



Signposts

for building better behaviour

Early Childhood Intervention Supplement

Facilitator Notes

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About the Early Childhood Intervention supplement

This is one of a series of supplementary materials for the Signposts for Building Better Behaviour parent program. It is divided into Parent Notes and Facilitator Notes. It is to supplement to the existing Signposts for building better behaviour parent program and Facilitator manual. It is not a stand-alone program.

The Parent Notes are for parents of children aged under six who have developmental delay or disabilities. The notes are designed to help parents get the most out of the Signposts program. The Facilitator Notes are primarily to assist facilitators who are not experienced in working with this group of young children.

Development of this supplement was funded by the Victorian Government Department of Education and Early Childhood Development.

How to use the Facilitator Notes

Facilitators should become sufficiently familiar with the content of the Parents Notes and the Facilitator Notes to be able to draw on the content whenever the opportunity arises during the process of engaging parents, delivering the program or following up after program delivery.

Before you go any further, please read the Parent Notes. They should be read alongside the standard Signposts for building better behaviour modules.

Why is it important to offer parenting programs to families of young children?

Research from around the world emphasises the importance of early childhood experiences on the trajectory and outcomes of children’s overall development. Parents are the key people in the lives of young children.

In Australia the national and state governments have developed a national Early Years Framework (Victorian Government Department of Education and Early Childhood Development, 2009) to support the development of all children from birth to five and their transition into school. The national and state frameworks outline principles for service delivery and outcomes for all children, including those with developmental delay or disabilities. These frameworks recognise that children who have developmental delays and disabilities and their families will require extra support, and a range of Early Childhood Intervention Services are funded as part of this support (Australian Government Department of Education, Employment and Workplace Relations, *Early Years Learning Framework*, 2009).

Early Childhood Intervention services are for children from birth to school age who have a disability or developmental delay and their families. The overall aims of early childhood intervention services are to provide parents/carers with the knowledge, skills and supports to optimise their child’s development and their ability to participate in family and community life.

Services funded by governments in Australia focus on building the capacity of families to promote their child’s learning and development, and their work is guided by principles of family-centred practice.

Family-centred practice recognises the following:

- » families are the child’s first and most important educators
- » families are the primary decision makers for their young child
- » families have the ongoing relationship with the child
- » families know their child best
- » families understand their own family circumstances and needs best (Victorian Government Department of Education and Early Childhood Development, 2009).

Signposts is an example of family centred practice in action. It is a resource that helps parents to develop effective ways of preventing or managing their child’s difficult behaviour and promoting adaptive behaviour.

Feedback from parents of young children who have participated in the Signposts program indicates that they have had positive outcomes for their child and other members of the family. This includes reports that their own experiences of depression and anxiety are reduced, their competence and confidence in their own parenting increases. Overwhelmingly they report that their children’s behaviour has improved (Hudson et al., 2003, 2008 & 2009).

Helping families facilitate adaptive behaviour in their children optimises inclusion of both children and parents in their family and community environments.

The next section of these Facilitator Notes focuses on process issues, followed by a section on the details for preparing and delivering each module.

Process issues

Two process issues are critical to the successful facilitation of the Signposts program: understanding the implications of expecting parents to commit to a process of change, and providing parents with the tools of self-regulation.

Process of change

Individuals bring many skills, experiences and expectations to parenting. These are modified by their experiences in their parenting roles. Part of what programs such as Signposts expect of participants is that they are prepared to assume responsibility for change. That is, they need to understand that change in their own behaviour is a precursor to change in their child's behaviour. It is the role of the facilitator to enhance parents' motivation by creating conditions which help them initiate and then maintain their behavioural changes.

Parents must have the opportunity to understand and weigh up the costs and benefits of this change. Most will only endure the discomfort that is often associated with change if the goals they are working toward are personally meaningful. They will only persist with making changes if they perceive that the benefits of the outcomes outweigh the costs. There are elements within Signposts to assist with the process of change, for example, asking parents right at the beginning to choose one or two behaviours they want to work on and the strategies in facilitator training around goal setting.

Prochaska and Norcross (2001) describe stages of change as moving from Precontemplation through Contemplation, Preparation, Action, Maintenance and Termination. Termination is where no further need to work to prevent relapse. Entry to a parenting program can be considered an example of Action.

Facilitators can start to promote parent motivation by providing cues, such as identifying parenting programs as an option when families raise concerns about their child and advertising opportunities for parental education such as parenting groups. Also, parents' motivation can be enhanced by reinforcing any observable behaviour such as an expressed interest in parenting education. Once parents are engaged in the program, facilitators can reinforce any small steps they take such as attending sessions and contributing to discussions as well as attempts to use the strategies taught and their reports of small amounts of actual change in their own and their child's behaviours.

Self-regulation

Perhaps the most powerful skill facilitators can offer parents is self-regulation. As discussed in the module *Dealing with stress in your family*, most of us are very good at telling ourselves what we have done wrong, rather than what we have done well, which reduces our sense of efficacy and motivation to try alternatives. Self-regulation allows participants to recognise what they do well, and to build on it. In turn, this increases motivation and a sense of confidence and competence, hence improving the chances of program completion and positive outcomes for parent and child.

In general, self-regulation is a process of thinking, planning, problem-solving and decision making. When applied to practising new skills while participating in Signposts, it involves a participant understanding what it is they are setting out to do (e.g. give clear instructions), carrying out the task, reflecting on what they did (self-monitoring) and reporting what they did well (positive self-reinforcement), then identifying if there was anything they would do differently next time (self-correction).

An important facilitation task is to prompt and provide feedback on parents' attempts at self-regulation. When parents experience for themselves and observe in others positive examples of self-regulation and their efforts are reinforced (corrective if necessary, and affirmative) by the facilitators, it enhances their capacity to manage their child's behaviour as well as their general every day coping skills.

In addressing these issues, the role of facilitators can be summarised in the following ways:

- » developing genuine partnerships with parents
- » assisting parents to assume responsibility for change by supporting them to apply their own values and set goals accordingly
- » using a bottom up approach to monitoring progress, ensuring that methods are feasible for the client, and provide useful information about desired changes
- » attending to factors which might inhibit or facilitate parents' changes
- » holding open discussions of strategies and emphasise parents' choice in what they try out
- » training in active skills: modelling, practice in sessions, self-regulation and strategic positive feedback
- » consistently expecting and reinforcing parents' use of self-regulation
- » contributing to effective skills implementation, improved self-confidence and competence, enhanced coping and generalisation of skills
- » promoting generalisation: planning for future situations
- » preventing relapse: discussing realistic expectations for the change process, assisting parents to prepare for setbacks, plan for the future.

Preparation for program delivery

Facilitators must be familiar with all elements of the Signposts program: the standard parent materials and Facilitator Manual as well as the supplementary Parent Notes and Facilitator Notes.

You need to understand the standard Signposts program sufficiently to use examples from the family or group to teach or highlight key points as well as being able to generate relevant examples yourself to teach key points. Two sample action plans are included in the next section to help you with this.

You need to be sufficiently familiar with the content of the Parent Notes and examples of behaviours and strategies that you can describe in appropriate language, so that you are able to help families understand how the key points in the Signposts program are immediately relevant to them and their situations.

Once you are familiar with the content of the parent materials (standard program modules, DVD and supplementary Parent Notes), it is recommended that you read all sections of the Facilitator Notes.

If you are not experienced in early childhood intervention make a copy of a blank action plan from the parent workbook, and work through one or two examples of an action plan for a hypothetical young child. This will help you be alert to language or issues in the program that you might need to consider before you work with this group of parents, and help you become more fluent in examples and language appropriate for this group.

It is recommended that you ask an experienced early childhood Signposts trained practitioner to comment on your actions plans. Check the Signposts website at www.signposts.net.au for active practitioners, or contact signposts@parentingrc.org.au if you do not know of an experienced early childhood facilitator.

You may also benefit from further reading. It is strongly recommended that you co-facilitate a program with an experienced early childhood facilitator before you independently deliver a program with this group of families.

Modes of delivery

All trained facilitators are able to offer the Signposts programs to families using any of the three modes described in the Facilitators Manual, or as a 1:1 face-to-face program. Use the guidelines for group delivery when delivering an individual face-to-face program. These guidelines are appropriate even if there is one participant, and often what is referred to as a 1:1 program includes more than one family member and/or other carers.

Parents consistently report the social and psychological benefits of participating in groups of others who are dealing with circumstances similar to their own. If you are thinking of offering Signposts in a group, you need to consider the skills required for running groups as well as your familiarity with the content. Refer to the Signposts Facilitator Manual.

Parent engagement

Parents are more likely to seek or accept offers of intervention at transition points in their children's lives. Therefore, it is sensible for services to offer Signposts routinely as part of enrolment or transition processes, for example, school entry. Routinely offering the program normalises participation and can provide preventative or early intervention. Participation in the program as part of a transition process also enables parents to meet each other and to understand that the agency, particularly if it is an early childhood intervention program or school, has a systematic approach to managing behaviour. By offering Signposts to families they have ensured that there is a shared language and expectations therefore enabling real partnerships.

A number of agencies have found that holding an information session encourages parents to find out about the program without feeling that they have to make a commitment. It usually results in program being fully subscribed. Information sessions often include an outline of the program, proposed starting dates and times, and some other activity that will attract the particular target group, for example, using content from *Dealing with stress in the family* and provide a relaxation or pampering session (preferably provided free of charge by the local beauty training college). A Signposts promotion session can also be offered as part of a general information or transition session for parents considering enrolling their child at a particular school.

Parents who have previously participated in the program are often its best advocates. Showing snippets of the Signposts Parent Perspective DVD may suffice if you are unable to have a parent speak. Written comments from parents on the invitation or discussed at the session might also assist.

Setting up a program across agencies potentially provides facilitators with support and increases the pool of participants. Reciprocal arrangements between agencies means that, over time, families have a choice of program times, dates and locations.

As a rule, setting a date and times or providing a choice between two dates and times works better than canvassing preferred dates and times widely.

Program participants

Signposts was originally developed for families with a child aged 6-18 years who has intellectual disability and difficult behaviour. Since its initial trials this program has been used by families of preschool children and during the Statewide project in 2005-07 it became increasingly clear that Signposts was acceptable and useful to parents of children with a wide range of disabilities that are associated with difficult behaviour (Hudson et al., 2008 & 2009). Overall, participants appear to prefer groups where other parents have children of a similar age, but do not have particular preferences for homogeneity in terms of type or level of disability, or other characteristics.

The vast majority of program participants have been mothers, though the proportion of fathers is increasing over time. Other family members are also represented. The largest single group outside families has been integration aides.

Parents from a range of culturally and linguistically diverse (CALD) communities have participated in general and culturally specific Signposts programs. A number of programs have been run using interpreters to work with individuals in the group and a few where the delivery of the whole program has been translated.

A small number of Aboriginal and Torres Strait Islander (ATSI) families have participated in general Signposts programs, and a culturally specific training program was developed for support workers. Early in 2009 a parent group was run by trained ATSI facilitators.

Evaluation

Process and outcome evaluations are key components of good practice for delivery of any intervention. For Signposts, process is about what the facilitator offers and what the parents do, and outcome is about changes in the parent or child behaviour.

Initially, facilitators need to know enough about participants who are starting the program to be reasonably confident that this is the right intervention at the right time for each individual. It is important to gather information during and following the intervention to ensure that it is doing no harm and in fact is making a positive difference.

The Facilitator Manual provides a number of evaluation measures that are useful to identify participants who may have high support needs as well as assessing program outcomes. Details for scoring these measures are in Section 4 of the manual, and you can download Goal Achievement Scale (GAS) forms and GAS calculator from the Signposts website.

As a minimum, it is recommended that the following measures are used:

- » Program adherence checklist
- » Attendance list
- » Depression Anxiety Stress Scale
- » Goal Achievement Scale.

The other measures included in the manual can be used depending on the particular needs or concerns of participants and overall objectives for using the program.

Number and timing of sessions

The standard Signposts program has six sessions: Five fortnightly sessions where the content of the program is discussed and parents plan and implement their intervention, and the sixth as a review of progress. Many families are comfortable with the pace of this delivery and are happy to read and apply the *Your family as a team* and *Dealing with stress in the family* modules independently.

The value of these *Stress* and *Team* modules, particularly for families whose children have relatively recently been diagnosed as having developmental delay or disability, is commonly reported by facilitators and parents. It is now therefore recommended that these modules are offered in separate sessions and, unless otherwise indicated, that they be offered before Modules 1-5. As previously noted, and Introduction session which incorporates some of the content of *Dealing with stress in the family*, can also provide an opportunity for families to become more familiar with the program, and potentially to complete pre program evaluations.

How to use the ECIS Parent Notes

Who needs the supplement?

Taking into account the usual considerations regarding language and literacy, you provide each participant of the Signposts program for whom it is relevant with a copy of the Early Childhood Intervention supplement Parent Notes. Ensure that parents understand that the supplementary materials are extra information, and that the standard program is what provides them with the steps to develop their own intervention plan to manage their child's behaviour.

As with any of the written Signposts resources, when you deliver the program face to face in a group or 1:1, the Signposts program and supplementary Parent Notes are secondary to your presentation of the content and the discussion and activities. If parents have low literacy or do not read English, it is recommended that you still give them some or all written resources as a reminder of the content. Consider using the Culturally and Linguistically Diverse (CALD) Parent Notes if necessary (download from www.signposts.net.au).

Printing and distributing the Parent Notes

Before you print the notes, think about how you will distribute them to parents. Parents need to read the supplementary notes before they do each module.

Consider the particular families you are currently working and think about the following questions:

- » is it better to give them the whole set of notes and remind them each time to read the supplement for the next module before they come to the next session?
- OR**
- » is it better to provide them with the supplementary notes for the next week at each session also with a reminder to read them before the next session?

Using more than one supplement

If you are working with families for whom more than one supplement is relevant, for example: a family of a young child who has an Autism Spectrum Disorder, you might consider which supplement is most useful given the behaviours they wish to work on and provide them that a printed copy of it, and provide them with anything extra verbally at the time it is relevant. Some families would be comfortable using at least the written Introduction section to more than one supplement.

The task of the facilitator is to offer the key principles and strategies of the program to the particular audience in the way that best matched the learning needs and style of participants, without compromising the integrity of the program.

Program delivery

Introduction

This is part of the engagement process with families, and if this is one of their first encounters with early intervention services you may need to spend more time on the ideas in the Introduction booklet than you would with more experienced families.

It may be best to run a separate Introduction session to describe the program, cover the content of the Introduction booklet and allow families time to get to know each other and you and to share something about their child and family. It works well to offer this session to a range of families, and then ask for their commitment to the program at the end of that session. Some facilitators have had great success with this session by adding part of *Dealing with stress in the family*.

Module 1 — Measuring your child’s behaviour

The facilitators’ role is to set parents up for success, and the parent’s role is to set their child up for success. Your focus, therefore, is on adult learning not on working with children. The outcome of this learning will be parent capacity building.

Parents can be tempted to try to solve every behaviour issue and teach all the skills they think their child should develop over the next few years in one go. Help them decide what to tackle first. Given that we want parents to be successful, you might suggest that they tackle a behaviour that is more likely to change over the period of the program (i.e. about 12 weeks) rather than a very extreme or complex behaviour.

When parents are deciding what behaviour/s to work on, you can assist them by helping reframing a negative behaviour into a positive behaviour. For example: “spitting out his food after a few mouthfuls” can be reframed as “swallowing the first two or three mouthfuls of his meal”. Positively framed behaviour allows parents an opportunity to view their child’s behaviour from a “glass half full” perspective, as well as providing them with regular opportunities for positive statements and reinforcement which not only builds on the child’s skills but strengthens the parent positive interactions with the child. This is particularly important if a parent attributes the child’s behaviour as intentionally difficult or purposefully carried out to ‘get at’ the parent, or if you have any sense of protective concerns.

Alert parents to the fact that some children in the examples in the Signposts parent materials (booklets and DVD) are older than their children and some of the behaviours may not seem very relevant to their own situation. Suggest that they put aside these details, and pay close attention to what the parent in the example is saying or doing, and think about how they might use those strategies or ideas in what they are working on with their own child.

Module 2 — Systematic use of everyday interactions

If parents choose a behaviour that is likely to be very difficult to change, your task is to help them set an achievable goal for the period of the program which will contribute to the longer term goal they are working toward. Help them identify small steps or stages that will help them reach a bigger goal.

If you are not experienced in working with families of young children, take some time before Module 2 to prepare what you need to take into account to help them set realistic goals and implement strategies in an appropriate way for their children.

Consider what might be developmentally appropriate for these children given what you know of their current skills and characteristics. You may need to refresh your knowledge of early childhood development, or information about a particular type of disability.

Think about the communication strategies that might be appropriate for children of this age with developmental delay or disabilities. Some children will benefit from using some assistance to help their understanding and communication by using pictures, photos, or signing. These help children to communicate by seeing as well as hearing the message and are widely used by early childhood intervention programs. If you are unfamiliar with these options, a speech pathologist, or an experienced early intervention worker would be able to describe them for you.

Module 3 — Replacing difficult behaviour with useful behaviour

You may be working with parents who started the program attributing their child’s difficult behaviour to the child purposefully wanting to “get at” or annoy them. By the end of Module 2 most will now agree that the purpose is to get the consequence, for example, attention, or avoidance of a task. If this attribution to the child has been a very strongly held belief it is worth checking and refreshing the idea that the purpose is to get the consequence, not to intentionally upset or punish the parents.

If a small child has very limited communication skills, including non-verbal skills such as running away from a situation, it can sometimes be difficult to work out the triggers and consequences of his or her behaviour and therefore the purpose of the behaviour. Ask parents for their best guess of the purpose and test that out by following the flow chart as indicated in the module.

Module 4 — Planning for better behaviour

In preparation for this session try to imagine the sequence of events some of the families in the program (by now you will have known them for a number of weeks) go through during a typical day, or on the day the parents come to the session. Recall any examples of difficult situations you have heard about from them in sessions to date; for example, a child screaming their way through their first hair cut, a family celebration cut short, or outings they no longer go on because of past experiences.

Think about the places people with small children go, doctor's waiting rooms, kindergartens and child care, shopping, trips in the car, visiting extended family, coffee shops and playgrounds; and about situations they must deal with, talking on the phone or to friends, business or medical appointments where they are trying to concentrate on the adult interaction. Then think about whether these are low or high risk for the occurrence of a child's difficult behaviour, and how you can help parent identify a lower risk situation in which they and child can practise their new ways of managing the behaviour.

Be prepared for the following steps in the planned activity routine: "Talk to your child about rules" and the "Follow-up discussion". Prepare some suggestions for parents to prompt their discussion about how they might communicate the rules and what the child did well in an appropriate way.

Module 5 — Developing more skills in your child

It is important to make it clear to parents in the section on "choosing skills to teach your child" that the points listed, other than "Build on your child's existing skills," are just points to consider, you do not have to be able to answer them all. The point most likely to be hard for some parents is "Choose skills your child wants to learn." For some families this may remind them that their child has very limited effective communication, which may be distressing for them.

Dealing with stress in the family

Times of change are stressful. If the family or families you are working with are experiencing changes, for example, they have just realised that their child has a developmental disability, they are likely to be experiencing higher than usual levels of stress.

What is happening in relation to their child is not necessarily the only source of stress in their family at any point in time. This module helps families recognise stressors in other aspects of their life and what they might be able to do about them.

Your family as a team

It is an important role for facilitators to help parents develop their sense of “team” if they have others who are involved in the care of their child, and to help parents who are isolated for whatever reason to begin to identify who they can call on as part of a team to support them and their child.

Sample action plans

Two action plans have been included to provide examples of how the Signposts program might be used for scenarios common to families with young children. They are not to be read as prescriptive programs if similar scenarios arise, as each child and family is unique and will make their own decisions about what is an appropriate use of the strategies in the program to address the behaviour for them at this point of time.

Scenario 1

Jasper is four years old, attends two days of child care and is starting kindergarten next year. He has a brother aged six. His parents are worried because he has a habit of biting other children when playing and they think he might not be allowed to attend kindergarten if this continues.

Action plan

Module 1	The specific description of the difficult behaviour/s:	» Jasper bites other children when playing close to them inside at home and at childcare.
	The way I measured this was:	» Frequency, i.e. the number of bites in the first hour of play
Module 2	My child's strengths are:	» He runs and climbs well, pulls small objects apart and tries to put them back together » He understands most of what we say to him, uses some short sentences, signs occasionally » He eats by himself when he likes the food, uses a fork or spoon, takes clothes off, can put on undies and shorts » He draws (scribbles) with crayons and pencils, plays with building toys and cars for a long time
	I am building on my child's strengths using these positive consequences:	» Labelled praise, time on the trampoline or swing, favourite DVD, a tiny serve of jelly
	I am using effective instructions for the following behaviours:	» Jasper to play nicely, no biting » Jasper to sit on his chair to eat
	The house rules are:	» Play nicely (i.e. no biting or hurting) » Spread out when you are playing inside (for brother or other children) » Sit on your chair at the table to eat

Module 3	The purpose/s of my child's difficult behaviour was:	» To get other child to move away
	The alternate behaviour/s I selected were:	» For Jasper to move away » For Jasper to tell the other child to move away
	The trigger I provided for the alternate behaviours were:	» Telling and gesturing to Jasper to move over » Telling Jasper to tell the other child to move over
	The positive consequence/s I provided for the alternate behaviours were:	» Lots of labelled praise for Jasper and the other child » Time on trampoline and swing
Module 4	The negative consequences I provided for the difficult behaviours were:	» Put away whatever Jasper was playing with for 5 minutes » If he fussed then I used Time out
	The daily routine I selected was:	» Getting ready for child care
Module 5	I developed and put into place a planned activity routine for the following high-risk situations:	» Playtime on days when not at child care
	The new skills I am teaching my child are:	» Jasper moving away if other children are too close » Him telling other children to move over
	I will liaise with the teachers by:	» Meeting with child care staff and telling them what we are doing and asking them to do same. Use our communication book to let each other know how the day was.

Dealing with stress in the family	The stress triggers I could avoid more often are:	<ul style="list-style-type: none">» Leaving children playing together inside for a long time by suggesting outside activities after about half an hour of inside play» Shopping with children after child care» Putting on a DVD if children not already occupied while I get meals ready
	I practise relaxation (when):	<ul style="list-style-type: none">» Children have been in bed for 20 mins
	I practised positive self-talk for the following stress triggers:	<ul style="list-style-type: none">» Shopping with children» Picking Jasper up from childcare
Your family as a team	A family problem was:	<ul style="list-style-type: none">» Getting daily chores done without being interrupted by fighting children.
	The possible solutions to this family problem were:	<ul style="list-style-type: none">» Adults “scheduling” task so that one was available to “monitor” children» Request another day of child care and use that time to complete household tasks rather than in paid employment» Give children their preferred activities separately during times when jobs have to be done, e.g. getting dinner

Scenario 2

Lian is two and a half. She hits and turns away from her parents or her grandmother when they try to get her to do something she doesn’t want to do, such as eat from a spoon, cooperate with nappy changing, dressing or bathing.

Action plan

Module 1	The specific description of the difficult behaviour/s:	<ul style="list-style-type: none">» Hitting parents and grandmother when we try to do things with her» Start with nappy changing
	The way I measured this was:	<ul style="list-style-type: none">» How many times she hits while we change her nappy
Module 2	My child’s strengths are:	<ul style="list-style-type: none">» Can sit, hold things and play with them, turn herself over» Smiles and laughs when you talk to her» Puts food in her mouth using her hands» Listens to music, watch TV, is starting to look at book if we hold it close
	I am building on my child’s strengths using these positive consequences:	<ul style="list-style-type: none">» Smiling, talking, hugging and kissing her; labelled praise for looking at book
	I am using effective instructions for the following behaviours:	<ul style="list-style-type: none">» Play with toy (while we change nappy)» Hands down (if she starts to hit)» Naming a picture in the book
	The house rules are:	<ul style="list-style-type: none">» No hitting» Touch each other gently

Module 3	The purpose/s of my child's difficult behaviour was:	» To avoid things she didn't like
	The alternate behaviour/s I selected were:	» Playing with toy while we change her nappy
	The trigger I provided for the alternate behaviours were:	» Show her a toy and play with it
	The positive consequence/s I provided for the alternate behaviours were:	» Smiles and labelled praise while Lian plays, kiss and hug her when finished nappy change
	The negative consequences I provided for the difficult behaviours were:	» Say "Hands down" then no smiling or talking for a few seconds; then give Lian her toy again, and keep changing nappy
Module 4	The daily routine I selected was:	» Bed time
	I developed and put into place a planned activity routine for the following high-risk situations:	» Bath time
Module 5	The new skills I am teaching my child are:	» Hold spoon and scoop food » Play with soft toy when changing nappy
	I will liaise with the teachers by:	» Having only family take care of Lian

Dealing with stress in the family	The stress triggers I could avoid more often are:	» Lian hitting us » Driving in peak hour traffic; could take bus and read instead
	I practise relaxation when:	» Lian is in bed or when she is out of the house with other members of the family
	I practise positive self-talk for the following stress triggers:	» Lian hitting me or others » Driving in traffic » Disagreeing with my mother
Your family as a team	A family problem was:	» Arguing about what to do with Lian
	The possible solutions to this family problem were:	» Decide together what the problems were and what to do first » Each of us decide some things, and all agree to try them » Try for day care one day per week because my mother gets tired looking after Lian while we are at work

How to use other supplements and resources

Supplementary materials

Facilitators need to become familiar with the content of all supplements in order to know when they might be useful to families, and to be able to use the content (regardless of whether you provide the written supplement) in discussions as the need arises.

In addition to this Early Childhood Intervention Supplement, the following supplementary materials are also available on the Signposts website:

- » Aboriginal and Torres Strait Islander Communities
- » Acquired Brain Injury
- » Autism Spectrum Disorder
- » Culturally and Linguistically Diverse Communities
- » Toilet Learning.

If you have a very homogenous group this makes it easier to decide which supplement/s are likely to be more relevant and to provide printed copies accordingly. You may need to provide a supplement to just one parent or family, and follow up with them outside the group time, for example, by phone, to ensure that they understand how to use the supplement.

Other Signposts resources

There are a range of resources for facilitators on the Signposts website.

Remember that the Goal Achievement Scale and Goal Achievement Scale Calculator are there to use to help parents calculate their progress toward the goals they set in Module 2. This is one of the most powerful ways of helping parents have a sense of achievement and increasing their sense of efficacy which is critical to their well being. This is discussed in more detail in the sections on Process and Program delivery.

References

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