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ABSTRACT

Teachers receiving training about child abuse issues raised many questions about what they could do in a classroom to facilitate the healing and growth of an abused/neglected child. The questions centered on three main areas of concern: (1) How are children's extreme behaviors to be interpreted? (2) What is the teacher's role? and (3) What can teachers do to promote more appropriate behaviors? This booklet provides a responses to these questions. The left-hand column of each page lists personal, interpersonal, cognitive, and emotional issues likely to confront abused children. Such issues include boundaries, trust, role reversals, safety, self-esteem/self-identity, authority/power/control, shame/guilt/anger, loyalty/denial, and confusion. The middle column of each page specifies problematic behaviors related to each of the listed issues. The right-hand column offers suggestions for dealing with the behaviors in ways that control negative behaviors and give special attention to needs of abused children. To use this booklet effectively, a teacher must recognize that interventions require time and consistent application and that children under stress who have not been abused may behave in ways characteristic of abused children. (RH)

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INTERVENTION STRATEGIES FOR ABUSED CHILDREN



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INTERVENTION

STRATEGIES

WITH

ABUSED

CHILDREN

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To order additional copies of this booklet, contact:

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Dr. Renee Fredrickson, who has shared her knowledge and expertise.

INTRODUCTION

Working with abused/neglected children can be a difficult and challenging task. Throughout our training on child abuse issues in the spring of 1985, teachers were asking, "Now what? Now that we know how to identify and report, what do we do with this child?" Many questions were raised about what teachers can do in a classroom to assist an abused/neglected child to heal and grow. The questions were grouped around three main issues:

1. How do I interpret these extreme behaviors?
2. What is my role as a teacher?
3. What can I do to teach more appropriate behaviors?

The booklet is a response to these questions. Much emphasis has been placed on identification and understanding the family dynamics surrounding an abusive situation. These have been important matters to discuss and explore. However, it is time to extend the discussion beyond those issues to classroom behavior and the teacher's role. We would like to outline how this booklet can begin to address the issues pertinent to the classroom.

First, it is sometimes complicated to interpret the child's behavior which, more often than not, tends toward the extreme end of the continuum. A child is either very withdrawn or very aggressive. A child can either avoid all touch or touch children and adults in inappropriate ways. To help clarify these behaviors, we have outlined not only the behaviors, but the issues underlying those behaviors as well. By understanding more thoroughly the issues a child is facing, we can provide a more conscious and clear response to the inappropriate behavior. This understanding can also help us empathize with the child's uniquely painful situation.

Secondly, we considered carefully the role of the teacher. A teacher is not a therapist and cannot give the indepth emotional searching a child needs to begin healing. But a teacher can teach the child appropriate behavior in the classroom. A teacher cannot control family changes, child protection, or court systems, but a teacher can provide a safe and predictable environment for a child who needs to learn to trust. By understanding our limits as educators and concentrating on those tasks that we do very well, we can control the stress that surrounds this issue.

Thirdly, teachers are often so surprised and upset over the child's behavior that what to do becomes buried in worry and concern. Once a child has been identified and is receiving services, teachers can still do much to help the child. This booklet provides suggestions that can be a starting point for your interventions with the child. Understanding that individual child and his/her pain and issues will determine the strategies that you choose.

To use this booklet, a teacher must, first of all, understand that the interventions in the booklet take time and consistency to work. A child will not change quickly, especially when the child has been a part of a long-established pattern of abuse. Secondly, that teacher might recognize the behavior and issues in any number of children who have not been abused. Many of the behaviors are common to children under any kind of stress. For example, a child in the middle of a divorce settlement may exhibit role reversal and general lack of trust. Therefore, many of the suggestions may work well for any child under stress.

As we developed this booklet, we worked off a set of assumptions about adults and children. These assumptions are important in working with all children, but are especially crucial in working with abused/neglected children:

1. That the adult take the child's feelings seriously.
2. That children are dependent on adults to meet their basic needs.
3. That adults should convey disapproval of a child's behavior, but not of the child.
4. That the adult respect the child even when correcting him/her.
5. That the adult explain clearly what is expected of the child.

Adapted from: Three in Every Classroom by Ruth Soukup, Sharon Wickner, and Joan Corbett.

We hope that you find this booklet helpful in forming your own strategies that give children a sense of security and hope when their lives have been overwhelmingly painful.

Sandra Heidemann
Beth Koskie

The field of child abuse and neglect is an emerging field. We have just begun to acknowledge the problem in our society. The purpose of this material is to guide and enhance skills in working with young troubled children. Varying results will occur based on teaching skills, nurturing abilities, and educational levels, as well as individual children's needs and responses.

ISSUES ABUSED CHILDREN ARE LIKELY TO BE DEALING WITH.

If the abused child is dealing with the issue in the left column, these are some of the behaviors you are likely to see...

These are suggestions for dealing with these behaviors in ways that control negative behaviors but pay special attention to needs of abused children.

<p>BOUNDARIES (Underlying question: What are my limits? Where do I end and you start?)</p>	<p>PSEUDO ATTACHMENTS</p>	<p>Limit number of primary caretakers - assign 1-2 people to this child. Limit use of volunteers, etc. Redirect into activities or to primary caretakers.</p>
	<p>INAPPROPRIATE BODY TOUCH OF OTHERS (BREAST, ETC.)</p>	<p>Clearly explain limits of touching others, (i.e., "That's a private part of my body"; "You could ask Joe to shake hands with you to say hello.")</p>
	<p>SEXUALLY ACTING OUT</p>	<p>Provide variety of activities re: touch, bodies, private parts, expressing feelings (i.e., read <u>It's My Body</u>, and practice yelling "NO!") Redirect into more appropriate behavior - explain what is/is not appropriate. Refer.</p>
	<p>ALLOWS INAPPROPRIATE BODY TOUCH</p>	<p>Reinforce/respect children's expressions of not wanting to be touched.</p>
<p>TRUST (Question: Can I trust you?)</p>	<p>OWNERSHIP OF POSSESSIONS (HOARDING, ETC.)</p>	<p>Be clear about appropriate behaviors (i.e., sharing) but accepting of child's needs for ownership - have more than one of things. Offer teacher support and time limit when <u>will</u> share (give warning to get ready).</p>

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TRUST (CONTINUED)

CLINGY

Be empathetic and caring, but supportive of independence (i.e., "I'll give you a hug, but then you need to sit next to me"; "I'll stay with you while you try"). Redirect activities with positive tone. Set aside a specific time to "cling" - special time for child.

FEAR OF FAILURE/
CAN'T SYNDROME

Break activities down into smaller, easier steps.
SEE: Self-Esteem
Lots of open-ended materials with no "product".

REGRESSION OF DEVELOPMENTAL
MILESTONES

Be accepting of child's level and mistakes and supportive of efforts - when child feels safe, he will again progress. Do NOT shame!

SHORT ATTENTION SPAN

Structure environment, don't change/overstimulate.
Redirect child back into activities and offer reward/support for finishing. (i.e., "You need to finish that puzzle you started; I'll stay with you.")
Gradually decrease support. Redirect into new ways to use same materials. Limit distractions (visual or auditory) while child is doing task - avoid background music.

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TRUST (CONTINUED)

UNABLE TO DELAY GRATIFICATION/
PEOPLE HOPPING
(Attachment Difficulties)

Don't make promises you can't keep. Be consistent in your behaviors with child. Give child reason for delay in response - hold child in gentle/positive manner (i.e., lap). Assign 1-2 primary caregivers to child - work on self-esteem, bonding, etc.,

INCREASED ANXIETY OVER DISCUSSION/
DISPLAY OF FEELINGS

Express/own your own feelings - model. Label others display of feelings for child and reinforce as needed (i.e., "Molly looks mad - that seems scary to you.")

UNRESPONSIVE TO PHYSICAL TOUCH

Always want/give reason for any touch. Get child's permission for touch (i.e., "Would you like to sit on my lap?") Respect negative response if possible.

EXCESSIVE ATTENTION-SEEKING

Tell child you expect him/her to complete choice of tasks and then you'll give attention for a short time. Set aside specific time each day for 1-on-1 attention.

ROLE REVERSALS

(Question: Who's the adult?)

EXCESSIVE CARETAKING OF ADULTS

Try to take care of child's needs: don't let child take care of you. Reinforce times when child should hurt/be angry, etc. Praise child for doing childlike things (i.e., moving the truck around the room); comment on other children's childlike appropriate behavior (i.e., "Shannon is enjoying playing with Playdough").

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<p>ROLE REVERSALS (CONTINUED)</p>	<p>EXCESSIVE SELF-CONTROL</p>	<p>Talk with all children about appropriate childlike responses/behaviors (i.e., "It's okay to cry when you're hurt."). See "Excessive Caretaking of Adults". Lots of sensory/messy activities that are open-ended (water play, finger paint, playdough).</p>
	<p>EXCESSIVE CARETAKING OF OTHER CHILDREN</p>	<p>Encourage the child to take care of self and let adult help others. Give child appropriate ways to help (i.e., set table).</p>
<p>SAFETY (Question: Am I safe? Will you hurt me?)</p>	<p>NIGHT/NAP DISTURBANCES</p>	<p>Offer physical/emotional support during naptime. Encourage child to talk about dreams/fears and help them problem solve ways to master (i.e., "Snakes are really scary - what could you do to make them go away?")</p>
	<p>WARY OF PHYSICAL TOUCH (CRINGES, DUCKS, ETC.)</p>	<p>Always warn child of touch and give explanation - ask permission first. Avoid sudden movements and/or "swooping" near child.</p>
	<p>SHORT ATTENTION SPAN</p>	<p>See Trust - short attention span.</p>

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SAFETY (CONTINUED)	EATING PROBLEMS (STUFFING, GAGGING, ETC.)	Make eating routines as comfortable and conflict-free as possible (i.e., small groups, family style, low-noise, serve appropriate food for age).
	INAPPROPRIATE REACTION TO PAIN	Give verbal feedback that indicates appropriate reaction to pain (i.e., "You fell down - that must have really hurt!" or, "You got a little bump that time? It's not bleeding, though.")
	SUICIDE/DEATH THREATS (MOSTLY WITH OLDER CHILDREN)	Take all threats seriously; reaffirm your caring and <u>refer</u> .
	EITHER VERY FEARFUL OR NO FEAR (FEAR OF PARTICULAR PERSON/ PLACE)	Give child verbal feedback about behavior and or your own reaction (i.e., "When you try to jump off the top, it scares me.") Encourage (not force) child to expand on/tell about origin of fear.
	UNABLE TO DIFFERENTIATE BETWEEN STRONG/MILD EMOTIONS	Give child feedback about emotional expression and how to appropriately express them (i.e., tell her, "That makes me mad!").
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SELF-ESTEEM/SELF-IDENTITY

(Question: Who am I? Am I okay?)

UNABLE TO LEARN IDENTITY SKILLS (LAST NAME, ETC.)

Make self-concept activities a part of year-round curriculum, not a unit. Teach self-identity skills in a variety of ways (visual, auditory, tactile) - practice. Name games/songs.

OVERLY COMPLIANT (COMPULSIVE NEATNESS)

Avoid harsh discipline. Encourage and reinforce childlike behaviors (i.e., "Do you want to run to the fence or ride the bike - choose.") Reward! Make simple choices available to encourage self-confidence.

FEAR OF FAILURE/"I CAN'T SYNDROME"

Minimize competition. Avoid negative comments/statements. Break tasks down into small steps. Praise/support efforts to try (i.e., "I'll sit next to you while you try.") Lots of open-ended activities - no "product". Give non-verbal and verbal approval at frequent intervals for small steps.

LACK OF EYE CONTACT

Speak to child at eye level. Have child's attention before speaking. Do not force child to look you in the eye. Use an object to get child's attention before giving verbal directions. Do looking/eye contact activities - practice!

DENIAL OF ANY EMOTIONS

Label your own feelings - model a variety. Give feedback about feelings (i.e., "You look sad right now.")

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SELF-ESTEEM/SELF-IDENTITY
(CONTINUED)

UNABLE TO MAKE OWN CHOICES

Offer limited choices (i.e., 2- "Do you want orange or grape juice?") Be patient - give time to make choice. Only give choice when there IS a choice (eg, make them REAL choices!) Classroom environment should encourage choices and success. Give familiar choices - at least one choice something really fun!

AUTHORITY/POWER/CONTROL
(Question: Do I have any control over my life?)

PHYSICALLY/VERBALLY AGGRESSIVE
PROVOCATIVE BEHAVIOR
DEFIANT BEHAVIORS

Acknowledge child's feelings. ("You are mad right now.") Give appropriate behavior options (i.e., "If you want to paint, you need to wear an apron; or, you can go and use Playdough.") Follow through! Lots of clay/woodworking/punching bag/pillows for aggression release. Model expression of anger verbally (at behaviors). Not physically aggressive.

TEMPER TANTRUMS

Keep safe if out-of-control. Restrain only if needed, and not punitively. Times out should be short and someone should be with child until he or she is back in control. See above.

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AUTHORITY/POWER/CONTROL
(CONTINUED)

DIFFICULTY WITH TRANSITIONS/
CHANGES IN ROUTINES

Give warnings of up-coming transitions. Give child specific tasks/directions to do during transitions/changes. (i.e., "Put the puzzle on the shelf, then go sit at the table").
Give child input verbally about what other children are doing during transitions. Give child reasons for upcoming changes/transitions.

EATING PROBLEMS (SITTING STILL,
REFUSAL TO EAT, ETC.)

Meal times should be comfortable and conflict-free; not a power struggle.

FALLS APART AT ADULT INSISTANCE

Be consistent, but supportive (i.e., "You need to pick up the blocks and put them in the bucket. I'll stay with you until it's done - then we can go to the g.m.") Acknowledge the child's frustration/difficulty.

SHAME/GUILT/ANGER

(Question: What do I do with these overwhelming feelings?)

PHYSICAL HEALTH PROBLEMS
(FREQUENT)
(and poor attendance)

Monitor health care and document; refer. Check up on absences - document reasons.

WITHDRAWAL

Avoid harsh discipline. Stay near child and talk about what other children are doing. Offer support to do activities. Reinforce.
Provide materials that allow for solitary and parallel play as well as cooperative. Assign 1 - 2 adults to bond/attach.

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SHAME/GUILT/ANGER
(CONTINUED)

DISASSOCIATIVE RESPONSE TO OWN FEELINGS

Give verbal feedback about child's emotions and other children's feelings. Do stories/puppet activities about feelings that model expression and give "OK" message.

SELF-ABUSIVE BEHAVIORS

Give children firm limits about hurting self/others and appropriate expression of emotions. (i.e., "You can not scratch your face or Sarah's; if she sits on your chair you can tell her 'mine - move'"). Do self-esteem/feelings activities; do stories about ways to express negative feelings.

VIOLENT/UNUSUAL PLAY BEHAVIORS
(IE, BURNING BABY IN OVEN)

Give appropriate choices for expression of emotions (i.e., "It's not okay to put the baby in the oven - you can put the baby to bed or ask me to babysit if you need a break.") Give pillows to beat - have woodworking or pounding activities. Do not reprimand for violent play - model positive play.

RIGID PLAY BEHAVIORS (REPETITIVE,
UNABLE TO EXPAND)

Structure expansion of play - build in repetition and break down tasks. Reinforce. Minimize distractions. Teacher must initially play with child and model play behaviors - activity involved in child-child interactions and play. Give lots of verbal input of others' play.

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SHAME/GUILT/ANGER (CONTINUED)	DENIES ANY ACTION UPON QUESTIONING	Don't force issue - offer opportunities to talk later.
	NIGHT/NAP DISTURBANCES	See SAFETY - Night Disturbances.
LOYALTY/DENIAL (Question: Will you love me if I tell? Will I lose you if I tell?)	DENIAL OF OWN FEELINGS/EVENTS	Accept child's response - don't force! Give verbal feedback of child's emotions (i.e., "You look really mad right now.")
	TAKE ON OTHERS' BLAME	Reassure child it's not his fault (i.e., "It's not your fault Mom and Dad are fighting - they have to work out their own problems.") Own your own feelings. Model.
CONFUSION (Question: What happened?)	INATTENTIVE, WANDERING/SPACY	Avoid overstimulation; reduce noise. Minimize unstructured time. Limit number of choices of activities. If child can't choose, lead to activity and engage - reinforce and back off to observe.
	CONFUSED INFORMATION ABOUT OWN SITUATION/EVENTS	Accept that child will give different details/stories; document each without opinion. Ask open ended questions encouraging child to share own understanding (i.e., "Why do you think you're not living with Dad right now?")

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