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# Module 3E: Session Handouts

## *Adverse Childhood Experiences (ACEs)*

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# Pre- and Post-Assessment

Module 3E: *Adverse Childhood Experiences (ACEs)*

Date: \_\_\_\_\_

Trainer's Name: \_\_\_\_\_ Participant's Name: \_\_\_\_\_

Job Title:    Teacher                      Assistant Teacher                      Director                      Other: \_\_\_\_\_  
(circle one)

Ages you work with:    infants                      toddler: ones                      toddler: twos                      preschool                      pre-k  
(circle all that apply)    6 weeks to 12 months                      13 to 23 months                      24 to 35 months                      3 to 4 years                      4 to 5 years

**Instructions:** Think about the following statements in relation to what you understand BEFORE and AFTER the training. Please check the box that best describes how you would rate your level of knowledge and skills based on the training topic: 1 (lowest) to 5 (highest).

STATEMENTS	BEFORE THE TRAINING						AFTER THE TRAINING					
	1	2	3	4	5	N/A	1	2	3	4	5	N/A
Brain development, the findings of the ACEs study, and evidence-based prevention and intervention strategies												
Applying scientific findings about ACEs and toxic stress to development ages 0-3, and analyze impacts on behaviors and developmental milestones												
Connecting information presented to their own experiences												
Applying evidence-based strategies for creating safe, stable, nurturing relationships and environments												

## Vignettes

### VIGNETTE #1

Marcus, an 18-month-old in your center, was doing well prior to the COVID-19 crisis. He was curious, engaged, and was beginning to use words. When the COVID-19 crisis began, his father was laid off. His mother, who works in a grocery store, worked long hours during the peak of the crisis. Marcus is their first child. Marcus was withdrawn from care for 5 weeks due to capacity restrictions at the childcare center. Now that he has returned, Marcus seems more distant and less engaged. He has taken to holding a stuffed bear all the time and cries inconsolably when it is taken away. When his mother comes to pick him up, she seems withdrawn, less energetic and talkative than usual. She shares very little when asked how things are going. Marcus's father, who occasionally handled pick-ups and drop-offs before the crisis, has not been back since.

### VIGNETTE #2

Tanya is six months old. She is new to the center. Her primary caregiver at home and main contact with childcare providers is her grandmother, who raised three children of her own. Little else is known about the family or involvement of the parents. Tanya's grandmother reports that Tanya is easy to manage at home. However, at the center, Tanya resists engaging with providers, avoiding eye contact and crawling away or turning over when she can. She is often fussy and alternates between clinging to adults and arching her back or pushing away. She gets upset with no apparent cause and settles down only when she has exhausted herself.

### VIGNETTE #3

Daniel has been in care at your center from 18 months to present. He is now 36 months old. The family is well known to the center – Daniel's sisters, Deanna, now 7 years old, and Jessica, now 4, both passed through the center as well. When Daniel was 1 year, his parents separated and his mother began seeing someone new. Deanna and Jessica were both engaged and generally happy, but Daniel's temperament is different from his sisters'. He throws toys, has tantrums, and pushes other children. Being disciplined seems to make his behavior worse. He sometimes sits in the corner for extended periods and refuses all interactions. On multiple occasions he has arrived at the center with bruises, and is sometimes especially resistant to being touched. In the last month, he has wet himself twice. He is close to being expelled from care.

### VIGNETTE #4

Grace, 30 months, is in the care of a foster family, the Evans. They have had other foster children in care at the center, and are friendly and engaged with center staff. They have divulged that Grace "had it really rough" before coming into their care, telling center staff that "she's been through some things." They are aware of the ACE Study and report that she has an ACE score of 4 or 5. Beyond this, they have not provided any details, to protect Grace's privacy. Grace has been at care in the center for several months and has not had any behavior problems. She uses words, understands and follows instructions, and is able to calm down when she gets upset. She is a little bit shy with other children, but plays, shares, and takes turns once she becomes comfortable.

**VIGNETTE #5**

Your childcare center has been facing some new challenges since the COVID-19 crisis. Parents who lost their jobs have been unable to afford to keep children in care, reducing the center's income. The center director applied for federal assistance but was denied based on availability of funds. The director has had to cut staff, increase hours, and reduce pay. Some staff have left to seek other opportunities or manage their own family challenges. In your area, many people lost jobs. Remaining staff at your center are now responsible for a greater number of children. They are using more energy to manage increased stress outside of work. Staff seem to be more reactive with the children and each other. Older children have become more likely to disagree with each other, less willing to share, and more demanding of staff attention. Younger children who previously developed motor and language skills at a normal pace seem to have slowed in their progress.

## Safety and Connection: Concepts

<p><b>Core Protective Systems</b></p>	<ol style="list-style-type: none"> <li>1. Individual capabilities</li> <li>2. Caring and competent relationships</li> <li>3. Connected communities</li> </ol>
<p><b>Safe, Stable, Nurturing Relationships and Environments</b></p>	<ul style="list-style-type: none"> <li>• <b>Safe:</b> Free from fear, secure from physical and psychological harm within social and physical environment</li> <li>• <b>Stable:</b> Predictability and consistency in child’s social, emotional, and physical environment</li> <li>• <b>Nurturing:</b> Children’s physical, emotional, and developmental needs are sensitively and consistently met</li> </ul>
<p><b>Trauma-Sensitive Approach</b></p>	<ul style="list-style-type: none"> <li>• <b>Realizes</b> the widespread impact of trauma and understands potential paths for recovery</li> <li>• <b>Recognizes</b> the signs and symptoms of trauma in clients, families, staff, and others</li> <li>• <b>Responds</b> by fully integrating knowledge about trauma into policies, procedures, and practices</li> <li>• <b>Resists</b> re-traumatization</li> <li>• <i>Especially important</i> when disciplining, correcting, or addressing conflict or tension</li> </ul>
<p><b>Vicious and Virtuous Cycles</b></p>	<ul style="list-style-type: none"> <li>• Adaptations to ACEs can collide with social expectations</li> <li>• In a <b>vicious cycle:</b> ACEs lead to adaptations to adversity, adaptations lead to social consequence and potentially re-traumatization</li> <li>• In a <b>virtuous cycle:</b> ACEs lead to adaptations, adaptations are recognized by social systems prepared to provide safety and connection and build resilience</li> </ul>

## Safety and Connection: Strategies

**Create safety** in the moment by recognizing behaviors that may arise from trauma experiences and offering trauma-informed support.

- Move the child to a calm environment, or a corner of the room with blankets and comfort objects.
- Try to identify circumstances the child perceives as threatening, and look for alternatives.
- Work to prevent exposure to harm and maltreatment both in and out of the home.
- Look for what behavior is communicating, rather than whether it is good or bad.

**Build a connected relationship** by getting to know what each child struggles with, what calms them down, and how they learn.

- Transition care providers over time, if possible. Encourage care providers to share information that will help with relationship building.
- Get to know parents and other family members. Ask them about the child's preferences, behaviors, and characteristics.
- Be physically and emotionally available through challenging feelings and behaviors.
- Verbalize sympathy.

**Maintain stability** in daily activities through structure, routines, familiar objects, and the presence of reliable adults.

- Keep daily routines from one day to the next.
- Work with parents and families to establish and maintain routines at home.
- Allow comfort objects, like a plush toy or blanket.
- Show sensitivity to children's cues and help them learn that they can rely on you.

**Practice "power-with" strategies** with both child and parents.

- Approach families, staff, and children with respect.
- Minimize power and control. Focus on collaboration, for example by offering choices.
- Recognize and appreciate sources of strength, connection, and confidence for both families and children.
- Follow children's lead during play.

<p><b>Nurture executive skills</b> to create a foundation for learning and resilience.</p>	<ul style="list-style-type: none"> <li>• Learn how different activities nurture development of working memory, inhibitory control, and other executive skills.</li> <li>• Use play to help children strengthen limited skills.</li> <li>• Repeat, repeat, repeat! Children learn through repetition.</li> <li>• Teach parents games that build executive function.</li> </ul>
<p><b>Foster post-traumatic growth</b> of skills, qualities, and understanding.</p>	<ul style="list-style-type: none"> <li>• Know that children and adults can continue to grow and heal after trauma, when they are ready.</li> <li>• Help children tell the story of what they have experienced, to help them understand and cope. Assure them that trauma is not their fault and does not mean they are bad or unloved.</li> <li>• Connect experiences to feelings, and help children communicate feelings appropriately.</li> </ul>
<p><b>Support staff</b> individually and as a team, personally and professionally.</p>	<ul style="list-style-type: none"> <li>• Encourage teamwork and peer support among staff when caring for children with trauma or ACEs. Create space and structure for teamwork.</li> <li>• Help staff manage their own stress through policies that prioritize staff well-being and connection to local resources.</li> <li>• Offer professional development to teach skills that match staff preferences and needs.</li> <li>• Ensure that staff are supported when voicing concerns about safety or well-being of children.</li> </ul>
<p><b>Partner with other resources and providers</b> in your community.</p>	<ul style="list-style-type: none"> <li>• Consider enlisting a staff member to compile a list of community resources for basic needs, medical care, and mental and behavioral health.</li> <li>• Connect parents to peer groups or community activities to nurture support systems.</li> <li>• Host family days or evenings, and invite partners to come introduce the services they offer.</li> </ul>

# Executive Function Activities for 6- to 18-month-olds

These activities encourage infants to focus attention, use working memory, and practice basic self-control skills. During this stage of development, infants are actively developing their core executive function and self-regulation (EF/SR) skills. Supportive, responsive interactions with adults are the foundation for the healthy development of these skills. However, particular activities can strengthen key components of EF/SR.

In using these activities, adults should attend to the infant's interests and select activities that are enjoyable, while also allowing the infant to determine how long to play.



## Lap games for younger infants

Generations of families have engaged babies in games while holding them in the lap. Different games practice different skills, but all are predictable and include some basic rules that guide adult and child behavior. Repetition helps infants remember and manage their own behavior to fit the game's rules.

■ **Peekaboo** — Hide-and-find games like this exercise working memory, because they challenge the baby to remember who is hiding, and they also practice basic self-control skills as, in some variations, the baby waits for the adult

to reveal him or herself. In other versions, the baby controls the timing of the reveal; this provides important practice regulating the tension around an expected surprise.

■ **Trot, Trot to Boston; This is the Way the Farmer Rides; Pat-a-Cake** — Predictable rhymes that end with a stimulating yet expected surprise are well-loved. Infants exercise working memory as they develop familiarity with the rhyme and practice anticipating a surprise, inhibiting their anticipatory reactions while managing high levels of stimulation.

## Hiding games

Hiding games are a great way to challenge working memory.

■ **Hide a toy under a cloth** and encourage the infant to look for it. Once infants can find the toy quickly, hide it, show the child that you have moved it, and encourage the child to find it. Make more moves to increase the challenge. As the child remembers what was there and mentally tracks the move, he or she exercises working memory.

■ **Older infants may enjoy hiding themselves** and listening to you search loudly for them while they track your location mentally.

■ **You can also hide an object** without showing an older infant where it is and then allow the infant to search for it. He or she will practice keeping track of searched locations.

■ **Another challenging version** of these games involves putting a set of cups on a turntable (or "lazy Susan"), hiding an object under a cup, then spinning the turntable. Hiding more than one object can also increase the challenge.



## Imitation or copying games

Infants love to copy adults. When they imitate, they have to keep track of your actions, remember them, wait their turn, and then recall what you did. In doing so, they practice attention, working memory, and self-control.

■ **These games have a variety of forms**, from taking turns making simple gestures (e.g., waving) to organizing toys in certain ways and asking children to copy you (e.g., placing toy

animals in a barnyard) or building simple buildings by putting one block on top of another and perhaps knocking them down to rebuild.

■ **As infants' skills improve**, make the patterns they copy more complicated.

■ **Adults can also demonstrate** ways to play with toys, like making a toy horse gallop or rocking a baby doll. This introduces the concept of using toys as symbols for real objects.

## Simple role play

Older children in this age range enjoy doing the tasks they see you do.

■ **Take turns with any activity** that interests the child, such as sweeping the floor, picking up toys, dusting, etc. These games introduce the basics of imaginary play and practice working memory, self-control, and selective attention, because the toddler must hold the

activity in mind to complete it while avoiding distractions and inhibiting the impulse to do other things.

■ **Children can remember and play out** more complicated roles as they get older. They will also begin to initiate activities. Providing the necessary materials (e.g., a broom, a toy box, a dustcloth) can help children enjoy and sustain this type of play.

## Fingerplays

Songs or chants with simple hand motions are a lot of fun for infants, and develop self-control and working memory as well as language. Infants can learn to copy the movements to a song and, with practice, will remember the sequence. *Eensy Weensy Spider*; *Where is Thumbkin?*; and *Open, Shut Them* are examples, but these fingerplays can be found in many languages and cultures.



## Conversations

Simply talking with an infant is a wonderful way to build attention, working memory, and self-control.

■ **With younger infants**, start by following the infant's attention and naming aloud the things holding his or her attention. The infant will likely maintain his or her attention a little longer, practicing actively focusing and sustaining attention.

■ **As infants get older**, pointing out and

talking about interesting objects or events can help them learn to focus their attention on something the adult has identified. As babies learn language, they also develop their memory of what is said, eventually mapping words to objects and actions.

■ **Conversations in any language** besides English are also helpful. It has been found that bilingual children of many ages have better executive function skills than monolingual children, so experience using an additional language is an important skill.

## Resources

### Songs and games

- [www.piercecountylibrary.org/files/library/wigglesticklesall.pdf](http://www.piercecountylibrary.org/files/library/wigglesticklesall.pdf)
- [www.turben.com/media-library/8702756\\_infanttoddlerplaybook.pdf](http://www.turben.com/media-library/8702756_infanttoddlerplaybook.pdf)
- [www.zerotothree.org/child-development/grandparents/play-o-12-mths-final.pdf](http://www.zerotothree.org/child-development/grandparents/play-o-12-mths-final.pdf)

# Executive Function Activities for 18- to 36-month-olds

During this stage of development, children are rapidly expanding their language skills. Language plays an important role in the development of executive function and self-regulation (EF/SR), as it helps children identify their thoughts and actions, reflect on them, and make plans that they hold in mind and use. Language also helps children understand and follow increasingly complex rules—both those that regulate behavior and those that apply to simple games. Additionally, bilingualism is associated with better EF/SR, so parents who are fluent in more than one language should use those languages with their children.



## Active games

At this age, toddlers are actively developing many important physical skills, and they love physical challenges. The following activities require toddlers to focus and sustain their attention on a goal, inhibit unnecessary and ineffective actions, and try things in new ways if a first attempt fails. They may not always succeed, but the practice is very important. This is a learning process. Many of these activities will require frequent reminders from adult organizers, and they may not last very long!

- **Provide many materials and opportunities** to try new skills, such as throwing and catching balls, walking a balance beam, running up and down an incline, jumping, etc. Set up simple rules to follow for added working memory and inhibition challenges—for example, take turns running to a “finish line” and back.

- **Older toddlers can enjoy simple imitation games**, such as *Follow the Leader*, or song games like *Punchinella* or *Follow, Follow* (“Follow, follow, follow [child’s name], follow, follow, follow [child’s name]”—all children imitate [child]). These are great tests of working memory as well as attention and inhibition.

- **Games that require active inhibition** can be fun, too, like *freeze dance (musical statues)*, although don’t expect children to “freeze” without a few reminders. Also effective are

song games that require children to start and stop, or slow down and speed up, such as *Jack in the Box*; *Popcorn*; *Ring Around the Rosie*; or *Motorboat, Motorboat*.

- **Song games with many movements** are also fun. Examples include *The Hokey Pokey*; *Teddy Bear*; *I’m a Little Teapot*; or *Head, Shoulders, Knees, and Toes*. These require children to attend to the song’s words and hold them in working memory, using the song to guide their actions.

- **Fingerplays, or songs and rhymes with hand gestures** to match, continue to be popular with children this age, similarly challenging children’s attention, working memory, and inhibitory control.



## Conversation and storytelling

As children develop more spoken language skills, they can begin to engage actively in conversation with adults and tell simple stories.

■ **Simply watching and narrating their play** can be a great way to help very young children understand how language can describe their actions. As children get older, questions can be added, such as “What will you do next?” or “I see you want to put the ball inside the jar. Is there another way to do that?” These comments help children pause to reflect on what they are trying to do, how what they have tried has worked, and how to plan their next move.

■ **Telling stories about shared events** can be a great way to reflect on these experiences. The

experience must be held in working memory while the child considers the order in which things happened, why things happened the way they did, and what the experience meant. These stories can also be written or drawn into simple books and revisited.

■ **Talking about feelings** is also important, either by labeling children’s feelings as they are noticed (“It looks like you are really angry right now”) or by telling the story of a time a child became upset. By giving children language to reflect on their feelings, these conversations can support the development of emotional regulation, which is essential for engaging executive function.

## Matching/sorting games

Children this age are able to play simple matching and sorting games, which require children to understand the rule that organizes the activity (sorting by shape, color, size, etc.), hold the rule in mind, and follow it.

■ **Ask children to play a sorting game** in which you take turns sorting objects by size, shape, or color.

■ **Engage older toddlers in a silly sorting game**, such as putting small shapes in a big bucket and big shapes in a small bucket.

Children tend to put like with like, so a change is challenging, requiring them to inhibit the expected action and engage their selective attention and working memory.

■ **As they get older, toddlers also start to enjoy simple puzzles**, which require attention to shapes and colors. Adults can ask children to think about what shape or color they need, where they might put a certain piece, or where they might put the piece if it doesn’t fit, thereby exercising the child’s reflection and planning skills.

## Imaginary play

Toddlers are beginning to develop the capacity for simple imaginary play. Often, toddlers imitate adult actions using objects that they have available (such as sweeping with a broom or pretending to cook with a pot). When they reach this age, these actions are not simply imitative, but can be sustained and show signs of simple imaginary play plots. For example, after “cooking” in the pot, the child will put the pot on the table and pretend to eat.

■ **Ask children questions** about what they are doing. Narrate the things you see happening.

■ **Play along with the child**, and let the child direct the play. Give the child a chance to tell you what role you should play and how you should do it. Regulating the behavior of others is an important way that children develop their own self-regulation skills.

■ **Provide a variety** of familiar household objects, toys, and clothing items to encourage children’s imaginary play.

## Resources

### Music

■ [fun.familyeducation.com/toddler/music/37371.html](http://fun.familyeducation.com/toddler/music/37371.html)

### Other activities

■ [www.zerotothree.org/child-development/grandparents/play-12-24-final.pdf](http://www.zerotothree.org/child-development/grandparents/play-12-24-final.pdf)

■ [www.zerotothree.org/child-development/grandparents/play-24-36-final.pdf](http://www.zerotothree.org/child-development/grandparents/play-24-36-final.pdf)

### Pretend play suggestions

■ [www.mindinthemaking.org/wp-content/uploads/2014/10/PFL-playing-with-household-items.pdf](http://www.mindinthemaking.org/wp-content/uploads/2014/10/PFL-playing-with-household-items.pdf)