Meltdown Management

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WHO HAS MELTDOWNS?

TBI
ASD
ANXIETY
ODD/DMDD
TRAUMA
ANYONE

People don’t always understand why I cry or get angry
because they can’t see The Annoying Thing.
I wish they knew it was real and that I’m not just trying to be difficult.
It’s all about the brain....
Research:

Neural responses regarding eye gaze are different in people with autism (2011 Journal of Autism and Developmental Disorders)

Overconnectivity and underconnectivity means that the brain can’t coordinate the messages (2012 University of Amsterdam)

Research is also looking at:
- brain structure
- the topology of the grey matter
- white matter tracts

Every autistic brain is different “Same Behavior, Different Brains” (2009 Journal of Neurodevelopmental Disorders)

Genetic research
**Frontal lobes:**
- Personality
- Social skills
- Judgement
- Emotion regulation
- Movement
- Speech
- Reasoning
- Executive function

**Temporal lobes:**
- Memory
- Combine senses with memory
- Object recognition
- Understanding language
- Art/Music
- Speech
- Hearing
- Combine senses with memory
- Object recognition
- Understanding language

**Thalamus:**
- Spatial attention
- Depth perception
- Relay center for information from the body to brain.
- Consciousness
- Alertness
- Sleep

**Basal Ganglia:**
- Memory
- Emotion
- Coordination of muscle movement

**Parietal lobes:**
- Depth perception
- Spatial orientation
- Receives sensory input
- Language processing

**Occipital lobes:**
- Sight
- Processing visual information

**Cerebellum:**
- Balance
- Learning
- Emotion regulation
- Coordinate movement
- Attention

**Brainstem:**
- Breathing
- Heart rate
- Blood flow throughout the body
- Motor and sensory pathways cross sides of the body

**Motor strip**

**Sensory strip**
FOR ALL CHILDREN; WHEN DOES MISCOMMUNICATION, INDIVIDUALITY OR A STRONG SENSE OF SELF BECOME PATHOLOGY?

Making the diagnosis:
Differentiate by whether or not the child is behaving in a deliberate or spiteful manner. Is the behavior vindictive or retaliation? Look at their face...do they look angry or confused? Is there a logic to the behavior? Is there a pattern?

Children who have meltdowns or behave “disrespectfully” do so because of frustration, sensory overload, misinterpretation of communication, inability to be flexible, difficulties transitioning from one activity to another, etc. They often see themselves on an intellectual level with adults so will have no problem challenging someone in authority. Accuracy of facts is critical. Understand the developmental level of the child.
<table>
<thead>
<tr>
<th>Tantrum</th>
<th>Meltdown</th>
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</thead>
<tbody>
<tr>
<td><strong>A)</strong> Driven by a want or goal</td>
<td><strong>A)</strong> Driven by a reaction to something.</td>
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<tr>
<td><strong>B)</strong> Usually its because they want something</td>
<td><strong>B)</strong> A reaction to overload or feeling overwhelmed.</td>
</tr>
<tr>
<td><strong>C)</strong> Child checks to make sure you are paying attention to the behavior.</td>
<td><strong>C)</strong> Child does not care if anyone is paying attention.</td>
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<tr>
<td><strong>D)</strong> Child acts this way in front of an audience.</td>
<td><strong>D)</strong> Behavior will continue even without an audience.</td>
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<tr>
<td><strong>E)</strong> Once the child gets what they want, the behavior will end abruptly.</td>
<td><strong>E)</strong> There is no goal. The behavior will only cease once the child has calmed down or when a loved one has helped them to regain control.</td>
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<tr>
<td><strong>F)</strong> No Autonomic Nervous System signs. When goal is achieved, child returns to normal activity in under 5 minutes.</td>
<td><strong>F)</strong> Autonomic Nervous System signs seen which are not under the child’s control such as red ears, sweating, flatulence, dilated pupils. Will take 45-60 minutes to return to normal activity.</td>
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KEEP CALM
Its an Autistic Meltdown
NOT Bad Behavior
Many issues are neurologically based differences that we identify through behavior.

Interventions must be about the brain.
Stress and trauma limit a child’s ability to learn.

Chronic stress and trauma will alter brain development and subsequent emotional/behavioral development.

Children who have experienced trauma live in a constant state of alarm. Therefore, they attend more to non-verbal cues such as tone of voice, facial expressions and body posture.

Neuroplasticity is critical to understand so that we teach to the brain.

Trauma informed care will support all children.
HOW THE BRAIN RESPONDS TO STRESS
When individuals experience stress, their minds and bodies react in adaptive ways, altering their states of arousal and styles of thinking. The greater the stressor or threat, the more regressed the thinking and behavior; other physiological responses increase heart and respiration rates, as well as the body's muscle tone. Because children with a history of trauma can be in a persistent state of alarm, they are less capable of concentrating in the classroom.

* Primary brain region; secondary brain region
** Reading social cues to interpret the perceived threat
SOURCE: Bruce D. Perry, The ChildTrauma Academy
### Executive Functioning Skills

<table>
<thead>
<tr>
<th>Define Problem/Assess Need</th>
<th>Self-Motivate/Self-Direct</th>
<th>Monitor Progress</th>
<th>Regulate Emotions and Behavior</th>
</tr>
</thead>
<tbody>
<tr>
<td>Apply Prior Knowledge</td>
<td>Initiate Action/Implement Plan</td>
<td>Exhibit Flexibility</td>
<td>Sustain Effort</td>
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<tr>
<td>Set Goals</td>
<td>Concentrate/Stay Focused</td>
<td>Make Decisions/Solve Problems</td>
<td>Complete Tasks/Achieve Goals</td>
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<tr>
<td>Organize/Prioritize</td>
<td>Manage Time</td>
<td>Make Adjustments/Corrective Actions</td>
<td>Evaluate Results</td>
</tr>
<tr>
<td>Develop Plan</td>
<td>Manage Resources</td>
<td>Ask for Help</td>
<td>Plan to Improve</td>
</tr>
</tbody>
</table>

Executive Functioning Skills
Self Regulation Skills

- Perceive
- Initiate
- Inhibit
- Modulate Adjust
- Gauge
- Focus Attention
- Problem solving
- Focus Effort
- Shift
- Hold
- Manipulate
- Organize
- Anticipate
- Wait
It can be confusing. If in doubt... treat it as a meltdown.
“NEXT TIME YOUR CHILD HAS A MELTDOWN, SEE THEIR SMALLNESS. OBSERVE HOW THEIR EMOTIONS ARE LARGER THAN THEY ARE. IN THAT MOMENT, YOU WILL FEEL EMPATHY INSTEAD OF EXASPERATION.”

Ashley Soderlund Ph.D.
Meltdowns happen and you need to watch them....
Types of Meltdowns

- Fight
- Flight
- Freeze
Three Stages of a Meltdown

- Rumbling
- Rage
- Recovery

Too Late to Intervene

Intervene Now
Recognize the cues

- Growling
- Tense
- Red face
- Pacing
- Swearing
- Clenched fists, kicking
- Running
- Hiding or going to quiet place
- Refusal, being stuck
It looks like chaos during meltdowns...

- If we don’t see meltdowns
  - We can’t determine triggers
  - We can’t try new interventions
  - We won’t know what works and what doesn’t work

- If it was about behavior then rewards/consequences would work consistently for the child and they wouldn’t continue to have issues

- We can’t help if we demand compliance and don’t allow the child to behave as they usually would and understand it.
Meltdown Protocol

Meltdowns are common for children with developmental or emotional issues and they are dreaded. They are often the reason caregivers don’t take their children out in public and why they avoid family gatherings. Caregivers feel shame, guilt and a loss of control. They often speak of unbearable exhaustion.

**Features of a Meltdown:**

- During a meltdown, a child does not look or care if those around him are reacting to his behavior. But those around the child can provide additional triggers and escalate the meltdown.

- A child in the middle of a meltdown often does not consider their own or others safety.
They don’t always give obvious clues about why they are melting down.

A child in the meltdown mode has no interest or involvement in the social situation.

Meltdowns seem to move along under their own power and may end suddenly or wind down slowly.

The meltdown usually begins with a specific trigger and, after a point, nothing can satisfy the child until the meltdown has run its course.

A meltdown often gives the feeling that no one is in control.
While it is preferable to prevent meltdowns, it is also important to see how the child reacts to triggers and responds to calming strategies.

Meltdowns are brain related. Executive functioning skills are at a minimum.

Do not discipline for the meltdown. You have missed your teachable moment for the child. It can be a learning moment for everyone else.
Meeting a child’s aggression with adult aggression only adds fuel to the fire.

To extinguish aggressive behaviour meet it with calmness and compassion.

Being calm isn’t passive - it’s mature. Be it to teach it.

*Rebecca Eanes*

*Artist: Yuta Onoda*
Determine the **function of the behavior** or what caused the meltdown (most important). Meltdowns may happen because of ....

- Lagging skills
- Communication
- Social interactions
- Sensory issues
- Overwhelmed
- Executive skills
- Anxious, depressed or hyperactive
- Tired
- In pain, not feeling well
- Interventions... i.e. child is task based not time based
Sensory Issues:

- Sound
- Taste
- Smell
- Touch
- Texture
- Visual
- Sensory seeking
Behind every challenging behavior is an unsolved problem or lagging skill.

Challenging behavior often occurs when the demand being placed on the child exceeds his capacity to respond adaptively.

One needs to determine what thinking skill the child is lacking so that thinking skill can be taught.

One needs to determine the triggers/antecedents: the what, who, when and where

The goal is to develop a plan with the child that resolves the problem in a realistic and mutually satisfactory manner.
- Stickers, earning privileges, time outs, grounding etc.... are “unnatural or artificial consequences”.
- These can actually interfere with gathering the information needed about what skills the child needs to learn.
- Children learn to lie to in order to avoid consequences.
- Look for consequences other than the adult imposed variety
- Use the least toxic response.
- Identify the unsolved problem and resolve it.
- Always start with empathy.

Ross Greene “Raising Humans”
If a child can't read, we teach
If a child can't tie their shoes, we teach If a child can't ride a bike, we teach
If a child can't behave appropriately, we punish...

Watch for "false attributions".
Interventions: Teaching the new skills

- Determine what skills the child is lacking
- Teach the skill and practice in real life over and over and over and over
- To generalize, change the setting/situation for the skill to be practiced in
- Change: the physical or social setting, nature of the task, the cues
- Teach through positive coaching, may need to increase support in times of change or stress
- Problem solve when something doesn’t work-change your hypothesis and your approach
- Find compensatory strategies: assistive technology
- Use the interventions with everyone in the class or at home
Interventions

- Change how people interact with the child
- Work on recognition of difficulties.
- Work on problem solving (Ross Greene)
- Use common interventions and language ("5 minutes to shift")
- Learning is a process
- Don’t give up too soon
- Don’t make too many changes at one time
- Audio or video tape cues: especially for decision making, self regulation, calming activities
- Distract... You are NOT rewarding bad behavior
Use cues to fit the needs

Remember about time based vs activity based transitions. Be task based whenever possible.

Use the special interests

Incorporate the 5 senses in calming

Relationships are more important than stuff

Share knowledge with team members and learn from each other.

If something works, do more of it

Be more flexible when others cannot.

Use non verbal communication during shut down melt downs.
Officer gets on floor to comfort a child who was having a “bad day”.
- Offer feedback and guidance rather than correction or discipline (“instead of X, what do you think about Y”)
- Support all efforts to correct the error
- Build in variety and choice
- Interact with child positively
- Change your lens
- Talk out loud
- Neither the child nor you fail...the strategy does
- Be willing to throw out your plans when necessary.
Give opportunity to redo mistakes; everyone makes mistakes, one mistake doesn’t have to ruin your day, you can always start over

Offer feedback rather than correction or discipline; Nurtured Heart approach

Build a multifaceted tool box with the child. This toolbox should be easily accessible.

Don’t make the child earn calming strategies.

Be strength based and look for successes.

If you document negative behaviors, be sure to document positive ones too with as much detail. And start with those.
Using a special interest....

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\begin{align*}
1 + \frac{1}{2} + \frac{1}{4} + \frac{1}{8} + \frac{3}{4} &= \frac{4}{4} + \frac{2}{4} = 1 + \frac{1}{2} \\
\frac{1}{4} + \frac{1}{4} &= \frac{2}{4} = \frac{1}{2}
\end{align*}
\]
Brushing My Teeth
## 5 Point Scale

### What it feels like...

#### 5: Out of control
- Feels like you’re a creeper and are about to EXPLODE
- Screaming
- Yelling
- Crying
- Swearing
- Throw or kick things
- Feel like I want to die

**I can:**
- Tell mom and dad
- Leave me ALONE, no talking

#### 4: Starting to lose it
- Looks a lot like Steve
- Head feels hot
- Start to say mean things
- Stomach is upset

**I can:**
- Call mom and dad
- Go somewhere calm
- Use visual cues

#### 3: ANXIOUS/WORRIED
- Feels like an Enderman and you want to get away or jump out of your skin
- Don’t want to talk about it
- Upset
- Talk loud and a lot
- Can’t sit still
- Thoughts get stuck

**I can:**
- Talk about a special interest, go to safe space
- Use my tools like drawing or talking, remember I have Steve in my pocket

#### 2: I THINK I CAN HANDLE THIS
- Works like Steve who has to work hard and stay focused
- Things might be getting tough, but I can stop to take a break
- catchy suggestions
- Ask for help
- Can use my tools: like drawing or talking, remember I have Steve in my pocket

**I can:**
- Stay in class
- Listen to suggestions
- Ask for help

#### 1: JUST RIGHT
- Feels like a villager who is just going about his day feeling good about himself
- Happy
- Calm
- Peaceful
- Nothing bothers me
- Interested in what others are doing

**I can:**
- Keep doing what I am doing
YOU KNOW, HOBBS, SOME DAYS EVEN MY LUCKY ROCKETSHIP UNDERPANTS DON'T HELP.

WELL, YOU'VE DONE ALL YOU CAN DO.
Quick Tips….

<table>
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<tr>
<th>Stay calm</th>
<th>Talk less, don’t lecture or threaten</th>
<th>Constructive destruction</th>
</tr>
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<tbody>
<tr>
<td>Empathize</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Stay back</td>
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<tr>
<td>Move throwable objects out of the way</td>
<td>Don’t touch or hold</td>
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<tr>
<td>Let the meltdown run its course</td>
<td>As soon as you are able, distract (you are not rewarding bad behavior)</td>
<td>Let it go</td>
</tr>
</tbody>
</table>

Children do well if they **CAN**

- Ross W. Greene
When adults rethink challenging kids, amazing things can happen.
Any questions:

- Call:
  - 218-443-2837

- Email:
  - emily.colerhanson@annecenter.org
Resources

- Temple Grandin, PhD
  www.templegrandin.com
- Michelle Garcia Winner: Social Thinking
  www.socialthinking.com
- Howard Glasser
  www.difficultchild.com
- Child Trauma Academy
  www.childtrauma.org
- Wright’s Law
  www.wrightslaw.com