Kiind Conversations Transcript

Episode 4: Developing Differently with Marie Rodatz from CliniKids

Speaker 1

Who is best placed to identify early signs is just absolutely you, as a parent, as a caregiver. It's the mums and the dads because you know your children best. You are the expert on your children, and I really always try to encourage all parents to just trust your instincts because you know your child. You know their development. You've been there since the first minute. And you are just best placed to identify any signs.

[Intro sound bite]

Speaker 2

Hello, Kaya and wanjoo wanjoo. Welcome to Kiind Conversations where we're simplifying the caring journey one conversation at a time. I'm Teresa, Peer Navigation Lead here at Kiind and your host. As always, we're here to explore the topics that matter most to parents and cares raising children with disability.

I'd like to acknowledge that we are recording this podcast on the Wadjuk Noongar Boodja. We pay our respects to all Aboriginal and Torres Strait Islander cultures and to Elders past and present.

We have a very important, yet very exciting episode for our listeners today. First, we have Kiind Peer Navigator Sharon back with us on the mic.

Speaker 3

Hello.

Speaker 2

Hi, Sharon. And now let's welcome our wonderful guest to Kiind Conversations, Marie Rodatz.

Speaker 1

Hello.

Speaker 2

Hello. Marie works at CliniKids as their Clinical Lead in occupational therapy. She has over 20 years of experience as an occupational therapist, working with children with developmental differences. Marie, thank you so much for joining us today.

Speaker 1

Thank you so much for having me. I'm really excited to be here.

Speaker 2

Wonderful. So, Marie, I think a great place to start is, you know, listeners would really love to know a little bit more about you.

Speaker 1

Sure. Yeah. I've been an Occupational Therapist (OT) for over 20 years. Like you said already. And I've been very lucky to have been able to work like, in several countries around the world. So, I started off in Germany, have spent several years in Ireland, and now I'm in Australia.

Yeah. In all of my jobs, I've worked with children and their parents and families, and with children who are developing differently, and primarily with autistic children now at CliniKids.

We are a service provider integrated into a research organisation, The Kids Research Institute of Australia. And this puts us in a unique position to deliver innovative and well-researched programs. Professor Andrew Whitehouse is our director, who is a well-known researcher in the field. And we know that it takes a long time for research to be put into clinical practice. So it takes about 10-15 years generally for research studies that have proven to be effective to be really implemented into everyday therapies. And that's really our aim at CliniKids, to shorten that time. So, when we know research has been done, that approach is effective, then we want to be able to pass this on to families straight away.

So we offer allied health services for children under the age of nine. So really from babies up to 9. And like other providers, we offer occupational therapy, speech pathology and clinical psychology. So what our clients experience is really excellent all-around support and they also have the option to be involved in research if they want to. Of course, there is no - It's not a need to be involved in research if they don't want to.

And I think the favourite part about my work is really working with the children and the families. So, it's just sharing smiles and giggles with the kids and being part of their life as they grow up and develop their skills is just an absolute privilege.

Speaker 3

I think that's why it's so exciting to have you here, Marie, because your whole professional life has been dedicated to this, so that passion and that knowledge, it's such a privilege to have you here to share that with our listeners. Thank you.

Speaker 1

Aw, thank you.

Speaker 2

Yeah. Thank you, Marie. I'm sure our listeners will gain so much valuable information and insights through your expertise and what you're going to be sharing with us today. We want to talk our listeners through what to do if they have some concerns around their child's development. It's natural to feel this way if you've noticed signs your child may be developing differently. So Marie is here to answer some of the common questions that parents and carers have around this. Firstly, Marie, what does developing differently mean to you?

Speaker 1

That's a really interesting question and it probably means something different to all of us.

So first of all, I would say that probably all children develop individually or in their own pattern. So when I think back to my parent group with my first child, every child met their milestones at different times. There were the kids that were walking at nine months, and then there were other kids that weren't walking until 15, 16 months. And I think despite my qualifications as an OT. I think it wasn't until then that I actually really understood developmental milestones.

So yeah, I know it sounds like a cliche, but it really is so true that every child is unique. Every child has their own strengths and skills, and they will all develop some skills quickly. And other skills will take longer to develop. So that's just what we expect to happen. So, what I'm trying to say is that every child will have an area where they develop differently, maybe slower, maybe faster to a peer. And this is to be expected. And as a parent, you can notice these differences. But my first advice would be don't be worried or anxious, just notice it.

Speaker 2

Yeah, cause it's not always clear what typical development looks like for some families, if especially if the child is their first.

Speaker 1

Yes. Exactly.

Speaker 3

Particularly. Yeah.

Speaker 1

And I think a lot of us, like mums and now dads as well - we just compare ourselves to other parents. We compare our kids to the other kids. And to put that into a *Bluey* episode - I think the *Bluey* episode ‘*Baby Race*’ describes this really nicely where Chilli, the mum is kind of like getting worried because Bluey doesn't walk as quickly as some of the other kids in her mother's or parent group. And so, it's kind of like all the anxiety and the stress that comes with it for a parent like, “Oh, my child isn't doing this yet. What am I doing wrong?” And it's just to say you're not doing anything wrong. It's just part of the development that typical development in children that some are faster at some things and other kids take a little bit longer to learn something else.

Speaker 2

Yeah, and I think that's lovely. And it, you know, it leads us into the why of doing this podcast as well. We wanna make sure that families feel confident in knowing when their young person might need some additional supports. And we also recognise not every child or family experience is going to be the same, so we'll do our best to address a variety of concerns throughout this episode. We will be using neuro-affirming language throughout the podcast, but also acknowledging that the language that a family chooses, or a person chooses is up to them as well. But we certainly want to chat in a neuro-affirming language.

Speaker 3

Yeah, absolutely. But also recognising the families who are sort of entering the space newly, are learning the language from the clinicians that they're coming into contact with initially, so they might be using more clinical terms. That's alright too. They're still finding their way. We're just a bit further down the road. So you know we can learn that clinical language and then flip it to use more neuro-affirming. But that's absolutely not a criticism of families new to this space who are still finding their way through that process.

Speaker 1

Absolutely. And I think it's a journey for all of us like even as clinicians, we may still get it wrong. We are still learning. We are learning so much from the neurodivergent community, so our knowledge is just constantly growing as well, so, yeah.

Speaker 3

It changes right? It's evolving for everybody, yeah.

Speaker 2

Yeah, absolutely. So remember, if you do have any questions at all, the Kiind team is here to support you. So you can book in a Pathway Planning session to discuss your individual circumstances with us anytime you need it. And the link will be in our show notes.

[Break music]

Speaker 3

From all of us at Kiind, we hope you're enjoying this podcast as much as we enjoy making it. Kiind Conversations is just one of the ways we connect parents and carers to the information you need. Our website also contains fact sheets, workbooks and guides, helping you to build capacity to best support your child. Our resources cover many topics, including seeking a diagnosis, NDIS navigation, access to supports, including financial and much, much more. You can access this information anytime, anywhere on our website at kiind.com.au.

Now back to the show.

[Break ends]

Speaker 2

Let's begin by talking about what to look out for in your child skills and behaviours and when to seek support and take the next steps. Marie, we have some questions for you based on what we hear from families. So, first question, who is best placed to identify early signs of developmental difference?

Speaker 1

Parenting is a really tough journey, and there are so many people around us who are trying to help us and trying to tell us what to do, what not to do and what is right or wrong. And despite everyone's best efforts and good intentions, this is sometimes not so helpful. And I think even now, like with social media, this is even getting harder because we are looking for answers and we can get the wrong information easily. So I think in terms of like who is best placed to identify early signs is just absolutely you as a parent, as a caregiver. It's the mums and the dads because you know your children best, you are the expert on your children. And I really always try to encourage all parents to just trust your instincts because you know your child. You know their development. You've been there since the first minute and you are just best placed to identify any signs.

Speaker 3

Yeah.

Speaker 2

And I think it's just nice to also, yeah. To remind families that if you're worried then find out if there's anything to worry about so they can at least you know, take that off your plate.

Speaker 3

Absolutely. And I think I- you know, it's really hard to trust your instincts when you've probably got family members around you saying “it's fine, Uncle Bruce was exactly the same.” You know, and we understand the motivation for that it-it's coming from a place of kindness and reassurance, but it doesn't serve parents well to have their instincts undermined. Because it's very rare that those instincts are wrong. But yeah, if you are worried and you think “maybe I'm just nervous and I'm being over anxious.” Particularly if it's your first child, far better to go and see someone and talk about it and be told “it's fine.” Then lying awake, worrying and having people constantly undermining your very strong sense of what's happening for your child.

Speaker 1

Absolutely. And I think there's many supports in place where we can go as a parent. To say like, “oh, I'm worried about this.” Allied health professionals will reassure you like “it's absolutely fine. Your child isn't walking at 15 months. That's fine. Don't worry about it. They've got they've got a few more months still to pick it up and.”

Speaker 3

But they're talking, and they're, you know, able to feed them. You know, they're hitting other milestones.

Speaker 1

Exactly. Yeah.

Speaker 2

So that's a good place to go in with our next question. So, what are some of those early signs that families might be noticing already or would like to know more about?

Speaker 1

Yeah. So there are quite, several like developmental areas that we'd probably be thinking about. And often, like, the first one that we notice, kind of like the easiest one to see are the kid’s motor skills. In small babies like are they rolling over, are they sitting up, are they standing, are they walking? Those are kind of like easy, easier signs to spot and to notice for yourself as a parent, but also for people around you.

But we are also thinking about how they're using their hands and body to move and do things in terms of their hands, do they use like a pincer grasp? Like do they use their thumb and their index finger to pick up toys or food? And other skills we'll be thinking about is maybe like jumping, standing on one leg, their balance skills, and when they're scooting or learning to ride a bike.

Or maybe other kids are accident prone. Do they trip over items on the floor? Can they protect themselves when they're falling? So there's a lot of things that we'll be looking at or thinking about, and I guess it's generally like you'd become - like of course, you are looking at other kids that are a similar age and you do want to think like, “oh, is my child kind of like roughly doing what other kids are doing,” without having the comparison race on. But it's really, yeah, just really thinking, noticing their motor skills. And if you think like, I guess that's what kind of like our Purple Book is for as well - to write down those developmental milestones. Because I cannot remember when my child actually sat up for the first time, or smiled for the first time, so it's good to write it down.

Speaker 2

And, you know, take recordings of your child if they're doing something and you’re not sure how to put it into words when you're going to visit your clinician, you know. Take a little video of how they're moving and what their grip looks like and those kinds of things.

Speaker 1

Yeah, absolutely. And then another area, of course, it's really important about kind of like, development is looking at or thinking about their child’s social communication or language skills. So mums and dads are probably the first ones to engage in a conversation with their babies and by conversation we mean, are they babbling? Are they playing peekaboo? Are they sharing smiles with each other? And this kind of difference, although it may not be very obvious to others, can be one of the first things that parents pick up. So if their child is less babble, like babbling less or sharing less smiles, or kind of like, not really engaging the back and forth and conversations, that's probably something that the mums and dads will notice first before other people around them.

And then as the babies get older, like from around six months of age, we would like a baby to kind of like copy movements and copy facial expressions like smiles, and thinking about the babies respond to their names. Then again for one year old, we'd be expecting a child to make noise, to get our attention, whether we like it or not. But, it's very normal. **[Laughter]**

Are they copying our sounds? Are they copying our gestures? Are they following basic instructions and the rough mark for language is like at one year of age, we would probably want a baby to use their first words. They don't have to be pronounced correctly, but just something simple like Papa, Mama, Nana, Choo Choo. Simple words. **[Laughter]**

And again, kids get older. So from kind of like one years of age, then we'd be expecting a child to put two words together roughly. So that's kind of like a good milestone to remember. And we are also thinking about their play skills, their social interactions. Does my child like other people? Do they show an interest in other people? Do they play alongside other children? And we are still obviously just looking for the parallel play. Do they play next to other children? Do they engage in joint attention? And do they share with someone else, what they're looking at, for example, pointing at something exciting that they've seen? But I also want to be very clear that we don't expect a two year old to take turns or share their toys willingly with other people. [Laughter]

So they are absolutely allowed to just say -

All speakers

Mine.

Speaker 1

And grab it back. [Laughter]

So I guess overall thinking about social communication, just think about how your child interacts with us, other children, other adults. Do they enjoy engaging with others? Do they copy and imitate what others are doing or saying, and do they get our attention when they need help?

Speaker 2

And I suppose then, so parents might be noticing some of those things. So when is the time for them to seek support? You know, what's the sort of pathway for them if they are noticing?

Speaker 1

I think, yeah. First kind of like noticing what's happening in the development and then thinking about, 'OK, is it just something I'm noticing or is it something that I'm really concerned about?' So it's, I think when those concerns get bigger, when your worries get bigger, if you're noticing differences - a lot of the time it's probably time to write it down. Take little notes. Observe those behaviours and whatever works for you. Kind of like write it down on a piece of paper, put it in your phone. Take videos like we already said, or little recordings of what they're doing. So you just notice it and be aware is the first point.

Speaker 3

The more you notice, the more you notice. [Laughter]

Speaker 1

Yeah, yeah, yeah. And I think just kind of like other areas to be aware of as well as just thinking about the children's like emotional regulation. Are they happy children? Do they connect with us? Do we, are we able as an adult to regulate our children? Because we can't expect small children to regulate themselves, they need a caregiver to that. That thinking about their mental health wellbeing. Are they happy children? Are they very anxious children? Thinking about do they have any specific special interests or are there certain sensory preferences or sensory aversions? So there's a lot of information we'll be as professionals asking parents about. So the more you notice it can be really helpful and it's kind of like, getting educated on developmental milestones by like, really trusted sites.

So I always recommend to parents or friends as well, like the Raising Children [Network] website. And I know the Department of Health also has like really nice short documents on what to expect at certain ages. And I know even as a mum, I always find the page is really helpful to look at and just kind of like be reassured that my child is developing the way they should be.

Speaker 2

Yeah, awesome. Thank you, Maria. I think that's going to be really useful information for a lot of families - navigating their worries and what they're seeing in their child that they feel is developing differently. I hope families also out of that information, feel really confident that they can trust their instincts, that no observation is wrong if it's causing them a worry.

Speaker 3

Yeah, absolutely. And I, you know, I just can't stress enough that documenting. Because when you're in front of somebody, if you're seeking information, diagnosis, support, you're on a limited time frame and you've probably got your child there and you're wrangling and managing. So, to have it really clearly documented makes life a much, much, much easier.

Speaker 1

Absolutely, yeah. And it's also good to know, like as a clinician that you know like, ‘OK, the parent really got to ask all their questions’ because we do encourage parents to come prepared, bring all their questions with us so that they can leave an appointment being reassured, yeah.

Speaker 3

Absolutely, and I think you're going to record those things that do really stand out that probably are the things the clinician is going to be most interested in like, ‘ohh eating, that's interesting. All the sensory stuff. Hmm’. That's interesting. Yeah. So as I said before, we had the amazing Rachel Callander here and she made a comment that always sticks with me and that is “Confusion wastes time.”

Speaker 1

Hmm.

Speaker 3

Particularly in the clinical setting, so being able to come with very, very clear points of concern. Get to the point, and then you've got more time to get your issues addressed, your concerns addressed.

Speaker 1

Yeah. Yeah. Yeah, that's very helpful advice actually. Yeah, yeah.

Speaker 3

Oh so good. It's that one that really seared into my mind.

Speaker 2

Yeah. And I think for families to be confident to say, “I just need some time to write this down.” You know, so that they've got the answers as well. So you can go back to that information. I think sometimes, especially if it's the first time you're having that - being able to express those things and have a conversation with someone who can help. You might not always hear everything, but process what you've been told.

So yeah, take the time. Make notes from what the clinician is saying to you. So that you can go home and maybe have a chat about it with family. And just process that information for yourself as well.

Speaker 3

Also, because the chances are that clinician is using clinical terms that you're not familiar with. So we've talked about this too, where it's like, ‘hang on, time out, explain to me what that means. What does dysregulation mean?’ You know? Yeah. So yeah, yeah. You're learning a new language.

Speaker 1

I think that also don't be afraid - Like just don't be afraid to bring a support person. You don't have to go to these appointments on your own. Bring your partner, mum, dad, a friend. It doesn't matter. Like we always welcome the family in. Whoever is your support person, bring them along.

Speaker 2

Yeah, absolutely. So from here, for parents and carers, who still may be concerned about their child's development. What are the next steps?

Speaker 1

So maybe concerned isn't the right thing to feel, but being curious can be really helpful. So this will help you to work out if there are differences that lead to needing support, or whether they are just differences that make your child who they are. This time can be very stressful and overwhelming, and it's important to remember that parents don't need to hold on to their concerns or their worries and that there are a lot of people out there who can help and give support.

There is, of course, as a first point of call, you might just take your baby to the kind of like, your regular check-up appointments when you're going to see your Child

Health Nurse, your General Practitioner (GP),they are there for you. And even if you're going for another like, a regular check-up or like a vaccination. Use those times to ask your questions, because again, they are there to help.

And then there are many organisations out there like Ngala who have a lot of knowledge and information and so you can always phone them up. There is places like Kiind as well that you can contact. And if your child attends daycare it can also be really helpful to just chat to their educators because they work with hundreds of children, so even though they're not a health professional, they know how kids develop and they're really good person to ask as well.

Then more specifically, like, there are a lot of service providers who offer drop in sessions as well. Like if you have questions around your child's development. For example, at CliniKids we offer consultation meetings where we listen to parents about their concerns, to identify the next steps. And please be assured that we don't suggest a further assessment or therapy if we don't think it's needed. So we just want to offer support to parents who may be wondering, ‘should I be concerned, should I see a paediatrician, should I start therapy?’ So it's just really like a first point of call to say, like, to give you like a direction to go with at the same time.

We also know that research has shown us how important early supports are, and how important it is that parents build their skills and their capacity as a parent. And I think the most important thing for parents to know here is that you don't need a referral to start therapy. And also, if you really have, like, big concerns and you're thinking like ‘am I eligible for NDIS supports?’ You don't need a diagnosis for children under six years of age to start getting NDIS funding.

Though I think if parents are really concerned they can contact any service provider and start therapy, they can start OT, speech, physio, clinical psychology and the clinician will tell you if therapy is not required. We will not continue with therapy if we think your child is meeting their milestones. We might say, like “maybe if you're still concerned, come back in three months time and we'll do another check in.” But, we won't do therapy just for the sake of it.

But like, of course, doing therapies privately can be quite costly for families. Yeah. So maybe just to mention as well, there are Medicare rebates available like the Chronic Disease Management Plan, which can be used for speech, OT, physio sessions, and I think other allied health as well. So it's only a rebate for up to five sessions per year, but at least it's something. And then there's also the Mental Health Care Plan for psychology, or specialised OT’s as well, which is like up to 10 sessions a year. So at least that's a bit of financial support for families, and it might help to kind of, like, get the ball rolling if they just want to get like some ideas.

Speaker 2

Absolutely. And I think it's great for families to know that there are opportunities. Because, we kind of do worry quite a lot about families who can't afford these things. So yeah, that's adding to the worry deciding, you know what they need to do. And it's like, 'gosh, where am I gonna get the money from to do this?' So it's really important that families know that there are opportunities out there for rebated services and assistance.

Speaker 1

Yeah, and I think after you've seen your GP or your Child Health Nurse and they have suggested to look for further support - remember, again, like you don't need a referral, so you can just call therapy providers and start supports. But at the same time, it's also just really important to still focus on your child or your children and just continue and play and quality time. Yeah. So don't focus too much on all the things that you might think you should be doing to get your child support. It's just enjoy the little person that they are. Just enjoy having them around and just really focus on the connection you have with your child and with everyone in the family.

Speaker 3

Yeah. Say this to-to parents quite a lot - "Your children gets one childhood." Yeah, so let's make it as good as it can be, you know, regardless of what else is going on. And I think it was Maria Montessori who said "Play is the work for children."

Speaker 1

Yes, exactly.

Speaker 3

So yeah, we might see plays frivolous, but it is absolutely essential to development and in that process, there's eye contact and there's communication and there's motor skills. And, there's a lot going on. And that is a form of organic therapy.

Speaker 1

Exactly, yeah, play is how children learn is their form of work. It's their occupation. So that's why everything we do in therapy is through play. And it's don't like- I think there's a lot of parents out there that think like, 'oh, I need to do this type of play. I really need to challenge my child.' But no. Just sit back and just watch what they are interested in and you can copy what your child is doing because they absolutely love it when you join in at their level, and then you can give them little ideas to build on that. But just kind of like, get on there, get on the floor with them, be eye-to-eye with them - if there's not too much pressure for them. And just play what they are playing, just copy what they are doing and you will have the most beautiful connection.

Speaker 3

It's about connection right? Developing connection, yeah.

Speaker 1

Yeah, yeah.

Speaker 2

So I think the discussion around play is really great because I think families will feel really confident that they're actually, you know, taking steps forward. We know that wait times in WA are really long at the moment for some services.

Speaker 3

Very long. Yeah. Developmental paediatricians, particularly, which is where you want to be looking to access, yeah.

Speaker 2

Yeah, absolutely. So, you know, even finding a developmental paed and being on a waitlist for them.

Speaker 3

Yeah. Yeah, it's particularly, if you're in regional areas, right, it gets even trickier.

Speaker 2

Yeah, absolutely. So I think, yeah, play's a great way of-of supporting you're child while you're waiting.

Speaker 1

Absolutely. And I think with the wait time is particularly like we always or often recommend to families to the website Perth Kids Hub. Because they do the hard work for you and actually check wait lists for different service providers and paediatricians. And so you can see who is currently adding new clients to the waiting list. Where can you contact who maybe doesn't have a waiting list at the moment. So, Perth Kids Hub is a very helpful resource for families in Perth.

But around the play, and maybe just to mention that playgroups can be a really good support as well. There are inclusive play groups in WA and I think these can be a really good support, maybe more so for the parents than the children because you're meeting other parents who are going through a similar, similar time to you. Maybe have similar struggles or maybe similar concerns and it's just really nice to find like-minded parents and peers that you can share to and ask questions that maybe you don't feel comfortable asking your other friends from your parent group.

Speaker 2

Absolutely. I was talking to her mum the other day and she, you know, we were talking about supports. And she felt like she's got lovely family and friends, but she didn't feel confident talking to them because they just didn't understand. She didn't want a burden. But finding a tribe can be really helpful in those Playgroup Connect+ opportunities. And we certainly do have that information on our website. So we have a blog post on inclusive play groups in WA, so it's a great place for families to find that information as well.

I think schools are another great opportunity for families to gather information and get support. So for parents whose child is about to start school or has recently started, how important is it to inform their teachers about their concerns?

Speaker 1

Very important I would say. Because teachers are then better able to support your child and especially in the younger years like kindy, pre-primary, they have more Education Assistant (EA) support in the classroom anyways. So, if your teacher knows that you may have some concerns around your child developing differently, they can make sure that the EA keeps close to your child to support them through transitions or with specific tasks that needs to be done in the classroom. So it's very helpful. So, talking to your teacher and the whole school is really important because there is other supports in place in schools that can be helpful for your family. So they might have or they will definitely have a school psychologist, but also depending on if your child is going to a private school or a public school, there is Pastoral Care or Wellbeing Officers who can provide additional supports as well.

Speaker 3

One of the bits of feedback we get fairly regularly from families we speak with is that their child is having some struggles in the early years of school, but they're not getting the EA support that is required because they're pre diagnosis.

So, going back to your point about that really important relationship with the teacher right from the get-go, sharing, you know 'these are some of my observations. I might not be concerned, but I'm curious. You know, I'd be interested for you to, you know, see if you're observing what I'm observing. No, bring it back to me. And then, you know, I can feed this information further if need be.'

And this is the perfect segway Marie, for our first ever podcast that we had some time ago now that is all about 'Preparing for the Start of the School Year.' So we've actually touched on quite a bit of this, listeners, so, yeah.

Speaker 2

And I think it's nice to-to think about how teachers, and EAs, and schools can support you with gathering information as well. They might be asked to do an assessment if you are going, you know, through those next steps. And you know there's other clinical opportunities for teachers to be involved, isn't there?

Speaker 1

Absolutely. And I find it really helpful when parents show me or forward me emails that they have received from their teacher around things that the teacher has noticed in their classroom. It's really helpful for me to see what, like, how the child is, yeah, managing or how the child is kind of, like, how the child is getting on at school because -

Speaker 3

Reacting to the environment.

Speaker 1

Yeah, reacting to the environment and we know some children. And the parent isn't there, so the parent can't share with us how the child is going at school. They see maybe the meltdowns after school.

Speaker 3

We talk about that too, yeah.

Speaker 1

And we know that children, particularly girls, are very good at masking, so the teachers or EA's may not be able to pick up on things. So it's the subtle things in between. But definitely having the conversation with the teacher as well is really. And definitely as, like, for kids on my case load, like we'll do regular school visits as well, just to observe and see how is the child is settling into school - do they get the one-on-one support that they might need in certain situations? So that can be really helpful as well. And we then try to be the fly on the wall that you want to have there most of the time.

So yeah, just to remind people as well that our consultation meetings at CliniKids are open to professionals as well. So it's not only for parents and caregivers. So anyone can book a consultation meeting with us. And we're just really trying to be kind of like strength-based, focused on the child and kind of like the environment around the child and how we can best support them in their environments.

Speaker 2

They are amazing insights. Sharon, do you have any additional advice around this?

Speaker 3

I do. There's a lot actually going on in my head at the moment. I think this is very, very hard to do. But I think, try not to project too far into the future. It's natural to worry about the future. It's probably the thing that keeps parents awake at night more than anything else. Try not to project too far. Try and stay focused on what's happening now. What needs to get done now. Bite sized chunks - would be one of those.

There's a lot happening for families around this moment. Concern, curiosity, pre-diagnosis, diagnosis, post-diagnosis, and it's a bit of a rollercoaster emotionally. We recognise that and that's why it's really important to go, you know what we're saying before tapping into peer support, finding your tribe and the disability community is full of amazing tribes. So you will be welcomed into a wonderful community where you will find wisdom and support. So you won't be alone. I think that's a really, really important point.

As we've touched on in previous podcasts, the importance of things like note keeping, learning how to communicate effectively with your allied health, medical professionals, teachers. That's part of the process, you'll learn that. You're learning a new language. You'll learn that as you go on. Again, just take a deep breath - that will evolve in time.

Try to keep your anxieties in check around record keeping, you know, get a little filing cabinet. Have your folders for all your different professionals and that. Because often children with disabilities will be engaging with multiple professionals, so you'll be getting multiple reports and we won't even go into NDIS, right? [Laughter]

We'll leave that for another conversation.

And obviously utilising support like Kiind - where we can point you in the direction, not just helping you navigate systems, but point you in the direction of accessing supports that are gonna help you for the long haul. This is a marathon, not a sprint.

Speaker 1

It is absolutely, and I think it's so important that parents look after themselves - and it's if you have happy parents, you have happier children. And we know from the research there's a lot of neurological connections between parents' regulation and the child's regulation.

So the better, the happier you are, the better you are able to look after yourself, makes you be more resourceful and have more capacity to look after your children. So whatever it is, it's easy. I can always know, like, it's really easy for us to say that in a conversation like this. And it's really difficult to do it on the ground, but still think about what is quality time for you? Is it a cup of tea on your own? Is it a walk in the early morning or the evening, is it going to the gym? And just really don't think 'ohh I'm being selfish.' Like no, you are not. You are doing the most important thing for your family. Look after yourself first, and then you can look after your children.

Speaker 3

Absolutely. And it's probably worth reminding listeners that the Peer Navigators at Kiind - we all have lived experience. We're in the trenches with you. We know. We know what it’s like.

[Break music]

Speaker 2

Would you like to connect with another parent who just gets it? We're taking a short break from our chat with Marie to let you know about our Parent Link program. Through Parent Link, we can introduce you to another parent who might be on a similar journey. That could be your child's age, their diagnosis, or they might just have similar circumstances like living regionally.

Together you can share ideas, knowledge, and just connect with somebody else who just gets it. If you'd like to know more about the Parent Link program, please visit our website at kiind.com.au, complete an expression of interest form, and one of the team will be in contact when we find you a match. Now let's head back to the podcast.

[Break ends]

Speaker 2

Well, thank you, ladies. We've outlined some really helpful tips. So far we've covered early signs and what to do if you have concerns about your child's development. Now let's talk about the next steps. So, Marie, if a parent has been informed that their child requires further support, what should they expect next?

Speaker 1

So if you're child to still young, like, as preschool or lower primary school age, then you will probably consider some early supports or the early childhood approach. So in the past we may have called this early intervention, but with our growing understanding of neuroaffirming practice, we prefer to call it supports rather than interventions. But you will still hear in the community, you might still hear early intervention.

So there's the support for younger and actually older children as well that has probably changed quite a bit over the years. So we still offer direct work or direct sessions directly with the child and the parents present. So a lot of the therapy approaches that we can offer now are coaching, coaching approaches, and the benefit of that is that you don't have to go to a clinic to receive therapy. So a lot of these approaches can be done via telehealth so you can stay at home. You can use an online link or they can even be done over the phone.

Speaker 3

That's really, really relevant to the families we speak to in regional and remote areas to be able to get that support without having to turn up.

Speaker 1

Absolutely. And there are so many different approaches out there and they're really powerful. And I also don't want regional families to think that they're getting, like, second best therapies. It's actually - they are really good therapies and a lot of our families in Perth, choose as well to use them as telehealth options because they don't have to drive or they can maybe have an early lunch break at work and they can do those therapies while they're at work. So they're just really, really good and convenient options while also hitting the best evidence mark.

Speaker 2

So for children who are new to therapies, what are some ways for parents to ease them into new routines and transitions? And I think that is sort of a nice question to lead in after, you know, sharing about how sometimes families choose teletherapy because their little person might not be ready for what we would consider a traditional therapy session.

Speaker 1

Yeah. And I think, yeah. So in therapy, like, most importantly is that therapy should be fun for the child. It should be fun and engaging and anything we do in therapy should match the needs of the child for engagement. So we are following the best practice guidelines and some of those principles include that we use a family-centred practice and a strength-based approach. So that really means that parents and therapists work together. Parents need to feel safe and supported, and children need to have fun and allowed to be a child.

So if that's not happening, then you might want to consider something else, or just have a chat to your therapist about it. In saying that, maybe not every therapy session will be as much fun as the others, some depending on what your goals are, and what we're working on, they can be a little bit tricky at times. Or also depends on what and how the child slept and what happened in the morning, but like overall.

We will try and be led by the child. So whatever the child prefers, whatever the child preferences are, we will bring that into the therapy session and even if that means that we'll just have a session around *Thomas the Tank Engine* or *Bluey* episodes, anything. Mermaids. I don't know. It could be anything. We'll try and bring it in to make it fun, and make sure your child wants to be there. And can work on what's tricky for them, but while using their strengths and their interests.

Like we said already with the coaching approaches, so there are coaching approaches that we can use with the parents. So, one for example is the Paediatric Autism Communication Therapy (PACT), which is where the child and the parent play together, and then the therapist will look at the videos or be in the room depending on whether doing they're doing a telehealth option or an in clinic option and just really focus on the engagement and the communication between the child and the parent at that time.

But there are also coaching approaches for children. So, children that are very chatty, like maybe children that are 7-8 years of age and older. There's a beautiful intervention called the Cognitive Orientation to Daily Occupational Performance called CO-OP, where children get to set their own goals, and they get to really be the lead in the therapy, decide on obviously like what they want to work on, but also what they want to work on next. They get to develop their own plans for therapy. And it's really difficult for me at times, to kind of like, sit back and not tell the child what to do because we actually now know that coaching is a much better approach.

So when the child tells us no, I want to do this a different way. OK, great. Let's give it a go. Let's see how you go with that. And as a result, we get to work on goals like maybe skateboarding, basketball, running, skipping, and these are goals that are often not prioritised by parents when they come to an OT. But for children these are really important things and it's just kind of like seeing their smiles and their proud facial expressions when they achieved the goal, which is just incredible.

And I think other programs can be group programs that focus on emotional regulation and social interactions. There's one called the Secret Agent Society (SAS), which is designed like a computer and so the children are playing a computer game, but it's actually designed to support them with their emotional regulation and social interaction. So again, that's very, very powerful as well.

But, to summarise all of that, I think it's important. It should be. Any therapy should be individualised to the child. It should be fun, it should be led by the child. But we are thinking about the whole family and also the siblings and the family, because sometimes they're typically developing sibling may feel left out. They may feel some kind of jealousy. ‘Why is my brother or sister always going to all these appointments?’ So they're beautiful supports for siblings as well, like a program that we offer is the CliniSibs program for typically developing brothers and sisters of autistic children where they get to form a support group with each other and get to know other children who have different struggles at home maybe at times. And again these kids can't share that with their friends at school, so it's really powerful for these kids to come together and form friendships and share things about their home life.

Speaker 2

Yes, important isn't it?

Speaker 3

So we've had good feedback from families about their children who've been through that. We talk about siblings a lot. We've yeah, it's a unique and often lonely journey for siblings.

Speaker 1

Yes. And even though it’s siblings that will be, it’s the siblings that will stay together for such a long time. So they will be together. Yeah, for a long, long time. So as parents like, we may be gone, but the siblings are still there, looking after each other. So it's really important that they have a good bond and connection.

Speaker 2

Absolutely. So what are the options available if a child can't access these early support services, you know whether it's there on a wait list, or they live regionally, and have limited supports. What are the other things that families can engage with?

Speaker 1

Yeah. So like we said already for regional families, remember the online supports that are out there, and even if you have a dodgy internet connection, which hopefully you don't have anymore. But a lot of it can be done over the phone as well and these are best practice therapies with really positive outcomes. So they are, yeah, the real game changer for regional families.

Waiting lists are the reality unfortunately. A lot of the times. But they also come and go, so don't be completely put off by them. Join several wait lists because you never know when a service providers employing a whole lot of new therapists. So, just be on several waiting lists and keep your options open.

But while you are waiting, I think it's really important to come back to our an earlier point that we already spoke about is around building the connections with your child and having fun and just really enjoy them as a special person that they are. Enjoy the play time with them and just spend quality and meaningful time together. And it doesn't have to be a long stretch of time because you'll have other siblings, you’ll have work to do, life is very busy. But when you do get on the floor to play with them, even if it's just a few minutes a day, make it really meaningful.

Speaker 2

Lovely. So we hope everyone listening today has found this episode helpful and that you're feeling more confident to navigate what you do if you've noticed your child is developing differently. Marie, in every episode, we leave our listeners with one last Pearl of Wisdom. What is the main thing that you would like them to take away from this episode?

Speaker 1

That's a big question. I think for me it's going back to trust your instincts. You know your child best. So, stay curious. Embrace your child's differences because they are amazing. But remember that supports are available and seek professional advice early on when your curiosity turns into concerns.

Speaker 2

Wonderful. And Sharon, do you have a Pearl of Wisdom for us today?

Speaker 3

Yeah, I think following on from that point, really want to acknowledge that there is an enormous amount of pressure on parents to get an early diagnosis and early supports/ intervention. That's what the early space call it, the early therapy space. So we're aware of the fact that the pressure is there, but access to that diagnosis and support can take some time. It's a very uncomfortable space, a limbo space for families to be in. And a lot of parents we talked to who get a diagnosis eight, nine, ten years of age have guilt around that. And this idea of the missed opportunity.

And I suppose my takeaway message would be it's never too late. There's always an opportunity to get those supports in place. The brain is changing and evolving and growing and. Yeah. Anytime is better than no time.

Speaker 1

Absolutely. And that's exactly true, like, we know that the brain is changing all the time. It's never too late to learn. So it's never too late. And please don't feel guilty ever. Yeah, there are still so many opportunities out there.

Speaker 2

Wonderful. That brings us to the end of the episode, Marie, thank you so much for being part of this episode with us. It's been wonderful to sit beside you and listen to your expert advice and share this information with families.

For links and resources mentioned in today's episode. Check out the show notes. Stay tuned for our next episode if you don't want to miss it, please make sure you follow on our socials. If you have a friend or know someone who could benefit from the information we've discussed today, why not share this podcast with them?

The Kiind team is here for you. If you would like one-on-one support to help you navigate any issues with your family, you can book a free Pathway Planning session with us. The link will also be in the show notes. If you have any questions or ideas for future episodes. Please email us at hello@kind.com.au.

Thank you for joining the conversation with us and we'll see you next time.

Speaker 3

Bye. Thanks, Marie.

Speaker 1

Thank you so much. Bye-bye.

Speaker 2

Thank you, Marie. That was amazing.

[Kiind outro sound effect]