

1981

## Day Care Independent Study Program

Center for Public Affairs Research (CPAR)  
*University of Nebraska at Omaha*

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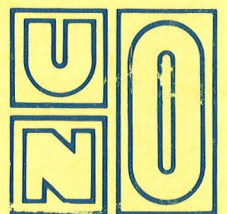
(CPAR), Center for Public Affairs Research, "Day Care Independent Study Program" (1981). *Publications Archives, 1963-2000*. 141.  
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# **TRAINING PROGRAM**

**The University of Nebraska at Omaha  
and the  
Nebraska Department of Public Welfare**



## HANDOUT NUMBER ONE (Blue)

### COPING WITH PROBLEM BEHAVIOR OF CHILDREN

#### Purpose

The purpose of this workshop is to increase your perception of how children speak to us and we speak to them through the language of behavior. Discussion will focus on causes and sources of misbehavior, expression of feelings and emotions and degrees of disciplinary action and intervention. Case studies will be utilized enabling you to make observations of motivation, development and relationships with peers and adults. Emphasis will be placed on aiding a child to gain self-control, responsibility and independence through reasonable guidelines.



FOLLOW-ALONG-SHEET FOR  
COPING WITH CHILDREN'S BEHAVIOR:  
CHILD MANAGEMENT OR DISCIPLINE

Instructions to Participant: Fill in the blanks as directed.

Introduction

Part I

1. Case studies: Billy and Jimmy

2. Discipline defined:

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3. Why discipline:

(1) \_\_\_\_\_

(2) \_\_\_\_\_

4. Causes and sources of misbehavior:

1. \_\_\_\_\_ 2. \_\_\_\_\_

1.1 \_\_\_\_\_ 2.1 \_\_\_\_\_

1.2 \_\_\_\_\_ 2.2 \_\_\_\_\_

5. Expression of misbehavior:

1. \_\_\_\_\_

2. \_\_\_\_\_

6. Disciplinary action has several degrees of intervention. These may include:

1. No action
2. Withdrawing attention
3. Change environment - "Hardware"
4. Teach new behaviors
5. Change environment - "Software"
6. Expressive activities
7. Saturation
8. Time out - physical restraint
9. Confrontation
10. Professional assistance

Part II

Case studies: Adam, Randy, Candy, Jason, Sandy, John, Eleanor, Tom

Wrap-up

Effective discipline will:

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## Jimmy

Jimmy is four years, seven months old, neat, clean and slightly overweight. His parents have one older and one younger child. His father manages a local chain store, and his mother is a secretary for an insurance company. His mother drops him at the day care home on her way to work.

Jimmy seems to enjoy all the activities at the day care home. The caregiver notices that he is loud and likes to be a leader in the group activities. He also always wants to be first in line and often tells other children what to do. During group activities Jimmy interrupts and often spoils the conversation, putting a great strain on the caregiver's disposition. The caregiver usually insists that Jimmy wait until she has finished the sentence she is saying. Jimmy does and when Jimmy is quiet, the caregiver continues to talk to the other children, being relieved that there is silence. Then Jimmy again interrupts with much more impatience.

### Child's Actions:

How does the child feel?

1. Inadequate - "I'm not good for anything."
2. Aloneness - "Nobody cares about me."
3. Guilt - "I'm so bad I should be punished (& I'll prove I'm right)."
4. Conflict - "I don't want to but I have to or vice versa."
5. Other \_\_\_\_\_

### Adult Reactions:

How does the child make you feel?

1. Incompetent
2. Helpless - "I don't know what to do."
3. Fear for other children - "If he hurts others, I'm responsible."
4. Anger
5. Concern for child's future. - "This kid will never make it."
6. Other \_\_\_\_\_



## Billy

Billy is three years, five months old and has no brothers or sisters. Billy is neat, clean and well-behaved. He enters into most of the activities and with encouragement from the staff, he will try to accomplish new tasks. He is quiet and never disruptive, in fact, he often backs away when he is confronted by a slightly aggressive child. Some of the staff have noticed that Billy does not have a good appetite and only eats very small servings of any of the food that he is offered. One teacher felt he was not as interested in food as the other children because he seldom mentioned likes, dislikes, texture, etc. when they were talking about eating.

But of primary concern to the staff is Billy's refusal to go the restroom at the center. He cries, becomes rigid and appears to be frightened when he is encouraged to go. His mother reports he runs to the bathroom as soon as he gets home from the center. You are sure he would be more comfortable if he would use the toilet at the center.

### Child's Actions:

How does the child feel?

1. Inadequate - "I'm not good for anything."
2. Aloneness - "Nobody cares about me."
3. Guilt - "I'm so bad I should be punished (& I'll prove I'm right)."
4. Conflict - "I don't want to but I have to or vice versa."
5. Other \_\_\_\_\_

### Adult Reactions:

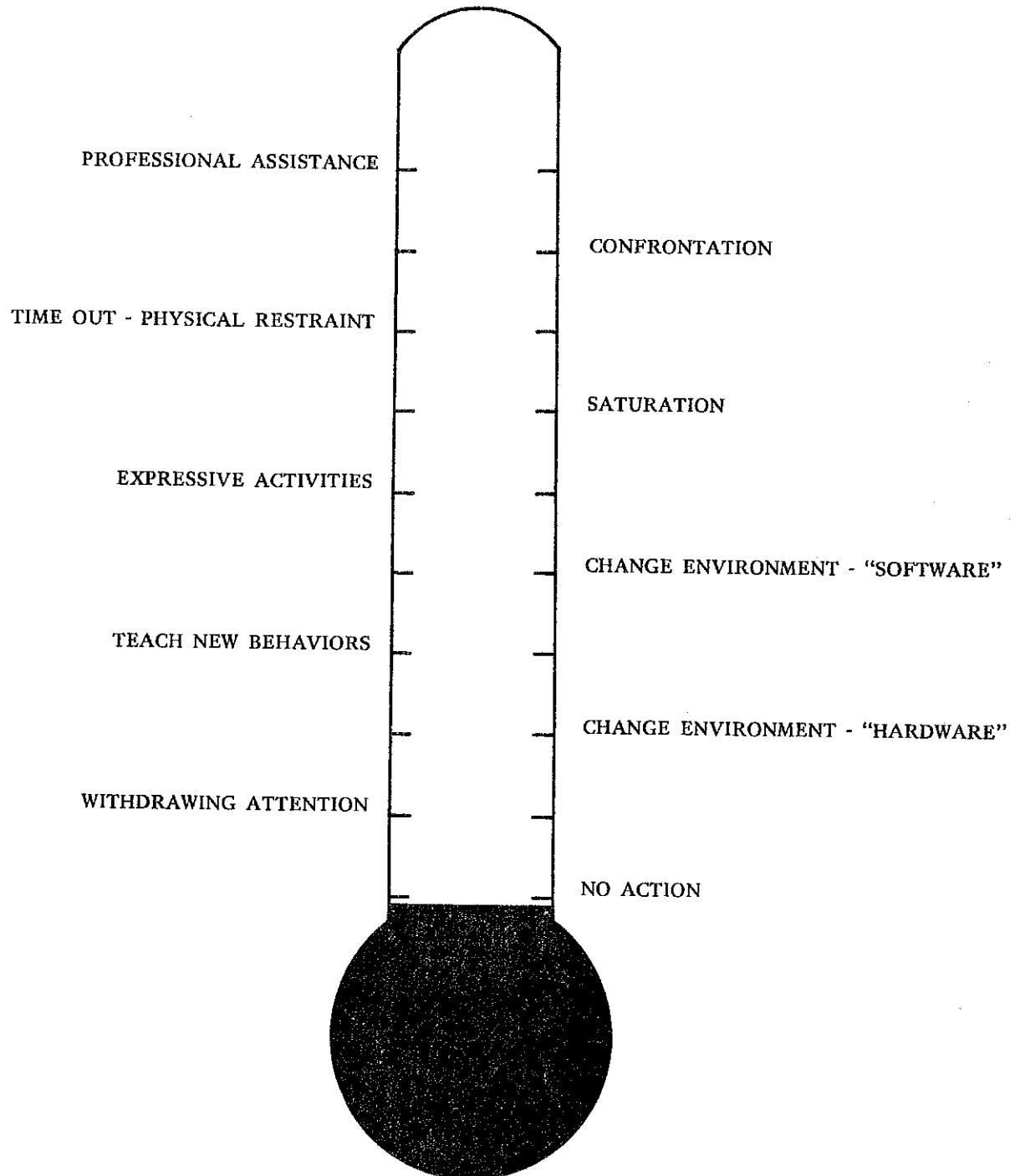
How does the child make you feel?

1. Incompetent
2. Helpless - "I don't know what to do."
3. Fear for other children - "If he hurts others, I'm responsible."
4. Anger
5. Concern for child's future. - "This kid will never make it."
6. Other \_\_\_\_\_



HANDOUT NUMBER TWO

WHAT TO DO WITH PROBLEM BEHAVIOR OF CHILDREN



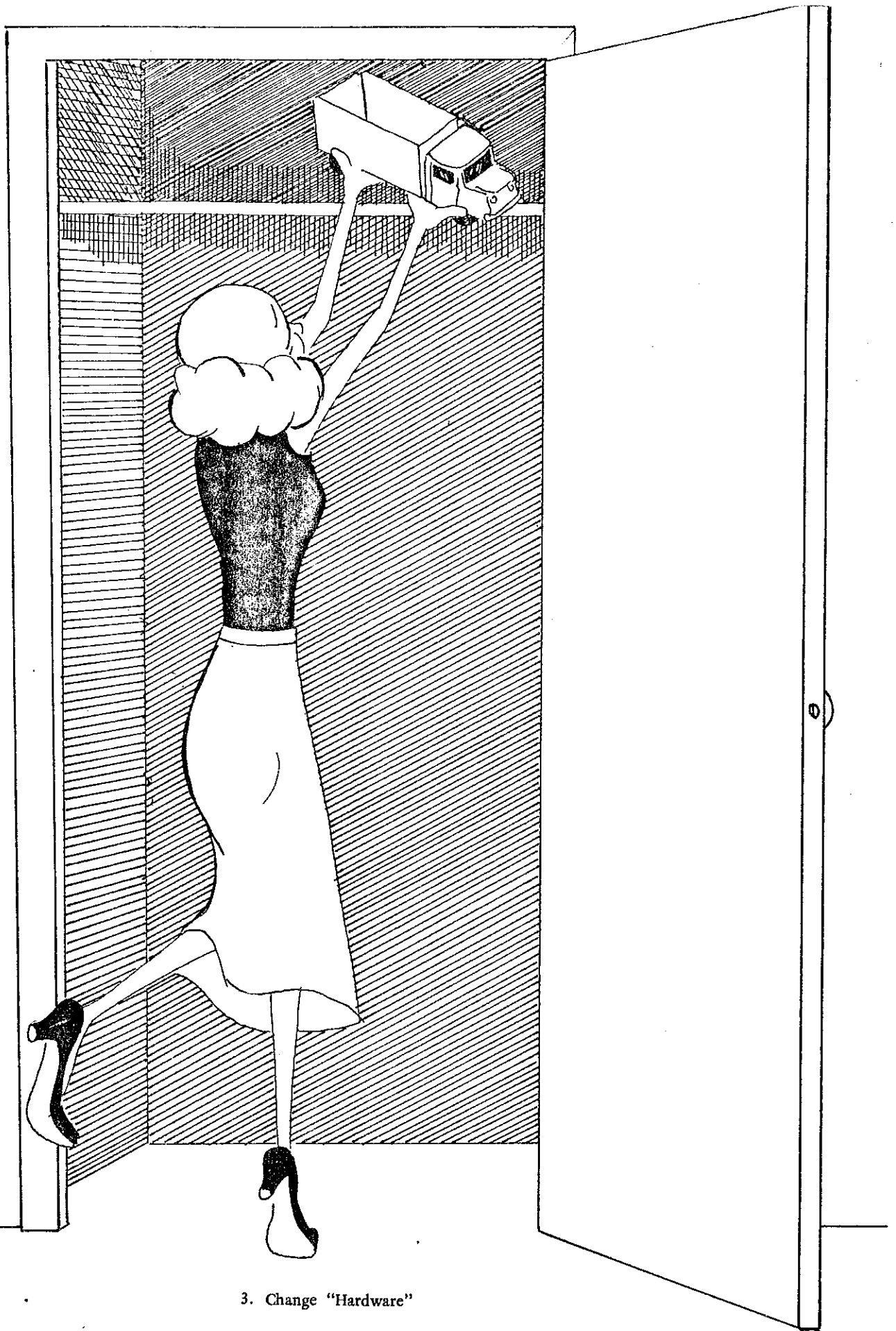
1. No Action





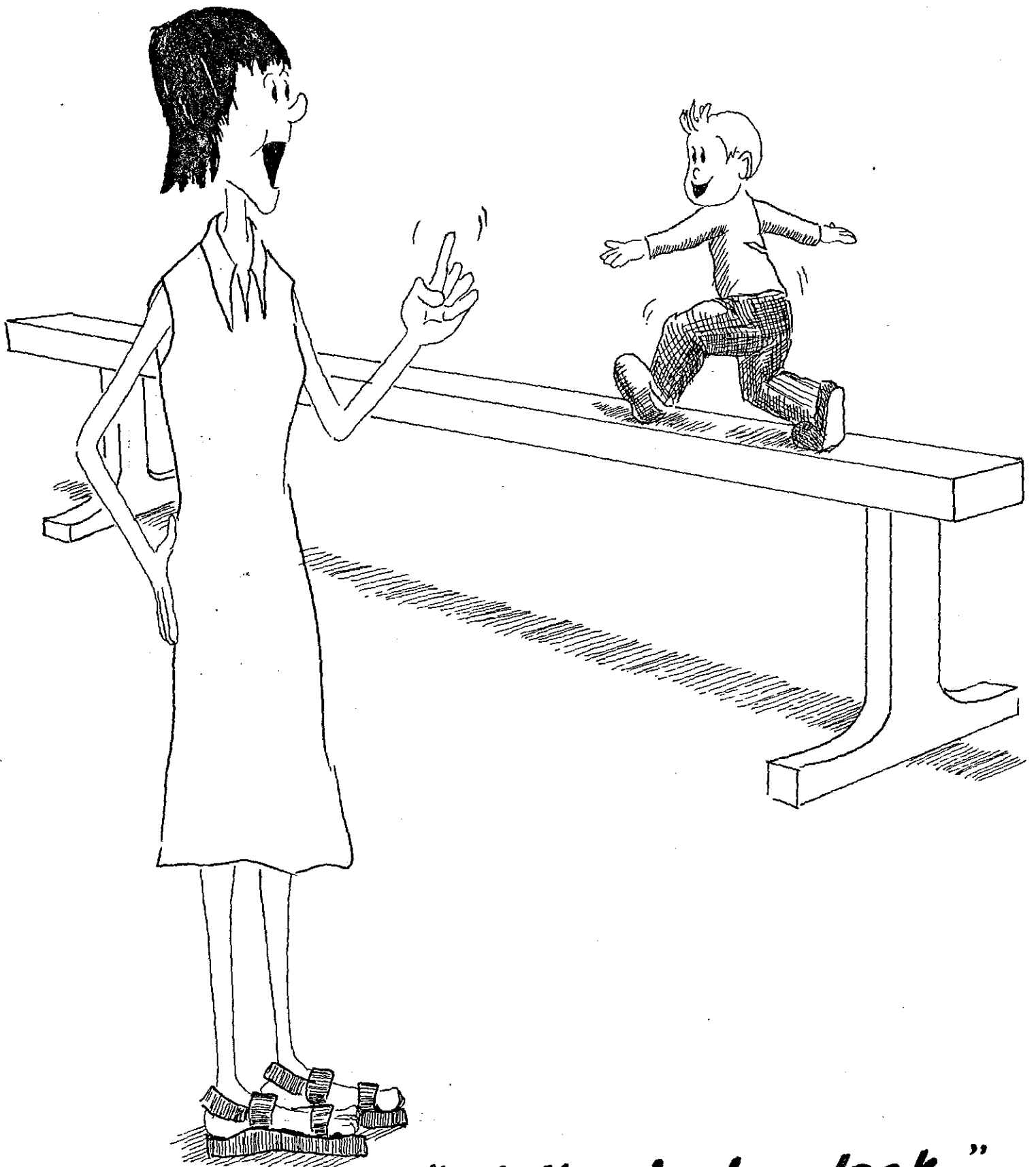
2. Withdraw Attention





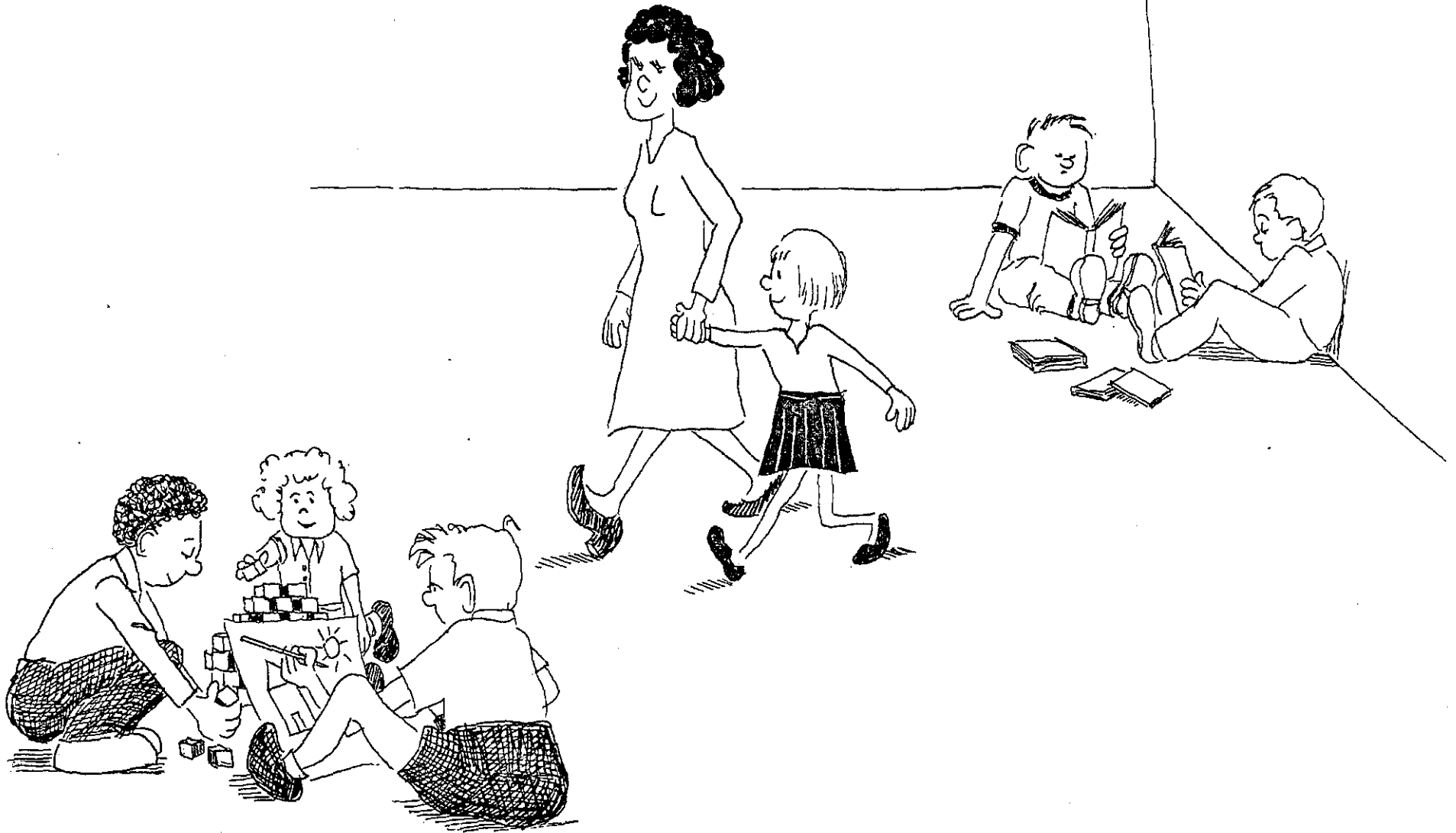
3. Change "Hardware"

4. Teach New Behavior



***"Walk slowly, Jack."***

## 5. Change Environment - Teacher Participation



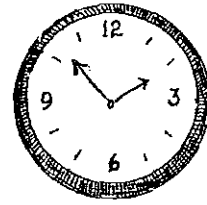
6. Teach Creative Activities



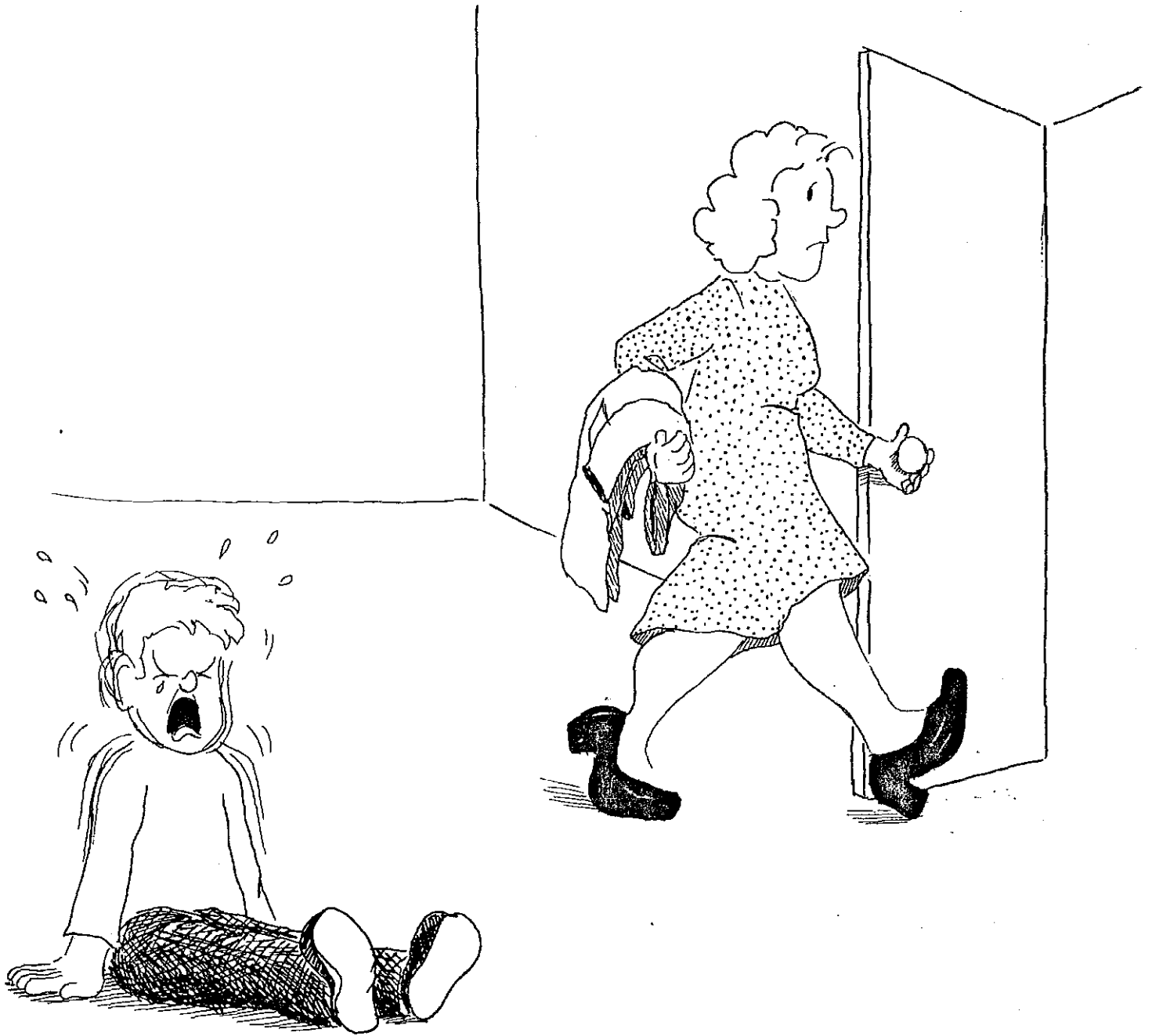
7. Let The Child Become Saturated



8. Take Time Out

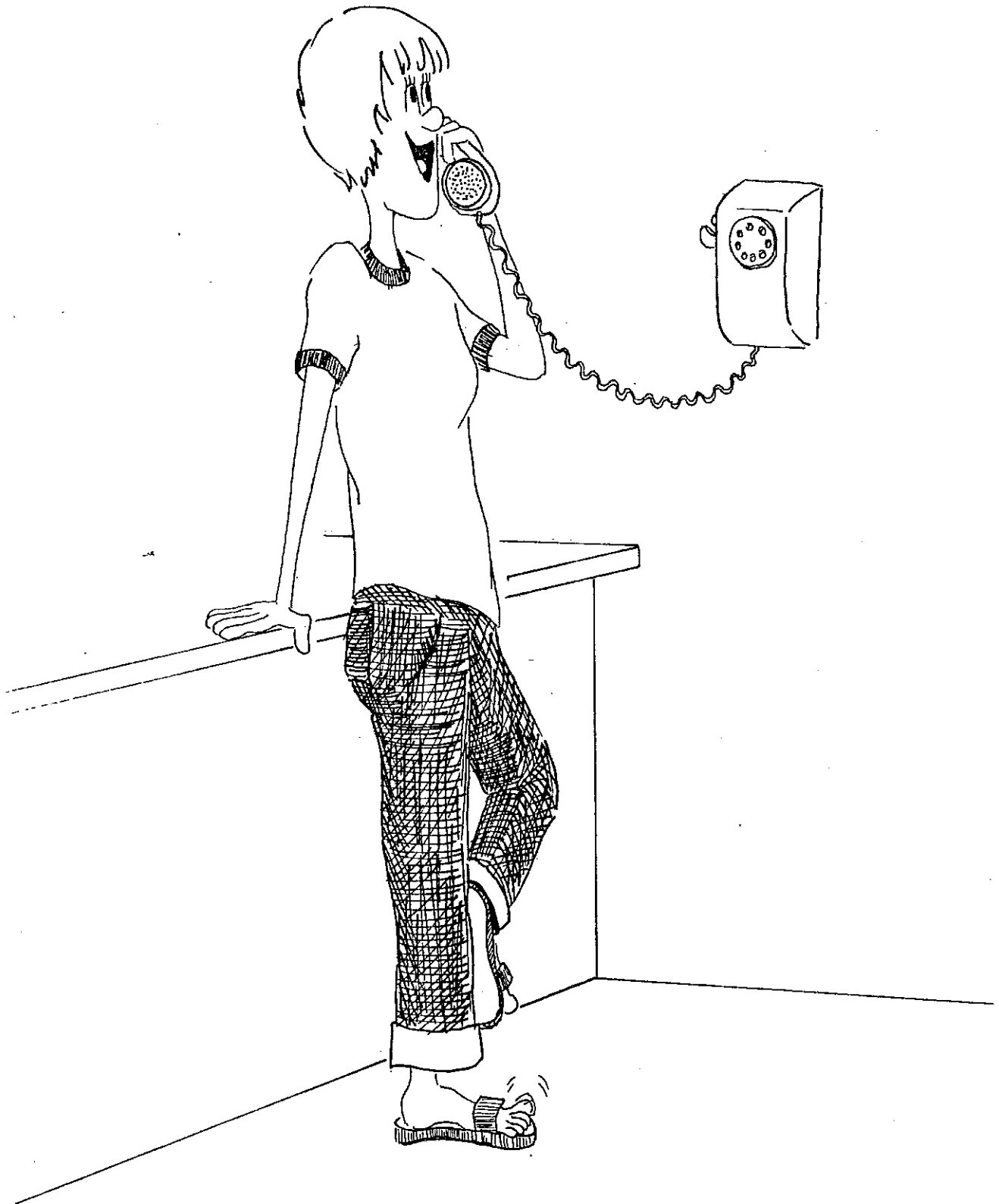


9. Confront The Situation





## 10. Get Professional Assistance



HANDOUT NUMBER THREE

CASE STUDIES OF PROBLEM BEHAVIOR



## 1. Adam

Adam is a handsome child aged four years, five months, chubby and "all boy." He lives with his parents and a one year old brother. He has been coming to day care for several months. He has always been accepted by the other children and has appeared to be happy. He usually plays with a group of children during free play. Even so, the staff has been completely unsuccessful at integrating him into certain group activities. When it is circle time and fingerplays, stories, and/or music activities have been planned, Adam retreats to a corner, crawls under a table or gets into a private spot, such as a box. No amount of coaxing will bring him into the group. If he is physically moved into the group, he screams, tantrums, and makes such a scene that the whole class is disrupted. The staff now simply lets him do as he pleases during circle time.

Since Adam is to begin kindergarten next year, everyone is concerned. His parents have been consulted. His father, a physical education teacher in the local schools, insists that Adam should be made to join the activities and does not seem to understand the extent of Adam's resistance to group activities. His mother is a very quiet person and seems to agree with her husband.

### How does the child feel?

- \_\_\_ Inadequate - "I'm not good for anything."
- \_\_\_ Alone - "Nobody cares about me."
- \_\_\_ Guilty - "I'm so bad I should be punished (& I'll prove I'm right)."
- \_\_\_ In conflict - "I don't want to but I have to or vice versa."
- \_\_\_ Other \_\_\_\_\_

### Prognosis (circle one)

1    2    3    4    5  
Poor                      Good

### Causes and Source of the Action

#### Child

- \_\_\_ Child's personality
- \_\_\_ Child's stage of development
- \_\_\_ Anxiety
- \_\_\_ Death
- \_\_\_ Divorce
- \_\_\_ New baby in family
- \_\_\_ Fears
- \_\_\_ Other \_\_\_\_\_

#### Environment

- \_\_\_ Problem with limits
- \_\_\_ Rapport

#### Highly charged routine situations

- \_\_\_ Toilet time
- \_\_\_ Mealtime
- \_\_\_ Rest time
- \_\_\_ Other \_\_\_\_\_

### How is it expressed?

#### Acting out

- \_\_\_ Hurting others
- \_\_\_ Destroying property
- \_\_\_ Temper tantrums
- \_\_\_ Verbal abuse

#### Withdrawal

- \_\_\_ Distant in relationship with people - communicates very little
- \_\_\_ Does not participate in activities
- \_\_\_ Lacks eye contact
- \_\_\_ Fails to smile at other people nearby

#### Immature actions

- \_\_\_ Seems younger than chronological age
- \_\_\_ Lacks social skills
- \_\_\_ Has difficulty separating from others
- \_\_\_ Is dependent on caregiver for aid in routine matters

### What can you do?

Professional Assistance		Confrontation
Time Out - Physical Restraint		Saturation
Expressive Activities		Change Environment - "Software"
Teach New Behaviors		Change Environment - "Hardware"
Withdrawing Attention		No Action



## 2. Randy

Randy is a three-year, six-month-old blonde, and the day care mother has noticed that he is an extremely happy child. He has no brothers or sisters and his parents are both well educated, working for a local law firm. Randy is well behaved; however, he is more active than some of the other children. He moves quickly from activity to activity as he accomplishes each task rapidly.

The day care mother complains that Randy talks to himself, sits up, hums, and is restless during naptime. Often he keeps neighboring children awake with his talking and constant motion. At times other than naptime he is cooperative, talkative and likeable.

### How does the child feel?

- ☐ Inadequate - "I'm not good for anything."
- ☐ Alone - "Nobody cares about me."
- ☐ Guilty - "I'm so bad I should be punished (& I'll prove I'm right)."
- ☐ In conflict - "I don't want to but I have to or vice versa."
- ☐ Other \_\_\_\_\_

### Prognosis (circle one)

- |      |   |   |   |      |
|------|---|---|---|------|
| 1    | 2 | 3 | 4 | 5    |
| Poor |   |   |   | Good |

### Causes and Source of the Action

#### Child

- ☐ Child's personality
- ☐ Child's stage of development
- ☐ Anxiety
- ☐ Death
- ☐ Divorce
- ☐ New baby in family
- ☐ Fears
- ☐ Other \_\_\_\_\_

#### Environment

- ☐ Problem with limits
- ☐ Rapport

#### Highly charged routine situations

- ☐ Toilet time
- ☐ Mealtime
- ☐ Rest time
- ☐ Other \_\_\_\_\_

### How is it expressed?

#### Acting out

- ☐ Hurting others
- ☐ Destroying property
- ☐ Temper tantrums
- ☐ Verbal abuse

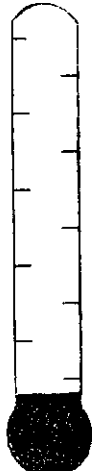
#### Withdrawal

- ☐ Distant in relationship with people - communicates very little
- ☐ Does not participate in activities
- ☐ Lacks eye contact
- ☐ Fails to smile at other people nearby

#### Immature actions

- ☐ Seems younger than chronological age
- ☐ Lacks social skills
- ☐ Has difficulty separating from others
- ☐ Is dependent on caregiver for aid in routine matters

### What can you do?

Professional Assistance		Confrontation
Time Out - Physical Restraint		Saturation
Expressive Activities		Change Environment - "Software"
Teach New Behaviors		Change Environment - "Hardware"
Withdrawing Attention		No Action



### 3. Candy

Candy is three years, five months old and lives with her parents and two-month-old sister. She has been enrolled in day care for the past six months, and until recently she has not shown any behavior or adjustment problems. Since the arrival of the baby, Candy has been a problem in the day care home. In the past her mother accompanied her to the day care setting, but recently her father has brought her. She often is carried to the door by him, and she brings a favorite stuffed bear along. She occupies herself during the day by sitting alone looking at books or just watching the other children. She joins the children at circle time but does not really enter into the actions of fingerplays or musical games. She is quiet at lunch time and is reluctant to even taste new or different foods. At nap time she cuddles her bear and goes to sleep readily with her thumb in her mouth. She has awakened several times in the past few weeks with wet pants and has cried when the caregiver calls this to her attention.

#### How does the child feel?

- ☐ Inadequate - "I'm not good for anything."
- ☐ Alone - "Nobody cares about me."
- ☐ Guilty - "I'm so bad I should be punished (& I'll prove I'm right)."
- ☐ In conflict - "I don't want to but I have to or vice versa."
- ☐ Other \_\_\_\_\_

#### Prognosis (circle one)

1      2      3      4      5  
Poor                                      Good

#### Causes and Source of the Action

##### Child

- ☐ Child's personality
- ☐ Child's stage of development
- ☐ Anxiety
- ☐ Death
- ☐ Divorce
- ☐ New baby in family
- ☐ Fears
- ☐ Other \_\_\_\_\_

##### Environment

- ☐ Problem with limits
- ☐ Rapport

##### Highly charged routine situations

- ☐ Toilet time
- ☐ Mealtime
- ☐ Rest time
- ☐ Other \_\_\_\_\_

#### How is it expressed?

##### Acting out

- ☐ Hurting others
- ☐ Destroying property
- ☐ Temper tantrums
- ☐ Verbal abuse

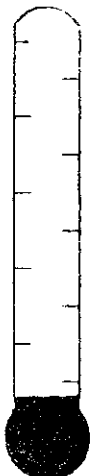
##### Withdrawal

- ☐ Distant in relationship with people - communicates very little
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- ☐ Lacks eye contact
- ☐ Fails to smile at other people nearby

##### Immature actions

- ☐ Seems younger than chronological age
- ☐ Lacks social skills
- ☐ Has difficulty separating from others
- ☐ Is dependent on caregiver for aid in routine matters

#### What can you do?

Professional Assistance		Confrontation
Time Out - Physical Restraint		Saturation
Expressive Activities		Change Environment - "Software"
Teach New Behaviors		Change Environment - "Hardware"
Withdrawing Attention		No Action



#### 4. Jason

Jason is a dark haired, small child, aged two years, nine months. He has one older sister who is in the first grade. He is not reported to have had any health problems with the exception of measles at age two when he had a high temperature. His mother also informed the staff that he was three weeks premature.

Jason has been coming to the center for two weeks. Each morning he clings to his father who brings him and cries. Jason's father assures Jason that he will be by to pick him up after work. This assurance does not seem to relieve Jason's extreme concern. He spends half of the morning sobbing and refusing to participate in any activities. Later he stops crying and occupies himself with building blocks. He often refuses to eat lunch or he just nibbles at his food. He sleeps during rest time and afterwards plays with the blocks until his father arrives. He is always delighted to see his father and seems to visibly relax as he gets ready to go home. He always asks his father, "Do I have to come back tomorrow?" The situation has been discussed with the father, and he seems to be very anxious about leaving Jason. The father has questioned the activities at the center closely. The staff is eager to assist Jason in adjusting to the center since they feel it is a reflection on their capabilities if Jason drops out.

#### How does the child feel?

- \_\_\_ Inadequate - "I'm not good for anything."
- \_\_\_ Alone - "Nobody cares about me."
- \_\_\_ Guilty - "I'm so bad I should be punished (& I'll prove I'm right)."
- \_\_\_ In conflict - "I don't want to but I have to or vice versa."
- \_\_\_ Other \_\_\_\_\_

#### Prognosis (circle one)

- |      |   |   |   |      |
|------|---|---|---|------|
| 1    | 2 | 3 | 4 | 5    |
| Poor |   |   |   | Good |

#### Causes and Source of the Action

##### Child

- \_\_\_ Child's personality
- \_\_\_ Child's stage of development
- \_\_\_ Anxiety
- \_\_\_ Death
- \_\_\_ Divorce
- \_\_\_ New baby in family
- \_\_\_ Fears
- \_\_\_ Other \_\_\_\_\_

##### Environment

- \_\_\_ Problem with limits
- \_\_\_ Rapport

##### Highly charged routine situations

- \_\_\_ Toilet time
- \_\_\_ Mealtime
- \_\_\_ Rest time
- \_\_\_ Other \_\_\_\_\_

#### How is it expressed?

##### Acting out

- \_\_\_ Hurting others
- \_\_\_ Destroying property
- \_\_\_ Temper tantrums
- \_\_\_ Verbal abuse

##### Withdrawal

- \_\_\_ Distant in relationship with people - communicates very little
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- \_\_\_ Lacks eye contact
- \_\_\_ Fails to smile at other people nearby

##### Immature actions

- \_\_\_ Seems younger than chronological age
- \_\_\_ Lacks social skills
- \_\_\_ Has difficulty separating from others
- \_\_\_ Is dependent on caregiver for aid in routine matters

#### What can you do?

- Professional Assistance
- Time Out - Physical Restraint
- Expressive Activities
- Teach New Behaviors
- Withdrawing Attention



- Confrontation
- Saturation
- Change Environment - "Software"
- Change Environment - "Hardware"
- No Action



## 5. Sandy

Sandy is a blonde, short haired, agile child aged three years, ten months. She is a cooperative little girl in nearly all of the activities in the day care setting. The housekeeping and the painting easel are her favorite areas. She cooperates with other children and likes to have someone join her in her play. The other children all seem to enjoy being involved with her. Sandy's speech and language skills are good and she expresses herself with no difficulty. She offers to tell of events at home and within the day care setting. She appears to have a good home environment.

Sandy comes to the day care setting each day with her mother who then goes on to her job as a secretary. Occasionally, her father brings her as he goes to work as a salesman.

Sandy consistently presents a problem when she is asked to wash her hands after painting or after any activity where getting dirty makes washing a necessity. Each day she resists washing her hands for snack and lunch. She must be taken by the hand and brought to the sink at which time she cries, bodily resists and on occasion has had temper tantrums. In the past, when she has a tantrum she has been made to sit on a chair until the other children are washed and ready to eat. Then she is taken to the sink where she again cries and resists physically. Each day the scene repeats itself. Her parents report, "She would rather be dirty." The caregiver now notices that she never goes near the water table for play.

### How does the child feel?

- ☐ Inadequate - "I'm not good for anything."
- ☐ Alone - "Nobody cares about me."
- ☐ Guilty - "I'm so bad I should be punished (& I'll prove I'm right)."
- ☐ In conflict - "I don't want to but I have to or vice versa."
- ☐ Other \_\_\_\_\_

### Prognosis (circle one)

1      2      3      4      5  
Poor                                      Good

### Causes and Source of the Action

#### Child

- ☐ Child's personality
- ☐ Child's stage of development
- ☐ Anxiety
- ☐ Death
- ☐ Divorce
- ☐ New baby in family
- ☐ Fears
- ☐ Other \_\_\_\_\_

#### Environment

- ☐ Problem with limits
- ☐ Rapport

#### Highly charged routine situations

- ☐ Toilet time
- ☐ Mealtime
- ☐ Rest time
- ☐ Other \_\_\_\_\_

### How is it expressed?

#### Acting out

- ☐ Hurting others
- ☐ Destroying property
- ☐ Temper tantrums
- ☐ Verbal abuse

#### Withdrawal

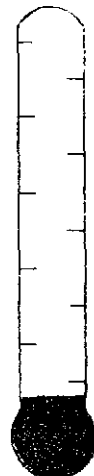
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- ☐ Lacks eye contact
- ☐ Fails to smile at other people nearby

#### Immature actions

- ☐ Seems younger than chronological age
- ☐ Lacks social skills
- ☐ Has difficulty separating from others
- ☐ Is dependent on caregiver for aid in routine matters

### What can you do?

- Professional Assistance
- Time Out - Physical Restraint
- Expressive Activities
- Teach New Behaviors
- Withdrawing Attention



- Confrontation
- Saturation
- Change Environment - "Software"
- Change Environment - "Hardware"
- No Action



6. John

John is four years, two months old. He is a healthy, handsome child who seems to have good cognitive and language skills. His parents were recently divorced, and he lives with his mother who works as a lab technician at a local hospital. His father is in the community and John sees him on Saturdays. John has been at the day care home for nearly a year and a half, and his routine has not changed too much since the separation of his parents. He still lives at the same address, and his routine for arrival and departure has not changed. He has become very helpless at the day care home and asks the day care home mother to do many of the jobs for him that he once did for himself. He now needs help pouring his juice, putting on his coat, zipping his pants, etc. He often sits along the edge of the group and becomes tearful when encouraged to join the group. John does not accept comfort from the caregiver.

**How does the child feel?**

- \_\_\_\_\_ Inadequate - "I'm not good for anything."
- \_\_\_\_\_ Alone - "Nobody cares about me."
- \_\_\_\_\_ Guilty - "I'm so bad I should be punished (& I'll prove I'm right)."
- \_\_\_\_\_ In conflict - "I don't want to but I have to or vice versa."
- \_\_\_\_\_ Other \_\_\_\_\_

**Prognosis (circle one)**

1	2	3	4	5
Poor				Good

### Causes and Source of the Action

## Child

- \_\_\_\_\_ Child's personality
- \_\_\_\_\_ Child's stage of development
- \_\_\_\_\_ Anxiety
- \_\_\_\_\_ Death
- \_\_\_\_\_ Divorce
- \_\_\_\_\_ New baby in family
- \_\_\_\_\_ Fears
- \_\_\_\_\_ Other \_\_\_\_\_

## Environment

- Problem with limits
- Rapport

### Highly charged routine situations

- ☐ Toilet time  
☐ Mealtime  
☐ Rest time  
☐ Other \_\_\_\_\_

### How is it expressed?

### Acting out

- \_\_\_\_\_ Hurting others
- \_\_\_\_\_ Destroying property
- \_\_\_\_\_ Temper tantrums
- \_\_\_\_\_ Verbal abuse

## Withdrawal

- \_\_\_\_\_ Distant in relationship with people - communicates very little
- \_\_\_\_\_ Does not participate in activities
- \_\_\_\_\_ Lacks eye contact
- \_\_\_\_\_ Fails to smile at other people nearby

### Immature actions

- Seems younger than chronological age
- Lacks social skills
- Has difficulty separating from others
- Is dependent on caregiver for aid in routine matters

## What can you do?

Professional Assistance

Time Out - Physical Restraint

Expressive Activities

Teach New Behaviors

Withdrawing Attention

Confrontation

Saturation

Change Environment - “Software”

Change Environment - “Hardware”

No Action





## 7. Eleanor

Eleanor, who is five years old, wears a back brace and usually is dressed in long, dark-colored dresses. Her mother, who recently died, was separated from Eleanor's alcoholic father and placed Eleanor in her grandmother's custody. The grandmother, who had difficulty with her own children, has decided to raise Eleanor with very strict discipline. Therefore Eleanor seldom is allowed to play with children of her own age and attends preschool infrequently. When she comes to school she is very demanding of the teacher's attention and once swallowed a penny to obtain the teacher's attention. The teacher's aid notices that Eleanor steals candy from the coat pockets of other children, although Eleanor denies having done this when questioned about it.

### How does the child feel?

- ☐ Inadequate - "I'm not good for anything."
- ☐ Alone - "Nobody cares about me."
- ☐ Guilty - "I'm so bad I should be punished (& I'll prove I'm right)."
- ☐ In conflict - "I don't want to but I have to or vice versa."
- ☐ Other \_\_\_\_\_

### Prognosis (circle one)

- |      |   |   |   |      |
|------|---|---|---|------|
| 1    | 2 | 3 | 4 | 5    |
| Poor |   |   |   | Good |

### Causes and Source of the Action

#### Child

- ☐ Child's personality
- ☐ Child's stage of development
- ☐ Anxiety
- ☐ Death
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- ☐ New baby in family
- ☐ Fears
- ☐ Other \_\_\_\_\_

#### Environment

- ☐ Problem with limits
- ☐ Rapport

#### Highly charged routine situations

- ☐ Toilet time
- ☐ Mealtime
- ☐ Rest time
- ☐ Other \_\_\_\_\_

### How is it expressed?

#### Acting out

- ☐ Hurting others
- ☐ Destroying property
- ☐ Temper tantrums
- ☐ Verbal abuse

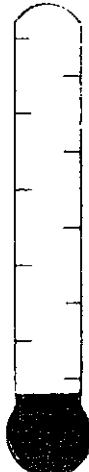
#### Withdrawal

- ☐ Distant in relationship with people - communicates very little
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#### Immature actions

- ☐ Seems younger than chronological age
- ☐ Lacks social skills
- ☐ Has difficulty separating from others
- ☐ Is dependent on caregiver for aid in routine matters

### What can you do?

Professional Assistance		Confrontation
Time Out - Physical Restraint		Saturation
Expressive Activities		Change Environment - "Software"
Teach New Behaviors		Change Environment - "Hardware"
Withdrawing Attention		No Action



## 8. Tom

Tom, a poorly coordinated five year old, has great difficulty with gross motor activities and withdraws from playground activities. His father is very embarrassed by Tom's inability to join in masculine games. The parents consider Tom to be very "different." He did not learn to talk until he was three. He has a good singing voice and often sings hymns to himself as he plays alone. He becomes very shy when encouraged to participate in group singing activities.

### How does the child feel?

- \_\_\_ Inadequate - "I'm not good for anything."
- \_\_\_ Alone - "Nobody cares about me."
- \_\_\_ Guilty - "I'm so bad I should be punished (& I'll prove I'm right)."
- \_\_\_ In conflict - "I don't want to but I have to or vice versa."
- \_\_\_ Other \_\_\_\_\_

### Prognosis (circle one)

1      2      3      4      5  
Poor                                  Good

### Causes and Source of the Action

#### Child

- \_\_\_ Child's personality
- \_\_\_ Child's stage of development
- \_\_\_ Anxiety
- \_\_\_ Death
- \_\_\_ Divorce
- \_\_\_ New baby in family
- \_\_\_ Fears
- \_\_\_ Other \_\_\_\_\_

#### Environment

- \_\_\_ Problem with limits
- \_\_\_ Rapport

#### Highly charged routine situations

- \_\_\_ Toilet time
- \_\_\_ Mealtime
- \_\_\_ Rest time
- \_\_\_ Other \_\_\_\_\_

### How is it expressed?

#### Acting out

- \_\_\_ Hurting others
- \_\_\_ Destroying property
- \_\_\_ Temper tantrums
- \_\_\_ Verbal abuse

#### Withdrawal

- \_\_\_ Distant in relationship with people - communicates very little
- \_\_\_ Does not participate in activities
- \_\_\_ Lacks eye contact
- \_\_\_ Fails to smile at other people nearby

#### Immature actions

- \_\_\_ Seems younger than chronological age
- \_\_\_ Lacks social skills
- \_\_\_ Has difficulty separating from others
- \_\_\_ Is dependent on caregiver for aid in routine matters

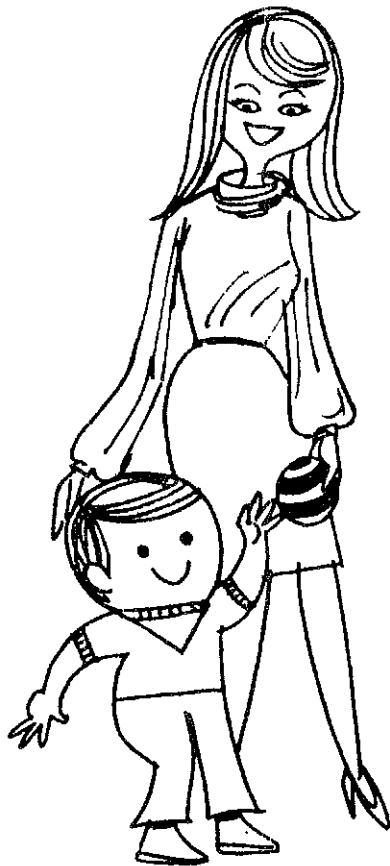
### What can you do?

Professional Assistance		Confrontation
Time Out - Physical Restraint		Saturation
Expressive Activities		Change Environment - "Software"
Teach New Behaviors		Change Environment - "Hardware"
Withdrawing Attention		No Action



HANDOUT NUMBER FOUR

RESOURCES



## GUIDES

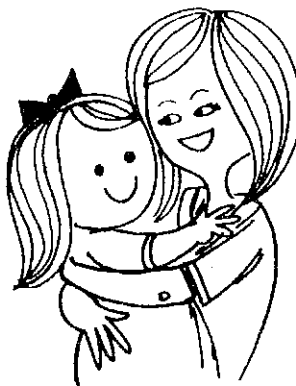
### In Speech

1. State suggestions or directions in a positive rather than a negative form.
2. Give the child a choice only when you intend to leave the choice up to him.
3. Your voice is a teaching tool. Use words and a tone of voice which will help the child to feel confident and reassured.
4. Avoid trying to change behavior by methods which may lead to loss of self-respect, such as shaming or labeling behavior "naughty," "selfish."
5. Avoid motivating a child by making comparisons between one child and another or by encouraging competition.
6. Redirect the child by suggesting an activity that is related to his own purposes or interests whenever possible.
7. The effectiveness of a suggestion or a direction may depend largely on its timing.

### In Action

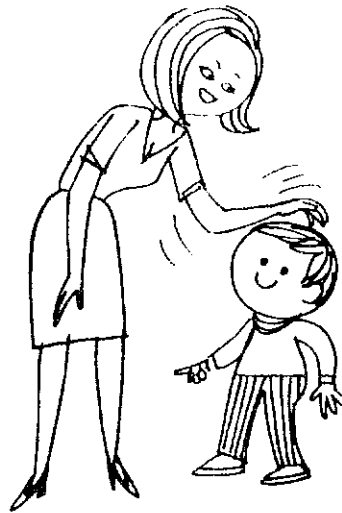
8. Avoid making models in any art medium for the children to copy.
9. Give the child the minimum of help in order that he may have the maximum chance to grow in independence, but give help when the child needs it.
10. Make your directions effective by reinforcing them when necessary.
11. Forestalling is the most effective way of handling problems. Learn to foresee and prevent rather than mop up after a difficulty.
12. When limits are necessary, they should be clearly defined and consistently maintained.
13. Be alert to the total situation. Use the most strategic positions for supervising.
14. The health and safety of the children are a primary concern at all times.
15. Observe and take notes; increase your own awareness of what goes on.

\*Taken from: *The Nursery School* by Katherine H. Read



From *Menninger Perspective*, Menninger Foundation Publication.

- \* Don't disapprove of what a child is - disapprove of what he does.
  - \* Give attention and praise for good behavior, not bad behavior.
  - \* Don't lecture and don't warn. Children will remember what they think is important to remember.
  - \* You do not have to justify rules, although you should try to explain them.
  - \* Encourage discussion of rules. Remember you are the one who makes the final decision.
  - \* Punishment (time out) should be swift, reasonable, related to the offense and absolutely certain to occur. It does not have to be severe.
  - \* Throw out all rules you are unwilling to enforce.
  - \* Be honest with your youngster - hypocrisy shows.
- \*\*\* The most important factor in the youngster's self-image is what he thinks you think of him, and his self-image is a major factor in how he acts and what he does.



## DISCIPLINE

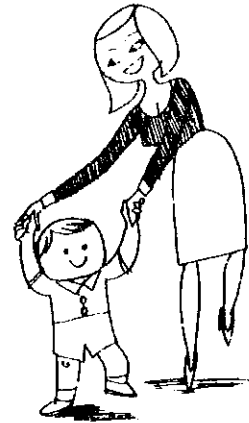
### Guides for Action

1. Act with confidence and sympathetic firmness in disciplining.
2. Good timing of action is essential in discipline.
3. Use simple, clear statements about what is acceptable behavior, with choices when possible, adding a statement about what is not acceptable if this will clarify the situation.
4. The consequences for misbehavior should be immediate, of short duration, and without humiliation for the child. They should bear some relation to the act, if possible, and should be consistently applied and maintained.
5. Effective consequences are restrictions in space, such as where the child can play or be, and restrictions in use, such as what he can use. Consequences should not be restrictions in activity, such as being made to sit on a chair. A child's thoughts during the time he is sitting are likely to be of questionable value.
6. Respect the child's feeling of guilt, but do not try to add to it. Accept any restitution he may wish to make, and then leave the incident behind.
7. Forestalling and preventing misbehavior reduce the necessity for discipline.

\*Taken from: *The Nursery School* by Katherine H. Read

Perhaps the best guide of all:

COMMON SENSE  
AND  
COMPASSION



University of Nebraska at Omaha

Day Care Training Program

Coping with Problem Behavior

#### Resources

Anderson, Zola. *Getting a Head Start on Social-Emotional Growth*. Omaha, Nebraska: Resource Center for Handicapped Children, Meyer Children's Rehabilitation Institute. 1976.

Baruch, Dorothy Walter. *New Ways in Discipline: You and Your Child Today*. New York: McGraw-Hill Book Company, Inc. 1949.

Norton, G. Ron. *Parenting*. Englewood Cliffs, New Jersey: Prentice-Hall. 1977.

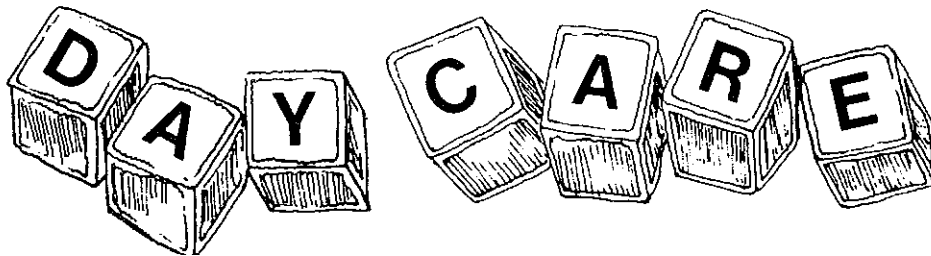
Madsen, Charles H. *Parents and Children, Love and Discipline: A Positive Guide to Behavior Modification*. Northbrook, Illinois: AHM Publishing Corporation. 1972.

Sheppard, William C., Steven B. Shank, and Darla Wilson. *Teaching Social Behavior to Young Children*. Champaign, Illinois: Research Press. 1973.

Shure, Myrna B., and George Spivack. *Problem Solving Techniques in Childrearing*. San Francisco: Jossey Bass Publishers. 1978.

Stone, Jeannette Galambos. *A Guide to Discipline*. Washington, D.C.: National Association for the Education of Young Children. 1969.





# TRAINING PROGRAM Evaluation

Workshop Title	Date	Location
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OVERALL RATING

PRESENTATION

HANDOUTS



Excellent

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Very Good

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Good

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Fair

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I LIKED:

I would like to  
know more about:

I DIDN'T LIKE:



EMERGENCY FIRST AID

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

COMPLETE THE FOLLOWING QUESTIONS

1. The steps for preventing shock and for giving first aid for shock are:

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. Get medical help as soon as possible.

2. Name one reason why you should begin artificial respiration as soon as possible.

- A. \_\_\_\_\_

3. Describe where the pressure points are on the body for:

- A. Arms: \_\_\_\_\_
- B. Legs: \_\_\_\_\_

4. List the three (3) types of poisons for which you should not induce vomiting:

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_

5. In what three (3) places should you prevent movement in order to immobilize a fracture (or suspected fracture) of the forearm?

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_

6. What three (3) steps should you take in controlling bleeding? (List them in order of application.)

- A. \_\_\_\_\_
- B. \_\_\_\_\_
- C. \_\_\_\_\_

7. Name one way to relieve the pain of a minor (first-degree or small second-degree) burn.

- A. \_\_\_\_\_

(over)

READ THE FOLLOWING STATEMENTS CAREFULLY. MARK THEM TRUE OR FALSE.

- \_\_\_\_\_ 8. If a person is breathing adequately, and is coughing to try to dislodge a foreign object, you should slap the person on the back to help dislodge the object.
- \_\_\_\_\_ 9. The principal danger in moving an injured person is causing further injury.
- \_\_\_\_\_ 10. Before beginning mouth-to-mouth resuscitation, you should check the mouth for possible obstructions.
- \_\_\_\_\_ 11. If a dressing becomes blood-soaked, you should remove it before placing another dressing over the wound.
- \_\_\_\_\_ 12. If a person has swallowed a petroleum product (such as gasoline) and is in a semi-conscious state when you reach him, you should not induce vomiting or give him any type of stimulants.
- \_\_\_\_\_ 13. In treating a chemical burn of the eye, you should wash the chemical out of the eye by pouring water from the outside corner of the eye to the inside corner.
- \_\_\_\_\_ 14. Signs to look for in checking a person for a fracture include swelling, tenderness, unnatural limb position, and/or an inability to move the injured limb.
- \_\_\_\_\_ 15. If you suspect a head injury, you should immobilize the victim's head and get medical help immediately.
- \_\_\_\_\_ 16. In cases of minor burns (such as a scald), you should protect the burned area by applying butter or some type of ointment.
- \_\_\_\_\_ 17. A person in shock should be given something to drink, such as coffee, in order to combat the shock.
- \_\_\_\_\_ 18. When inducing vomiting, keep the head lower than the victim's waist.
- \_\_\_\_\_ 19. When someone is having an epileptic seizure, you should try to restrain their movements.
- \_\_\_\_\_ 20. In giving mouth-to-mouth resuscitation, tilting the head is unnecessary.
- \_\_\_\_\_ 21. If a tourniquet must be applied in order to stop severe bleeding, you should loosen it or remove it once the bleeding has stopped.
- \_\_\_\_\_ 22. Ideally, splints should extend beyond the joints above and below the fracture.

## Handout Number Two

### THE DAY CARE TRAINING PROGRAM

#### WORKSHOP: FROM CUTS TO CONCUSSIONS—Emergency Treatment For Kids

##### I. General Safety Precautions

- A. Store all cleaning supplies, tools, etc. out of reach.
- B. Keep emergency telephone numbers posted permanently by the telephone.
- C. Formulate fire escape plan and practice.
- D. Keep first aid kit in convenient place.
- E. Inspect carpeting and throw rugs—fasten them down.
- F. Inspect for protruding nails, tacks, etc. and repair.
- G. Inspect stairways for unsafe areas.
- H. Inspect electrical cords, extension cords and plug-ins.
- I. Inspect playground area and equipment for safety.
- J. Check nursery furniture and equipment for safety.
- K. Keep entry ways dry from rain and snow.
- L. Set a good example by following safety precautions.

##### II. Safety Tips on Toys

- A. Look for well made toys.
- B. Read all labels.
- C. Read all instructions and/or directions.
- D. Look for hazards.

1. Sharp edges
2. Small parts
3. Loud noises
4. Sharp points
5. Propelled objects
6. Wrong toy for wrong age
7. Electric parts

##### III. Specific First Aid Care

###### A. Definition of First Aid:

1. First person on the scene to render immediate care.
2. Do not move victim unless life is in immediate danger.
3. Send for aid—emergency unit, MD.
4. Take victim to hospital or family doctor (know quickest route for each).
5. Phone 911.

###### B. Shock

###### 1. Signs of shock

- a. Depressed vital systems
- b. Weakness
- c. Skin—cold, clammy, ashen white
- d. Blood pressure very low
- e. Breathing—shallow, irregular
- f. Pulse—fast, weak, hard to detect
- g. Eyes—dull, vacant, lackluster, pupils dilated

5  
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## 2. Emergency First Aid For Shock

- a. Keep victim lying down.
- b. Make as comfortable as possible without further injury.
- c. Cover victim only enough to retain body heat.
- d. Elevate feet and legs unless victim has head or chest injury and/or has difficulty breathing—then elevate head and chest.
- e. Keep victim quiet.

## C. Choking

1. Piece of food, small item—rap sharply between shoulder blades in upward motion. Check mouth for dislodged item. Repeat if necessary. Check for need of artificial respiration.
2. Liquid—encourage victim to cough, breathe deeply and remain calm. When choking is past, have victim slowly drink liquid to ease throat irritation.

## D. Artificial Respiration

1. Place victim on back.
2. Clear the mouth of any obstruction.
3. Tilt head and jut the jaw.
4. Begin mouth-to-mouth or mouth-to-nose breathing.
  - a. Adult—every 5 seconds
  - b. Child—every 3 seconds

## E. Controlled Bleeding

1. Direct pressure
2. Elevation
3. Pressure Point
4. Tourniquet—use only as a last resort (life or limb)

## F. Fractures

1. Closed
  - a. Signs include pain, tenderness and/or swelling near break; unnatural limb position; inability to move limb.
  - b. Immobilize area of fracture.
  - c. Immobilize adjacent joints.
2. Open
  - a. Look for wound or break in the skin plus other signs noted in “a” above.
  - b. Immobilize area of fracture.
  - c. Immobilize adjacent joints.

## G. Burns

1. First degree—reddens the skin
  2. Second degree—blisters the skin
  3. Third degree—underlying tissue destroyed, area may appear charred—cover with sterile dressing.
  4. Chemical burn—wash area thoroughly with lots of water.
  5. Treat for shock.
- { Clean area around burn and cover  
with sterile dressing.

1  
2  
3

4

5

#### H. Poisoning

1. Generally dilute with water or milk; induce vomiting.
2. Acids, alkaline; petroleum products—dilute but do not induce vomiting.
3. Locate container of ingested material; save particles of vomit and take with the victim to doctor.
4. Poisonous plants

#### I. Convulsion/Seizures

1. Keep victim from further injury.
2. Let victim rest—sleep if necessary.

#### J. Miscellaneous

1. Cuts, scrapes, punctures, bites, blisters, splinters, etc.—clean with soap and water, apply antiseptic and bandage.
2. Nosebleeds

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2  
3  
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Handout Number Three

CHECK LIST FOR TOY SELECTION, USE, AND STORAGE AND MAINTENANCE

CHECK LIST FOR SELECTING A TOY

	YES	NO
1. Will children be able to use this toy safely?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are there any labels on the toy to indicate for which age group the toy is intended?	<input type="checkbox"/>	<input type="checkbox"/>
3. Does the toy have sharp points either on the outside or inside that can puncture if the toy is broken?	<input type="checkbox"/>	<input type="checkbox"/>
4. Does the toy have sharp edges that can cut?	<input type="checkbox"/>	<input type="checkbox"/>
5. If the toy is made of plastic, is the plastic durable enough to survive rough play?	<input type="checkbox"/>	<input type="checkbox"/>
6. Are there small parts that can be swallowed or inhaled?	<input type="checkbox"/>	<input type="checkbox"/>
7. Does the toy involve shooting or throwing objects that can injure eyes?	<input type="checkbox"/>	<input type="checkbox"/>
8. Does the toy make sharp, loud noises that could damage a child's hearing?	<input type="checkbox"/>	<input type="checkbox"/>

CHECK LIST FOR TOY USE

	YES	NO
1. Have I disposed of plastic wrappings that could suffocate a child?	<input type="checkbox"/>	<input type="checkbox"/>
2. Are there instructions with the toy that should be explained to children?	<input type="checkbox"/>	<input type="checkbox"/>
3. Have I told children about keeping this toy out of the hands of younger children?	<input type="checkbox"/>	<input type="checkbox"/>
4. If this toy uses electricity, have I taught children the proper way to unplug it (by pulling out the plug, <u>not</u> the cord)?	<input type="checkbox"/>	<input type="checkbox"/>
5. If the toy requires the use of utensils (e.g., scissors, knife, needle) have I taught children to use them safely?	<input type="checkbox"/>	<input type="checkbox"/>
6. Do I supervise children while they play with their toys?	<input type="checkbox"/>	<input type="checkbox"/>

# CHECK LIST FOR STORAGE AND MAINTENANCE OF TOYS

	YES	NO
1. Have I provided a place for children to store toys?	<input type="checkbox"/>	<input type="checkbox"/>
2. Have I taught children to store toys safely and the reason for storing them?	<input type="checkbox"/>	<input type="checkbox"/>
3. If a toy box is used, is it ventilated?	<input type="checkbox"/>	<input type="checkbox"/>
Is it free of self-locking devices that could trap a child inside?	<input type="checkbox"/>	<input type="checkbox"/>
Is its lid designed not to pinch a child's finger or fall on a child's head?	<input type="checkbox"/>	<input type="checkbox"/>
4. Have I checked all toys for possible hazards—sharp edges, splinters, weak seams, rust?	<input type="checkbox"/>	<input type="checkbox"/>
5. Are electrical cords and plugs in good condition?	<input type="checkbox"/>	<input type="checkbox"/>
6. Are toys brought inside at night to avoid damage?	<input type="checkbox"/>	<input type="checkbox"/>
7. Are there broken toys that should be thrown away?	<input type="checkbox"/>	<input type="checkbox"/>

EMERGENCY FIRST AID

NAME: \_\_\_\_\_

DATE: \_\_\_\_\_

COMPLETE THE FOLLOWING QUESTIONS

1. The steps for preventing shock and for giving first aid for shock are:

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B. \_\_\_\_\_

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B. \_\_\_\_\_

C. \_\_\_\_\_

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B. \_\_\_\_\_

C. \_\_\_\_\_

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B. \_\_\_\_\_

C. \_\_\_\_\_

7. Name one way to relieve the pain of a minor (first-degree or small second-degree) burn.

A. \_\_\_\_\_

(over)

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- \_\_\_\_\_ 21. If a tourniquet must be applied in order to stop severe bleeding, you should loosen it or remove it once the bleeding has stopped.
- \_\_\_\_\_ 22. Ideally, splints should extend beyond the joints above and below the fracture.