

Intervention Mapping
Strategies for Assisting Children Affected by Alcohol and Drugs in Utero

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Every child exposed to alcohol and drugs in utero is affected differently. Alcohol and drugs can cause brain damage, and depending on the area of the brain damaged can present particular behaviors. Prenatal care, post natal events, genetics, and other factors that can contribute to behavior will not be discussed in this paper but should be considered in assessing the needs of each affected person. No one knows what drop of alcohol or which drug may have damaged the development of a particular part of the nervous system. Therefore, it is difficult to create and implement interventions for our children and adults unless we understand their strengths and challenges. Every affected person needs individualized, strength based interventions. The earlier interventions are implemented, the better the outcome.

People who spend significant time with affected individuals, i.e. parents, caregivers, teachers, etc., are usually more aware of the affected person's "reality" than anyone else. In these roles, they are best suited to identify behaviors and create appropriate interventions based on knowledge and experience gained from observing and interacting with the affected child or adult. Lists of behavioral characteristics and interventions could be infinite and not necessarily appropriate for everyone. It will be helpful for you to keep a journal. Our child or adult may have behaviors that occur at certain times of the year, month, week, or day. It will also help you to log your successes and review interventions that work sporadically or not at all.

Below are important elements of interventions for children and adults affected by alcohol and drugs in utero. Remember that creating a structured environment and building on their strengths is your key to success. Start by making things as uncomplicated as possible. This pertains to the physical environment as well as the way you instruct our child or adult. Give them one request at a time and keep it simple using consistent language. Observe the behavior, create a structure, repeat the intervention as often and for as long as needed, be consistent and concrete and create appropriate rewards and consequences. Frequency and duration are extremely important to maintaining success. Remember, most of these interventions must be repeated and continued over a lifetime.

It is often difficult to find consequences for behavior caused by brain damage, so redirecting behavior will save everyone pain and anguish. The affected individual will respond to consistency and instructions and concepts that are concrete. Reward them often and immediately. They mainly want to please you and most of all they want your unconditional love.

It is important to avoid negatives...try not to lead with "don't". Saying "don't run", may only reinforce the command to "run". Describe the behavior you want to see instead, i.e., "Please, walk".

Mapping behavior for both you and the child or adult will result in success. Remember, if you want change, it must start with you. Changing the way you interpret behavior is the only way that we will change outcomes for affected people. Truly understanding the cause of the behavior and using strength based approaches to create appropriate interventions will lead to success for you and affected individuals. My wish is that you will be able to use this model in designing successful and appropriate interventions for our affected children and adults.

People affected by alcohol in utero are perfect as they are. They are loving, loyal, compassionate, sensitive, generous, forgiving and so much more that is positive. We need to create environments for them that encourage and reward these beautiful beings and allow them to be themselves.

Thank you for making a difference!

KEY ELEMENTS FOR INTERVENTION MAPPING

Observe

You must become a keen observer of behavior, as it is a form of communication. Observe without judgment, expectation or your perspective of reality. The information you receive from your senses may not be translated the same way by the affected person who is exposed to the identical input. Most behavior changes are related to changes in the environment. Someone with an FASD experiences each environment and the changes in that environment differently. Keeping a journal will make you aware of patterns of behavior that may be connected to changes in the environment, time of day, seasons, etc. Observe the affected person's behavior in each **environment they experience**.

What do I mean by environment? What do I mean by the environment they experience?

Environment includes:

❖ *The body as an environment*

➤ Clothing

- textures... wool and synthetic clothing may be irritating
- may feel too tight or too loose
- tags might need to be cut off
- seams might need to be sewn flat
- patterns or colors may be over stimulating

➤ Food

- texture and color of food may cause them to seem fussy about what they will or will not eat
- smell of certain foods may be unpleasant to them
- food touching other food may make the meal unappealing
- they may have food allergies

❖ *The brain as an environment*

➤ Neurological and chemical imbalances may cause the child to over react, and seem or become violent, impulsive, etc.

- psychiatric testing and intervention may be appropriate. Knowledge of FASD is essential for prescribing and monitoring medication(s)
- there may be other brain disorders that are present or appear with age
- behavior may be related to what part of the brain was damaged by the presence of alcohol or drugs during pregnancy

❖ *The physical environment*

➤ Over stimulation and distraction from many sources can cause behavioral changes

▪ *People*

- too many people in the room
- people moving about can be distracting
- hyperkinetic behavior can be over stimulating
- people's clothing, glasses, smell may trigger behavior

- *Furnishings*
 - no plastic toys, furnishings, rugs, utensils, dishes or clothing (polyester) in the environment (hypersensitive to out gassing from plastic)
 - too many furnishings can be distracting and can cause disorientation if moved
 - use muted colors and soft textures
 - create secluded areas for quiet time
 - arrange furniture to guide movement
 - uncluttered surfaces are less distracting and encourage organization
 - use baskets and shelving for organization
 - ◆ labels, pictures and outlines of contents on surfaces encourage organization

- *Color*
 - avoid furniture that is too highly patterned or colorful
 - clothing color (theirs and other's) can be disturbing or calming
 - surroundings that are too colorful should be avoided
 - walls that are too brightly colored may be distracting

- *Sound*
 - too much noise...sounds we screen out may seem loud and disturbing
 - headphones may allow more focus

- *Temperature*
 - feel too hot or too cold
 - seasonal changes may be difficult

- *Lighting*
 - too bright, fluorescent lights flicker and buzz
 - seasonal changes in light and dark may cause behavioral changes

- *Odors*
 - hypersensitive to out gassing from plastic
 - over or under developed sense of smell

- *Walls*
 - clean, uncluttered walls are calming
 - hang a limited number of items and line the tops evenly
 - one blank wall in the room
 - colors should be neutral

- *Movement*
 - mobiles are distracting
 - television on when no one is watching can cause distraction

❖ *The emotional environment*

- many affected people are extremely sensitive to emotions, theirs and others
- creating a calm, structured, predictable, soothing, and loving emotional environment is important

Create Structure

All of us respond to structure. Some need more than others. Typically, affected individuals will need a great deal of structure in their life. You must provide structure on a continuous basis. Even fifteen minutes of unstructured, unsupervised time can lead to disaster.

What do I mean by structure? What do I mean by providing this structure on a continuous basis?

Structure includes:

❖ *The physical environment*

- the physical environment will give affected individuals cues, so once you have placed i.e., furniture, toys, games, projects, clothes, etc., don't move them
- label drawers and put pictures of the contents on the outside to assist them in identifying where things can be found and where things are to be put back
- because change is very difficult, do not alter the structures you create
- new or additional people in places or at times that do not usually include them may throw disrupt the established routine

❖ *Routines*

- change is difficult for affected people so creating predictability is extremely important
 - bedtime, meals, etc. should be scheduled at the same time everyday if possible
- sit in the same chair at the same location at meal time
- do not alter the structures you create
 - if you have arranged furniture so that a child can navigate the environment successfully, don't move it

Repeat

Repetition is often how we all learn. Once you have created an intervention that works, repeat it as often as necessary. What works one day, however, may not work the next. Do not force repetition if it is not working. It may take frequent intervention to teach a skill, i.e. reminding an affected person to brush their teeth every morning after they eat. You will probably have to remind them every day but some will eventually find that this is part of their daily routine. Having a picture and list in the bathroom on the wall next to the sink can become a cue to brushing their teeth or other self care behaviors. If you said it once, you are going to say it a thousand times, yes, just accept it as part of your tool box. Of course, you will not become angry when you tell our child for the twentieth time to pick up their toys, shoes, clothes, pay attention, etc. (right?). The need for this level of support may still be necessary for our adults too. Remember that there are times when the neurological connection is loose or closed down. They may remember how to do something one minute and forget the next. I repeat, take a deep breath, and say it again with love and patience and hope in your heart and voice.

Be Consistent

Affected individuals need consistency in every aspect of their life. They do not usually respond well to surprises or changes in schedules, routines or environments.

What do I mean by being consistent in every aspect of their life?

❖ *Routines*

- routines should be established with timetables and kept simple
- you may use visual cues to help them remember the steps to these routines, i.e., pictures of them doing homework, sitting at their desk, brushing their teeth, making the bed, etc.
- you may have to draw/write the steps involved in some, many or all activities so they don't get lost in trying to figure out what comes next
- be careful not to discontinue routines because you see improvement
- it is not uncommon for our child to possibly master a routine one-day and forget it the next
- practice patience!

❖ *Environmental consistency*

- keep the environment predictable and as unchanged as possible
 - leave the furniture/desk in the same place, it may be a visual cue to where other things are in the house
 - assign seats at the table so everyone sits in the same place every time there is a meal or certain activity such as art projects

❖ *Visual/Verbal consistency*

- use the same verbal or physical cues to guide their movements and possibly their emotions
- when the child is losing control, tell them to “Get your body in control”
- it is more concrete than saying “calm down”, (abstract concept)
- they can learn to put their body (concrete) in a chair (concrete)
- they learn that this was a signal to sit down and be quiet
- be sure that what you say is what they understand that you are saying

Be Concrete

The mind of our affected individual is probably operating in a more concrete mode than yours. This will probably not change over time. It is usually difficult for them to think abstractly which can give them trouble with math, for example. More dramatic, however, is the effect this has on their ability to weigh the “right” and “wrong” way to behave or to make a decision.

What do I mean by thinking concretely?

Being concrete includes:

- ❖ keeping things very simple; ideas, directions, expectations, environments, etc.
- ❖ give one direction at a time
- ❖ if our 15-year-old has leveled out academically and/or socially at 7, do not expect them to “figure things out” at any developmental level other than the one they are experiencing

Create Appropriate Rewards, Redirection and Consequences

Our child or adult will need constant reinforcement to learn what behaviors will make their life more fun, positive and successful. Rewards should be given for each step that is successful in a routine or activity that you are teaching. ***Redirection not punishment.*** Redirection enforces boundaries and rules.

Punishment for a faulty memory or confusion because of over stimulation will only make learning more difficult.

- ❖ it is extremely important to reward children often and immediately
- ❖ if our child or adult does something that you want to reinforce, reward them instantly
- ❖ remind them of what they did that was successful even if it was just the attempt
- ❖ time outs are out
- ❖ try making a “power chair” with your child
 - design a place where they can go to regain their power rather than a place to sit and connect action and consequence, learn from past mistakes and plan future actions - which are all abstract concepts that are usually difficult to understand

The most difficult part of intervention meant to correct behavior or redirect it, is coming up with an appropriate consequence. Whatever you do, do it *immediately*.

You are a magician with a bag of tricks. When one doesn't work, pull out another. You are an artist, be creative. You are a kind and loving being.

Thank you for caring.