

YourLifestyle

Take the first step



The Bigger Picture
Shalini Sinha

There are exactly five weeks left to that famous day when we all wake up and decide what great changes we'll wishfully resolve to bring into our lives for the coming year. Rather than panicking and overburdening ourselves on that Tuesday morning with what feels like "too great a task to achieve", it's worth considering now what changes we want in our lives and how we can lay the road for future success.

The first question is, "How can we possibly think about New Year's resolutions when Christmas has yet to come? Surely it will thwart all our plans." Christmas, being synonymous with joy and merriment, must inevitably be counter-productive to any "life improvement" initiative. Heretofore the definition of our problem: Having things that are "important" to us in life is invariably in opposition to what is joyous and fun. No wonder few of us succeed in changing our lives.

The fact that the number one New Year's resolution is "to lose

weight" and Christmas is defined by sweets, pudding, alcohol, parties and excesses, exemplifies this point. "Life wouldn't be worth living" without all these decadences, and so life with health and vitality must be unimaginably dull.

It is a myth that a healthy, nourished, vitalised life would be tedious beyond belief. On the contrary, when we eat well with an abundance of vitamins, minerals and antioxidants, and sufficient fibre, carbohydrates, proteins and essential oils, we have energy, enthusiasm, motivation, concentration and sex drive!

In contrast, when we are full of sugar, fried and processed foods, and recovering from alcohol, we lack energy, motivation, drive for life and enthusiasm. Many of us feel low. What's more, we get sick more easily and begin to develop chronic diseases. Yet, we believe we are enjoying ourselves more. How is this possible?

The answer is simple: we are under the influence of chemical drugs. What sugar, grease, alcohol,

nicotine and caffeine do – at least in the first instance – is act on our central nervous system. They make us feel "pleasure" in our minds despite (and over-riding) whatever else is going on in our bodies.

As such, we are chemically fooled into thinking we're "happier" when, indeed, we have less joy. This is the addiction element of our excesses and, as it goes on, we increasingly hate our appearance and struggle with our mobility.

Exercise plays a role. Although we believe we feel better when on the couch watching TV, in fact we feel more sluggish. As time goes on, we begin to notice the emergence of aches, pains and stiffness. Worst of all, we slowly lose access to our physical power which dulls our confidence. While it can be difficult to get back into exercise after prolonged periods of inactivity, exercising regularly improves our mood and energy.

It seems the biggest hurdle to having a new life in the New Year might be our approach to Christmas. So I've come up with a

few ideas for how to make it just a little less gluttonous and a little more empowering for you:

◆ If you're going to run around like a crazy thing, doing the Christmas shopping, decorating the roost, organising parties and sending all the cards to the post, why not really let yourself run around? Get a pair of comfortable shoes and enjoy getting as much exercise as possible while doing it. That way, when you arrive home exhausted at the end of the day, at least you can feel good about having done something for yourself.

◆ If you plan to start an exercise plan in the New Year, why not get into the mood now with some regular gentle stretching? Stretching is an unsung miracle for

the body, slowly lengthening our muscles, increasing circulation and the body's ability to communicate with and facilitate healing in its different areas. What's more, we can stretch while watching holiday movies or our favourite television programme.

◆ Plan to include alkaline foods at your Christmas table, and to your daily meals. Most of the foods we eat produce acid in our bodies, resulting in bloating, heartburn and a general feeling of "unwell". Alkaline-producing foods counteract the acid and make us feel better. Fruits, green leafy vegetables, cabbage, beets, cauliflower, carrots, parsnips, leeks, garlic, onions, potatoes (all not fried or cooked in oil), olives,

yogurt and almonds to name a few.

◆ Add fibre to your diet. In addition to improving your colon functioning, it will help to move through the remains of anything you've recently regretted eating. A simple way is to add bran, which quickly disappears, to any sauces, casseroles, vegetable dishes.

◆ Add water to your day, drinking at least 2 litres of pure or filtered water (and more to compensate for tea, coffee, etc.). Water gives us energy. Being well hydrated also reduces stiffness and aches and allows our body to remove toxins.

◆ Let yourself notice a difference between experiencing "joy for life" versus an artificial stimulation of "pleasure". Choose life, it may well be the best Christmas present you give yourself this year.

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Putting children first



Caoimhe Warren with some of the puppets used to communicate messages about appropriate behaviour and emotional expression in the Incredible Years programme. Photograph: David Sleanor

Incredible facts

What is it?

Incredible Years is a training programme which is designed to treat and prevent emotional and behavioural problems in children aged between three and 10. Unlike many other programmes which focus solely on parenting skills, the Incredible Years programme contains training programmes for parents, teachers and children.

Where was it first developed?

It was first developed by Prof Carolyn Webster-Stratton, director of the Parenting Clinic in the University of Washington in Seattle, in the US more than 25 years ago.

Where is it used now?

It is widely used throughout the US and in several European countries including Portugal, Norway, Denmark, Wales, Germany and Ireland.

Why is it in the news? Earlier this month, the organisation, Archways, was formally launched to deliver the Incredible Years programme in 11 locations throughout Ireland including greater Dublin, Louth, Galway, Offaly, Limerick and Cork. An Incredible Years Ireland study, led by Dr Sinead McGilloway at the Department of Psychology, NUI Maynooth, will also evaluate the programme over the next three years.

Funding for the training and research has been provided by the Atlantic Philanthropies and the Dormant Accounts Fund. See www.archways.ie or tel: 01-4576433 for more details.

Picture the scene: a young child refuses to turn off the TV and come to the table for dinner. To avoid a tantrum, the parent gives the child his dinner in front of the TV. The second night, the same scenario unfolds and, yet again "for peace sake", the parent allows the child to eat in front of the TV instead of getting him to join everyone else at the dinner table. Soon, the child only eats his dinner in front of the TV.

It's a simple example of how situations can develop into patterns of behaviour that become impossible to break.

"In that case, the power is in the wrong hands. A three year old can control a household by having the television on 24/7," says Margaret Maher, director of Archways, the Dublin-based organisation which delivers prevention and intervention programmes to children and teenagers with behavioural and emotional difficulties.

"How will a parent deal with that child when he becomes a teenager? What chance will such a parent have to tell a teenager that she can't go to a disco because it's a school night?" asks Maher who says she has seen many parents crying at parent/teacher meet-

ings because they can't get their children to go to school. "At that stage, parents have high levels of fear and stress because the relationship has broken down and these teenagers are then prone to develop conduct disorders that will take a lot more resources to sort out."

Maher worked as a teacher for more than 20 years before she and others developed prevention and intervention programmes for children and teenagers at risk in the Clondalkin area of Dublin. Five years ago the Education Working Group of the Clondalkin Partnership (now Archways) began to use the American prevention and intervention programme, Incredible Years.

"Right across Ireland, there are 12-14 per cent of children who will have a social, emotional or behavioural deficit which will prevent them from getting the best out of their education," Maher says, adding that this figure rises to 35 per cent in disadvantaged communities. "I've seen families where children are left to fall asleep on a sofa every night because bedtime is too traumatic and the parents can't get it together to put the children to bed," she says.

But, by working with parents, children and



A US programme aims to help the 12-14 per cent of children in Ireland who have social, emotional or behavioural deficits. Sylvia Thompson reports

teachers, Maher believes these children's lives can be turned around. "There is a huge evidence base for the Incredible Years programme in the United States," she says. One Welsh study found there was a 46 per cent fall in anti-social behaviour at home and in school among participants, compared with 7 per cent in a group who didn't receive the training.

The Incredible Years programme involves three strands – a parenting course (eight two-hour long sessions with other parents), a teacher training course and an 18-22 week school-based programme for children.

Caoimhe Warren is a resource teacher in Neilstown Junior School in Clondalkin. She trains teachers in the Incredible Years pro-

gramme and also runs a school-based programme for children.

"The teacher programme helps teachers understand why a child is behaving or reacting in a certain way. The most important thing is that the teacher gets to know these children so that the children know the teacher is on their side and cares about them.

"If you don't have a positive relationship with the child, you won't get the child to comply," she explains.

The children's programme involves the children attending a smaller class, called Dina School. In this group, Warren uses puppets to communicate messages about appropriate behaviour and emotional expression. For

instance, the puppet, Molly Manners, teaches the children what's appropriate behaviour in class while another puppet, Tiny Turtle, helps them understand feelings.

"The children respond well to the puppets. They form strong bonds with them and are affectionate towards them. The puppets will often come up with the problem and help solve it with the children," explains Warren.

Jacqui Guiry runs many of the parenting programmes in Archways. "In the classes, we have mums on their own, dads on their own, mums and dads together and grandies looking after grandchildren and their own children as well," she explains. "Basically, the courses explain the importance of developing a positive relationship with your child. We also ask everyone to spend 10 minutes every day playing with the child. And that means following the child's lead, not taking over the game or using it as an opportunity to teach the child something," she says.

Throughout the programme, parents are encouraged to praise and encourage the child and reward their good behaviour. "When they come first, they all want to know about how to use time out and loss of privileges

with their children but after a few sessions using the techniques such as empathy, listening, talking and playing with their child, they begin to see changes and even notice new things about their child," she explains.

According to Guiry, eight out of 10 participants complete the course: "The key to completing the course is doing the homework because that's when you see the benefits."

Paula Moore (28) completed the Incredible Years parenting course while her son, Nathan (7), attended the Dinosaurs programme. Nathan, who is in second class now, was always getting into trouble in school.

"Nathan had a tendency to get hyper while my daughter, Tori (10), would just sit there. The course was brilliant for Nathan. It taught him about feelings and how important it is to think before he does something," she says.

"I've also had a close relationship with his teacher and I speak to her all the time about how he's getting on." She says the parenting programme also helped her: "I learned how to stop and notice when Nathan was being good and praise him and to ignore some of the negative behaviour. And I learned that I needed to give my daughter more attention too."

Wheeling out the right chair

Getting the right wheelchair can help maintain a patient's independence and even boost their confidence.

Hélène Hofman visited the Royal Hospital Donnybrook's Seating Clinic to find out more

For the staff at the Royal Hospital Donnybrook (RHD), allowing patients to continue with their everyday activities is high on the agenda. The Seating Clinic, which aims to match patients to the right wheelchair, is central to maintaining this quality of life.

"It's so important for a patient to have the right chair," says Shirley McGurk, a physiotherapist at the RHD who works in the Seating

Clinic. "It's important for social reasons so that their family can come and take them up to the coffee shop or take them out. I don't think there's a single person in the hospital who stays in bed all day. We even have chairs for the very compromised so that they can get out for at least a few hours," she says.

The RHD offers rehabilitation services as well as complex extended care and respite services

to adults with physical and neuro-disability and older people. As a result, about 95 per cent of the hospital's patients use the Seating Clinic.

Using information gathered from the nurses, occupational therapists and physiotherapists, the clinic pieces together the requirements for a patient's wheelchair. The aim is to provide each patient with a comfortable wheelchair adapted to their physical needs that will also facilitate their daily routines.

"The nurses will begin by assessing their level of disability. Then the physiotherapist can tell if the patient can get up and walk around and how much time they're likely to spend in the chair.

"The occupational therapists then will look at what they need to be able to do. Do they go on home visits, do they need to be able to get through certain widths of doorways? We try to look at all

these things. The idea is to make the patient comfortable and safe and ensure they're not going to develop any problems," says McGurk.

The wheelchairs come in different widths and can be fitted with high-pressure relieving cushions that give support where required. Additional arm supports or special foot plates can also be added.

To complement the staff's assessment, the Seating Clinic has access to a state-of-the-art pressure mapping system. McGurk says the system is particularly useful in cases where a patient may not be able to communicate when he or she feels pain.

The pressure mapping system gives staff a computerised visual representation of a patient's pressure spots. This enables them to choose a cushion that takes pressure off those areas, making them more comfortable and preventing

painful pressure sores.

Gerard Smith has been living at the RHD for the past five years and visits the Seating Clinic every few weeks. He uses a powered wheelchair which can be elevated to standing level.

"The chair goes up and down which is very handy," Smith explains. "For example, if I'm in a supermarket I'm not asking people 'can you give me a hand?' or 'can you get that off the top shelf. I can do it myself. That's a big, big step. I can also go up the bar and have a drink there. I'm not straining to look up at people and they're not bent over looking down at me," he says.

In the next few months Smith will be moving out of RHD and into semi-independent accommodation. This means he will have someone to prepare meals and help him get up in the morning and to bed at night, while the rest of his time he will live independently.

"This clinic has helped me no end in terms of sitting badly, being in pain and not being aware that it didn't have to be that way. People like them [staff at the Seating Clinic] made me aware that changes can be made by something as simple as adjusting a cushion. It makes a huge difference," he says.

According to Heather Walsh, an occupational therapist who runs the Seating Clinic, getting the best possible assessment from the start is essential to making sure a patient has the best chair for them.

"Doing a full assessment gives you the best chance of getting the right chair first time. It may not always be perfect but you get a whole load of issues covered and we can gradually refine it from there. But once you have a really thorough assessment, you stand a pretty good chance of getting a close match to what's best for the patient," she says.



Gerard Smith on his Spectra Plus wheelchair, at the Royal Hospital Donnybrook, pictured on eye level with occupational therapist Mary Rourke. Photograph: Dara Mac Dónaill