

The transition from family to kindergarten is a major step in the life of all children with and without Autism Spectrum Disorder (ASD). It is often difficult for parents of children with ASD to decide between inclusion in public or private school or special education programs for kindergarten. A good strategy is to select the type of education depending on child's developmental needs and the educational resources available in their local area. Often parents of children with ASD share expectations that attending kindergarten is going to substantially improve their child's functioning - "communicate with others", "look and learn from them", "be like the others". This topic usually emerges during consulting sessions and poses important questions - Is the child ready? Are parents ready?, When, where and how to happen?, What are the benefits or disadvantages? We present two cases of a girl and a boy (3,6 years) with ASD, patients of the Child Psychiatric Clinic "St. Nikolas", and their experience in kindergarten. We discuss how these parents manage the process of integration in kindergarten and how their beliefs, attitudes, and fears reflect upon it.

P03.121

DISCOVERING THE GHOSTS AND PUTTING THEM TO REST: THERAPY WITH A FIVE YEAR OLD AND HIS PARENTS

Casa--Martin D.*^[2], Canfield J.^[1]

^[1]Montreal Children's Hospital and McGill Division Committee on Infant Mental Health. ~ Montréal ~ Canada, ^[2]Private practice and McGill Division Committee on Infant Mental Health ~ Montréal ~ Canada

In her paper Ghosts in the Nursery (1975) Selma Fraiberg brought to our awareness the effects of unrecognized, unresolved elements of the parental past that impact parenting. Therapy with Romeo and his parents allowed for awareness of previously unremembered affects in loving parents who were enabled for the first time to recognize their child's suffering. Romeo's parents requested consultation after his first kindergarten class where he had been fearful and cried on being separated from his parents. An intelligent, verbal child with well developed play skills, Romeo's expressed wish was to always stay at home with his mother. Play therapy sessions began in which Romeo quickly displayed anxiety and underlying anger. Themes included dead and missing siblings and ambivalence about being an only child. Both parents had experienced deprivation and/or abusive relationships with their own parents and losses related to infertility and aging. Enabling the parents to develop a narrative recognizing their own losses and sharing it with Romeo was key to the evolution of this therapeutic process. Thinking about "ghosts in the nursery" provided a theoretical framework to address the multiple factors affecting this boy and his family. Excerpts from play sessions as well as parent/family meetings will be used to illustrate the content and process of the therapy.

P03.122

CHILD DEVELOPMENT, PARENTING AND PRIMARY HEALTH CARE ROLE: PARENTS' AND FAMILY PHYSICIANS' PERSPECTIVES.

Fareleira F.^[1], Xavier M.R.^[2], Veiga E.*^[2], Martins C.^[3]

^[1]Center for Health Technology and Services Research (CINTESIS), Faculty of Medicine, University of Porto, Porto, Portugal ~ Porto ~ Portugal, ^[2]Universidade Católica Portuguesa – Centre for Studies in Human Development (CEDH), Faculty of Education and Psychology ~ Porto ~ Portugal, ^[3]Family Medicine, Department of Community Medicine, Information and Decision in Health (MEDCIDS) of the Faculty of Medicine, University of Porto, Porto, Portugal. Centre for Health Technology and Services Research (CINTESIS) ~ Porto ~ Portugal

Current scientific and social progress has allowed the knowledge of child development, looking at a child as a Person. The Touchpoints model has a significant contribution in a human development and intervention perspective: dynamic, anticipatory, relational, collaborative and inclusive. However, child health services remain poorly aimed to children and families, often relying on a pathological model, making them not entirely effective in contributing to parental satisfaction and healthy family dynamics. Literature shows limitations in the quality of care in child development areas, especially regarding the difference between recommended care and the one actually received. Qualitative study involving two groups of participants: P and FP involved in maternal and child consultation in PHC. Multiple focus group technique is used. A script was designed specifically to explore "parenting experience and familiar wellbeing" and the "maternal and child consultation model in PHC". Each focus group will have six to eight participants, living in the north of Portugal, recruited using a snowball sampling technique. Focus group will be recorded and later entirely transcribed. Data will be analyzed based on a semi-inductive procedure using NVivo© software. Differences and complementarities between the two participant groups will be presented. Results will be discussed taking into account the Touchpoints model and the concepts of parental competence and family wellbeing, in the light of the 2013 National Infant and Juvenile Health Program from the Portuguese Health Authority.

P03.123

MATERNAL AND PATERNAL CHILD-REARING PRACTICES AND PRESCHOOL CHILDREN WITH EXTERNALIZING BEHAVIOR PROBLEMS

Sebben S.*, Bortolini M.

Universidade Federal do Rio Grande do Sul ~ Porto Alegre ~ Brazil

Externalizing behavior problems in pre-schools are associated with parental child-rearing practices (Mondin, 2008). Parental child-rearing practices are strategies that parents adopt to manage children's behaviors, and can be classified as inductive, that aims at describing to the child the consequences of his behavior; or coercive, in which behavior control is through punitive reactions (Hoffman, 1975). The coercive child-rearing practices represent the main predictors of externalizing behavior manifestations (Karreman et al., 2010). This study investigated maternal and paternal child-rearing practices of preschool children with externalizing behavior problems. Based on the literature, it was expected that parents would report more coercive child-rearing practices than inductive ones. Six families took part in the study, whose children (two girls and four boys), presented clinical scores in the Child Behavior Checklist ½-5 (CBCL, Achenbach, 1991). Parents answered the CBCL and the Interview of child-rearing parental practices (Alvarenga & Piccinini, 2004). A qualitative content analysis was used to evaluate parental reports based on categories derived from literature. The results reveal that in one family, coercive child-rearing practices were more frequently reported, both by the mother (63,1%) and the father (45,4%); in another one, while the mother reported more coercive child-rearing practices (49,9%), the father reported more inductive ones (47,8%). Finally in four families, inductive practices were reported by both mothers and fathers (63,4% and 66,6%; 48,4% and 72,2%; 47,4% and 54,3%; 67% and 56,3%, respectively). Hence, only two cases corroborate the literature about the association between coercive child-rearing practices and externalizing behavior in preschoolers (Karreman et al., 2010). Contrary to expected, in four cases inductive child-rearing practices were frequently reported by both parents. This last finding may be explained by the fact that parents were not employing adequately inductive child-rearing practices, or that it was not functional towards the children's externalizing behaviors (Petterson et al., 1992).