

CAR

Mental Health Consultation
Mt. Pocono
Staff: Carolann & Mary
Report: January 2008

Potential Suggestions for Child "Meltdowns"

- I am a big believer in, whenever possible, intervening in the environment as opposed to intervening with the child during preschool years. Young children are so exquisitely attuned to their environments that one can often change their behavior by making changes in the setting or context (i.e., engineering the environment). Thus, I'd encourage you all to reflect on your classroom environment to see if there might be any helpful changes that could be made. Toward that end, I'll mention two that occur to me, but there may be others as well.
 - o First, this is a very dense physical space. With a full complement of children and staff this room is very crowded; throw in a few visitors or TSSs and I would think this room would border on uncomfortable; indeed, it is difficult to conduct group activities effectively anywhere except at the tables because of the cramped conditions. There is a mountain of evidence in social psychology on the negative effects of density/crowding on individual behavior. One way to decrease density is to reduce the number of people in the space - probably not a realistic solution in your situation. The other strategy is to modify the space to open it up a bit. You have limitations based on the physical facility and perhaps in your performance standards, but I wonder if there are any changes you could make in the physical set-up that might reduce the density. Can one of your centers be eliminated, or available on a rotating basis? Can your cubbies be moved to the main entrance room? These are just loose suggestions on my part; you all will know better what might be workable. But, I'd encourage you to think 'outside the box' (in your case, a very tight box...) within the

constraints of your programmatic needs and demands.

- o Second, in the behavior plan that I was shown for one of the children we discussed last week (whose name now escapes me), there was mention of the 'high ambient level of activity in this classroom' (I'm paraphrasing from my memory). This is an important and accurate (I think) observation. There is a fairly high level of movement, commotion, activity, volume, etc. routinely in this classroom. This ambient level has the potential of inadvertently increasing children's arousal levels, even without any evident tantrums or behavioral disorganization. Children's periodic misbehavior usually raises that ambient level a notch or two, and then staff often has to ratchet up their response in the face of the misbehavior - resulting in an escalation loop. Are there curricular, programmatic or behavioral changes that would facilitate reduced ambient levels? For one very small example, is there a visual or auditory signal that can be used when children's attention needs to be recaptured instead of doing so verbally (e.g., turning off the lights; the Cub Scouts's proverbial "sign's up" [i.e., raising the 2-fingered Scout sign]; etc.)?
- The following are some generic suggestions for child "meltdowns" given that I don't know the particulars of these behaviors in particular children.
 - o In the same vein of my 'engineering the environment' suggestions: are the triggers known for the meltdowns? If yes, are there changes you can make in the environment or in classroom routines that would eliminate/minimize the triggers? Is it an event that triggers a tantrum (e.g., settling into a nap)? Are there relationships that are more likely to result in a tantrum (e.g., siblings; 2 high-energy, impulsive children)? Are there times of day that are more likely to yield tantrums? If you can identify triggers, then you can find ways to intervene proactively (as opposed to reactively), usually meaning additional staff involvement or support.

- o That last point - proactive v. reactive approaches - is true as a general principle, too. For example, if I recall correctly, one of your children had been described to you as having been in a "funk" since he had awoken that day. Such a piece of information should serve as a fairly clear signal that that child might require extra help or support at least for the early part of the day. I'm not saying that you all didn't do this. I'm just using it as an example of how proactive interventions might forestall the need for reactive measures.
- o And, if proactive efforts don't work, then try to intervene as early as possible in the disorganizing moment/event. Intervening earlier gives you more options in your intervention, especially providing the child with the opportunity to recover on her/his own. Then you have the opportunity for a 3- or 4-step intervention, each time allowing the child a chance to make choices about her/his own behavior before you increase your direct involvement.
- o This is easier said than done, but: maintain your own levels of arousal in the low or moderate ranges even in the face of a child's high level of arousal (during a meltdown). Young children will respond to your state as much as they respond to their own feelings.
- o Many young children feel quite uncomfortable and frightened when they disorganize behaviorally or experience a meltdown. It can be reassuring to them to hear a valued adult say, "It must be scary when you feel so mad. But, I can help you when you feel mad, and I'm not going to let you hurt yourself or anyone else." I recognize that this sort of conversation may not be easy to have in a classroom context.
- o I'd err on the side of less rather than more verbal interaction during meltdowns, particularly conversation that requires the child to be self-reflective or helps you to understand the "cause" of the meltdown. Save those conversations for a

better teachable moment. Focus your limited verbal interactions with the child on helping her/him regain control and reorganize her/his behavior. For example, if you've had to take the step of holding a child, then the only comments from you ought to be occasional statements (like), "As soon as you're able to sit quietly on your own, I'll let go."

I'm not sure that any of these generic comments have been helpful in the particular circumstances of the children in this classroom who experience regular meltdowns. If these comments have been less than fully helpful, then I can visit with staff some more to understand better specific children or circumstances.

Roger D. Phillips, Ph.D.