the biggest lever you have and it is free.

Triple P is free to every family in Wisconsin — online, at your own pace, funded by the state.

It is one of the best-evidenced parenting programs in the world. Many counties also run free sessions through UW-Extension. And for a young child with attention difficulties, this kind of program is the recommended first step — before any medication is considered.

Do the free program. It works, and it is already paid for.

Six things worth ruling out first

All common, all checkable, and all routinely missed — each one makes ordinary parenting harder than it should be.

How they sleep

Does your child snore most nights, or sleep with their mouth open?

Broken sleep from disordered breathing looks like restlessness and poor concentration. Treatable, and missed constantly.

Hearing

Have they had a lot of ear infections, especially before three?

Hearing through fluid during the years language is built. Often no pain and no complaint. Ask for a hearing check.

Understanding

Can they follow a two or three step instruction reliably?

A child who cannot hold the instruction looks defiant. They lost step two on the way to the door.

Attention

Is it the same everywhere, and not improving?

Worth raising from about age four. Before that, high activity is what the age looks like.

Iron and lead

Has your child had a blood lead test? Any concerns about iron?

Both affect attention and behavior. Both are simple tests, usually free, and often never done.

Something frightening

Has anything big, frightening or unstable happened?

Young children show this as behavior, not words. It is easily mistaken for defiance.

You do not need to work out which one. You only need to mention them, and let the doctor look.

Every one of these is common, checkable, and usually never asked about.

If you do not know where to start

This order puts the cheap, fast and treatable things first.

1	**Ask your doctor for a developmental screen**	These are meant to happen at nine, eighteen and thirty months and often get skipped. You can ask at any visit.
2	**Mention the six things**	Snoring, ear infections, following instructions, attention, a lead test, and anything difficult at home.
3	**Fix sleep, food and routine**	Free, fast, and it changes the picture more often than parents expect. Cut screens if they are eating into either.
4	**Start Triple P**	Free in Wisconsin. Do not wait for anything else to be settled first — it runs alongside everything.
5	**Ask for a free evaluation**	County early intervention before three, your school district from three. No doctor's note needed.
6	**If it persists past four, ask for a proper look**	A real assessment gathers information from home and from at least one other setting. Never one questionnaire.

Cheap and treatable first. Then everything else.

If you are the one who is struggling

This is not a separate issue from your child's behavior. It is part of it.

A young child regulates by borrowing the calm of the nearest adult.

Which is a hard thing to hear when you have nothing left. It is not said to add to the pile — it is said because it means that looking after yourself is not separate from looking after them. It is the same job.

Exhaustion

Your own sleep matters for the same reason theirs does. Nothing works well on four hours.

Low mood

Depression and anxiety in a parent are common, treatable, and strongly linked to how hard the days feel. Worth mentioning to your own doctor.

Being alone with it

Isolation makes everything heavier. A free home visiting program, a group, one other parent — any of it helps.

Real hardship

Not enough food, nowhere settled, violence, no money. Your county human services office is the single call that reaches most of it.

Asking for help is not a failure of parenting. It is one of the more effective things you can do for your child this year.

You cannot lend calm you do not have.

One step at a time

You do not have to work out what is going on. You only have to start asking.

This week

Sign up for Triple P.

Free in Wisconsin, online, at your own pace. Start it now rather than waiting for anything else to be settled.

Next appointment

Ask the six questions.

Snoring. Ear infections. Following instructions. Attention. A lead test. Anything difficult at home.

Tonight

Move bedtime half an hour earlier.

Same time, same order, screens off well before. One week of this changes more than most techniques.

If you are ever concerned about how your child is developing, you can ask for a free evaluation yourself — no doctor's note needed.

Before your child turns three, call your county's early intervention program — often called Birth to 3. From age three, contact your local school district and ask for the special education office, even if your child does not attend school there.

Manage it now. And find out what you are managing.