References


References


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References


References


A large number of individuals have collaborated in the development of the CANS-Comprehensive. Along with the CANS versions for developmental disabilities, juvenile justice, and child welfare, this information integration tool is designed to support individual case planning and the planning and evaluation of service systems. The trauma items were developed in collaboration Cassandra Kisiel, Ph.D., Glenn Saxe, M.D., Margaret Blaustein, Ph.D, Heide Ellis, Ph.D. with the SAMHSA-funded National Child Traumatic Stress Network. The CANS-Comprehensive is an open domain tool for use in service delivery systems that address the mental health of children, adolescents, and their families. The copyright is held by the Buddin Praed Foundation to ensure that it remains free to use. For more information about alternative versions of the CANS to use please contact Melanie Lyons of the Foundation. For more information on the CANS-Comprehensive IDCFS assessment tool contact:

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Coding Definitions & Guidelines

Trauma Experiences

These ratings are made based on lifetime exposure of trauma

For Trauma Experiences, the following categories and action levels are used:

0 indicates a dimension where there is no evidence of any trauma of this type.
1 indicates a dimension where a single event trauma occurred or suspicion exists of trauma experiences.
2 indicates a dimension on which the child has experienced multiple traumas.
3 indicates a dimension describes repeated and severe trauma with medical and physical consequences.

1. SEXUAL ABUSE

This rating describes child’s experience of sexual abuse or the impact of the abuse on child’s functioning.

0 There is no evidence that child has experienced sexual abuse.
1 Child has experienced single incident sexual abuse with no penetration.
2 Child has experienced multiple incidents of sexual abuse without penetration or a single incident of penetration.
3 Child has experienced severe, chronic sexual abuse that could include penetration or associated physical injury.

2. PHYSICAL ABUSE

This rating describes the degree of severity of the child physical abuse.

0 There is no evidence that child has experienced physical abuse.
1 There is a suspicion that child has experienced physical abuse but no confirming evidence. Spanking without physical harm or intention to commit harm also qualifies.
2 Child has experienced a moderate level of physical abuse and/or repeated forms of physical punishment (e.g., hitting, punching).
3 Child has experienced severe and repeated physical abuse with intent to do harm and that causes sufficient physical harm to necessitate hospital treatment.

3. EMOTIONAL ABUSE

This rating describes the degree of severity of emotional abuse, including verbal and nonverbal forms.
0 There is no evidence that child has experienced emotional abuse.
1 Child has experienced mild emotional abuse. For instance, child may experience some insults or is occasionally referred to in a derogatory manner by caregivers.
2 Child has experienced moderate degree of emotional abuse. For instance, child may be consistently denied emotional attention from caregivers, insulted or humiliated on an ongoing basis, or intentionally isolated from others.
3 Child has experienced significant emotional abuse over an extended period of time (at least one year). For instance, child is completely ignored by caregivers, or threatened/terrorized by others.

4. NEGLECT
This rating describes the degree of severity of neglect.
0 There is no evidence that child has experienced neglect.
1 Child has experienced minor or occasional neglect. Child may have been left at home alone with no adult supervision or there may be occasional failure to provide adequate supervision of child.
2 Child has experienced a moderate level of neglect. This may include occasional unintended failure to provide adequate food, shelter, or clothing with corrective action.
3 Child has experienced a severe level of neglect including prolonged absences by adults, without minimal supervision, and failure to provide basic necessities of life on a regular basis.

5. MEDICAL TRAUMA
This rating describes the degree of severity of medical trauma.
0 There is no evidence that child has experienced any medical trauma.
1 Child has experienced mild medical trauma including minor surgery (e.g. stitches, bone setting).
2 Child has experienced moderate medical trauma including major surgery or injuries requiring hospitalization.
3 Child has experienced life threatening medical trauma.

6. WITNESS TO FAMILY VIOLENCE
This rating describes the degree of severity of exposure to family violence.
0 There is no evidence that child has witnessed family violence.
1 Child has witnessed one episode of family violence.
2 Child has witnessed repeated episodes of family violence but no significant injuries (i.e. requiring emergency medical attention) have been witnessed.
3 Child has witnessed repeated and severe episode of family violence or has had to intervene in episodes of family violence. Significant injuries have occurred and have been witnessed by the child as a direct result of the violence.

7. COMMUNITY VIOLENCE

This rating describes the degree of severity of exposure to community violence.

0 There is no evidence that child has witnessed or experienced violence in the community.
1 Child has witnessed occasional fighting or other forms of violence in the community. Child has not been directly impacted by the community violence (e.g., violence not directed at self, family, or friends) and exposure has been limited.
2 Child has witnessed the significant injury of others in his/her community, or has had friends/family members injured as a result of violence or criminal activity in the community, or is the direct victim of violence/criminal activity that was not life threatening, or has witnessed/experienced chronic or ongoing community violence.
3 Child has witnessed or experienced the death of another person in his/her community as a result of violence, or is the direct victim of violence/criminal activity in the community that was life threatening, or has experienced chronic/ongoing impact as a result of community violence (e.g., family member injured and no longer able to work).

8. SCHOOL VIOLENCE

This rating describes the degree of severity of exposure to school violence.

0 There is no evidence that child has witnessed violence in the school setting.
1 Child has witnessed occasional fighting or other forms of violence in the school setting. Child has not been directly impacted by the violence (e.g., violence not directed at self or close friends) and exposure has been limited.
2 Child has witnessed the significant injury of others in his/her school setting, or has had friends injured as a result of violence or criminal activity in the school setting, or has directly experienced violence in the school setting leading to minor injury, or has witnessed ongoing/chronic violence in the school setting.
3 Child has witnessed the death of another person in his/her school setting, or has had friends who were seriously injured as a result of violence or criminal activity in the school setting, or has directly experienced violence in the school setting leading to significant injury or lasting impact.

9. NATURAL OR MANMADE DISASTERS

This rating describes the degree of severity of exposure to either natural or man-made disasters.
0 There is no evidence that child has been exposed to natural or man-made disasters.
1 Child has been exposed to disasters second hand (i.e., on television, hearing others discuss disasters). This would include second hand exposure to natural disasters such as a fire or earthquake or man-made disaster, including car accident, plane crashes, or bombings.
2 Child has been directly exposed to a disaster or witnessed the impact of a disaster on a family or friend. For instance, a child may observe a caregiver who has been injured in a car accident or fire or watch his neighbor’s house burn down.
3 Child has been directly exposed to a disaster that caused significant harm or death to a loved one or there is an ongoing impact or life disruption due to the disaster (e.g., house burns down, caregiver loses job).

10. TRAUMATIC GRIEF/SEPARATION

This rating describes the level of traumatic grief due to death or loss or separation from significant caregivers.

0 There is no evidence that child has experienced traumatic grief or separation from significant caregivers.
1 Child is experiencing some level of traumatic grief due to death or loss of a significant person or distress from caregiver separation in a manner that is appropriate given the recent nature of loss or separation.
2 Child is experiencing a moderate level of traumatic grief or difficulties with separation in a manner that impairs function in certain but not all areas. This could include withdrawal or isolation from others.
3 Child is experiencing significant traumatic grief or separation reactions. Child exhibits impaired functioning across several areas (e.g., interpersonal relationships, school) for a significant period of time following the loss or separation.

11. WAR AFFECTED

This rating describes the degree of severity of exposure to war, political violence, or torture. Violence or trauma related to Terrorism is not included here.

0 There is no evidence that child has been exposed to war, political violence, or torture.
1 Child did not live in war-affected region or refugee camp, but family was affected by war. Family members directly related to the child may have been exposed to war, political violence, or torture; family may have been forcibly displaced due to the war, or both. This does not include children who have lost one or both parents during the war.
2 Child has been affected by war or political violence. He or she may have witnessed others being injured in the war, may have family members who
were hurt or killed in the war, and may have lived in an area where bombings or fighting took place. Child may have lost one or both parents during the war or one or both parents may be so physically or psychologically disabled from war so that they are not able to provide adequate caretaking of child. Child may have spent extended amount of time in refugee camp.

3 Child has experienced the direct affects of war. Child may have feared for their own life during war due to bombings, shelling, very near to them. They may have been directly injured, tortured, or kidnapped. Some may have served as soldiers, guerrillas, or other combatants in their home countries.

12. TERRORISM AFFECTED

This rating describes the degree to which a child has been affected by terrorism. Terrorism is defined as “the calculated use of violence or the threat of violence to inculcate fear, intended to coerce or to intimidate governments or societies in the pursuit of goals that are generally political, religious, or ideological.” Terrorism includes attacks by individuals acting in isolation (e.g. sniper attacks).

0 There is no evidence that child has been affected by terrorism or terrorist activities.

1 Child’s community has experienced an act of terrorism, but the child was not directly impacted by the violence (e.g. child lives close enough to site of terrorism that they may have visited before or child recognized the location when seen on TV, but child’s family and neighborhood infrastructure was not directly affected). Exposure has been limited to pictures on television.

2 Child has been affected by terrorism within his/her community, but did not directly witness the attack. Child may live near the area where attack occurred and be accustomed to visiting regularly in the past, infrastructure of child’s daily life may be disrupted due to attack (e.g. utilities or school), and child may see signs of the attack in neighborhood (e.g. destroyed building). Child may know people who were injured in the attack.

3 Child has witnessed the death of another person in a terrorist attack, or has had friends or family members seriously injured as a result of terrorism, or has directly been injured by terrorism leading to significant injury or lasting impact.

13. WITNESS/VICTIM TO CRIMINAL ACTIVITY

This rating describes the degree of severity of exposure to criminal activity.

0 There is no evidence that child has been victimized or witnessed significant criminal activity.

1 Child is a witness of significant criminal activity.

2 Child is a direct victim of criminal activity or witnessed the victimization of a family or friend.
3 Child is a victim of criminal activity that was life threatening or caused significant physical harm or child witnessed the death of a loved one.

**Traumatic Stress Symptoms**

*These ratings describe a range of reactions that children and adolescents may exhibit to any of a variety of traumatic experiences from child abuse and neglect to community violence to disasters.*

For **Trauma Stress Symptoms**, the following categories and action levels are used:

- **0** indicates a dimension where there is no evidence of any needs.
- **1** indicates a dimension that requires monitoring, watchful waiting, or preventive activities.
- **2** indicates a dimension that requires action to ensure that this identified need or risk behavior is addressed.
- **3** indicates a dimension that requires immediate or intensive action.

**14. ADJUSTMENT TO TRAUMA**

*This item covers the youth’s reaction to any of a variety of traumatic experiences – such as emotional, physical, or sexual abuse, separation from family members, witnessing violence, or the victimization or murder of family members or close friends. This dimension covers both adjustment disorders and posttraumatic stress disorder from DSM-IV.*

- **0** Child has not experienced any significant trauma or has adjusted well to traumatic experiences.
- **1** Child has some mild adjustment problems to trauma. Child may have an adjustment disorder or other reaction that might ease with the passage of time. Or, child may be recovering from a more extreme reaction to a traumatic experience.
- **2** Child has marked adjustment problems associated with traumatic experiences. Child may have nightmares or other notable symptoms of adjustment difficulties.
- **3** Child has post-traumatic stress difficulties as a result of traumatic experience. Symptoms may include intrusive thoughts, hyper-vigilance, constant anxiety, and other common symptoms of Post Traumatic Stress Disorder (PTSD).

**15. REEXPERIENCING**

*These symptoms consist of difficulties with intrusive memories or reminders of traumatic events, including nightmares, flashbacks, intense reliving of the events,*
and repetitive play with themes of specific traumatic experiences. These symptoms are part of the DSM-IV criteria for PTSD.

0 This rating is given to a child with no evidence of intrusive symptoms.
1 This rating is given to a child with some problems with intrusions, including occasional nightmares about traumatic events.
2 This rating is given to a child with moderate difficulties with intrusive symptoms. This child may have more recurrent frightening dreams with or without recognizable content or recurrent distressing thoughts, images, perceptions, or memories of traumatic events. This child may exhibit trauma-specific reenactments through repetitive play with themes of trauma or intense physiological reactions at exposure to traumatic cues.
3 This rating is given to a child with severe intrusive symptoms. This child may exhibit trauma-specific reenactments that include sexually or physically traumatizing other children or sexual play with adults. This child may also exhibit persistent flashbacks, illusions, or hallucinations that make it difficult for the child to function.

16. AVOIDANCE

These symptoms include efforts to avoid stimuli associated with traumatic experiences. These symptoms are part of the DSM-IV criteria for PTSD.

0 This rating is given to a child with no evidence of avoidance symptoms.
1 This rating is given to a child who exhibits some problems with avoidance. This child may exhibit one primary avoidant symptom, including efforts to try and avoid thoughts, feelings, or conversations associated with the trauma.
2 This rating is given to a child with moderate symptoms of avoidance. In addition to avoiding thoughts or feelings associated with the trauma, the child may also avoid activities, places, or people that arouse recollections of the trauma.
3 This rating is given to a child who exhibits significant or multiple avoidant symptoms. This child may avoid thoughts and feelings as well as situations and people associated with the trauma and have an inability to recall important aspects of the trauma.

17. NUMBING

These symptoms include numbing responses that are part of the DSM-IV criteria for PTSD. These responses are not present before the trauma.

0 This rating is given to a child with no evidence of numbing responses.
1 This rating is given to a child who exhibits some problems with numbing. This child may have a restricted range of affect or an inability to express or experience certain emotions (e.g., anger or sadness).
2 This rating is given to a child with moderate difficulties with numbing responses. This child may have a blunted or flat emotional state or have difficulty experiencing intense emotions or feel consistently detached or estranged from others following the traumatic experience.

3 This rating is given to a child with significant numbing responses or multiple symptoms of numbing. This child may have a markedly diminished interest or participation in significant activities and a sense of a foreshortened future.

18. DISSOCIATION

Symptoms included in this dimension are daydreaming, spacing, or blanking out, forgetfulness, emotional numbing, fragmentation, detachment, and rapid changes in personality often associated with traumatic experiences. This dimension may be used to rate dissociative disorders (e.g., Dissociative Disorder NOS, Dissociative Identity Disorder) but can also exist when other diagnoses are primary (e.g., PTSD, depression).

0 This rating is given to a child with no evidence of dissociation.

1 This rating is given to a child with minor dissociative problems, including some emotional numbing, avoidance, or detachment, and some difficulty with forgetfulness, daydreaming, spacing, or blanking out.

2 This rating is given to a child with a moderate level of dissociation. This can include amnesia for traumatic experiences or inconsistent memory for trauma (e.g., remembers in one context but not another), more persistent or perplexing difficulties with forgetfulness (e.g., loses things easily, forgets basic information), frequent daydreaming or trance-like behavior, depersonalization and/or derealization. This rating would be used for someone who meets criteria for Dissociative Disorder Not Otherwise Specified or another diagnosis that is specified “with dissociative features.”

3 This rating is given to a child with severe dissociative disturbance. This can include significant memory difficulties associated with trauma that also impede day to day functioning. Child is frequently forgetful or confused about things he/she should know about (e.g., no memory for activities or whereabouts of previous day or hours). Child shows rapid changes in personality or evidence of alternate personalities. Child who meets criteria for Dissociative Identity Disorder or a more severe level of Dissociative Disorder NOS would be rated here.

Child Strengths

For Child’s Strengths, the following categories and action levels are used:

0 indicates a domain where strengths exist that can be used as a centerpiece for a strength-based plan.
1 indicates a domain where strengths exist but require some strength building efforts in order for them to serve as a focus of a strength-based plan.

2 indicates a domain where strengths have been identified but that they require significant strength building efforts before they can be effectively utilized in as a focus of a strength-based plan.

3 indicates a domain in which efforts are needed in order to identify potential strengths for strength building efforts.

19. FAMILY

Family refers to all biological or adoptive relatives with whom the child or youth remains in contact along with other individuals in relationships with these relatives.

0 Significant family strengths. This level indicates a family with much love and mutual respect for each other. Family members are central in each other’s lives. Child is fully included in family activities.

1 Moderate level of family strengths. This level indicates a loving family with generally good communication and ability to enjoy each other’s company. There may be some problems between family members. Child is generally included.

2 Mild level of family strengths. Family is able to communicate and participate in each other’s lives; however, family members may not be able to provide significant emotional or concrete support for each other. Child is often not included in family activities.

3 This level indicates a child with no known family strengths. Child is not included in normal family activities.

20. INTERPERSONAL

This rating refers to the interpersonal skills of the child or youth both with peers and adults.

0 Significant interpersonal strengths. Child is seen as well liked by others and has significant ability to form and maintain positive relationships with both peers and adults. Individual has multiple close friends and is friendly with others.

1 Moderate level of interpersonal strengths. Child has formed positive interpersonal relationships with peers and/or other non-caregivers. Child may have one friend, if that friendship is a healthy ‘best friendship model.

2 Mild level of interpersonal strengths. Child has some social skills that facilitate positive relationships with peers and adults but may not have any current relationships, but has a history of making and maintaining healthy friendships with others.

3 This level indicates a child with no known interpersonal strengths. Child currently does not have any friends nor has he/she had any friends in the past. Child does not have positive relationships with adults.
21. EDUCATIONAL

This rating refers to the strengths of the school system and may or may not reflect any specific educational skills possessed by the child or youth.

0 This level indicates a child who is in school and is involved with an educational plan that appears to exceed expectations. School works exceptionally well with family and caregivers to create a special learning environment. A child in a mainstream educational system who does not require an individual plan would be rated here.

1 This level indicates a child who is in school and has a plan that appears to be effective. School works fairly well with family and caregivers to ensure appropriate educational development.

2 This level indicates a child who is in school but has a plan that does not appear to be effective.

3 This level indicates a child who is either not in school or is in a school setting that does not further his/her education.

22. VOCATIONAL

Generally this rating is reserved for adolescents and is not applicable for children 12 years and under. Computer skills would be rated here.

0 This level indicates an adolescent with vocational skills who is currently working in a natural environment.

1 This level indicates an adolescent with pre-vocational and some vocational skills but limited work experience.

2 This level indicates an adolescent with some pre-vocational skills. This also may indicate a child or youth with a clear vocational preference.

3 This level indicates an adolescent with no known or identifiable vocational or pre-vocational skills and no expression of any future vocational preferences.

23. WELL-BEING

This rating should be based on the psychological strengths that the child or adolescent might have developed including both the ability to enjoy positive life experiences and manage negative life experiences. This should be rated independent of the child's current level of distress.

0 This level indicates a child with exceptional psychological strengths. Both coping and savoring skills are well developed.

1 This level indicates a child with good psychological strengths. The person has solid coping skills for managing distress or solid savoring skills for enjoying pleasurable events.

2 This level indicates a child with limited psychological strengths. For example, a person with very low self-esteem would be rated here.
3 This level indicates a child with no known or identifiable psychological strengths. This may be due to intellectual impairment or serious psychiatric disorders.

24. OPTIMISM

This rating should be based on the child or adolescent’s sense of him/herself in his/her own future. This is intended to rate the child’s positive future orientation.

0 Child has a strong and stable optimistic outlook on his/her life. Child is future oriented.
1 Child is generally optimistic. Child is likely able to articulate some positive future vision.
2 Child has difficulties maintaining a positive view of him/herself and his/her life. Child may vary from overly optimistic to overly pessimistic.
4 Child has difficulties seeing any positives about him/herself or his/her life.

25. TALENT/INTERESTS

This rating should be based broadly on any talent, creative, or artistic skill a child or adolescent may have including art, theatre, music, athletics, etc.

0 This level indicates a child with significant creative/artistic strengths. A child/youth who receives a significant amount of personal benefit from activities surrounding a talent would be rated here.
1 This level indicates a child with a notable talent. For example, a youth who is involved in athletics or plays a musical instrument, etc. would be rated here.
2 This level indicates a child who has expressed interest in developing a specific talent or talents even if they have not developed that talent to date.
3 This level indicates a child with no known talents, interests, or hobbies.

26. SPIRITUAL/RELIGIOUS

This rating should be based on the child or adolescent’s and their family’s involvement in spiritual or religious beliefs and activities.

0 This level indicates a child with strong moral and spiritual strengths. Child may be very involved in a religious community or may have strongly held spiritual or religious beliefs that can sustain or comfort him/her in difficult times.
1 This level indicates a child with some moral and spiritual strengths. Child may be involved in a religious community.
2 This level indicates a child with few spiritual or religious strengths. Child may have little contact with religious institutions.
3 This level indicates a child with no known spiritual or religious involvement.
27. COMMUNITY LIFE

This rating should be based on the child or adolescent’s level of involvement in the cultural aspects of life in his/her community.

0 This level indicates a child with extensive and substantial, long-term ties with the community. For example, individual may be a member of a community group (e.g. Girl or Boy Scout etc.) for more than one year, may be widely accepted by neighbors, or involved in other community activities, informal networks, etc.

1 This level indicates a child with significant community ties although they may be relatively short term (e.g. past year).

2 This level indicates a child with limited ties and/or supports from the community.

3 This level indicates a child with no known ties or supports from the community.

28. RELATIONSHIP PERMANENCE

This rating refers to the stability of significant relationships in the child or youth’s life. This likely includes family members but may also include other individuals.

0 This level indicates a child who has very stable relationships. Family members, friends, and community have been stable for most of his/her life and are likely to remain so in the foreseeable future. Child is involved with both parents.

1 This level indicates a child who has had stable relationships but there is some concern about instability in the near future (one year) due to transitions, illness, or age. A child who has a stable relationship with only one parent may be rated here.

2 This level indicates a child who has had at least one stable relationship over his/her lifetime but has experienced other instability through factors such as divorce, moving, removal from home, and death.

3 This level indicates a child who does not have any stability in relationships.

Life Domain Functioning

For Life Functioning Domains, the following categories and action levels are used:

0 indicates a life domain in which the child is excelling. This is an area of considerable strength

1 indicates a life domain in which the child is doing OK. This is an area of potential strength

2 indicates a life domain in which the child is having problems. Help is needed to improve functioning into an area of strength.

3 indicates a life domain in which the child is having significant problems. Intensive help is needed to improve functioning into an area of strength.
29. FAMILY

*Family ideally should be defined by the child; however, in the absence of this knowledge consider biological relatives and their significant others with whom the child still has contact as the definition of family.*

0 Child is doing well in relationships with family members.
1 Child is doing adequately in relationships with family members although some problems may exist. For example, some family members may have some problems in their relationships with child.
2 Child is having moderate problems with parents, siblings and/or other family members. Frequent arguing, difficulties in maintaining any positive relationship may be observed.
3 Child is having severe problems with parents, siblings, and/or other family members. This would include problems of domestic violence, constant arguing, etc.

30. LIVING SITUATION

*This item refers to how the child is functioning in their current living arrangement which could be a relative, a temporary foster home, shelter, etc.*

0 No evidence of problem with functioning in current living environment.
1 Mild problems with functioning in current living situation. Caregivers concerned about child’s behavior in living situation.
2 Moderate to severe problems with functioning in current living situation. Child has difficulties maintaining his/her behavior in this setting creating significant problems for others in the residence.
3 Profound problems with functioning in current living situation. Child is at immediate risk of being removed from living situation due to his/her behaviors.

31. SOCIAL FUNCTIONING

*This item refers to the child’s social functioning from a developmental perspective.*

0 Child is on a healthy social development pathway.
1 Child is having some minor problems with his/her social functioning.
2 Child is having some moderate problems with his/her social functioning.
3 Child is experiencing severe disruptions in his/her social functioning.

32. DEVELOPMENTAL/INTELLECTUAL

*This rating describes the child’s development as compared to standard developmental milestones such as talking, walking, toileting, cooperative play, etc.*

0 No evidence of developmental problems or mental retardation.
1 Evidence of a mild developmental delay or low IQ (70–85)
2 Evidence of a pervasive developmental disorder including Autism, Tourette’s, Down’s Syndrome or other significant developmental delay or child’s has mild mental retardation (50-69).
3 Severe developmental disorder or IQ below 50.

33. RECREATIONAL

This item is intended to reflect the child access to and use of leisure time activities.

0 Child has and enjoys positive recreation activities on an ongoing basis.
1 Child is doing adequately with recreational activities although some problems may exist.
2 Child is having moderate problems with recreational activities. Child may experience some problems with effective use of leisure time.
3 Child has no access to or interest in recreational activities. Child has significant difficulties making use of leisure time.

34. JOB FUNCTIONING

This item is intended to describe functioning in vocational settings. If a child or youth is not working, rate a “3.”

0 Child is gainfully employed in a job and performing well.
1 Child is gainfully employed but may have some difficulties at work.
2 Child works intermittently for money (e.g. babysitting) or child has job history but is currently not working.
3 Child has no job history.
NA Not applicable based on child’s age.

35. LEGAL

This item involves only the child’s (not the families’) involvement with the legal system.

0 Child has no known legal difficulties.
1 Child has a history of legal problems but currently is not involved with the legal system.
2 Child has some legal problems and is currently involved in the legal system.
3 Child has serious current or pending legal difficulties that place him/her at risk for a court ordered out of home placement.

36. MEDICAL

This item refers to the child’s health.
0 Child is healthy.
1 Child has some medical problems that require medical treatment.
2 Child has chronic illness that requires ongoing medical intervention.
3 Child has life threatening illness or medical condition.

37. PHYSICAL

This item describes any physical limitations the child may experience due to health or other factors.

0 Child has no physical limitations.
1 Child has some physical condition that places mild limitations on activities. Conditions such as impaired hearing or vision would be rated here. Rate here, treatable medical conditions that result in physical limitations (e.g. asthma).
2 Child has physical condition that notably impacts activities. Sensory disorders such as blindness, deafness, or significant motor difficulties would be rated here.
3 Child has severe physical limitations due to multiple physical conditions.

38. SEXUAL DEVELOPMENT

This rating describes issues around sexual development including developmentally inappropriate sexual behavior and problematic sexual behavior. Sexual orientation or gender identity issues could be rated here if they are leading to difficulties.

0 No evidence of any problems with sexual development.
1 Mild to moderate problems with sexual development. May include concerns about sexual identity or anxiety about the reactions of others.
2 Significant problems with sexual development. May include multiple older partners or high-risk sexual behavior.
3 Profound problems with sexual development. This level would include prostitution, very frequent risky sexual behavior, or sexual aggression.

39. SCHOOL BEHAVIOR

This item rates the behavior of the child or youth in school or school-like settings (e.g. Head Start, pre-school). A rating of 3 would indicate a child who is still having problems after special efforts have been made, i.e., problems in a special education class.

0 No evidence of behavior problems at school or day care. Child is behaving well.
1 Mild problems with school behavioral problems. May be related to either relationships with teachers or peers. A single detention might be rated here.
2 Child is having moderate behavioral difficulties at school. He/she is disruptive and may receive sanctions including suspensions or multiple detentions.
3 Child is having severe problems with behavior in school. He/she is frequently or severely disruptive. School placement may be in jeopardy due to behavior. NA Not applicable for children five years and younger

40. SCHOOL ACHIEVEMENT

This item describes academic achievement and functioning.
0 Child is doing well in school.
1 Child is doing adequately in school, although some problem with achievement exists.
2 Child is having moderate problems with school achievement. He/she may be failing some subjects.
3 Child is having severe achievement problems. He/she may be failing most subjects or is more than one year behind same age peers in school achievement. NA Not applicable for children five years and younger

41. SCHOOL ATTENDANCE

If school is not in session, rate the last 30 days when school was in session.
0 No evidence of attendance problems. Child attends regularly.
1 Child has some problems attending school, although he/she generally goes to school. He/she may miss up to one day per week on average. Or, he/she may have had moderate to severe problems in the past six months but has been attending school regularly in the past month.
2 Child is having problems with school attendance. He/she is missing at least two days per week on average.
3 Child is generally truant or refusing to go to school.

Acculturation

For Acculturation, the following categories and action levels are used:
0 indicates a dimension where there is no evidence of any needs.
1 indicates a dimension that requires monitoring, watchful waiting, or preventive activities.
2 indicates a dimension that requires action to ensure that this identified need or risk behavior is addressed.
3 indicates a dimension that requires immediate or intensive action.

42. LANGUAGE

This item includes both spoken and sign language.
0 Child and family speak English well.
1 Child and family speak some English but potential communication problems exist due to limits on vocabulary or understanding of the nuances of the language.
2 Child and/or significant family members do not speak English. Translator or native language speaker is needed for successful intervention but qualified individual can be identified within natural supports.
3 Child and/or significant family members do not speak English. Translator or native language speaker is needed for successful intervention and no such individual is available from among natural supports.

43. IDENTITY

Cultural identity refers to the child’s view of his/herself as belonging to a specific cultural group. This cultural group may be defined by a number of factors including race, religion, ethnicity, geography, or lifestyle.

0 Child has clear and consistent cultural identity and is connected to others who share his/her cultural identity.
1 Child is experiencing some confusion or concern regarding cultural identity.
2 Child has significant struggles with his/her own cultural identity. Child may have cultural identity but is not connected with others who share this culture.
3 Child has no cultural identity or is experiencing significant problems due to conflict regarding his/her cultural identity.

44. RITUAL

Cultural rituals are activities and traditions that are culturally including the celebration of culturally specific holidays such as kwanza, cinco de mayo, etc. Rituals also may include daily activities that are culturally specific (e.g. praying toward Mecca at specific times, eating a specific diet, access to media)

0 Child and family are consistently able to practice rituals consistent with their cultural identity.
1 Child and family are generally able to practice rituals consistent with their cultural identity; however, they sometimes experience some obstacles to the performance of these rituals.
2 Child and family experience significant barriers and are sometimes prevented from practicing rituals consistent with their cultural identity.
3 Child and family are unable to practice rituals consistent with their cultural identity.

45. CULTURE STRESS

Culture stress refers to experiences and feelings of discomfort and/or distress arising from friction (real or perceived) between an individual’s own cultural identity and the predominant culture in which he/she lives.
0  No evidence of stress between individual’s cultural identity and current living situation.
1  Some mild or occasional stress resulting from friction between the individual’s cultural identity and his/her current living situation.
2  Individual is experiencing cultural stress that is causing problems of functioning in at least one life domain.
3  Individual is experiencing a high level of cultural stress that is making functioning in any life domain difficult under the present circumstances.

Child Behavioral/emotional Needs

For Behavioral/Emotional Needs, the following categories and symbols are used:

0  indicates a dimension where there is no evidence of any needs.
1  indicates a dimension that requires monitoring, watchful waiting, or preventive activities.
2  indicates a dimension that requires action to ensure that this identified need or risk behavior is addressed.
3  indicates a dimension that requires immediate or intensive action.

46. PSYCHOSIS

This item is used to rate symptoms of psychiatric disorders with a known neurological base. DSM-IV disorders included on this dimension are Schizophrenia and Psychotic disorders (unipolar, bipolar, NOS). The common symptoms of these disorders include hallucinations, delusions, unusual thought processes, strange speech, and bizarre/idosyncratic behavior.

0  This rating indicates a child with no evidence of thought disturbances. Both thought processes and content are within normal range.
1  This rating indicates a child with evidence of mild disruption in thought processes or content. The child may be somewhat tangential in speech or evidence somewhat illogical thinking (age inappropriate). This also includes children with a history of hallucinations but none currently. The category would be used for children who are subthreshold for one of the DSM diagnoses listed above.
2  This rating indicates a child with evidence of moderate disturbance in thought processes or content. The child may be somewhat delusional or have brief or intermittent hallucinations. The child’s speech may be at times quite tangential or illogical. This level would be used for children who meet the diagnostic criteria for one of the disorders listed above.
3  This rating indicates a child with severe psychotic disorder. The child frequently is experiencing symptoms of psychosis and frequently has no reality assessment. There is evidence of ongoing delusions or hallucinations
or both. Command hallucinations would be coded here. This level is used for extreme cases of the diagnoses listed above.

47. ATTENTION DEFICIT/IMPULSE CONTROL

Symptoms of Attention Deficit and Hyperactivity Disorder and Impulse Control Disorder would be rated here. Inattention/distractibility not related to opposition would also be rated here.

0 This rating is used to indicate a child with no evidence of attention/hyperactivity problems.
1 This rating is used to indicate a child with evidence of mild problems with attention/hyperactivity or impulse control problems. Child may have some difficulties staying on task for an age appropriate time period.
2 This rating is used to indicate a child with moderate symptoms attention/hyperactivity or impulse control problems. A child who meets DSM-IV diagnostic criteria for ADHD would be rated here.
3 This rating is used to indicate a child with severe impairment of attention or dangerous impulse control problems. Frequent impulsive behavior is observed or noted that carries considerable safety risk (e.g. running into the street, dangerous driving or bike riding). A child with profound symptoms of ADHD would be rated here.

48. DEPRESSION

Symptoms included in this dimension are irritable or depressed mood, social withdrawal, and anxious mood; sleep disturbances, weight/eating disturbances, and loss of motivation. This dimension can be used to rate symptoms of the following psychiatric disorders as specified in DSM-IV: Depression (unipolar, dysthymia, NOS), Bipolar.

0 This rating is given to a child with no emotional problems. No evidence of depression.
1 This rating is given to a child with mild emotional problems. Brief duration of depression, irritability, or impairment of peer, family, or academic functioning that does not lead to gross avoidance behavior.
2 This rating is given to a child with a moderate level of emotional disturbance. This could include major, depression, or school avoidance. Any diagnosis of depression would be coded here. This level is used to rate children who meet the criteria for an affective disorder listed above.
3 This rating is given to a child with a severe level of depression. This would include a child who stays at home or in bed all day due to depression or one whose emotional symptoms prevent any participation in school, friendship groups, or family life. Disabling forms of depressive diagnoses would be coded here. This level is used to indicate an extreme case of one of the disorders listed above.
49. ANXIETY

This item describes the child’s level of fearfulness, worrying, or other characteristics of anxiety.

0 No evidence of any anxiety or fearfulness.
1 History or suspicion of anxiety problems or mild to moderate anxiety associated with a recent negative life event. This level is used to rate either a mild phobia or anxiety problem or a sub-threshold level of symptoms for the other listed disorders.
2 Clear evidence of anxiety associated with either anxious mood or significant fearfulness. Anxiety has interfered significantly in child’s ability to function in at least one life domain.
3 Clear evidence of debilitating level of anxiety that makes it virtually impossible for the child to function in any life domain.

50. OPPOSITIONAL BEHAVIOR (Compliance with authority)

This item is intended to capture how the child relates to authority. Oppositional behavior is different from conduct disorder in that the emphasis of the behavior is on non-compliance to authority rather than on seriously breaking social rules, norms, and laws.

0 This rating indicates that the child/adolescent is generally compliant.
1 This rating indicates that the child/adolescent has mild problems with compliance to some rules or adult instructions. Child may occasionally talk back to teacher, parent/caregiver may be letters or calls from school.
2 This rating indicates that the child/adolescent has moderate problems with compliance to rules or adult instructions. A child who meets the criteria for Oppositional Defiant Disorder in DSM-IV would be rated here.
3 This rating indicates that the child/adolescent has severe problems with compliance to rules or adult instructions. A child rated at this level would be a severe case of Oppositional Defiant Disorder. They would be virtually always noncompliant. Child repeatedly ignores authority.

51. CONDUCT

These symptoms include antisocial behaviors like shoplifting, lying, vandalism, and cruelty to animals, assault. This dimension would include the symptoms of Conduct Disorder as specified in DSM-IV.

0 This rating indicates a child with no evidence of behavior disorder.
1 This rating indicates a child with a mild level of conduct problems. The child may have some difficulties in school and home behavior. Problems are recognizable but not notably deviant for age, sex, and community. This might include occasional truancy, repeated severe lying, or petty theft from family.
2 This rating indicates a child with a moderate level of conduct disorder. This could include episodes of planned aggressive or other anti-social behavior. A child rated at this level should meet the criteria for a diagnosis of Conduct Disorder.

3 This rating indicates a child with a severe Conduct Disorder. This could include frequent episodes of unprovoked, planned aggressive or other anti-social behavior.

52. SUBSTANCE ABUSE

These symptoms include use of alcohol and illegal drugs, the misuse of prescription medications and the inhalation of any substance for recreational purposes. This rating is consistent with DSM-IV Substance-related Disorders.

0 This rating is for a child who has no substance use difficulties at the present time. If the person is in recovery for greater than 1 year, they should be coded here, although this is unlikely for a child or adolescent.

1 This rating is for a child with mild substance use problems that might occasionally present problems of living for the person (intoxication, loss of money, reduced school performance, parental concern). This rating would be used for someone early in recovery (less than 1 year) who is currently abstinent for at least 30 days.

2 This rating is for a child with a moderate substance abuse problem that both requires treatment and interacts with and exacerbates the psychiatric illness. Substance abuse problems consistently interfere with the ability to function optimally but do not completely preclude functioning in an unstructured setting.

3 This rating is for a child with a severe substance dependence condition that presents a significant complication to the coordination of care (e.g. need for detoxification) of the individual. A substance-exposed infant who demonstrates symptoms of substance dependence would be rated here.

53. ATTACHMENT DIFFICULTIES

This item should be rated within the context of the child’s significant parental or caregiver relationships.

0 No evidence of attachment problems. Caregiver-child relationship is characterized by mutual satisfaction of needs and child’s development of a sense of security and trust. Caregiver appears able to respond to child cues in a consistent, appropriate manner, and child seeks age-appropriate contact with caregiver for both nurturing and safety needs.

1 Mild problems with attachment. There is some evidence of insecurity in the child-caregiver relationship. Caregiver may at times have difficulty accurately reading child bids for attention and nurturance; may be inconsistent in response;
or may be occasionally intrusive. Child may have mild problems with separation (e.g., anxious/clingy behaviors in the absence of obvious cues of danger) or may avoid contact with caregiver in age-inappropriate way. Child may have minor difficulties with appropriate physical/emotional boundaries with others.

2 Moderate problems with attachment. Attachment relationship is marked by sufficient difficulty as to require intervention. Caregiver may consistently misinterpret child cues, act in an overly intrusive way, or ignore/avoid child bids for attention/nurturance. Child may have ongoing difficulties with separation, may consistently avoid contact with caregivers, and may have ongoing difficulties with physical or emotional boundaries with others.

3 Severe problems with attachment. Child is unable to form attachment relationships with others (e.g., chronic dismissive/avoidant/detached behavior in care giving relationships) OR child presents with diffuse emotional/physical boundaries leading to indiscriminate attachment with others. Child is considered at ongoing risk due to the nature of his/her attachment behaviors. A child who meets the criteria for an Attachment Disorder in DSM-IV would be rated here. Child may have experienced significant early separation from or loss of caregiver, or have experienced chronic inadequate care from early caregivers, or child may have individual vulnerabilities (e.g., mental health, developmental disabilities) that interfere with the formation of positive attachment relationships.

54. EATING DISTURBANCES

These symptoms include problems with eating including disturbances in body image, refusal to maintain normal body weight and recurrent episodes of binge eating. These ratings are consistent with DSM-IV Eating Disorders.

0 This rating is for a child with no evidence of eating disturbances.
1 This rating is for a child with a mild level of eating disturbance. This could include some preoccupation with weight, calorie intake, or body size or type when of normal weight or below weight. This could also include some binge eating patterns.
2 This rating is for a child with a moderate level of eating disturbance. This could include a more intense preoccupation with weight gain or becoming fat when underweight, restrictive eating habits or excessive exercising in order to maintain below normal weight, and/or emaciated body appearance. This level could also include more notable binge eating episodes that are followed by compensatory behaviors in order to prevent weight gain (e.g., vomiting, use of laxatives, excessive exercising). This child may meet criteria for a DSM-IV Eating Disorder (Anorexia or Bulimia Nervosa).
3 This rating is for a child with a more severe form of eating disturbance. This could include significantly low weight where hospitalization is required or excessive binge-purge behaviors (at least once per day).
55. AFFECT DYSREGULATION

These symptoms include difficulties modulating or expressing emotions, intense fear or helplessness, difficulties regulating sleep/wake cycle, and inability to fully engage in activities.

0 This rating is given to a child with no difficulties regulating emotional responses. Emotional responses are appropriate to the situation.

1 This rating is given to a child with some minor difficulties with affect regulation. This child could have some difficulty tolerating intense emotions and become somewhat jumpy or irritable, in response to emotionally charged stimuli or more watchful or hypervigilant in general. This child may have some difficulty sustaining involvement in activities for any length of time.

2 This rating is given to a child with moderate problems with affect regulation. This child may be unable to modulate emotional responses. This child may exhibit marked shifts in emotional responses (e.g., from sadness to irritability to anxiety) or have contained emotions with a tendency to lose control of emotions at various points (e.g., normally restricted affect punctuated by outbursts of anger or sadness). This child may also exhibit persistent anxiety, intense fear or helplessness, or lethargy/loss of motivation.

3 This rating is given to a child with severe problems with highly dysregulated affect. This child may have more rapid shifts in mood and an inability to modulate emotional responses (feeling out of control of their emotions). This child may also exhibit tightly contained emotions with intense outbursts under stress. Alternately, this child may be characterized by extreme lethargy, loss of motivation or drive, and no ability to concentrate or sustain engagement in activities (i.e., emotionally “shut down”).

NA Not applicable due to child’s age. See section for children 0–5 years old.

56. BEHAVIORAL REGRESSIONS

These ratings are used to describe shifts in previously adaptive functioning evidenced in regressions in behaviors or physiological functioning.

0 This rating is given to a child with no evidence of behavioral regression.

1 This rating is given to a child with some regressions in age-level of behavior (e.g., thumb sucking, whining when age inappropriate).

2 This rating is given to a child with moderate regressions in age-level of behavior including loss of ability to engage with peers, stopping play or exploration in environment that was previously evident, or occasional bedwetting.

3 This rating is given to a child with more significant regressions in behaviors in an earlier age as demonstrated by changes in speech or loss of bowel or bladder control.
57. SOMATIZATION

_These symptoms include the presence of recurrent physical complaints without apparent physical cause or conversion-like phenomena (e.g., pseudoseizures)._ 

0 This rating is for a child with no evidence of somatic symptoms.

1 This rating indicates a child with a mild level of somatic problems. This could include occasional headaches, stomach problems (nausea, vomiting), joint, limb, or chest pain without medical cause.

2 This rating indicates a child with a moderate level of somatic problems or the presence of conversion symptoms. This could include more persistent physical symptoms without a medical cause or the presence of several different physical symptoms (e.g., stomach problems, headaches, backaches). This child may meet criteria for a somatoform disorder. Additionally, the child could manifest any conversion symptoms here (e.g., pseudoseizures, paralysis).

3 This rating indicates a child with severe somatic symptoms causing significant disturbance in school or social functioning. This could include significant and varied symptomatic disturbance without medical cause.

58. ANGER CONTROL

_This item captures the youth’s ability to identify and manage their anger when frustrated._

0 This rating indicates a child with no evidence of any significant anger control problems.

1 This rating indicates a child with some problems with controlling anger. He/she may sometimes become verbally aggressive when frustrated. Peers and family members are aware of and may attempt to avoid stimulating angry outbursts.

2 This rating indicates a child with moderate anger control problems. His/her temper has gotten him/her in significant trouble with peers, family, and/or school. This level may be associated with some physical violence. Others are likely quite aware of anger potential.

3 This rating indicates a child with severe anger control problems. His/her temper is likely associated with frequent fighting that is often physical. Others likely fear him/her.

NA Not applicable due to child’s age.

Child Risk Behaviors

For Risk Behaviors, the following categories and action levels are used:

0 indicates a dimension where there is no evidence of any needs.

1 indicates a dimension that requires monitoring, watchful waiting, or preventive activities.
2 indicates a dimension that requires action to ensure that this identified need or risk behavior is addressed.
3 indicates a dimension that requires immediate or intensive action.

59. SUICIDE RISK

This rating describes both suicidal and significant self-injurious behavior. A rating of 2 or 3 would indicate the need for a safety plan.

0 Child has no evidence or history of suicidal or self-injurious behaviors.
1 History of suicidal or self-injurious behaviors or significant ideation but no self-injurious behavior during the past 30 days.
2 Recent, (last 30 days) but not acute (today) suicidal ideation or gesture. Self-injurious in the past 30 days (including today) without suicidal ideation or intent.
3 Current suicidal ideation and intent in the past 24 h.

60. SELF-MUTILATION

This rating includes repetitive physically harmful behavior that generally serves a self-soothing functioning with the child.

0 No evidence of any forms of self-mutilation (e.g. cutting, burning, face slapping, head banging)
1 History of self-mutilation but none evident in the past 30 days.
2 Engaged in self-mutilation that does not require medical attention.
3 Engaged in self-mutilation that requires medical attention.

61. OTHER SELF HARM

This rating includes reckless and dangerous behaviors that while not intended to harm self or others, place the child or others at some jeopardy. Suicidal or self-mutilative behavior is NOT rated here.

0 No evidence of behaviors that place the child at risk of physical harm.
1 History of behavior other than suicide or self-mutilation that places child at risk of physical harm. This includes reckless and risk-taking behavior that may endanger the child.
2 Engaged in behavior other than suicide or self-mutilation that places him/her in danger of physical harm. This includes reckless behavior or intentional risk-taking behavior.
3 Engaged in behavior other than suicide or self-mutilation that places him/her at immediate risk of death. This includes reckless behavior or intentional risk-taking behavior.
62. DANGER TO OTHERS

This rating includes actual and threatened violence. Imagined violence, when extreme, may be rated here. A rating of 2 or 3 would indicate the need for a safety plan.

0 Child has no evidence or history of aggressive behaviors or significant verbal aggression towards others (including people and animals).
1 History of aggressive behavior or verbal aggression towards others but no aggression during the past 30 days. History of fire setting (not in past year) would be rated here.
2 Occasional or moderate level of aggression towards others including aggression during the past 30 days or more recent verbal aggression.
3 Frequent or dangerous (significant harm) level of aggression to others. Child or youth is an immediate risk to others.

63. SEXUAL AGGRESSION

Sexually abusive behavior includes both aggressive sexual behavior and sexual behavior in which the child or adolescent takes advantage of a younger or less powerful child through seduction, coercion, or force.

0 No evidence of problems with sexual behavior in the past year.
1 Mild problems of sexually abusive behavior. For example, occasional inappropriate sexually aggressive/harassing language or behavior.
2 Moderate problems with sexually abusive behavior, For example, frequent inappropriate sexual behavior. Frequent disrobing would be rated here only if it was sexually provocative. Frequent inappropriate touching would be rated here.
3 Severe problems with sexually abusive behavior. This would include the rape or sexual abuse of another person involving sexual penetration.

64. RUNAWAY

In general, to classify as a runaway or elopement, the child is gone overnight or very late into the night. Impulsive behavior that represents an immediate threat to personal safety would also be rated here.

0 This rating is for a child with no history of running away and no ideation involving escaping from the present living situation.
1 This rating is for a child with no recent history or running away but who has expressed ideation about escaping present living situation or treatment. Child may have threatened running away on one or more occasions or have a history (lifetime) of running away but not in the past year.
2 This rating is for a child who has run away from home once or run away from one treatment setting within the past year. Also rated here is a child who has run away to home (parental or relative) in the past year.
3 This rating is for a child who has (1) run away from home and/or treatment settings within the last 7 days or (2) run away from home and/or treatment setting twice or more overnight during the past 30 days. Destination is not a return to home of parent or relative.

65. DELINQUENCY

This rating includes both criminal behavior and status offenses that may result from child or youth failing to follow required behavioral standards (e.g. truancy). Sexual offenses should be included as criminal behavior.

0 Child shows no evidence or has no history of criminal or delinquent behavior.
1 History of criminal or delinquent behavior but none in the past 30 days. Status offenses in the past 30 days would be rated here.
2 Moderate level of criminal activity including a high likelihood of crimes committed in the past 30 days. Examples would include vandalism, shoplifting, etc.
3 Serious level of criminal or delinquent activity in the past 30 days. Examples would include car theft, residential burglary, gang involvement, etc.

66. JUDGMENT

This item describes the child’s decision-making processes and awareness of consequences.

0 No evidence of problems with judgment or poor decision making that result in harm.
1 History of problems with judgment in which the child makes decisions that are in some way harmful. For example, a child who has a history of hanging out with other children who shoplift.
2 Problems with judgment in which the child makes decisions that are in some way harmful to his/her development and/or well-being.
3 Problems with judgment that place the child at risk of significant physical harm.

67. FIRE SETTING

This item refers to behavior involving the intentional setting of fires that might be dangerous to the child or others. This does not include the use of candles or incense or matches to smoke.

0 No evidence or history of fire setting behavior
1 History or fire-setting but not in past six months
2 Recent fire setting behavior (in past six months) but not of the type that has endangered the lives of others (e.g. playing with matches) OR repeated fire
setting behavior over a period of at least two years even if not in the past six months.
3 Acute threat of fire setting. Set fire that endangered the lives of others (e.g. attempting to burn down a house).

68. SOCIAL BEHAVIOR

This rating describes obnoxious social behaviors that a child engages in to intentionally force adults to sanction him/her. This item should reflect problematic social behaviors (socially unacceptable behavior for the culture and community in which he/she lives) that put the child at some risk sanctions (e.g. not excessive shyness).

0 Child shows no evidence of problematic social behaviors.
1 Mild level of problematic social behaviors. This might include occasionally inappropriate social behavior that forces adults to sanction the child. Infrequent inappropriate comments to strangers or unusual behavior in social settings might be included at this level.
2 Moderate level of problematic social behaviors. Social behavior is causing problems in the child’s life. Child may be intentionally getting in trouble in school or at home.
3 Severe level of problematic social behaviors. This would be indicated by frequent seriously inappropriate social behavior that force adults to seriously and/or repeatedly sanction the child. Social behaviors are sufficiently severe that they place the child at risk of significant sanctions (e.g. expulsion, removal from the community).

69. SEXUALLY REACTIVE BEHAVIORS

Sexually reactive behavior includes both age-inappropriate sexualized behaviors that may place a child at risk for victimization or risky sexual practices.

0 No evidence of problems with sexually reactive behaviors or high-risk sexual behaviors.
1 Some evidence of sexually reactive behavior. Child may exhibit occasional inappropriate sexual language or behavior, flirts when age-inappropriate, or engages in unprotected sex with single partner. This behavior does not place child at great risk. A history of sexually provocative behavior would be rated here.
2 Moderate problems with sexually reactive behavior that place child at some risk. Child may exhibit more frequent sexually provocative behaviors in a manner that impairs functioning, engage in promiscuous sexual behaviors or have unprotected sex with multiple partners.
3 Significant problems with sexually reactive behaviors. Child exhibits sexual behaviors that place child or others at immediate risk.
Ratings of Children Five Years Old and Younger

The following items are required for any child who is five years old or younger; however, they may be rated for any child if they represent a need for that specific individual.

70. MOTOR

This rating describes the child’s fine (e.g. hand grasping and manipulation) and gross (e.g. sitting, standing, walking) motor functioning.

0 Child’s fine and gross motor functioning appears normal. There is no reason to believe that the child has any problems with motor functioning.
1 The child has mild fine (e.g. using scissors) or gross motor skill deficits. The child may have exhibited delayed sitting, standing, or walking, but has since reached those milestones.
2 The child has moderate motor deficits. A non-ambulatory child with fine motor skills (e.g. reaching, grasping) or an ambulatory child with severe fine motor deficits would be rated here. A full-term newborn that does not have a sucking reflex in the first few days of life would be rated here.
3 The child has severe or profound motor deficits. A non-ambulatory child with additional movement deficits would be rated here, as would any child older than 6 months who cannot lift his or her head.

71. SENSORY

This rating describes the child’s ability to use all senses including vision, hearing, smell, touch, and kinesthetics.

0 The child’s sensory functioning appears normal. There is no reason to believe that the child has any problems with sensory functioning.
1 The child has mild impairment on a single sense (e.g. mild hearing deficits, correctable vision problems).
2 The child has moderate impairment on a single sense or mild impairment on multiple senses (e.g. difficulties with sensory integration, diagnosed need for occupational therapy).
3 The child has significant impairment on one or more senses (e.g. profound hearing or vision loss).

72. COMMUNICATION

This rating describes the child’s ability to communicate through any medium including all spontaneous vocalizations and articulations.
Child’s receptive and expressive communication appears developmentally appropriate. There is no reason to believe that the child has any problems communicating.

1 Child’s receptive abilities are intact, but child has limited expressive capabilities (e.g. if the child is an infant, he or she engages in limited vocalizations; if older than 24 months, he or she can understand verbal communication, but others have unusual difficulty understanding child).
2 Child has limited receptive and expressive capabilities.
3 Child is unable to communicate in any way, including pointing or grunting.

73. FAILURE TO THRIVE
Symptoms of failure to thrive focus on normal physical development such as growth and weight gain.

0 The child does not appear to have any problems with regard to weight gain or development. There is no evidence of failure to thrive.
1 The child has mild delays in physical development (e.g. is below the 25th percentile in terms of height or weight).
2 The child has significant delays in physical development that could be described as failure to thrive (e.g. is below the 10th percentile in terms of height or weight).
3 The child has severe problems with physical development that puts their life at risk (e.g. is at or beneath the 1st percentile in height or weight).

74. REGULATORY PROBLEMS
This category refer to all dimensions of self-regulation, including the quality and predictability of sucking/feeding, sleeping, elimination, activity level/intensity, sensitivity to external stimulation, and ability to be consoled.

0 Child does not appear to have any problems with self-regulation.
1 Child has mild problems with self-regulation (e.g. unusually intense activity level, mild or transient irritability).
2 Child has moderate to severe problems with self-regulation (e.g. chronic or intense irritability, unusually low tolerance/high sensitivity to external stimulation).
3 Child has profound problems with self-regulation that place his/her safety, well being, and/or development at risk (e.g. child cannot be soothed at all when distressed, child cannot feed properly).

75. BIRTH WEIGHT
This dimension describes the child’s weight as compared to normal development.
0 Child is within normal range for weight and has been since birth. A child with a birth weight of 2,500 g (5.5 pounds) or greater would be rated here.
1 Child was born under weight but is now within normal range or child is slightly beneath normal range. A child with a birth weight of between 1,500 g (3.3 pounds) and 2,499 g would be rated here.
2 Child is considerably under weight to the point of presenting a development risk to the child. A child with a birth weight of 1,000 ga (2.2 pounds) to 1,499 g would be rated here.
3 Child is extremely under weight to the point of the child’s life is threatened. A child with a birth weight of less than 1,000 g (2.2 pounds) would be rated here.

76. PICA
This item describes an eating disorder involving the compulsive ingestion of non-nutritive substances. Generally, the child must be older than 18 months to be considered with this problem.

0 No evidence that the child eats unusual or dangerous materials.
1 Child has repeatedly eaten unusual or dangerous materials consistent with the diagnosis of Pica; however, this behavior has not occurred in the past 30 days.
2 Child has eaten unusual or dangerous materials consistent with the diagnosis of Pica in the past 30 days.
3 Child has become physically ill during the past 30 days by eating dangerous materials (e.g. lead paint).

77. PRENATAL CARE
This dimension refers to the health care and birth circumstances experience by the child in utero.

0 Child’s biological mother had adequate prenatal care (e.g. ten or more planned visits to a physician) that began in the first trimester. Child’s mother did not experience any pregnancy-related illnesses.
1 Child’s mother had some short-comings in prenatal care, or had a mild form of a pregnancy-related illness. A child whose mother had six or fewer planned visits to a physician would be rated here (her care must have begun in the first or early second trimester). A child whose mother had a mild or well-controlled form of pregnancy-relayed illness such as gestational diabetes, or who had an uncomplicated high-risk pregnancy, would be rated here.
2 Child’s biological mother received poor prenatal care, initiated only in the last trimester, or had a moderate form of pregnancy-related illness. A child whose mother had four or fewer planned visits to a physician would be rated
here. A mother who experienced a high-risk pregnancy with some complications would be rated here.

3 Child's biological mother had no prenatal care, or had a severe form of pregnancy-related illness. A mother who had toxemia/pre-eclampsia would be rated here.

78. LABOR AND DELIVERY

This dimension refers to conditions associated with, and consequences arising from, complications in labor and delivery of the child.

0 Child and biological mother had normal labor and delivery. A child who received an Apgar score of 7–10 at birth would be rated here.

1 Child or mother had some mild problems during delivery, but child does not appear to be affected by these problems. An emergency C-Section or a delivery-related physical injury (e.g. shoulder displacement) to the child would be rated here.

2 Child or mother had problems during delivery that resulted in temporary functional difficulties for the child or mother. Extended fetal distress, postpartum hemorrhage, or uterine rupture would be rated here. A child who received an Apgar score of 4–7, or who needed some resuscitative measures at birth, would be rated here.

3 Child had severe problems during delivery that have long-term implications for development (e.g. extensive oxygen deprivation, brain damage). A child who received an Apgar score of 3 or lower, or who needed immediate or extensive resuscitative measures at birth, would be rated here.

79. SUBSTANCE EXPOSURE

This dimension describes the child’s exposure to substance use and abuse both before and after birth.

0 Child had no in utero exposure to alcohol or drugs, and there is currently no exposure in the home.

1 Child had either mild in utero exposure (e.g. mother ingested alcohol or tobacco in small amounts fewer than four times during pregnancy), or there is current alcohol and/or drug use in the home.

2 Child was exposed to significant alcohol or drugs in utero. Any ingestion of illegal drugs during pregnancy (e.g. heroin, cocaine), or significant use of alcohol or tobacco, would be rated here.

3 Child was exposed to alcohol or drugs in utero and continues to be exposed in the home. Any child who evidenced symptoms of substance withdrawal at birth (e.g. crankiness, feeding problems, tremors, weak, and continual crying) would be rated here.
80. PARENT OR SIBLING PROBLEMS

This dimension describes how this child’s parents and older siblings have done/are doing in their respective developments.

0 The child’s parents have no developmental disabilities. The child has no siblings, or existing siblings are not experiencing any developmental or behavioral problems

1 The child’s parents have no developmental disabilities. The child has siblings who are experiencing some mild developmental or behavioral problems (e.g. Attention Deficit, Oppositional Defiant, or Conduct Disorders). It may be that child has at least one healthy sibling.

2 The child’s parents have no developmental disabilities. The child has a sibling who is experiencing a significant developmental or behavioral problem (e.g. a severe version of any of the disorders cited above, or any developmental disorder).

3 One or both of the child’s parents have been diagnosed with a developmental disability, or the child has multiple siblings who are experiencing significant developmental or behavioral problems (all siblings must have some problems).

81. MATERNAL AVAILABILITY

This dimension addresses the primary caretaker’s emotional and physical availability to the child in the weeks immediately following the birth. Rate maternal availability up until 3 months (12 weeks) post-partum.

0 The child’s mother/primary caretaker was emotionally and physically available to the child in the weeks following the birth.

1 The primary caretaker experienced some minor or transient stressors which made her slightly less available to the child (e.g. another child in the house under two years of age, an ill family member for whom the caretaker had responsibility, a return to work before the child reached six weeks of age).

2 The primary caretaker experienced a moderate level of stress sufficient to make him/her significantly less emotionally and physically available to the child in the weeks following the birth (e.g. major marital conflict, significant post-partum recuperation issues or chronic pain, two or more children in the house under four years of age).

3 The primary caretaker was unavailable to the child to such an extent that the child’s emotional or physical well-being was severely compromised (e.g. a psychiatric hospitalization, a clinical diagnosis of severe Post-Partum Depression, any hospitalization for medical reasons which separated caretaker and child for an extended period of time, divorce or abandonment).
82. CURIOSITY

*This rating describes the child’s self-initiated efforts to discover his/her world.*

0  This level indicates a child with exceptional curiosity. Infants display mouthing and banging of objects within grasp; older children crawl or walk to objects of interest.

1  This level indicates a child with good curiosity. An ambulatory child who does not walk to interesting objects, but who will actively explore them when presented to him/her, would be rated here.

2  This level indicates a child with limited curiosity. Child may be hesitant to seek out new information or environments, or reluctant to explore even presented objects.

3  This level indicates a child with very limited or no observable curiosity. Child may seem frightened of new information or environments.

83. PLAYFULNESS

*This rating describes the child’s enjoyment of play alone and with others.*

0  This level indicates a child with substantial ability to play with self and others. Child enjoys play, and if old enough, regularly engages in symbolic and means-end play. If still an infant, child displays changing facial expressions in response to different play objects.

1  This level indicates a child with good play abilities. Child may enjoy play only with self or only with others, or may enjoy play with a limited selection of toys.

2  This level indicates a child with limited ability to enjoy play. Child may remain preoccupied with other children or adults to the exclusion of engaging in play, or may exhibit impoverished or unimaginative play.

3  This level indicates a child who has significant difficulty with play both by his/her self and with others. Child does not engage in symbolic or means-end play, although he or she will handle and manipulate toys.

Transition to Adulthood

The following items are required for youth 17 and older. However, any of these items can be rated regardless of age if they represent a need for a specific youth.

84. INDEPENDENT LIVING SKILLS

*This rating focuses on the presence or absence of short or long-term risks associated with impairments in independent living abilities.*
0 This level indicates a person who is fully capable of independent living. No evidence of any deficits that could impede maintaining own home.

1 This level indicates a person with mild impairment of independent living skills. Some problems exist with maintaining reasonable cleanliness, diet and so forth. Problems with money management may occur at this level. These problems are generally addressable with training or supervision.

2 This level indicates a person with moderate impairment of independent living skills. Notable problems with completing tasks necessary for independent living are apparent. Difficulty with cooking, cleaning, and self-management when unsupervised would be common at this level. Problems are generally addressable with in-home services.

3 This level indicates a person with profound impairment of independent living skills. This individual would be expected to be unable to live independently given their current status. Problems require a structured living environment.

85. TRANSPORTATION

This item is used to rate the level of transportation required to ensure that the individual could effectively participate in his/her own treatment and in other life activities. Only unmet transportation needs should be rated here.

0 The individual has no transportation needs.

1 The individual has occasional transportation needs (e.g., appointments). These needs would be no more than weekly and not require a special vehicle.

2 The individual has occasional transportation needs that require a special vehicle or frequent transportation needs (e.g., daily to work or therapy) that do not require a special vehicle.

3 The individual requires frequent (e.g., daily to work or therapy) transportation in a special vehicle.

86. PARENTING ROLES

This item is intended to rate the individual in any caregiver roles. For example, an individual with a son or daughter or an individual responsible for an elderly parent or grandparent would be rated here. Include pregnancy as a parenting role.

0 The individual has no role as a parent.

1 The individual has responsibilities as a parent but is currently able to manage these responsibilities.

2 The individual has responsibilities as a parent and either the individual is struggling with these responsibilities or they are currently interfering with the individual’s functioning in other life domains.

3 The individual has responsibilities as a parent and the individual is currently unable to meet these responsibilities or these responsibilities are making it impossible for the individual to function in other life domains.
87. PERSONALITY DISORDER

This rating identifies the presence of any DSM-IV Axis II personality disorder

0 No evidence of symptoms of a personality disorder.
1 Evidence of mild degree, probably sub-threshold for the diagnosis of a personality disorder. For example, mild but consistent dependency in relationships might be rated here; or, some evidence of antisocial or narcissistic behavior. An unconfirmed suspicion of the presence of a diagnosable personality disorder would be rated here.
2 Evidence of sufficient degree of personality disorder to warrant a DSM-IV Axis II diagnosis.
3 Evidence of a severe personality disorder that has significant implications for the individual long-term functioning. Personality disorder dramatically interferes with the individual's ability to function independently.

88. INTIMATE RELATIONSHIPS

This item is used to rate the individual's current status in terms of romantic/intimate relationships.

0 Adaptive partner relationship. Individual has a strong, positive, partner relationship with another adult. This adult functions as a member of the family.
1 Mostly adaptive partner relationship. Individual has a generally positive partner relationship with another adult. This adult may not function as a member of the family.
2 Limited adaptive partner relationship. Individual is currently not involved in any partner relationship with another adult.
3 Significant difficulties with partner relationships. Individual is currently involved in a negative, unhealthy relationship with another adult.

89. MEDICATION COMPLIANCE

This rating focuses on the level of the individual's willingness and participation in taking prescribed medications.

0 This level indicates a person who takes any prescribed medications as prescribed and without reminders, or a person who is not currently on any psychotropic medication.
1 This level indicates a person who will take prescribed medications routinely, but who sometimes needs reminders to maintain compliance. Also, a history of medication noncompliance but no current problems would be rated here.
2 This level indicates a person who is somewhat non-compliant. This person may be resistant to taking prescribed medications or this person may tend to overuse his or her medications. He/she might comply with prescription plans for periods of time (1–2 weeks) but generally does not sustain taking medication in prescribed dose or protocol.
3 This level indicates a person who has refused to take prescribed medications during the past 30 day period or a person who has abused his or her medications to a significant degree (i.e., overdosing or over using medications to a dangerous degree).

90. EDUCATIONAL ATTAINMENT

This rates the degree to which the individual has completed his/her planned education.

0 Individual has achieved all educational goals or has none but educational attainment has no impact on lifetime vocational functioning.
1 Individual has set educational goals and is currently making progress towards achieving them.
2 Individual has set educational goals but is currently not making progress towards achieving them.
3 Individual has no educational goals and lack of educational attainment is interfering with individual's lifetime vocational functioning.

91. VICTIMIZATION

This item is used to examine a history and level of current risk for victimization.

0 This level indicates a person with no evidence of recent victimization and no significant history of victimization within the past year. The person may have been robbed or burglarized on one or more occasions in the past, but no pattern of victimization exists. Person is not presently at risk for re-victimization.
1 This level indicates a person with a history of victimization but who has not been victimized to any significant degree in the past year. Person is not presently at risk for re-victimization.
2 This level indicates a person who has been recently victimized (within the past year) but is not in acute risk of re-victimization. This might include physical or sexual abuse, significant psychological abuse by family or friend, extortion, or violent crime.
3 This level indicates a person who has been recently victimized and is in acute risk of re-victimization. Examples include working as a prostitute and living in an abusive relationship.

Caregiver Needs and Strengths

These ratings should be done focused on permanency plan caregivers. Caregiver ratings should be completed by household. If multiple households are involved in the permanency planning, then this section should be completed once for each household under consideration.
For Caregiver Needs and Strengths the following definitions and action levels apply:

0  indicates a dimension where there is no evidence of any needs. This is a strength
1  indicates a dimension that requires monitoring, watchful waiting, or preventive activities.
2  indicates a dimension that requires action to ensure that this identified need or risk behavior is addressed.
3  indicates a dimension that requires immediate or intensive action.

PHYSICAL HEALTH

*Physical health includes medical and physical challenges faced by the caregiver(s)*

0  Caregiver(s) has no physical health limitations that impact assistance or attendant care.
1  Caregiver(s) has some physical health limitations that interfere with provision of assistance or attendant care.
2  Caregiver(s) has significant physical health limitations that prevent them from being able to provide some needed assistance or make attendant care difficult.
3  Caregiver(s) is physically unable to provide any needed assistance or attendant care.

MENTAL HEALTH

*This item refers to the caregiver’s mental health status. Serious mental illness would be rated as a “2” or “3” unless the individual is in recovery.*

0  Caregiver(s) has no mental health limitations that impact assistance or attendant care.
1  Caregiver(s) has some mental health limitations that interfere with provision of assistance or attendant care.
2  Caregiver(s) has significant mental health limitations that prevent them from being able to provide some needed assistance or make attendant care difficult.
3  Caregiver(s) is unable to provide any needed assistance or attendant care due to serious mental illness.

SUBSTANCE USE

*This item rates the caregiver’s pattern of alcohol and/or drug use. Substance-related disorders would be rated as a “2” or “3” unless the individual is in recovery.*

0  Caregiver(s) has no substance-related limitations that impact assistance or attendant care.
1  Caregiver(s) has some substance-related limitations that interfere with provision of assistance or attendant care.
2 Caregiver(s) has significant substance-related limitations that prevent them from being able to provide some needed assistance or make attendant care difficult.
3 Caregiver(s) is unable to provide any needed assistance or attendant care due to serious substance dependency or abuse.

DEVELOPMENTAL

This item describes the caregiver’s developmental status in terms of low IQ, mental retardation or other developmental disabilities.

0 Caregiver(s) has no developmental limitations that impact assistance or attendant care.
1 Caregiver(s) has some developmental limitations that interfere with provision of assistance or attendant care.
2 Caregiver(s) has significant developmental limitations that prevent them from being able to provide some needed assistance or make attendant care difficult.
3 Caregiver(s) is unable to provide any needed assistance or attendant care due to serious developmental disabilities.

SUPERVISION

This rating is used to determine the caregiver’s capacity to provide the level of monitoring and discipline needed by the child.

0 This rating is used to indicate a caregiver circumstance in which supervision and monitoring are appropriate and functioning well.
1 This level indicates a caregiver circumstance in which supervision is generally adequate but inconsistent. This may include a placement in which one member is capable of appropriate monitoring and supervision but others are not capable or not consistently available.
2 This level indicates a caregiver circumstance in which appropriate supervision and monitoring are very inconsistent and frequently absent.
3 This level indicates a caregiver circumstance in which appropriate supervision and monitoring are nearly always absent or inappropriate.

INvolvement WITH CARE

This rating should be based on the level of involvement the caregiver(s) has in the planning and provision of child welfare and related services.

0 This level indicates a caregiver(s) who is actively involved in the planning and/or implementation of services and is able to be an effective advocate on behalf of the child or adolescent.
1 This level indicates a caregiver(s) who is consistently involved in the planning and/or implementation of services for the child or adolescent but is not an active advocate on behalf of the child or adolescent.

2 This level indicates a caregiver(s) who is minimally involved in the care of the child or adolescent. Caregiver may visit individual when in out of home placement, but does not become involved in service planning and implementation.

3 This level indicates a caregiver(s) who is uninvolved with the care of the child or adolescent. Caregiver may want individual out of home or fails to visit individual when in residential placement.

KNOWLEDGE

This rating should be based on caregiver’s knowledge of the specific strengths of the child and any problems experienced by the child and their ability to understand the rationale for the treatment or management of these problems.

0 This level indicates that the present caregiver is fully knowledgeable about the child’s psychological strengths and weaknesses, talents, and limitations.

1 This level indicates that the present caregiver, while being generally knowledgeable about the child, has some mild deficits in knowledge or understanding of either the child’s psychological condition of his/her talents, skills, and assets.

2 This level indicates that the caregiver does not know or understand the child well and that significant deficits exist in the caregiver’s ability to relate to the child’s problems and strengths.

3 This level indicates that the present caregiver has little or no understanding of the child’s current condition. The placement is unable to cope with the child given his/her status at the time, not because of the needs of the child but because the caregiver does not understand or accept the situation.

ORGANIZATION

This rating should be based on the ability of the caregiver to participate in or direct the organization of the household, services, and related activities.

0 Caregiver(s) is well organized and efficient.

1 Caregiver(s) has minimal difficulties with organizing or maintaining household to support needed services. For example, may be forgetful about appointments or occasionally fails to call back case manager.

2 Caregiver(s) has moderate difficulty organizing or maintaining household to support needed services.

3 Caregiver(s) is unable to organize household to support needed services.
RESOURCES

This item refers to the financial and social assets (extended family) and resources that the caregiver(s) can bring to bear in addressing the multiple needs of the child and family.

0 Caregiver(s) has sufficient resources so that there are few limitations on what can be provided for the child.
1 Caregiver(s) has the necessary resources to help address the child’s major and basic needs but those resources might be stretched.
2 Caregiver(s) has limited resources (e.g. a grandmother living in same town who is sometimes available to watch the child).
3 Caregiver(s) has severely limited resources that are available to assist in the care and treatment of the child.

RESIDENTIAL STABILITY

This item rates the caregivers’ current and likely future housing circumstances.

0 This rating indicates a family/caregiver in stable housing with no known risks of instability.
1 This rating indicates a family/caregiver that is currently in stable housing but there are significant risks of housing disruption (e.g. loss of job).
2 This rating indicates a family/caregiver that has moved frequently or has very unstable housing.
3 This rating indicates a family/caregiver that is currently homeless.

SAFETY

This rating refers to the safety of the assessed child. It does not refer to the safety of other family or household members based on any danger presented by the assessed child.

0 This level indicates that the present placement is as safe or safer for the child (in his or her present condition) as could be reasonably expected.
1 This level indicates that the present placement environment presents some mild risk of neglect, exposure to undesirable environments (e.g. drug use or gangs in neighborhood, etc.) but that no immediate risk is present.
2 This level indicates that the present placement environment presents a moderate level of risk to the child, including such things as the risk of neglect or abuse or exposure to individuals who could harm the child.
3 This level indicates that the present placement environment presents a significant risk to the well being of the child. Risk of neglect or abuse is imminent and immediate. Individuals in the environment offer the potential of significantly harming the child.
MARITAL/PARTNER VIOLENCE

This rating describes the degree of difficulty or conflict in the caregiver relationship.

0  Caregivers appear to be functioning adequately. There is no evidence of notable conflict in the caregiver relationship. Disagreements are handled in an atmosphere of mutual respect and equal power.
1  Mild to moderate level of family problems including marital difficulties and caregiver arguments. Caregivers are generally able to keep arguments to a minimum when child is present. Occasional difficulties in conflict resolution or use of power and control by one partner over another.
2  Significant level of caregiver difficulties including frequent arguments that often escalate to verbal aggression or the use of verbal aggression by one partner to control the other. Child often witnesses these arguments between caregivers or the use of verbal aggression by one partner to control the other.
3  Profound level of caregiver or marital violence that often escalates to mutual attacks or the use of physical aggression by one partner to control the other. These episodes may exacerbate child’s difficulties or put the child at greater risk.

CAREGIVER POSTTRAUMATIC REACTIONS

This rating describes posttraumatic reactions faced by caregiver(s), including emotional numbing and avoidance, nightmares, and flashbacks that are related to their child’s or their own traumatic experiences.

0  Caregiver has adjusted to traumatic experiences without notable posttraumatic stress reactions.
1  Caregiver has some mild adjustment problems related to their child’s or their own traumatic experiences. Caregiver may exhibit some guilt about their child’s trauma or become somewhat detached or estranged from others.
2  Caregiver has moderate adjustment difficulties related to traumatic experiences. Caregiver may have nightmares or flashbacks of the trauma.
3  Caregiver has significant adjustment difficulties associated with traumatic experiences. Symptoms might include intrusive thoughts, hypervigilance, and constant anxiety.

PARENTAL CRIMINAL BEHAVIOR

This item rates the criminal behavior of both biological and stepparents.

0  There is no evidence that youth’s parents have ever engaged in criminal behavior.
1  One of youth’s parents has history of criminal behavior but youth has not been in contact with this parent for at least one year.
2  One of youth’s parents has history of criminal behavior resulting in incarceration and youth has been in contact with this parent in the past year.
3  Both of youth’s parents have history of criminal behavior resulting in incarceration.
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