For the Parents

This pamphlet has been designed to help you, the parent. It provides suggestions to help your child keep growing and developing at a normal pace during his or her immobilization. Always obtain guidelines from your child’s doctor as to what activities and movement should be avoided. There are several reasons a child may be immobilized. These include traction for a congenital problem or as result of an accident, long-term bed rest in the hospital or at home, and the wearing of a non-weight-bearing cast. Why is play especially important to the immobilized child?

Play can...
- relieve the stress caused by immobility.
- allow for continued growth and development physically, mentally, and emotionally.
- allow you, as a parent, to clear up any misunderstandings that your child has about medical care.
- encourage sharing of feelings.
- provide choices for the child, to increase his feeling of control.
- provide “well role,” as child sees he can still succeed.
- provide for family support and involvement.
- provide an escape from pain and depression.
- help to minimize any possible physical side effects due to decreased activity.

Tips for Playtime

Let the child know the rules for playtime in advance; praise them when they remember and follows the rules. Smaller, simple toys are best. If your child is wearing a cast, avoid games with small pieces which might get into the cast.

- Play which lets your child express their feelings and make choices is best (for example, arts and crafts or playdough).
- Include games that allow for active, physical involvement to the degree the child is able.
- Encourage as much independence in play as possible; only play FOR your child if they can’t play for themselves. If you do need to play for your child, make the game or project theirs by giving them choices and by talking about “their picture” or “their man.”
- Immobilized children get tired quickly, so play should be changed often.
- Toys lose value if left lying around. Put them away and periodically switch out the toys available to your child.
- Supply a good steady work surface – a bed tray will do nicely if an over-bed table is not available.
- Help brothers and sisters join in play by: 1) selecting activities that encourage children to play together (like blocks, balls, and cars), 2) using lots of praise when children play together well, and 3) keeping things fun and lighthearted.

Tips for the Rest of the Day

- Have things around that are interesting for your child to look at, hear and touch. Change these routinely. Some suggestions are...
  - colorful posters and magazine pictures.
  - your child’s artwork and projects.
  - tapes and records.
  - your child’s favorite movies.
  - toys of different textures.
  - a mirror.
  - a small fish bowl.
  - plants that your child is helping care for.
  - bright mobiles or kites hung above the bed.
  - Include activities throughout the day to extend his environment. Read about far away places, watch movies about other cultures, hang travel posters around the room.
  - If your child is on bed rest, routinely move the bed within the room and/or house. This will add to your child’s view.
  - Plan a schedule for the day and stick to it. This will provide needed structure for you and your child. Don’t forget to include time for school, exercises, family, meals and rest. When a child MUST do something, don’t give him a choice. Do make up for all the “have to’s” with LOTS of choices during playtime.
  - If your child would normally help with household chores, find some for him to help with while immobilized. This will help him feel like he is still an important part of the family. Some suggestions are cutting and sorting coupons, sorting socks, and answering the telephone. Encourage your child to keep a diary and/or scrapbook during this time.
  - If you are providing physical, occupational or respiratory therapy for your child, make this as much like play for him as possible. (For example, if your child is needing to take deep breaths – blow bubbles; if your child is needing range of motion – play Simon Says.) This will, hopefully, make the exercise time more enjoyable for you and your child.

Activities to Help Your Child Continue to Grow

Medical Experiences
- Doctor play – use a play medical kit (Fisher Price makes a good one), bandages, play medicine (water and food coloring), plaster of paris “casts.”
- Hospital mobiles (use coat hangers to hang the pictures of items).
- Medical collages or murals.
- Doctor and nurse drawings or paintings.
- Tongue depressor buildings (popsicle sticks make a good substitution).

Separation from School and Friends
- Letters and tapes to class.
- Friend drawings (tape these up in her room).
- Telephone calls to teachers and classmates.
- “Pretend calls” with play telephone.
- Taped message from school (talk to his teacher).

Body Image
- Mirror play.
- Hand and foot prints.
- Total body drawings.
- Self-portraits
- “I am...” or “Very Important Person” posters.
- A story about their medical experiences.

Activities to Help Your Child Share Feelings About...

Physically
(remember, ask your doctor what your child should not do)
- Ball throwing or kicking.
- Punching bags or pillows.
- Throwing velcro darts/playing “grip ball” (velcro ball and shields).
- Simon Says.
- Building blocks.
- Models or sewing/stitching kits.
Socially
• Competitive or cooperative games (board games, video games)
• Group art activities (murals, teaching each other new skills).
• Dramatic or puppet play in which each child has a part.
• Family style or group eating/picnics.
• Telephone calls.
• Easy cooking activities.
• Musical games.
• Study or homework groups.

Intellectually
• Books and stories.
• Counting and color-identification games.
• Puzzles.
• Writing experiences (stories and journals).
• Magnet play or other science experiments.
• Globe or map play.
• Word and logic puzzles and games.

More Activities for Your Child
Infant
Activity centers; large wooden beads; spools on a cord; soft toys of different shapes; mobiles; music boxes; noisemakers-rattle, bells, etc.; chewing toys; squeeze toys; nesting and stacking toys; games like peek-a-boo and patty cake.

Toddler (18 months – 2 years)
Play dishes and cooking utensils; toys that open and close; sorting toys; blocks; bubbles; puzzles with large pieces; concept toys (things to teach colors, numbers, shapes, etc.)

Preschooler (3 years – 5 years)
Housekeeping and dramatic play toys; balls; blocks; large cars and trucks; art projects: tearing or cutting paper, coloring, fingerpainting; puzzles with large pieces; hand puppets; music making toys; games like Memory or Candy Land.

School-aged Child (6 years – 12 years)
Doll house and furniture; simple word and number games (crossword and word finds); “School;” construction sets (Legos, Lincoln Logs); dramatic play items: dolls, housekeeping toys, dress-up items; games like Sorry, Battleship, or Trouble; puzzles; art projects: models, collages, yam dolls, paper flowers, simple sewing/stitching sets; books; magnet boards with letters, numbers and shapes; Etch-a-Sketch or MagnaDoodle boards; water games (Waterful Wonderful, for example); hand-held video games.

Adolescent (13 years – 19 years)
Puzzles; word games; board games; card games; letter writing; books and magazines; volunteer projects (maybe taping stories for school children or helping an elderly neighbor with letter writing); make-up or hair care sets; collection/hobby sets; art projects: painting ceramics, cross-stitch, more detailed models.

More Ideas on Crafts and Games
Check your local library or bookstore. The following are some books that might prove helpful:

CREATIVE PLAY ACTIVITIES FOR CHILDREN WITH DISABILITIES: A RESOURCE BOOK FOR TEACHERS AND PARENTS, Lisa Rappaport Morris and Linda Schulz (1989, Human Kinetic Book)

AMERICAN CHILDREN’S FOLKLORE, Simon J. Bomer (1988, August House)


PAPER PLATE ANIMALS, Bee Gee Hazell (1989, Judy/Instructor)


For more information call the Child Life and Education Department at 501-364-1412

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PEC#: C0523.5.4