

What can I do ???

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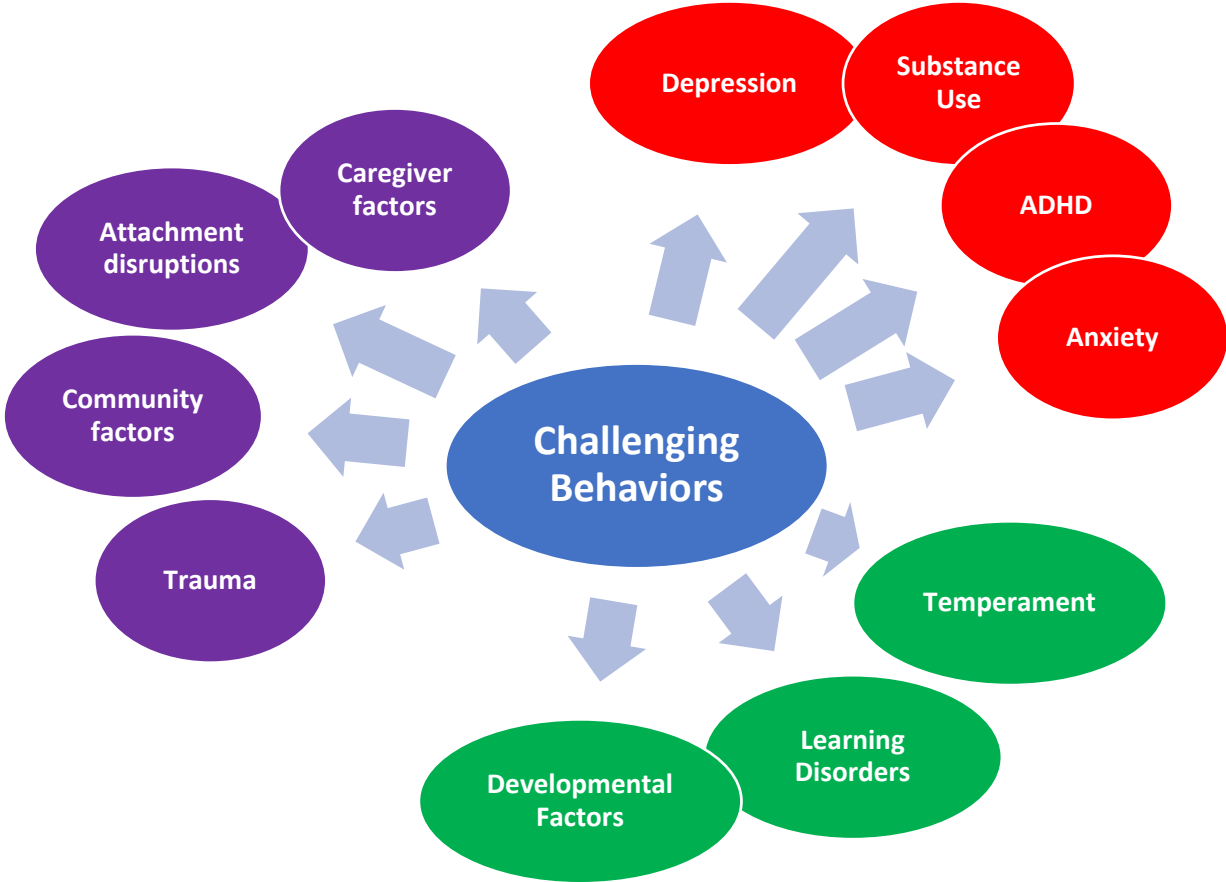
Disclosures

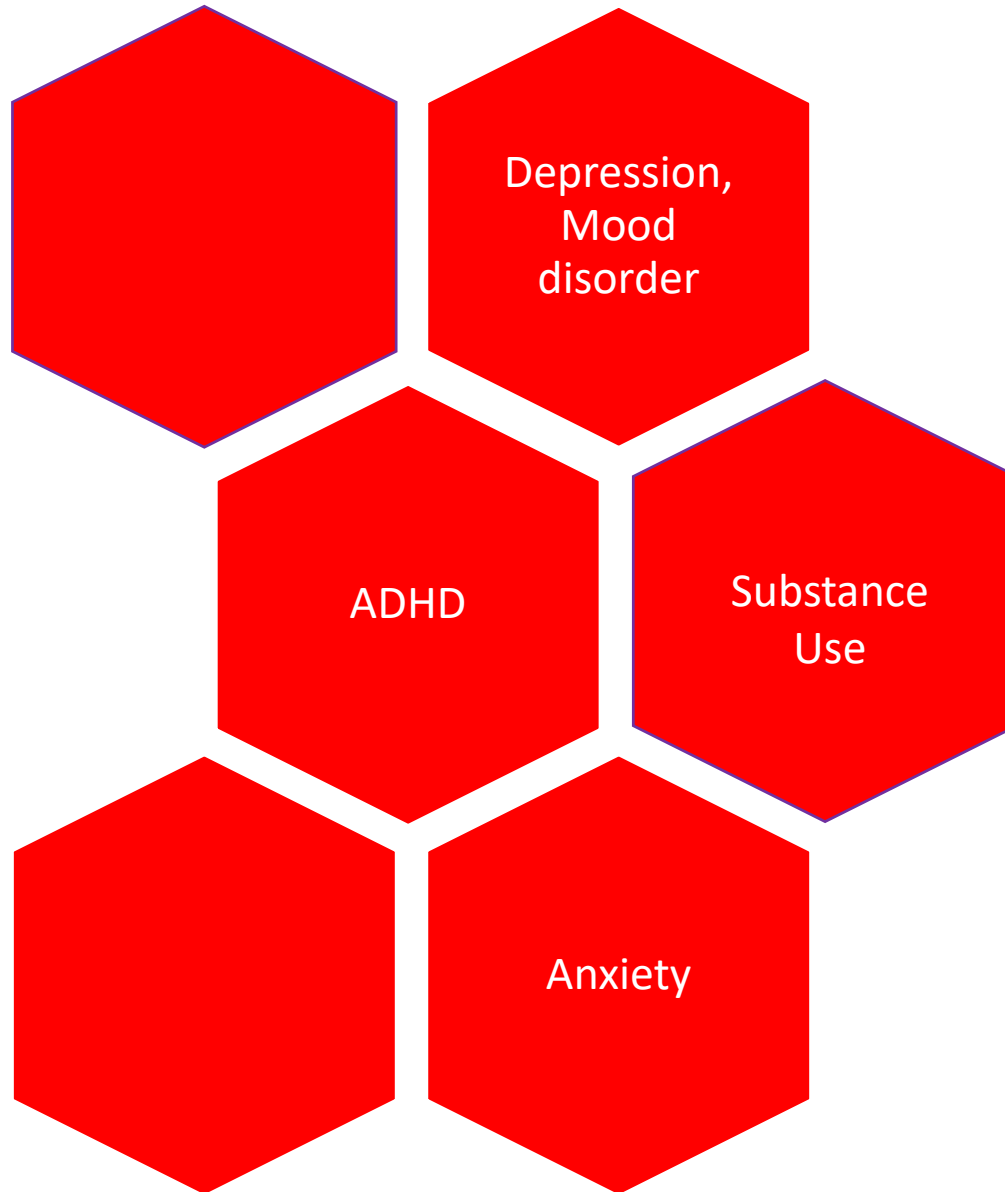
- None
- Actually

I have a strong bias:

Strengths > Negative Factors = Effects change

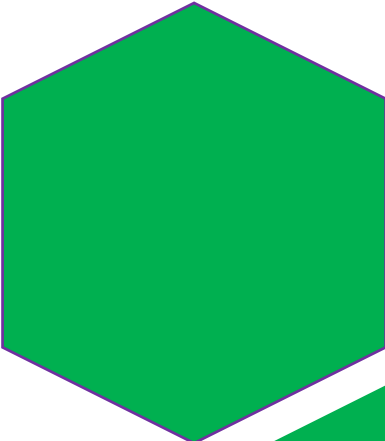
Challenging behaviors are a flag for underlying issues





Screen
Diagnose
Treat

Don't lost sight of the
forest for all the trees...

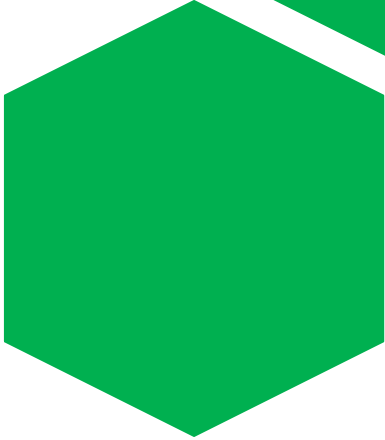
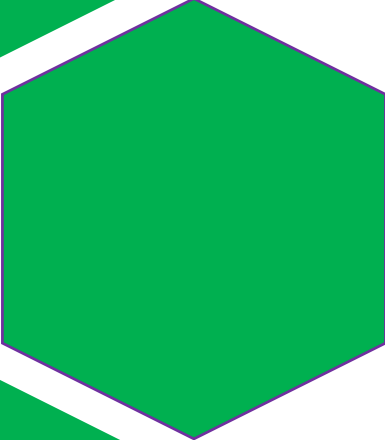


Developmental
Factors

Educate
Normalize
Refer : outside of
developmental norms

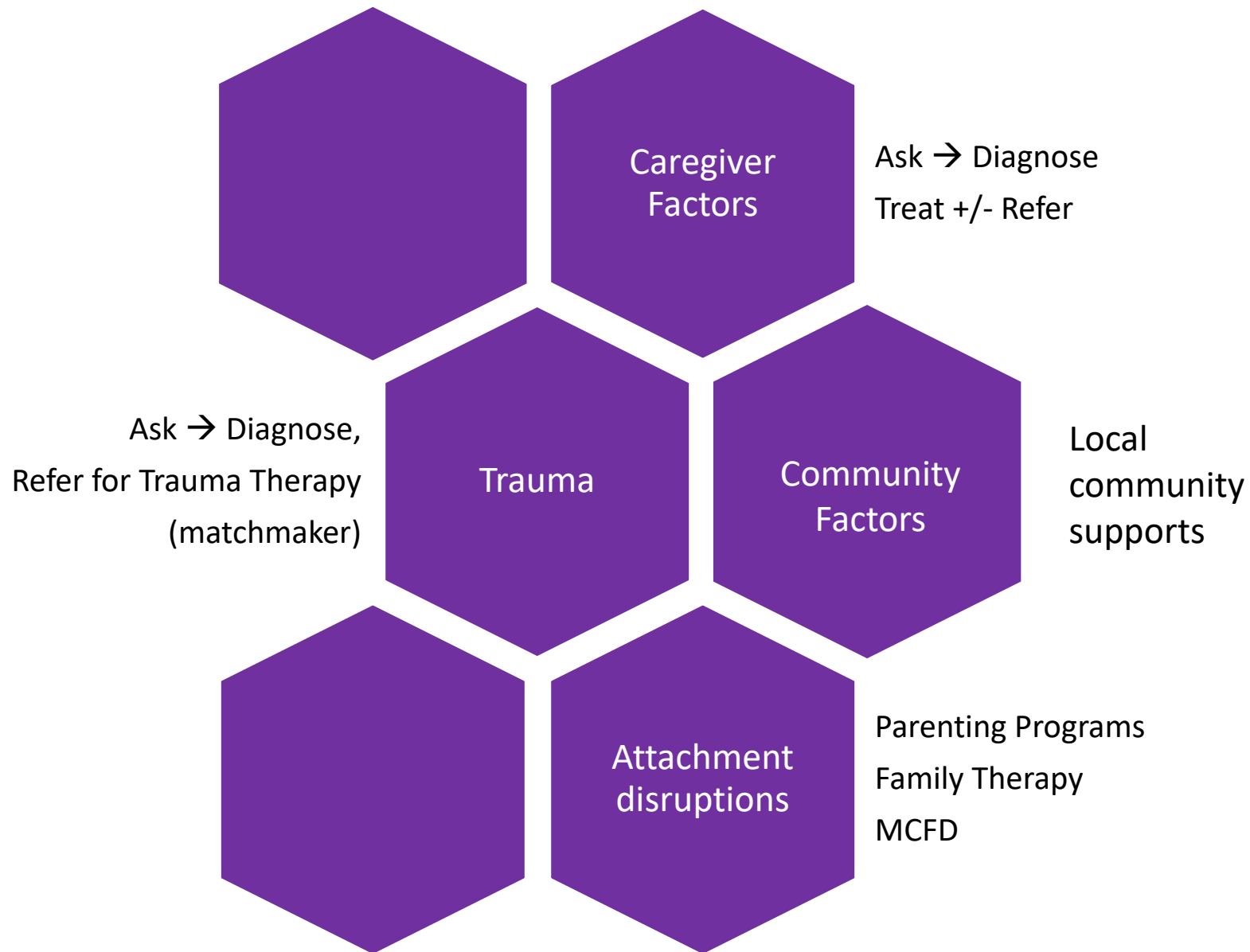
Temperament

Normalize
Reassure
Welcome



Learning
Disorders

Ask,
Refer psychoeducational
testing
Advocate with school



You're not alone...

Toolkit will be emailed out:

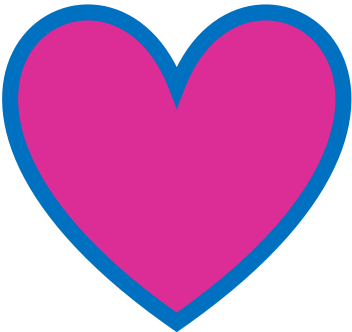
- List of recommended books
- Online Resources

Community	Parenting Programs	Online Resources
Foundry (youth 12-24) <ul style="list-style-type: none"> • Emotion Focused Family Therapy • Art explorations for caregivers • Caregiver support group 	Attachment Based Parenting Programs: <ul style="list-style-type: none"> • Connect • Circle of Security 	Kelty Mental Health Resource Centre
COMPASS Program, BCCH https://compassbc.ca/toolkits	Canadian Mental Health Association <ul style="list-style-type: none"> • Confident Parents, Thriving Kids 	Center for Parent & Teen Communication
Touchpoints Training for Care Providers	Touchpoints Parenting Program	Mental Health Foundations
Family Smart Parent Support <ul style="list-style-type: none"> • Help for the Hard Times Workshop 	Neufeld Institute <ul style="list-style-type: none"> • Online courses 	Child Mind Institute

Find the unmet NEED

- ALL Behaviour is a form of communication

Parent Handouts



Caregivers Handout on Challenging Child Behavior

To be used independently or together with the FAST-B Workbook for Caregivers

QUICK SUMMARY

When is child behavior a problem?
All children get distracted, argue, or don't follow instructions at times. If your child's misbehavior causes problems at home or at school, makes it hard to get along with others, or makes life hard for you as a parent, we want to share some strategies that can help.

First, what causes child behavior problems?
Normal differences in how kids grow, in their personalities, and in their mental health can all affect behavior problems. Stress, life experiences, and different parenting styles can make a difference too.

How can parents help change child behavior?
Children aren't often interested in changing their own behavior. But, parents can help shape child behavior by trying these skills:

- 1) Discussing clear expectations for behavior ahead of time
- 2) Giving extra attention and praise to good behaviors
- 3) Responding calmly and consistently with consequences for misbehaviors

This helps children learn that good behavior "works" better than bad behavior.

Behavior Patterns: How Kids & Caregivers Shape Each-others' Behavior

When kids are don't follow instructions or act out, parents may feel like they must give in to avoid a tantrum. But, if kids learn that misbehaviors sometimes get them what they want, they will do it much more. This is how behavior can get worse over time. When parents stop giving in to misbehavior, kids often push extra hard at first, but eventually come to accept the limit.



COMMON TRAPS QUIZ

Are You Falling Into Any of These Common Traps?

- Criticizing:** Telling your child all the things you don't like about their behavior, but not paying as much attention when they're being good.
(Example: "I've told you a million times and you still haven't put your shoes on".)
- Threatening:** Telling your child there will be a consequence, but not following through
(Example: Saying they're grounded for a month, then deciding to skip it)
- Lecturing:** If you are repeating the same lectures and explanations constantly, your child is probably not learning from them.
- Avoiding:** You stop spending positive time with child because it is too frustrating
- Yelling:** Feeling so upset that you yell at your child. This does grab their attention, but it can lead to bigger, hotter arguments, and it can train kids to yell more at other people.
- Withdrawing:** Feeling so helpless to change your child's behavior that you stop trying

Parent Handouts

Sleep Hygiene for Young Children

- Keep consistent bedtimes and wake times every day of the week. Late nights can cause fatigue that throws off a sleep schedule for days.
- Avoid letting the child spend lots of non-sleep time in bed, which keeps the brain from associating the bed with sleep time.
- Child's bedroom should be cool, quiet and comfortable. There should not be any "screens" (phone, tablets, video console, televisions, computers) in the bedroom.
- Bedtime should follow a predictable sequence of events, such as bath time, brushing teeth and reading a story.
- Avoid high stimulation activities just before bed, such as watching television, playing videogames, or rowdy play or exercise. If there are nighttime awakenings, these same activities should be avoided.
- Physical exercise as a part of the day often helps with sleep time many hours later.
- Relaxation techniques such as performing deep, slow abdominal breaths or imagining positive scenes like being on a beach can help a child relax.
- Avoid caffeine (soda, chocolate) in the afternoons and evenings. Some children's sleep can be impacted by any caffeine at all at any time of day. Even if caffeine does not prevent falling asleep, it can still lead to shallow sleep or frequent awakenings.
- Worry time should not be at bedtime. Children with this problem can try having a "worry time" scheduled earlier when they are encouraged to discuss their worries with a parent and then put them aside.
- Children should be put to bed drowsy, but still awake. Letting a child fall asleep in other places or with a parent present in the room forms habits that are difficult to break.
- A comforting object at bedtime is often helpful for children who need to feel safe and secure when the parent is not present. Try to include a doll, toy or blanket when you cuddle or comfort your child, which may help them adopt the object.
- If you need to check in on your child at night, checks should be brief and boring. The purpose is to reassure the child you are present and that they are okay.
- If your child is never drowsy at the planned bedtime, you can try a temporary delay of bedtime by 15-30 minutes until the child appears sleepy, so that the child experiences falling asleep more quickly once they get into the bed. The bedtime should then be gradually advanced earlier until the desired bed time is reached.
- Keep a sleep diary with naps, sleep and wake times and activities to help you find patterns and problem areas to target. This can be very helpful when discussing sleep challenges with your care team.

Robert Hilt, MD

Primary Reference: A Clinical Guide to Pediatric Sleep, by Jodi Mindell and Judith Owens

Sleep Hygiene for Teens

- Keep consistent bedtimes and wake times every day of the week. Late nights or sleeping-in on weekends can throw off a sleep schedule for days.
- The bedroom should be cool, quiet and comfortable. Teens who stare at the clock should have the clock turned away.
 - Restrict use of any "screens" (phone, tablet, video console, television, computer, etc) while in the bedroom. These can all function as sleep prevention devices.
- Bedtime should follow a predictable and non-stressful sequence of events, such as picking out tomorrow's outfit, brushing teeth, and then reading relaxing non-screen material or listening to music.
- Avoid high stimulation activities in the hour before bed, such as watching television, playing videogames, texting with friends, or exercise. Avoid the same during any nighttime awakenings.
- Avoid going to bed hungry or overly full.
- Physical exercise as a part of the day often helps with sleep time many hours later. Getting outside every day, particularly in the morning, may also be helpful.
- Relaxation techniques such as performing deep, slow abdominal breaths or imagining positive scenes like being on a beach can help encourage relaxation.
- Avoid caffeine (soda, chocolate, tea, coffee, energy drinks) in the afternoons/evenings. Some teen's sleep can be impacted by any caffeine at all at any time of day. Even if caffeine doesn't prevent falling asleep it can still lead to shallow sleep or frequent awakenings. Alcohol, tobacco, or sleep aids also can interfere with the natural sleep cycle.
- If the teen awakens in bed tossing and turning, it is better for him or her to get out of bed to do a low stimulation activity, (i.e. non-screen reading) before returning to bed when feeling tired. If sleep still will not come, the teen should spend more time relaxing out of bed before lying down again. This keeps the bed from becoming associated with sleeplessness.
- Worry time should not be at bedtime. A teen may find it helpful to have a "worry time" scheduled when he or she is encouraged to journal about worries or discuss them with a parent or other support, and then put them aside.
- Teens should go to bed drowsy, but still awake. Falling asleep on the couch or in non-bed locations may form sleep associations or habits that are difficult to break.
- If the teen is never drowsy at the planned bedtime, temporarily delay bedtime by 15-30 minutes until the teen is sleepy, so that the teen experiences falling asleep more quickly once in bed. The bedtime should then be gradually advanced earlier until the desired bed time is reached.
- Keep a sleep diary with naps, sleep and wake times and activities to help find patterns and problem areas to target. This can be very helpful when discussing sleep challenges with the care team. There are also apps available that can help with tracking sleep habits.

Robert Hilt, MD

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Time In vs. Time ut

Special Time

Also known as “Child Directed Play”

A strength based approach to overall child behavior problems.

Goal of this is to establish regular times when parent and child have a positive experience in each other's presence, supporting family self confidence, pleasure and hope. Regular special time together is like money in the bank that lessens times of crisis and re-establishes motivation for positive behaviors. Without regular positive parent/child interactions, corrective discipline is far less effective. For instance, families often find that time-outs work better after initiating special time.

How to do special time:

- Important to be done regularly, every day is optimal, but two or three times a week consistently is OK. Siblings should receive equal opportunity.
- Parent picks time of day.
- Label it “special time.”
- Pick a time short enough that it can be done reliably as scheduled, usually 15-30 minutes.
- Do it no matter how good or bad the day was.
- One on one without interruption.
- Child picks the together activity, which needs to be something the parent does not actively dislike doing and which does not involve spending money or completing any task or chore.
 - Examples might include playing together with child's toys, or drawing pictures together.
- End on time: may use a timer to help. Remind child when the next special time will be. You may choose to play with the child more after taking a break from each other.
- If the child refuses at first, tell the child that you will just sit with him/her for that time, and/or that you will continue to invite the child to participate when next special time is scheduled.
- Parents also need to have some special time for him/herself. Parents who feel nurtured themselves find this is easier to do with their child.

Robert Hilt, MD

Thank you



Go PLAY !!!