



Technical Assistance Center on Social Emotional Intervention for Young Children

THE PYRAMID MODEL FOR PROMOTING THE SOCIAL AND EMOTIONAL DEVELOPMENT OF INFANTS AND YOUNG CHILDREN FACT SHEET

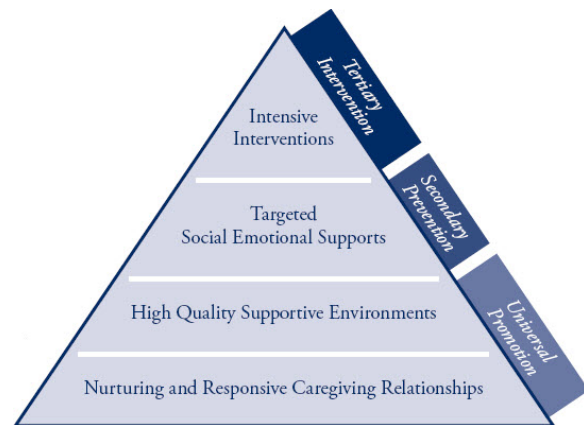
THE TIERED FRAMEWORK OF THE PYRAMID MODEL

The Pyramid Model for Promoting the Social and Emotional Development of Infants and Young Children provides a tiered intervention framework of evidence-based interventions for promoting the social, emotional, and behavioral development of young children (Fox et al., 2003; Hemmeter, Ostrosky, & Fox, 2006). The model describes three tiers of intervention practice: universal promotion for all children; secondary preventions to address the intervention needs for children at risk of social emotional delays, and tertiary interventions needed for children with persistent challenges. The Pyramid Model was initially described as an intervention framework for children 2-5 years old within early childhood settings. However, newer iterations of the model provide guidance for the implementation of the framework with infants, toddlers and preschoolers, and include interventions needed to support children who are typically developing and who have or are at risk for developmental delays or disabilities (Hunter & Hemmeter, 2009).

TIER 1: UNIVERSAL PROMOTION

The first tier of the Pyramid Model involves two levels of practices that are critical to promoting the social development of young children. The first level of practices is the provision of nurturing and responsive caregiving relationships to the child. This includes the family or primary caregiver and the caregiver or teacher

within an early childhood program. In addition to a focus on the relationship to the child, this level of the pyramid also describes the need for developing partnerships with families and collaborative relationships among intervention or classroom team members.



There is ample evidence that the provision of a responsive and nurturing relationship is pivotal to a child's development (National Research Council, 2001; Shonkoff & Phillips, 2000). In their early years, children exist within a web of relationships with parents, teachers, other caring adults in their lives and eventually, peers. This web supplies the context within which healthy social emotional growth and the capacity to form strong positive relationships with adults and peers develop. The relationships level of the pyramid model includes practices such as: actively supporting children's engagement; embedding instruction within children's routine, planned, and play activities; responding to children's conversations; promoting the communicative attempts of children with language

delays and disabilities; and providing encouragement to promote skill learning and development.

The second level of universal promotion is the provision of supportive environments. Within home and community settings, this level of the pyramid refers to the provision of predictable and supportive environments and family interactions that will promote the child's social and emotional development. Universal practices for children with or at risk for delays or disabilities include receiving instruction and support within inclusive environments that offer the rich social context that is essential to the development of social skills and peer relationships.

In early care and education programs, this level of the pyramid refers to the design of classrooms and programs that meet the standards of high quality early education. This includes the implementation of a curriculum that fosters all areas of child development, the use of developmentally and culturally appropriate and effective teaching approaches, the design of safe physical environments that promote active learning and appropriate behavior, the provision of positive and explicit guidance to children on rules and expectations, and the design of schedules and activities that maximize child engagement and learning. At this level of the pyramid, families who receive early intervention services might be provided with information and support on establishing predictable routines; implementing specialized health care and treatment procedures; teaching social, emotional, and other skills within play and routine activities; promoting language and communication development; and fostering the development of play and social interaction skills.

TIER 2: SECONDARY PREVENTION

The secondary or prevention level of the Pyramid includes the provision of explicit instruction in social skills and emotional regulation. In early childhood programs, all young children will require adult guidance and instruction to learn how to express their emotions appropriately, play cooperatively with peers, and use social problem solving strategies. However, for some children it will be necessary to provide more systematic and focused instruction to teach children social emotional skills. Children might need more focused instruction on skills such as: identifying and expressing

emotions; self-regulation; social problem solving; initiating and maintaining interactions; cooperative responding; strategies for handling disappointment and anger; and friendship skills (Denham et al., 2003; Strain & Joseph, 2006). Families in early intervention programs might need guidance and coaching from their early intervention provider on how to promote their child's development of targeted social and emotional skills. Families of infants and young toddlers might need guidance and support for helping the very young child regulate emotions or stress and understand the emotions of others.

TIER 3: TERTIARY INTERVENTIONS

When children have persistent challenging behavior that is not responsive to interventions at the previous levels, comprehensive interventions are developed to resolve problem behavior and support the development of new skills. At this level of the Pyramid Model, Positive Behavior Support (PBS) is used to develop and implement a plan of intensive, individualized intervention. PBS provides an approach to addressing problem behavior that is individually designed, can be applied within all natural environments by the child's everyday caregivers, and is focused on supporting the child in developing new skills (Dunlap & Fox, 2009; Lucyshyn, Dunlap, & Albin, 2002). The process begins with convening the team that will develop and implement the child's support plan. At the center of the team is the family and child's teacher or other primary caregivers. The PBS process begins with functional assessment to gain a better understanding of the factors that are related to the child's challenging behavior. Functional assessment ends with the development of hypotheses about the functions of the child's challenging behavior by the team. These hypotheses are used to develop a behavior support plan. The behavior support plan includes prevention strategies to address the triggers of challenging behavior; replacement skills that are alternatives to the challenging behavior; and strategies that ensure challenging behavior is not reinforced or maintained. The behavior support plan is designed to address home, community, and classroom routines where challenging behavior is occurring. In this process, the team also considers supports to the family and

strategies to address broader ecological factors that affect the family and their support of the child.

KEY ASSUMPTIONS OF THE PYRAMID MODEL

The Pyramid Model was designed for implementation by early educators within child care, preschool, early intervention, Head Start, and early childhood special education programs. In the delivery of tier 2 and 3 interventions, it is assumed that programs will need to provide practitioners with support from a consulting teacher or specialist in the identification of individualized instructional goals and the design of systematic instructional approaches or behavior support plans. The Pyramid Model provides a comprehensive model for the support of all children. A child receiving services through special education might be served at any of the intervention tiers. The model was designed with the following assumptions related to implementation:

1. INCLUSIVE SOCIAL SETTINGS ARE THE CONTEXT FOR INTERVENTION

The focus of the Pyramid Model is to foster social emotional development. This requires a rich social milieu as the context of intervention and instruction. Thus, the model is designed for implementation within natural environments, interactions with the child's natural caregivers and peers, and classroom settings that offer opportunities for interactions with socially competent peers. Interventions do not involve pull out from those settings; rather, they are dependent on a rich social context where the number of opportunities to learn and practice social skills can be optimized.

2. PYRAMID MODEL TIERS HAVE ADDITIVE INTERVENTION VALUE

Each tier of intervention builds upon the previous tier. Tier 2 and 3 interventions are reliant on the provision of practices in the lower tiers to promote optimal child outcomes.

3. INSTRUCTIONAL PRECISION AND DOSAGE INCREASES AS YOU MOVE UP THE PYRAMID TIERS

The intervention practices and foci in tier 2 and 3 are not uniquely different teaching targets or approaches than the universal practices used to foster all children's social development. The differences between tiers are evident in the specificity of the instructional target, the precision of the instructional approach, the frequency of monitoring children's responsiveness to intervention efforts, and the number of instructional opportunities delivered to children at each level.

4. EFFICIENCY AND EFFECTIVENESS OF INTERVENTION IS OF PRIMARY IMPORTANCE

When children have challenging behavior or social-emotional risks, it is imperative that intervention is delivered quickly and effectively. There is ample research evidence that when children's challenging behavior persists, the problems are likely to worsen and become compounded by related problems including peer and adult rejection and coercive relationships (Dodge, Coie, & Lynham, 2006; Moreland & Dumas, 2008). Thus, the Pyramid model has been provided to early educators so that practitioners and programs can provide the most effective intervention needed to immediately support the child and result in desired child outcomes. Children in need of tier 2 or tier 3 approaches should have immediate access to those interventions.

5. FAMILIES ARE ESSENTIAL PARTNERS

The interventions involved in the Pyramid Model are reliant on the participation of families. All families are provided with information on how to promote their child's social development. When children are in need of tier 2 or 3 interventions, families are involved in the provision of systematic intervention by providing increased opportunities for the child to learn and practice new skills in the context of everyday activities and routines in the home and community. When children have persistent challenges, families and other persons involved with the child form a collaborative

team to develop and implement comprehensive interventions and supports that are applied in all of the child's routines and activities.

The Pyramid Model and related resources have been widely disseminated by two federally-funded research and training centers (i.e., Center on the Social Emotional Foundations for Early Learning {www.vanderbilt.edu/csefel} and the Technical Assistance Center on Social Emotional Interventions for Young Children {www.challengingbehavior.org}).

6. ADMINISTRATIVE SUPPORT IS ESSENTIAL

Implementing the Pyramid Model with fidelity and achieving positive outcomes for children and their families requires that administrators understand their roles in the implementation process. Every administrative decision impacts program quality and sustainability. Of particular importance are the facilitative administrative practices that provide sustained commitment, timely training, competent coaching, the use of process and outcome data for decision-making, and the development of policies and procedures that are aligned with high fidelity implementation (Mincic, Smith & Strain, 2009).

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