Parenting a Difficult Child (Parenting Techniques)

We would like to share with you some parenting techniques that we have found to be helpful with children with special needs. Our children are often very complicated, they often have multiple diagnoses. The following list are basic techniques that are used with FASD, Autism, Attachment Disorder, Childhood Trauma, ADHD, Turrets, Oppositional Defiance, and even some of the mental health diagnosis.

Eventually you need to learn parenting techniques specific to your child’s diagnosis. You will need to learn about your child’s specific disability.

This teaching is broken down into 5 parts. The first has to do with your thinking process. The second with hands-on parenting techniques. The third with things you can help them to do which may help their behaviors and thinking. The fourth are things they should not do, these things will only make things worst. Lastly some basic thoughts.

1: Changing Your Thinking:

• Traditional parenting techniques often do not work when raising children with special needs. I have had many parents tell me that they had raised several children successfully. They are doing everything the same and it is just not working.
• Being calm – The less said and the calmer it is said usually the more effective it is. You being calm can help them to be calm. Try hard not to over react to their behaviors. Your not being calm usually makes them react even more.
• Do not shame them for their actions. Shaming very seldom helps, it only causes hard feelings on both of your parts.
• Do not blame them for their actions. Learn the difference between Won’t and Can’t. Won’t is defiance, their refusal to do right. Can’t is not doing right because of their disability. To make it even more complicated sometimes they can do right and at other times because of their brain, they can’t. I try to be compassionate and to not judge their heart.
• Love them – even when you don’t want to and when they don’t want you to love them.
• “Just the Facts” – don’t judge their heart. Whether it is because of their brain damage or not, it does not matter. Either way, they need more
protection. This usually means more supervision. The number one consequence in our home is closer supervision. All too often I thought my child’s action was defiance or laziness to later decide it was part of their disability.

- Relationship parenting – trying hard to be calm, not judging their heart as why they did something, remembering they have a disability, at times just ignoring a behavior, compassion, talking to them about what happened, often using delayed parenting (more on this later), and try hard to maintain communications – even when neither of you want to.

- Delayed parenting – This is waiting until you have time to sit down and gently have a calm conversation about what happened. This is waiting until it is convenient for you. This is giving them time to process what happened. This is waiting until they have a chance for their brain to shift to a calm position. If you try to talk to them when they are nervous or upset, they will deny, lie, or get angry.

- Consequences are not meant to “get them” but they are meant to change their behaviors. I prefer talking to the child about what happened, (sometimes using “Delayed Parenting” - see above).

- At times, I feel parents want revenge for what their child is doing. I’m not sure it is really revenge. I think it is frustration. As parents we simply do not know what to do. We try, and try but we think it simply doesn’t work. Nothing seems to. We think that if we give them more consequences, harder consequences, yell louder, get madder, that this will some way get through to them. This tends to only make them more nervous, causing their brain to either shift deeper or make the shift lasts longer.

- Outcome based programs which require the individual to constantly achieve at predetermined levels, seldom work in the long run. They may work in the beginning and again periodically but your child may truly not be able to succeed.

- Do not blame professionals because they can’t fix your child, even if they are blaming you. Remember, you are going to them because you couldn’t fix your child either. Instead, you need to help educate them so that everyone can stop blaming and then work together to make things better.

- Do not take personal their behaviors nor their verbal attacks, as one person said, “If I had understood the level of their disability I would not have taken personal their attacks.”

Do not let them get away with bad behaviors. Parents need to look at bad behaviors in a different way. We need to look at those behaviors as brain shifts. It is part of their disability. Someone may argue, “but what if it’s just them being bad.” The truth is it does not matter. I try very hard not to
judge their heart. I try to deal with “Just The Facts.” If what they did was because of their disability then they need more protection. If what they did was because they were being bad, they need more protection. Protection usually means more supervision. You will feel like a failure at times. That does not mean that you are.

- It has also been noted that in a few cases, children who have had severe trauma early in their lives may have more extreme behaviors. After awhile, they may be able to adapt and function in the structure provided in their new home. However, during adolescence, they may actually revert back to the types of behavior that they were demonstrating prior to your structured environment. The problem is that these kids are now functioning at a higher level, so the behaviors will be more advanced and possibly more dangerous. Recognize these behaviors for what they are and be ready to ask for the help that you will definitely need.

2: Hands On Techniques:

- “Adults Talking” - Talking about the kid in front of the kid as if they are not there. Do not allow them to say anything, unless at the end you ask them to. This allows the kid time to process what is being said without them trying to defend themselves.
- Re-runs – when they have a bad attitude or do something wrong, role-play the correct way. We often do this when we, as parents, have flared out of frustration. We simply say, “Let’s try this again.” At times if they do not know the right response we will even model it for them first and then have them do it.
- Be painfully honest with them about their socially unacceptable behaviors and their disability. As you are teaching them be as gentle and loving as you can. Realize you may have to point these out hundreds of times. Do not let them get away with hurting you or others. It is extremely important that they learn that they cannot get away with hurting people or animals.
- Door alarms – can help a kid gain self-control. It can help a parent sleep at night. It is necessary when there is a concern about sexual or physical safety.
- Be aware of their physical, mental, and sexual vulnerability.
- “Sitting on the bucket” – This just means having them stay close to you. You can use a chair. We use a 5-gallon bucket with a lid because it is easy to move around. We use this for younger children.
- “Home Base” – when a child is having troubles with behaviors or self-control have them stay in a central location (often that means staying at the
table) so you can keep an eye on them. They need to ask permission to leave that area.

- A “level system”.
- Team approach – Having Services – If the team understands their disability this can really help.
- Teaching life skills – this is doing them a favor. Teach them what the daily tasks are and how to do them.
- “Tag Team Parenting”- If there are two participating parents in the home it can makes parenting a lot easier. You can give each other a break. You can come running when you hear the other one getting upset. You have someone to bounce ideas off of and to help make discussions.
- Protection, protection, protection – you cannot always do this but you must try. Try to set up safety nets. At times give them enough freedom to blow it. I’d rather they blow it when I am still very involved in their life so we can hopefully teach them how not to do it again.
- Moral and educational training daily. The moral training should include life situations while the educational training should include functional life skills. Teach them to clean house and cook and do dishes almost daily. Teaching them to work is important. Having daily chores helps train them for their future.
- Forgiveness - both you and them need to ask for it and receive it.
- Sexual safety is a must.
- Find the trigger – what sets them off.

3: The following are some simple steps which may help them:

- Eating well - eating whole foods not processed foods, not eating sugar or drinking soda pop (not even sugar free).
- Choosing friends who will encourage them to do well in life. They need to choose friends who are doing well, who have positive goals and are moving towards their goals. Who they choose to be friends with is one decision that is most likely to either cause them problems and get them into legal trouble or help them make good choices that keep them out of trouble. It is also a choice that can help them achieve their goals.
- Getting plenty of sleep on a regular schedule. This means that they shouldn’t normally stay up past midnight and then sleep past 9 am - unless their job schedule demands it. It can be helpful to let them sleep in one day a week.
- Pushing themselves to go beyond doing “just enough to get by.” If they can’t do this on their own, then you and others will need to
push them to function at a higher level.

• Do things that will raise their executive functioning skills.
  By raising their executive functioning skills they will be better able to stay focused, plan, organize, follow-through and cope. This can lead to improved choices and behaviors. (See our website www.hayskids.org for specifics about this.)

• Working on goal setting and life planning.

• Working on getting organized. This includes using “to do” lists and a calendar.

• It is important that they have purpose in life.

4: Things they should not do, these things will only make things worst.

When they are doing the following things, or choosing friends who are doing these things, they will actually make things worst.

• Drinking
• Drugs
• Smoking
• Eating too much junk food
• Staying up too late
• Going to jail
• Sex outside of marriage
• Having “Hanging Out Syndrome” (See teaching at hayskids.org)
• Playing violent electronic games or watching violent movies

5: The following is just some basic information:

Adolescence is often a very hard period for them and for you. Author David Walsh says that structure will help them. He tells parents to stay connected. He says, “don’t give them a divorce even when they want one.” I know often times, for myself and many parents, we want to just say, “Oh, forget it,” and just leave them alone during this time. This is not the right answer. They need help; they need you to keep communicating, to keep connected. They need structure, and they need to learn about adolescence.

If your child is having trouble and does not have a diagnosis that explains their problems, then get one. The ultimate goal of getting a diagnosis is to help the individual with a disability to live a better life by reducing
secondary disabilities. This will be done through services, education of the person, their parents, their caregivers, and the community. In order to accomplish this, the first step is a diagnosis. I have had parents asked me, “Why would I want to get a diagnosis? The diagnosis will just label my child.” Individuals with disabilities often are going to get labeled. They will be labeled by classmates, teachers and community members. There will even be times that they will be labeled by you. All too often they will be labeled as being lazy, a troublemaker, oppositional, a sexual pervert, stupid, liar, cheater, thief, and many other things. So, instead of labels that serve no purpose other than name-calling, let’s give them a label that can help them get services. With proper education, it can help others understand them, especially their parents, caregivers, and most importantly, help them understand themselves.

Team Approach - Put together a team of people to help them. Train your team about their disability. The team could be made up of people from the following areas: education – mental health – social services – medical – advocate – parent – criminal justice – sports coach – youth leader from an organization such as YMCA, 4H, scouts, mentors - pastor, or elder from a church – an adult friend – a mature sibling - relative – other service providers.

Services
Remember a team approach is very important. Using appropriate services can help everyone. Most referrals come from either a doctor, the school, or from a parent seeking testing or services. For public service help contact your county human services office, and ask for the in-take worker. The most common public agencies that you will be referred to are Developmental Disabilities, Children’s Mental Health Case Worker, Adult Mental Health, or County Health Department. You may also be fortunate to live in an area where you have access to private agencies that can help. Some individuals with disabilities qualify for Social Security. These agencies will then either help you and/or refer you to other public agencies or to private organizations. You can go to our web site for a list of service providers. For a listing of Minnesota resources go to MOFAS or for a national listing go to NOFAS.

Sometimes the person with a disability is eligible for medical assistance or
for a waiver regardless of the family’s income. (Ask someone for help with this). A waiver is a funding source that is often used to pay for assisted living, respite, staffing, adaptive changes, and services.

Counseling
When I mention counseling, many parents will often show strong emotions of disgust. Many feel it has simply not worked and often times made things worse. All too often, parents have felt the counselor did not understand their child’s disability and made life harder for their child. If you get the right counselor, they really can help. It is good for a person to have someone to talk to in addition to his or her parents.

When choosing a counselor, interview them first. Find out if they understand your child’s disability or if they are willing to learn about it. You need a counselor who will listen to you and not make decisions based solely on what the individual with FASD says. The counselor will need to be reminded that there is organic brain damage and the counselee may not recognize or want help and is likely to blame others for their own difficulties.

A counselor can be an important part of the team; they can really help. Try to find a counselor who meets these criteria.

Criminal Justice System

With some disabilities all to often you are going to be involved with the criminal justice system. So, as parents, we need to educate ourselves on how the legal system works.

Often a family’s first encounter with law enforcement is when they call for help. By the time the officer arrives things may calmed down and the officer sees it as just a normal domestic problem. The officer talks to the kid for a while and leaves. Ideally the parents need to meet with law enforcement to talk to them about your child before that first call for help. This will mean that you need to call the department and make an appointment with a supervising officer, perhaps the chief or sheriff. This officer will then be able to decide who you will work with to put a plan together. Parents need to have notes written in their kid’s file, so if law enforcement is called or if
their child is arrested, law enforcement will have the plan you worked out together.

If you have to go to court, it does not work to simply tell the judge that your child has a disability and locking them up will not work and that it may even make your child worse. What you need to do is work out a very detailed plan to present to the judge. Depending upon the offense, the plan might include house arrest or living in an assisted living center. It often includes therapy and either education or work goals. It might also include probation.

Hope: We need to teach them, train them, and try to prevent bad behaviors, bad attitudes, and emotional upheavals. This will take consistency and usually many, many, many repetitions. We have to be aware that, at times, whatever we have taught may not work. We must try. Do not despair. You are involved in a most difficult parenting task. Hope can be found in a support group. Hope is found when you understand their disability. Hope is found when you recognize your own limits, which allows you to ask for and accept help. Hope is found when you can remain calm and not judge your kid’s heart. Hope is found when you teach not only your kids but the professionals as well. Hope is found when you continue to learn all that you can about their diagnoses and then advocate for your kid. Finally, you will find hope with your unconditional love. Remind yourself that they have a disability.