

3 – 6 years. Supporting a child with a disfigurement: a teacher's guide

Guide 6. Developing Self-esteem

Self-esteem is closely linked to experiencing plenty of good social interactions. Children with disfigurements often struggle to achieve a good flow of enjoyable social interactions. Their social experiences may be less comfortable because of other people's reactions to their unusual appearance. As a result, they may develop lowered self-esteem. This makes it harder for them to enjoy being with other children or to gain as much as they should from their early years and infant school learning and play activities.

A young child who has low self-esteem will tend to behave in ways which are meant to make her feel less worthless. But these defensive behaviours make it even harder to have good social interactions. The child gets into a vicious circle – difficult behaviour leading to negative social reactions from others leading to lowered self-esteem leading to more difficult behaviour and so on.

It is essential to involve the child's parents so that there will be a good understanding of the difficulties the child is having. A consistent, supportive approach both at home and in their early years setting or infant class works best.

1 IDENTIFYING LOW SELF ESTEEM

By careful observation you will be able to identify behaviours which are associated with lowered self-esteem. Here are some examples:

- Lack of persistence Switching from one activity to another with little real engagement in any task.
- Avoidance Opting out before even starting a task or activity. May give reasons such as "Boring" or "Done it before", become stubborn, or run away.
- Destructive Deliberately spoiling or breaking objects or work done, own things or work as well as other children's.
- Clowning Being self-consciously silly or cute
- Controlling Attempting to 'take over' a game or activity and organise or boss other children (and adults). Can include trying to 'control' knowledge – a 'know-all'.
- Aggression, name calling and bullying Rough, hurtful or dominant behaviour towards others.
- Blaming Habitually blaming other people or factors when anything goes wrong.

To onlookers these behaviours are clearly counterproductive and will not help the child to achieve better social interactions or greater acceptance by others. But from the young viewpoint of the child, this difficult behaviour may be the only thing she can come up with to try and disguise or remove her dreadful sense of weakness, failure, or worthlessness.

2 STRATEGIES FOR ADDRESSING LOWERED SELF-ESTEEM

Pre-empt the negative and appreciate the positive

Low self-esteem tends to be further lowered by attempting to correct the negative behaviour. It is defensive behaviour and in a sense the child is unconsciously compelled to do it by feelings of worthlessness.

Careful observation is essential to identify the kinds of situations when the child is more likely to find herself behaving negatively as this will help you notice the approach of potentially difficult behaviour before it happens. Rapid but gentle intervention can then be used to guide the child towards an alternative which will be more positive for her.

Example: You might first have identified that the child you're working with often ends up annoying other children when she has wandered away from her own activity. This helps you to be more alert when you see her pick up a crayon and approach another child who is drawing. Don't wait for her to mark the other child's paper. Then you would have to say, "Stop that Sally. Stop that now!" Instead, draw the child away – "Sally, come and help me sharpen these pencils."

Create opportunities to do well

Increase the child's experience of positive moments in play and in learning. Identify her strengths or notice what kinds of activities she seems most comfortable with. Adapt tasks and activities to enable her to experience her strengths or to be more comfortable with what she is doing.

Look for situations where the child can experience achievement. Tasks and activities need to be pitched so that the child is neither bored nor frustrated. When her self-esteem has improved she will be able to attempt more challenging activities which at present may cause her to flip into defensive negative behaviour.

Some children with a disfiguring condition, injury or illness, especially if the face or head is affected, may have some sensory impairment. Or if the child's arms and hands are affected she may struggle with tasks requiring good fine motor skills. Look for signs of unhappiness, frustration or boredom. Ask for assessment and advice from specialist teachers and therapists in order to make tasks and activities as accessible as possible.

Mistakes are allowed

You and your colleagues can model responses to making mistakes which do not involve criticism and blame. Mistakes can be seen as helpful – they can help us notice what we're doing:

"Whoops. I think maybe I was trying to go too fast. There's plenty of time."
"Oh dear. I can't find the book I wanted. I'll go back and see where I left it."

Invite choice

Encourage the child to make her own choices. A choice which may seem trivial to you can help a child to experience some real control in her life. Look for opportunities to offer the child two clear options. Ask her if she would like to:

- work with a pen or with a pencil
- make her picture on a large or on a small sheet of paper
- use counters or an abacus
- wear a coat at playtime or go out just as she is
- help clear up by collecting the pencils or by taking the waste paper basket around for everyone to put their bits in.

Create social opportunities

Good self-esteem is closely linked to enjoying good social experiences. So all the strategies, outlined above, for addressing a child's lowered self-esteem need to run parallel with the development of her social skills. See the *Guides on Having something to say, Practical support with social skills, and Self-expression*. Most children show improvement in social and language skills as their self-esteem increases.

Social tasks and activities can be introduced when the child has begun to settle down as a result of the strategies and interventions outlined above. Shared activities can benefit from the involvement of an adult to pre-empt any difficulties that might arise and to help all the children gain awareness of what helps things to go well.

E.g. "Jatinder, that's a good game you have made with those blocks and your friends are happy because you are sharing with them."

Look for activities that give the child a real reason to be part of a team, e.g. putting the blocks back into a crate, mixing the play dough, watering the plants. Vary the groups and vary the activities. By sharing in the activity you can model working or playing nicely with others.

E.g. "We are going to put all the balls in the big bag. Who is going to fetch the bag and who will collect the balls?"