

Infants and Toddlers

					Indicators of	Positive Parenting
		Physical	Socio-Emotional	Cognitive	Developmental Concern	Characteristics
0-3 months	*	grasping	 ✓ Concerned with satisfaction of needs ✓ Smiles in response to caregiver's voice ✓ Prefers primary caregiver to stranger 	 ✓ From birth, infant begins to "learn" with eyes, ears, hands, etc. ✓ Vocalizes sounds (coos) ✓ Smiles when faces evoke memories of pleasure 	 Sucks poorly and feeds slowly Doesn't follow objects with eyes Doesn't respond to loud sounds Doesn't grasp and hold objects Doesn't smile at the sound of the primary caregiver's voice 	 Makes eye contact with infant Interact with infant by talking, smiling, singing, etc. Gently rocks/bounces infant Picks infant up when distressed Allows for self-soothing (infant sucks fingers/pacifier, etc.)
3-6 months	* * * *	Rolls over Holds head up when held in sitting position Lifts knees, makes crawling motions Reaches for objects	 ✓ Smiles and laughs socially ✓ Responds to tickling ✓ Begins to distinguish own image in mirror from others' images 	 Has recognition memory for people, places, and objects Uses both hands to grasp objects Exhibits visual interests Joins with caregiver in paying attention to labeling objects and events (4-6 months) 	 Doesn't hold head up Doesn't coo, make sounds, or smile Doesn't respond to sounds or turn head to locate sounds Doesn't roll over in either direction Not gaining weight 	 Helps infant "practice" sitting Encourages floor time on a blanket for rolling and reaching Responds to fears, cries by holding, talking, and reassuring Talks and plays with infant
6-12 months	✓ ✓ ✓	Sits alone Feeds self finger foods; holds own bottle (6-9 months) Crawls, pulls up, and walks with support (9-12 months) Baby teeth begin to	 ✓ Indicates preference for primary caregivers ✓ May cry when strangers approach (stranger 	 ✓ Finds objects hidden repeatedly in one place, but not when moved ✓ Plays peek-a-boo ✓ Has recall memory for people, places, and objects (9-12 months) ✓ Imitates speech sounds 	 Doesn't smile or demonstrate joy Unable to sit without support Does not follow objects with both eyes Does not actively reach for objects 	 Discipline consists of redirecting to different activity. Sharp discipline, scolding, and verbal persuasion are not helpful Holds and cuddles baby Reads to baby Names objects when baby

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	emerge	 anxiety) ✓ Shows signs of separation anxiety ✓ Repeats performances for attention (9-12 months) ✓ Drops objects on purpose for others to pick up (10-12 months) 	 ✓ Says da-da and ma-ma and knows who these people are (10-12 months) ✓ Uses preverbal gestures to communicate (by 12 months) 	 Doesn't look or react to familiar caregivers Does not babble Shows no interest in playing peek-a-boo (by 8 months) 	points to something ✓ Maintains consistent bed time routine of cuddling, rocking, and soothing
12-18 months	 ✓ Walks alone ✓ Manipulates small objects with improved coordination ✓ Drinks from a cup with a lid and uses a spoon ✓ Builds tower of 2 blocks ✓ Removes hat, socks, and shoes 	 Extends attachment for primary caregivers to the world; seems in love with the world and wants to explore everything Recognizes image of self in mirrors Solitary or parallel play Fears heights, separation, strangers, and surprises 	 Begins to show intentional behavior, initiates actions (drops, throws, shakes, bangs) Is curious about everything around him or her Sorts toys and other objects into groups Understands object permanence - realizes objects exist when out of sight & will look for them Says first words (mama, dada, doggie, bye-bye) 	 Doesn't respond to name Unable to finger feed Not gaining weight Flat affect (no smiling) Not interested in play such as peek-a-boo Not taking steps Cannot hold spoon Doesn't look at pictures in book 	 ✓ Encourages exploration ✓ Applauds child's efforts ✓ Interprets new/unfamiliar situations ✓ Talks to child in simple clear language about things going on in the environment

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18-24 months	* * * * *	Runs and walks up steps Can help get undressed Drinks from a cup Eats with a spoon	 ✓ Likes to hand things to others as play ✓ May have temper tantrums ✓ Shows affection to familiar people ✓ Plays simple pretend, such as feeding a doll ✓ Explores alone but with 	 ✓ Begins to make two-word combinations that mean something ✓ Imitates words readily and understands a lot more that he or she can say ✓ Shows memory improvements, understand cause and effect; experiments to see what will happen 	 Cannot walk Does not speak at least 6 words Does not imitate actions or words Cannot push a wheeled toy Does not follow simple instructions Doesn't notice or mind when a caregiver leaves or returns 	 Provides opportunities to choose Sets appropriate limits Assists child in coping with range of emotions Support new friendships and experiences Responds to wanted behaviors more than disciplining unwanted behaviors
			caregiver close by	 Begins to sort shapes and colors 		

Pre-School

		Physical		Socio-Emotional		Cognitive	D	Indicators of evelopmental Concern		Positive Parenting Characteristics
2-3 years	* * *	Has developed sufficient muscle control for toilet training Is highly mobile – skills are refined Uses spoon to feed self Throws and kicks a ball Disassembles simple objects and puts them back together Has refined eye- hand coordination-can do simple puzzles, string beads, stack blocks	* * * * *	sharing Has strong urges and desires, but is developing ability to exert self-control Wants to please parents but sometimes has difficulty containing impulses Displays affection - especially for caregiver Initiates own play activity and occupies self Is able to communicate and converse	* * * *	Is capable of thinking before acting Explores language ability – becomes very verbal Enjoys talking to self and others Loves to pretend and to imitate people around him or her Enjoys creative activities – i.e., block play, art Thinks through and solves problems in head before acting (has moved beyond action-bound stage)	•	Cannot run, jump, or hop Cannot feed self with spoon Does not speak in simple sentences that use normal word order Does not enjoy make- believe games Does not spontaneously show affection for familiar playmates Does not express a wide range of emotions Does not separate easily from primary caregiver Does not object to major changes in routine	✓ ✓ ✓	child to make choices Encourages independence and provides guidance with self-care (dressing, hand washing, etc.) Sings, plays, and dances with child

-4 years	 Physical ✓ Continues to run, jump, throw, and catch with 	 ✓ Emotional self- regulation improves 	Cognitive Asks "why" questions -	 Falls down a lot or has 	✓ Provides a sense of security
•	 better coordination ✓ Walks up and down stairs, one foot on each step ✓ Rides tricycle ✓ Uses scissors ✓ Can button and lace ✓ Eats and dresses by self with supervision ✓ Uses toilet or potty chair; bladder and bowel control are usually established 	 ✓ Understands taking turns and sharing ✓ Self-conscious emotions become more common ✓ Forms first friendships ✓ Shows concerns for a crying friend ✓ May get upset with major changes in routine 	 believes there is a reason for everything and he or she wants to know it Engages actively in symbolic play - has strong fantasy life, loves to imitate and role-play Speech can be understood by others Should be able to say about 500 to 900 words Understands some number concepts Converses and reasons Is interested in letters Scribbles in a more controlled way - is able to draw circles, recognizable objects 	 trouble with stairs Drools or has very unclear speech Doesn't use sentences of more than three words Can't work simple toys (such as peg boards, simple puzzles, turning handle) Doesn't make eye contact Doesn't play pretend or make-believe Doesn't want to play with other children or with toys Lashes out without any self-control when angry or upset 	 Provides a sense of security by maintaining household routines and schedules Supports child's need for gradual transitioning. <i>Example:</i> Provides warning of changes so child has time to shift gears: "We're leaving in 10 minutes" Points out colors and numbers in the course of everyday conversation Encourages independent activity to build self- reliance. Provides lots of sensory experiences for learning and developing coordination — sand, mud, finger paints, puzzles Reads and sings and talks to

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4-6 verses	 ✓ Has refined muscle development and is better 	 Plays cooperatively with peers Enhanced capacity to share and take turns Recognizes ethnic and sexual identification Displays independence Protects self and stands up for rights Identifies with parents and likes to imitate them Often has "best friends" Likes to show adults what he or she can do Continually forming new images of self- based on how others view him or her 	 Is developing longer attention span Understands cause and effect relationships Engages in more dramatic play and is closer to reality, pays attention to details Is developing increasingly more complex and versatile language skills Expresses ideas, asks questions, engages in discussions Speaks clearly Is able to draw representative pictures Knows and can name members of family and friends Increased understanding of time 	 Poor muscle tone, motor coordination Poor pronunciation, incomplete sentences Cognitive delays; inability to concentrate Cannot play cooperatively; lack curiosity, absent imaginative and fantasy play Social immaturity: unable to share or negotiate with peers; overly bossy, aggressive, competitive Attachment problems: overly clingy, superficial attachments, show little distress or over-react when separated from caregiver Excessively fearful, anxious, night terrors Lack impulse control, little ability to delay gratification Exaggerated response (tantrums, aggression) to even mild stressors Enuresis, encopresis, self-stimulating behavior - rocking, head-banging 	 Encourages exploration Applauds child's efforts Interprets new/unfamiliar situations Reinforces good behavior and achievements Encourages child to express feelings and emotions Encourages physical activity with supervision Gives child chances to make choices Uses time-out for behavior that is not acceptable

Early Adolescence

							Indicators of		Positive Parenting
		Physical	Socio-Emotional		Cognitive	De	velopmental Concern		Characteristics
6-9 years	✓ ✓	Gradual replacement of primary teeth by permanent teeth throughout middle childhood Fine motor skills: writing becomes smaller and more legible; drawings become more organized and detailed and start to include some depth Gross motor skills: can dress and undress alone; Organized games with rough-and- tumble play become more common	May have a special friend Likes action on television Enjoys books and stories May argue with other children but shows cooperation in play with a particular friend Self-concept includes identifying own personality traits and comparing self with others Becomes more responsible and independent Still obeys adults to avoid trouble Can adapt ideas about fairness to fit varied situations	✓ ✓ ✓ ✓ ✓ ✓	Thought becomes more logical, helping the child categorize objects and ideas Can focus on more than one characteristic of concrete objects Attention becomes more selective and adaptable Can use rehearsal and organization as memory strategies Emotional intelligence is developing: self- awareness and understanding of own feelings; empathy for the feelings of others; regulation of emotion; delaying gratification Vocabulary increases rapidly Makes the transition from "learning to read" to "reading to learn" Carries on long conversations	The pre	ese indicators may be sent for any child in the ly adolescent range (6-11	• • • • • •	

				Indicators of	Positive Parenting
	Physical	Socio-Emotional	Cognitive	Developmental Concern	Characteristics
9-11 years	 Girls' adolescent growth spurt begins Gross motor skills are better coordinated (running, jumping, throwing and catching, kicking, batting, and dribbling) Reaction time improves, which contributes to motor skill development Fine motor skills improve; depth cues evident in drawings through diagonal placement, overlapping objects, and converging lines 	Distinguishes between effort and luck as causes of successes and failures; can become critical of others quickly Has adaptive set of strategies for regulating emotion Peer groups emerge Friendships are based on the pleasure of sharing through activities or time spent together	 Planning improves Can apply several memory strategies at once Long-term knowledge base grows in size and organization Improves in cognitive self-regulation (monitoring and directing progress toward a goal) Grasps double meanings of words as reflected in comprehension of metaphors and humor Improved understanding of complex grammatical constructions Conversational strategies become more refined 	 6-11 years, continued Suspicious and mistrustful of adults Little frustration tolerance; difficult to engage and keep interested in goal directed activity Cannot adapt behavior to different social settings Does not understand that a person's identity remains the same regardless of outward changes (e.g., costume) Cannot understand concepts of space, time, and dimension Can't differentiate real from pretend Can't understand the difference between behavior and intent (breaking a lamp is equally bad regardless of whether on purpose or an accident) 	 Helps child develop own sense of right and wrong. Talks with child about risky things, peer pressure, etc. Encourages child to respect other people Spends quality time listening to child and talking about accomplishments and possible challenges Talks with child about normal physical and emotional changes of puberty Is affectionate and honest with child.

Adolescence/Young Adults

							Indicators of		Positive Parenting
		Physical	Socio-Emotional		Cognitive	D	evelopmental Concern		Characteristics
5 years	*	Period of rapid skeletal and sexual maturation	 ✓ Critical of adults; annoyed by younger siblings; 	✓ ✓	Thrives on arguments and discussions; challenges adults	•	By end of period, physically immature, small, not showing signs	•	Is tolerant, understanding, and supportive Accepts youth's feelings but
1-1	v	Preoccupation with body image	obnoxious to live with	v	Increasingly able to memorize, think logically;		of puberty or secondary sex characteristics (wide		tries to help youth evaluate more objectively
1	✓	Acne may appear	✓ Wants		engage in introspection		range here; girls mature	•	Avoids being defensive; child
	✓	Boys ahead of girls in endurance and	unreasonable independence	~	Can plan realistically for the future; may have	•	earlier) Poor motor skills,		is not challenging the adult's authority
		muscular strength	 ✓ Dramatizes and 		interest in earning money		coordination	•	Sets limits, but gives
	\checkmark	Rapid growth may	exaggerates own	\checkmark	Is critical of own artistic	•	Lack of peer group		opportunities for
		mean large appetite	positions; has		products		relationships and		independence whenever
		but less energy	many fears,	~	Interested in world and		identification with peers		possible
	~	There is a wide	worries, and		community; may read a	•	Can't think	•	Answers questions about
		variation in beginning	tears		great deal		hypothetically; doesn't		bodily changes openly and
		and completion of	 Resists any show 	~	Needs to feel important		consider consequences of		honestly
		puberty (body hair,	of affection		and believe in something		actions	•	Encourages group activities
		increased	 ✓ Often moody; 	~	Social cognition:	•	Can't put him/herself in		and discourages solo dating
		perspiration and oil production in hair and	anger is common; resents being		 Belief in an imaginany 		place of another; doesn't consider how behavior	•	Doesn't nag boys about food intake and seeming "laziness"
		skin. Girls: breast	told what to do;		imaginary audience, that		affects others		Discusses ways to manage
		and hip development,	rebels at routines		others are as		Difficulty problem		and handle stress
		onset of	✓ Intense interest		preoccupied with	•	solving; doesn't work		Finds ways to spend time
		menstruation. Boys:	in teams and		one as oneself is		through systematically		together
		growth in testicles	organized,		(e.g., "everyone is		and weigh solutions	•	Provides consistent, loving
		and penis, wet	competitive		looking at me")	•	Poor school performance		discipline with limits,
		dreams, deepening of	games; considers		 Personal fable - 	•	Doesn't reject or		restrictions, and rewards
		voice)	membership in		belief in personal		question parental		
	\checkmark	Increased possibility	clubs important;		uniqueness (e.g.,		standards and express		

				Indicators of	Positive Parenting
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	of acting on sexual desires	 has whole gang of friends ✓ Girls show more interest in opposite sex than boys do ✓ Recognizes that differences exist between and within groups ✓ May experience prejudice, discrimination, or bias due to ethnicity or poverty 	"no one understands me") and belief that self is invulnerable ("I won't get hurt") Able to understand other points of view, but tends to be egocentric	 self through clothes, hair, and other lifestyle choices Poor self-esteem Emotional and behavioral problems (anxiety, depression, withdrawal, aggression, lack of impulse control, anti- social behavior) Withdrawal from friends and from activities once enjoyed Changes in eating and sleeping habits Abuse of alcohol or drugs 	
				Indicators of	Positive Parenting
	Physical	Socio-Emotional	Cognitive	Developmental Concern	Characteristics
15-21 years	 ✓ Preoccupation with body image (continues through adolescence) ✓ Late maturing girls (by 10th grade) are more satisfied with their body image than early maturing girls ✓ Completed physical 	 Relationships with parents range from friendly to hostile Usually has many friends and few confidants Worries about failure May appear 	 May lack information or self-assurance about personal skills and abilities Continuing formal operational thought with abstract, idealistic, logical, hypothetical- deductive reasoning, complex problem solving, and critical thinking 	 Physically immature, small, not showing signs of puberty or secondary sex characteristics Unable to form or maintain satisfactory relationships with peers Can't put him/herself in place of another; doesn't consider how behavior affects others 	 Recognizes and compliments physical maturity Provides accurate information on consequences of sexual activity Tries not to pry; but is available to talk and listen Maintains positive relationship by being respectful and friendly Accepts feelings; doesn't

Ages and A	Associated	Characteristics
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			Indicators of	Positive Parenting
Physical	Socio-Emotional	Cognitive	Developmental Concern	Characteristics
 maturation Physical features are shaped and defined Probability of acting on sexual desires increases 	 moody, angry, lonely, impulsive, self-centered, confused, and stubborn ✓ Has conflicting feelings about dependence and independence ✓ Girls may form identity and prepare for adulthood through establishing relationships and emotional bonds ✓ Interest in forming romantic relationships part of separation task; implies separation from family ✓ Cultural differences may cause conflict 	 May enjoy debating and arguing Has a strong sense of awareness May be judgmental of adults or peers if they do not do what is "fair" Seriously concerned about the future Beginning to integrate knowledge leading to decisions about future 	 Poor self-esteem / guilt Overcompensates for negative self-esteem by being narcissistic, unrealistically self- complimentary; grandiose expectations for self Engages in self- defeating, testing, and aggressive, antisocial, or impulsive behavior Lacks capacity to manage intense emotions; moods change frequently and inconsistently Has emotional disturbances: depression, anxiety, post-traumatic stress disorder, attachment problems, conduct disorders 	 overreact and avoids disapproval Recognizes and accepts current level of interest in opposite sex Encourages experiences with a variety of people (e.g., older, younger, different cultures) Encourages talking about and planning for future

Adapted from One or More of the Following Sources: Chadwick Trauma-Informed Systems Project. (2013). Guidelines for Applying a Trauma Lens to a Child Welfare Practice Model (1st ed.). San Diego, CA: Chadwick Center for Children and Families; Reducing the Trauma of Investigation, Removal and Initial Out-of-Home Placement Project. (2008-2009). Trauma Informed Practice Strategies for Caseworkers. Portland State University, Center for Improvement of Child and Family Services; Child Welfare Trauma Training Toolkit. (2013). The National Child Traumatic Stress Network; Child and Adolescent Development Resource Book. (2005). The Pennsylvania Child Welfare Training Program.

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