

Web-Based Radio Show

How Parents Can Help their Children to Better Attend and Engage How to Deal with Tantrums and Meltdowns:

Strategies to help children better attend and engage; how to keep a continuous flow of back-and-forth interaction going; and the steps to limit setting

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Good morning. This is Dr. Greenspan welcoming you to our web-based radio show. We have a very interesting show today where we're going to cover a few different topics – some of the ones that I get questions about, and Serena gets questions about, most frequently. So these are very practical, very down to earth, and very concrete.

One of the main questions, and the first one we're going to tackle today is, "How do I help my child pay attention better because when I try to talk to him or interact with him, or even just engage him in gestures or involve him in any type of learning task, he just 'tunes out' – he ignores me?"

Frequently, what I've observed here in my little playroom is that Mommy and Daddy will be trying to interest little Johnny in a toy and every time they present something to little Johnny and put it in front of him, he just turns away and goes to some other object, or just begins staring at what he finds to be a visually interesting stimulus and doesn't look at Mommy or the toy that Mommy is offering. As a consequence, Mommy and Daddy get frustrated and don't know what to do. Sometimes, typically, we'll see Daddy hold little Johnny or hold his face and say, "Look at me!" or, alternatively, we'll see where Daddy or Mommy might just start talking and keep talking even though little Johnny or Susie is basically ignoring them and tuning them out. But Mommy and Daddy are talking, and they're moving the puppets, and they're moving the car and the child is playing by himself and not paying attention to what Mommy and Daddy are doing.


So, the two extremes are becoming overly controlling of the child's body, which doesn't work – trying to hold his face to get him to look at you – or basically the parents



tuning out the fact that he or she is not looking at you and they are just talking and playing as though the child were involved but, in fact, he's not. So, typically, I'll see parents saying, "What's this? Oh! This is a little dolly. Isn't the dolly sweet? What's the dolly say? Oh, she just said 'hello'! What are you going to say back? Oh! Are you going to say 'hello' back?" And there's this dialog, which is actually quite a sweet dialog, but it's the parent or the caregiver or the therapist talking to themselves, basically, and little Johnny or Susie is off looking at something out the window or wandering around the room, or they're just playing with another toy and maybe banging a car.

So, the first question is, "How do you help the child attend to you and enter into a state of shared attention?" Also, with an older child, who's already verbal, who already can answer, "What's this?" "Mommy, this is a car," or even answer "why" questions, "Why do you want to go outside?" "Because I want to play." But these same two patterns may occur at any given moment when the child is tuning out the parent and may be, again, preoccupied with playing with a toy, etc. So, what is the first step to do? Now, this will sound remarkably obvious to everyone and embarrassingly simple and probably your first reaction will be, "Well, this is of no help; any dummy would know that! Why is he telling me this?" But the first step is get Johnny or Susie's attention. In other words, see that as your first task. Don't bypass it to get to interaction or to get to a verbal exchange or to get to pretend play. In other words, often the simpler a suggestion sounds, which is "get the child's attention," we frequently bypass it and start talking to the child or start trying to get the child to imitate our motor gestures or to interact with us by moving a car back and forth, etc. So, don't bypass the first step.


Once we take that first step of making our goal getting his or her attention, how do we do that? Then we begin working on the child's sensory system and motor system and emotional system all together to harness that child's attention. One of the first qualities, I find, that's important that helps kids pay attention that's often ignored is to use the affect – one's own affect or emotions – in a compelling way by combining it with multi-sensory input that helps the child organize. Each child will be a little bit different, but the common feature for many children is to have more expectation in your voice. A lot of parents and caregivers have gotten discouraged and when I ask them why they're talking in a monotone or why they're talking past their child, rather than trying to really pull the child in. It's "Well, he never looks at me, never pays attention to me, and, therefore, why bother?" Or "I've gotten discouraged; I guess I've lost my expectations." So, really energize that expectation.



So let's say you're trying to show the child, especially a child who's playing with a new car – and you're trying to build on the child's interest in cars, and you say, "Oh! I've got another one here – a red car!" You're trying to show the child a red car to see if he'll trade with you or exchange with you and you just say, "Look what I've got! A red car!" You can say, "Look what I've got. A red car" and he ignores you. Or you say, "LOOK!" with an exclamation point. "I've got something!" or you can put your hand on his blue car and do it slow motion because if you do it too fast he'll just turn away. But if you say, "Here I come! I'm going to put my hand on your blue car . . . I'VE GOT IT NOW! Look! What do you want?" But there's got to be high affect and high expectation in your voice, and you've got to slow down the rhythm with high expectation. So you slow down the rhythm in your voice and instead of, "Look what I've got a blue car for you" you say, "LOOK! I've got a BLUE car – look! Look, buddy! Look, look!" and it's got to be like you're really compelling, so each "look" has to be an exclamation point and you put your hand in front of the car or you cover it before the child has it, and say, "I got your BLUE car," and the child turns away, so you show it to him. It's sort of a bait and run, so you show it to him and often, momentarily, he'll look and then you cover it again, but in slow motion so it's not so fast that he loses it from his vision, and then you get a moment more of his attention.

So, the first strategy is high expectation in your voice, high affect, and make it visually compelling by getting inside his vision. Make the movement pattern slow motion rather than fast, because that helps the child focus. Many of the children with special needs have tracking problems, so if you move fast they lose you, and "out of sight is out of mind." So move it very, very slowly. That's level one.


Level two is increasing the other sensory support. So, what you may find is that helping the child pay attention might be having an arm behind the child on the child's back, giving him firm pressure. That could be you or it could be another caregiver while you're trying to get the child's attention. Maybe it's sort of a pulsating pressure on the back to the child's breathing rate so it's a nice, slow pulsating pressure in and out with your arms. Or the same thing with his hands or on his legs – it might be movement where Daddy kind of creates a little movement pattern, like holding him with firm pressure or swinging him. One might use a little spandex with some children to give them firm pressure against their body to help them pay attention and focus a little more. But, alternatively, in the dynamics of the interaction, one can combine the visual input, which now is more slowly moved in front of the child, with the affect or emotion in your voice, and with holding the child's hand. Let's say the child is distracted and



playing with something else, so you can kind of hold his hand and say, “Oh, I’ve got something BETTER! Look what I’ve got!” or hold his hand while he’s holding the object and say, “Oh, I’ve got your little HAND! I’ve got your little hand and I’ve got your little car! Do you want it back? Do you want it back?” You’re nodding your head “yes” and the child may nod at you and copy your nod, and what do you have? You have attention. He’s nodding his head that he wants his hand back and the car that’s in his hand, and that’s terrific because now you’ve got your first step – you’ve got attention. So you’ve got to get the child’s attention.

Now, typically what I find – I would say with about at least fifty percent of the children – simply the first step of increasing affect and expectation, and not bypassing getting attention, works. And I mean really energizing up. You want to energize up on the one hand, but not overload the child on the other. Many of the children have mixed sensory reactivity and when they have mixed sensory reactivity, they can be easily sensory over responsive, which means if you get too loud they get overloaded and more distractible. On the other hand, if you don’t energize up enough you’ll lose them. So what you’re doing is sometimes talking in a slow way, but not in a monotone. So, it’s not a “look at me Johnny,” which won’t get his attention, or “look at the blue car.” It’s slower, but with intonation and high affect, but not loud affect. So it’s, “Look! . . . LOOK! . . . Look at the blue car! . . . LOOK at what I have. Look HERE. I’ve got . . . your . . . HAND! I’ve GOT it! I’ve got it!” So you see my rhythm is slow, but with high intonation and high affect, almost like a stage actor conveying to the audience a particular kind of emotion. That’s just the key.


So, the principles are high affect, but not necessarily loud, slow voice rhythm, high expectation in your voice, increasing sensory support, and increasing sensory awareness, like by touching the hand. Sometimes what you do with children who are distracted by their own motor movements, because they’re moving around, their arms are waving and they’re moving around – you can tell you’re competing with their own motor system so they’re just not paying attention because their motor planning problems and constantly being in motion – I’ll hold their hands and move their hands in rhythm to my voice, “Look! Look!” and I’m holding their hands and moving their hands in rhythm to my voice – maybe I’m holding one hand and the other hand may be behind them on their back or Daddy may be behind them creating pulsating pressure on their back – so that all helps them organize and pay a little more attention.



Now what I want to do is on this first item is to see if Serena Weider, who's been listening in, wants to add some further thoughts on this. So, Serena, would you like to add some further thoughts on this?

Serena Weider: Good morning. Well, I think you really captured it very well. The use of your voice has to be very, very compelling. Not only that, it has to be combined with the steps you just outlined. Sometimes I like to capture it in just a few phrases to keep in mind. One, the child has to see what they hear, so when you're using your voice, you also want to be sure you're in front of the child. You want to be sure you pace it the way you were just describing with the rhythm and the fluctuation the movements. But, even that, it seems so simple as you were saying, but it's very, very important that we capture attention through all the senses, and we have to position ourselves to be to do that. You want to get down at the level of the child. You want to make sure that whatever you do, you do in front where they can see you because if they see what they can hear, they can begin to connect what you're saying with the affect and the rhythm. You want to be sure that you just don't keep going. Very often, if you don't have the attention, the child just misses the opportunity to learn and it isn't that they're not interested, but that if they don't see it, which is usually the first primary modality, they may not notice what you're showing them or where you're putting it or whether you're coming up closer. So, we use the voice to kind of pull them in and we're down there at their level, right in front, making our moves, and that really, really goes a long way. I just want to reiterate that without getting that attention the chances of doing the next step – of keeping it going – are much, much harder.


I think the other thing to remember is you just have to move, too. You have to move with the child. Often, you will try to get the child to come to you or to look at you, but you can increase the chance of getting the attention and then keeping the engagement going just by really being, very quickly, right there, and not necessarily waiting for the child to turn around or walk over to you or come see what you have, which is more typically done. You'll have more of a chance of succeeding if you make these moves quickly, although not in abrupt ways, but just be sure to maintain that rhythm. I think the voice is the most compelling way of getting the attention, and it can be in very simple gestures. You will find children will even respond to a vocal gesture of "Huh!" "Oh!" "Wow!" or "Hey!" Even very simple words will get them to notice you and then begin to be ready to take in what you are going to say or do. I think that expands on what you were saying.



Dr. Greenspan: Okay, great, Serena, thank you. Now I'm going to come around to the next question, which is actually a related question that takes us to the next segment, which is many parents ask the question as follows: "I can get my child to attend to me a little bit and open and close one or two circles of communication and interact with me a little bit, but I can't get the 'continuous flow,' going – I can't get 20, 30, 40 circles of back-and-forth interaction going."

They may have already gotten the child to be verbal and even to do a little bit of pretending, but the missing piece is the continuous back-and-forth interaction and parents feel frustrated that little Johnny's still tuned out quite a bit. Even though they get him to pay attention, they can't sustain it and can't get these long chains of back-and-forth interaction. So the question is, "How do I sustain attention and sustain interaction and sustain engagement?" Here, the principle that I find most important is, stated very, very succinctly, is get the child to do to you, rather than you doing to the child. The biggest challenge clinicians have, even very experienced clinicians – and we have many colleagues who are working on our DIR/Floortime model – so even very experienced clinicians have the same challenge, so parents shouldn't feel bad at all because they're in very good company when they have this challenge, which is turning it around so instead of doing to the child, we challenge the child – we seduce the child – to want to do to us.

So, let me give a concrete example. A child is lying down on the floor, facedown, and ignoring us. We can pick him up, we can swing him, we can put a doll in his face, we can tickle him, or we can put a doll under his shirt so he takes it out, but in all these things, we're doing to him. Or we can say to ourselves, "What do we need to do to get him to want to do something to us?" This just happened in my office the other day – a very talented Mommy simply lay down on her child. "Oh, you're sleepy? Okay, I'm going to lie down on you." The firm pressure was reassuring, but then after a moment he wanted her off. So, then, he took the initiative and not only gestured with his arm for her to get off, he also said, "Get off!" This is a child who only occasionally used a phrase, so we got him to take the initiative to do to Mommy. We created an action where, admittedly, we were doing to something by lying on him, but it was geared to getting him to take the initiative, as opposed to us continuing to do something to him. So, it's okay to do something building on the child's interests. He's lying down so we can lay on top of him – we're building on his theme, but we're actively building on his theme, we're not just passively lying next to him, for example, which creates no




motivation. So we're saying to ourselves, "How do I create motivation where he'll want to do something to us, where he'll take the initiative?" The word "initiative" is key.

Most of the children who have severe mental special needs challenges lack initiative. In fact, when we're looking at videotapes – now I try for each family that I see to look at the videotapes of the child as a baby because it gives me an important clue as how to work with that child – I notice from many of the videotapes that the earliest sign of something being a challenge is the child not taking the initiative in social interaction – being more of a responder than an initiative-taker. It's a very subtle feature because a child may be repeating words, may be identifying pictures in a book, so it may look fine from the point of view of early cognition and language and no one raises a red flag that there's something amiss, but when I look at the child at three or four months of age, or even two months of age, I may see a child who's waiting to be entertained, in a sense, as opposed to the child who's reaching out to the world. So the initiative has to be harnessed, and what we find is that it's never too late to harness that initiative and it makes all the difference in the world.

So, we always have to be thinking indirectly when we're doing Floortime with a child: How do we get little Johnny or Susie to do to us rather than us do to him, even if it we're going to start it off by doing something to him, something that gets not just a reaction, but a purposeful initiative-taking, planned action. So, another example of this would be when you're being playfully obstructive with the child. The child is aimlessly wandering around so you're a little barking dog getting caught between his feet and he has to go around you or step over you or move his car through your car to get to where the car is going. All of these require the child to take initiative and we're creating the circumstances for that initiative. You're playing the airplane game – and this is getting the child is giggling and laughing and looking at you and very engaged – but you can play the airplane game where you just move him around and tell him, "You're going up and down," or you move him for two seconds and then he's got to tell you, "Go" or "Stop." He's got to tell you "Up," or "Down," or he's got to tell you if it's a "faster," or "slower" airplane.


So, again, you're always challenging the child to take initiative. Frequently, we see this challenge play out where we don't get the continuous flow of back-and-forth interaction in two ways: We see it with the child who's not yet verbal, who may have low muscle tone and may be a more passive child who's very under reactive and, therefore, hard to get to take initiative. So there we have to do things like providing



firm pressure, lying on the child until he finally says, “Get off.” We really have to do a lot to motivate the child. We may need to use a lot of sensory support, like movement, but he, then, has to direct the movement and tell us where to go. If we’re a “horsy,” we’re a “horsy” who doesn’t know where to go, so he’s got to say, “Stop” or “Go,” or “Go there.” So we create a lot of sensory support, tactile support, movement in space, joint compression, proprioception, etc., but the child becomes in charge of it.

Then we have the child who’s more verbal and maybe into pretend play a little bit, maybe imaginative, and it’s very easy there to carry the drama – in other words, to build on his verbal skills and carry the drama for him. “OH! My wolf is coming after your little doggie. Where are you going to go? Where are you going to go?” and then we’re in the kind of drama where the child is filling in the sentences like a sentence completion. The child may say, “I’m going to Grandma’s,” but that’s still filling in the sentence. On the other hand, we can be more expectant to a verbal child who already does some pretend play and we say, “I’m a wolf! I’m going to GET you! I’m going to get you . . . Here I come” in slow motion. Then, “What are you going to do?” and look for more creativity and initiative on the child’s part and see where the child’s going to turn the tables on you. “I’m going to hide in Grandma’s house!” “You are? You are?” and always look for the child to take more initiative, to take charge of the drama. Always see who’s moving the plot along at the next step – who’s coming up with the next plot theme. If you find yourself doing it, you’re taking a little too much of the initiative. Even if the child is verbally responding, you’re controlling more the rhythm of the play. On the other hand, if the child is moving it along every time you reach a dead end – and many parents say to me, “Well, but the child doesn’t have any ideas” and then we demonstrate that the child does have idea, but it may not be the idea we thought it was.


So if you have more expectation in your voice – you pause a little but aren’t being quiet – and you talk to the child about what the next step is going to be, the child may surprise you. The child may even switch gears to something else outside of that theme. Instead of, “The doll went into the woods,” the child may go get a pillow and “knock down the house.” “You knocked down the house! Why’d you do that?!” and that might take you off in a different pattern. “I’m the wolf! I’m knocking down houses.” You know, the child may decide to turn the passive into the active and become the aggressor. That’s fine. It’s related, actually, to the theme – it may seem like a different theme at the moment, but the idea is to harness the child’s creativity even if it seems unrelated because we want the child creating transitions. If we don’t understand the transition, if it’s a verbal child who’s answering “why” questions, we can then ask,



“Wait! You were running, now you’re eating up all the children! What happened?” “I became a monster. Monsters are . . .” blah blah blah. “Why is it good to be a monster?” The child may tell you. So, the child may actually explain the transition to you. The key here is whether it’s a child who’s just beginning to gesture and just beginning to move, or a child who’s already using words and pretending, get the child doing to you.

The other aspect of this is as the child is doing to you, challenge the child to keeping doing to you, to keep taking the initiative. So one circle leads to another circle and another circle. Don’t take charge but don’t get passive, yourself. That’s the hardest thing because the caregiver or the therapist either tends to take charge or tends to get passive. When we talk about Floortime and following the child’s lead, we’re talking about following the child’s interest in order to challenge the child to take initiative. So, initiative taking is key. Of all the kids I see, even kids who are functionally at a very advanced level with a lot of verbal skills, about 80 to 90 percent of them still don’t have a continuous flow of back-and-forth emotional gesturing with a lot of initiative-taking. In other words, they’re not taking charge of the drama. Until they do take charge of the interaction, take more initiative and sustain more back-and-forth interaction they won’t have long conversations, even if they’re verbal. If they’re preverbal they won’t have long, interactive play sequences. It’s in that capacity that we localize in stage four that we call the continuous flow that really separates a child who has, for example, an autistic spectrum pattern from a child who doesn’t. Once a child becomes a continuous flow interactor, he moves away from the symptoms ordinarily associated with autistic spectrum disorders. But if they still have problems with that, even if they’re highly verbal, then you still see the repetitiveness; you still see the self-stimulatory behaviors. As you get a child to take more initiative and into a continuous flow of back-and-forth interaction, the child learns to interact with his environment in a new way, and he becomes more regulated and doesn’t need to self-stimulate as much by looking at fans. He doesn’t need to line up things and be repetitive or perseverative because he can now interact with his world in an initiative-taking and creative way.

So, this is so critical a step, and yet I would say in the whole DIR/Floortime model, it’s the hardest step for everyone – parents, children, and clinicians – because it gets at the core problem of the child. I would say in looking at the videotapes of when the children were little, for the children this is the most important feature that makes development hard for them. They tend to have a hard time attaching their own emotions, their own desires and wishes, their own affects, to their motor patterns and, later, to their emerging language or symbols. They have a hard time with that initiative




because to take initiative you've got to have a wish or a desire, in other words, an emotion, that's telling you, "Hey, I want that apple pie," or "I want to play with that toy," or "I want to go outside" and then you take the initiative and use the word or use the gesture to get what you want. That starts the circle of communication and that pulls the parents in so that they become an interactive partner, or the teacher, or the playmate in peer play. But if you don't have that skill, if you don't take the initiative, then everything becomes more difficult.

So the first thing we need to do – and if we work with a little baby, like an eighth-month old or a six-month old – it's the same thing: Entice and seduce the child to take the initiative. Have something to reach for, to persist, so that becomes the key. Use the initiative to get the continuous flow going and if the child's already verbal, you're doing two things at once: harnessing the verbal and imaginative skills, but with your eye on the initiative taking as a critical component of it.


Serena, do you want to add on to that?

Serena Weider: Yes, I think, just a few points. When we talk about getting that attention it's really very important to make sure you pay attention to what your child is doing. We never really see the children as doing nothing. The wonderful example you gave of the child lying on the floor and you were kind of treating the child as a pillow, you were creating a problem for the child to solve. But join the child in whatever he's doing even if you think he's not doing anything. If he's wandering, you can join him by being a human obstacle course. So take a moment to pay very close attention because you will discover that we can help the child expand on what he's doing in the sense of using his initiative to either continue doing it if you create a problem around it by joining him, or he may push you away or they may go in the other direction. Pay a lot of attention to whether you're changing the topic. It's so important to hang in there in following the child's lead, not for the comment and not for limitation, but to really not give up in that moment and think, "Oh, he's not doing anything," and to then change the topic. I see that happening so often that the parent sees a child doing something so they show him something similar to it, rather than kind of deepening the plot around what the child has done. Or the child may not close too many circles but moves on and you can just pick up something that he seemed interested in and just giving it to him, saying, "Here, don't forget this" and give them the cue to keep going with something that already was working but you can keep playing with in this interactive way.



It's so useful to really think of what your child is doing as purposeful because once there's some purpose or you can treat it as if it's purposeful, you might be able then to encourage that initiative in very simple ways and the child feels you're investing in what they want, rather than kind of distracting them with what you think might be related or you think might be of interest. So, yes, we try to harness the attention and we might notice something, but you're trying to notice the things or get the child to look at something that is playing off their intent. So intention and initiative go together and if we treat things as intentional, then we're saying, "Okay, this is what you're doing, it's your initiative, you're doing it on purpose and we'll join you in it." Then we can get this expansion going. But, too often I find that everyone's too worried about what's going to interest the child and, sure, you might know there are things he likes and you want to have them out there. Whether it's a symbolic interest and the child walks in and there's the stuff he loves, or something new and novel, or whether it's a sensory interest or a motor interest, we want to make it available, we want to create the environment that's compelling so the child will be able to say, "Hey, that's what I want to do," or "That's what I had fun doing." But let them take that first step and we look and see what they're looking at so we can encourage and support it in all the different ways. Intent and initiative go together and we lend our affect to what they seem to be wanting, so it's not just a desire to have something, it could be to do something, and it could be to do nothing. But treat it as an intentional approach and then you don't have to worry. I mean, one of the wonderful advantages of the Floortime model is you don't have to decide what to do first. Let the child and trust your child as able to give you that cue and capture the attention around it.


Dr. Greenspan: Yes, thank you Serena. Just as an example of what Serena was saying – two very good examples – of that: Rosemary White, who's a gifted occupational therapist practicing Floortime and using the DIR/Floortime, likes to give the example of helping the child meet his own sensory needs by being purposeful and doing it. So, let's say a version of that was carried out recently by a colleague in a Floortime play session with a child where the child was staring – using as a visual stim – at something that looked like a fence in the playroom. So, the gifted therapist put her hand by the fence and began moving her hand back-and-forth inside of the fence making it look similar to the fence but making it an even more interesting visual. That led the child to begin visually stimulating on the person's hand. Then the person began moving their hand closer to the child and doing more interesting, interactive things with the hand, drawing the child into the person rather than the inanimate object. In that example, we did



exactly what Serena was just saying. We built on the child's natural intention and interest, but we did something else with it by joining the child's sensory world – in this case, the visual stim – becoming part of it, and then drawing the child into interaction off it.

So, rather than discouraging the visual stim, we became a better visual stim, but a human visual stim, and then we became a two-way interactive communicator with the child, and then it's no longer a visual stim, now it's an interaction. I always tell parents that once something becomes interactive it's no longer perseverative or self-stimulatory. It's now interactive. So, if a child's lining up his toys and you start handing him better toys to line up and he looks at you and smiles at you and then you hide the toy and he has to search in your hand for it, no longer would it just be perseveration, now it's creative problem-solving in order to build a line of cars. It's subtler when you provide the actual sensory input the child is seeking and making it interactive. The child who's banging into things may be seeking firm pressure and instead of just saying, "No, don't touch that" or "Don't do that," offer the child firm pressure, but human firm pressure where you can give him pulsating movement on his back. For the child who's running around aimlessly, maybe he wants to enter into the swinging game and, again, has to tell you when to start and when to stop and what to do. So, that becomes a time when we can provide the sensory support the child is seeking in a self-stimulatory way in a purposeful, meaningful, interactive way.


Related to this example, also picking up on what Serena was saying, is how you extend more and more circles, which is so hard. Here, if a child wants to go out of the room and the parents just says, "No," I always coach the parents, "No, no – let him go to the door and you go to the door with him and put your foot by the door so he can't open it and see how many circles you can get with him pointing or gesturing or using words" (if the child has words to tell you "open" or "out") or teach him new words. See if you can get Daddy to help open the door. See how many circles you can get around opening the door." The parent or therapist will say to me, often, "But I don't want him to go outside and won't this just frustrate him?" The point is you're not trying to frustrate your child, but you're trying to use his motivation of wanting to go out to get circles. So, you always have to use what the child is trying to do. Invariably what happens as we get 10 circles when Daddy is gotten to help open the door and the child is saying the word, "open" or pointing or saying, "Now, not later" or the child is just gesturing to Mommy and Mommy is playing confused, like "which hand should I be using" if the child is taking her left hand to the door and "Oh, it's not strong enough," so



the child is pushing her right hand to the door. As we're getting 10, 15, 20 circles, the child is learning to learn and interact. You're giving the child a tool that will keep the child from being frustrated in the future, and then what you can do after 10 minutes of circles, if it's a nice day, is go outside for a few minutes or go into the other room and then come back. If you can't go outside because it's raining or cold, at that point go to the window and show the child that it's cold, etc., and at that point the child may have a little meltdown. So be it. The child would have had a meltdown ten minutes ago anyhow, and what I'll guarantee you is that the meltdown will be significantly less 10 minutes later after you've had a good interaction because the good interaction is, in many respects, very satisfying to the child and at least he knows he's been understood – you knew what he wanted – and you're trying your best to explain to him why that wish can't be met at the moment.

Serena Weider: Right, and it's that soothing that would really help diminish that meltdown. But I think what you're describing so well is how we do use a problem-solving approach not to thwart the child from doing what they want, but to actually help them get there. You know, if the door is stuck, "Can you pull? Can you pull harder? How are we going to do that – can someone else help us pull?" If the child is ready to be a little more symbolic, you could say, "Where's the key?" and search for the key. Children know to use a key to open the door. We can treat it as if there's a reason to open the door. "Oh, do you want to get something in the other room? We'll look for it while we're trying to pull the door open." Make things a little bit more complex for the child who can understand that language, but it's going to be the affect that conveys the problem. "Oh, no, is it stuck!? Can we pull?" When the child feels you're on his side, it's very important for the child to feel you appreciate him and want to help the child do what he wants to do, but you're creating these little problems and little solutions to get to what he wants. And therefore he's doing a lot of steps and also learning how to solve a problem and developing the language for those problems for a reason. Don't just think it's an escape or the child "wants to get away from me" or "Oh, no, I'll never get him back in here," but try to treat it around the intent that the child has. If they feel you're on their side, that tantrum won't be triggered quite in the same way because you're showing them, "Oh, no what are we going to do?" and that will convey that you're not trying to stop them.

I think related to this is this concept, too, especially where children have motor planning problems – they don't quite know what to do next – they often will undo what you want and think of that reverse – of undoing what you just did if you put something




somewhere and they don't want it, maybe they don't know where to go next with the truck, but they know how to undo what you just did. So, the continuous message is that especially when there's a desire – because it may not just be for the bubbles because you may not know what the child wishes for – help them, join them, convey that affect, and then the child will let you accompany him through this longer pattern of opening and closing the circles.

Dr. Greenspan: Thank you, Serena. So, the key ideas here are to get the child doing to you. Always insert yourself into the problem-solving actions that Serena is describing so that the child is doing to you and you're part of the interaction. So it's not just the child and the door, but the child, you, and the door. You're the vehicle for getting that door open, so you're getting engagement and two-way communication and initiative taking all at the same time. Then, for the verbal child or the child who's just beginning to be verbal or creative or symbolic, build in the verbal and the pretend elements to it, for example, "Maybe Mr. Bear can help us open the door! He looks pretty big – what do you think?" etc.

Now, what I want to do is shift to the third question that we often get, and it actually relates to the first two, and that has to do with the big subhead, which we'll underline, which is The Steps to Limit Setting. Invariably children, all children – children without special needs and children with special needs – need help with limit setting, with curbing their aggressions, curbing their impulsivity, and learning to control and regulate their behavior. How do we help the child do this? Here's where both for children without special needs, as well as for children with special needs, there are suggestions galore, from time-outs to tough love to indulgence, etc., etc., etc. What are the keys?


What's important to remember is that the key to limit setting is to use it in such a way that the child can learn to set limits for him or herself, learn what's appropriate and inappropriate, learn to respect the needs of other people, learn to be protective, learn to be a caring person, and learn to have judgment. I mean, that's what we're going for. So, we're going for more than not just pushing or shoving, but we're going for the ability to think through these situations as you get older and bigger and the stakes get higher so you have judgment and so you can set limits for yourself. You can decide that it's appropriate to push on the football field but not appropriate to push in the classroom. How does a child learn that?



Well, the child actually learns limit setting through our continuous flow of back-and-forth interaction. Remember we were talking just a moment ago about getting the child to do to you, and opening and closing more circles of communication in a row – getting to 20, 30 circles. When you’re doing that, and you’re having a continuous back-and-forth interaction, the child is learning to read your emotions and your signals. If you put your hand up like the corner policeman – stop – the child is learning to recognize what that means, even if the child doesn’t understand the word, “stop.” A 17- or 18-month old child without challenges will understand that hand gesture because they’re learning to read signals. They also learn to read a smile with a nodding head saying, “It’s okay to jump in the water.” So whether you put the hand up or not will depend on how the child determines whether something is safe or dangerous. The child is looking at your facial expression and your hand gestures and your tone of voice to determine and figure out what to do in his or her world.

Now, we have to help children with special needs and even children who have trouble with decoding sounds or making sense of their sights. We have to help children with special needs also learn to read these signals because that is the ultimate self limit-setting capacity because when you can read signals, then as a nine-year old you can look to your teacher or look to your peer for what’s acceptable and unacceptable. You don’t have trouble, then, going into people’s faces and not recognizing you’re making them uncomfortable by getting too close to them or thinking it’s fun to pinch someone. If you’re doing it, you know you’re doing it maliciously and with the full intention of being mean, rather than thinking it’s just something that’s sweet and cute, like a little baby might think.


So, the key is teaching children how to read signals. So how do we do that while we’re also setting a limit for a child who is about to hit someone or a child about to spit or bite? It’s important to recognize that the first step is to help the child expand their back-and-forth interactions with gestures to include all the emotional feelings of life. So, you’re doing it around hugs or kisses – what we might call “dependency of closeness” – you’re also doing it around curiosity – going to the door, looking out the window, and trying new toys. But you’re also doing it around limit setting. So, it’s the same principle: When you need to set a limit, you’re using the same principle you are when you’re exploring new territory, like opening the door, or when you’re exploring hugs or kisses. You want to get as many back-and-forth interactions as possible. It’s the same thing with setting a limit.



So, the child is about to throw the toy – you can see it in their eyes. Before you grab the child and hold him and say he can't do that, put your hand up and make a limit-setting gesture, "No, no, no!!" Be very animated; increase the affect in your voice. Now, most kids who are about to do something naughty, even if they're not verbal, when I increase the vocal tone of my voice, I get their attention and they're inhibited for just a split second, at least, as my voice goes up and I become very animated and I'm like a corner policeman in a traffic jam and my arms are moving and I'm letting the child know, "No, no, no, no, no!" So, start with increasing vocal tone, accompanied by visual input with your hand gestures. Then, if necessary, add on other sensory support, like holding the child's hands and shaking your head "No" and increasing your affect, so the child now can't do what he's trying to do and you're giving him tactile support, you're getting him involved in rhythmic motor interaction, and using vocal tone and very animated facial expressions. So, you're giving the child multi-sensory gestural input that he's got to stop what he's doing and this is a "no-no," as opposed to if the child were exploring a new toy and we would be nodding our head and smiling and saying, "Oh, boy, look at that toy!" The tone is different.


So, we have to help the child discriminate. So, we can think of this as an eight-step program:

1. Increase your affect and your vocal tone.
2. Add on, almost simultaneously, motor gestures so the child visually sees the limit-setting gesture you're offering, like holding your hand up, as in "stop" or "whoa," or shaking your head, "no."
3. Add on tactile support, if needed, by holding the child's hand, providing firm pressure on his body to get him to pay attention and inhibit.
4. Step four would be, obviously, trying to distract the child to something else where they can satisfy that need. Maybe the child is wanting to squish something that's sensitive in his hand, so give the child something else to squish, like a ball, rather than your favorite piece of jewelry or china that the child's about to squish. The child's trying to put something in his mouth he shouldn't put in his mouth. Again, maybe there's something you can help put in his mouth that creates oral-motor pressure patterns that the child is seeking, as well as sensory pressure in the mouth. Maybe



there's a particular type of chewy food or a particular plaything that you and your occupational therapist have worked out to provide pressure in the mouth. So, try a distraction.


5. Then, as a fifth step, obviously use that sensory support to contain the child so the child doesn't get the satisfaction of biting their brother and sister or scratching their brother and sister or hurting Mommy or Daddy. So, then you may have to – if the child is beginning to go out of control and steps one through four have not yet worked – do step five, where you actually contain the child physically. Here, the principle for step five is to use the minimal amount of containment needed to curb the worrisome behavior. So, it's like the principle of the least constraining or restrictive setting for the child's education. Here, you should be the least restrictive you can be in the limit setting. So, often this may involve being behind the child so the child isn't scratching, holding them in a bear hug, gently with a lot of firm pressure to give sensory support, which helps them organize, and maybe rhythmically moving with them, while holding their hands, as well as their bodies from behind in a nice, firm big bear hug. Now to do step five, obviously, you have to be quick on your feet and you have to know your child, so you have to anticipate before the child scratches, hits, or bites you what's about to happen. You can go to step five quickly, and steps one through four can occur very quickly, so don't think, "Well, I haven't got time to go through steps one through four; by that time the child will already have bitten me." You can raise your voice, put your hand up, hold the child's hand, and try a distraction all within five seconds, while moving out of the child's way so they can't actually bite you or hit you, and moving to the back of the child where you may have to contain the child. With a child who goes from zero to sixty in two seconds, you may get to that level five very, very quickly, within two seconds. As the child gets better at this – and you get better – you'll stretch it out more, and then you'll need to contain the child. There, the goal is to contain the child until you can get his body relaxed. For some children, the act of containing may rev them up and that may not be the best way to contain them. You may have to just distance yourself from the child and encourage the child with your voice to calm down and settle down and make sure your child is in a safe place. You may have to contain him momentarily to get him into a safe place and then give him some space to unwind, where he can't hurt himself or break anything or hurt you, and move a little bit away from him and let him calm down. Maybe in that setting there are some things he can distract himself with that are soothing – soothing music or soothing toys that he likes, or a bean bag where he can get some firm pressure for himself. So, I think this has to be individually worked out. I would say that level five is a calming, containing experience with you, or with you and then the environment, and that it has to be tailored to each



child to fit their profile. Here is where the sensory integration trained occupational therapist would be especially helpful, in tailoring this to the child's profile.


6. There are a few other elements that are important to emphasize that are to be done after you calm the child down, but not during it. So, principle number six is, "Never throw fuel on a fire." So don't talk to the child about how he "did a bad thing" and don't try to get the verbal child to apologize in the midst of a tantrum or the aggressive act because you're overloading an already overloaded child who's disregulated or out of control. Let the child calm down first. Ten minutes later, after the child is calm, then if he's a verbal child, have a discussion with the child. "What happened? Why did it happen?" Understand it from the child's perspective and problem-solve. "What can we do next time to handle the situation without the aggression – using words?" etc. So, there, you can have a problem-solving discussion, but the problem-solving discussion with the verbal child cannot be a lecture. It has to be more Socratic and a two-way discussion, where the child is explaining it the best they can, if they're verbal, why they did it, how they were feeling, what they consider to be alternatives, and how they anticipate feeling the next time a similar situation arises, and how they might handle it differently by using their words or avoiding the situation, if it's in a peer situation or something, or where they get into a conflict with a parent, etc.

7. The next step, the seventh step in our eight steps to limit setting is, "What is the appropriate sanction?" If the child has overstepped the line, for example hit or hurt or broken something, it is appropriate, often, to have a sanction, particularly if it's not the first time. The first time you may be able to say, "Well, he didn't know," and stop with level six. But, if it's not the first time, you go to level seven where the child should have a sanction that they have to do. This can vary from family to family and from culture to culture. It could be a time out, where they have to interrupt their favorite activity and sit quietly with you in the room. It could be missing their favorite activities, like TV shows, etc. You don't want to remove developmentally useful activities, like playing with a peer, for example. The sanction could be helping remedy what they did – if they threw their toys around, then now they have to be chief of the clean-up crew and maybe clean up other things in the house and do some extra work to work off the sanction. Again, what the sanction should be is what a family is comfortable with – it's less critical what it is, as long as it doesn't remove developmentally appropriate experiences and as long as it doesn't isolate a child who already tends to be self-absorbed or withdrawn. Don't put him in his room alone, because that's developmentally a negative experience. So you don't want to remove developmentally helpful experiences or create developmentally negative experiences. You want to have a sanction that, as Henry Kissinger said, is enough so that it makes the



other guy pay attention and motivate him to do better next time. Again, this should vary from family to family. Different cultural backgrounds and different family cultures will have different ideas about how this can best to do this. It needs to be something that both Mom and Dad agree on because if one is being harsh and the other, therefore, is being anxious, the child sees that and it makes the child anxious. So, if there's a difference of a opinion between the parents my point is this: It's not important what the sanction is, it's important that they agree on it. So find a compromise they can both live with and the child sees their relaxed posture if they're two parents at home – or if there's a grandparent living at home – that all the adults kind of agree upon. The sanctions at school don't have to be the same ones at home. The child can get used to different sanctions, but when it's in one setting the teacher and the aide should agree at school, for example, and if it's in the home setting, the parents should agree, or the grandparents or the aunts – whoever is with the child – or the babysitter.


8. So, those are the seven steps. Now, there's an eighth step to limit setting, which is, Ongoing limit setting. This helps prevent you to need these seven steps in the future. The ongoing thing is to help the child be a better leader and responder to gestures, particularly limit-setting gestures, since that's what we're talking about. But remember, gestures communicate love and devotion, like hugs and kisses. They communicate curiosity and assertiveness and exploration. They communicate constructive expressions of anger, like saying, "I'm mad," or grimacing with your face and pointing with your hands and shaking with your fists. So, gestures communicate all the different feelings of life, but they also communicate limit setting. So, for the child who has trouble with limit setting, take advantage of "non-nuclear battles," of conventional battles. In other words, help the child get used to limit setting in small and simple ways, so the eighth step is, "Look for opportunities to have the child do things." If it's a preverbal child, use gestures. "Pick up that toy!" and then don't pick up the toys for the child. Help the child be a good camper and fight your battle over whether or not he's going to pick up the toy. Don't make it into a big royal meltdown, but work on it. Maybe you pick up three, he picks up one and then he gets to do something he really wants to do. The next time he picks up two, and you pick up two, and then, eventually, he's picking up three, you're picking up one, and eventually he's picking up all four. Do it gradually – it may get the child to be a good camper and a cooperater through gestural interaction. For the verbal child, do it with verbal collaboration, "Come on!" with a lot of gesturing. So, play treasure hunt games where the child has to follow your cues, even with gestures to find a toy he wants or with words. Again, you're getting interaction going and you're getting the child to follow the rules of the game, which is all part of what limit-setting is – the rules of life. So, you can then put into your semi-structured play or your problem-solving oriented play lots of rule-based games,



interactions, treasure hunts, picking up toys, etc., where the child's having to follow your guidelines, your cues. This is a little different from the spontaneous Floortime where we're working more on curiosity and more on assertiveness and more on expansiveness and more on dependency and hugs and kisses and loving kinds of things. But even as part of Floortime as you'll be cleaning up, or the child wants to do something you don't want him to do, there's an opportunity for the limit-setting gestures. You can create semi-structured Floortime problem-solving interactions around the particular kinds of games I've been talking about. So, the eighth principle is take advantage of small, non-meltdown type activities to teach the child about following guidelines and limits and rules so that they can eventually follow the rules of life and understand them.

Serena, do you want to add to this?

Serena Weider: Yes, I think that's very important from the point of view that these are the opportunities for our children to learn to negotiate. Often, I find that the solution to trying to figure out who gets what and preempting a lot of the reactivity, whether it's pushing or biting or throwing something, has to do with not just taking turns, which is a very ritualized approach, but to read those signals, as you say, and do things like trading and think about what you can give a child so you can get what you want. Often, just even defusing when you begin to feel the tension and it's not yet in a reactive, explosive kind of place, you can be more playful if the child wants to hit and push, and you can be more playful and help the child learn hand games and don't treat everything as breaking the rules. Try and pick and choose the battles and give the child – often the child is seeking sensory input – other ways to deal with the tension of their little frustration or having to wait or delaying things they need in the moment, and working on these kind of negotiating strategies, defusing it while you keep talking about appropriate output. It might be chewing gum or it might be playing a rhythm hand-clapping game will help a child stay in there so they can communicate and have a chance to think about what they want and see what else other children are doing or what you might want and preempt. Preemption is the critical issue in terms of a lot of these meltdowns. So, you have to read your child's signals and, of course, you want them to read yours. Then you can move in a more supportive way so that they can do the limit setting. I also want to highlight that if you can talk 10 minutes after a real breakdown that's fine if you're in a situation that lends itself to that, when you're at home, but sometimes these things happen in supermarkets or in the park or in school. Often it's worth coming back to these events, later on at night when it's a little quieter



and talking, just being a little reflective and just opening the door through empathy – you know, “Wow. We had a hard time today,” or “I was thinking about what happened this morning.” So you have more than one chance to revisit with a child who’s already verbal and symbolic and to go back and examine those feelings and explore other ways the child can feel understood, but also have better ways of solving some of the problems they’re having.

Dr. Greenspan: Okay, well, thank you, Serena, that’s terrific. I think we’ve covered a lot of material today, and next week we’re going to talk about some of the characteristics that all parents want for their children – children with special needs, as well as children without special needs – characteristics such as to be loving and empathetic and curious and logical and being a leader among their peers. We’ve talked about these things before and I’m going to cover just a few highlights, a few sort of summary suggestions to follow as you’re doing Floortime, as you’re doing the basics that we’ve been talking about, how you encourage the particular traits that all parents want in their children and what particular aspects of the interactions, the Floortime back-and-forth, encourages the empathy or the curiosity or the assertiveness or, as we talked about today, the limit-setting. So, next week we’ll talk about how to instill the characteristics and traits and values that parents most cherish, themselves, in their children. So, how to help your child be all that he can be and all that you wish for him or her – that will be the topic next week. Okay?

Serena, thank you, and thank you all for joining us, and we’ll speak to you again next week. Bye bye.