



**SUPPORTING THE NETWORK OF OUT-OF-SCHOOL PROGRAMMES**  
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OSCAR Network  
Christchurch

**WHY BOTHER WITH RESILIENCE? AFFILIATION: BEING PART OF A  
GROUP FRIENDSHIP: HELPING CHILDREN LEARN TO BE INCLUSIVE  
LET'S BAN BANNING THINGS... DANGERS OF PUSHING YOUNG  
ATHLETES TOO HARD EXTENDING PLAY PAST EARLY CHILDHOOD  
TEENAGERS: IT'S NOT JUST THEIR HORMONES - IT'S THEIR BRAIN!**

**A WEEKEND OF**

# **SPECTACULAR FUN AND LEARNING**

brought to you from The OSCAR Network Production Team

*1st & 2nd November 2014  
in Christchurch*

To be held at

**9 Eveleyn Couzins Ave, Richmond, Christchurch**



**ENHANCING CHILDREN'S PLAY : WHAKAREWA / TE TAAKARO TAMARIKI**





# THE OSCAR NETWORK

**WE ARE AN ORGANISATION DEDICATED TO PROVIDING INFORMATION TO O.S.C.A.R. (OUT OF SCHOOL CARE AND RECREATION) PROGRAMMES.**

Our aim is to support, promote and network safe quality, accessible OSCAR services which are professional and centre around the needs of the child and their whanau.

The OSCAR Network provides information on training, development, mentoring, funding & finances, research, advocacy, management and staff support, resources and the general running of an Out of School programme. The OSCAR Network encourages OSCAR providers to operate quality services, however it is not a function of the OSCAR Network to accredit or assess OSCAR services.

The OSCAR Network has a well-earned reputation for working co-operatively alongside other groups and agencies. We work as a team in an environment based on mutual respect and trust. It is the combination of skills, ideas and energy, which achieves results from the consensus decision-making process. We enjoy our work by 'thinking differently'.

## THANK YOU

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# 5 THINGS YOU CAN DO IN THE NEXT 5 MINUTES TO BE HAPPIER IN THE NEXT 5 DAYS

BY RAN ZILCA

Happiness is a lifelong pursuit of meaning, purpose, and fulfilment. But while it could take years of persistence to deeply transform your life, there are scientifically-tested strategies that are shown to provide an immediate happiness boost. Such activities provide a modest increase in happiness but it lasts for weeks and months, and when practiced consistently over time, they become happiness habits, energizing you to live your dreams and passions.

## HERE ARE 5 SUCH STRATEGIES THAT YOU CAN PRACTICE RIGHT NOW, TO GET A SHOT OF HEALTHY PSYCHOLOGICAL NUTRIENTS:

### 1 GET UP AND DO SOME STAR JUMPS

Aerobic exercise boosts one's positive mood. Body and mind are inseparable. A couple of minutes of star jumps may go a very long way.

### 2 CALL A FRIEND OR A FAMILY MEMBER

Positive social connections are a cornerstone of happiness and health. A conversation with a friend can have a lasting positive effect, increasing your energy, and cultivating motivation. If there are people around you right now whom you like and appreciate, walk up to someone and talk with them. If not, pick up the phone and say hi.

### 3 WRITE DOWN THREE GOOD THINGS YOU ARE GRATEFUL FOR

Many people maintain a journal where they regularly write down the things for which they are grateful. This simple exercise of acknowledging your good fortune by

identifying "three good things", has been shown to provide both an immediate and a lasting effect on happiness.

### 4 IMAGINE THE BEST-CASE OUTCOME FOR THE COMING MONTHS

Research consistently shows that imagining your "best possible self" makes you significantly more optimistic, resulting in a range of positive emotions.

"The world is a random set of events to pessimists. Optimists, on the other hand, believe they control the things around them. So, in some ways, you have to pretend you're an optimist."

In line with common belief, thinking positively (yet realistically) about the future is a self-fulfilling prophecy. Take a few minutes to imagine and write down the best-case scenario for the coming months and years. You may be surprised to discover how bright this possible future may be.

### 5 SET AN INTENTION FOR THE DAY

Setting a daily intention to guide your day puts you in the driver's seat, where you make conscious decisions rather than react to incoming demands. You may not be able to get your way all the time, but being simply aware of what you intend to accomplish will provide you with a sense of purpose, and with an opportunity to be consistent in the way you interact with the world.

If you're here at the end of this, give it a shot right now – what is your daily intention?

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SEE THE CALENDAR ON THE BACK COVER FOR TIME AND PLACE DETAILS OF OSCAR NETWORK TRAINING AND EVENTS.



# Why bother with resilience?

Day in and day out, children all over the world face situations like the ones described above. Some face stresses such as divorce or illness while others confront catastrophe - war, poverty, disease, famine, floods. Whether such experiences crush or strengthen an individual child depends, in part, on his or her resilience.

Resilience is important because it is the human capacity to face, overcome and be strengthened by or even transformed by the adversities of life. Everyone faces adversities; no one is exempt.

With resilience, children can triumph over trauma; without it, trauma (adversity) triumphs. The crises children face both within their families and in their communities can overwhelm them.

While outside help is essential in times of trouble, it is insufficient. Along with food and shelter, children need love and trust, hope and autonomy. Along with safe havens, they need safe relationships that can foster friendships and commitment. They need the loving support and self-confidence, the faith in themselves and their world, all of which builds resilience.

How parents and other caregivers respond to situations, and how they help a child to respond, separates those adults who promote resilience in their children from those who destroy resilience or send confusing messages that both promote and inhibit resilience.

## Three sources of resilience

To overcome adversities, children draw

from three sources of resilience features labelled: I HAVE, I AM, I CAN. What they draw from each of the three sources may be described as follows:

### I HAVE

- People around me I trust and who love me, no matter what
- People who set limits for me so I know when to stop before there is danger or trouble
- People who show me how to do things right by the way they do things
- People who want me to learn to do things on my own
- People who help me when I am sick, in danger or need to learn

### I AM

- A person people can like and love
- Glad to do nice things for others and show my concern
- Respectful of myself and others
- Willing to be responsible for what I do
- Sure things will be all right

### I CAN

- Talk to others about things that frighten me or bother me
- Find ways to solve problems that I face
- Control myself when I feel like doing something not right or dangerous
- Figure out when it is a good time to talk to someone or to take action
- Find someone to help me when I need it

A resilient child does not need all of these features to be resilient, but one is not enough. A child may be loved (I HAVE), but if he or she has no inner strength (I AM) or social, interpersonal skills (I CAN), there can be no

*‘My father gets drunk. He said he was going to kill my mother and me. My mother put me with friends and ran away. I don’t know where she is.’*

(6 YEAR OLD BOY)

*‘I have to go to the hospital a lot because I have so many illnesses. I don’t know if I will ever get well.’*

(10 YEAR OLD GIRL)

*‘I saw my father get stabbed by a neighbour who was mad at him.’*

(6 YEAR OLD GIRL)

*‘I am very short and people tease me at school all the time.’*

(11 YEAR OLD BOY)

resilience. A child may have a great deal of self-esteem (I AM), but if he or she does not know how to communicate with others or solve problems (I CAN), and has no one to help him or her (I HAVE), the child is not resilient. A child may be very verbal and speak well (I CAN), but if he or she has no empathy (I AM) or does not learn from role models (I HAVE), there is no resilience. Resilience results from a combination of these features.

These features of resilience may seem obvious and easy to acquire; but they are not. In fact, many children are not resilient and many parents and other care givers do not help children become resilient. Only about 38 per cent of the thousands of responses in the International Resilience Project indicate that resilience is being promoted. That is a very small percentage for such a powerful contribution to the development of children. On the contrary, too many adults crush or impede resilience in children or give mixed messages, and too many children feel helpless, sad and not fully loved. This is not the situation necessarily out of intent; it is more the fact that people do not know about resilience or how to promote it in children.

Children need to become resilient to overcome the many adversities they face and will face in life: they cannot do it alone. They need adults who know how to promote resilience and are, indeed, becoming more resilient themselves.

## What is resilience?

There are many accounts of children and adults facing and overcoming adversities in their lives in spite of the fact that their

circumstances suggested they would be overcome by the adversities. Here are some real experiences people have had. Using the I HAVE, I AM, I CAN model, here is what they did that would promote resilience in the process of overcoming the adversity.

A five year old boy comes home and tells his mother: *‘This big boy keeps bullying me. He hits me and sometimes he kicks me. I tell him to stop and he does for a while and then he starts again. I’m really scared of him.’*

The mother can draw on I HAVE features of ‘People around me I trust and who love me, no matter what’, and ‘People who help me when I am in danger’; the I AM features of the child can be strengthened by seeing him or herself as a ‘Person to be liked and loved’, and ‘Sure things will be all right’; the I CAN features of the child include ‘Talking to others about things that frighten or bother me’, and ‘Finding someone to help me when I need it’.

The interaction between the mother and boy was like this: the mother listened to him and told him how sorry she was and comforted him. Then she said he was right to tell the teacher and he may want to do that every time the other boy bothers him until it stops. She offered to talk to the teacher or to the boy’s parents, but wanted her son to develop an increasing sense of being independent and so did not want to insist. The boy felt free to share his feelings and to listen to solutions to the problem. He saw that he is part of the solution and wanted to learn further what he can do.

An eleven year old girl tells about this experience: *‘My cousin and I were hiking in the mountains in the winter. I fell into deep snow and could not get out. I was very frightened.’*

The girl can draw on the I HAVE resilience feature of ‘People who help me when I am in danger’; the I AM features of ‘Willing to be responsible for what I do’, and ‘Sure things will be all right’; the I CAN features of ‘Find ways to solve problems that I face’, and ‘Find someone to help me when I need it’.

The interaction between the girl and the cousin was like this: the girl tried on her own to get out of the deep snow and could not. She then called to her cousin who was way ahead and asked her for help. When her cousin came they talked about the fears

they were both feeling, but decided they had better get busy and dig the girl out. They succeeded and felt they had had enough excitement for one day, so went home.

Resilience is a basic human capacity, nascent in all children. Parents and other care givers promote resilience in children through their words, actions, and the environment they provide. Adults who promote resilience make family and institutional supports available to children. They encourage children to become increasingly autonomous, independent, responsible, empathic, and altruistic and to approach people and situations with hope, faith, and trust. They teach them how to communicate with others, solve problems, and successfully handle negative thoughts, feelings, and behaviors. Children themselves increasingly become active in promoting their own resilience.

Children need these abilities and resources to face many common - and some not so common - crises. When the International Resilience Project asked children and their parents around the world what adversities they had experienced, the answers were numerous. Among those difficulties experienced within the family, in order of frequency, were:

- death of parents or grandparents
- divorce
- separation
- illness of parent or siblings
- poverty
- moving, family or friends
- accident causing personal injuries
- abuse, including sexual abuse
- abandonment
- suicide
- remarriage
- homelessness
- poor health and hospitalizations
- fires causing personal injury
- forced repatriation of family
- disabled family member
- parent’s loss of a job or income
- murder of a family member

## The language of resilience

Children facing such situations often feel lonely, fearful, and vulnerable. These feelings are less overwhelming for children who have the skills, attitudes, beliefs, and resources of resilience. But, before we can begin to promote resilience, we need a shared language with which to describe,

illustrate, and explain it. The concept of resilience is relatively new for describing the behaviour of people.

The I HAVE, I AM and I CAN categories are drawn from the findings of the International Resilience Project which identified 36 qualitative factors that contribute to resilience. These can be divided into three major categories, each consisting of five parts.

## The resilient child says...

### I HAVE

- Trusting relationships
- Structure and rules at home
- Role models
- Encouragement to be autonomous
- Access to health, education, welfare, and security services

### I AM

- Lovable and my temperament is appealing
- Loving, empathic, and altruistic
- Proud of myself
- Autonomous and responsible
- Filled with hope, faith, and trust

### I CAN

- Communicate
- Problem solve
- Manage my feelings and impulses
- Gauge the temperament of myself and others
- Seek trusting relationships

Each of the I HAVE, I AM, and I CAN factors suggests numerous actions children and their care givers can take to promote resilience. No one child or parent will use the entire pool of resilience factors, nor need they. Some use many; others use few. However, the larger the pool of possibilities before them, the more options children, parents, and care givers have and the more flexible they can be in selecting appropriate responses to a given situation.

## Strengthening the human spirit

At different ages, children rely more or less heavily on their I HAVE, I AM, and I CAN resources. As children grow, they increasingly shift their reliance from outside supports (I HAVE) to their own skills (I CAN), while continually building and strengthening their personal attitudes and feelings (I AM).

# NEWS & ISSUES

## Limiting Screen Time Yields Multiple Benefits

Parents may not always see it, but efforts to limit their children’s screen time can make a difference. A new study, published in JAMA Pediatrics, found children get more sleep, do better in school, behave better and see other health benefits when parents limit content and the amount of time their children spend on the computer or in front of the TV.

Douglas Gentile, lead author and an associate professor of psychology at Iowa State, says the effect is not immediate and that makes it difficult for parents to recognize. As a result, parents may think it is not worth the effort to monitor and limit their children’s media use. But Gentile says they have more power than they realize.

“When parents are involved it has a powerful protective effect across a wide range of different areas that they probably never would have expected to see,” Gentile said. “However, parents aren’t likely to notice that putting limits on the children’s media is having these effects seven months later.”

Considering that children average more than 40 hours of screen time a week, not counting time spent on a computer at school, even small changes can make a difference, researchers said. They are not suggesting parents completely eliminate screen time, but find a healthy balance. The study found there is a ripple effect associated with the benefits of limiting both screen time and media content. Gentile is not surprised to see a direct impact on sleep, academics and behavior. However, limited screen time also indirectly affects body mass index. The study found that children got more sleep if parents limited screen time, which also resulted in lower risk of obesity. Parents limiting exposure to violent media resulted in increased prosocial behavior and lowered aggressive behavior seven months later.

Researchers analyzed the media habits of more than 1,300 school children who were recruited to participate in an obesity prevention program. Students and parents were surveyed about everything from screen time limits, to violent media exposure, to bedtimes and behavior. Teachers reported grades and commented on student behavior

and school nurses measured each student’s height and weight.

Data were collected at the start of the program and seven months later at the end of the program. By looking at these factors collectively with a group of children over a school year, it was easier for researchers to identify patterns that are hard to recognize in individual children.

- Iowa State University

## J R Mckenzie Trust, Connecting Education and Communities

JR Mckenzie trust have established an online resource hub which aims to bring together people to share and pass on their knowledge and experience with Connecting Education and Communities, and inspire others. If you’re working to engage families and whānau in their children’s learning, this is a chance to tell your story. If you’ve got a useful tool, idea or resource which others might find helpful, this is a chance to share it. Go to [www.cec.net.nz](http://www.cec.net.nz) and join up to get involved.

## Legal information for community organisations

Community Law o Aotearoa maintains the Community Law Manual which now holds up-to-date-legal information useful to community organisations Find the new section ‘Community Organisations and the Law’ in the Manual at <http://www.communitylaw.org.nz/community-law-manual/>

Community Law’s Law Reform Pipeline provides a quick update about the progress of government, Select Committee, Law Commission or other inquires, as well as law reform initiatives in progress. You can view this at <http://www.communitylaw.org.nz/resources/articles/law-reform-pipeline/>

## Children and the Canterbury Earthquake

This background paper was written by the Child Poverty Action Group (CPAG) by Nicola Shirlaw.

Here is a snippet from the Introduction:

In 2010 and 2011, Christchurch experienced a number of major earthquakes. The most serious, on 22 February 2011, caused loss of life and widespread damage to public buildings, infrastructure, land, schools, workplaces and people’s homes.

It is now more than three years since the first earthquake on 4 September 2010. Recently Christchurch journalist beck Eleven asked a number of young people aged between the ages of 10 and 20 to write about their lives in Christchurch. Each was able to write, in their own words, about any aspect of their life in the city and they were neither asked or had to reference the earthquake. That they all did illustrates how the last three years have affected all who live here.

As Christchurch continues the slow grind towards recovery, what is it like for the children still living here? To read please go to <http://www.cpag.org.nz/resources/background-papers-1/>

## Kids dragged from school to school

Our poorest schools are swapping nearly half their pupils a year, as transient families chase work or flee debt. Some schools say they have taught 7-year-olds who have been through eight schools in their first two years. Many transient children also have learning difficulties but are often uprooted before schools can bring in extra support.

A decile 1 school will, on average, have twice the student “churn” of a decile 10 school, according to Ministry of Education figures. During the 2013 school year, a typical school in a highly deprived area would have lost and gained the equivalent of nearly half its roll. A decile 10 school typically has a much more stable roll, with about a quarter coming or going last year. This does not include pupils starting or finishing their schooling.

The transience was even worse in primary schools, hitting children at a time when experts say moving schools is the most harmful. The figures, released under the Official Information Act, show Russell School, a decile 1 primary in Porirua, had the highest level of pupil turnover in the Wellington region two years ago.

Principal Sose Annandale said a Housing New Zealand shake-up was probably partly responsible for the high turnover that year, but transient families continued to be a big problem. Last year, 23 of the school’s 139 pupils left and roughly as many new faces

turned up this year. The sudden departures were usually linked to struggling families chasing work, which was often seasonal, while the arrivals included rent refugees, fleeing Auckland as the cost of housing rose.

Some children had been to 10 schools in as little as three years, she said. “You put a lot of time and energy into putting support around these kids and then boom, they move again.”

New Zealand Principals’ Federation president Phil Harding said pupil-churn was hugely frustrating for teachers, as it often made it difficult to reach children most in need. “It drives schools and teachers nuts.”

He had taught one student who had attended eight schools in his first two years of school, as his mother shifted from house to house to escape debt. “I said to his mother, ‘You are going to condemn this child to failure if you keep doing this.’ “

Children’s Commissioner Russell Wills said it was clear that shifting schools had a huge impact on a child’s development, particularly in primary school. Not only did they miss weeks of school while moving, but their learning was impaired as they eased into their new environment. “The more transient a child, the less they learn, and the harder it is for teachers to get a handle on what they have learnt.”

The higher level of transience in low-decile schools was not surprising, as deprived families were more likely to move for housing or work. “Many of these transient families do not have a fixed abode. They are just staying with whanau for a while, until they have to move on again.”

However, the rate of student turnover is improving, dropping steadily since the ministry started measuring it in 2010. In 2010, the decile 2 Epuni School, in Lower Hutt, had the highest student turnover in the region, but principal Bunnie Willing said that had changed. She said the school had worked hard to involve parents, building a 4000 sq m community garden and holding cooking and sewing classes for adults.

## Kids on the move

The Ministry of Education measures “average student movement rate” as the number of children coming, going and even returning to a school, compared with the school roll in March of that same year.

At a decile 1 primary school last year, the average movement rate was 52.8 per cent.

At a decile 10 primary school it was 29.4 per cent. At a decile 1 secondary school it

was 30.8 per cent.

At a decile 10 secondary school it was 4.8 per cent.

Overall, a decile 10 school had an average student movement rate of 24.8 per cent last year, while a decile 1 school’s was 48.4 per cent.

- © Fairfax NZ News

## Kids whose time is less structured are better able to meet their own goals, says CU-Boulder study

Children who spend more time in less structured activities—from playing outside to reading books to visiting the zoo—are better able to set their own goals and take actions to meet those goals without prodding from adults, according to a new study by the University of Colorado Boulder.

The study, published online in the journal *Frontiers in Psychology*, also found that children who participate in more structured activities—including soccer practice, piano lessons and homework—had poorer “self-directed executive function,” a measure of the ability to set and reach goals independently.

“Executive function is extremely important for children,” said CU-Boulder psychology and neuroscience Professor Yuko Munakata, senior author of the new study. “It helps them in all kinds of ways throughout their daily lives, from flexibly switching between different activities rather than getting stuck on one thing, to stopping themselves from yelling when angry, to delaying gratification. Executive function during childhood also predicts important outcomes, like academic performance, health, wealth and criminality, years and even decades later.”

The study is one of the first to try to scientifically grapple with the question of how an increase in scheduled, formal activities may affect the way children’s brains develop.

Munakata said a debate about parenting philosophy—with extremely rigid “tiger moms” on one side and more elastic “free-range” parents on the other—has played out in the media and on parenting blogs in recent years. But there is little scientific evidence to support claims on either side of the discussion.

For the study, parents of 70 6-year-olds recorded their children’s daily activities for a week. The scientists then categorized those activities as either more structured or less structured, relying on existing time-

use classifications already used in scientific literature by economists.

“These were the best and the most rigorous classifications we could find,” Barker said. “They still fail to capture the degree of structure within specific activities, but we thought that was the best starting point because we wanted to connect this with prior work.”

In that classification system, structured activities include chores, physical lessons, non-physical lessons and religious activities. Less-structured activities include free play alone and with others, social outings, sightseeing, reading and media time. Activities that did not count in either category include sleeping, eating meals, going to school and commuting.

The children also were evaluated for self-directed executive function with a commonly used verbal fluency test.

The results showed that the more time children spent in less structured activities, the better their self-directed executive function. Conversely, the more time children spent in more structured activities the poorer their self-directed executive function.

In that classification system, structured activities include chores, physical lessons, non-physical categories that were questionable. In each case the findings still held. For example, the time-use categories classify media screen time as unstructured, but the degree of structure depends on whether a child is watching a movie or playing a video game. However, when media time was removed from the data, the results were the same.

“This isn’t perfect, but it’s a first step,” said Munakata. “Our results are really suggestive and intriguing. Now we’ll see if it holds up as we push forward and try to get more information.”

The researchers emphasize that their results show a correlation between time use and self-directed executive function, but they don’t prove that the change in self-directed executive function was caused by the amount of structured or unstructured time. The team is already considering a longitudinal study, which would follow participants over time, to begin to answer the question of cause.

Read the study at <http://journal.frontiersin.org/Journal/10.3389/fpsyg.2014.00593/abstract>.



### What it is:

The capacity to join others and contribute to a group. This strength springs from our ability to form attachments. Affiliation is the glue for healthy human functioning: it allows us to form and maintain relationships with others to create something stronger, more adaptive, and more creative than the individual.

### Why it's important:

Human beings are social creatures. We are biologically designed to live, play, grow, and work in groups. A family is a child's first and most important group, glued together by the strong emotional bonds of attachment. In other groups, such as those in school, children will have thousands of brief emotional, social, and cognitive experiences that can help shape their development. It is in these groups that children make their first friendships. Affiliation helps children feel included, connected and valued.

### Signs of struggle:

A child who is afraid or otherwise unable to affiliate may suffer a self-fulfilling prophecy: she is likelier to be excluded and may feel socially isolated. Healthy development of

the core strengths of attachment and self-regulation make affiliation much easier. But a distant, disengaged, or impulsive child-one who is also weak in these other core strengths-won't be easily welcomed in a group. And in fact, if he is part of a group, he may act in ways that lead others to tease or actively avoid him.

The excluded, marginalized child can take this pain and turn it on herself, becoming sad or self-loathing. Or she can direct the pain outward, becoming aggressive and even violent. Later in life, without intervention, these children are more likely to seek out other marginalized children and affiliate with them. Unfortunately, the glue that holds these groups together can be beliefs and values that are self-destructive or hateful to those who have excluded them.

### Red Flags

A child who is afraid or unable to affiliate well may:

- be likelier to be excluded and may feel socially isolated
- often have a problem with self-regulation or attachment
- appear distant or disengaged and won't

be easily welcomed into a group

- in a group, act in ways that lead others to tease or avoid him
- turn the pain of feeling marginalized on herself, becoming sad or self-loathing
- seek out other marginalized children and unite around negative attitudes towards the other groups.

### What You Can Do To Help

- Find quiet time to spend alone with this child, to get to know better his/her interests
- Actively facilitate this child's participation in class groups
- Enlist this child's help in an area of interest (for instance, have him read to a younger child, or show a classmate how to do something he is good at).
- Establish clear guidelines with your class that emphasize and reward acts of kindness and inclusion, and provide consequences for unkindness.
- Rearrange seating occasionally so that children can get to know and work with others.

Ref: Dr Bruce D Perry  
www.childtraumacademy.org



## FRIENDSHIP: HELPING CHILDREN LEARN TO BE INCLUSIVE



At a very young age children begin to notice difference. I remember one time when Immy was about 18 months old and we were walking through a shopping centre and she stopped and stared at a very tall man of (I believe) African descent. I think she stopped as she had never before seen a person with such dark skin. He was lovely and smiled and even said a few words to her. Then she waved goodbye and off we went and I am sure she has never really thought about it again. More recently Immy observed a person in a wheelchair and in the manner of three year old openness said, "Why is he in a wheelchair for?" The man's carer simply and matter of factly answered her question.

It is common for children as young as two to use gender labels and colour names, and for three year olds to demonstrate increasing awareness of gender and racial differences, and differences in people's ability.

Not only do children begin to notice difference at a young age, they also begin observing what we (the significant adults in their life) value, and our own responses and reactions to difference. And how our children react to, include and accept others affects how popular they are as 'friends' to other children. If they are learning these social responses largely through our modelling our actions are very important to our children learning to be inclusive of others.

So what sorts of things can we do to help our children develop inclusive behaviours?

- I think firstly it is important to view children as competent. Children are not inherently passive, waiting for us to fulfil their needs. They are driven by curiosity and a desire to learn about their world through being an active participant in it.
- All children have different strengths and areas for development. Too often we spend all of our time and energy focusing on what they cannot do rather than celebrating what they can. Focusing on and celebrating a child's strengths empowers them to feel more confident as an individual when they do face challenges.
- One powerful way of recognising a child's strengths in a meaningful way is to make them the 'expert' in their areas of competence. Saying, "I saw Tom manage to do that just yesterday. Shall we ask Tom to remind us how he did it?" celebrates Tom's achievement and engaging Tom as a peer mentor not only helps the child needing assistance but also reinforces Tom's own learning.
- From birth we compare our child with other children. It is natural and often reassuring for us as adults to do so. But it is not really very helpful to our child, and children hear and observe more than we often give them credit for, so we need to be careful not to speak comparatively about them in their presence.
- Encourage cooperative behaviour rather than competitiveness. It is much better for

- our children to say, "Let's do this together and help one another, where shall we start?" then to say, "I wonder who can get finish the fastest. Ready, set, go." Studies have shown that children who refuse to cooperate are less popular with their peers.
- It is true that every child is different. Every person is different. It is much better to discuss difference with a child as a positive aspect of who they (or we) are. It is difference which makes people interesting and unique.
- Model sensitivity to and respect for other people. Show empathy.
- Maintain consistent expectations for each child when it comes to enforcing family 'rules.'
- Talk with a child (and truly listen) to better understand their knowledge and theories of social justice issues and how they came to their understandings. Such conversations can begin at two or three years of age;
- When talking with children assist them to challenge bias, prejudice and stereotypes, through questioning and sharing your own beliefs and understandings.
- Encourage role playing and dramatic play. This is how children become more aware of how it feels to be someone else.

In what ways do you encourage your child/ren to be inclusive and tolerant of others?

childhood101.com

## TALKING ABOUT BANNING THINGS CERTAINLY GRABS ATTENTION.

I just love these articles and memes that crop up every so often about banning things that children are doing these days. People discuss banning video games, banning cell phones, banning TV, banning certain kinds of books. They even talk about banning teens from playgrounds. They talk about banning skating in public places. Some of these bans even have contradictory goals and effects.

I understand why. There is nothing we like more than a forceful, simple statement of solution.

*It is easier for the world to accept a simple lie than a complex truth.*  
*Alexis de Toqueville*

The thought is, of course, that banning “thing x” will solve “the problems” we have with “today’s children”. The problem is; solutions to complex problems are rarely simple themselves. Oh, the ideas may be simple. But getting the ideas to come to pass as action rarely is.

## THIS COMES FROM AND LEADS TO A LOT OF ASSUMPTIONS

Some of the assumptions are based on faulty interpretations of research results as “all or nothing” propositions. I make sure the students in my classes understand that a result (especially in human research) being statistically significant doesn’t mean that every subject in the studied population exhibited the effect.

It also is highly likely that, in considering the effects of video games on cognition, there were a range of effects. In fact, a lot of the research that is assumed to “support a ban” comes from the consideration of extreme levels of exposure and situations. A lot of the effects we speak of disappear at smaller doses.

First, let me say that I acknowledge how problematic technology can be. Also, anyone who has followed my career knows that I have dedicated my life to getting children to spend some time in Active Play with each other and in nature. I will illustrate at the end of this discussion why I think concentrating on positive things like those is more effective than banning things. For things that are always and immediately toxic, banning is the

solution. But what we are likely looking at with many of the issues like screen time and social media are “dose-response” effects, not an immediate toxicity with the slightest exposure. Look into some of the formal research done on technology and children, and you might find out that it isn’t the evil incarnate we believe it is. There is some evidence supporting civic engagement and social interaction with certain kinds of gaming experiences.

Also, I have seen major social interaction occur because of social media. I have also seen isolation from overuse of social media.

## ARE ELECTRONIC DEVICES THE ONLY THINGS THAT CAN AND DO BECOME HARMFUL?

Overuse of a lot of things can be detrimental. Is physical activity good for you? Yeah? Go ahead and become obsessive with it, do too much of it, and you will find great harm to your body and brain. You may invite mental illness.

Is studying a subject deeply good for you? Go ahead and read nonstop without interacting with others and see what that does to most people. The same can be said for social interaction. Have you ever been overwhelmed and stressed by too much social interaction? Chances are, you answered “yes”. And before you say “well masses of people don’t have problems because of these things” – think again, and look around you. People that can’t feel good without the adoration of others exist. People that retreat into academic study out of a fear of social interaction exist (but we celebrate that because it makes money). Obsessive fitness enthusiasm that ends in eating disorders and body dysmorphia exists.

So, unless we are also banning exercise, reading, and talking to people...I advocate against “banning” devices. What I do recommend is encouraging and facilitating (much better words) play, contact with nature, manipulation of real objects in space (balls, blocks and tools), and children interacting with each other. I recommend starting this early. If you missed your chance to start it early, I recommend creating programs that are engaging and exciting to encourage other things children can do.

Banning things, I predict, will end with you not solving the problem and creating other problems in the process.

# Dangers of pushing young athletes too hard - expert

## Pushing young players too hard can cause damage - expert.

Sports coaches should avoid pushing young athletes too hard, says a doctor concerned about injury risk around the age of puberty. Too much fitness training can lead to overuse injuries to the knees and other vulnerable body parts, says Dr Carolyn Broderick, medical director of the Australian team for the 2014 Youth Olympic Games.

Her main concern is that many teenagers, particularly girls, drop out of sport after an injury. This means they miss out on the health benefits of exercise. Many young people are naturally fit and coaches should focus on skills training until they reach skeletal maturity, says Dr Broderick. She is lead author of a study that shows Australian children and adolescents make around 900,000 GP visits a year for muscle and bone pain.

Sport injuries tend to be a small proportion until puberty. For boys there is an increase from the age of 10 to 17. That corresponds to their growth spurt, which is a vulnerable time for the skeleton. Girls have increased sport injuries in the 10 to 14 age group.

Around eight per cent of teenagers drop out of sport a year because of injury, says Dr Broderick of The George Institute for Global Health and The Children’s Hospital at Westmead.

“If we are going to encourage sport and physical activity, we need to make it as safe as it can be. One idea is to look at modified

rules. The use of protective equipment is also important.”

For children in the upper levels of sport, it is essential to monitor training loads, says Dr Broderick.

“There are lots of kids who do school sport and club sport as well as sport at a higher representative level. No one is keeping an eye on the overall loading. The coaches need to start liaising with each other. Data from the US shows that some of the most promising young baseball pitchers never make it to the adult league because of overloading,” she says.

Now they have set age-based guidelines for the number of balls that can be pitched as well as the number of rest days the children must take.

Sport helps build long-term self-esteem as well as physical endurance, bone mass and motor skills, says co-author Dr Damien McKay, a Westmead children’s hospital paediatrician.

However, it is important for sporting organisations, coaches, trainers and parents to be aware of the potential risk.

Ideas to avoid adolescent sport injuries:

- Modified rules
- Taping, bracing, pads and helmets, where appropriate
- Cross training
- Monitoring of training load
- Focus on skills, not fitness.

Benefits of adolescent sport and exercise:

- Promotes skeletal health
- Prevents adult-onset diabetes
- Promotes long-term heart health
- Boosts self-confidence.

(Source: Dr Carolyn Broderick)

The American Academy of Paediatrics reports that young athletes who participate in a variety of sports have fewer injuries and play sports longer than those who specialize before puberty.

We’re all familiar with the old sayings tied to training--athletic and otherwise: Practice makes perfect. No pain, no gain. Suck it up. But when it comes to kids and teens and their growing bodies, too much training and not enough rest can cause serious problems. “As adults, we can work ourselves to a higher level of performance--add miles or add pounds lifted,” says Dr. Elizabeth Szalay, a pediatric orthopedic surgeon at Carrie Tingley Hospital and an associate professor of pediatric orthopedics and pediatrics at the University of New Mexico.

“But in children there is a finite point, which can’t be exceeded without damaging the growth plate, and there’s no way to get around that.”

Whether powerful pitchers or flexible gymnasts, kids have immature bones and growth plates made up of cartilage cells at the ends of the long bones of their bodies. Those cells are softer and more vulnerable to injury than those in mature bones. When growth is complete, the areas close and are replaced by solid bone.

Children and teens are vulnerable to growth plate injuries as long as there are open growth plates in the body, Szalay says. In most girls, growth plates close from age 14 to 16; in most boys, they close from age 16 to 18. Damage to a growth plate area can have long-term implications, such as the limb being crooked or shorter than the other.

It’s important for parents to understand that the pediatric muscular skeletal system can’t train in the same way an adult would train, to get to the next level of performance. Kids’ growing bones simply can’t endure the stress that adult bones can, even when their cardiovascular and muscular strength may be pushing them forward.



# Extending Play Past Early Childhood

By Dr. Kwame Brown

## Reason #1:

### There is an assumption by some that older kids should be playing sports by now

This is false for millions of older kids and adolescents. Recently, when I served on a panel on play at the Global Summit on Childhood, a young lady stood up and talked about how excited she was at all the opportunities to play at her college. She was excited because she got almost no opportunities past elementary school and had gone into college sedentary as a result. She didn't play sports – i.e. little opportunity to remain physically active.

## Reason #2:

### “We have to treat the fat”

There is this focus on treating obesity with older kids. So many efforts only look at the truly obese, because that is the population of sensation. Yes, it is very important to treat obesity and its symptoms once it gets that far. But how did it get that far? Answer: Kids stopped playing.

## Reason #3:

### “They need to be on task”

This, to me is the most insidious reason of all. We want kids to be adults as soon as possible. Play can range from purposeful to downright silly. Kids don't have time to pretend or create when they are busy obtaining check marks for scholarships.

## Reason #4:

### It takes more space to let older kids play

Runner-up for most insidious reason. It takes more space to truly let older kids and adolescents run and jump and climb and cavort (money). There are also sometimes more difficult behavioural issues (time). We are reticent to spend the money and time.

## Reason #5

### People think it's easy

If it is so easy, then why hasn't it gotten done? This flies in the face of what I have

heard from parents and administrators alike. I get comments like “no one gets these kids excited about playing and being active like you do”, and “I have been searching for years for someone that could get my kids inspired to move”, and “You just can't teach what you have”. If you think it makes me happy or excited to hear those compliments – you don't know me at all. It makes me dizzy thinking about the task I and others have in front of us. Then I get happy and excited. Because I like tasks.

The fact is, so many have lost the how. The other fact is that it can be taught. Yes, a prerequisite is respecting childhood, and enjoying spending time with kids. But you also have to know how to get kids everything they need. It's not enough to burn calories, learn movements, or have fun. Kids need all of that, and they need all of it at once. This takes fresh ideas, knowledge, and lots of practice!

Can you think of other reasons we lose the focus on play as kids get older?

I have come to believe that this is necessary not just to solve the health issues that face our children, but to solve the myriad social and cognitive issues that face our children. We will not solve our issues until we understand, not with rhetoric but with action, that the nervous system and body cannot be seen as separate. We must also realize that this is true throughout the life span.

## Solution #1:

### Change the way we think of being “athletic”

Right now, we tend to think of “athletes” and as those who play the 10 or less “sports” we have sanctioned as Accepted Games. But, as I have said before, there are a great many things one can do to move athletically. . Let's expand our view of play to include things that more kids like. Currently, our restrictive view and restrictive resourcing is causing more kids than ever to cease being

athletic. If they are not interested in one of the “sports” their school has sanctioned, there is not a lot of opportunity left.

## Solution #2:

### Change the way we view play spaces

When we take play spaces kids would have had as their own in generations past, and then restrict their use to whoever the highest bidder is – we will continue to have an inactivity problem. Further, we build millions of playgrounds for young children, and almost none for older kids and teens. We must expand that thinking, too – or suffer the consequences in maladaptive behaviour.

## Solution #3:

### Go ahead and call it play

Fooing ourselves into the “professionalism” and “responsible habits” that we think goes along with calling it “physical activity” isn't doing anyone any favours. Games sound like something I want to do. Play sounds like something I want to do. Explore sounds like something I want to do. Physical activity sounds like something I'm forced to do. If what we called things didn't matter, corporations wouldn't spend so much money on branding.

## Solution #4:

### Re-train teachers, coaches, and interested parents

To do all of the above, we need to train our professionals differently and give parents different kinds of support. Coaches and teachers must understand that the primary purpose of movement for most kids should be play. Winning is secondary. Health and fitness truly are side effects. Parents must have better support than guidelines that say “just go walking!”, or “do strength and cardio”. We must make movement itself important enough to expand our thinking beyond the heart, lungs and muscles, and to view the brain as more than a nice extra.

# TEENAGERS: IT'S NOT JUST THEIR HORMONES - IT'S THEIR BRAIN!

Moody, impulsive, doing crazy things and when you ask you get the answer “I don't know”! Adolescence, a period of around 15 years, is and always has been a challenging period of life for both adults and teenagers.

Scientists have now started to unravel the mystery of adolescence and it all comes back to the brain. Just over a decade ago researchers first identified that during adolescence parts of the brain literally undergo reconstruction. The years from conception through the first few years of life build the foundation for the rest of our lives - how we think, feel and behave. The brain changes during adolescence build on these foundations.

This is period full of amazing development and drive. As Daniel Siegel describes in his latest book, *Brainstorm*, it is a period where we can build the essence of living well for the rest of our adult life. He describes the four key changes – novelty seeking, social engagement, increased emotional intensity and creative explorations. These changes affect how teens seek rewards in trying new things, connect with their peers in different ways, feel more intense emotions and push back on the existing way of doing things to create new ways of being in the world.

Adolescence starts with puberty, when our bodies start changing, usually around 8 to 10 years old and ends in the mid 20's when the brain has fully formed its adult structure and function. During this time the young person transitions from full dependence on their family for food, clothing, support and care to interdependence, where they have their own relationships and with their own skills to support and care for themselves and their

offspring. To achieve this adolescents have to learn how to relate to a wider (nonfamily) circle of people, learn new skills and take control of their own lives, making decisions and choices that may stay with them forever.

To leave the familiarity of the home setting adolescents need the drive to seek out new experiences, a willingness to take risks and take actions that may seem to be impulsive behaviour, all strongly influenced by their social group.

At the front of our brain, just above our eyes and behind the forehead is a region that plays a critical role in memory, impulse control, decision-making and planning for the future and stops us taking actions that may cause harm.

This area is literally being reconstructed during these years; it is being structured and wired up as a result of our experiences and learning.

In the meantime, the ‘emotional’ regions of the brain have a greater effect on our decisions and actions. Some areas in the brain make us feel really good; when stimulated they make us feel great about ourselves, sometimes exhilarated and give us a desire to do whatever caused that feeling again and again and again. These ‘reward’ centres are more sensitive during adolescence and are not yet strongly wired up to the “don't do it” frontal region. This can lead to impulsive,

crazy, apparently careless actions. When asked “Why did you do it?” the common answer is “I don't know” and the reality is adolescents genuinely often do not know why they did it, it just felt good!

Interestingly studies have found that adolescents are able to describe risks as accurately as any adult, it's just that they are more likely to take those risks than adults. Why? Two reasons - the first is that often the gain from feeling the fear and just doing ‘it’ outweighs the perceived risk of harm. The second is the social peer group influences adolescents to take more risks as the feeling of reward and exhilaration is so much greater.

Adolescence is a unique and special time full of both risk and opportunity. The experiences they have shape their learning and their brain. It is also a time when parents are sometimes needed to perform some of the functions of the front part of the brain!

If you would like to know more, please contact Brainwave [info@brainwave.org.nz](mailto:info@brainwave.org.nz) to organise a presentation or workshop on “Unravelling the Adolescent Brain”.

*Sue Wright*

*BSc (Physiology), Dip Teaching, Exec MBA  
Executive Director for the Brainwave Trust*

## WHAT'S GOOD FOR YOUR STAFF IS GOOD FOR YOUR PROGRAMME

### A holistic approach to staff development

Are your staff enthusiastic and eager to be involved, or do they sit and watch rather than joining in? Either way, they will benefit from some professional development, and you will benefit from their increased skill and more positive attitude. Professional Development means facilitating learning and development for the whole person, so that they can work towards fulfilling their personal potential. . This goes beyond training for work skills, and makes a huge difference to your staff – and ultimately to your programme.

### Let's make a distinction between training and learning.

Training can be generally defined as a process of transferring the knowledge and skills necessary to carry out certain tasks. It is focused on the needs of the organisation rather than the person, and is generally required by the organisation.

Learning is focused on the person. It belongs to the learner, develops individual potential, starts from their interests, abilities, and strengths, and enables them to grow as a person. Learning extends far beyond the workplace and results in growth and maturity. Good employers recognise this, enabling and encouraging personal learning as well as job-related skills development. This means that a good training plan should take account of the interests and abilities of individuals as well as the specific skills and knowledge required by the organisation. It allows for different learning styles, different levels of experience, and different areas of interest. It gives people choices, and recognises learning outside of the workplace as valuable. This way we develop people's confidence, strengths, and self-esteem as well as their value to their employer.

### So what does this mean for you, an OSCAR supervisor or manager?

How are you to go about doing this? You need to focus on two processes here. You want to provide good skills training in essential areas and core skills to meet compliance requirements for the programme, and you want to encourage individual growth and personal development as well, because this will give you a creative, motivated

and confident team which will have huge positive impact on your programme. Remember, what's good for your individual staff members is good for your programme. When you're thinking about how to develop your team's skills, you need answers to the following questions:

- Who needs training?
- What training do they need?
- Why is it important?
- How will you deliver the training?

This is a Training Needs Assessment (TNA). By comparing existing skills and competencies with the skills you want people to have, you can make an informed decision about the type of training each person or team needs. You can then develop or source a training program that addresses these needs.

This process will identify the programme's needs. To round out the training and make it a positive learning and development experience for the people within the process, you then need to take account of their individual needs and write individual training plans. How well do you know your staff? Do you know their interests, dreams, and capabilities well enough to structure the required training so that it engages and interests each person? Can you sit down with them and discuss the choices they have or would like to have? Can you help with or encourage some personal interest they would like to follow? (This might not even be work-relevant, but you will still gain from enabling it, in terms of motivation and loyalty.)

The reason for this is that in terms of learning, training and development, what's good for people is good for the organisations in which they work. Thus some more questions for your TNA might be:

- What do my staff want to learn?
- How can I enable individual learning and encourage personal development?
- How can I help my staff to identify their personal potential and work to achieve it?

Organisations which approach training and development like this create team members who perform well and progress, and, importantly, stay around for long enough to become great at what they do, and to help others to do that too.

### A planning process for staff training and learning

1. Assess and agree training needs  
This comes from your TNA. Take account of appraisal comments. Involve the people who will be affected by the training.
2. Create training or development specifications  
Break down the requirements in 1. into manageable chunks and make them measurable.
3. Consider learning styles and personality  
Take into account learning styles and personalities so your training is easy and effective for the people doing it.
4. Plan training and evaluation  
Plan around the above points, and evaluate against your TNA.
5. Design materials, methods and deliver training  
Adapt your training material for your specific training group. Work out your presentation style so it matches the learners' personalities and learning styles. Attend a workshop for trainers to enhance your own skills.

Some tips to make training (and learning, coaching, mentoring) more enjoyable and effective:

- keep instructions positive ('do this' rather than 'don't do this')
- avoid jargon where possible – and if not, then explain fully
- tailor training to the individual/s, and adapt it as you go if necessary
- accept mistakes, - treat them as a learning opportunities
- recognise accomplishment and progress, not just achievement
- be encouraging
- be enthusiastic - if you show you care you can expect your trainee to care too
- check progress regularly and give feedback
- invite questions and discussion
- be patient and keep a sense of humour

As a manager, or supervisor, helping your people to develop is the greatest contribution you can make to their well-being. Sometimes it may seem too hard, but you will be rewarded many times over through your staff's greater involvement, creativity, energy and all-round job-satisfaction. Remember also to look after your own personal self-development. There are lots of great opportunities out there to increase our skills, knowledge and self-awareness. Make use of it all.

### Child Protection

This workshop will look at CYF procedures regarding families at risk and encourage staff to look at their programme's policies and procedures to ensure they are able to recognise and if possible prevent abuse of children in their care .

**Kathryn Faoagali** is a registered social worker who has been working for Child, Youth and Family for the past 10 years. She brings to her role a wealth of experience as a field worker in schools and has a broad experience of working with children, community and in statutory regulation.

### Health & Safety - Keeping everyone safe

There is nothing like the peace of mind of knowing your programme is up to speed with all the H & S regulations with first-rate procedures in place so you can ensure that popping a band aid on is the main worry you have.

**Pam Hughes** is an OSCAR Network Co-ordinator who believes that every policy decision taken in the world should first ask the question "and how will this enrich our children?"

### The Anatomy of Behaviour with Pam Hughes

Children's development is very much influenced by factors outside their control and often their attempts to communicate with us fall short of the mark. Looking at the way children grow gives some insights into their behaviour and how we can nurture them through some of the tough times of growing up.

### Playing with a Child on the Autism Spectrum

This is an introduction to playing with children on the Autism Spectrum. The workshop offers simple, easy to use strategies to begin playing with children. Way to Play has been specifically designed for people directly involved with a child on the Autism Spectrum, who want some practical strategies for how to play in fun and exciting ways with them.

You will leave with: a better understanding of the importance of play, some simple strategies that you can implement immediately, the knowledge of the importance of what you do in the play situation.

**The Autism NZ Way to Play team have adapted their programme to the OSCAR setting**

### Understanding and Managing Attention Deficit Hyperactivity Disorder and Oppositional Behaviour

This workshop will give participants an understanding of ADHD and ways to work with children experiencing these difficulties that maximizes their potential and reduces stress. It will also explore the factors that lead to oppositional behaviour and how best to work with these children rather than battle against them.

**Catherine Gallagher** and **Katrina Falconer Beach** are both experienced Clinical Psychologists, who work in the private and public sector specializing in working with children and their families.

## FIRST AID TRAINING

This session is for OSCAR staff who require either their full or revalidation of their first aid certificate.

This Meditrain course meets the CYF requirements and is NZQA approved.

Full training—8.30am—4.00pm  
Refresher - 8.30am—12.30pm

A WEEKEND OF

## SPECTACULAR FUN AND LEARNING

brought to you from The OSCAR Network Production Team

1st & 2nd November 2014  
in Christchurch

To be held at

9 Eveleyn Couzins Ave, Richmond, Christchurch

### How to understand anxiety and support children to be brave with Catherine Gallagher & Katrina Falconer Beach

This workshop will provide information about what anxiety is, why some children struggle with it more than others, and how best to support them in managing anxiety so that it does not take over!

### Fun with Funding

This workshop aims to assist you and your programme to develop a sustainable funding plan, with practical ideas, templates, strategies and advice.

**Julie Reynolds** is Sport Canterbury's After School and Holiday Programmes Manager. She is responsible for the financial, operational and strategic management of the Trust's Active Kids Programmes. **Helen Kidd** is an OSCAR Network Co-ordinator who has spent many years working for not-for-profit organisations. She also has business experience and knows about tight budgets and maximising your funding opportunities.

### Legal compliance for your Programme

This workshop will look at some of the legal issues those on Boards of OSCAR groups need to be aware of. In particular, the workshop will focus on the duties that Board members have and how to stay on top of your key legal obligations.

**Susan** is one of the legal team working at Community Law Canterbury. She works with community groups and advises on legal issues unique to incorporated societies and charitable trusts.

### Intercultural Awareness and Communication

This session will enable participants to develop more understanding of working in a multicultural environment. It examines the notion of culture and identity and focuses on developing one's cultural self-awareness and those of others. It also looks at using effective strategies to build relationships that will lead to effective intercultural interactions.

**Mastura Abd Rahman** has been involved in education and training since 1994 in a variety of educational settings. Currently she is the Manager of Diversity Support at Hagley Community College, Christchurch.



## Boylingual

This workshop came about from conversations Odette had about women going head to head with boys. "Are boys really a problem or do we just speak different languages?" To build strong relationships with boys OSCAR workers need to be Boy-lingual!

**Odette Yates** was initiated into the OSCAR world in the 90's in Christchurch and has been hooked ever since. She now lives in Northland, teaching, tutoring the OSCAR Certificate and working in a programme!

## Just a bit of Fun

There are lots of reasons why children like games. We'll play some games, make up some games and talk about games and how they feed children's innate hunger for learning. The aim is to end up with some new games to try in your programme as well as a fresh appreciation/enthusiasm for playing games.

**John Kennedy** has worked for The Out of School Care Network since 1993 and been involved in all kinds of OSCAR services for as long as he can remember having a job. He has researched and written extensively on issues for the OSCAR sector, as well as writing for OSCAR qualifications. The rest of his time is spent promoting old-fashioned fun to help take the pressure out of childhood today.

## Children's Brain research

Information about the human brain has exploded into our awareness over the past twenty years. We now know the huge significance of the early years and the ways in which this defines our later success.

Overall research findings contradict a lot of the practices we have used for the last 100 years - and continue to think are aiding children. An understanding of this research can help to guide our practice

and meet the developmental needs of children and adolescents. The presentation will explore how the brain works and how neuroscience can inform our day to day interactions.

**Nathan Mikaere-Wallis's** recent background has been as a lecturer at Canterbury University, a neuroscience presenter for Brainwave, and as a Child Protection trainer. In addition to being a father with a history as a foster parent, his professional background is in child counselling, teaching and social service management.

## Handmade Holiday Workshop

To know that something is made by hand, by someone who cares that you like it, makes that object much more enjoyable. Jo will show us a few different crafty ideas in time for your Christmas holiday planning. This is a hands on work-shop where you will get a chance to make a sample of each craft plus go back to your programme with an instructional booklet to then implement the ideas in your programme. Come get inspired!

**Jo Caspersonn** works for the Out of School Care Network in Auckland and has been working in OSCAR programmes since her first job. She holds a Sport & Recreation degree.

## Developing your Emergency Plan with Pam Hughes

This workshop will provide staff with hands on experience based on workplace scenarios.

The workshop covers what can go wrong, identifying potential hazards and understanding risk management.

An improved understanding of what health and safety means for the workplace will encourage personal responsibility for staff and ensure safety for all.

SATURDAY		CORE	STREAM	MANAGEMENT	ACTIVITIES	First Aid
8.30 - 9.00am	Registration & Welcome					
9.00 - 10.45am	Session 1	Child Protection <a href="#">Kathryn Faoagali</a>	Playing with a child on the Autism Spectrum <a href="#">Autism NZ Way to Play Team</a>	Fun with Funding <a href="#">Julie Reynolds &amp; Helen Kidd</a>		First Aid with Meditrain Start at 8.30am
10.45 - 11.15am	Morning Tea					
11.15 - 1.15pm	Session 2	Health & Safety <a href="#">Pam Hughes</a>	Understanding and Managing ADHD and Oppositional Behaviour <a href="#">Catherine Gallagher &amp; Katrina Falconer Beach</a>	Running OSCAR Groups - understanding the law <a href="#">Community Law Canterbury</a>	Boylingual <a href="#">Odette Yates</a>	First Aid Refresher ends at 12.30pm
1.15 - 2.00pm	Lunch					
2.00 - 4.00pm	Session 3	The Anatomy of Behaviour <a href="#">Pam Hughes</a>	How to understand Anxiety and support children to be brave <a href="#">Catherine Gallagher &amp; Katrina Falconer Beach</a>	Intercultural communication And Awareness <a href="#">Mastura Abd Rahman</a>	Just a bit of fun <a href="#">John Kennedy</a>	Full First Aid finishes at 4.00pm
6.00 - 11.00pm	Dinner					
SUNDAY		CORE	STREAM		ACTIVITIES	
9.30 - 11.30 am	Session 4	Developing your Emergency Plan <a href="#">Pam Hughes</a>	Children's Brain Research and what you need to know <a href="#">Nathan Mikaere-Wallis</a>		Handmade Holiday Workshop <a href="#">Jo Caspersonn</a>	
11.30 - 12.30	Lunch					