



Becoming a Trauma Competent Healing Caregiver

Tools for Caregivers

- *Developmental Checklist*
- *Tracking Behaviors*
- *What We Believe – What We Feel – How We Respond to Our Child’s Behavior*
- *What Effects Have You Experienced as a Foster/ Adoptive Parent or Caregiver?*
- *Circle of Support*

Presenter:

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The following resources are adapted in part from the National Child Traumatic Stress Network (nctsn.org) and Trust Based Relational Intervention (TBRI - www.child.tcu.edu)

Developmental Checklist and Indicators of Developmental Delays for Children Exposed to Trauma

Infant and Toddlers

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
0-3 months	<ul style="list-style-type: none"> • Reacts and turns toward sounds • Watches faces and follows objects • Coos and babbles • Becomes more expressive and develops a social smile • Develops a general routine of sleep/wake times 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
4-7 months	<ul style="list-style-type: none"> • Babbles chains of sounds • Responds to others expression of emotions • Grasps and holds objects • Regards own hand and explores objects with hand and mouth • Sits with, and then without support on hands 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
8-12 months	<ul style="list-style-type: none"> • Changes tones when babbling • Says dada and mama and uses exclamations • Imitates sounds and gestures • Explores in many ways (shaking objects, dropping, banging, poking) 	Yes	No
		Yes	No
		Yes	No
		Yes	No

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Developed by Jayne Schooler in cooperation with NCTSN jayeschool@aol.com and social workers in Columbus, Ohio.

	<ul style="list-style-type: none"> • Pulls self to stand and may walk briefly 	Yes	No
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Possible Developmental Indicators for Children Exposed to Trauma 0 – 12 months

AGE 0-12 months	Possible Developmental Indicators of Trauma		
	<ul style="list-style-type: none"> • increased tension, irritability, reactivity, and inability to relax 	Yes	No
	<ul style="list-style-type: none"> • increased startle response 	Yes	No
	<ul style="list-style-type: none"> • lack of eye contact 	Yes	No
	<ul style="list-style-type: none"> • sleep and eating disruption 	Yes	No
	<ul style="list-style-type: none"> • loss of eating skills 	Yes	No
	<ul style="list-style-type: none"> • loss of acquired motor skills 	Yes	No
	<ul style="list-style-type: none"> • avoidance of eye contact 	Yes	No
	<ul style="list-style-type: none"> • arching back/inability to be soothed 	Yes	No
	<ul style="list-style-type: none"> • uncharacteristic aggression 	Yes	No
	<ul style="list-style-type: none"> • avoids touching new surfaces eg. grass, sand and other tactile experiences 	Yes	No
	<ul style="list-style-type: none"> • avoids, or is alarmed by, trauma related reminders, eg sights, sounds, smells, textures, tastes and physical triggers 	Yes	No

Toddler – 12 months-3 years

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
2 years	<ul style="list-style-type: none"> • Says several single words and two-or three word phrases 	Yes	No
	<ul style="list-style-type: none"> • Follows simple instructions 	Yes	No
	<ul style="list-style-type: none"> • Points to things when named 	Yes	No
	<ul style="list-style-type: none"> • Finds hidden objects 	Yes	No
	<ul style="list-style-type: none"> • Scribbles 	Yes	No
	<ul style="list-style-type: none"> • Stands alone and walks well 	Yes	No

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
3 years	<ul style="list-style-type: none"> • Uses four to five word sentences • Follows two or three part instructions • Recognizes and identifies most common objects • Draws simple straight or circular lines • Climbs well, walks up and down stairs, runs 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

Possible Developmental Indicators of Trauma – 12 months to 3 years

AGE 12 months to 3	Possible Developmental Indicators of Trauma		
	• Behavioral changes, regression to behavior of younger child	Yes	No
	• Increased tension, irritability, unable to relax	Yes	No
	• Increased startle response	Yes	No
	• Sleep and eating disruption	Yes	No
	• Loss of eating skills	Yes	No
	• Loss of recently acquired motor skills	Yes	No
	• Avoidance of eye contact	Yes	No
	• Child knows no single words,	Yes	No
	• Does not walk easily,	Yes	No
	• Does not seem to know or respond to family members,	Yes	No
	• Does not amuse himself for a short period of time.	Yes	No
	• Uncharacteristic, inconsolable rage, rageful crying, and neediness	Yes	No
	• Fussiness and separation anxiety	Yes	No
	• Heightened indiscriminate attachment behaviors	Yes	No
	• Inappropriate sexualized behavior	Yes	No
	• Sexualized play with toys	Yes	No

Pre School Ages 4-5

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
4 years	<ul style="list-style-type: none"> • Use five to six word sentences, tells stories • Understands counting and may know some numbers • Identifies four or more colors • Copies or draws simple shapes • Walks/runs forward and backward with balance 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
5 years	<ul style="list-style-type: none"> • Speaks in full sentences, tells longer stories • Draws circles and squares, begins to copy letters • Climbs, hops, swings and may skip • Tries to solve problems from a single point of view and identify solutions to conflicts • Most likely to agree with rules 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

Possible Developmental Indicators of Trauma – 4 to 5 years

AGE 4 to 5	Possible Developmental Indicators of Trauma		
	<ul style="list-style-type: none"> • Behavioral changes, regression to behavior of younger child • Increased tension, irritability, unable to relax • Uncharacteristic aggression • Sleep and eating disruption • Loss of eating skills • Loss of recently acquired motor skills 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

	<ul style="list-style-type: none"> • Reduced eye contact 	Yes	No
	<ul style="list-style-type: none"> • Enuresis, encopresis , 	Yes	No
	<ul style="list-style-type: none"> • Loss of recently acquired language skills and vocabulary 	Yes	No
	<ul style="list-style-type: none"> • Loss of energy and concentration in preschool 	Yes	No
	<ul style="list-style-type: none"> • Loss of interest in activities 	Yes	No
	<ul style="list-style-type: none"> • Demonstration of adult sexual knowledge through inappropriate sexualized behavior 	Yes	No
	<ul style="list-style-type: none"> • Sexualized play with toys 	Yes	No
	<ul style="list-style-type: none"> • Sexualized drawing 	Yes	No
	<ul style="list-style-type: none"> • Involvement of peers in trauma related play at school and day care 	Yes	No
	<ul style="list-style-type: none"> • Separation anxiety with parents/others 	Yes	No

School Ages 6-12

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
6-7 years	<ul style="list-style-type: none"> • Reads short words and sentences • Draws person or animal • Takes pride and pleasure in mastering new skills • Has more internal control over emotions and behaviors • Shows growing awareness of good and bad 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

AGE	Developmentally Appropriate Behaviors	Child Shows Appropriate Development	
8-11 years	<ul style="list-style-type: none"> • Reads well • Multiplies numbers • Expresses a unique personality when relating to others • Solves conflicts by talking, not fighting • Is able to bounce back from most disappointments 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

Possible Developmental Indicators of Trauma – 6-11 years

Behaviors are listed with age progression	Possible Developmental Indicators of Trauma		
	• Behavioral changes	Yes	No
	• Regression	Yes	No
	• Increased tension, irritability, unable to relax	Yes	No
	• Uncharacteristic aggression	Yes	No
	• Sleep and eating disruption	Yes	No
	• Loss of eating skills	Yes	No
	• Enuresis, encopresis	Yes	No
	• Loss of recently acquired motor skills	Yes	No
	• Lack of eye contact	Yes	No
	• Spacey or distractible behavior	Yes	No
	• Blacking out	Yes	No
	• Accident prone	Yes	No
	• Fire setting/hurting animals	Yes	No
	• Loss of energy and concentration in school	Yes	No
	• Loss of interest in activities	Yes	No
	• Demonstration of adult sexual knowledge through inappropriate sexualized behavior	Yes	No
	• Explicit/aggressive/exploitive, sexualized relating/engagement with other children or adults	Yes	No

	<ul style="list-style-type: none"> • Trauma flashbacks • Suicidal ideation 	Yes	No
		Yes	No

Pre-Teens/Teens

AGE	Developmentally Appropriate Behaviors	Child Showing Mastery	
12-14 years	<ul style="list-style-type: none"> • May have frequent mood swings or changes in feelings, • Gradually develops own taste, sense of style and identity • Has a hobby, sport, or activity • Learns to accept disappointments and overcome failures • Has one or more “best” friends and positive relationships with other the same age 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

AGE	Developmentally Appropriate Behaviors	Child Showing Mastery	
15-18 years	<ul style="list-style-type: none"> • Begins to develop an identity and self-worth beyond body image and physical appearance • Is able to calm down and handle anger • Sets goals and works toward achieving them • Accepts family rules, completes chores and other responsibilities • Needs time for emotions and reasoning skills to catch up with rapid physical changes 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

Possible Developmental Indicators of Trauma – 12-18 years Much of the list above plus:

12-18	Possible Developmental Indicators of Trauma		
	<ul style="list-style-type: none"> • Behavioral changes • Self-harming • Increased self-focusing and obsession • Reduced capacity to feel emotions, appears numb • Wishes for revenge and action oriented responses to trauma • Partial loss of memory and ability to concentrate 	Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No
		Yes	No

Adapted from Every Child Every Where: Child Development and Trauma, A Victorian Government Initiative. August 2010 release http://www.dhs.vic.gov.au/data/assets/pdf_file/0010/586198/child-development-and-trauma-guide-2010.pdf

Tracking Behaviors

Created by Lisa Hatcher
Family Based Care Department
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And adapted from *The Connection* by Dr. Karyn Purvis

This record will be very helpful in tracking your child’s behaviors that are identified as negative, harmful, or otherwise, “undesirable”. It is important that you, as your child’s biggest advocate, help us by charting the **Who, What, When, Where and What** of the specific problems we want to address as a team. You don’t need to write a lot, we know you are busy. Just jot down some notes so that we all can track your child’s behavior and perhaps begin to identify the meaning behind it.

What was the behavior?	Who is in the room/ To whom is the behavior directed? Where does usually occur? When (weekly, daily, hourly)	What do you think caused this behavior? What does the child need? (fear driven, sensory issue, physical need, etc)

What We Believe –Tracking Our Behavioral Response

Child's Behavior	Belief	Feelings	Parental Response
Throws another tantrum in the store	I am losing control	I feel angry and frustrated	I turn up the control knob
Becomes aggressive at a family function.	People will think I am not competent to parent this child	I feel embarrassed and shameful	I withdraw emotionally from this child/family/friend
Lies about a problem at school	This child is doing this to me on purpose	I feel "attacked", angry, betrayed	I discipline this child inappropriately

Child's Behavior	Belief	Feelings	Parental Response

What Effects Have You Experienced as a Caregiver

On a scale of 1-5, what effect do the following have on you? (1 = little effect, 5 = extreme effect)

EFFECTS - NEGATIVE

Rating Your Effect

Lack of understanding by family	
Lack of understanding by friends	
Lack of validation as a parent	
Lack of support by family and/or friends	
Lack of support by agency/social workers	
Living with uncertainty every day (child's behavior)	
Feel like living with a time bomb/walking on egg shells	
Negative changes within myself	
Negative changes in my family/ splitting of family members	
Negative changes in relationships with extended family	
Negative changes in relationships with friends	
Feeling isolated	
Choosing to withdraw from friends and family	
Extreme physical exhaustion	
Drained social and emotional energy	
Extreme mood swings	
Loss of feelings of competency as a parent	
No time to take of own personal needs	
Physical symptoms: gain weight, lost weight, sleep problems	
Profound sadness	
Regret for what might have been with this child	

EFFECTS - POSITIVE**Rating Your Effect**

I am feeling more competent as a parent	
I feel like I am gaining insight and understanding into this child.	
I feel like I am gaining insight into myself.	
I feel I am adapting to these unusual circumstances.	
I feel good about the direction we are going.	
I feel I have an ability to celebrate small successes.	
I have a growing determination to make it against all odds.	

This was, in part, adapted from “Loving and Living with Traumatized Children,” by Megan Hirst. Used with permission.



Identifying Your Circle of Support

Created by Heather Bench, an adoptive mom
Dayton, Ohio

This exercise allows you to identify a person or multiple people who represent the traits of a support person in your life. Anyone who represents the following traits, list their name in the provided box on the next page.

The Rock - A person(s) who will remain in your life during the difficult times and continue to love you unconditionally.

The Wise - A person(s) who will always tell the truth even when it is not what you want to hear.

The Learner – A person(s) who will learn alongside of you.

The Helping Hand - A person(s) who understands and is aware when you may need a break and steps in to assist.

Advocate - A person(s) who will always stand up for you and continue to support you.



Identifying Your Circle of Support

