

“I’m Not Lazy”: The Development of Initiative in Traumatized Adoptees (Part one)

“He is so lazy!” “She has a whole room full of toys and she doesn’t play with anything!” “I have to tell him what to do all the time. Otherwise, he would just sit!” Such comments are common from parents who have adopted a child with a history of neglect, abuse and abandonment. Likely, the child isn’t lazy; rather this adopted son or daughter has yet to develop initiative. This two-part blog about initiative is designed to explain the development of initiative and to offer ideas about how to build this skill.

The Development of Initiative

Initiative develops during the pre-school years, starting at age 3. The development of initiative is credited to Erik Erikson. Overall, Erikson created an [eight-stage model](#) of “normal” development. For those of us in adoption and foster care, his model offers a wonderful guide. We can review Erikson and learn what should happen developmentally. Then, we can compare “normal” development to that of our “traumatized” child. Trauma interrupts development; traumatized children don’t meet developmental milestones in accord with appropriately-developing peers. Once we understand where the child who has experienced institutionalization, physical or sexual abuse, or neglect is delayed, we can intervene to facilitate developmental growth. Fortunately, physical, cognitive, social and emotional development can be stimulated at later ages!

Initiative, in the Erikson theory, follows Trust vs. Mistrust and Autonomy vs. Shame and Doubt. We’ll learn a bit each of these first two periods as they set the stage for initiative:

Trust vs. Mistrust: Infancy to 18 Months. The major emphasis is on the care giver’s concern and love for the infant. If the infant and young toddler is provided for—physically and psychologically—her experiences of adults are that they are loving, kind and trustworthy. “I can depend on adults.” “Adults are reliable.” “The world is a safe place.” The infant who does not experience the parent or care giver as consistent and caring becomes frustrated. His needs are not met, and he develops a mistrust of adults. Thus, the quality of care giving—in infancy— sets the stage for the child’s entire view of the world. Those parenting children with attachment difficulties are still working to help the child complete this year one developmental milestone.

Autonomy vs. Shame and Doubt: Ages 18 months to 3 Years. In this period, the child answers the question, “Can I do things for myself or must I always rely on others?” During this stage, children begin to master tasks for themselves. Boys and girls learn to talk, walk, feed themselves, wash and dress themselves, etc. This is the age of “no” and from this the son or daughter begins to learn right from wrong. The accomplishing of these tasks builds autonomy. Children learn they can do things by themselves and for themselves. The child expresses “me do.” Children who are shamed during this stage, who are not offered the opportunities to learn skills or who are pushed to achieve “too much, too soon” may instead develop shame and doubt about their ability to handle problems, and about their capacity to attempt new situations and challenges. The most significant relationships during this period of growth are still with parents.

Initiative vs. Guilt follows the two developmental stages described above. In particular, it builds on autonomy. It adds to autonomy a quality of undertaking, planning and attacking a task for the sake of being active and on the move. The goal of initiative is to answer the question, “Am I good or bad?” In this stage of initiative, the child is learning to master the world around him. The child wants to begin and complete her own actions for a purpose.

Initiative includes:

- Strong identification with parents. In essence, children experiment with the blueprint for what it means to be an adult. Play is often geared to understand , “What type of person will I become?” There is a creating of new games and stories, and imagining solutions to problems. This is the age of talking on toy phones, miniature cars, playing house, pretending to shave and cook and so on. Fantasy play flourishes as does creative thinking.
- Learning to cooperate with others—learning to lead as well as follow
- Asking “Why?” about everything!
- Learning to plan and organize, setting a goal and acting in a way that allows for achievement of the goal.
- The beginning of greater self-understanding and awareness of self—self is now described in terms of physical characteristics, material possessions and physical activities. “I am taller than Sally.” “I am different from Sam because I have brown hair and he has black hair.” “I have a bike and Peggy doesn’t.”
- Self-conscious emotions appear—embarrassment, guilt, shame, pride. Girls tend to show more shame and guilt than do boys. In addition, children begin to control their emotional reactions to situations. They strive to meet social standards in this area. There is a shift to verbalizing emotions. Children also comprehend that people respond differently—emotionally—to the same event. Children who remain moody and emotionally negative experience greater rejection by their peers.
- A broadening of moral development. Children learn what happens when they steal a cookie from the cookie jar or tell a lie. They develop an inner voice. They believe rules are unchangeable. They judge behavior by consequences, rather than intentions. Spilling a gallon of milk accidentally is worse than spilling one glass on purpose.

Overall, initiative is a time of lots of activity and a surplus of energy! By its conclusion, children have a broader social world. During initiative, the family is still the main relationship.

If children have parents that give them the independence to think, to encourage them and to teach good behavior, the child feels like a “good person.” If the care giver is harsh, punitive, or ridicules the child’s play or makes the child feel stupid about asking questions and his activities, the child feels bad about himself. He develops guilt instead of initiative and he will continue to hang onto adults, resist interactions with other children and in essence, feel as if he is a failure. This negative sense of self may persist through the next stages of development.

On Thursday, we’ll look at some ways to improve children’s development of initiative. Between now and Thursday, ask yourself some questions in preparation:

- Does my child display initiative?
- What type of care giving did my child receive in her early years?
- Does my child set goals and work toward the goals?
- Has my child passed through fantasy play?
- Has my child has had the opportunity to dig in the sandbox, finger paint, draw and color, mold, shape, build, and so on?
- Does my child depend on me too much? On his siblings?
- Does my child have poor peer relationships? Sibling relationships?
- Does my child manage his or her emotions?

- Can my child occupy his time himself?
- Can my child plan and organize?
- How does my parenting influence my child's development of initiative now—negatively and positively?
- Is my child attached? Be honest in this area even if difficult to think about the possibility that your son or daughter may have signs of attachment problems. Attachment is the blueprint for all subsequent relationships, and a healthy attachment facilitates cognitive, social, emotional and physical development. Without a strong attachment, all domains of development suffer. Utilize these checklists to help you—[Signs and Symptoms of Attachment Difficulties in Children Ages 0-5](#), and in [Children 5 and Older](#).