

Welcome

Please turn off or silence all cell
phones and pagers

Thank you

Introduction

Taking control back from the child
without being confrontational or punitive

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Background Information

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History / Development of Philosophy

- Started in South Africa in 1960
- Originally catering to 'LD' diagnosis
- High functioning students who were not being successful
- Program opened in US in 1980's
- Kentwood has adapted original program to focus on life/social skills as well as academic deficits

High Functioning Children

- High Functioning (1 of 4 areas)
 - Academic
 - Social Skills
 - Life Skills
 - Physical Skills
- Not being successful in school, at home, or in other social settings
- This lack of success leads to the child developing self esteem issues, and feeling a loss of control within their lives
 - They are aware of their lack of success

First Signs

This lack of success leads to the child developing self esteem issues, and feeling a loss of control within their lives

- They are aware of their lack of success

Attempt to take control back in other ways

- Attention seeking
- Withdrawing
- Defiance / Opposition / Destructive
- Threats / Abuse / Physical behaviors

Short Term Effects

In an effort to compensate for these deficits, the child develops an inadequate coping skill set or kit. This sequence of events sets the child up for failure in the social, academic, and/or home environments. These failures, in many instances, lead to the child developing hyper anxiety, compounding the problems.

Ex. Anorexia / Bulimia – Not an eating disorder at core – it is a method by which people try gain control over their lives.

Control – Who should have it?

Parent / Guardian / Authority needs to establish a controlled environment and exercise control over themselves in order to role model

- Lessen the intensity of; hold in restraint; hold or keep within limits
 -In order to gain control
- manipulate: control (others or oneself) or influence skillfully, usually to one's advantage; manipulate
- dominance: the state that exists when one person or group has power over another
 - ...by teaching
- how to be careful or certain to do something; make certain of something

The plan

Building a mouse trap / Putting together a puzzle

Beginning → End

Control of the boundaries, size, complexity

Can be more than one way to complete

Once a choice has been made, cannot go back

Finite number of pieces

End result is known

Progress can be visibly seen

Taking Back Control Step by Step

- Identify frequency vs. action problems
- Identify manipulation vs. deficit behaviors
- Observation and Assessment
- Short, medium, long term goals
- Create an appropriate environment
- Make child part of plan
- Provide the illusion of choice
- Frequency of occurrences not occurrences
- Rewards and Punishments (consequences)

Identifying Frequency vs. Actions

Frequency Based Problem

Behaviors and actions child exhibits are normal for age

Frequency of occurrences is what is abnormal

Frequency may be too high

in which case goal is to normalize by discouraging

Frequency may be too low

in which case goal is to normalizing by encouraging

Action Based Problem

Behaviors child exhibits are abnormal for age

Crying, tantrums, encopresis

Behavior child exhibits is abnormal for any age

Self injurious, suicidal, phobias, and/or non logical

Identifying Cores

Manipulative Based Actions

- Child knows the difference between the correct choice and incorrect choice.
- Child chooses a course of action in order to invoke a (specific) response
- Child chooses a course of action due to lack of negative consequences
- Child uses actions as a mechanism of control

Deficit Based Actions

- Child does not know the difference between the correct choice and incorrect choice.
- Child chooses a course of action based on lack of knowledge or awareness of a better choice
- The effect of consequences (positive or negative) are irrelevant to decision
- Child uses action due to lack of options (shower story)

Deficit vs. Manipulation

In some cases, the child's deficit is their inability to make good choices

- Lack of seeing cause and effect
- Processing issues
- Auditory Processing
- Part whole relationship
- PDD

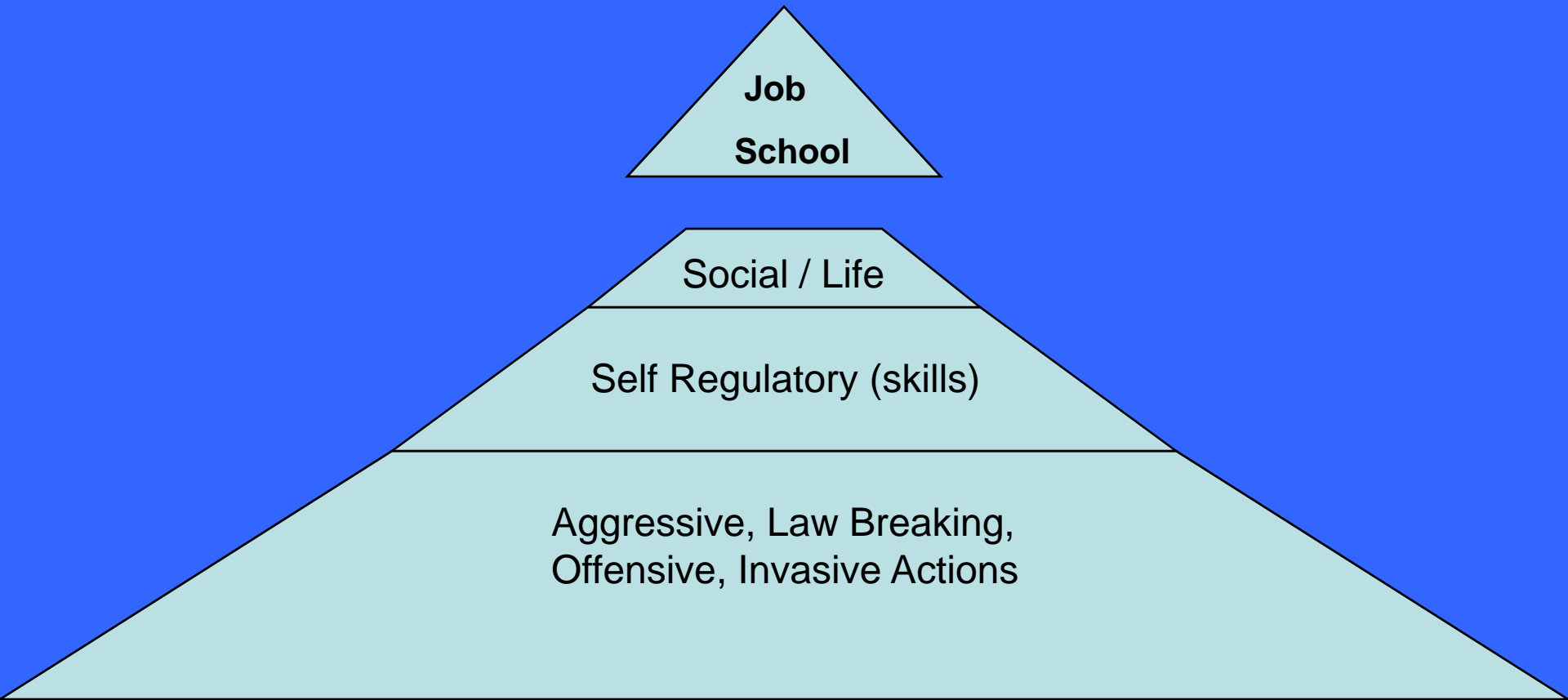
Observation & Assessment

- Passive observation and recording of events as they occur for a period of 1 to 2 weeks (must establish a baseline)
- There is no way to know what to work on, if there is improvement or not, or if the plan is effective without establishing a starting point
- Weight loss, distance running etc.

Setting Appropriate Goals

- Order of Severity
 - Physical / Aggressive / Verbal threats
 - Rule breaking / Legal
 - Sexist, Racist, Other Offensive Remarks
 - Hygiene / Health / Nutrition
 - Disruptive or attention seeking behaviors
 - Non disruptive behaviors

Goal Sequencing



Setting Goal Guidelines

- Don't ask for too much at once
- 5 individual targets is limit
- 3 is optimal
- It takes at least 1 month to see any type of consistent change
- Reasonable expectations for change
- Building a puzzle (dinner story)

Setting Appropriate Goals

- Short term
 - What to accomplish within 1 month
- Medium term
 - What to accomplish within 3 to 6 months
- Long Term
 - What to accomplish within 1 year

Determine whether a decrease/increase or extinction/exhibition is the goal

Environment

- Must be safe and secure
 - Neurologically
 - Learning of any kind cannot take place ₁
 - Social, Behavioral, Physical, Academic
 - Chemically not prepared to receive and store
 - CNS is in a state of anxiety (fight or flight)

Creating a safe/nurturing environment

– Factors

- No Bullying / teasing / name calling
- No Belittling, degrading, shouting, or yelling
- Must be consistent
- Must be structured
- Must be scheduled
- No emotional reactions
- Rules and boundaries must be known
- Clearly defined rewards and punishments

Environmental Rules

Remove all expected privileges

- TV, Video Games, computers, telephones
- Books, cars, toys, dessert, soda, juice, candies, chocolates, cookies, chips, etc.
- Pocket money / allowance / car use
- Don't take away essential items (food, shelter, clothing)

Getting Everyone on Board

1. (Person plan is for) Child
2. Family / relatives / friends
3. Teachers / coaches / other
4. Sit down and discuss
 - Plan
 - Goals
 - Expectations
 - What person feels is realistic
 - Rewards
 - Punishments
 - Suggestions
 - Don't get involved with what has happened

Provide the illusion of choice

Cause & Effect

Forces child to take responsibility

No one else to blame

Natural Consequences

Don't become confrontational

Signed contracts / no surprises

(transport story)

Frequency of occurrences

Not occurrences

- The actions / behaviors may continue without change initially
- Immediate change may take place – does not mean anything other than they can do it
- Remember long term frequency change (slope)
- Reoccurrences will happen

Rewards and Punishments

Clearly defined & agreed upon

Natural consequences

Don't threaten / never react unless planned

Natural consequences

Getting to root issues

ADD/HD vs. Anxiety

Medications – physiological mechanisms

Survey

- Once in while does not seem to listen when spoken to directly
- Once in while does not follow through on instructions and fails to finish schoolwork, chores, or duties in the workplace (not due to oppositional behavior or failure to understand instructions)
- Sometimes has difficulty sustaining attention in tasks
- Sometimes fails to give close attention to details or makes careless mistakes
- Once in a while has difficulty organizing tasks and activities
- Sometimes avoids, dislikes, or is reluctant to engage in tasks that require sustained mental effort
- Sometimes misplaces things necessary for tasks or activities
- Once in a while is often easily distracted by extraneous stimuli
- Sometimes is forgetful in daily activities

Survey 2?

- Have a distinct and ongoing fear of social situations involving unfamiliar people
- Worry excessively about a number of events or activities
- Have trouble falling asleep / staying asleep
- Does not stay in room / can't sleep by themselves / lights on / door open
- Experience age-appropriate social relationships with family members and other familiar people
- Appears anxious when interacting with peers and avoids them?
- Have a persistent and unreasonable fear of an object or situation, such as flying, heights, or animals?
- When encountering the feared object or situation, does he react by freezing, clinging, or having a tantrum?
- Worry excessively about competence and quality of performance?
- Cries, sulks or refuses to leave a family member or other familiar persons
- Experienced a decline in classroom / work performance, refused to go to school / work, or avoided age-appropriate social activities?
- Spends too much time each day doing things over and over again (for example, hand washing, checking things, or counting, planning)?
- Has exaggerated fears of people or events (i.e., burglars, kidnappers, car accidents) that might be difficult, such as in a crowd or on an elevator?
- Appear fidgety, picking, tapping, shaking
- Experiences a high number of nightmares, headaches, or stomachaches?
- Repetitively re-enact scenes from an event?
- Redoes tasks because of excessive dissatisfaction with less-than-perfect performance?
- Experience shortness of breath or a racing heart for no apparent reason

Alternate Methods

- Medication
- Wilderness / Boarding programs
- Hospitals
- Therapy / Counseling / Doctors
- Other