

LACKAWANNA COUNTY FAMILY ADVOCACY AND SUPPORT TOOL (FAST)

*A tool for understanding family circumstances,
planning for services, and measuring outcomes*



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The Family Advocacy and Support Tool (FAST) is a tool for assessing how the family functions. The FAST may also be used with its companion tool, the Child and Adolescent Needs and Strengths (CANS), which more deeply assesses the functioning of the children in the family.

A large number of individuals across the world have contributed to the design and development of the FAST and CANS. They are an open domain tools, free for anyone to use; however training and certification are required to ensure their proper and reliable use. For more information, please contact Dr. John S. Lyons or the person who shared the FAST with you.

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I. THE FAMILY TOGETHER

This section focuses on the family system. The first step is to define who makes up the family.

<p>1. PARENTAL/CAREGIVER COLLABORATION - This item refers to the relationship between parents (or other primary caregivers) with regard to working together in child rearing activities.</p>		
<p>Conversation Starters:</p>		
<p>Notes:</p>		
	Ratings	Anchor Definitions
	0	Adaptive collaboration. Parents usually work together regarding issues of the development and well being of the children. They are able to negotiate disagreements related to their children.
	1	Mostly adaptive collaboration. Generally good parental collaboration with occasional difficulties negotiating miscommunications or misunderstanding regarding issues of the development and well being of the children.
	2	Limited adaptive collaboration. Moderate problems of communication and collaboration between two or more adult caregivers with regard to issues of the development and well being of the youth.
	3	Significant difficulties with collaboration. Minimal collaboration and destructive or sabotaging communication among any parents regarding issues related to the development and well being of the youth.

2. RELATIONSHIPS AMONG SIBLINGS - This item refers to how the children in the family (brothers and sisters as well as step and half siblings) get along with each other.

Conversation Starters:

Notes:

Ratings	Anchor Definitions
0	Adaptive relationships. Siblings generally get along well. Occasional fights or conflicts between them occur, but are quickly resolved.
1	Mostly adaptive relationships. Siblings generally get along, however, when fights or conflicts arise there is some difficulty in resolving them.
2	Limited adaptive relationships. Siblings often do not get along. They generally attempt to resolve their fights or conflicts but have limited success in doing so.
3	Significant difficulties with relationships. Siblings do not get along. The relationships are marked by detachment or active, continuing conflicts, and may include physical violence.

3. EXTENDED FAMILY RELATIONSHIPS - This item refers to the family's relationship with other relatives who do not currently live with the family.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Adaptive relationships. Extended family members play a central role in the functioning and well being of the family. They have predominately positive relationships with members of the extended family and conflicts are resolved quickly.
	1	Mostly adaptive relationships. Extended family members play a supportive role in the family functioning. They generally have positive relationships with members of the extended family. Conflicts may linger but eventually are resolved.
	2	Limited adaptive relationships. Extended family members are marginally involved in the functioning and well being of the family. They have generally strained or absent relationships with extended family members.
	3	Significant difficulties with relationships. Family is not in contact or estranged from extended family members. They have negative relationships with continuing conflicts.

4. FAMILY CONFLICT - This item refers to how much fighting occurs between family members. Domestic violence refers to physical fighting in which family members might get hurt.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Minimal conflict. Family gets along well and negotiates disagreements appropriately.
	1	Some conflict. Family generally gets along fairly well but when conflicts arise resolution is difficult.
	2	Significant conflict. Family is generally argumentative and conflict is a fairly constant theme in family communications.
	3	Domestic violence. Threat or occurrence of physical, verbal or emotional altercations. Family with a current restraining order against one member would be rated here.

5. FAMILY COMMUNICATION - This item refers to the ability of all family members to talk to each other about their thoughts and feelings. It should only be about communication within the family.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Adaptive communication. Family members generally are able to directly communicate important information among each other. Family members are able to understand each other's feelings and needs.
	1	Mostly adaptive communication. Family members can communicate important information among each other. Some individuals or certain topics are excluded from direct communication. Mutual understanding is inconsistent.
	2	Limited adaptive communication. Family members generally are unable to directly communicate important information among each other. Family members have difficulties understanding each other's feelings and needs.
	3	Significant difficulties with communication. Family members communicate mostly through indirect, covert means or there is no sharing of important information at all. They are not able to understand each other's feelings or needs.

6. FAMILY SAFETY - This item refers to the degree to which family members are safe from being physically injured in the home.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No safety concern. Family provides a safe home environment for all family members.
	1	Mild safety concern. Family home environment presents some mild possibility of neglect or exposure to undesirable influences (e.g., alcohol/drug abuse, gang membership of family members) but no immediate risk is present.
	2	Moderate safety concern. Family home environment presents moderate possibility to family members including abuse and neglect or exposure to individuals who could harm the youth.
	3	Severe safety concern. Family home environment presents a clear and immediate probability of harm to family members. Individuals in the environment present immediate risk of significant physical harm.

7. FINANCIAL RESOURCES - This item refers to the income and other sources of money available to family members (particularly caregivers) that can be used to address family needs.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No difficulties. Family has financial resources necessary to meet needs.
	1	Mild difficulties. Family has financial resources necessary to meet most needs; however, some limitations exist.
	2	Moderate difficulties. Family has financial difficulties that limit their ability to meet significant family needs.
	3	Significant difficulties. Family experiencing financial hardship, poverty.

8. RESIDENTIAL STABILITY - This item refers to the stability of the family's housing. This does not refer to the risk of placement outside of the family home for any member of the family.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Family has stable housing for the foreseeable future.
	1	Family having some difficulties maintaining housing due to things such as difficulty paying rent or utilities or conflict with a landlord.
	2	Family has had to move in the past six months due to housing difficulties.
	3	Family has experienced homelessness in the past six months.

9. NATURAL SUPPORTS - This item refers to natural supports - help that you do not have to pay for. This could include friends and families or a church or other organization that helps the family in times of need (unpaid supports).		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Family has substantial natural supports to assist in addressing most family and child needs.
	1	Family has natural supports but some limitations exist whereby these supports are insufficient to address some family and child needs.
	2	Family has limited natural supports.
	3	Family has no natural supports.

** The following 2 items provide an opportunity for the family to assess its current level of ability to advocate for members, particularly youth who have needs.

10. INVOLVEMENT WITH CARE - This item rates the extent to which the caregiver(s) is able to give input and take part in their child’s treatment planning. A **0** on this item is reserved for caregivers who are able to advocate for their child. This requires both knowledge of their child as well as their rights, options and opportunities. A **1** is used to indicate caregivers who are willing participants with service provision but may not yet be able to serve as advocates for their child.

This item reflects the caregiver and/or another family member who may act in this role.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver is actively involved in the planning and/or implementation of services and is able to be an effective advocate on behalf of the youth.
	1	Caregiver (or another family member) is consistently involved in the planning and/or implementation of services for the youth but is not an active advocate on behalf of the youth.
	2	Caregiver (or another family member) is minimally involved in the care of their youth. Caregiver may visit their youth when in out of home placement, but does not become involved in service planning and implementation.
	3	Caregiver (or another family member) is uninvolved with the care of the youth. Caregiver (or another family member) may want youth out of the home or fails to visit youth when in placement.

11. ADVOCACY SKILLS - This item refers to the caregiver's ability to effectively communicate, convey, negotiate or assert his/her family's own interests, desires, needs and rights. This includes an ability to receive constructive feedback from others about his/her family's strengths and needs, as well as the ability to seek additional information as necessary.

This item reflects the caregiver and/or another family member who may act in this role.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	The caregiver is able to effectively advocate for their family. This includes having an understanding of their rights and responsibilities, listening to constructive input from others involved with his/her family, as well as being able to communicate back and ask questions that will make the information useful in advocating for their family.
	1	The caregiver is able to listen to constructive feedback but may struggle with hearing others talk about their family's challenges or the caregiver is generally able to effectively communicate but may sometimes struggle to express his/her thoughts in a way that others understand.
	2	The caregiver needs assistance listening to constructive feedback and/or requires help to express feelings and thoughts effectively with regard to family and child issues.
	3	The caregiver requires substantial help learning to listen and/or express their feelings and thoughts effectively.

II. CAREGIVER'S STATUS

In your family, certain family members have primary responsibilities for managing the household and raising children. In some families, parents are the primary caregivers, but in others a step-parent, a grandparent or an aunt or uncle may also have these responsibilities. Please identify ALL of the caregivers in your family and describe them on the scoring sheet provided using the items described below.

12. CAREGIVER'S EMOTIONAL RESPONSIVENESS - This item refers to the caregiver's ability to understand and respond appropriately to the joys, sorrows, anxieties and other feelings of children.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Adaptive emotional responsiveness. Caregiver is emotionally empathic and attends to child's emotional needs.
	1	Mostly adaptive emotional responsiveness. Caregiver is generally emotionally empathic and typically attends to child's emotional needs. However, certain psychological issues undermine the Caregiver's emotional responsiveness.
	2	Limited adaptive emotional responsiveness. Caregiver is often not empathic and frequently is not able to attend to child's emotional needs.
	3	Significant difficulties with emotional responsiveness. Caregiver is not empathic and rarely attends to the child's emotional needs.

13. CAREGIVER'S BOUNDARIES - This item refers to the caregiver's ability to maintain appropriate boundaries. This item may include physical separation, respecting privacy, and preventing children from being exposed to developmentally inappropriate information.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Adaptive boundaries. Caregiver has strong, appropriate boundaries between her/himself and her/his children.
	1	Mostly adaptive boundaries. Caregiver has generally appropriate boundaries between her/himself and her/his children. Mild boundary violations may occur at times. Minor problems of rigidity of boundaries may occur.
	2	Limited adaptive boundaries. Caregiver has problems maintaining appropriate boundaries between her/him and her/his children. Mild boundary violations may be routine or significant boundary violations may be occasional. Boundaries may be rigid.
	3	Significant difficulties with boundaries. Caregiver has significant and consistent problems maintaining appropriate boundaries between her/himself and her/his children or is excessively rigid in her boundaries.

14. CAREGIVER'S INVOLVEMENT IN CAREGIVING FUNCTIONS - This item refers to the degree to which the caregiver is actively involved in being a parent/caregiver.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Caregiver is actively and fully involved in daily family life.
	1	Caregiver is generally involved in daily family life. She/he may occasionally be less involved for brief periods of time because she/he is distracted by internal stressors and/or other external events or responsibilities.
	2	Caregiver is involved in daily family life but only maintains minimal daily interactions for extended periods of time.
	3	Caregiver is mostly uninvolved in daily family life. She/he may not interact with children on a daily basis.

15. CAREGIVER'S SUPERVISION - This item rates the caregiver's ability to provide monitoring and discipline to their child. Discipline is defined in the broadest sense as all of the things that parents/caregivers can do to promote positive behavior with their child. Supervision also includes the caregiver's ability to access appropriate childcare.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver has good monitoring and disciplining skills.
	1	Caregiver provides generally adequate supervision. May need occasional help or technical assistance.
	2	Caregiver reports difficulties monitoring and/or disciplining child. Caregiver needs assistance to improve supervision skills. Caregiver who has limited access to childcare services would be rated there.
	3	Caregiver is unable to monitor or discipline child. Caregiver requires immediate and continuing assistance. Child is at risk of harm due to absence of supervision. Caregiver who has no access to childcare services would be rated here.

16. CAREGIVER'S PARTNER RELATIONSHIP - This item refers to the caregiver's relationship with another adult. If married, this refers to the caregiver's husband or wife or partner.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Adaptive partner relationship. Caregiver has a strong, positive, partner relationship with another adult. This adult functions as a member of the family. A person without a relationship who currently has no interest in one would be rated here.
	1	Mostly adaptive partner relationship. Caregiver 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. Caregiver is currently not involved in any partner relationship with another adult but wishes to have one.
	3	Significant difficulties with partner relationships. Caregiver is currently involved in a negative, unhealthy relationship with another adult.

17. CAREGIVER'S VOCATIONAL FUNCTIONING - This item refers to the caregiver's work effectiveness including, but not limited to, attendance, productivity, and relationships with co-workers.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Good vocational functioning. Caregiver is fully employed with no problems at work. Alternatively, caregiver may not be seeking employment or chooses to be a full-time homemaker.
	1	Adequate vocational functioning. Caregiver is partially employed, employed significantly below her/his level of education/experience/training, or is having some work related problems.
	2	Fair vocational functioning. Caregiver is having significant work-related problems or is temporarily unemployed because of such difficulties.
	3	Significant difficulties with vocational functioning. Caregiver is chronically unemployed or obtains financial resources through activities which are illegal and/or potentially harmful to her/himself and her/his family members (prostitution, drug dealing, for example).

18. CAREGIVER'S MENTAL HEALTH - This item refers to mental health needs only (not substance abuse or dependence).

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No mental health problems. Caregiver has no signs of any notable mental health problems.
	1	Mild mental health problems. Caregiver may have mild problems with adjustment, may be somewhat depressed, withdrawn, irritable, or agitated. Or, caregiver may be receiving effective treatment.
	2	Moderate mental health problems. Caregiver has a diagnosable mental health problem that interferes with his/her functioning.
	3	Significant difficulties with mental health. Caregiver has a serious psychiatric disorder.

19. CAREGIVER'S SUBSTANCE ABUSE - This item includes problems with alcohol, illegal drugs and/or prescription drugs.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No problems with alcohol or drug use. Caregiver has no signs of any notable substance abuse problems.
	1	Mild problems associated with alcohol or drug use. Caregiver may have mild problems with work or home life that result from occasional use of alcohol or drugs. Or, caregiver may be receiving effective treatment.
	2	Moderate problems associated with alcohol or drug use. Caregiver has a diagnosable substance-related disorder that interferes with his/her life.
	3	Significant difficulties with alcohol or drug dependence. Caregiver is currently addicted to either alcohol or drugs or both.

20. CAREGIVER'S KNOWLEDGE – This item rates the level of knowledge the caregiver(s) has regarding their child's needs and strengths. This item is perhaps the one most sensitive to issues of cultural competence. We recommend thinking of this item in terms of whether making additional information available to the caregiver(s) would help them in being more effective in working with their child.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver is knowledgeable about the child's needs and strengths.
	1	Caregiver is generally knowledgeable about the child but may require additional information to improve their capacity to parent.
	2	Caregiver has a clear need for information to improve how knowledgeable they are about the child. Current lack of information is interfering with their ability to parent.
	3	Caregiver has knowledge problems that place the child at risk of significant negative outcomes.

21. CAREGIVER'S ORGANIZATION – This item rates the caregiver's ability to organize and manage their household in the face of parenting a child(ren) with significant needs. Parents who need help organizing themselves and/or their family would be rated a **2** or **3** deplorable housing conditions would be rated here.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver is well organized and efficient.
	1	Caregiver has minimal difficulties with organizing and maintaining household to support needed services. For example, they may be forgetful about appointments or occasionally fail to return provider's calls.
	2	Caregiver has moderate difficulty organizing and maintaining household to support needed services.
	3	Caregiver is unable to organize household to support needed services.

22. CAREGIVER'S SOCIAL RESOURCES – This item rates the presence of people in the caregiver's life who have demonstrated their ability and willingness to support the caregiver in times of need. Families often rely on social supports to help out in times of need. This item is used to rate the availability of these supports.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No evidence of a need in this area OR the caregiver has a significant social network that actively helps in times of need (e.g. child rearing).
	1	Caregiver has some social network that actively helps in times of need (e.g. child rearing).
	2	Caregiver has limited social network that may be able to help in times of need (e.g. child rearing).
	3	Caregiver has no social network that may be able to help in times of need (e.g. child rearing).

23. RESIDENTIAL STABILITY – This item rates the housing stability of the caregiver and should not reflect whether the child might be placed outside of the home. A **3** indicates problems of recent homelessness. A **2** indicates concerns about instability in the immediate future. A family having difficulty paying utilities, rent or a mortgage might be rated as a **1**.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Caregiver has stable housing for the foreseeable future.
	1	Caregiver has relatively stable housing but either has moved in the past three months or there are indications of housing problems that might force them to move in the next three months.
	2	Caregiver has moved multiple times in the past year. Housing is unstable.
	3	Caregiver has moved multiple times in the past year. Housing is unstable.

24. CAREGIVER'S INTELLECTUAL/DEVELOPMENTAL – This item rates the presence of intellectual disabilities and developmental disabilities among caregivers. A parent with limited cognitive capacity that challenges their ability to provide parenting would be rated here. Like the Intellectual/Developmental item for children and youth, rating on this item should be restricted to the identification of developmental disabilities (i.e., intellectual disabilities and other disabilities) and does not refer to a broad spectrum of developmental issues (e.g. aging is not rated here).

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Caregiver has no developmental needs.
	1	Caregiver has some developmental delays or intellectual disabilities but they do not currently interfere with parenting.
	2	Caregiver has developmental delays or mild intellectual disabilities that interfere with their capacity to parent.
	3	Caregiver has severe and pervasive developmental delays or profound intellectual disabilities that make it impossible for them to parent at this time.

25. CAREGIVER'S POSTTRAUMATIC REACTIONS - This item rates posttraumatic reactions faced by the caregiver(s), including emotional numbing and avoidance, nightmares and flashbacks that are related to their child's or their own traumatic experiences.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Caregiver has adjusted to traumatic experiences with notable posttraumatic stress reactions or there is no evidence that the caregiver has had any traumatic experiences.
	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 associated with their or their child's traumatic experiences. Caregiver may have nightmares or flashbacks of the trauma.
	3	Caregiver has significant adjustment difficulties associated with their or their child's traumatic experiences. Symptoms might include intrusive thoughts, hypervigilance, and constant anxiety.

A rating of a 2 or 3 requires further specification of these needs through the completion of the Trauma Experiences Module.

Caregiver’s Post Traumatic Reactions

The following section of the FAST focuses on the caregiver’s exposure to potentially traumatic/adverse experiences. Items in this domain are static indicators of historical events under the age of 18.

General Conversation Starters: Trauma is different for everyone. What it is for me could be different from what it is for you. Many people have experienced some degree of trauma in their lives and that is something I would like to talk to you about. If you don’t feel comfortable talking about this right now, that’s perfectly okay. You might find this difficult to talk about, so just let me know if and when you are ready to discuss.

A1. SEXUAL ABUSE - This item rates the caregiver’s experiences of sexual abuse under the age of 18.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	This level of rating indicates that there is no evidence of any trauma of this type.
	1	This level of rating indicates that a single incident of this type of trauma occurred or suspicion exists that this type of trauma.
	2	Caregiver has experienced one or a couple of incidents of sexual abuse that were not chronic or severe. This might include an individual who has experienced molestation without penetration on a single occasion.
	3	Caregiver has experienced severe or chronic sexual abuse with multiple episodes or lasting over an extended period of time. This abuse may have involved penetration, multiple perpetrators, and/or associated physical injury.

A2. PHYSICAL ABUSE - This item rates the caregiver’s experiences of physical abuse under the age of 18.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Caregiver has experienced one episode of physical abuse or there is a suspicion that the individual has experienced physical abuse but no confirming evidence.
	2	Caregiver has experienced a moderate level of physical abuse and/or repeated forms of physical punishment (e.g. hitting, punching).
	3	Caregiver has experienced severe and repeated physical abuse that causes sufficient physical harm to necessitate hospital treatment.

A3. EMOTIONAL ABUSE – This item rates the degree of severity of emotional abuse, including verbal and nonverbal forms experienced by the caregiver under the age of 18. Emotional abuse refers to any kind of abuse that is emotional rather than physical in nature. It can include anything from verbal abuse and constant criticism to more subtle tactics, such as repeated disapproval or even the refusal to ever be pleased.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Caregiver has experienced mild emotional abuse. For instance, caregiver may experience some insults or is occasionally referred to in a derogatory manner.
	2	Caregiver has experienced moderate degree of emotional abuse. For instance, caregiver may have been consistently denied emotional attention, insulted or humiliated on an ongoing basis, or intentionally isolated from others.
	3	Caregiver has experienced significant or severe emotional abuse over an extended period of time (at least one year). For instance, the individual was completely ignored by his/her caregivers during their childhood, or threatened / terrorized by others.

A4. MEDICAL TRAUMA – This item rates the severity of medical trauma experienced by the caregiver under the age of 18. Not all medical procedures are experienced as traumatic. Medical trauma results when a medical experience is perceived by the child as mentally or emotionally overwhelming. Potential medical traumas include but are not limited to the following examples: the onset of a life threatening illness; sudden painful medical events; chronic medical conditions resulting from an injury or illness or another type of traumatic event.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Caregiver has had a medical experience that was mildly overwhelming for him/her. Examples include events that were acute in nature and did not result in ongoing medical needs and associated distress such as minor surgery, stitches, or a bone setting.
	2	Caregiver has had a medical experience that was perceived as moderately emotionally or mentally overwhelming. Such events might include acute injuries and moderately invasive medical procedures such as major surgery that required only short term hospitalization.
	3	Caregiver has had a medical experience that was perceived as extremely emotionally or mentally overwhelming. The event itself may have been life threatening and may have resulted in chronic health problems that alter the caregiver’s physical functioning.

A5. NATURAL/MAN-MADE DISASTERS – This item rates the caregiver’s experiences with natural or man-made disasters under the age of 18.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Caregiver 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 fires, floods or man-made disasters, including car accidents, plane crashes, or bombings.
	2	Caregiver has been directly exposed to a disaster or witnessed the impact of a disaster on a family or friend. For instance, as a child, the caregiver may have observed a close family member who was injured in a car accident or fire, or watch his neighbor’s house burn down.
	3	Caregiver has been directly exposed to multiple and severe natural or man-made disasters and/or 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).

A6. WITNESS TO FAMILY VIOLENCE – This item rates the caregiver’s experiences as a witness to family violence under the age of 18.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Caregiver has witnessed one episode of family violence.
	2	Caregiver has witnessed repeated episodes of family violence but no significant injuries (i.e. requiring emergency medical attention) have been witnessed.
	3	Caregiver has witnessed repeated and severe episodes of family violence. Significant injuries have occurred and been witnessed by the child as a direct result of the violence.

A7. WITNESS/VICTIM – CRIMINAL ACTS - This item rates the caregiver’s experiences as a witness to or victim of significant criminal acts under the age of 18.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Caregiver has been a witness of significant criminal activity.
	2	Caregiver had been a direct victim of criminal activity or witnessed the victimization of a family member or friend.
	3	Caregiver has been a victim of criminal activity that was life-threatening or caused significant physical harm OR youth witnessed the death of a loved one.

A8. WITNESS/VICTIM – COMMUNITY VIOLENCE – This item rates the child’s experiences as a witness to or victim of community violence under the age of 18.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Child has witnessed occasional fighting or other forms of violence in the community. Child has not been directly impacted by the community violence (i.e. violence not directed at self, family or friends) and exposure has been limited.
	2	Child has witnessed multiple instances of community violence and/or the significant injury of others in her community; has had friends/family members injured as a result of violence in the community; or is the direct victim of violence that was not life threatening.
	3	Child has witnessed or experienced severe and repeated instances of community violence; the death of another person in her community as a result of violence; is the direct victim of violence 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).

A9. NEGLECT – This item rates the degree of severity of neglect experienced by the caregiver under the age of 18.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Caregiver has experienced minor or occasional neglect. During their childhood, the caregiver may have been left at home alone with no adult supervision or there may have been occasional failure to provide adequate supervision.
	2	Caregiver has experienced a moderate level of neglect. This may include occasional unintended failure to provide adequate food, shelter, or clothing, which resulted in corrective action.
	3	Caregiver has experienced a severe level of neglect during their childhood, including multiple and/or prolonged absences by adults without minimal supervision and failure to provide basic necessities of life on a regular basis.

A10. DISRUPTIONS IN CAREGIVING/ATTACHMENT LOSSES – This item rates the extent to which the caregiver has been exposed to disruptions in caregiving involving separation from primary attachment figure(s) and/or attachment losses. Caregivers who have had placement changes including stays in foster care, residential treatment facilities or juvenile settings can be rated here. Short term hospital or brief juvenile detention stays during which their caregiver remained the same would not be rated on this item.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No evidence.
	1	Caregiver may have experienced one disruption in caregiving but was placed with a familiar alternative caregiver, such as a relative (i.e. child shifted from care of biological mother to paternal grandmother). Caregiver may or may not have had ongoing contact with primary attachment figure(s) during this disruption. Shift in caregiving may be temporary or permanent.
	2	Caregiver has experienced 2 or more disruptions in caregiving with known alternative caregivers, or the child has had at least one disruption involving placement with an unknown caregiver. Caregiver’s who have been placed in foster or out-of-home care such as residential treatment facilities would be rated here.
	3	Caregiver’s has experienced multiple/repeated placement changes (i.e. 3 or more placements with a known caregiver or 2 or more with an unknown caregiver) resulting in caregiving disruptions in a way that has disrupted various domains of a child’s life (i.e. loss of community, school placement, peer group). Examples would include a child in several short-term unknown placements (i.e. moved from emergency foster care to additional foster care placement and/or multiple transitions in and out of the family-of-origin (i.e. several cycles of removal and reunification).

A11. SYSTEM-INDUCED TRAUMA – This item rates the caregiver’s experiences of trauma to system involvement. This could include experiences around traumatic removal from home, trauma experienced in out-of-home placements, and multiple placements in a short period of time. It could also include repeated, insensitive, or humiliating interviews or evaluations, unnecessary ruptures of family, extended family, and community relationships, confrontations with abusers, and court testimony.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	There is no evidence that the caregiver has had any experiences of trauma related to involvement in the system.
	1	The caregiver has had at least one experience that was difficult for the caregiver or there is a suspicion that the caregiver has experienced a traumatic event due to their involvement with the system.
	2	The caregiver has had repeated and severe traumatic experiences due to involvement in the system.
	3	The caregiver has had repeated and severe traumatic experiences due to involvement in the system that have caused significant physical or emotional harm requiring hospital treatment.

III. YOUTH'S STATUS

In your family, you have at least one person under the age of 21. The following section is used to describe EACH of these family members individually. Again use the scoring sheet provided to describe each youth separately.

26. RELATIONSHIP WITH BIOLOGICAL MOTHER - This item refers to the youth's relationship with his/her birth mother only.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Adaptive relationship. Youth has a generally positive relationship with biological mother. The youth appears to have formed a secure attachment, and can turn to mother for security, comfort or guidance.
	1	Mostly adaptive relationship. Youth has a somewhat positive relationship with biological mother. The youth appears to have mild attachment problems that interfere with his/her ability to turn to mother for security, comfort, or guidance.
	2	Limited adaptive relationship. Youth has a somewhat negative relationship with biological mother. The youth appears to have moderate attachment problems that interfere with his/her ability to turn to mother for security, comfort, or guidance.
	3	Significant difficulties with relationship. Youth has no ongoing relationship with his/her biological mother. The youth appears to have severe attachment problems.

27. RELATIONSHIP WITH BIOLOGICAL FATHER - This item refers to the youth's relationship with his/her birth father only.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Adaptive relationship. Youth has a generally positive relationship with biological father. The youth appears to have formed a secure attachment, and can turn to father for security, comfort or guidance.
	1	Mostly adaptive relationship. Youth has a somewhat positive relationship with biological father. The youth appears to have mild attachment problems that interfere with his/her ability to turn to father for security, comfort, or guidance.
	2	Limited adaptive relationship. Youth has a somewhat negative relationship with biological father. The youth appears to have moderate attachment problems that interfere with his/her ability to turn to father for security, comfort, or guidance.
	3	Significant difficulties with relationship. Youth has no ongoing relationship with his/her biological father. The youth appears to have severe attachment problems.

28. RELATIONSHIP WITH PRIMARY CAREGIVER (if not biological mother or father) -
 This item refers to the youth relationship with whomever is his/her primary caregiver at the moment. This item is not applicable (N/A) for youth in congregate care environments.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Adaptive relationship. Youth has a generally positive relationship with primary caregiver. The youth appears to have formed a secure attachment, and can turn to primary caregiver for security, comfort or guidance.
	1	Mostly adaptive relationship. Youth has a somewhat positive relationship with primary caregiver. The youth appears to have mild attachment problems that interfere with his/her ability to turn to primary caregiver for security, comfort, or guidance.
	2	Limited adaptive relationship. Youth has a somewhat negative relationship with primary caregiver. The youth appears to have moderate attachment problems that interfere with his/her ability to turn to primary caregiver for security, comfort, or guidance.
	3	Significant difficulties with relationship. Youth has no ongoing relationship with his/her primary caregiver. The youth appears to have severe attachment problems.

29. RELATIONSHIPS WITH OTHER ADULT FAMILY MEMBERS - This item refers to the youth's involvement with adult family members who do not have primary caregiving responsibilities for the youth.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Adaptive relationships. Youth is able to have predominately positive relationships with other adult family members and is able to participate in conflict resolution with them.
	1	Mostly adaptive relationships. Youth is able to have generally positive relationships with other adult family members. At times, conflicts may occur and linger between them but eventually are resolved.
	2	Limited adaptive relationships. Youth is only able to have peripheral relationships with other adult family members or the relationships are strained.
	3	Significant challenges with relationships. Adult family members are available emotionally and practically, but the youth is unable to have relationships with them.

30. RELATIONSHIP WITH SIBLINGS - This item refers to the youth's relationship with brothers and sisters including half-siblings, step-siblings, and foster siblings.		
Conversation Starters:		
Notes:	Ratings	Anchor Definitions
	0	Adaptive relationships. Youth is able to have predominately positive relationships with siblings and is able to participate in conflict resolution with them.
	1	Mostly adaptive relationships. Youth is able to have generally relationships with siblings. At times, conflicts may occur and linger between them but eventually are resolved.
	2	Limited adaptive relationships. Youth is only able to have peripheral relationships with siblings or the relationships are strained.
	3	Significant challenges with relationships. Siblings are available emotionally and practically but the youth is unable to have relationships with them.

31. PHYSICAL/MEDICAL - This item rates the child's current physical and medical status. This item is also used to identify any physical limitations and could include chronic conditions such as limitations in vision, hearing or difficulties with fine or gross motor. This also includes illnesses such as diabetes, asthma, cancer, etc.... Most transient, treatable conditions would be rated as a 1. Most chronic conditions (e.g. diabetes, severe asthma, HIV) would be rated as a 2. The rating of 3 is reserved for life-threatening medical conditions or severe physical limitations.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Good health. Youth is generally good physical health.
	1	Adequate health. Youth gets sick more often than peers, but the health problems do not interfere with his/her general functioning.
	2	Fair health. Youth has some health problems that interfere with his/her functioning.
	3	Significant health challenges. Youth has significant health problems that may be chronic or life threatening.

32. MENTAL HEALTH STATUS - This item is used to describe the youth's current mental health.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No mental health challenges. Youth has no signs of any notable mental health problems.
	1	Mild mental health challenges. Youth may have mild problems with adjustment, may be somewhat depressed, withdrawn, irritable, or agitated.
	2	Moderate mental health challenges. Youth has a diagnosable mental health problem that interferes with his/her functioning.
	3	Significant challenges with mental health. Youth has a serious psychiatric disorder.

33. INTELLECTUAL/DEVELOPMENTAL - This item rates the presence of intellectual disabilities or developmental disabilities. All developmental disabilities occur on a continuum; a child with autism may be rated a 0, 1, 2 or 3 depending on the significance of the disability and the impairment.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	No evidence of developmental problems or intellectual disabilities.
	1	Documented delay, learning disability, or documented borderline intellectual disability, (i.e. IQ 70-85).
	2	Evidence of a pervasive developmental disorder including autism, Tourette's syndrome, Down syndrome, or other significant developmental delay or child has mild intellectual disability (IQ 50-69).
	3	Youth has moderate or severe developmental delays or profound intellectual disabilities.

34. SELF-REGULATION SKILLS - This item refers to the youth's ability to self regulate him/herself and his/her bodily functions. Self-regulation skills change developmentally so this item should be rated within the context of developmental appropriate skills.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Good. Youth has mature self-regulation. Youth is able to self-soothe, function independently and effectively structure free-time.
	1	Adequate. Youth is generally able to self regulate in age-appropriate way.
	2	Fair. Youth has some difficulties with self regulation.
	3	Significant difficulties with self-regulation. Youth is unable to manage him/herself in a developmentally appropriate way.

35. SOCIAL FUNCTIONING - This item rates the child's social skills and relationship functioning. This includes age appropriate behavior and the ability to make and maintain relationships during the past 30 days. A child with friends may be struggling to get along with them currently.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Youth has positive social relationships.
	1	Youth is having some minor problems in social relationships.
	2	Youth is having some moderate problems with her social relationships.
	3	Youth is experiencing severe disruptions in her social relationships.

36. SCHOOL - This item rates how the child is functioning within a school setting. For the school items, if the child is receiving special education services, rate the child's performance and behavior relative to their peer group. If it is planned for the child to be mainstreamed, rate the child's school functioning relative to that peer group.

Conversation Starters:

Notes:	Ratings	Anchor Definitions
	0	Youth is performing well in school.
	1	Youth is performing adequately in school, although some problems may exist.
	2	Youth is experiencing moderate problems with school attendance, behavior, and/or achievement.
	3	Youth is experiencing severe problems in school with school attendance, behavior, and/or achievement.