

This summary is from the book “The Connected Child” by Karyn Purvis, PhD., et al. ISBN 978-0-07-147500-6. The book is around 260 pages. I found the book very good and easy to read. The information is great. One of the things that struck me was that it felt like the authors were describing ‘Cocomelon’ sorts of parents in their approach with troubled and adopted children. (If you haven’t seen Cocomelon, consider yourself lucky! ☺). This is not a criticism, but an observation. A lot of the book is getting the parents to really think about their child and what terrible stuff they have been through and how their behaviors are focused on surviving the best way they can in a dangerous environment that they often came from.

Having finished this summary, I have some comments/observations:

- In spite of being an ‘easy read’, there is a lot packed in the book.
- The author(s) repeat a moderate amount through the book, but that’s not bad.
- There is very heavy use of long lists rather than prose. (That works for me which is probably why I think it was an easy read.)
- I think this is a good book and I think it would be great for expectant parents to read it (independent of their child being adopted or special needs).

## Chapter 1: Hope and Healing

Parents of adopted and challenging children often start with high hopes, but they can’t seem to make a good connection with their child. This leads to frustration – feeling at the end of your rope. Parents tend to try the ‘normal’ mechanisms: time-outs, punishments, medications, bribery, and so on. These really don’t work and get in the way of what you and your child need.

A child that suffered deprivations and harm early in life impacts all of the ways the child develops – coordination, ability to learn, social skills, neurochemical mechanisms in the brain, etc. There is hope for dealing with these, but there is no one solution for all children because the issues and impact vary wildly. (And some impacts are very deep.)

The high-level approach is to:

- Disarm the child’s fear response
- Establish clear AND SENSITIVE parental authority
- Provide a sensory-rich environment
- Teach appropriate social skills
- Support healthy brain chemistry
- Help your child connect with his or her own feelings
- Forge a strong emotional bond between you and your child

These foundations will help with the different and multiple effects of what has happened to the child. There is a lot here, and it is really a multi-front process: diet, social, health, IQ (intellectual intelligence) and EQ (emotional intelligence). The author gives of the examples of this working across the spectrum of ages and issues.

The author stresses to not put off or delay dealing with the issues (either out of the challenge or embarrassment). Left to fester, the issues will only get worse. We don’t know the experience these children had before coming to you. So always be compassionate – being tolerant of behaviors. This is not dismissing them but trying to understand them and the child. The children want to connect and make you happy.... They just don’t know how – that’s your job to show them.

Don’t assume what the child’s behavior is about – you don’t know. A key is to really observe even small behaviors – body language, tone, emotional outbursts, actions that don’t make sense, reactions to clothes or sounds or foods or new environments. It often to help keep a journal – and pay attention to help develop strategies.

There are times that medication is a useful and good option, but not for everything. Be as knowledgeable as possible about your child’s needs and medication options. Often, talk therapies are less effective with children with

developmental and language issues. A great mechanism for development and improvement is: engage, play, praise. Play and games are a shared joy and they engage the child physically and emotionally.

There are common things that get in the way of connections and attachment:

- Child carriers – they constrain the child and separate them from the parent
- Time outs – this separates the child and may trigger bad memories, better to keep the closer/in view
- Lack of eye contact
- Electronics – TV, movies, devices, games – this is not going help get you and the child connected

Being effective at all this is a challenging balancing act – lenient and affectionate enough for the child to feel safe and explore new things but strict enough so they can operate safely and with respect for others. When this is done, the child will:

- Have a sense of safety
- Have a sense of trust
- Have a release of control
- Have the capacity to try new behaviors (learn)

This balance is really about focusing on connecting and correcting. Note that correcting is not punishing. It is about coaching and showing the behavior that is wanted/needed. All of this results in a life-style change. You can't run at 'normal' modern life speed – running around, dropping kids off, dealing with school, sports, activities, and so on. With a adopted or challenged child, you need to slow down.

## Chapter 2: Where Your Child Began

A lot of the children that need this attention and help have not had a good start to their life. There a variety of problems that often occur:

- Unwanted and given up for adoption
- Poor orphanage care, attention, nutrition, etc.
- Fetal Alcohol Syndrome
- Birth mother substance abuse when pregnant
- Family lives in poverty with insecure housing, nutrition, safety, health care
- Repeated foster home transitions
- Lack of care-taker attention, holding, nurturing
- Isolation from family, care-takers, etc.
- A sterile/institutional/impooverished environment

So, to understand your child:

<b>If your child was adopted or is special needs</b>	<b>They would have become securely attached and</b>
If they have been held often and affectionally	Able to bond and connect with the family
If they have been fed and nurtured regularly	Able to respond appropriately to adults
If they had a caretaker who was sensitive to their needs	Able to make friends and interact sociably with them
If they had a caretaker who was respected boundaries	Able to stay with a game of task well
If they had a caretaker who was interactive/responsive	Able to learn and ask for help

So, given the issues they had earlier in their life, to develop attachment, your child will need:

- Loads of extra affection and kindness
- Appropriate rules, structure, and boundaries
- Varied exercise and sensory enrichment activities
- Cuddling, feeding, and rocking
- Lessons in how families stick together (Ohana means family – nobody gets left behind or forgotten)
- Lessons in treating people with kindness and respect

## Chapter 3: Solving the Puzzle of Difficult Behavior

Adopted and foster children often cannot fathom the former life the child has had. They can bring with them:

- Abandonment, loss, and grief issues
- Attachment dysfunctions
- Neurological alterations
- Cognitive impairments
- Coordination and motor skill problems
- Sensory processing deficits
- Fear
- Anger
- Flashbacks and posttraumatic stress
- Shame
- Anxiety
- Depression

Often children with obvious physical problems fare better in the system because it is clear something is wrong. For children with subtle issues, adults often cannot see the problem and think the behavior is intentional.

<b>When a child does this:</b>	<b>They may be trying to express this:</b>
Pulls away from your embrace	Never learned appropriate care, hurt
Approaches strangers indiscriminately	Caregivers not reliable, seeking others to help
Becomes angry easily	Terrified/protecting themselves, low blood sugar, drained
Wants to be left alone	Doesn't know how to cope, everything's confusing, overloaded
Disobeys instructions	Doesn't understand or coming to fast, I can only count on myself
Flirts or sexually precocious	Sexually abused, only way to get positive attention
Bullying or aggressive	The way I was treated, I'm scared/sad, numb my pain by hurting you
Restless or fidgety	I need to be alert and prepared to defend myself, nobody else did
Hoards or steals food	I was painfully hungry/malnourished, my way to know I have food
Fears walking home alone	I had been attacked and abused, I need protection
Can't sleep	I have to be alert to defend myself, fight/flight on overdrive

A child raised in an impoverished environment may exhibit:

- Food hoarding because of fear of starvation
- Flattened back of head from laying on back as an infant
- Crossed eyes from staring at the ceiling
- Varying degree of sensory processing issues because of a sterile environment
- Self-comforting/repetitive behavior because of a lack of nurturing
- Fearful of new places and people (dilated or constricted pupils, elevated pulse, running away)
- People pleasing, manipulation, playing one adult off another because the child had to 'game' adults
- Indiscriminate friendliness because of unmet needs or touch or attachment
- High threshold for pain because of a lack of attachment, deprivation, stress
- Smaller (height, weight) because of malnutrition or early prenatal issues
- Language and learning delays due to attachment, sensory deprivation, stress
- Hearing loss due to chronic and untreated ear infections

For children with sensory processing dysfunctions the world is not a safe place or predictable. The child may be:

- Distressed by loud sounds/noises
- Reacts to odors/smells
- Agitated by vibrant/moving images
- Averse to many tastes and textures, Unwilling to wear certain clothes, Unwilling to eat certain foods
- Awkward or fearful about moving or being held
- Clumsy or lacking balance/coordination
- Distracted or whiny
- Afraid of new things, says "I can't"
- Aggressive, says "I won't"
- Unusually active or inactive
- Unpredictable outbursts or withdrawals
- Over or under sensitive to touch
- Unable to participate in team sports
- Disoriented when their head is raised or lowered
- Have difficulty coordinating both sides of their body
- Difficulty organizing, copying from blackboard, following instructions

The next parts of the chapter talk about the issues and signs of:

- Early sexual abuse
- Seizures
- Fetal Alcohol exposure
- Mental or physical abuse

A key thing to remember is that children with these issues behave the way they do out of fear and survival instincts. Some of these behaviors are:

<b>External behaviors (acting out)</b>	<b>Internal behaviors (acting in)</b>
Irritable	Dissociation
Antisocial	Withdrawal
Anger	Crying
Rage	Sadness
Aggression	Lethargy
	Depression

To be able to decipher what your child’s behaviors are telling you, tune in to the child and watch carefully. Some things to look for:

- Response in noisy or quiet environments
- Response to touch
- What does the child not like or like to touch
- Response to your voice or other sounds
- What toys/activities is the child drawn to
- Activities the child quickly abandons
- What is the child’s preferred social spacing (their ‘bubble’)
- Any repetitive actions
- Does the child’s heart pound even when sitting
- Clenched fists
- Pupils dilated or constricted
- When are they calm
- When are they happiest
- What triggers a tantrum or breakdown
- Signs of depression or rage

Even if a child seems strong, inside they are fragile. What you need to do is:

- Find out what the child is really saying? (Not just the words...)
- What does the child really need? (Requires really listening and taking background into account...)

#### **Chapter 4: Disarming the Fear Response with Felt Safety**

Your child having disturbing behaviors like tantrums, hiding, hyperactivity, or aggressiveness are usually triggered by the child’s deep primal fear. The way to deal with this is to provide an atmosphere where the child feels and experiences the safety themselves – ‘felt safety’.

<b>A fearful child focuses on survival</b>	<b>A scared child cannot grasp</b>	<b>Fight or flight will trigger</b>
Safety	Discussions, sermons, lectures	Run away and hide
Hunger and thirst	Complex reasoning, logic, stories	Lash out physically or verbally
Fatigue	Abstract or philosophical concepts	Get angry or cry
Escaping scary situations	Solving puzzles, math, problems	Stonewall, become unresponsive
Making hurt stop and go away		Try to control the situation
Staying in control		

Bullying or punishing your child will not help and will push them into fear and bad behavior. The child is basically reverting to the ‘primitive brain’. And their chronic fear causes hypervigilance and sets up hair triggers. The key to deal with this is to reduce their fears and to get across to them that they are safe. 1) Be consistent in their care –

communicates ‘a safe adult will protect and take care of me’. 2) Offer warm interactions – communicates ‘I don’t need to be afraid, they value me’. 3) Be responsive – communicates ‘they understand what I need’.

Other ways to develop trust:

- Showing emotional warmth and affection consistently
- Offing positive emotional response and praise often
- Responding attentively and kindly to your child’s words and actions
- Interacting playfully with your child
- Physically matching/mirroring your child’s voice and behavior (like Tony Robbins)
- Being sensitive to your child’s tolerance for sounds, touch, and personal space
- Using simple words or language (that they understand) and repeat yourself
- Let your child know about upcoming change and activities

The chapter talks about other mechanisms to help:

- Reduce stress
- Make their day predictable (use calendar/cards)
- Give them appropriate choices to share control (often using a limited set of choices)
- Be calm and patient
- Follow through on promises
- Be confident
- Prevent the child getting into sensory overload
- Don’t ‘corner’ them
- Teach them how to identify ‘safe’ people
- Be approachable
- Introduce your child to new environments
- Honor their emotions
- Respect their own life store

If your child reacts badly or dysregulates, you should have a ‘wild card’ process to use with the child:

We breath calmly
We use our words
We choose another activity
We make a new plan

And some quick ways to help a child relax:

Get down to their level physically by kneeling or sitting
Speak softly and gently in a warm voice
Offer a stress ball or fidget toy
Offer a piece of bubble gum
Offer a candy that they can suck
Off to sit or stand further away
Encourage deep slow breaths

I personally find speaking softly and gently is a challenge for me – I think I am but I realize that I am not. I think this takes practice and effort. Being a large man, I am aware of my size and that I could be intimidating. Again, I don’t think I am intimidating and pay attention to this. But all of this is not what who I think I am or what I think I’m doing, it’s what the child perceives based on their life experiences.

### Chapter 5: Teaching Life Values

This chapter has a large range of values to work on with your child:

- Respect (people, objects/toys, property, body, space)
- Using words (instead of actions, behaviors, outbursts) and requesting whole sentences
- Gentleness and kindness (help your child modulate their own behaviors)
- Consequences
- Making eye contact (put your head in their view, stop speaking, say their name, ask for eye contact)
- Listening and obeying
- Authority (who’s the boss?)

## Chapter 6: You Are The Boss

The old/traditional ways don't work well with special needs children and often make the behavior worse.

Old approach	New way
Anger/harsh punishments	Respond quickly
Lectures, sermons, tirades	Clarifying expectations
Bribery	Offer simple choices
Threats	Present consequences
Whining and complaining	Give immediate retraining (and re-do)
Debates or arguments	Practice, practice, practice
Yelling and screaming	Keep the child near you
Shaming	Offer praise for success

Keep in mind: misbehavior is an opportunity and don't take misbehavior personally. One tool the author suggests is the IDEAL approach:

Respond <b>IMMEDIATELY</b> within seconds
Respond <b>DIRECTLY</b> with the child, eye contact, undivided attention
Respond in an <b>EFFICIENT</b> and measure way (enough firmness, not too much)
Respond with an <b>ACTION</b> based re-do that you walk through with the child
Respond with the action <b>LEVELED</b> on the behavior, not the child

## Chapter 7: Dealing with Defiance

Chapter 7 addresses when your child becomes defiant and argumentative. The bottom line is to maintain your authority, but in the context of their history and needs. It's about finding the right balance. Being too strict can be just as bad as too lenient.

You're too permissive if	You're too strict if	You've got the right balance
Make rules/promises and don't enforce	Tell your child NO more than praise	Once a rule is made you enforce it
Nag but don't enforce	Tell your child NO more than affection	Minimum firepower to correct
Wait too long to enforce, then explode	Constantly tell child what to do	Mostly praising and positive statements
Beg your child to cooperate	Shut down child's feelings, sadness	Catch your child do things right
Child decides when and what happens	Ignore or belittle child's point of view	Say they are precious/dear a lot
'What do you want' more than telling	Use punishments, shaming, insults	Let your child decide choices
Allow child to physically harm others	Constantly finding fault with child	You compromise with your child
Pretend you don't notice behavior		Accept and respect child's emotions
No negative consequences		Child recognizes you as boss, not afraid
Child doesn't take you seriously		
Child talks disrespectfully to you		

## Chapter 8: Nurturing at Every Opportunity

Chapter 8 is a mix of different strategies and advice on nurturing your child. Self-esteem is a big deal and many special needs children need a lot of nurturing for that self-esteem to develop. They often don't think they are worth anything.

One thing to do is to phrase things as a positive, not a negative:

Instead of	Say
Don't run	Remember to walk
Don't yell	Speak softly
Don't throw that	Hand it gently

Towards the end of the chapter, the author includes parental style quiz:

	Nurturing parent	Authoritative parent
In the morning	Going in their room and saying 'get up, time for school'	You sit on the child's bed, touch them, say 'breakfast in a few minutes'

At the breakfast table	You fix their breakfast and then go get ready yourself	After fixing their breakfast, you sit down with them and talk about the upcoming day.
When talking to your child across table	You comfortably reach out and touch cheek, hair, and look in their eyes.	You interactions are reserved and it's uncomfortable to eye contact or touch them.
When you hug your child	Your body softens molds to them. And you hold the hug for a minute.	You stiffen and squeeze him around the shoulders and quickly let go
When talking to your child	Your voice sounds soft and warm, melodic and playful.	Your voice sounds the same when you talk to an administrator at your office.
When you talk to your child	Words swing softly from mouth in a playful rhythm.	Words march out of your moth like little solders.
When there is an opportunity to touch	You seek opportunities to touch, and use your open hand and let it linger.	You only touch your child when necessary and use your fingertips and don't linger.
You use material gifts and objects	As an opportunity/excuse to bring you child closer to you, share, and interact.	As an opportunity to send the child away with the gift/object.
When you look at your child	You gaze at length at your child's eyes and sustain warm eye contact.	You glance at your child's eyes and don't seek or sustain eye contact.

These questions linked me to my earlier Cocomelon comment. But it is appropriate for special needs children who usually have had a really tough go of life. They need this sort of nurturing.

### **Chapter 9: Proactive Strategies to Make Life Easier**

This chapter talks about tactics that will make various things much easier:

- Talk about what is going to happen at the grocery store, and what they can get or choices.
- Rehearse upcoming events like phone calls, visits, etc.
- Talk about separations before they happen
- Keep their day balanced (a mix of activity, rest, snacks, etc.)
- Avoid overload
- Create and keep a daily schedule
- Create and keep a skills practice checklist

### **Chapter 10: Supporting Healthy Brain Chemistry**

Chapter 10 talks about healthy brain chemistry. In particular it gives suggestions around nutrition (broadly) and how important that is. It also talks about the impact of deprivation and abuse early in life on the brain neurochemistry and neurotransmitters.

This chapter felt very truncated for a challenging topic.

### **Chapter 11: Handling Setbacks**

Setbacks do happen, this chapter is reminding you not to give up and keep on with the tools described through the rest of the book. The author has a checklist to help you re-focus:

- Is my approach playful and interactive?
- Do I show that I genuinely value my child?
- Do I alert my child to what's coming next?
- Do I enforce consequences consistently?
- Do I mean what I say? Do I follow through on my words?
- Am I responding to misbehavior within three seconds?
- Am I guiding my child through re-do's?
- Do I let my child make choices and problem-solve?
- Do I make regular eye contact when I speak?
- Do I give my child my undivided attention?
- Do I give whole-hand, affectionate touches?
- Do I make affirming, warm comments?

- Do I behave consistently?
- Do I facilitate joint problem-solving with my child?
- Do I help my child self-regulate and develop self-awareness?
- Do I encourage my child to tell me their feelings?
- Do I ask my child what they need?
- Do I create a schedule that accommodates my child's fundamental needs?
- Do I simplify my life enough that I give my child my attention?

## **Chapter 12: Healing Yourself to Heal Your Child**

To help your child, you need to be okay and have addressed your issues.... Some questions to think about:

- What is the source of deep comfort and emotional nurturing for you?
- How do you recognize nurturing?
- Are you comfortable giving emotional support?
- How comfortable are you asking others for help?
- How often do you feel safe around other people?
- Do you comfort others in order to comfort yourself?
- Does your own childhood weigh heavily on your heart and mind?
- Are there ways you are sacrificial in your care of children because you don't believe in your preciousness?
- Are you comfortable with emotionally intimate relationships?
- Are you comfortable with physical affection from friends and family?
- Are you comfortable cradling your child in your arms for sustained periods of time?

The author talks about an Adult Attachment Interview (AAI). It includes questions like:

- List five adjectives that describe your childhood relation with your mother during your early childhood before the age of 12.
- Give a few words to remind you of an event that illustrates each of those adjectives
- What happened when you were upset?

The author encourages you to reflect on your own style – secure or insecure with respect to your parents. If you have some insecurities, it is worth seeking professional therapy.