

Web-Based Radio Show

Meltdowns:

How to help a child with special needs through a meltdown, especially when there may be limited language. How you can deal with meltdowns; what are the issues and strategies

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Good morning. Welcome to our web-based radio show. This is Dr. Greenspan and we're happy that you can join us today. Today our topic is probably the topic that I get the most questions about, although I know I keep saying that each week or every couple of weeks, there seems to be a plethora of questions about a particular topic. Today's topic is "Meltdowns." These are just what they sound like – complete meltdowns and all children have them, children with special needs as well as children without special needs and children with all varieties of special needs. We, as adults, also have meltdowns. It's not only children who have meltdowns. Meltdowns are another word for tantrums, or technically being completely disregulated, or "losing it." Whether we think of it as a meltdown, losing it, a tantrum, or an aggressive outburst, or hitting the floor, or screaming, or losing our temper, or simply being overloaded and overwhelmed, any way we want to think about it, it is a challenge for all of us – especially for those who are not having the meltdown at the moment. How to help the child, especially the child with special needs who is having the meltdown, especially when there may be limited language so it is hard to talk the person through it. How do you deal with the meltdown? What are the issues and strategies?

We can divide approaching meltdowns with a number of basic questions. One, and probably the most important one that everyone gets concerned about is, *What do you do at the moment of the meltdown?* How do you help the child through it? Then two, *What are the causes of the meltdown?* The second question is important because it leads to a related question which is what are the causes. *What are the causes and how will they help us prevent similar meltdowns in the future?* If you know what is causing it, we can then know how to prevent it. The third question is, which is really an extension of number two, *What are the warning signals leading up to the meltdown?*



Because if we know the warning signals, even if we don't know all the causes, we can, perhaps, helping the child begin coping with it and settling down and becoming organized and calm before the meltdown occurs, because the meltdown seems to be like an explosion that has a critical mass to it, and it kind of builds up and there becomes a point at which it's over the top. But, on the build-up, often there is the child or the adult that has much more control and can get back into regulation more easily if someone helps them.

So, what are the steps leading up to it? Those are our three questions. What to do when you are in it, how to identify the steps leading up to it, and what are the causes, and therefore the strategies of prevention for it. So, let's take it in that order, actually, the order of what to do when you are in it, what the warning signs are, and what the causes and preventative strategies are.

Shortly we will be joined by my dear colleague, Serena Wieder, on the phone.

SW: Good morning, everyone.

SG: She is with us now, listening. Then she'll join in and amplify some of these preliminary comments that I'll make to get us started.

First, in terms of what to do in the middle of the meltdown, when the child is on the floor, banging his hands, yelling and screaming, sometimes even hitting his or her head, or the child is grabbing mommy or daddy, biting, scratching, trying to kick, or doing this to another child, or simply running around yelling and screaming, banging into things, or throwing things – these are different forms that meltdowns may occur. Or, the child is just sobbing and crying uncontrollably and yelling and screaming and there seems to be no end in sight. These are some of the forms that meltdowns occur.

The key principle when the child is in the middle of the meltdown, is actually a very simple one. It will sound obvious to most of you, and yet in its simplicity, it is something that we often don't do. Simply focus, as the adult, on helping the child calm down. Do not have any other agenda. In other words, this is not the time to lecture the child on why they are responsible for their own frustration, if it is a verbal child, why if they hadn't eaten all that candy, or why if they hadn't hit their brother, or why if they hadn't done A, B, or C, or mommy or daddy yelled at them which led to the meltdown because they were biting their friend. This is not the time for a lecture; this is not the time for explaining to them they are responsible for it. This is not a time, also, for



yelling at the child to calm down. Sometimes the child's meltdown leads to the parent meltdown. So, the biggest no-no is what we call a contagion of meltdowns where the child melts down, daddy tries the good guy approach for about two seconds, then since he is tired and hungry and just came home from work and is stressed out, he melts down. Then mommy sees daddy melting down and yelling at her poor, little, sweet angel, so instead of calming the situation down, she starts yelling at daddy for making it worse. So now we have a 3-explosion nuclear reaction, rather than just was initially a 1-explosion nuclear reaction. Then, if there is another sibling in the family, he or she sees everyone yelling and screaming and she gets scared and starts crying. Now we have a 4-party meltdown. This sounds almost comical if you were to watch it in a TV show, and yet it is very, very typical as any parent will attest to. We all do it. I did it in my family when my kids were little, and I'm sure all of you do this some of the time because we are all human and we all have our boiling points and we all get overloaded. A melting down child can melt us down. So the first principle is, *let there be only one meltdown at a time*. Everyone else has to try their very, very best, you won't be perfect and you won't do it every time, to stay calm. So if it is daddy or mommy, whoever is with the child, keep your agenda simple. This is not the time for lectures, this is not the time for yelling at the child, because everything you do, other than trying to calm the child, puts fuel on the fire and the fire just keeps getting bigger and bigger.

So when the child is in a meltdown, just assume because it is true, that the child can't hear you, can't understand what you are saying, and is just feeling out of control. Many children, when they complete the meltdown, feel just as badly as you do about it. They feel very, very guilty. Even if they are kind of arrogant about it and don't act guilty, down deep, nobody likes to lose control. Everyone feels badly about losing control. So the key first message is, in a meltdown, is to keep your focus on calming the child down.

The next question is, "What do you do?" How do you calm the child down once you keep yourself calm? Recognize, also, to help you justify staying calm and not yelling at the child and not trying to punish the child in the middle of the meltdown - that is another critical no-no – don't try to punish the child right in the middle of the meltdown. This doesn't mean that you are going to let the child get away with having bitten his brother or sister or having hit you. This just means that the sanctions and the limit setting will come after everyone has settled down. You can't be setting the limit in the middle of the meltdown. That just adds fuel to the fire and extends the feeling of



being overwhelmed. Rest assured there will be plenty of time to talk about it, to lecture if you need to, to set the limits, to have consequences – but not at the moment of truth.

Also, another common mistake is to by practice “ignore the meltdown.” You pretend it is not occurring and just turn your back on the child. The “he’s not being rewarded or reinforced” for the meltdown – this is a favored, overly simplistic, sophomoric, naive, very, very bad strategy that gets propagated by individuals who don’t know the child well and who think there are simple solutions to life, and invariably make matters worse. This does not mean that at certain times, the best way to calm a child might be to diminish the sensory input and leave the child on his own with you being available for safety and security reasons, but not trying to talk and do a lot, realizing that for little Johnny or little Suzie, any kind of words or any kind of attempt of rhythmic rocking or deep soothing or holding may only escalate. Some children will do better by basically reducing the sensory input, giving them a little space, and being available for safety and security in case they start hurting themselves or try to break things. But, that is different when that is a selective strategy from little Johnny or Suzie because of the way their nervous system works, rather than a general strategy of “let’s extinguish the meltdown or tantrum by not paying attention to it or not giving any reinforcement to it.” Because, for many children, particularly children where we are trying to get them more engaged in relationships, the best way to solidify that trust and intimacy is to show that you are available to help them when they feel overwhelmed and overloaded. Think of a healthy, new baby who is learning to relate to and trust the world – a 3 or 4 month old. One of the most important ways that relationships, that intimacy builds is that you as a mommy or daddy or as a caregiver, are available to that baby to help the baby feel secure and comforted when they feel overwhelmed, when they are crying or hungry. So if you are the one who feeds the baby when he or she is hungry, who rubs their back when they are feeling overloaded or overwhelmed, who helps them when they are in the middle of a tantrum settle down and feel calm and collected – they become souls to the human race. They see mommy or daddy or other caregivers as individuals who can help them. It’s not even learned at a conscious, verbal level. It is learned at an intuitive, bodily level that is so basic, but it is so commonly seen among healthy human beings, that healthy trust in others. That enables one to have a good marriage later on by trusting intimacy. It enables one to not run away from intimacy when one is an adolescent and trying to learn about it in relationships. It allows one to have good friendships where there can be trust. It allows one to determine who is reliable and trustworthy and who is not because you can tell who is



going to be there for you in a crunch and who is going to be a fair-weather friend and turn their back on you in a crunch.

So for children who haven't mastered this first step because of their biological challenges, or mastered it only partially and don't sustain their intimacy, or don't seem to be able to trust it when they are overwhelmed, we don't want to turn our backs on the children. We have a bigger goal. Extinguishing the tantrum is a small goal compared to convincing the child that they are loved and there is intimacy and that they can rely on you. Trying to extinguish or ignore tantrum for all children is just, again, a very, very naïve and weak and poorly thought-through strategy as a general strategy.

Having said that, again for individual children, we figure out what is going to work to help them calm down, which gets to the real crux of that first step. Each child will have their own way of being helped to calm down. For some children, it will be holding them tight, applying firm pressure on their backs or tummies, and offering rhythmic rocking and a nice, calm, soothing voice. For other children, it may be just talking them through it with your voice. They may not be able to understand your words, but just saying, "It's ok, we can calm down, sweetheart, let's try to calm down" and keeping your voice calm and giving them 3 or 4 feet of space and just letting them hear your rhythmic voice will help them calm. For other children, it may be being quiet and just nodding your head and periodically saying, "I know it's hard, let's settle down" but having some quiet between your occasional warm, soothing voice as the child tries to settle down on his own. For other children, it may be being totally quiet. For other children if they are trying to bite or kick or hurt a sibling or hurt you, you may have to help them with a kind of firm bear hug from the back where you kind of hold them and contain them and apply firm pressure until they can settle down a little bit because you can't let them hurt themselves and you can't let them hurt anybody else. It's very important to keep them safe while they are having their meltdown or tantrum. They may fight you on it, but it may be the best way they can settle down.

You get into the biggest problems, as children get bigger. Seven or eight year olds can be quite strong and 14 year olds can be even stronger. Teachers who are caregivers may be confronted at school with kids having meltdowns. Here, it is very important to be very realistic and knowing the children you are working with. It could be your own child, or as a teacher it could be children in your classroom. If you have some big, strong children and you are not a very big person yourself and the children have meltdowns where they get aggressive and try to hurt others including the teacher, then



you need a great, big, strong person in the room with you. Just the presence of that person keeps everyone feeling secure. It keeps the teacher feeling more secure certainly, but it also keeps the students feeling more secure. I remember early in my career, I was consulting to a school for children who had a lot of problems with aggression. When they had meltdowns, they tended to try to hurt other children or the adults. In one class, the kids had lots of meltdowns and it was always chaos and always playing catch-up and always sounding the alarm button and kids were hurting each other and hurting the teacher. In another classroom, we had a very, very gentle giant, a big, huge man who was an aide; a helper, but he was a very sweet person who was very large and very strong and very gentle with the children. When the child would begin getting out of control, he was quite capable of just holding them in a firm but gentle bear hug from behind and they would settle down. What was interesting to me in observing this, is when he needed to hold someone, they would settle down almost instantaneously like they had learned there was nothing in it for them to try to defeat this gentle giant because he was too big and too strong and he could out persist them, and yet he would be very gentle with them. They would need to settle down eventually, so they would settle down in a second. It was almost like a badge of honor that they had to show some resistance, but they would settle down immediately. But even more importantly, what I learned from watching that, was that in that classroom the kids stopped getting aggressive when they had meltdowns. Some of them threw tantrums and some of them cried, some of them got overloaded, but his presence there, just seeing him and knowing that he would help them in this way or set the limit very quickly but in a firm and gentle way, not in a hostile way with yelling or screaming, prevented the full meltdown in a sense of its aggressive components. So the key is, when you are in a setting where kids are a little bigger and they do get aggressive, is to make sure that setting is safe and secure and has the kind of help you need. We don't want a 5'2", very thin teacher with 6' adolescent boys who are very strong, alone in the classroom if those boys are prone to meltdowns with aggression. That is a ticket to problems. There, you might have a volunteer or an aide or a teacher who has some training in how to help set limits in this way. This can be critical.

The key principle here is to find the right ticket; to know your child and find a way to help that child calm down, and to keep it simple. Keep it direct, keep it simple. In other words, keep the message, "Let's quiet down, let's get calm, and then we'll figure it out." So, the child is having a meltdown because he wants to go to the toy store or wants to have a candy bar or wants to steal the other child's toys, or wants



what he wanted yesterday – the key is not to give in, necessarily, although negotiation, discussion, and compromise is always an option before the tantrum starts but not when you are in the middle of the tantrum. But, the key is to say, “let’s calm down and then we’ll talk about it.” And, to try to prevent the child from getting aggressive or crossing the line. Basically, my philosophy is that free speech is fine. If the child wants to cry and express their outrage, no punishments for crying, yelling, or screaming because, after all, we are trying to help our children be communicative and that expresses a lot of emotion. But, the line gets crossed if they try to hurt themselves, hurt others, or break things. Then, eventually, there will be a sanction associated with it. Initially, just calm them down. Keeping the focus on that is the critical first step. That sounds pretty simple, but you would be surprised how often we get into this contagion and don’t do that. Again, for each child, there will be a different pattern of how to help that child settle down – some just talking and soothing, and others being quiet with them and letting them calm down on their own but being in the room so they know you’re there to help them feel secure if they need to. In no instance is it appropriate to lock the child in their own room and close the door and scare the child and give them the message that you’re not willing to be there with them during their upset. You can move away to the other side of the room and they don’t have to look at you if just the sight of you is stirring them up. But, someone needs to be available within eyesight and earshot, as we speak. Some kids, rhythmic movement, firm pressure, distracting the child to an activity that they enjoy – it could be a toy or a game – anything that will help them get calmed down. That is the key.

The second issue, or second question, is how to recognize the warning signs. Most kids build up to it gradually. Some parents will tell me that it just came out of nowhere. We were playing nicely and all of a sudden it hits and boom! But, what I need to ask you to do, is to look for subtle warning signs – a tightening of the child’s jaw, a different look in his eyes, a particular circumstance that frequently brings it on like not getting his way or not winning the game or another child taking his toy or whatever. So, look for the warning signs – the change in body posture, the change in vocal tone, the length of time you have been playing a game, the not getting your way. Look for the warning signs. If you see a meltdown building, in other words you see the child going from 0-20-30 and he gets overloaded at 60, intervene at the first step. The way you intervene is to alert the child to what is happening in a nice, calm, soothing voice, in a verbal tone. “Sweetheart, I can see you are getting a little upset.” Or, shift the activity to something more regulating and soothing. Or, if the child needs to win more, if it’s a



verbal child, say, “Do you really want to win? Oh, well what do we need to do so you can win the game a little more?” Tell him you’re on his side and you understand his goal. In other words, with children, you don’t have to play the game according to the rules. For the child who is not yet fully logical and not yet fully reflective and abstract, can have games played according to rules that you and the child make up together, or you and the child and another child make up together. In other words, you can create your own imaginative game out of a real game. So don’t feel like you have to stick to the rules of the game, as long as you are explicit on what the new rules are. So, I’ll be playing with a child who needs to win and he’ll be changing the rules as we go along, and I’ll be jokingly saying to the child, “Oh, I see, we’re not playing ‘throw the ball in the basket,’ we’re playing ‘Johnny wins all the time’ – that’s the name of the game.” That usually brings a smile to Johnny. I say, “We’re playing Johnny throws and gets a point – that’s the name of the game!” Johnny may turn around and say to me, “That’s right!” if he’s verbal. Then I say, “Ok, every time Johnny throws the ball he gets a point. I have to throw the ball in the basket to get a point.” That usually gets a happy camper. What you are doing there is making explicit the new rules and Johnny is also getting an appreciation of what his fundamental desire is, which is to win, win, win at any cost. As long as you are making it explicit, that’s fine because you are getting interaction, you are getting logic, and you are getting reasoning. Again, the caregiver may say, “Ah, but is he getting a realistic picture of the world? Is he learning how to play real basketball?” The answer is no. He is not getting a realistic picture of the world. He is not learning real basketball. But, he is learning how to communicate and learning how to identify his own wishes and learning how to be logical. That gives him the tools to eventually adapt to reality and eventually play real games. So think of this as a step-wise progression. You can teach rules out of fear, you can teach rules rigidly, but you can teach children how to think and then they can collaborate in the rules. If you are explicit, the child will learn how to think. Rest assured that there will be plenty of time for the child to learn to compromise. For example, when it comes to going to bed, when it comes to not having candy 24 hours a day, when it comes to not being able to break all the toys of his friend, or not hit, scratch, or bite whenever he wants to – so the child is learning rules all the time. There are plenty of opportunities for that. You can avoid the meltdowns by identifying, again, what the issues are. If it is a verbal child, helping the child identify them.

If it is a preverbal child, often using gestures to show the child you understand what they want to do to distract the child during the buildup – to an activity that is more



soothing and regulating – that is a time during Floortime that you can introduce something that is less overwhelming. So, if the child is overstimulating himself, let's say by doing a lot of movement, and he is getting overloaded, you introduce things that have a slower motion and a more rhythmic movement pattern. You introduce an activity, even though it may not be following the child's lead, that is going to be more soothing than the child may enjoy. That way you distract the child from going up the ladder, escalating to the tantrum.

Now the third question is, "How do we prevent the tantrums in the first place?" What are the causes? Here it requires a very systematic approach. The systematic approach means looking at all the possible causes for tantrums. The obvious ones are the ones that hit you over the head, like the child not getting his way, the child not wanting another child to play with his toy, the child just being overstimulated by too much noise or too much commotion, the child being frustrated by your not doing something he wants to do (which is another version of not getting his way), etc., etc., etc. But, there are other causes too that lead a child to be more likely to be disregulated, or have meltdowns. For example, for some children who are very sensitive to chemicals, I just heard a story about a child who had been doing fine and had problems with aggressive meltdowns, and all of a sudden they started getting worse again. It turned out that he, at home, was being exposed to a new floor that had been put in his play area and it had been covered with a polyurethane cover which gives off a lot of toxic odors. The child took the polyurethane into his system and something like that can overload a lot of children. It is a chemical. It is just like a chemical you might ingest. Kids who are playing on the floor close to it, it may lower their threshold for meltdowns and make them more irritable. For most adults who are exposed to a new polyurethane floor who are sensitive to that particular chemical, you get headaches or get just a bit irritable, but can control it. But for a little child who has a low threshold for meltdowns to begin with, they will get more agitated and more reactive. So any little thing that normally they might have dealt with, such as frustration of not getting the toy or not getting their way, may lead to a meltdown. This child also just had his room painted, also, with oil based paints which took a long time to dry, and he got a double whammy. The windows were closed and adults were getting headaches but hadn't put two and two together that they were causing little Johnny to be more disregulated. So you've got to look at any change in diet and nutrition, for example if the child all of a sudden goes to a lot of birthday parties at school and has more sugar, more chocolate, more chemicals in the foods – again, for some children, sugar and chocolate doesn't



bother. The research on that is very mixed. Some studies are showing that sugar does make kids more agitated, other studies show it does not. It really depends, I find, on the child. Some children are very sensitive to sugar.

Generally, sugar in the diet, or things that convert quickly to glucose in your bloodstream, do cause a change in your “adrenaline levels,” in other words, your epinephrine or norepinephrine release does increase when you get a quick burst of sugar. For a person with good regulation, that doesn’t cause a problem. They may just feel a little chocolate high or a little sugar high and get a little energized, but it makes them feel better sometimes. But for a person who is disregulated, that little bit of extra “adrenaline” in their system can cause disregulation. Chemicals can do the same things. Some kids it’s red dye #5, or a particular food additive. So, you’ve got to look at changes in diet and nutrition, you’ve got to look at changes in sugar load, if you’re eating out more fast foods that you hadn’t had because you’re going on a trip or something and the child is getting more disregulated, that can be a factor. So, changes in the physical environment – painting. Changes in the environment that the child eats, medication – side effects of medication – the child may be on an antibiotic. It may not be the antibiotic itself, but if it is a liquid antibiotic, it has a lot of sugar and chemicals in it. That can cause disregulation. Sometimes the illness itself – a particular bacteria or virus may lead to disregulation in the child. So any change in what the child is taking in - medication, food – the child’s physical environment needs to be looked at. Also, changing family patterns and family dynamics – you’ve just been visited by in-laws and there was more commotion. Change in noise level, change in visual stimulation – new lights – if the child is in a well lit environment, if the child is watching more TV than usual because mommy and daddy are busy. So any changes in the child’s routine in terms of what they take in visually, what they take in through sounds, what they take in through their mouth, what they take in through their nose through their odors – just think of all their senses and think of what they are taking in and do an inventory of each sense. Ask if there is any change in any of these.

Also, illnesses – Ricki Robinson, a pediatrician who is part of our DIR Floortime network, who is on our Interdisciplinary Council for Developmental and Learning Disorders noted that some children, after a strep throat or who have subclinical strep, get very disregulated. They have a reaction to the bacteria and this seems to lead to disregulation and more frequent meltdowns. She has found some children who had these “regulatory changes” and then did a strep antibody titer, and found it was high.



They were having a silent strep infection and treated it and children did better after she treated it. She is just beginning to report that finding. It was a very interesting finding.

So these are some of the things you need to look for. Parents need to look at the family dynamics subtly – what is happening with their own stress levels? Are they working longer? Are they under more stress? Are they having problems with their extended family so they are less soothing or less available? It may be that they have just as much time and be doing as much “Floortime” as usual, but with less warmth and less nurturance and a little more tension. There may be some family conflicts that are going on. Another very frequent cause is a change in the school. All the things we said – you need study, you need to study in the school environment too. For example, the school days may be getting longer. The windows may be closed so toxic chemicals in the school may be getting to the child. Or there may be a bully who is overloading the child at school, or the teacher may be getting less patient with the child because it is getting into the year and the teacher is getting overloaded. Or, they may have just lost a favorite aide of the child. So, you’ve got to look for all the things that can precipitate these kinds of periods of dysregulation. Some of the children who are very easily dysregulated also need to be looked at in terms of asking the question if they have had an extended sleep EEG pattern or a 24 hour EEG. Some children have subtle irregularities that are only picked up in the 24 hour or extended sleep EEG that can help account for patterns of dysregulation, in which case medications such as Depacote, which is both an anti-seizure and a mood stabilizer, can be very, very helpful for those children. So, the irregular EEG patterns not only can account for regressions in the child in terms of language and cognition, but also for behavioral regressions in terms of loss of regulation. So doing an update on your biomedical evaluation is very, very helpful too. Again, vitamins and minerals a child may be taking – for some children who are sensitive, they can agitate the children, either directly because of the vitamin or because of what is in the package that the vitamin has.

So, all of these are factors that need to be explored. The family environment, the relationship you are having with the child or other caregivers are having, and what is coming in through all the sensory modalities including the mouth, as well as looking at physical illnesses. So these can all help you identify causes, all of which have implications, obviously, for prevention. The key is to set up an environment where the child is not having their buttons pushed. As the child gets more interactive, gets to master what we call a continuous flow of back-and-forth emotional signaling, and gets



more creative in their use of words, and gets more logical in their use of words, the child's ability, then, to talk his way through a tantrum, to anticipate with you what is upsetting, and he can then say or gesture to you, "Mommy, it's too noisy" by holding his ears and coming up and pointing or saying, "Mommy, too noisy." Then you pay attention to that. For example, the child at school who gets overloaded and gets aggressive and melts down toward the latter part of the morning or middle of the afternoon, that child may need some sensory breaks where they go out with an aide for a walk every hour or hour and a half and have a chance to reorganize, and more so as the day progresses because it gets overloading for them to be in an environment they may like - they may enjoy the play and the other kids, but the noise and the interaction and visual stimulation gets to be too much for them. So, sometimes we shorten the school day. We have more breaks.

There are certain kinds of sensory activities that may be very regulating, such as a little bit of jumping or little bit of firm pressure at periodic intervals, or throwing and catching games that may help children who need more periodic regulation. A lot of children really need ten minutes of every hour, or 15 minutes on more sensory-based activities that help them regulate and soothe during school. So those are some preliminary ideas.

So, the three key questions, then I'm going to turn it over to Serena for some further comments, are, what do we do when we are in the middle of it? (so we don't throw fuel on the fire – we focus on calming) and learn the warning signs for your particular child, try to distract the child and get into a soothing pattern while you are heading up the scale before the meltdown occurs, and try to figure out the causes so you can prevent them and create a regulating environment. If you say, "Doesn't my child have to learn to deal with all environments?" – yes, eventually. When your child is highly verbal and highly reflective and can talk about their feelings and anticipate their reactions, then we can work on broadening their combination to their minds. But in the short run, let's try to prevent overload for a child who already may have a very sensitive and easily disregulated system.

Let's turn it over now to Serena to add some further comments. Serena, do you want to add some thoughts?

SW: Sure. As I was listening to you, it reminded me so much of how any particular behavior can have so many different reasons. You were outlining so nicely all



potential reasons for the same behavior. We do know that children don't have many ways of expressing their distress and whether they are anxious or afraid or angry or upset. It will often take this form. It does take some time to really step back and reflect on what was going on, or how often is this occurring, or is this reminding you of yourself. I often hear parents are telling us that the child is doing this or that in terms of the behavioral disruptions and tantrums, getting upset and not calming down and then I'll hear, "Well, I was just like that" or I'll see a couple looking at each other and saying, "Well, that's you." These characteristics and tendencies can, perhaps, be transmitted or shared in the family. The point I think you were making about not joining the tantrum and not getting too anxious about what was going on and taking into account that this is a disruption – we can really support talks going a long, long way.

I think what I would like to add are some more examples that will keep the developmental perspective here as ways to think about not only how to soothe, and especially how to recognize those signals and preempt some of the tantrum behavior. This can occur right away, then he can get angry and throw things. He can yell and get distressed, and as you were saying, you will be likely to want to soothe and to comfort and hug tight and wrap them up and walk and so forth, or maybe you realize, no, that's too much, and not give so much sensory input but still support their sense of being overwhelmed. As the child gets older, we do see the tantrum, or the beginning of a tantrum which can easily escalate if we overreact to it, take the form of the child expressing some protest, to the point at which they feel so helpless. I like to think of a tantrum as being an indication of real helplessness. Once you think of that, rather than to think of it as bad behavior – "Oh, no, they are doing it again" or "Oh, not, it's manipulative" – and begin to think of the child feeling so helpless that they are so disorganized that nothing works, as they are kicking, or fighting, or screaming, or trying to hit – the child really is helpless. It's important to not join that helplessness.

It brings us to what would make the child feel so helpless? The fact is, the young kids don't have a lot of control over life. They always don't have the understanding and the reasoning until they are about 3 or 4, why things are changing, why they have to stop. "Yes, it's going to take 10 minutes to get there, we have to go now" or "You can't have that because if it breaks, we won't be able to get another one." There is so much that a child has to still learn developmentally to understand that gap between what they are wishing for and what they desire or what they might be afraid of and what can really happen.



So how do we aim more for the self-regulation? This is where, I think, the second point – those warning signs you were referring to – the signaling, is really, really important. We have to, of course, read the child’s signal, and watch what they do and watch how they feel, or see it in the tension in their little bodies – you’ll see their faces scrunching or see them turning red, we see them kind of getting ready to make a move – and the only way we can get in a way to signal them back, is really, really important. This has to be approached with the least amount of signaling that will help, maybe having to stop the behavior where someone can get hurt or something will get broken, which are kind of basically the only two rules we want to use in early life. It can start with, “Uh, uh, uh” or it can start with, “No, no, no.” One of the things you’ll notice, especially with children between about 18-30 months, is you hear them signaling themselves. Sometimes they’ll even say, “No, no, no” and do what they want to do. But nevertheless, it’s such a good indication that they are beginning to get those cues. They are beginning to think, “Oh, is this a good idea or not?” Those early, “No, no, no” or “Oh, oh, oh” really turn into an expression you give them, which conveys, “Hey, is that a good idea? Are you really thinking about what you want to do next?” Once the child is verbal, we can actually say that. While it is very nice to preempt by using a few words or being there with a lot of more kind of moving yourself in the position to give a child the signal, “No, you’re going to break that” or “That’s not for throwing” or “Toys are not for this purpose” and “People aren’t for hitting” and finding some substitutes or turn them for redirecting, and in some cases, even distracting, although distraction is a little tricky. We don’t want to distract a child from a real feeling they are having. We want to help them experience it safely. Using these kinds of signals, which will promote a clear message that you have to regulate and stop yourself will come first, and then of course, when they move to the level of saying “no.”

Overall, especially when a child is young, what are going to be the substitutes for not having what you want when you want it? Whether it’s winning a game or going to McDonald’s or wanting to go to the park – you don’t know it’s going to get dark in a half hour or you don’t know that mommy has all these other errands or you don’t know that somebody is coming to visit or fix the sink. How do we help a child when there are all the inevitable “No’s” – and there are a lot of “no’s” – things they can’t have, but for reasons the child is not yet equipped developmentally to understand. Even telling them won’t work. I think it is actually quite remarkable when children begin to understand delay – when you say, “Oh, just a minute.” That becomes very meaningful to them. Then when you show flexibility in making a minute into five minutes, that’s very useful.



But, for some children, a minute can seem like an hour, and five minutes can seem like a day. So you have to know your child from the point of view of his own reactivity. Think about how to cue the child as to things that are always going to be frustrating that can trigger some of the tantrums. One of the things I am always urging parents to consider, is you don't always have to say "no" right away. Even if you know it's going to be a "no." You know you aren't going to get to the park, you know you aren't going to give the child the candy bar, you know that you aren't going to let them hit their siblings or delay going to bed forever, but you do want to give the child two things. One would be a chance to vote. I remember, both Dr. Greenspan and I had this wonderful mentor, Reginald Lourie, and one of the things he would say again and again to us is that every two year old needs a vote. You're beginning to give a child a chance to choose and pick and how to sense they have a say will really be a very good strategy that will sometimes preempt falling into this helplessness or angry kind of tantrum where you can't get what you want when you want. Or, when you can't get what you want because someone else has it. You know the typical kinds of things we see children struggling with, especially between the ages of two and three, as they begin to kind of learn the social rules of life and you don't always like the social rules. So this is not easy to do. This is where we really have to put ourselves in the child's shoes and realize what a task it is for that child to understand why he can't have what he wants. So at home you put your toy down and it's yours the next minute even though you put it down. If you go to a preschool or a nursery class, and what happens when you put your toy down? Well guess what? It belongs to anyone, anyone who picks it up, gets it. This is quite a rude awakening when a child turns around and wants their toy back, it's not there. This should be the case, again, in other situations where the child does not quite have enough experience, and this is where they need kind of supported, soothing experiences where they learn to negotiate.

A very nice way to preempt tantrums is to woo the child into that kind of negotiating, with or without a lot of complex reasoning. The most common one is turn taking. That's not always negotiating. You may see him tolerating taking turns and hanging in there, but negotiating really means putting yourself into a situation where you understand what the other child also wants, and figure out what kind of deal you can make. Whether it is with a sibling or with parents or a kid in your class or on the playground, it's where we begin to try to encourage the children to make deals. If they can figure out, "Well, if I give you this, can I have that?" or "Well, if you like this one better, I'll take that one" or "Maybe we can do it together" or "Hey, alright, alright, I'll



have to wait until you're done." Sometimes it doesn't work. Sometimes neither child gets it. But if they can get into the process of trying to have a negotiation and expand so that we preempt some of the reactivity, they feel the chance that they will be able to win at some point, that is another way of really preparing the children to handle the frustration and helplessness they can be reduced to.

Another strategy I like to use is where we don't say "no" so quickly from the point of your letting the child express their fantasy or their wish. There is no rush to say "no" unless, of course, there is some immediate danger, like hitting or being hurt or breaking something. So many tantrums are triggered by the child realizing they're not going to be able to do what they want to do, without having the big picture thinking yet. A nice strategy to use here, is not to rush into the "no" but find out what they want or why they want it, "Oh, you want to go to the park? What are you going to do at the park? Are you going to go on the swing or the slide first? Who are you going to see in the park? When you go, do you want to take bubbles or balls?" Just a chance to talk about something that you know you can't have can be a soothing mechanism. It's the same kind of feeling we might have after a long, dark, few months of winter where you think you wish you could be lying on that beautiful, sandy beach in the warm sun. Well, you know you aren't going to get there, but just even thinking about it, wishing for it, can be soothing. It can help you kind of pull back and handle some of the stress or frustration or the fact that you aren't going to be able to do it. And if we can encourage children to kind of think in their minds, to allow them to have the ideas, to work towards this kind of problem solving and negotiating, I think you'll find that even then the child is desperate to go to McDonalds, who at least had laid out a plan, "Yes, I'm going to get French fries and chicken nuggets and this to drink," will feel like you understand them, will feel your empathy, will feel the fact that you know what they really want and will build up that kind of trust that he is really going to get there. So if you say, "We won't go there now, but we will go later after we pick up Johnny from school and finish our errands" or "When Daddy comes home we'll go together," as soon as you can just get into that long back-and-forth conversation, there is that building of the interaction and the intimacy where the trust will follow and the child will be able to tolerate some of the frustration and delays that often cause some of the tantrums.

So don't rush into "no" – give your child a chance to talk about what they wish they could do, what they would want to have. At some point, you could actually talk about and use words like "wish" or make a plan. Very often, if it's a preverbal child, one



nice strategy that often helps is actually drawing the kinds of things they may talk about or even ask some questions. “Oh, when we go to the park (and draw a little swing and draw a little slide)” – even when they can’t talk, they can see you are cueing them. You don’t have to have that photo or text card in hand – even a piece of paper in addition to your supportive, soothing voice, can help the child handle the delay or make the plan. It quickly gives them an anchor to hold onto to regulate or contain some of their feelings or some of their anxiety, maybe about going to an unknown situation. If you can’t actually be there or visit and help the child see what is going to happen to them or in their life, you can draw some of these things and it doesn’t have to be a great art. It can be simple line drawings that help the child maintain their auditory attention. If there is something to look and seeing what they hear, it really helps them take more of what you are saying in.

So there are strategies where you can make a plan, sometimes, and schedule ahead. Often tantrums are triggered with transitions, so this is where, for the preverbal child, having some visual cues can help or drawing it as I just suggested. The other thing I think can help in a child dealing with the issue of “no,” especially once they are verbal, is having these conversations. As we were saying, all of your capacities to cope and to build on how strong your capacities are to communicate, to relate, to interact, to symbolize – and in this case, we have two ways we can symbolize. We can have the conversation. I mentioned negotiating before, well an extension of that would be instead of giving the “no” – especially if you have a reactive child – would be to really ask their opinion. Instead of saying “no” you might say you disagree. Or you might say, “Well, I may have another idea” or “Tell me why you feel that way, what is your opinion.” As you kind of do this all the time – have your agreements, have your disagreements, you are setting the platform and setting the stage to tolerate the upheaval that often might come and end up as a tantrum. Whether it is immediate stress, it could be a family change, it could be new anxiety related to changes in school or work patterns or a move, or even when it is related to environmental things like the changes in rebuilding and changing a house or painting. Even what you eat – can tell the child begin to appreciate the effect, even though they have such a strong desire. This kind of back-and-forth conversation is really what gives you then the chance to cope and preempt those tantrums that may come later on.

So there are many, many ways we can help children with things that will result in a tantrum. But you can see it really relies on having the foundation or continuing to



build this foundation for the back-and-forth, in recognizing the child's reactivity or underreactivity, and signaling and getting them to recognize their own signals, it's taking a developmental perspective where we really think what something means to a child from his point of view, and respect it and show that we understand it and can empathize with it. Then it means really thinking of ways of how to set limits that really get the child to internalize and self regulate as they develop some of the capacities to reason and understand time and space and deal with some of the realities, which is you don't always get what you want.

So those would be some other things I would add.

SG: Thank you, Serena. Let me just add two more comments to extend some of the things you just very, very usefully highlighted. One of the things is to underline what Serena is saying, is that the tantrum, like any other behavior in our DIR Floortime Model®, should be used as a basis for improving communication. This means, for many children, improving gestural communication, preverbal communication. So when Serena is talking about negotiation, and not saying “no,” I think as a good general principle is try to minimize saying “no” not because there aren't “no's” in the world – there are. But because that cuts off communication and negotiation and finding a solution. What you are trying to do is teach your child, particularly the one who is prone to tantrums, who usually hasn't mastered what we call Level 4 – Continuous Flow of Shared Social Problem Solving – usually they haven't mastered that that well. If they had, they would negotiate rather than tantrum. So for example, if the child wants to go outside, you could say, “No, it's raining.” Then you get a tantrum. Or, the child is trying to go out and opening the door and you could say, “What do you want to do, sweetheart?” If the child has a few words and gestures, they might point to the door, go “Out, out” or “Open” or you might help them and say, “Do you want to ‘open’ door and go out?” Then they may nod their head and are ready to tantrum if you don't, then you can say, “Let's look out the window and show me what you want to do.” Then they go to the window and they point and you can point and show them that it's raining. If it's warm, you can even open the window and put your hand out and invite them to put their hand out and feel the water. You can say, “It's raining, we'll get wet.” If they indicate that they want to go on the slide, you may have one in your basement or in your playroom, and you can say, “Let's do that one and then later we can go outside.” So instead of saying “no” you try to negotiate and compromise. You try to increase your gestural communication. Ultimately, the long term solution to the tantrums, is just as



Serena is saying, improving the child's ability for interactive gesturing where they can problem solve with you, and then using words to problem solve, either in fantasy or in reality by finding other solutions that work for both of you. So ultimately, that is the long term solution, and you want to use the "almost tantrum" or the tantrum you intervene with as a basis for improving communication because that gets you to your long-term goal.

Then, the other thing, just for one minute before we stop, is for the child who has hit or bit or broken things, and does require some sanctions, to know that these are "no-no's" – that free speech for when they cross the line. After they settle down, after they calm down and you're calm and they're calm, then the sanction should be introduced, whether it is loss of an activity or TV privileges (which should be very minimal to begin with anyhow because we want mostly interaction), or whether it is being part of the extra clean-up crew, whatever you think is appropriate. The only no-no for the sanctions, is we don't want isolation. We don't want to lock a child in their room and abandon them because we are working on the fundamental relationships. But other sanctions, such as loss of privileges, loss of favorite activities, a time-out - but you being in the room and maybe have a stern discussion rather than a warm, cuddly, fun play – all of those are very appropriate sanctions. They should occur after the child has calmed down.

The sanctions shouldn't be a surprise to the child because the family constitution, about what is permissible and not permissible, in terms of hitting, biting, pushing, breaking – should be negotiated way in advance and literally posted. For the child who is not verbal, in pictures what the no-no's are, the child who is non verbal can be shown through your gestures what is a no-no and also shown what the sanctions are going to be by having experienced them a few times, then even there you can use pictures to support it. For the verbal child, you can explain it and then write it down. For the reading child, you can have it posted on the refrigerator as the family constitution. So it won't be a surprise when a half hour later, when everybody is calm, is a discussion what the sanctions are for this particular behavior. Will you get another meltdown at that time? You very well may. But here is where persistence and anticipating things – "Sweetheart, I know you're not going to like this, but we did cross the line, and what do you think is going to happen? What do you think is appropriate based on what we talked about before (if it is a verbal child)?" So the child participates in anticipating with you what the sanctions are going to be. You can be the "good cop"



who doesn't like the sanctions either, but they are a necessary part of life as the child has overstepped the boundaries and that helps the child feel secure and safe.

Ultimately, the firm, persistent, gentle giant approach with firm sanctions when the child has crossed the line, helps the child feel secure in the long run. But, in the short run, increase that communication just as Serena was suggesting.

Well, we hope this has been helpful in terms of our talk about meltdowns. We added another principle to the principles – one is when you are in the middle of it, keep it simple, calm down; two, look for the warning signals; three, look for the causes and therefore preventions so you can get a regulating environment; and four, use even the tantrum as an opportunity for communication – increasing gesturing, and then increasing verbal exchanges and problem solving discussions, and even fantasy play around the conflictual issues because in the long run, that is the solution to the tantrum.

Serena, thank you very much.

SW: You're welcome.

SG: Next week we will not have a show, but in two weeks – I have to be away next week – but in two weeks we will resume. In two weeks, we will try to take your questions. We have a lot of questions that have been building up on topics so in two weeks will be the most frequent questions asked in the last few months. We'll address those in two weeks. We'll speak to you then, and please tune in. In the meantime, I hope you all have a good happy and healthy time, and thank you for joining us.

SW: Bye, bye everyone.