

Behavior Management Helpful Hints and Strategies for Parents

Children with Prenatal Substance Exposure – whether the exposure is to alcohol, tobacco, marijuana, or illegal drugs – often have problems with mental organization and applying cognitive/intellectual skills to daily tasks and learning. To prevent the unnecessary frustration and over-stimulation that leads to emotional and behavioral outbursts, the following strategies are suggested to help manage daily living activities:

- To assist with your child's ability to regulate, or control, his behavior, your child should be provided with additional structure in both home and school environments. Children with prenatal substance exposure benefit from a clear set of rules and expectations, presented in a way that accommodates for multisensory learning:
 - a. Visual: pictures, charts, lists with matching images
 - b. Auditory: songs, 1-step instructions
- 2) Your child needs adults in her life to function as her "external brain." Consequently, large, open classrooms with little teacher guidance may be problematic. She will require additional guidance, support, limit-setting, and reminders for appropriate behavior as she learns to regulate her own actions and limit her impulsivity. Your child should be explicitly and repeatedly taught techniques for self-regulation, such as counting to 5 or 10 before responding verbally or physically. Additionally, caregivers should experiment with a number of "stop and think" methods and/or behavioral management plans that teach children to evaluate the situation and consider potential consequences of their behavior, perhaps using a system of rewards for positive behavior.
- 3) Children with prenatal substance exposure often benefit from frequent breaks following small increments of independent work, as well as praise and encouragement for on–task behavior or steps to successful completion. These breaks should incorporate motor movement, such as bringing work to the teacher for review, taking bathroom breaks, or running an errand.
- 4) As children with inhibitory difficulties are often at risk for problems making and keeping friends, early intervention is important to avert social difficulties and injury to your child's self-esteem. Thus, your child might benefit from the following interventions
 - a. Cross-age tutoring with an older student who models appropriate behavior
 - b. Small group activities with focused and well-controlled peers
 - c. More limited unstructured time with pre-arranged breaks to review successes and areas of difficulty prior to returning to play.
- 5) Educators and caregivers should take care to model appropriate emotional expression, label their feelings out loud, and verbally identify strategies for coping with difficult emotions.

 Additionally, your child should learn to identify and label the full range of emotions, including



bodily sensations he feels that accompany negative or overwhelming feelings. As he matures, a visual symbol such as a thermometer or speedometer may assist your child as he learns to apply strategies for "cooling down" (i.e., "my temperature is at 125 degrees – I need to cool down by spending time in my room!").

- 6) When children become dysregulated, they are less able to process information/directives, discuss behavior and accept rational intervention. Help your child de-escalate by avoiding power struggles, providing choices, and offering options that provide soothing and comfort. OT/SI strategies may be an important part of successful intervention at these times. For example, designate a quiet, calm area to help your child reorganize once he moves out of the optimal level of arousal (sensory overload) and displays dysregulated and/or sensory seeking behaviors. This comfortable, quiet area should be equipped with bean bags, soft pillows, soft/low lighting, squeeze toys, water to drink, chewy toys/food, and access to organizing music (e. g. Sacred Earth Drums, which can be special ordered through Tower Records). This area should be presented not as a punishment, but rather as an area to reestablish calm and organized behavior.
- 7) Use the following process to guide your child toward appropriate decisions and choices:
 - Give first directive and allow ample time for completion
 - Give second directive with reminder to comply or accept the consequence
 - Provide praise for positive choice
 - Provide consequence for negative choice
 - Review decision-making process & encourage more positive choice next time
- 8) Increase attention to positive behaviors, while ignoring negative behaviors when possible. This will enhance a sense of mastery, personal competence, and self-confidence. Provide frequent praise for positive behaviors in order to promote a more positive self-concept, as well as more positive parent-child interactions. Also, avoid *punitive* consequences for misbehavior; *natural* consequences should be emphasized. Consequences such as time out can be framed positively, as an opportunity to "cool down" rather than as a punishment. When consequences are necessary, administering them in small "doses" and providing ample opportunity to discuss the behavior that led to the consequence is often more effective. This provides an opportunity to enhance cause and effect reasoning, as well as to help your child understand and to take responsibility for misbehavior.
- 9) Use a picture schedule to help your child understand and prepare for daily activities, such as bedtime, dressing, eating, play, chores, etc. The picture schedule serves as an important visual support for auditory processing/filtering difficulties. Verbal cues/explanations should be provided, as well. Pictures can be removed or checked off upon completion of the task. The picture schedule enhances understanding and compliance with task sequences and expectations throughout both the day and night and can be used at home and at school. This process will help your child organize her own behavior and actions for optimal performance.



- 10) Repeated practice and repeated exposure to learning materials will facilitate learning of new concepts (e.g., colors, numbers, letters, words). Caregivers are encouraged to incorporate such exposure into their child's play, daily activities, and parent-child interactions to help her learn and master new learning.
- 11) The following accommodations can be employed in the classroom:
 - Communicate clearly using brief, precise instructions, repeat directions.
 - Ask your child to repeat directions to ensure understanding.
 - Provide optimal levels of 1:1 education.
 - Minimize distraction (seating away from windows, noisy places, distracting peers) and maximize positive models (seat near teacher/parent or model peers, use frequent eye contact).
 - Seat close to the teacher to facilitate attention to the teacher and appropriate tasks.
 - Break tasks down into smaller units and allow for mastery and praise upon completion of each step.
 - Reduce the amount of independent work (e.g., provide work in frequent small amounts or steps, as opposed to large singular tasks).
 - Structure the amount and process of work in each area assigned for homework,so homework can be completed in the same amount of time as other students.
 - As sustained attention is a particular difficulty, provide frequent breaks and set goals for time to remain on-task.
 - Provide schedules, instructions, and directions through visual, auditory, and tactile modes of sensory processing.
 - Provide frequent rewards and reinforcement for positive on-task behavior.
 - Keep verbal and written information simple (1-2 steps).
 - Underline key words and directions.
 - Create brief lessons and short assignments.
 - Provide feedback about performance and allow opportunities for self-correction.