less heat, more warmth...

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I like stories. I particularly like true stories that have about them a sense of unreality, stories that leave the listener wondering whether they've just been privy to someone's weird life experience, or have simply been entertained by an urban myth. This following story is true. It is a story that I have told many times to teacher groups at workshops and seminars to illustrate an important concept.

Here's the story:

Many years ago a close friend of mine was enrolled in a "body work" course. During one of the workshops on this course, participants were asked to lie on the floor and get into a meditative state. When they were about five minutes into their relaxation, just as they were experiencing a wonderfully sublime state, the teacher slammed two saucepan lids together. Such a thunderclap had the obvious effect. Some people swore at the teacher, others sat in bewildered amazement, while a fair few were in tears, too startled to speak. The obvious question, "Why?" was demanded of the teacher. She explained, rather perfunctorily, that she wanted them to experience what she called a "startle reaction." I guess they did.

After a short time was spent processing how the participants had felt about what

had happened, she asked them to again lie on the floor and meditate. Trusting lot that they were they complied, only this time they were forewarned that in three minutes she would bash the saucepan lids together. After about two minutes people started to get unsettled, the fidgeting became more obvious and the general restlessness more pronounced. The atmosphere became increasingly charged as the three minute deadline approached. About a half minute after the deadline had elapsed the sense of anticipation became excruciating, so much so that someone finally snapped and yelled out, "Slam the bloody lids together!" It was only after the lids had been banged that participants began to

Leaving ethical considerations of this experiment aside, how is this story relevant to our management of some children who have emotional or behavioural problems? Quite simply, it is to do with expectation and belief. If we substitute the saucepan lids for a regular clout over the ear, belittling cruel statements or constant ridicule, then we can gain a small (very small) measure of understanding of the expectations of these children.

If a child has grown up in an abusive environment – either physically or emotionally – then that child will carry around a 'memory store' (Dodge, 1986) of what their world is like. And for such children their world is a none too pleasant place. When these children experience a temporary reprieve from such abuse, such as when they go to school or come to

Redbank, locked into their body and mind is the strong belief that the world is a dangerous place, that adults cannot be trusted, that adults abuse. It is not uncommon for them to expect that the abuse will continue and will go about trying to recreate the abusive environment from which they've come. Just like the poor fellow who wanted the saucepans lids hit together to ease his sense of anxiety, these children will go around with a sense of dreaded expectation that

"The better the behaviour you expect, the better the behaviour you will get..."

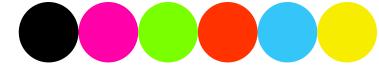
may only be temporarily relieved by having adults conform to their negative view of the world, the belief that adults will eventually hurt them in one way or another.

How can we deal with this? An obvious initial strategy is that of being aware that this can actually occur. That these children can use intimidating tactics, provocative gestures, hurtful, cruel and foul language in an attempt to get the adult to fulfill the abusive role. Knowing this is the first stop in preventing ourselves from reconfirming the child's world view. By seeing the child's provocative actions for what they are, can allow us to approach these children with less heat and more warmth. Implicit in some of these provocative actions is the notion that the children are also testing you to see if you can be trusted not to hurt them and not reject them.

Remember, when dealing with these kids don't be surprised if their behaviour gets worse before it gets better. In fact, expect it to.

Another useful strategy is that of having some stock phrases or planned language at the ready. Such language is of particular importance when we feel under pressure and are not sure of what to do next. When dealing with these children we need to come from our head (planned) and not from our gut (reactive). Rather than get into a power struggle with the child and threaten something in the heat





of the moment that we cannot follow through later, or threaten something that is punitive and only serves to reconfirm the child's hostile view of the world, it is better to say something that allows both the child and the adult some time to cool down. Something that provides an opportunity for both to reflect upon what is happening. An example of one such phrase, which I use quite often with oppositional children who continually refuse to follow instructions is: "I want you to make a good choice, so you will need to follow the instruction. I'll give you a couple of minutes to think about it and I'll come back and check on you."

This provides some breathing space for the child to think about their actions and, more importantly, shows the child that despite their having behaved in a provocative and challenging fashion, the adults around them will remain calm (outwardly at least) and not become hostile towards them.

Further, it allows the adult to work out what they will do next. The adults, by behaving in such a controlled manner, are modelling to the child a different way of being in the world. They are showing that, even when under pressure, adults can still be caring, supportive and nurturing, while at the same time being firm, persis-

tent and consistent. Even though it may be difficult to discern in some children any behavioural or attitudinal change while they are at Redbank, the effects of modelling appropriate behaviour is powerful and should not be underestimated.

As important as the child's expectations of the world are to them, are the adult's expectations of what they believe the child can – or can't – achieve. The better the behaviour you expect, the better the behaviour you will get. Always expect a lot. And leave the saucepan lids in the cupboard.

resources...

- Alive 90.5 fm Australian Spectrum with Ross (Your Editor of the Global Gazette). Proudly sponsored by Global Disability & Health Care Services. Tuesday night 9 to 12 pm for all Australian blues, roots, jazz, folk, indigenous and contemporary music. Studio guests. Blues, Folk and Jazz Gig Guide. tomorrow's weather today and music. Internet Radio Streaming worldwide online at www.alive905.com.au [follow the Listen Live links]
- Fragile X Syndrome- Clinical and Molecular Aspects (2009) Version 2 is a stand-alone interactive CD-ROM integrating the genetics and clinical features of fragile X syndrome. It is produced by Associate Professor Sylvia Metcalf from the University of Melbourne and Dr Jonathan Cohen from the Fragile X Alliance. The program covers clinical diagnosis, laboratory diagnostics, and personal perspectives and includes high quality media such as videos, animations and interactive images from Australian families. Multiple choice questions, glossary of terms and references are also included. This program will be useful for students studying human genetics, medical and biomedical courses, and for continuing professional education. Available from the Fragile X Alliance Inc for \$44.00
- The Australian Institute of Health and Welfare's Mental Health Services in Australia website has been updated. The website
 describes the activities and characteristics of the wide range of health care and treatment services provided for people with
 mental health problems in Australia ranging from general practitioners to psychiatric disability support services. http://
 mhsa.aihw.gov.au/services/.
- The MindSpot Clinic is a free telephone and online service for Australians with stress, worry, anxiety, low mood or depression. It provides mental health screening assessments, therapist-guided treatment courses and referrals to help people recover and stay well. The MindSpot Clinic is fully funded by the Australian Government Department of Health and Ageing and its team includes psychologists, psychiatrists, social workers, and indigenous mental health workers. Visit www.mindspot.org.au.
- Siblings Australia have set up a new closed Facebook group, 'SibChat', for adult siblings to share experiences and information about services that might be helpful to them or to their brother or sister with a disability or chronic illness (including mental illness). Visit http://www.facebook.com/groups/209185819206044 or search SibChat on Facebook.
- Carers NSW has a free six week group counselling program called Talk-Link. The program is run over the telephone and is
 free for carers from across NSW. Using teleconferencing, a group of six to eight carers and two trained facilitators get together over the telephone, at the same time each week, to explore issues around caring. The program runs for six consecutive weeks with each weekly session lasting for one hour. Contact 1800 242 636 or email nccp.admin@carersnsw.org.au.
- Small Steps is a program that aims to raise awareness and improve the recognition of anxiety disorders in children. It is a free community service run by the Mental Health Association NSW. They offer free 'anxiety awareness' seminars for primary school staff (teachers, principals, administrative staff) and parents. A Small Steps seminar will usually run for about an hour and can be held at your local school. To book a small steps seminar for your school staff or parents contact 02 9339 6088 or smallsteps@mentalhealth.asn.au.
- Shoalhaven Special A's (SSA) is an athletics based program designed specifically for children with special needs. The focus is on having fun, improving fitness and developing skills in a safe, relaxed environment. SSA is run by members of the Nowra Athletics Club and volunteers from the Shoalhaven Community. Term 2 Program starts on 6 May and ends 24 June. Sessions are held on Monday afternoons at Willandra. For more information phone 0432 256 030 and speak to Julianne or email info@shoalhavenspecialas.com. There is also a website www.shoalhavenspecialas.com.
- Disability resources in community languages are available from NDCO. There is information about the NDCO program in Arabic, Chinese, Dinka, Filipino, Hindi, Khmer, Urdu and Vietnamese. There is also information about disability, and support for students. Information can be found at http://pubsites.uws.edu.au/ndco/links/resources.htm#five
- The Royal Australian and New Zealand College of Psychiatrists (RANZCP) have launched a new 'Find a Psychiatrist' online directory. It includes details of consultant psychiatrists in private practice. Visit www.ranzcp.org/find-a-psychiatrist.