### Developmental trends

The following information needs to be understood in the context of the overview statement on child development:

#### Between 3-4 years
- Communicates freely with family members and familiar others
- Seeks comfort, and reassurance from familiar family and carers, and is able to be soothed by them
- Has developing capacity to self soothe when distressed
- Understands the cause of feelings and can label them
- Extends the circle of special adults eg. to grandparents, baby-sitter
- Needs adult help to negotiate conflict
- Is starting to manage emotions
- Is starting to play with other children and share
- Has real friendships with other children
- Is becoming more coordinated at running, climbing, and other large-muscle play
- Can walk up steps, throw and catch a large ball using two hands and body
- Use play tools and may be able to ride a tricycle
- Holds crayons with fingers, not fists
- Dresses and undresses without much help
- Communicates well in simple sentences and may understand about 1000 words
- Pronunciation has improved, likes to talk about own interests
- Fine motor skill increases, can mark with crayons, turn pages in a book
- Day time toilet training often attained

#### Between 4-5 years
- Knows own name and age
- Is becoming more independent from family
- Needs structure, routine and limits to manage intense emotions
- Is asking lots of questions
- Is learning about differences between people
- Takes time making up his mind
- Is developing confidence in physical feats but can misjudge abilities
- Likes active play and exercise and needs at least 60 minutes of this per day
- Eye-hand coordination is becoming more practised and refined
- Cuts along the line with scissors/can draw people with at least four ‘parts’
- Shows a preference for being right-handed or left-handed
- Converses about topics and understands 2500 to 3000 words
- Loves silly jokes and ‘rude’ words
- Is curious about body and sexuality and role-plays at being grown-up
- May show pride in accomplishing tasks
- Conscience is starting to develop, child weighs risks and actions; “I would take it but my parents would find out”

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### Possible indicators of trauma

- Behavioural change
- Increased tension, irritability, reactivity and inability to relax
- Regression to behaviour of a younger child
- Uncharacteristic aggression
- Reduced eye contact
- Loss of focus, lack of concentration and inattentiveness
- Complains of bodily aches, pains or ill health with no explanation
- Loss of recently acquired skills (toiletting, eating, self-care)
- Enuresis, encopresis
- Reduced capacity to feel emotions - may appear 'numb', limp, apathetic
- Repeated retelling of traumatic event
- Loss of recently acquired language and vocabulary
- Loss of interest in activities
- Loss of energy and concentration at school
- Sudden intense masturbation
- Demonstration of adult sexual knowledge through inappropriate sexualised behaviour
- Genital pain, inflammation, bruising, bleeding or diagnosis of sexually transmitted disease
- Sexualised play with toys
- May verbally describe sexual abuse, pointing to body parts and telling about the 'game' they played
- Sexualised drawing

### Trauma impact

- Behavioural changes
- Hyperarousal, hypervigilance, hyperactivity
- Loss of toileting and eating skills
- Regression in recently acquired developmental gains
- Sleep disturbances, night terrors
- Enuresis and encopresis
- Delayed gross motor and visual-perceptual skills
- Fear of trauma recurring
- Mood and personality changes
- Loss of, or reduced capacity to attune with caregiver
- Loss of, or reduced capacity to manage emotional states or self soothe
- Increased need for control
- Fear of separation
- Loss of self-esteem and self confidence
- Confusion about trauma evident in play...magical explanations and unclear understanding of causes of bad events
- Vulnerable to anniversary reactions set off by seasonal reminders, holidays, and other events
- Memory of intrusive visual images from traumatic event may be demonstrated/recalled in words and play
- At the older end of this age range, children are more likely to have lasting, accurate verbal and pictorial memory for central events of trauma
- Speech, cognitive and auditory processing delays

### Parental/carer support following trauma

**Encourage parent(s)/carers to:**

- Seek, accept and increase support for themselves to manage their own shock and emotional responses
- Remain calm. Listen to and tolerate child’s retelling of event
- Respect child’s fears; give child time to cope with fears
- Protect child from re-exposure to frightening situations and reminders of trauma, including scary T.V. programs, movies, stories, and physical or locational reminders of trauma
- Accept and help the child to name strong feelings during brief conversations (the child cannot talk about these feelings or the experience for long)
- Expect and understand child’s regression while maintaining basic household rules
- Expect some difficult or uncharacteristic behaviour
- Seek information and advice about child’s developmental and educational progress
- Take time out to recharge