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HOW* TO DEAL WITH MY CHILD'S PAIN?

*supportive guidance for parents



The material was developed in cooperation with:



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ADMISSION

The purpose of this guide is not to give you advice or ready-made tips on how to support your child in coping with their pain, but to accompany and support them on this difficult path. Sometimes it is so that, despite the most sincere intentions and many actions, the pain or fear of pain (which intensifies unpleasant sensations) continues. It is then that another issue, as important as the pain relief itself, comes to the fore - how to accompany the child who feels pain and how to be his best support?

Being a witness to the suffering of the person closest to us is an extremely difficult experience. It requires a lot of energy and a certain change in thinking in order to survive this time relatively calmly. It may turn out that dealing with this situation on our own is beyond our strength. This is fine. Using help is fine. We are not prepared to face the pain of our loved ones on a daily basis. We learn how to deal with it in practice, experiencing and checking what helps us and what hinders this process.

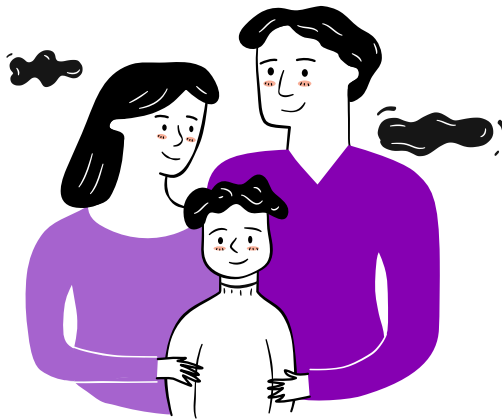
Emotional pain is an inherent part of physical pain. Whether we experience discomfort ourselves or watch someone face the pain, it triggers our response and affects our well-being. Empathy activates in us, thanks to which we identify with others and understand their feelings. When feeling the situation of another person, we can feel various sensations in ourselves - increased heart rate, trembling, nausea, greater sweating, and even pain. Sometimes there may also be anxiety, and other times anger. Being close to someone who is facing difficulties can be an overwhelming experience. Therefore, it is worth remembering at this time that *not only the child has the right to a whole range of emotions, but also the parent.*

All emotions you feel are important and you are entitled to them. During this demanding time, not only physically but also mentally, it can be difficult to find peace. Worrying about a child and its well-being can be difficult to cope with alone. Additionally, because we are social beings, other people's emotions affect us and can affect how we perceive the world and how we feel. It is not at all simple and obvious to separate what a child feels from what happens within us. Hence, the aim of this publication is not only to show how you can support your child and accompany him on his way to better functioning, but also how to take care of yourself during this time. When mobilizing their strength to care for a child, it

happens that a parent forgets about himself - to eat, drink or use the toilet. Sometimes there are difficulties with sleeping caused by high tension and anxiety. Although this is not the simplest task, when all attention is focused on the child, it is also worth taking care of yourself - if only to have the strength to support a child facing pain.

Probably each of us has heard the well-known slogan of Friedrich Nietzsche at least once in his life: "what does not kill us, will make us stronger". Perhaps sometimes what does not destroy us will actually strengthen us. Most often, however, it will weaken and leave a lot of wounds, negatively affect the attitude towards oneself and undermine trust in other people. Long-lasting, severe pain is undoubtedly one of the factors that weakens a person, not make him become hard and hardened as steel. This is especially true of children whose bodies and minds are not yet as mature as adults. All the more so, we should take care of the youngest so that the inevitable, i.e. the pain associated with the operation and the accompanying physical therapy - can survive with the least harm to themselves and their own development. How to do it? This is what the following part of the guide will be about.

„The pain is hard to bear, but it is survivable“.



A FEW WORDS ABOUT PAIN

Each of us has experienced pain at some point. Hit, wound, burn - these are examples of events as a result of which it occurs. The International Association Study of Pain definition indicates that pain is an unpleasant sensory experience and an emotional experience related to actual or potential tissue damage. The sensations of the body and our feelings and thoughts influence each other. Therefore, the arising physical pain also affects our mental well-being. This dependency also works the other way around - for example, the fear of procedures, such as taking blood, increases the discomfort we feel in the body.

Feeling pain is subjective. *Each of us perceives the same stimulus in a different way.* Therefore, when a child tells us that something hurts, let's pay attention to it. Perhaps it is pain, it is also possible that it is the fear of pain, which amplifies the unpleasant sensations from the body. All emotions affect the perception of pain. And just as sadness or anxiety can exacerbate it, calmness or contentment can promote that we feel it in a less severe way. So before your child is placed in a situation where he or she is forced to experience physical pain, you can prepare him or her for it by attending to his or her emotions, responding to his or her needs, taming his or her fears, or reinforcing his or her sense of influence over the situation. Many things in life are not up to us. Many things we cannot control. Perhaps even most of our lives are beyond our control. However, the feeling that we have control over something can be empowering and can reduce feelings of helplessness, and therefore have a positive effect on our mood.

Acute pain resulting from an injury has a protective function*. It tells you that something important is happening in a certain area of the body that requires your attention and care. This pain keeps you from activities that may worsen it (e.g. limb movement) and motivates you to protect the injured part of your body while it heals. This type of pain goes away after the harmful stimulus is removed and the body heals. The first step in managing pain after surgery is pharmacology. Drugs are administered in such a form and dose that the sensations are minimal. Close cooperation between parents is an important element with doctors and nurses,

* More about pain can be found in the book „Chronic pain. Clinical and psychological approach“, ed. PZWŁ and in the article Z. Żylicz, M. Krajnik, *How does pain arise? Pain neurophysiology for beginners*, Polish Palliative Medicine, vol. 2, no. 1, 2003.

and later also with physiotherapists. Rapid reporting of your child's pain makes it possible to act accordingly and prevent it from becoming too intense.

When the baby is lying down and resting, the acute pain is relatively manageable with medication. Pain that occurs in movement, i.e. also during exercise during physical therapy, is more difficult to relieve due to the mechanism of its formation. Although pain can be difficult to avoid, we are able to help your child cope better with it. In the process of recovery, learning new skills, and exercising with physical therapy, pain is completely normal. However, if you are concerned that your child is experiencing pain or you feel the pain is too strong, talk to your physical therapist or doctor about it.

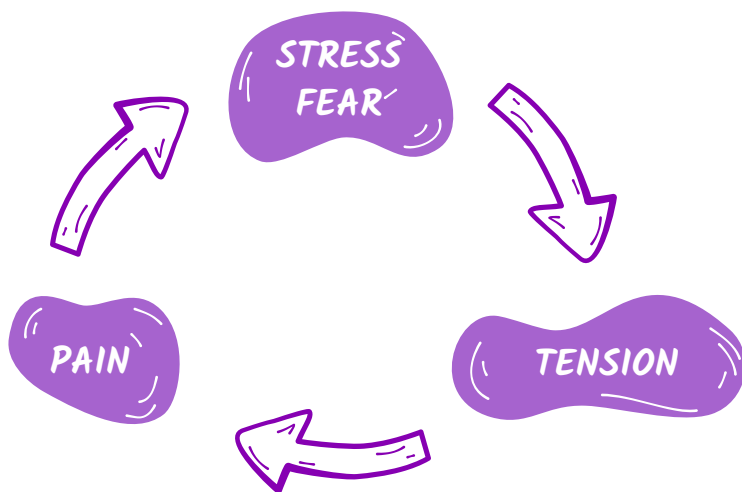


PAIN AND THE FEAR OF PAIN

Pain has three aspects: unpleasant sensations in the body, our emotional response to this discomfort, and the thoughts it causes. In the face of severe, repeated pain, it may lead to a depressed mood, nervousness or rapid changes in mood. There may also be anger, outbursts of anger, tearfulness, and a sense of powerlessness or helplessness. Above all, however, what is associated with pain is the fear that arises - of places and people associated with discomfort in the body, as well as the fear of pain. The child becomes afraid of activities he remembers as painful or activities he thinks will hurt (even though they have not yet happened).

The fear of pain can arise from previous experiences, but it can also arise from what we have heard from others, read somewhere, or saw. This is one of the reasons why it is so important to keep your child informed about everything that is going to happen. A child's imagination is a powerful tool that can produce both soothing and helpful images as well as those of the darkest nightmares. So if your child asks you questions about what will happen - answer honestly, in simple words and as much as you know. You may also not know all the names or the exact procedures - that's okay. Share what you know. Explain, but don't scare. Also, don't promise it won't hurt. The child trusts you. For him, you are a symbol of security and a person he can rely on. In such a demanding time as a hospital stay, followed by physical therapy, be honest. It is better to say "I don't know if it will hurt, but I will be with you all the time" or "yes, it will hurt a little, we will deal with this together" than to disappoint the little man's trust.

When anxiety levels are high, the body tenses more and the pain becomes stronger. On the other hand, pain may increase the sense of anxiety *. It gives the impression that this is a vicious cycle that is difficult to break. When we are stressed or anxious, we tend to focus on negative events. We create black scenarios and anticipate what might go wrong. The healing process usually takes a long time, so our minds may have many opportunities to flood us with dark thoughts. This again leads to tensions in the body, thereby intensifying the sensation of pain. Ultimately, a situation may arise where a person becomes scared just thinking about activities that have the potential to cause pain, thus avoiding



The "stress - tension - pain" cycle

or refusing to perform them. Then you should focus on taming this fear and working with it so that it gradually becomes smaller and does not hinder functioning. You may find the strategies and exercises described later in this guide to help. In addition to emotional support, it is also good to discuss all your child's doubts, answer his questions, explain he they needs to exercise regularly and what effects he can expect. If the anxiety persists and hinders everyday functioning, it is worth consulting a psychologist or psychotherapist.

* You can read more about this issue in: Ochsner K., Ludlow D. et al (2006), *Neural correlates of individual differences in pain-related fear and anxiety*, Pain v. 120, 1-2, 69-77.

SUPPORTING STRATEGIES

Focusing on your pain and breaking it down into its prime factors can prove to be an effective strategy for chronic pain. Usually, however, when pain occurs after surgery or during physical therapy, it will be more helpful to distract or shift your attention to areas of the body that are pain-free. Many people act so intuitively and in order to minimize the patient's pain, they talk to them on various topics, talk to them, and ask about more or less important issues. A person focused on answering shifts his attention from the parts affected by pain to what is happening around him. Involving children in play works in the same way. These are not golden tips for pain relief, of course, but tips that can help. The pain will arise, it will be felt. However, it may be less severe.

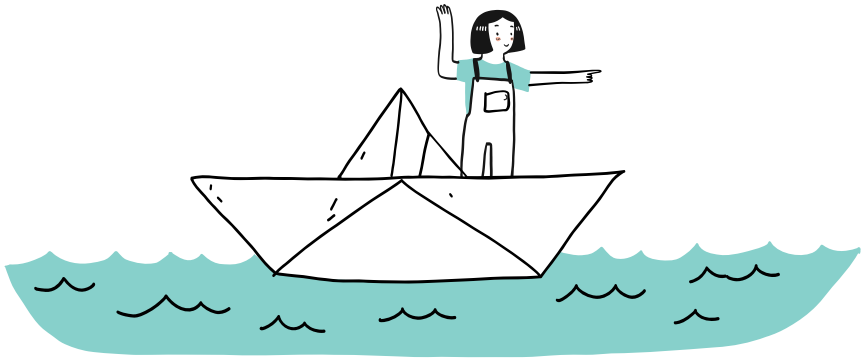
Sometimes it is best to accept that the pain will come at some point. However, this task is not the easiest one, because we want our child to live without pain the most in the world. So how do you accept it? How can you help your child come to terms with the time when he will be in pain every now and then?

Acceptance is a process. Most often it is impossible to accept a difficult situation overnight. It requires a bit of effort, a change of view and thinking about the circumstances. Moreover, acceptance is not about surrendering and remaining passively in what is disturbing and hurting. It's more like asking yourself, "Okay, it's hard. It will continue to do so for a while. What can I do to help my child and myself get through this period?"

LET'S STRENGTHEN THE SENSE OF AGENCY

Sometimes parents try to organize their child's time and space so that there is not much room for independent choices. In a situation where we have little influence, the ability to make even small decisions about ourselves can improve our well-being and increase the sense of agency, and thus translate into better cooperation with caregivers or medical staff. A child who feels that he can decide for himself and control certain aspects of his life is more likely to take up activities imposed on him by adults, because he does not have to fight to be independent. This ability to control a part of life can bring a greater sense of security and peace to everyday functioning.

It is worth encouraging your child to make decisions in situations in which he can do so. Let him influence what you wear, which book you will read before going to bed (or maybe none), how you will spend the afternoon together, etc. in such a way that the child can have some degree of control over what will happen.



LET'S EXPLAIN

It may be helpful to explain to your child why all medical interventions are so important and necessary. Sometimes it seems to us that if we know what surgery and physical therapy are for, the child is also aware of it. Sometimes it is so, and other times you have to explain the details to him and check with him what he already knows, what he is guessing, and what he imagines in a completely different way than it will be in reality. Below are some examples of questions that seem obvious from our adult perspective.



LET'S FOLLOW THE PROGRESS

The period of preparation for surgery is a good time to discuss the changes that will occur in the treatment process. What will change? What will the child be able to do? What will it not be able to do for a while? How can separation from family and friends be resolved? Being armed with knowledge from doctors and physiotherapists, it is worth drawing out the goals that the child will achieve on the way to greater efficiency. It can be a drawing showing what it was like before the surgery, what the progress of the treatment will look like and what the end result will be. The drawing can also take the form of a ladder on which you write down your goals and with each completed stage the child will mark how he climbs it higher and higher to the top. It is worth making such a schedule in consultation with physiotherapists so that the goals set are realistic and achievable. Setting the bar too high will discourage you rather than keep your child motivated. So it is better to set more points to achieve, but simpler than a few so ambitious that it will be difficult for a child to achieve them.

You can simply write out or discuss the next stages of treatment with older children. However, I encourage you to create such a plan on a piece of paper in addition to the talks - in moments of doubt it will be something to come back to and check what the progress looks like and how far away you are. For this, it is also worth taking photos. We don't see any progress overnight. They seem to be small and meaningless. However, when we compare what it was like immediately after the surgery with how it is a few weeks later, the effects can be a positive surprise and motivate you to continue working.

Remember also to celebrate each success properly. Celebrate the next achieved goals by doing something nice together, sending photos to the family (after agreeing on it with the child) or creating a commemorative album.



LADDER OF PROGRESS

LET'S EVALUATE THE PAIN SCALE

Pain can take many forms. It is not uniform or homogeneous. It may, for example, be stabbing, dull, burning or tearing. It comes and goes. It intensifies and softens. Regardless of how it is felt, it is a subjective and individual experience. However, knowing our child, how he reacts to stimuli and what his pain threshold is, we can help ourselves with the right tools to check how and how strongly this pain is felt by him.

The easiest way to control how pain changes over time is to use a smiley scale or (for older people) a numerical scale with values from 1 to 10, where 1 is no pain and 10 is unbearable pain. By checking how the child feels pain at any given time on a scale, we can relate it to previous feelings, and thus have more detailed information about how pain changes over time.



0
no pain



2
mild pain



4
moderate pain



6
severe pain



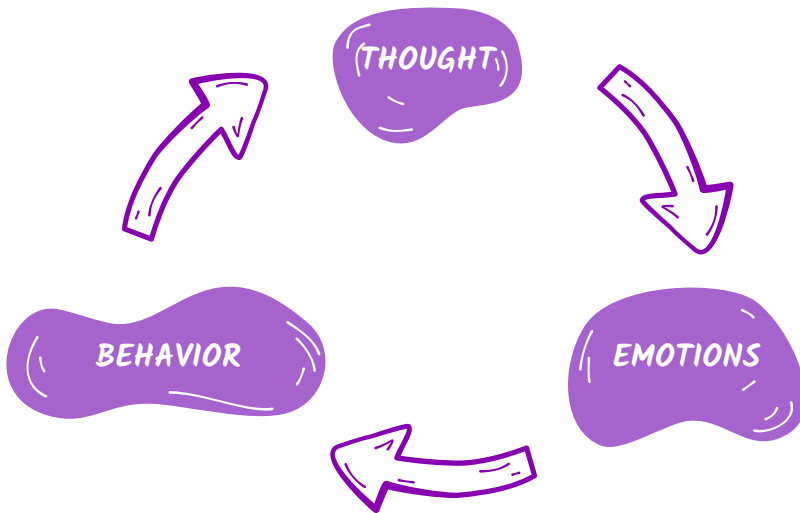
8
very severe pain



10
unbearable pain

A FAN OF EMOTIONS, A FLOW OF THOUGHTS

Thoughts, emotions, and behaviors influence each other. While it is difficult for us to control our emotions (and even better to allow ourselves to feel everyone that arises), we have a greater influence on our thoughts and behavior. We can modify the images appearing in our heads and consciously change our behavior. The change in these areas will have an impact on how we feel.



Experiencing pain may translate into thoughts that appear - about yourself, your situation, family and the world. In short, pain can change the way you look at life, and most often the change is negative. In children and adolescents, critical thoughts about themselves come to the fore, such as "I can't cope", "I'm good for nothing", "I have only problems", "If I wasn't there, everyone would have a better life". Such messages can be painful and frightening for loved ones. There is an impulse to deny it, perhaps also to add that the child should stop telling such nonsense. Behind this, concern for the child and fear for his well-being may lead to the fact that, as caregivers, we do not know how to behave in such moments.

LET'S TAKE CARE OF THE CHILD'S EMOTIONS

Facing someone else's pain - not only the physical pain, but also the emotional pain - is a difficult and stressful experience. In ourselves then a wave of emotions and various thoughts appears. However, if we want to support the child at this time, let's focus on his emotions, feelings and words. Let us not contradict them and do not underestimate these experiences. They are all important and give us a lot of knowledge about what our child is experiencing at this moment and what he needs. It is an amazing moment when we can get closer to him and deepen our mutual ties thanks to careful listening, understanding and taking advice. It would seem that the most effective and yielding the best results is to try to solve the problems as quickly as possible. Being close to you, hugging (when the child wants it), reassuring that we are in the process with the child and for the child, may not look spectacular, but they are often quite enough. Closeness, support, understanding of experienced difficulties carry value in themselves and help to survive crisis situations.

LET'S ALLOW TEARS

When your child cries, let's not hold back those tears. When something hurts, it's natural for them to come up. Embarrassing your child by saying that they're already big and shouldn't cry or that they have no reason to cry doesn't help them calm down, but only increases their sense of misunderstanding. Sometimes there are good intentions behind trying to stop the crying - the idea that the baby will calm down faster if it doesn't cry. However, those emotions will continue in the child. Even if he stops crying, it doesn't mean he's calmed down; rather, it means he's trying to suppress his feelings. They will come out sooner or later anyway.

Another point is that adults find it difficult to cry and experience pain. A child's cry, tears, anger or sadness trigger a cascade of emotions within themselves, so they try to keep the child from tearing. *To effectively support other people emotionally, you first need to recognize, accept, and take care of your emotions.* It is worth taking care of them, noticing them and naming them (even in our minds), because thanks to this we get in touch with each other and it is easier for us to separate the emotions of the child from ours.

After intense emotions, even when the pain has subsided, a person may begin to shake. It is a natural reaction to strong emotions and difficult events. When the tension goes away, it can manifest as a trembling of the body which relaxes at this point. Then it is worth providing the child with a sense of security, hugging them, taking them on our laps, but not holding back these reactions from the body. Thanks to this, the child will regulate his emotions faster. Why doesn't saying "calm down", "there's nothing to be afraid of", "stop crying anymore" help? Because overstimulation is not the child's choice. If it could choose, it would certainly prefer to feel calm and relaxed. However, he does not know how to calm down, or he does not have the right tools or resources to adjust at any given moment. Or the situation is so demanding that all known strategies have failed.



LET'S GET TO KNOW THE STRESSORS

In order to support a child more effectively, it is worth learning about the stressors that cause excessive tension, stress, crying, anger or withdrawal from the situation in the child. For some people it may be a discovery, for others it is quite obvious that certain behaviors of parents are a serious stressor for their children. To be aware of this, it is good to start looking at what causes strong and unpleasant emotions, states, and difficult behaviors. By getting to know ourselves better, we have the opportunity not only to help the child more effectively, but also, and perhaps above all, to support ourselves. A tired, tense, sleepy and often misunderstood parent will not be able to take care of a child as he would like to. And if he can do it, it is most often at the expense of himself, which affects not only well-being, but also physical health.

A stressor is anything that disrupts the internal balance needed for the body to cope with the challenges of the outside world and meet its needs. In short, a stressor is something that drains us of energy and triggers an alarm reaction. Whether something becomes a stressor for a particular person depends on how he reacts, what his previous experiences are, how the potential stressor affects him and the circumstances in which he is found.



SOURCES OF STRESSORS

Sources of stress are most often interrelated and occur simultaneously. For ease of reference, we can classify them into one of five areas that they affect and are affected by.

ISSUE	EXAMPLES OF STRESSORS
Biological	Lack of sleep or not enough sleep, noise, too bright light, olfactory stimuli (e.g., too intense or unpleasant), tactile stimuli (too much touch, too little touch, uncomfortable sitting when you have to spend a lot of time somewhere), allergens, too high or too low an ambient temperature, not enough exercise, difficulty in moving, inadequate diet.
Emotional	Emotions themselves can become stressors - both unpleasant ones, such as anger or fear, as well as pleasant ones, such as excitement. Strong emotions significantly deplete energy reserves in children and adults. Intense emotions with positive overtones can overwhelm a child.
Cognitive	Too much information given at once, information that is too difficult, requiring the child to stay focused for a period of time that exceeds the child's ability to focus, difficulty processing auditory and/or visual stimuli.
Social	Conflicts with other people, peer and/or domestic violence (being a victim but also a witness), excessive parental expectations of the child, intimidating the child, threatening the child, shaming the child, criticizing the child's choices, trying to interfere with the child's social life when the child does not require adult support.
Prosocial	Taking responsibility for other people's emotions and needs, demanding and expecting to put other people's needs above one's own, expecting the child to take care of the parent and their emotions, having to deal with other people's strong emotions without being able to get support for oneself, requiring the child to meet other people's expectations.

SELF-REGULATION AND SELF-CONTROL

By being aware of the stressors in our lives and in our child's life, we can help ourselves and our child to regulate emotions rather than suppress them. In order to achieve balance and calm, it is important to learn self-regulation. However, to understand what it is, it is helpful to compare it to self-control.

Both self-regulation and self-control are very important in everyone's life. Depending on the situation, we may need one or the other. Self-regulation is the ability to return to balance - to a state that is desired by us, such as peace. It is possible when we know our stressors, how we react to them and how they affect us. At the same time we are aware of what takes energy away from us and what adds it, so we know what to do to have more energy. Self-regulation helps us to find ourselves in any situation, even a difficult one, and at the same time to take care of ourselves and our resources. We learn it just like any other skill. Children need the support and adult involvement to develop this skill, to learn ways to cope with stress, stressors, and regain balance.

If children hear too often that they should calm down immediately and stop despairing, they will practice self-control instead of self-regulation. Self-control works like the brake on a car - when we press it hard, we come to an abrupt stop. However, this is not how we learn to regulate our emotions, but to inhibit them or hide them from others and sometimes even from ourselves. With self-control, we are able to stop ourselves from doing something we really want to do, such as eating an entire chocolate cream pie overnight. In this case, this skill is necessary, useful, and even beneficial to our health. However, if we overuse this self-control, and thereby continue to inhibit our emotional reactions, suppress our thoughts, or control our feelings, our body can become exhausted, just as the parts in a car that we repeatedly and constantly accelerate and then abruptly stop can become worn out.

Stuart Shanker, creator of the self-reg* method, encourages us to use five steps to help you recognize and deal with stressors, thereby teaching you self-regulation:

1. Read the signals and reformulate the behavior.

A child who is unwell or in pain may not behave in a way that is pleasant for the parent. In addition to the signals characteristic of any child who is uncomfortable, such as crying or facial expressions indicating pain, the child may reject the parent's closeness, may say unkind things to the parent, accuse the parent of his or her condition, curse the parent, or drive the child from the room. In this situation, it is important not to perceive these words as an attack on yourself, not to accuse the child of being ungrateful ("I do so much for you, and you behave like this?"), not to be offended. It is nothing pleasant or easy to hear harsh words from your child, but keep in mind that your child feels pain, and maybe also fear, grief or anger, it will be easier to see the situation from your child's perspective and how difficult it is for them.

In an act of helplessness and powerlessness, people often do not behave rationally. When they feel pain or have a sense of injustice and suffer not only physically but emotionally as well, the temptation may arise for people around them to suffer the same way. And because the parent is closest to the child and is the person the child trusts, a torrent of words, emotions, and hurtful behaviors fall on them. If you can see behind these behaviors a person who needs to be understood and acknowledged for his or her predicament, it will be easier for you to be supportive and understanding.

2. Identify stressors.

After surgery, the obvious stressors are the pain and discomfort associated with a cast or difficulty finding a comfortable position. However, it is worth looking

* For a more in-depth look at the topic of self-regulation, check out Stuart Shanker's book "Self-reg. How to help your child (and yourself) not be stressed and live life to its fullest potential".

at the situation more broadly and considering whether there is something else that is causing you or your child stress. Perhaps it's machines beeping too loudly, lights too bright, air too dry, room temperature too hot, etc.

3. Reduce stressors.

Once you realize what is a stressor for you and your child, try to eliminate the one that is within your control. Not only will this make you and your child more comfortable, but it will also give you a sense of empowerment.

4. Become aware of when your child and you are stressed.

This point may seem obvious. Who of us doesn't know when we are stressed? But it turns out that even severe stress can be habitual and you may not realize that you are stuck in a constant state of tension and arousal. Becoming aware of the source of your increased tension can be a time-consuming process. Focus on your body and notice which parts are relaxed and which are hard and tense, how you breathe, how your heart beats, whether your skin is warm and dry or constantly moist from stress. At what times of the day or in what situations do the sensations from the body change?

5. Figure out what helps your child and you calm down, relax, and renew your energy reserves.

You and your child may have completely different ways of coping with stress, calming down and renewing energy. What works for you may not work for your child, and vice versa. It is important to observe and find out what works best for you and choose methods that will produce the best long-term results.

NON-PHARMACOLOGICAL METHODS OF PAIN MANAGEMENT

Chances are that medication alone will be enough and you don't need to do anything else. Still, it is worth knowing and implementing other ways of dealing with pain. In life we have different situations and we can't always use pharmacology, so these skills will probably come in handy many times - even during a standard blood sample collection or dealing with pain after a fall.

The advantage of non-pharmacological methods of pain management is that they can be applied at any time and you don't have to be a specialist in it. Any of us can master some helpful ways and thus help ourselves or loved ones, especially our children. The key thing, however, is that you need to know them beforehand and learn how to apply them for them to be effective. Trying to implement them during painful or stressful situations is more likely to fail, because when faced with difficulties, there is no more time or resources to learn new skills. That's when it's time to take deliberate action.

Non-pharmacological interventions help manage pain because they relieve it and make it more manageable. They minimize anxiety and give you a sense of control over the situation, your behavior and feelings. They are also a great way for caregivers to reduce feelings of helplessness or powerlessness - they are tools that can be used in difficult moments and actively support the child. By aiming to reduce perceived fear of medical procedures or interventions, we increase the chances that the child will have better experiences and memories of being in a medical facility.

For non-pharmacological methods of pain relief to be effective:

- the child must know them beforehand and have positive associations with them;
- we need to have contact with the child - if the child is too upset and crying, he/she will not hear us and will not follow the instructions - then the most important thing is to make the child feel safe and comfortable;
- the pain should be mild to moderate.

WHAT CAN BE HELPFUL IN RELIEVING YOUR CHILD'S PAIN?

1. **Preparing your child for what will happen** – through conversation, playing, and reading books on the topic.
2. **Closeness** of the parent / guardian.
3. **Physical touch** – hugging, stroking, holding a hand, rocking, massaging.
4. **Accepting the child's emotions and not denying them** – permission to cry, anger or showing displeasure. When caring for your child's emotions, remember that you have a right to them, too. If you feel that you are having a hard time dealing with them, talk to a close adult or a professional. It's important not to be alone with your emotions, but to share them with another person. Your child may see that you are crying, feeling angry, sad or helpless. By watching you, he/she learns how to cope in such moments. Just remember not to make your child responsible for making you feel better. That is an adult's job.
5. **Distraction** – by talking about a nice topic and asking the child about some things (e.g., hobbies, best vacation memory, favourite animals or movies), listening to music, playing/watching movies on a tablet or a phone. Watching movies on a tablet or phone. (Of course, we all know and we are aware that children should spend as little time in front of the screens as possible). The time after surgery or during physical therapy is, however, unique and if then fairy tales or favorite music videos help the child to go through this process more calmly, it is worth taking advantage of them.
6. **As much as possible, give choices and give your child control** – let them choose what to eat, what to wear, what to play with, which puzzles to put together.
7. **Breathing techniques.**
8. **Relaxation and imagery techniques.**
9. **Removing objects associated with pain from the child's field of vision** (e.g. needles, syringes). If it is possible and helpful – out of the parent's field of view.

TOUCH

Each of us has an individual pain threshold. How you feel pain depends on the sensitivity of your nervous system, previous experiences, emotions, personality, and even your lifestyle (e.g. whether or not you get enough sleep). What is painless for some may already be unpleasant for others. In the same way, what for some people is a pleasant stroking, for someone else may be annoying and perceived more as a tickle that we want to escape from. Many factors influence how we experience pain. One of them is how we have experienced it so far, how many such situations have occurred, and how our surroundings have reacted to our discomfort.

Since pain affects the mind as well as the body, psychological interactions can alleviate it by changing the way we perceive it. However, if you have a strong belief that the pain is uncontrollable and you can't handle it, you may feel the bodily sensations more acutely. This is why it is important to check what thoughts and beliefs we and our children have about pain, the hospital, surgery, etc. These unfavorable thoughts and beliefs can be worked on to become less threatening and more constructive.

If you have been in pain for a while, your brain may have "reprogrammed" itself to receive pain signals even when they are no longer being sent. Long-term pain may become fixed, you may become overly sensitive to touch, and you may develop a fear of touch, hugging, or tenderness. This aversion or fear of physical contact may remain even long after the pain has ended. Therefore, it is worth acting in advance and helping the child in such a way that touch and closeness to another person is still associated with warmth and safety, and not with danger. and safety rather than danger.

Touch is one of the first senses that develops in humans. This happens while still in the prenatal period. After birth, it is in the caregiver's touch that the baby finds comfort. Tenderness, cuddling, stroking and rocking help children regulate their emotions, relieve stress, tension and pain. This is why it is so important for caregivers to be with their child at the doctor's or nurse's office. Holding your child's hand, hugging them, or holding them in your lap may not take away the pain in 100%, but it will make it easier to bear.

After an exhausting day, if circumstances allow it, it is also worth taking care of yourself and ask a loved one to massage your back or get a professional massage. Sometimes after a day of caring for a child, when the child requires us to carry, cuddle and comfort him or her, and when the child constantly touches us, pulls at our hand, requires contact - a massage may seem like the last thing we want. Rather, there is a tendency to cut ourselves off from everything and for no one to want anything from us anymore, to say nothing, and certainly not to touch us. If all you want to do is wrap yourself up tightly in a comforter and go to sleep clutching a pillow, a massage by another person can be helpful. It helps you to get in touch with yourself, your emotions and your needs as it refocuses your attention on yourself and what is going on inside you. Stronger, structured touch helps to regulate one's own emotions, reduce muscle and emotional tension.

If you don't have that opportunity to have someone massage you, you can try relaxing your feet by massaging them on a hard ball (such as a tennis ball). See what changes in you after such a good foot massage. Maybe it will be more peacefulness? Or relief? Maybe a surge of energy? Or maybe you won't notice any change at all? All of these reactions are fine. What works for others may not work for you, and vice versa. But try different methods to see what works best for you.

SLEEP

Sleep is a physiological need of our body. Although it is essential for proper functioning, it is easy to have deficiencies in this area. After surgery with general anesthesia, sleep-wake rhythms and sleep patterns may be disrupted, resulting in nighttime awakenings and difficulty falling asleep again. However, this is usually temporary and should pass on its own within two to three weeks.

Fatigue due to sleep difficulties contributes to lower mood, increased irritability, crying, as well as increased sensory distress, including pain. Although it may be difficult at first, it is a good idea to make sure that your child falls asleep at the same time in the evening. Keeping an eye on your child's nap times is also an important part of getting a good night's sleep. A period of intense pain usually involves many life changes, so it is helpful if the schedule is as predictable as possible.

Outdoor activity also plays an important role in a healthy, restorative sleep. If it is not possible to exercise in a playground or park, it is worth ensuring that the child has, for example, a walk in a stroller. Being outside and using sunlight (even on a cloudy day) regulates the release of melatonin, which affects our circadian rhythm.

Two hours before bedtime, it is worth giving up using telephones, TV and computers. When blue light from screens reaches the brain, it acts like sunlight. This means that the brain is informed that it is daytime and melatonin production is delayed, keeping the baby awake. In the evening hours, consider dimming the lights and buying bulbs that emit warm orange light that is not stimulating. If your child is used to watching before bedtime, you can gradually shift the hours when we show them cartoons and switch the screens to reading books or listening to audiobooks together.



RELAX! BUT HOW?



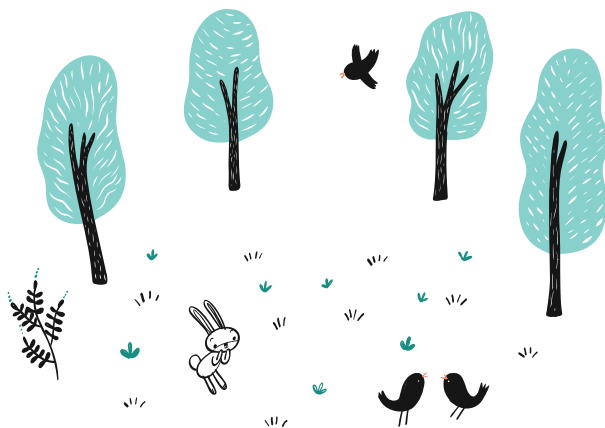
Relaxation is a type of rest that reduces the unpleasant feeling of tension and agitation. By entering a state of relaxation, we relax the body, deepen and slow down the breathing, and calm the mind. There is ample evidence that relaxation and mindfulness can help people with health problems. Thanks to relaxation techniques, we can reduce the level of pain, stress and improve concentration. So let's look at how you can influence your feelings by learning how to relax your body and mind.

Relaxation exercises often involve breathing and imagining techniques, gradually relaxing muscle groups, focusing on calming images, colors or sounds. For some people it can be relaxing to engage in manual tasks such as drawing, painting, crocheting, etc. They help shift your attention from troublesome thoughts to what you are doing, thereby reducing the feeling of tension and overload.



One of the relaxation techniques is guided meditation, which involves following the directions in the video. During such exercises, we usually imagine moving to a quiet, safe place, which allows us to relax and regulate our breathing. Many recordings with pleasant sounds of nature and the soothing voice of the teacher can be found on popular social networks. With children in mind, the program "Mindfulness and the peace of the frog" was created by Eline Snell. The book also comes with recordings that you just need to turn on and follow the directions. The exercises are adapted to the age and difficulties experienced by the child. It is also worth relaxing with the whole family. You can never have too many quiet moments and a relaxed body!

Remember, however, that the techniques described here take time to work. A one-time breathing or relaxation exercise is not enough. In order to master them, and thus be able to apply them in difficult times, we need to learn them - just like any other skill.



SAMPLE EXERCISES AND HELPFUL ACTIVITIES FOR PAIN RELIEF



Breathing with your hand on your stomach

Get comfortable, put your hand on your stomach, close your eyes. As you breathe at your own pace, feel your belly ripple as you inhale and exhale, feel it rise and fall.

If the baby's hands are immobilized, you can place a small stuffed animal on its belly and watch it rise and fall as you breathe.

This exercise allows you to calm down, shift your attention to your moving stomach. It works well before going to bed as a calming and sleeping technique.



*Relaxing the body from head to toes / Jacobson training**

The exercise involves contracting and then relaxing individual muscle groups. As the workouts are done each day, a person develops the ability to relax at any time. The ability to tension and relax muscles increases the sense of control, which is especially important in situations where little depends on us. For younger children, Barbara Kaja has developed a slightly revised and easier version of

* Detailed instructions can be found under "Progressive Muscle Relaxation".

Jacobson's training. It is a game of "strong" and "weak". The moment we are "strong" - we tense our muscles - and then we relax them, becoming "weak".

Children perform the exercise lying down. The contraction and relaxation of muscles begins with the arms - first the right, then the left. Then the child clenches his hand on the block, ball or soft toy. When he relaxes it, the focus should be on the feeling relieved. Then the legs are tightened and released (first one, then the other). Then we draw the child's attention to the stomach and ask him to fill it with air like a balloon, then let it out, feeling relaxed and relieved. Later, we ask the child to press his head against the pillow he is lying on, then relax his muscles and let his head return to its previous position. Then we tell the child to imagine that he is angry because someone has damaged his building made out of bricks. We ask them to wrinkle their forehead as much as possible in a gesture of dissatisfaction, then relax it and let the muscles rest and smooth out. Later, the child squeezes his eyes shut as tightly as he can, and then relaxes them. Finally, the child tightens his lips as if to say "oh", and then relaxes his lips.



"My safe place"

It is a relaxation technique that involves imagining a place (real or imaginary) where we feel completely safe, at ease and relaxed. There are plenty of instructions for this exercise. However, it's best to come up with your own, tailored to the child.

An example instruction might read as follows:

Lie down comfortably. Close your eyes. Concentrate on your breathing for a moment - how the air flows in and out of your nose. What's the temperature of this air? Is it warm or cool? When is it warm? And when is it cool? Where do you feel the air?

Now imagine a place where you feel safe and at ease. This may be a place you already know. But it can also be a place that you dream about, imagine, that you've seen in a book, an illustration, or a movie.

Pay attention to what this place is like. What colors are there? Are there any sounds? Are there any animals? Or maybe there are some plants? Maybe you can smell something? Or maybe you feel something on your body? Is it warm there or not? Do you feel anything under your feet? On your hands? On the face?

What is the name of your safe place? Remember this image as best you can, these pleasant feelings. This way you will be able to come back to this place in your imagination whenever you need it. Stay in this safe, peaceful place for a moment longer. And when you're ready, when you want to, open your eyes and come back to here and now.

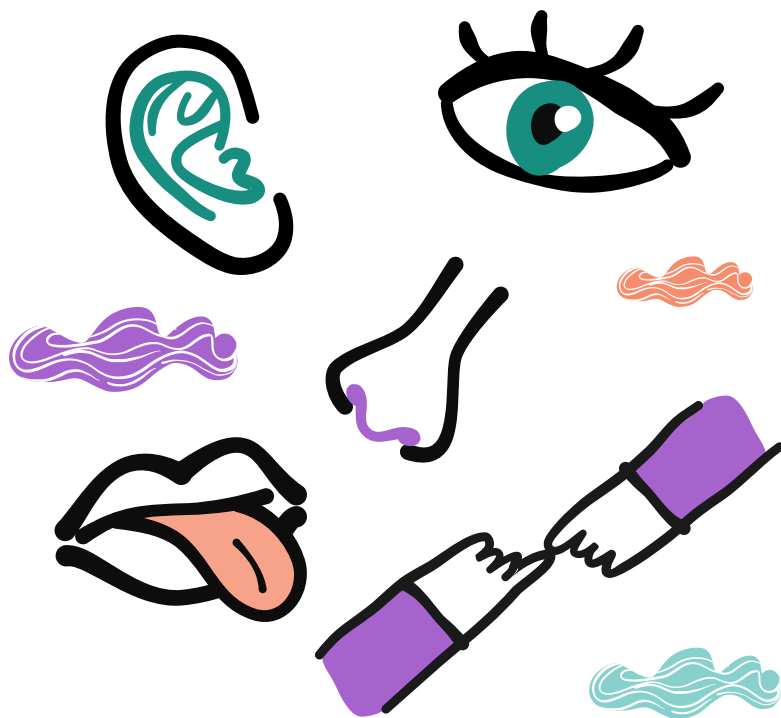


5, 4, 3, 2, 1

It is a simple and quick exercise to help you calm down and get in touch with yourself and your surroundings. Paying attention to as many stimuli as possible has the power to relieve pain because it reduces it to one (not the only) of the many sense experiences that are taking place right now.

The exercise is to:

- name 5 things that the child sees around him,
- name 4 things he can hear
- name 3 things he can touch,
- name 2 things he can smell with his nose,
- name 1 thing he can taste.



Breath 1:2

It is often heard that we should breathe. This is very good advice because the breath is always with us. However, we rarely know how to breathe in such a way that it will have the desired effect, such as reducing pain, relaxing tense muscles or reducing anxiety. The tendency is to take deep breaths, which can lead to hyperventilation and dizziness. To avoid this, exhale should last twice as much. You can help yourself by counting, e.g. inhale to 3, and exhale to 6. You need to check which proportions will be the most effective for you and your child.



Releasing bubbles

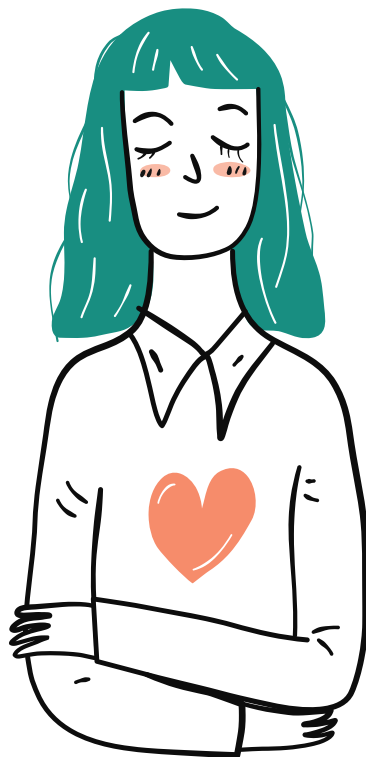
This is a helpful and enjoyable activity as the exhalation automatically becomes longer as the baby tries to create a nice big bubble. Additionally, it shifts your attention to an external object, distracting you from the pain you feel. When we do not have bubbles at hand, you can use your imagination and, for example, blow out the imaginary candles on the cake.



BE GOOD FOR YOURSELF

It is easy for us to judge and criticize ourselves. Children also quickly understand this way of reacting. Focusing primarily on what did not work out and what could have been done better damages our motivation, causes frustration and discourages us from further attempts (according to the principle: why keep trying, when it will definitely not work out anyway). Instead of over-focusing on what else needs to be improved (there will always be something like this), show your child what they can already do and what progress they have made. It will be useful to take photos or record short videos, which you can later compare with each other. Noticing positive changes encourages further action. The child sees that his efforts make sense and each day brings him closer to his goal, even though he still feels pain at times.

It is worth remembering that it is not about being only positive and exuding optimism. Jamming our difficult emotions and trying to replace them with positive thinking does not necessarily bring benefits, they can even be harmful. Therefore, just as you support your child in their emotions, crying, screaming and anger, remember that you, too, have the right to feel and experience. It may be that all you want to do is scream out, throw the pillow, and cry out of powerlessness or fatigue. What you feel is important. These difficult and painful emotions are just as important as the pleasant ones. They carry with them valuable information about what you need and what you miss so much, and what is currently impossible to fulfill. They also often signal that your boundaries have been



breached. It's hard to smile at times like this and pretend everything is fine. Most parents want to protect their children from the emotions they experience. They don't want to worry them and disturb them with their sadness, anger or disappointment. However, there is nothing wrong with showing your emotions around your baby. As long as you do not hold them responsible for solving the problems and act in a violent manner, the child may see you cry or shout into space. If you explain to him that you feel certain emotions at this point, it will be a signal to him that everyone has a right to different states and emotions. You can talk about them, you can deal with them and they are not a threat.

DIFFICULT ROLE

Being a parent is associated with warmth, caring and eliminating pain from a child's life. In the postoperative period, when it's time for physical therapy, it may be necessary to exercise with your baby at home as well. For a child, the exercises will be associated with some discomfort and even pain.

Of course, looking at the situation from a broader perspective, we know that by scrupulously following the recommendations of doctors and physiotherapists, we will contribute to the fact that the child will be fitter and will not experience pain. However, getting to this place will require a lot of work, patience, and the ability to deal with your own emotions.

Watching a child feel pain, let alone making him feel pain more, is not a pleasure. There may be concerns about the quality of the parent-child relationship - whether the child will hold a grudge against his / her guardian - or doubts about the sense of the actions taken, and a number of critical thoughts. Sometimes, especially with younger children, a situation may arise in which the child begins to avoid the person with whom they are performing painful exercises. Therefore, whenever possible, try to delegate the most demanding exercises to other, more distant family members or trusted friends. Doing so should ease the child's emotional discomfort. Unfortunately, it is not always possible for you to be replaced. This does not mean that the chances of a good, deep relationship between you are already crossed out.

When it is up to you to train with your child, make a clear distinction between the time when you do the exercises and the time when you are only a parent again. Then spend your time as usual: hugging, having fun together, reading books or solving puzzles. It is important to have lots of physical contact during this time which will be pleasant for the baby. Thanks to this, it will not start to associate your touch only with the demanding time of exercise, and it will still be a source of safety and relief.

LET YOURSELF HELP

Supporting a child in the perioperative period is a difficult task that requires a lot of patience, mindfulness and empathy. When focusing on helping a child, we sometimes forget that we are equally important and that we do not have limitless resources. The parents' resourcefulness and independence can inspire admiration from those around them, while lulling the vigilance needed to recognize that mom or dad may also need support and care. By caring for your baby most of the day, you can easily burn out. So remember that you are just as important as your child and you also deserve to be cared for. If possible, use the help of others so that the burden of duties and responsibilities does not rest solely on your shoulders. Together, it's easier to cope with challenges.

If you need professional help in dealing with the situation, remember that you can always count on the help of the entire Paley European Institute team.

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Notes

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