Ready, Set, Go! Early Childhood Newsletter



Feeding Myths

Myth #8: If a child won't eat, they either have a behavioral or an organic problem. *False*

Various research studies, and data from the STAR Institute, indicates that between 65-95% of all children with feeding problems have a combination of behavioral and organic problems. If you start with a physical problem with eating, you are going to quickly learn that eating doesn't work/hurts and a set of behaviors to avoid the task will become set into place. If you start with a purely behavioral/environmental reason for not eating, your compromised nutritional status or lack of experience will quickly begin to cause organic problems. As such, it is not useful to create a dichotomy in diagnosing or treating feeding problems.

http://www.sosapproach-conferences.com/articles/top_ten_myths

Family Oriented Programming (GPPSD only)

Gymniks

Friday April 28 @ Gymniks 11:15am-12:00pm & 12:30pm-1:15pm

Autism Swim Friday April 28

@ Crystal Park School Pool 1:00-2:30pm

Making the Move to Kindergarten

Thursday May 4 @ Crystal Park School 6:00-7:30pm

More Family Oriented Programming (FOP) Sessions are offered at your child's preschool. To see a list of sessions offered at your child's preschool, or if you have any questions regarding your child receiving services, please contact your child's teacher.

Community Corner

Inclusion Alberta Family Conference

April 7-8, 2017 at the Fantasyland Hotel Edmonton Registration is now open and there are some grants available. Please see their website for further details. www.inclusionalbert.org

Psychology

Speaking to a Frustrated Child

When children become frustrated or angry, several parts of their brain go temporarily "offline". These brain functions involve listening, understanding language, planning, and thinking of consequences. Therefore, angry children are unable to rationally answer questions, make decisions, or think about whether or not their behavior is good or bad. In response, when we as adults are trying to help a child calm down, we should move them to a safe space, reduce the amount we speak or ask questions, and repeat simple phrases like "It's alright," and "When you're calm, we'll talk."

Playing with your Child: Part 2 Parent Directed Play

The goal is to provide structured, fun, and engaging activities to help decrease behaviour problems and increase healthy development. These activities have some structure so your child will need to listen and follow your directions (e.g., "Let's play a game, here is how it works..."). Even though you are providing directions and structure for the activity, try not to become a strict teacher. Keep the activity fun, and be playful when giving directions! Show pleasure in your child's accomplishments during the play activity. When your child is misbehaving, you can use parent-directed play to change their state to engaged, cooperative and/or calm. For example: "If your child is running around the room chaotically, hold your child's hands and make a game of ring around the rosy, then say to your child, "I've got an idea for a game" and sit him/her in your lap in front of play-doh and say, "Let's each make a snake and then make them play with each other." Or you could sit in front of paper and crayons and say, "I'm going to draw a shape, and then you can draw a shape/ make something out of the shape I drew."

(Kathy Eugster, MA, RCC, CPT-S, Parent-Child Connections 2014)



Toilet Training

Take Home Tip

Rewards

When toilet training your little ones, small rewards can be a big help. Use your imagination when it comes to picking a reward – you know your child best. Some suggestions are: small candies, sticker charts, calling grandparents to report "success", or even using blue food coloring in the toilet bowl. When your child pees, the water will turn green! Rewards should be kept somewhere your child can see, but out of reach so they cannot get

them on their own. Rewards could be given when your child asks to go, uses the toilet independently, and/or for a certain number of dry





Speech & Language

Comprehension of Verbal Tasks

The task of listening and interpreting a message can take individuals with delayed processing 10-30 seconds, and can be even more difficult based on the length of the sentence. Children with language delays, autism, and auditory processing disorder, may have troubles comprehending language (ASHA, 2017). Typically, adults will repeat directions and requests to a child if they do not begin the task right away. However, the child may be able to understand or process only a little bit of what is being said. Here are some suggestions by Bill Nason, M.S. (mental health professional, behavior and autism specialist) on how to give your child directions/requests:

- Break down verbal instructions: For example, "Put on your boots and zip up the sides before going to the park", could be shortened to the statement, "Put your boots on first". Remember, the longer the sentence and the more information that needs to be processed, the more difficult it becomes for the child.
- Try to give information face to face and at eye level.
- Use visual prompts if possible. For example, Set your child's boots in front of them while saying "Put your boots on first."
- Wait 10-15 seconds before repeating the instructions (adding a physical or visual cue), and even longer if your child has been diagnosed with a severe processing de-

Autism Discussion Page by Bill Nason, M.S. Verbal prompting; don't over-use it!

lay.

Having regular eating times every 2-3 hours can be very beneficial for children. Plan for meals to take 20-30 minutes for consumption, and snacks 10-15 minutes. If your child is unwilling to eat their snack/meal in that time frame, than



please don't stress. The amount a child consumes may fluctuate daily. Provide small portions with the reassurance that they may ask for more, and trust them when they state they are full. Allowing your child to leave the table when they are full gives them the freedom to not over eat. If a child asks to eat in between feeding times, provide reassurance that they will be having another meal or snack time shortly and provide them with water.

Alberta Health Services. Feeding Toddlers and Young Children. www.raisingourhealthykids.com

Positive Parenting Program

If your child misbehaves, stay calm and give them a clear instruction to stop misbehaving and tell them what you would like them to do instead (e.g., "Stop fighting; play nicely with each other").



Praise your child if they stop. If they do not stop, follow through with an appropriate consequence. www.triplep-staypositive.net

Occupational Therapy

Triggers

A trigger is something that happens that increases the chance that your child will become less regulated and enter the yellow or red zone. Identifying things that may trigger your child helps us use proactive strategies that will help them stay regulated. Some proactive strategies include:

- Pre warning to prepare the child for the trigger (e.g., "The horn will be loud").
- Removing triggers, if possible.
- Deep Breathing

Consider sharing your child's triggers with his/her teacher in order to support school transitions. This will help with transition planning for the next school year.