

***First Mile: Know Your Child / Know Your Self***

The Behavioral Topography Survey, a map of your child’s problem situations and problem behaviors, not only identifies targets for behavior management but also serves as a baseline against which to measure the success of the *Parent Child Journey* program. At the end of this ten-session program, I will remind you to redo the Behavioral Topography Survey and see how much progress you have made.

***Behavioral Topography Survey***

Name: \_\_\_\_\_ Date: \_\_\_\_\_ Rater: \_\_\_\_\_

**Circle best answer: 0, no problem; 1, little problem; 2, medium problem; 3, big problem**

***Problem Situations***

HOME

0	1	2	3	Getting ready to go in the morning
0	1	2	3	Transitioning into the car
0	1	2	3	Riding in the car
0	1	2	3	Arriving home
0	1	2	3	Transitioning out of the car
0	1	2	3	Mealtime (circle: before, during, after)
0	1	2	3	Playing with other children
0	1	2	3	While using electronic devices (which ones? _____)
0	1	2	3	When asked to stop using electronic devices
0	1	2	3	During unstructured free time
0	1	2	3	When visitors come over
0	1	2	3	When visiting others
0	1	2	3	In public places (which one(s)? _____)
0	1	2	3	With adult(s) (which one(s)? _____)
0	1	2	3	With sibling(s) (which one(s)? _____)
0	1	2	3	With babysitter(s) (which one(s)? _____)
0	1	2	3	Homework (circle: starting, during, finishing)
0	1	2	3	Doing chores (which one(s)? _____)
0	1	2	3	Getting ready for bed (washing, bathing, teeth-brushing, etc.)
0	1	2	3	Getting into bed
0	1	2	3	Falling asleep
0	1	2	3	Staying asleep
0	1	2	3	Other: _____
0	1	2	3	Other: _____

SCHOOL

0	1	2	3	Arriving at school
0	1	2	3	During class (Which one? _____ )
0	1	2	3	In school hallways / bathrooms
0	1	2	3	Recess at school
0	1	2	3	Lunch at school
0	1	2	3	School field trips
0	1	2	3	With adult (Name: _____ )
0	1	2	3	Pickup at school
0	1	2	3	School bus
0	1	2	3	Other: _____
0	1	2	3	Other: _____

COMMUNITY

0	1	2	3	Grocery store
0	1	2	3	Eating out
0	1	2	3	House of worship
0	1	2	3	Shopping
0	1	2	3	Neighborhood playground
0	1	2	3	Festivals
0	1	2	3	Outdoor events
0	1	2	3	Indoor events (concerts, movies, etc.)
0	1	2	3	Other: _____
0	1	2	3	Other: _____

**Problem Behaviors**

0	1	2	3	Actively defies / refuses to comply
0	1	2	3	Loses temper
0	1	2	3	Argues with adults
0	1	2	3	Deliberately annoys people
0	1	2	3	Blames others for his or her mistakes or misbehaviors
0	1	2	3	Is touchy or easily annoyed by others
0	1	2	3	Is angry or resentful
0	1	2	3	Is spiteful or vindictive
0	1	2	3	Bullies, threatens, or intimidates others
0	1	2	3	Initiates physical fights
0	1	2	3	Lies / "cons"
0	1	2	3	Skips school
0	1	2	3	Is physically cruel to people or animals
0	1	2	3	Has stolen items of nontrivial value
0	1	2	3	Deliberately destroys other's property

**Other problem behaviors and situations:**

0	1	2	3	_____
0	1	2	3	_____

## The Gander

As you go through the Gander, if you're not sure what something means, check out the Instruction Manual at [ParentChildJourney.com](http://ParentChildJourney.com).

### *The Gander*

Child's name: \_\_\_\_\_ Age: \_\_\_\_\_

Rater's name: \_\_\_\_\_ Date: \_\_\_\_\_

*Please circle the most appropriate number.*

### *Behavioral Style / Temperament*

#### Motor Activity level:

3	2	1	0	1	2	3
High activity			Average			Low activity

#### Impulsivity

3	2	1	0	1	2	3
Acts before thinking			Average			Thinks before acting

#### Attention Span

3	2	1	0	1	2	3
Short			Average			Long

#### Initial Reaction

3	2	1	0	1	2	3
Slow to Warm-up			Average			Quick to Warm-up

#### Adaptability

3	2	1	0	1	2	3
Very inflexible			Average			Very flexible

#### Intensity of Reaction

3	2	1	0	1	2	3
Dramatic			Average			Reserved

#### Usual Mood

3	2	1	0	1	2	3
Unpleasant, serious, tense			Neutral			Pleasant, joyful, relaxed

#### Regularity / Predictability

3	2	1	0	1	2	3
Low regularity, unpredictable			Average			High regularity, predictable

## Sensory Profile

### Hearing Speech

3	2	1	0	1	2	3
Tunes-in people talking		Average		Tunes out people talking		

### Hearing Noise

3	2	1	0	1	2	3
Oversensitive		<i>Sounds &amp; noises</i>		Undersensitive		

### Vision

3	2	1	0	1	2	3
Quick to notice		<i>Visual stimuli</i>		Slow to notice		

### Taste

3	2	1	0	1	2	3
Oversensitive		<i>Changes in foods, hidden tastes</i>		Undersensitive		

### Smell

3	2	1	0	1	2	3
Oversensitive		<i>Odors</i>		Undersensitive		

### Light Touch

3	2	1	0	1	2	3
Oversensitive		<i>Sensitive to light touch, tickling, clothing texture</i>		Undersensitive		

### Deep Touch

3	2	1	0	1	2	3
Avoids, dislikes		<i>Physically close contact</i>		Seeks, likes		

### Movement/Body Position in Space

3	2	1	0	1	2	3
Avoids		<i>Moving, spinning through space (swing, seesaw, rides, heights)</i>		Likes		

### Internal Body Awareness / Physical Symptoms

3	2	1	0	1	2	3
Over-reports		<i>Symptoms of illness, not feeling well</i>		Under-reports		

## Skills Profile

### Fine Motor

3                      2                      1                      0                      1                      2                      3  
Difficulty, avoids                      *Manipulating small objects*                      Ease, enjoys

### Handwriting

3                      2                      1                      0                      1                      2                      3  
Difficulty, avoids                      *Writing with crayons, pencils, markers*                      Ease, enjoys

### Gross Motor

3                      2                      1                      0                      1                      2                      3  
Difficulty, avoids                      *Running, jumping, climbing,  
playing sports / athletics, dancing*                      Ease, enjoys

### Speaking

3                      2                      1                      0                      1                      2                      3  
Difficulty                      *Putting thoughts into words*                      Ease

### Listening

3                      2                      1                      0                      1                      2                      3  
Difficulty                      *Understanding spoken communication*                      Ease

### Writing

3                      2                      1                      0                      1                      2                      3  
Difficulty                      *Putting thoughts onto paper*                      Ease

### Reading

3                      2                      1                      0                      1                      2                      3  
Delayed                      *Reading skills*                      Advanced

### Understanding Spatial Relations

3                      2                      1                      0                      1                      2                      3  
Poor                      *Understanding puzzles, shapes, block design, maps*                      Excellent

### Visual Arts

3                      2                      1                      0                      1                      2                      3  
Poor                      *Drawing, crafts, painting*                      Excellent

### Music

3                      2                      1                      0                      1                      2                      3  
Poor                      *Musical ability*                      Excellent

### Math

3                      2                      1                      0                      1                      2                      3  
Delayed                      *Math ability*                      Advanced

**Time Awareness**

3 \_\_\_\_\_ 2 \_\_\_\_\_ 1 \_\_\_\_\_ 0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3  
Difficulty, inaccuracy *Estimating, pacing* Ease, accuracy

**Planning, Organization, and Implementation**

3 \_\_\_\_\_ 2 \_\_\_\_\_ 1 \_\_\_\_\_ 0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3  
Difficulty *Planning ahead / strategizing / sequencing / preparing* Ease

**Social Skills**

3 \_\_\_\_\_ 2 \_\_\_\_\_ 1 \_\_\_\_\_ 0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3  
With difficulty, rejected *Makes friends* Easily, popular

**Problems with physical health**

3 \_\_\_\_\_ 2 \_\_\_\_\_ 1 \_\_\_\_\_ 0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3  
Severe *average* None

**Family, Environmental or Life Stresses**

3 \_\_\_\_\_ 2 \_\_\_\_\_ 1 \_\_\_\_\_ 0 \_\_\_\_\_ 1 \_\_\_\_\_ 2 \_\_\_\_\_ 3  
Severe *average* None

**Other Family, Environmental, or Life Stresses (experienced by child)**

***Circle best answer according to current impact:***

*0 = no problem; 1 = little; 2 = medium; 3 = big problem*

**FAMILY STRESSES**

0	1	2	3	Death of parent
0	1	2	3	Death of other family member
0	1	2	3	Death of pet
0	1	2	3	Substance abusing parent(s)
0	1	2	3	Physical or sexual abuse of family member
0	1	2	3	Mental or behavioral disorder of parent or sibling
0	1	2	3	Disability of parent or sibling
0	1	2	3	Physical illness of parent or sibling
0	1	2	3	Addition of a sibling
0	1	2	3	Physical separation from primary caregiver
0	1	2	3	Change in primary caregiver
0	1	2	3	Caregiver does not speak language of community
0	1	2	3	Marital discord
0	1	2	3	Separation / divorce
0	1	2	3	Parent dating
0	1	2	3	Remarriage
0	1	2	3	Blended family
0	1	2	3	Domestic violence
0	1	2	3	Parent or family member with crime problem
0	1	2	3	Parent underemployed
0	1	2	3	Parent working long hours outside the home
0	1	2	3	Lack of support from extended family

**CHILD'S PERSONAL STRESSES**

0	1	2	3	Physical changes (e.g., weight, acne, puberty, etc.)
0	1	2	3	Sexual / gender identity issues
0	1	2	3	Physical or sexual abuse
0	1	2	3	Neglect
0	1	2	3	Foster care / institutional care
0	1	2	3	Adoption
0	1	2	3	Witness to violence
0	1	2	3	Chronic, long-term, or undiagnosed illness
0	1	2	3	Disability (diagnosed or undiagnosed): _____
0	1	2	3	Not enough free time

PEER RELATIONSHIP STRESSES

- 0 1 2 3 Discord with peers (e.g., bullying, exclusion, etc.)
- 0 1 2 3 Not enough peers with shared interests
- 0 1 2 3 Loss of a good friend
- 0 1 2 3 Friends who are struggling
- 0 1 2 3 Social media stress

COMMUNITY STRESSES

- 0 1 2 3 Adjustment to a new and different culture
- 0 1 2 3 Social discrimination or isolation of family
- 0 1 2 3 Religious or spiritual problem

EDUCATIONAL STRESSES

- 0 1 2 3 Inadequate school facilities
- 0 1 2 3 New school and / or new teacher (circle)
- 0 1 2 3 Unexpected change of teacher or classroom (circle)
- 0 1 2 3 Does not get along with teacher(s)
- 0 1 2 3 Does not get along with classmates
- 0 1 2 3 Poor academic performance
- 0 1 2 3 Homework problems
- 0 1 2 3 Undiagnosed / unrecognized / unsupported disability

*INADEQUATE RESOURCES*

- 0 1 2 3 Food insecurity / lack of adequate nutrition
- 0 1 2 3 Homelessness or uncertain housing
- 0 1 2 3 Financial instability
- 0 1 2 3 Lack of adequate health care

ENVIRONMENTAL STRESSES

- 0 1 2 3 Unsafe neighborhood
- 0 1 2 3 Dealing with relatives
- 0 1 2 3 Exposure to upsetting news stories
- 0 1 2 3 Natural disaster

OTHER STRESSES

- 0 1 2 3 \_\_\_\_\_
- 0 1 2 3 \_\_\_\_\_
- 0 1 2 3 \_\_\_\_\_
- 0 1 2 3 \_\_\_\_\_



## Homework for the First Mile

There will be homework after every “Mile.” For this First Mile, the homework is a “thought exercise.” In all the Miles to follow, you will be implementing very specific behavioral strategies; that is, not just “thinking about stuff” but “doing stuff.” Just learning about these strategies is not the same as actually putting them into practice. More on that in the Miles ahead. For the First Mile:

1. Finish listing and rating your child’s problem situations and problem behaviors on the Behavioral Topography Survey.
2. Finish the Gander; first on your child and then on yourself. If you have more than one child, pick just one for now. You can Gander other children and adults later.
3. If you have questions about how to complete the Gander, go to your Instruction Manual, Part A: *The Gander Explained*
4. Feel free to represent your child’s Gander profile in whatever way appeals to you. See your Instruction Manual:
  - a. Part B: *Know Your Boat*
  - b. Part C: *Know Your Song*
  - c. Part D: *Know Your Map*
5. Analyze:
  - a. For now, choose just one problem situation from the Behavioral Topography Survey. You can analyze others later. What is it about your child’s Gander profile that explains this problem situation? (Note: Do not choose a problem *behavior* to analyze. Problem behaviors are always secondary to problem *situations*.)
  - b. How does your usual reaction to these problem behaviors either increase or decrease the frequency and severity of recurrence?
  - c. What accommodations would make a difference? If you’re not sure, check out the Instruction Manual at [ParentChildJourney.com](http://ParentChildJourney.com).