Self-Regulation/Self-Control: Tips and Strategies

When it comes to difficult behaviors in young children, anger and aggression can be especially challenging in childcare. These behaviors have powerful effects on both children and adults, and can be the most frustrating and disruptive encounters you have in your childcare setting. Some severe behavioral problems are associated with a combination of genetic and environmental factors which are beyond the child’s control. This is not to excuse children from taking responsibility for their behavior but rather to focus them on real issues of their lives for which they must develop solutions.

Anger includes thoughts and feelings which can lead to aggressive behavior. The child physically experiences anger in the way that she “feels,” including disappointment, irritability, lack of power and frustration. The child’s behaviors or actions are attempts to gain control of a situation or put things back the way “they should be”. Hitting, kicking and shouting are all common in the young child who is angry. If left to continue without learning healthy alternatives, the behaviors can escalate, leaving the child feeling confused and even guilty about losing control.

Anger is almost always preceded by an event or a behavior that triggers it. For children the trigger is usually a challenge to his idea of how things should be or an unmet personal need. Common triggers are the actions or reactions of others, difficult or unexpected situations, conflict, disagreement, frustration, certain actions, words, and unpleasant or traumatic memories. Kids explode or have a melt-down when they are frustrated. The child is delayed in development of the skills of flexibility, adaptability and frustration tolerance or has significant difficulty applying these skills when they are most needed. It is a skill deficit orientation, not a motivation deficit orientation. This is not an excuse, it is an explanation.

Children can be taught to identify their personal warning signs and triggers of anger which include feelings, thoughts, and actions. Adults can help young children understand that, while they are entitled to feel mad, they must learn to express their anger (and other difficult feelings) in ways that do not hurt themselves or others.

Below is a list of a number of ways caregivers can help children gain self-control and avoid damaging behavior when they are angry. Not all strategies will work for all children. What works for one child will not necessarily work for another. These strategies are provided as ideas only.

♦ Model appropriate anger management behaviors yourself:
  ♦ Don’t overreact or let your emotions get the best of you. State your feelings when you get angry and frustrated and explain to the children how you are going to handle those feelings.
  ♦ Reframe your own responses to children who are aggressive or acting out. Do not get angry or frustrated yourself, and make sure to tell the children you understand that they are angry.

♦ Communicate effectively to both connect with the child and deliver messages that help them calm down:


- Get on the same level with the child and use friendly eye contact and gentle gestures to draw the child’s attention.
- Communicate with a firm but gently voice; be clear and consistent.
- Empathize with children so they understand that everyone feels angry sometimes, encourage them to move on, and redirect them to productive outlets for their emotions.

- Get the child to breath through the nose to a count of four and exhale through the mouth to a count of eight. This increases the oxygen to the brain and can sometimes soothe the child.

- Calming Activities: Experiment and find out what feels good for an individual child. Ask, **what can desensitize a child** when bombarded with stressors?
  - *Proprioceptive Activities* (sense of what the muscles and joints feel)
    - Joint compression
    - Push down on shoulders, head, arms
    - Roll up tightly in a blanket
    - Walking
  - *Vestibular Activities* (sense of overall movement and gravity – these activities may also wind a child up so observe child closely for a reaction)
    - Slow swinging
    - Trampoline or mini trampoline
    - Jump rope
    - Rocking chair
    - Sprint running
    - Riding toys
  - *Deep Pressure* (a combination of tactile and proprioception)
    - Squeeze hands/feet
    - Bear hug
    - Ace bandage wrap
    - Swim cap
    - Firm massage
    - Weighted blanket (X-ray apron works great)
    - Support belt
    - Write should or angle weights
    - Make child into a sandwich between sofa cushions or mats
    - Weighted vest
Deep muscle work:
- Pushing (moving wheelbarrow full of dirt, moving furniture)
- Pulling (bungee rope attached to tree or post)
- Pressing (crushing aluminum cans in can crusher, crumbling paper)
- Carrying heavy items from one place to another

Oral (chewing, sucking, crunching)
- Chewing helps to organize
- Sucking helps to calm
- Crunching is alerting

Tactile Activities (your skin is your largest sense organ and contains the most receptors to the brain)
- Vibration (vibration bug or toy)
- Brushing (medical brush, bath glove, loofah)
- Massage
- Sensory roller
- Wind (small fan)

Prepare a Special Calming Place –
- Establish a safe and private space inside a large box or some time of enclosure
- Offer soothing furniture and comfort items in that space
  - Lots of pillows. Cushions, bean bag chair
  - Rocking chair
  - Blanket
  - Stuffed animals
  - Squishy balls

Teach the child to label his/her feelings and express their feelings using words

Teach the child self-calming techniques.
- Deep breathing
- Play dough
- Listening to calming, soothing music using headphones
- Watching calming video – For example, Living Arts makes audio and video mood enhancing DVDs for the TV screen. They have summer surf, aquarium, sunsets, wooded scenes, etc., or buy a calming, soothing screen saver for the computer. Some websites you can go to find sensory comfort products: www.sensorycomfort.com/relaxati.htm
Sensory Activities

- Water play with warm water
- Finger painting
- Sandbox
- Crumple, crinkle paper
- Easel painting

Provide guided imagery/visualization for the child. Guided visualization is a form of meditation in which you as the adult help the child to envision some type of peaceful, relaxing scene or experience.

- Find a comfortable place
- Have the child close her eyes and help her relax her body
- Have the child take 3 or 4 deep breaths (inhale through the nose and exhale through the mouth)
- Guide the child through a peaceful, relaxing scene. For example, say, "Think of yourself walking along a path with lots of flowers around you and green trees and a gentle breeze. The sun is shining and it is warm and quiet except for the birds singing. You sit down on the green grass under a tree and you can smell the flowers. What color are the flowers? .....What kind of flowers are they? ..... What do you see on the ground around you? .......... What do you hear? .......... What do you smell?" etc.

Use self-calming cards created by Elizabeth Crary with a child who has lost self-control. Each of the 24 illustrated cards in this deck of cards describes how a child can soothe himself/herself with a different method—physical, auditory/verbal, visual, creative, self-nurturer and humor. Another 16 cards provide step-by-step instructions for games and activities to use with the calming cards. Written in both English and Spanish, these cards and the accompanying instruction sheet explain how parents and teachers can introduce the cards and the concept of self-calming. The materials also discuss how adults can model the use of such self-soothing techniques as taking a warm bath, making a joke to defuse a situation or singing a silly song. Each calming method includes suggested activities for a range of ages, from toddler to adult. These cards can be purchased from Parenting Press found on the following web site: www.parentingpress.com/b_calmed.html

- Encourage the child to complete an “I” statement by filling in the blanks: “I feel ___________ when you ___________ because ___________. and I want ___________. “

- Children may need cues and reminders to help them substitute positive behaviors for negative ones. Anticipate a child’s outburst (spend time observing the child so you know
what the triggers are) and provide the child with a signal or sign to go to the calming place set up in the classroom. For example, if one of the triggers for a child is proximity to other children in large groups and this occasion occurs (like jostling and bumping while waiting in line, or a child sitting too close at circle time), hold up a piece of red paper to signal to the child to “STOP” and get herself to the calming place you have arranged in the classroom. You will have to talk with the child about this signal before hand so she knows what it means and what to do when she sees it.

♦ Children can be helped to put a name to their problems in terms that point the way to a solutions. For example, a child diagnosed as having ADHD could see the problem as “impulsiveness” and the solution “learning to think before you act”. The child can be helped to understand that being impulsive is a trait characteristic of his diagnosis which people learn to deal with in different ways. Or, another example might be a child who is experiencing a great deal of stress or trauma in his life and has frequent and severe “melt-downs” or “outbursts” with the solution being to recognize when that is happening and to engage in self-calming activities before the “melt-down”.

♦ Teach problem solving/conflict resolution skills. Children with behavioral problems often act without thinking about the consequences of what they are doing. Teaching problem-solving skills can be an effective way to enhance self-control and communication, while encouraging more adaptive behaviors. Children should be taught a five-step conflict resolution procedure. For very young children who need some help and support in this process, the adult may have to verbalize several or all of the steps for the children involved in the conflict.
  o Name/describe the problem
  o Brainstorm solutions
  o Evaluate the solutions and choose the best one.
  o Try it out.
  o Modify the chosen solution as necessary.

♦ For children who exhibit difficult behaviors during transitions:
  o Reduce waiting time – make sure one staff person is ready to lead the children in the next activity as the other staff person is finishing up the current activity or plan verbal or auditory games to keep children engaged while changing from one activity to another. Ideas for transition time activities can be found in Jean Feldman’s *Transition Time: Let’s Do Something Different* or J. Graces’ *Preschool Games: Terrific Transitional Activities for Your preschool Classroom*.
  o Provide a visual schedule of routines and activities that the child can see and know what is coming next
  o Provide a 3 or 4 minute pre-warning cue to let child know when an activity is going to change and what will happen next

♦ Provide clear, concrete visual supports with behavior development strategies to promote independent reasoning skills. Describe the unacceptable behaviors – be specific (child yells, throws a tantrum by lying on the floor kicking and yelling, hit/kicks another child,
throws toys, etc.). Describe the replacement behaviors you would like to see instead of the difficult behavior (go to the calming center, use words to work through conflicts with another child, engage in any of the above self-calming techniques, etc.) Divide an 8 ½ by 11 sheet of paper into six squares. Using a red marker or colored pencil, draw stick people inside red squares depicting 3 of the unacceptable, inappropriate. Using a green maker or colored pencil, draw stick people inside green squares depicting 3 of the replacement behaviors. Laminate the pictures or place them inside a plastic sleeve. Schedule a regular time every morning (upon school arrival is suggested) to talk about the red or STOP behaviors and the green or GO behaviors. Gradually fade the adult cueing and morning talks about expected behaviors. For instance, as some time goes by, the teacher could simply bring out the pictures and ask the child which behaviors she thinks she can perform today, or which behaviors will she not exhibit today. Or say, “Instead of Red __________, I should Green __________” and ask the child to fill in the blanks.

When children exhibit explosive or “melt-down” behavior, the adult must become the surrogate frontal lobe and do the thinking for the child that he is unable to do for himself in the midst of frustration. By doing this over and over again, the child’s going to learn how to do it and then he won’t need you anymore.

- Let the child know you know there’s a problem and you understand what it is. This is the code to access the child’s frontal lobe. Say back to the child what you heard him say to you or to another child.

- Invite the child to a problem solving party. The first word to the invitation is “Let’s” –“Let’s think how we can work that out”. The adult is doing the thinking for him. You are a problem solving team. You can’t have a pre-arranged solution. Don’t revert to expressing a desire to collaboratively problem solve and then provide the solution by yourself.

- When a child’s brain is not working well because of his anger/frustration/stress, the adult acting as the surrogate frontal lobe can:
  - help the child stay calm in the midst of the anger/frustration/stress
  - help the child define the problem, help the child anticipate the problem
  - help the child generate solutions
  - help the child evaluate alternative solutions
  - help the child take another’s perspective
  - help the child see the “big picture”
  - help the child delay gratification, help the child with communication skills
  - help the child accurately interpret the situation