



PATIENT EDUCATION
*Keeping Kids Safe:
This Is a No-Hit Zone*

MAYO CLINIC CHILDREN'S CENTER



BARBARA WOODWARD LIPS
PATIENT EDUCATION CENTER

Mayo Clinic Children's Center

For more than 100 years, teams of physicians have cared for children at Mayo Clinic.

T. DENNY SANFORD PEDIATRIC CENTER

MAYO EUGENIO LITTA CHILDREN'S HOSPITAL

Pediatric Sub-Specialties in the following areas:

Allergy and Immunology	General Pediatric and	Plastic and Reconstructive
Anesthesiology	Adolescent Medicine	Surgery
Cardiology	Gynecology, Adolescent	Psychiatry and Psychology
Cardiovascular Surgery	Hematology and Oncology	Pulmonology
Child and Family	Infectious Diseases	Radiation Oncology
Advocacy Program	Medical Genetics	Radiology
Community Pediatrics and	Neonatal Medicine	Regional (Health System)
Adolescent Medicine	Nephrology	Pediatrics
Critical Care	Neurology	Research
Dermatology	Neurosurgery	Rheumatology
Developmental and	Ophthalmology	Sleep Medicine Center
Behavioral Pediatrics	Oral and Maxillofacial Surgery	Speech Pathology
Emergency Medicine	Orthopedic Surgery	Surgery
Endocrinology and Metabolism	Otorhinolaryngology (ENT)	Urology
Gastroenterology and	Physical Medicine and	
Hepatology	Rehabilitation	

Pediatric Specialty Clinics:

Adrenoleukodystrophy Clinic	Dermatology Genetics Clinic	Neonatal Follow-Up Clinic
Aerodigestive Clinic	Diabetes Clinic	Neuromuscular Clinic
Anxiety Disorders Clinic and	Eating Disorders Clinic	Pain Clinic
Intensive Therapy Program	Eosinophilic Esophagitis Clinic	Pain Rehabilitation Center
Arrhythmia and Device	Epilepsy Clinic	Pediatric Diagnostic Referral
Placement Clinic	Erythromelalgia Clinic	Clinic
Asthma Center	Facial Paralysis and	Pediatric Level 1 Trauma Center
Attention Deficit Hyperactivity	Reanimation Clinic	Plagiocephaly Program
Disorders (ADHD) Clinic	Feeding Program	Pulmonary Hypertension
Bariatric Surgery Clinic	Fertility Preservation	Program
Brain Injury Program	Fetal Surgery Program	Renal Stone Clinic
Brain Tumor Clinic	Friedreich's Ataxia Clinic	Spina Bifida Clinic
Cerebral Palsy Clinic	Functional Movement	Spinal Deformities Clinic
Chemotherapy/Radiation	Disorder Program	Sports Medicine Center
Long-Term Effects Clinic	Heart Failure Clinic	Thyroid Nodule/Cancer Clinic
Child and Adolescent Intensive	Hemophilia/Coagulopathy Clinic	Transgender Clinic
Mood Program (CAIMP)	Hyperlipidemia Program	Transitions Program
Childhood Sarcoma Clinic	Immunodeficiency Disorders	Transplant Center
CompPASS (Palliative Care and	Clinic	Travel Clinic
Integrative Medicine)	Inflammatory Bowel Disease	Vascular Malformations
Congenital Heart Clinic	Clinic	Velo-Pharyngeal
Constraint Induced Movement	Learning Disorders	Insufficiency Clinic
Therapy Program	Assessment Clinic	Voiding Clinic
Craniofacial Clinic	Long QT Syndrome Clinic	Weight Management Clinic
Cystic Fibrosis Center	Marfan Syndrome Clinic	
Dana Child Developmental and	Metabolic Bone Clinic	
Learning Disorders Program	Mood Disorders Clinic	

What Is a No-Hit Zone?

A no-hit zone is a place where everyone can feel safe. It's where adults, teens and kids all know that verbal abuse, hitting and other forms of physical violence are not OK.

You can decide that your home and car are no-hit zones. And businesses like your health care office and hospital can state that they are no-hit zones. This means that children, parents, other adults, and health care staff don't have to worry about being hit or hurt physically here.

Being in a no-hit zone means that:

- No adult will hit a child.
- No child will hit an adult.
- No adult will hit another adult.
- No child will hit another child.

Why Doesn't Hitting Work?

Many people were spanked or had other forms of hitting as punishment when they were children. Adults often say they hit or spank to get a child's attention. Or they do it to help the child remember not to misbehave that way again.

After a child is hit or spanked, the child may stop some behavior for a short time. **But studies have shown that spanking and hitting don't change a child's behavior in the short or long term.**

There are other things that also happen when a child is hit:

- It can make a child **more** defiant and aggressive.
- It may teach children that hitting is an OK way to solve problems.
- It risks that a child will be injured physically.
- It may negatively affect the adult-child relationship. The child may fear or not trust the adult for a long time.
- It may have a long-term negative effect on how the child learns and how his or her body responds to stress.

Other Ways to Redirect a Child's Unwanted Behavior

Some adults spank or hit when a child is talking back or acting out. But there are other ways to change a child's unwanted behavior. Some of these ways create behavior change over time. Other ways work in the short term.

- **Practice show and tell.** Model behavior you wish to see in the child. For example, use a calm voice. Choose words that are gentle and educational. Act in ways that are kind or loving as often as possible.
- **Set limits.** Explain rules in words that are right for the child's age and developmental level.
- **Listen to the child when asked.** Many children act out to get attention. But when they feel secure in their relationship with the adult, they are not as likely to misbehave to get time with you.

Children are more likely to feel secure when:

- They are treated with kindness.
- They have regular one-on-one time with their parents or guardians.
- Their parents listen to them and talk to them often.
- **Support good behavior.** Notice when children are being good and give brief praise. For example: "Thank you for cleaning the table. That will help at lunchtime." Or "I like how you used a lot of colors in your picture. It's really pretty."

- **Redirect bad behavior.** If you see that your child is starting to misbehave, try to change the child's focus. Suggest a new activity or toy. Start a new conversation. Ask what the child wants to eat for the next meal. Or ask the child to go to another room to get something for you. Remember to thank your child for that help.

If you need help while you are in a doctor's office or hospital, feel free to ask a staff member to give you something age-appropriate to distract your child.

- **Give reasonable consequences.** Follow through on the consequences. For example, if your child hits another child, a favorite toy may go in time-out for 5 minutes. Or the child can't have a playdate with the friend for a day or two. Or the child can't play with the sibling for a few hours.
- **Call a time-out for parent or child.** When a moment starts to be too frustrating, before everyone is mad, suggest that you and your child separate for a bit. You can say, "I know it's easy to feel mad right now. Dad is going to go do something else for a few minutes. I want to calm down, so I don't get angry. Do you want to go do something else for a few minutes too? We can come back together in 10 minutes to make a decision about this." Be sure to find the child in 10 minutes. Calmly talk about the earlier conversation.

Final Thoughts

It can be hard to break old patterns of punishment. When a child stops misbehavior after being hit or spanked, it's easy to think the punishment worked. But you can't see the emotional and psychological harm that spanking and hitting do to a child.

Children often learn to fear a person who hits or spanks them. And they lose trust in that person. **These reactions are just as real as the physical pain a child feels.**

Wherever you and your children are, make that a no-hit zone.

Your care team wants to support you as a parent. If you have questions after you read this, please reach out to your child's care team.

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BARBARA WOODWARD LIPS PATIENT EDUCATION CENTER

Mrs. Lips, a resident of San Antonio, Texas, was a loyal Mayo Clinic patient of more than 40 years and a self-made business leader who significantly expanded her family's activities in oil, gas and ranching. Upon her death in 1995, Mrs. Lips paid the ultimate compliment by leaving her entire estate to Mayo Clinic. By naming the Barbara Woodward Lips Patient Education Center, Mayo honors her generosity, her love of learning, her belief in patient empowerment and her dedication to high-quality care.

This material is for your education and information only. This content does not replace medical advice, diagnosis or treatment. New medical research may change this information. If you have questions about a medical condition, always talk with your health care provider.

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