

## Developmental Delays

### How can children with developmental delays be identified?

- Children with developmental delays can be identified by families, pediatricians and other primary care clinicians, and child care and early education professionals by noting when children do not meet developmental milestones at expected ages with respect to speech and communication, gross-motor skills, fine-motor development, behavior, playing, and social interactions.
- Delays can be noticed during informal routine observations when they are obvious.
- Families and child care and early education professionals can also use the Centers for Disease Control and Prevention developmental milestones website (<https://www.cdc.gov/ncbddd/actearly/milestones/index.html>) to become familiar with milestones.
- Screening with structured, validated measures is the best way to begin the identification process. Screenings can be administered in the child care setting after staff members have been trained on how to discuss screening results with families and how to refer to a child's pediatrician for further evaluation. Routine screening is also recommended in the health care setting at 9, 18, and 24 or 30 months of age.

### How common is it?

- About 15% of young children in the United States have a developmental delay.
- Higher rates occur among children
  - Who were born preterm
  - With chronic or clinically significant medical conditions
  - Who are exposed to poverty
  - Who have family members with developmental delays
  - Whose parents have mental health conditions

### What are the behaviors usually seen?

Behaviors for developmental delays vary with the age of the child. Warning signs are based on the age of the child and are demonstrated in the Table on the next page. Concern is warranted if a child has not met each milestone at the corresponding age, especially if the child loses skills around 1 year of age that he or she once had.

### When should a more concerning issue be suspected?

Children should be referred to their pediatrician when

- They are not meeting milestones on time.
- Parents have concerns about their development.
- Child care or early education professionals have concerns about their development.

### What are typical management strategies in the behavioral support plan?

Children with developmental delays can be supported in their classroom by a number of approaches.

- First, expectations should be adapted to the individual child. Children should be asked to do activities that are within the scope of their developmental level, no matter how old they are. For example, a child with a language delay may need instructions to be given with pictures and physical gestures, rather than relying only on words. Children who are delayed in fine-motor skills may need help with meals if they cannot use a utensil.
- Next, children with developmental delays should be given opportunities to shine and feel successful by asking them to do things they *can* do. For example, a child with learning problems may be asked to help the teacher pass out paper and crayons, rather than be called on to answer a question that would be too hard.
- Third, teachers can support social development and peer connections by assigning a buddy to the child who has special needs. A buddy is a peer partner for activities and transitions. The buddy can help the

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child who has disabilities navigate transitions and classroom activities by being partners and modeling the expected behavior. Buddies do not take over adult responsibilities, but having a peer partner can help a child try activities and engage in the class socially. The relationship is reciprocal; a buddy might help with a classroom activity, and the child with special needs may be able to be helpful to the peer by using his or her established skills.

## When should I ask for additional support?

- When warning signs for developmental delays are seen, or when caregivers are concerned, it is valuable to advise caregivers to talk about their concerns with their child's pediatrician so that the child can undergo a more formal evaluation. Pediatricians can refer children to developmental specialists as needed.

## Milestones for Children 6 Months to 5 Years of Age

Age	Language Milestone	Gross-Motor Milestone	Fine-Motor Milestone	Problem-solving	Social Milestone
6 mo	Makes vowel sounds ( <i>ah, oh</i> )	Rolls over in either direction	Reaches for things; brings things to the mouth with the hands		Laughs; responds to sounds
9 mo	Babbles ("dada, baba")	Sits; bears weight on the legs	Transfers toys from one hand to the other		Plays back and forth; responds to own name; follows pointing; recognizes familiar people
12 mo	Says single words; learns gestures such as waving	Crawls; stands when supported		Searches for things that are hidden	Points to things
18 mo	Says 6 words	Walks		Recognizes what familiar things are for (eg, spoon)	Copies and mimics others; notices when a caregiver leaves or returns
24 mo (2 y)	Says 2-word phrases ("drink milk")	Walks steadily	Uses a spoon and brush	Follows directions	Copies other people's actions
36 mo (3 y)	Mostly (75% of the time) uses clear speech; uses sentences	Uses stairs well	Can use simple toys (puzzles)	Understands simple directions	Makes eye contact; plays pretend and make-believe
48 mo (4 y)	Can tell a story; uses "you" and "me" correctly; speech is 100% understandable	Jumps in place	Can scribble and copy basic shapes	Can follow 3-part commands	Engages in make-believe and social play
60 mo (5 y)	Uses plural and past tense; talks about daily activities		Draws pictures	Can brush teeth, wash hands, get dressed	Shows a range of emotions; responds to people; can differentiate between real and pretend; can say first and last name

Derived from Centers for Disease Control and Prevention. CDC's developmental milestones. <https://www.cdc.gov/ncbddd/actearly/milestones/index.html>. Reviewed February 8, 2019. Accessed December 19, 2019.

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Referrals might be to a speech and language therapist, physical or occupational therapist, developmental and behavioral pediatrician, child and adolescent psychiatrist, autism specialist, neurologist, geneticist, or another medical specialist.

- Children younger than 36 months can be referred to their state early intervention program by concerned family members, child care staff members, or pediatricians. Every state has an early intervention program that provides comprehensive developmental supports at home or in child care (<https://www.cdc.gov/ncbddd/actearly/parents/states.html#textlinks>).
- Children older than 36 months are covered by Part B of the Individuals With Disabilities Education Act and may be able to get developmental services through the school system.
- Child care centers that have access to mental health consultation can ask for support for interventions for young children who have developmental disabilities.

### What training and/or policies may be needed?

- Teachers may need training to effectively support a child's learning with specific developmental delays, especially to avoid creating frustrating situations by asking a child to do things that the child cannot do or even punishing a child for a behavior that is caused by the developmental delay.

- Children with global developmental delays may not be toilet trained at the same pace as other children, and appropriate accommodations should be considered.
- Some children who have developmental delays associated with medical conditions may need to take medications during the day, meaning a clear medication administration policy is useful.

### Where can I find additional resources?

- Centers for Disease Control and Prevention: Watch me! Celebrating milestones and sharing concerns (<https://www.cdc.gov/ncbddd/watchmetraining/index.html>)
- Centers for Disease Control and Prevention: <https://www.cdc.gov/ncbddd/actearly/milestones/index.html>; also has handouts and an app for parents to be able track development in English and Spanish
- American Academy of Pediatrics HealthyChildren.org: Ages & Stages (<https://www.healthychildren.org/English/ages-stages/Pages/default.aspx>; also provides audio information for parents who have limited literacy)

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