

Using HELP PAIN strategies with youth receiving special education, non-verbal youth, and those with cognitive or physical impairments:

- Use of **visuals** throughout treatment; visual pictures of skills, visual faces scale for pain ratings, visual coping kits/pictures of skills they use or distraction tools.
- **Reward/reinforcement** systems during treatment sessions. Being able to give clear expectations of what skills we plan to cover:
 - Making a checklist, and checking the skill off during the session to add structure and help stay on task.
 - Offering a small reward at the end of the session, or using stickers.
- Understanding that attention regulation challenges can really impact relaxation skills and engagement in skills. Being open **to adapting skills based on attention regulation challenges**.
 - For example, if a child doesn't benefit from a traditional relaxation skill like guided imagery, some ideas would be to try a walking meditation or drawing a peaceful or relaxing picture instead.
- Consider a youth's **development and cognitive abilities** when considering what skills to teach.
 - Depending on severity of the intellectual/developmental disability you may not be able to teach cognitive skills and may focus more on the behavioral skills.
- For **nonverbal** children, obtain a copy of their IEP from the school to see how the student best learns or to talk to their main instructor.
 - Does the child use assistive technology?
 - Does the child know sign language or have an interpreter?
 - Check with their teacher or their special education specialist to see what works best and how their diagnosis impacts learning.
- Consider that **caregivers are a large part of treatment** when working with youth with IDD or developmental disabilities. If possible, it is beneficial to help parents know how to help prompt their child to practice and coach them through skills at home.