

Caseworker Core Module 7: Note Taking Guide



Take Notes



Group Activity



Watch Video

Getting started....

- You can view and download **ALL** the Handouts and Resources from this workshop by scanning this QR code with your smart phone or tablet, or by going to the link below:
<https://tinyurl.com/CW7ChildDevelopment>
- Additional QR codes are throughout the guide
- Don't have a smart phone or tablet? A list of URLs is in the back of this guide!



Section 1: Welcome and Introductions



Section 2: Introduction to Child Development



Definitions:

Child

Caregiver

Chronological Age

Developmental Age

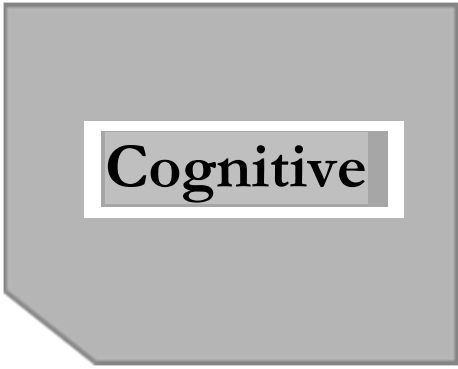
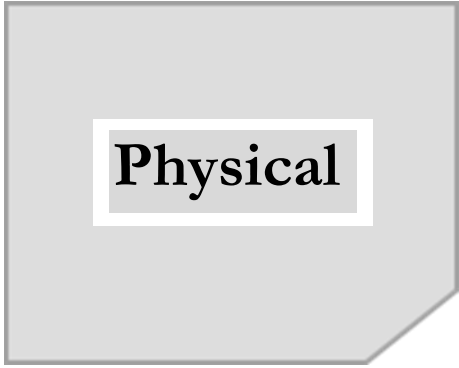
What's in It for Me?

1. Why do caseworkers need to know about child development and the effects of abuse and neglect on development?

2. What do I want or need to know about child development as it pertains to my job?



Domains of Development:



coordination of both perception and movement - thinking abilities

self-esteem - memory - vision - abstract thinking

speech - attachment - fine motor skills

involvement in social groups - reasoning - development of bones

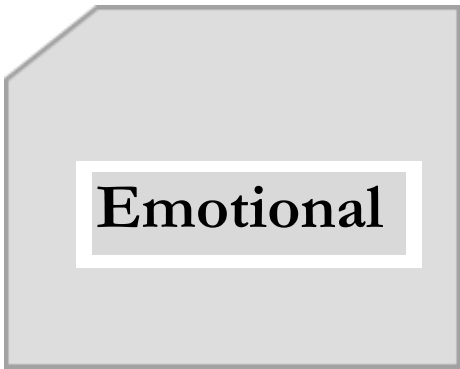
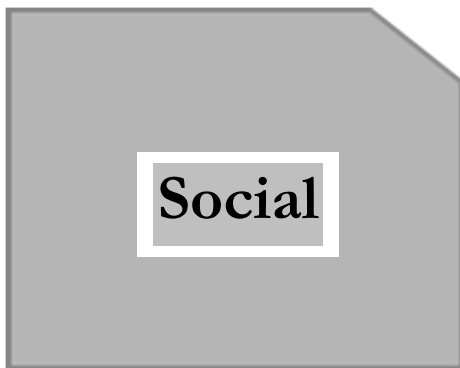
perception - development of roles in the family - memory

concept development - friendships - sitting - problem-solving

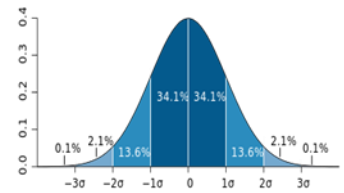
mood (feelings) - touch - language - adoption of a moral system

hearing - assuming a productive role in society - personal identity

affect (emotions) - smelling - ability to enter reciprocal emotional relationships



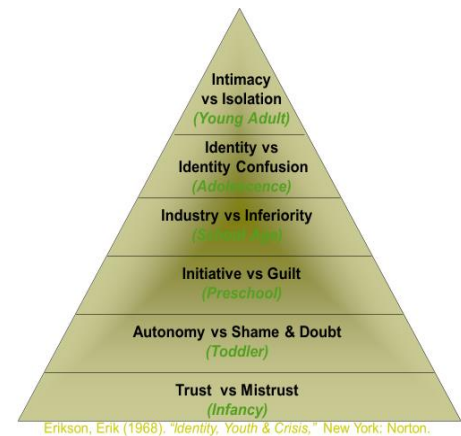
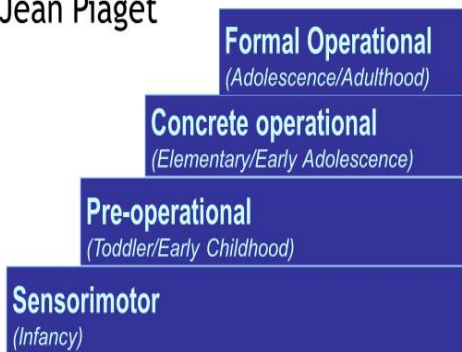
What is “normal?”



Principles of Development



Stages of Cognitive Development - Jean Piaget



Erikson's Stages of Psychosocial Development



Culture and Diversity

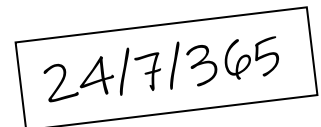
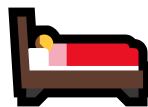


1. What were your reactions to these cultural practices?

2. How might these different cultural practices affect development?

3. How will what you saw in this video affect your work?

What are the jobs of a caregiver?





Section 3: Trauma

Trauma-Informed Care

“A trauma-informed child and family service system is one in which all parties involved recognize and respond to the impact of traumatic stress on those who have contact with the system including children, caregivers, and service providers. Programs and agencies within such a system infuse and sustain trauma awareness, knowledge, and skills into their organizational cultures, practices, and policies. They act in collaboration with all those who are involved with the child, using the best available science, to maximize physical and psychological safety, facilitate the recovery of the child and family, and support their ability to thrive.” -

National Child Traumatic Stress Network <https://www.nctsn.org/>

Ohio’s Strategic Plan regarding Trauma-Informed Care:

<https://mha.ohio.gov/Health-Professionals/About-Mental-Health-and-Addiction-Treatment/Trauma-informed-Care>

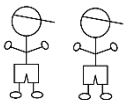
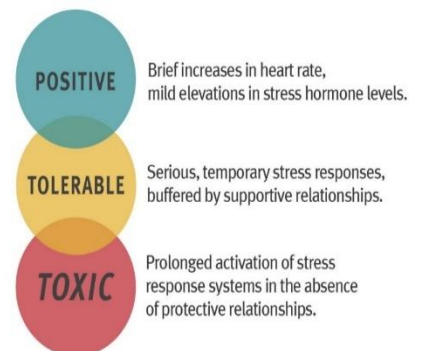


Trauma

Acute Trauma

Chronic Trauma

Complex Trauma





Factors Influencing the Impact of Trauma



Learn more about resilience!



Adaptive Behavior



**We must stop saying,
"What's wrong with you?"
and start asking,
"What has happened to you?"**



Common Traumatic Experiences in Child Welfare Families

1. Maltreatment

“The Science of Neglect”



Watch
it again
later!



Science Helps to Differentiate Four Types of Unresponsive Care

	OCCASIONAL INATTENTION	CHRONIC UNDER-STIMULATION	SEVERE NEGLECT IN A FAMILY CONTEXT	SEVERE NEGLECT IN AN INSTITUTIONAL SETTING
Features	Intermittent, diminished attention in an otherwise responsive environment	Ongoing, diminished level of child-focused responsiveness and developmental enrichment	Significant, ongoing absence of serve and return interaction, often associated with failure to provide for basic needs	“Warehouse-like” conditions with many children, few caregivers, and no individualized adult-child relationships that are reliably responsive
Effects	Can be growth-promoting under caring conditions	Often leads to developmental delays and may be caused by a variety of factors	Wide range of adverse impacts, from significant developmental impairments to immediate threat to health or survival	Basic survival needs may be met, but lack of individualized adult responsiveness can lead to severe impairments in cognitive, physical, and psychosocial development
Action	No intervention needed	Interventions that address the needs of caregivers combined with access to high-quality early care and education for children can be effective	Intervention to assure caregiver responsiveness and address the developmental needs of the child required as soon as possible	Intervention and removal to a stable, caring, and socially responsive environment required as soon as possible

2. Separation

3. Intimate Partner Violence and Community Violence



“First Impressions: Exposure to Violence and a Childs Developing Brain”



Watch
it again
later!



"The expectation that we can be immersed in suffering and loss daily and not be touched by it is as unrealistic as expecting to be able to walk through water without getting wet." - Rachel Naomi Remen



Free mindfulness exercises



Taking Care of Yourself in Child Welfare



Section 4: Infants and Toddlers

Search for “cdc.gov milestones” or go to
<https://www.cdc.gov/ncbddd/actearly/milestones/index.html>



Developmental
Milestones

Nutrition fill in the blank:

1. The World Health Organization (WHO) recommends exclusive breastfeeding for ____ months and then continued breastfeeding combined with solid foods for ____ years or as long as mother and baby desire. (<https://www.who.int/health-topics/breastfeeding>)
2. Most infant formula-fed newborns will feed ____ to ____ times in 24 hours. Talk with your child's doctor or nurse about how much infant formula is right for your baby. (<https://www.cdc.gov/nutrition/infantandtoddlernutrition/formula-feeding/how-much-how-often.html>)
3. **True or False:** In some cases, a sleeping baby should be woken up for a feeding.
4. **Feeding a Picky Toddler - Try again:** Wait a couple of days before offering the food again. It can take more than ____ times before your toddler might like it. (<https://www.cdc.gov/nutrition/InfantandToddlerNutrition/foods-and-drinks/picky-eaters.html>)

Answer Bank: eight, six, twelve, ten, two

If you are breastfeeding and taking tramadol, codeine or medicines that contain codeine, call your baby's provider or emergency services (911) right away if your baby:

- Is sleepier than usual. Breastfed babies usually eat every 2 to 3 hours and shouldn't sleep more than 4 hours at a time.
- Is limp
- Has trouble breathing
- Has trouble breastfeeding

<https://www.marchofdimes.org/baby/keeping-breast-milk-safe-and-healthy.aspx#>

Other resources regarding early development and nutrition:

<https://www.zerotothree.org/early-development/health-and-nutrition>

<https://thousanddays.org/>

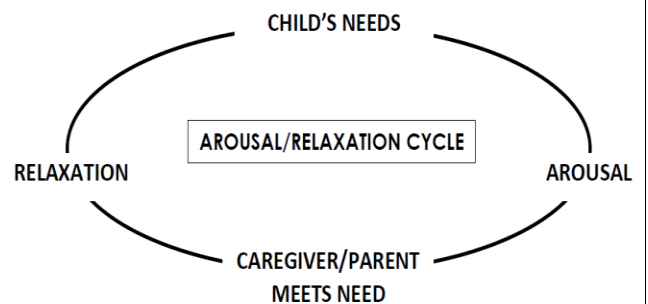


Attachment

a child's ability to promote and maintain mutual, positive connections with a specific person.

the relationship brings safety, comfort, soothing, and pleasure

loss or threat of loss of the person evokes intense distress



Observing Attachment Behaviors:

Attachment is the foundation for social skills, relational growth, trust, language development, emotional development, sense of security, and self-esteem



Infant Vulnerability



1. Why are infants and toddlers at risk of abuse and neglect?



Cerebral Palsy



Failure to Thrive

Prenatal alcohol “exposure has been implicated as the most common cause of intellectual disability and the leading preventable cause of birth defects in the United States, accounting for significant educational and public health expenditures” (Sokol et al., 2003).

2. What are the potential effects of trauma and maltreatment on Physical, Cognitive, Social, and Emotional development?



Infants – Identifying Developmental Delays



Intellectual
Disorder

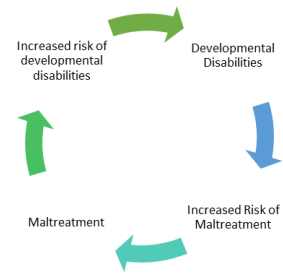


Speech & Language
Disorders



Autism Spectrum
Disorder

Lifetime impact on a family of a child with significant delays.





Section 5: Engagement, Assessment, and Service Planning

Prepare

Observe

Permission

Play

Slow



Assessing Infants & Toddlers



How would you use POPPS to assess the child's development?



What strategies would you use to engage and assess the child?



In what specific ways is a child at this age vulnerable?



What services may the child need?



What skills do caregivers need to meet the needs and ensure safety of a child at this age?



Section 6: Preschoolers



1. Social –

2. Emotional –

3. Physical –

4. Cognitive -



Normal Sexual Behavior (for ALL ages)

Is mutual. Sexual behavior is mutual, between children of similar age, size, and developmental status, the behavior is voluntary.

Has a playful affect. The overall affect is playful, light hearted. The children are learning about their bodies.

Is easily redirected. The child can easily be re-directed to other activities.

Does not persist beyond pain. The sexual behavior is pleasurable, and the child stops the behavior when it becomes uncomfortable.



Preschooler Vulnerability



1. Why are preschoolers at risk of abuse and neglect?

2. What are the potential effects of trauma and maltreatment on Physical, Cognitive, Social, and Emotional development?

Developmental and Mental Health Disorders

Mental health and developmental disorders are to be diagnosed by a qualified professional (doctor, counselor, psychologist, psychiatrist, pediatrician, clinical social worker), not by caseworkers. Be careful with your professional boundaries even if caregivers ask you a direct question. A caseworker's job is to work together with caregivers, teachers, and other individuals who know the child, to identify concerns and to advocate for evaluations for things such as:

- Sudden, drastic changes in mood or behavior
- Children who do not outgrow the fears and worries that are typical in young children, or when there are so many fears and worries that they interfere with school, home, or play activities
- Persistent sadness and hopelessness
- Any behaviors that are disrupting the child's school, home, social, or play activities





Assessing Preschoolers



Consider POPPS: How would you Prepare, Observe, ask Permission, Play, and go Slow with Cheryl?



What toys might you use for this age?



What questions would you ask Ms. Robertson about Cheryl's development?



How else would you gather additional information about Cheryl's development?



Assessing Preschoolers



What developmental considerations do you need to keep in mind while engaging, assessing, and working with Cheryl?



What is your initial assessment of Cheryl's physical, social, emotional, cognitive development?



Based on your assessment, what kinds of services would you recommend for Cheryl?



What are Cheryl's vulnerabilities and what skills would a caregiver need to safely and lovingly care for Cheryl?



Section 7: School-Aged Children



School-Aged Child Sexual Development:

Sexual Development and Behavior in Children: Information for Parents and Caregivers

https://www.nctsn.org/sites/default/files/resources/sexual_development_and_behavior_in_children.pdf

1. Why are school-aged children at risk of abuse and neglect? (What is it about school-aged children that may be frustrating or irritating to caregivers? In what situations may a school-aged child need lots of care or attention? In what ways are school-aged children vulnerable?)

2. What are the potential effects of trauma and maltreatment on Physical, Cognitive, Social, and Emotional development?



Learning Disabilities:



Learning
Disorders

Additional Resources:

Ohio Coalition for the Education of Children with Disabilities www.ocecd.org

Ohio Department of Education <http://education.ohio.gov/Topics/Special-Education>



Developmental and Mental Health Disorders:



Symptom Overlap

What is it about these disorders that make children vulnerable?
What skills or abilities would a caregiver need to care for children with this disorder?



Anxiety



Depression



ODD



PTSD



ADHD

Table Resource #9:
Prenatal Substance
Exposure



Assessing School-Aged Children



Assess Laurie's development in all four domains:



How might caring for Laurie be frustrating or challenging for caregivers? What kinds of protective capacities would be needed to manage these situations and safely care for Laurie?



Based on your assessment, what kinds of services and supports would you recommend for Laurie and her caregivers? What should her caregivers know about her needs?



What do you need to keep in mind about Laurie's development when preparing for home visits, engaging, assessing, and case planning with her?



Section 8: Adolescent Development



- Development

Additional Resources:

USDA, Nutrition: <https://www.nutrition.gov/topics/audience/teens/tweens-and-teens>

Social Media information: https://www.childwelfare.gov/pubPDFs/smtips_worker.pdf

Family Acceptance Project: <https://familyproject.sfsu.edu/>

The Trevor Project: <https://www.thetrevorproject.org/>

Ohio Bridges Program: <http://bridgestosuccess.jfs.ohio.gov/index.stm>





National Suicide Prevention Lifeline: 1-800-273-8255

Text Crisis Hotline: “**4hope**” to **741 741** to be connected to a Crisis Counselor 24/7 for free, confidential service.



Developmental and Mental Health Disorders



2-4 symptoms in adolescents	What is it about this disorder that makes adolescents vulnerable?	What skills or abilities would a caregiver need?
 Substance Use		
 Suicide & Self-Harm		
 Conduct Disorder		
 Eating Disorders		



Assessing Adolescents



What are some developmental considerations to keep in mind when working with older teens and young adults?



How do you apply POPPS to an adolescent?



What are some of Manny's childhood experience that may have affected his development and wellbeing?



Imagine Manny is a 17-year-old on your caseload, how would you feel about his behaviors?



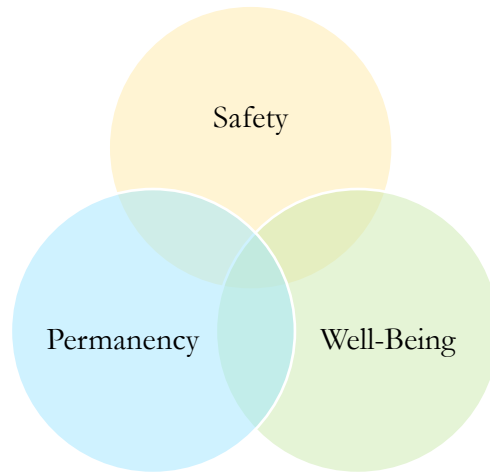
Imagine Manny is a 27-year-old parent on your caseload. How do you feel about his behaviors now?



What are the consequences of not taking trauma and developmental history into account when working with families (children and caregivers alike)?



Trauma's Effect on Child Welfare Cases



Section 9: Transfer of Learning

- How I will use what I learned about child development in my job?
- How I will use what I learned about trauma in my job?
- What resources will I use to assess and engage with children?



No QR Code reader?

- <https://tinyurl.com/CW7Resilience>
- <https://tinyurl.com/CW7SelfCare>
- <https://tinyurl.com/CW7Mindfulness>
- <https://tinyurl.com/CW7DevelopmentalMilestones0-5>
- All Mental Health and Developmental Disorder handouts: <https://tinyurl.com/CW7ChildDevelopment>