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CHILD & PARENT
RESOURCE INSTITUTE



The Brake Shop Clinic Putting the Brakes On Rage



It is important to understand where rage (or Intermittent Explosive Disorder) comes from. It is not just the result of bad parenting or the child not trying hard enough. It is also not just an example of the child being manipulative, calculating, or choosing to behave badly. Rage is the natural reaction that all people have when they are overloaded beyond their capacity to cope. Most people rarely, if ever, reach that point though. These children, because of the disorders they have, are frequently enduring more 'brain overload' than people typically have to put up with. They do not have "low frustration tolerance" – they have more frustrations TO tolerate!

This doesn't mean those rage behaviours are 'ok' or should be accepted: the child who rages must be accountable for his or her actions. There is no need to ask the question, "was that behaviour caused by the disorder, or was that the child", because it is always both. It is always the child who is doing or saying these things that are unacceptable in the 'real world', but it is always the disorder that is making it so difficult for this child to cope with life's bumps without reacting in these very 'big', uncontrolled, and negative ways.

Because of this, it is important to help these children decrease their 'overload', so that they can be the people they want to be, and react the way they would react if they weren't so overloaded. To expect a child to behave the way other children do when they are drowning in brain overload isn't fair; it is a set-up for the child AND for you.

It is important to realize that none of the strategies below, on its own, is the 'silver bullet'. These and many others all work together to decrease overload enough to avoid rage episodes. Think of it as a game; picture a beaker that is almost full of water – so full that any more water, or a little jostle, will spill that water and make a mess. This mess is the rage that you want to avoid. Each of these strategies lowers the water a teensy bit, but each extra demand on the child or each situation that increases a child's symptoms raises the water a teensy bit. **The "Beaker Game" is to always be taking more water out than you are putting in** – if the water never reaches the top, then rages will no longer occur! Keep in mind that while a person with a full beaker SEEMS to be very angry with you, and this can make you very angry with them, don't be fooled! The REAL enemy is that full beaker – and as long as the two of you are fighting it out, it wins. However, getting wise to the games the overload in this beaker is playing allows the two of you to stop fighting one another, team up, and beat the overload!

So let's,



- **Find out what overloads the youth (i.e. what “fills his/her beaker”), and find ways to avoid these things:**
 - The main reason these individuals ‘overflow’ so often is because of the various skill deficits (‘leaky brakes’) they are contending with. In essence, they are having natural reactions to an impossible number of abnormal circumstances. Getting these various disorders properly assessed can help everyone to better understand where the chronically full beaker is coming from; adequate treatment for those conditions (e.g. cognitive-behavioural therapy for OCD, an ADHD medication) will decrease or remove their influence from the beaker. This has the effect of lowering their beaker levels and increasing the ‘buffer’ room between their beaker level and the top of the beaker!
 - Ensure a consistent sleep schedule; everyone is more overloaded when they are tired and these children will show it more because of the overload they are already trying to manage. Sleep clinics can offer strategies and/or medications. For the child who’s “head won’t stop”, a TV in the room (set by a timer to turn off on its own) can be a very helpful distracter from his/her thoughts so (s)he can fall asleep
 - Reduce the effects of any painful symptoms (e.g. massage or chiropractic manipulation) if tic movements are creating muscle strain
 - Explicit, consistent, and predictable structure helps these children feel more control in a life where they have little internal control. Implement routines that become habits and so therefore rely less on memory. Use pictures or other visual ‘cues’ so that the child can always see what the day is going to look like. Avoid surprises – even ones intended to be positive can quickly overload an unsuspecting child!
 - Everything in life can’t be predictable; if something unexpected comes up, use ‘soft’ transitions. This means that you give warning time to the child that a bump in the road is coming. A helpful technique is the ‘good news/bad news’ strategy: say, “the BAD news is that we are going to have to stop doing this soon. The GOOD news is that you are the FIRST ONE to know about it, and so we have a chance to get ready for it”.

- If a brother or sister and this child are like gasoline and fire, plan to keep them as separate as possible. Individual trips, rearranging car seating plans so these children aren't sitting beside each other, or not having bedrooms next to one another are a few ideas that other parents have used.
- **Learn the signs that the child is getting overloaded (i.e. that his/her "beaker is filling" , and teach those signs to him/her)** Common signs are:
 - getting very quiet/overly passive
 - breaking eye contact
 - retreat; attempting to leave the situation
 - biting nails; agitated
 - rapid speech
 - monosyllabic responses
 - pulling into/chewing on clothes
 - speaking in monotone
 - confrontational tone
 - less patient
 - rapid, shallow breathing
 - signs of tension (e.g. eyebrows furrow, jaw clenched)
 - increase in symptoms (i.e. MORE sensitive to touch/movement, MORE hyperactive/impulsive, MORE obsessive/anxious, MORE tics)
- Developing verbal cues between you and your child can help him/her to gain insight into these signs (e.g. "is your beaker starting to fill?")
- Some parents photocopy a stack of our "empty beaker" hand-out (attached to the end of this hand-out). They keep copies (with a marker or pen) posted at the door, in the child's room, at school.....anywhere your child may have difficulties. Without a word spoken, your child can enter the room and draw a line on the beaker, indicating to you how "full" (s)he is and how available the child is at this time for demands to be placed upon him/her.
- Keep track of rage episodes: do they always happen on a certain day? Or at a certain time? With certain people? When the child is doing a certain activity? If you find a pattern, you and the child can play scientist together to figure out what is different about THAT situation versus situations where they DON'T get overloaded.

An excellent predictor of rage episodes is when the child is required to “change gears” or shift into another activity.

➤ **Don’t accidentally become part of the problem!**

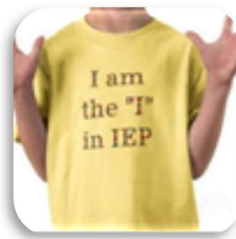
- Beware the ‘set-up’: consider sensory sensitivities, obsessions, tics, and other symptoms when planning to take a child to a particular environment. If the environment will be incompatible with the symptoms, this doesn’t mean the child can’t go but it might mean that some accommodations will be necessary. For example, plan to go for a shorter period of time (a brief success is always better than a long, drawn-out failure!), or bring ear-plugs, or ‘case the joint’ for available escapes/places to take a quiet break.
- If you detect that the individual is finding the day overwhelming, “catching him/her being good” or finding a positive to focus on and compliment him/her for will help make more space in that beaker!
- Mistaking brain overload for a power struggle will lead to very ugly results! Don’t force eye contact, raise your voice, or touch the child unexpectedly when you see the signs of brain overload! Threatening consequences will only intensify an overload.
- Be sure to keep your OWN beaker levels low! Overreacting will only increase beaker levels more! Stay in control and watch your own body language (e.g. don’t fold your arms, stand too close to the child, point your finger, or otherwise send nonverbal messages that will increase your child’s anxiety further).
- If a child has reached overload, (s)he is no longer able to problem-solve, think flexibly and rationally, access memories of crisis plans or past consequences, and his/her personality is affected (the “Dr. Jekyll & Mr. Hyde” effect). The only thing to do is to allow it to pass (restraining and/or removing the child to a safe location if necessary, and keeping words to a minimum) and wait until the beaker is empty enough again that the child is again “accessible” to learn. You’ll know it’s over with when the child chooses to approach you again, or leaves his/her haven (what a ‘haven’ is, is explained below). This is not fun for you OR the child; this is why doing everything possible to allow it to pass as quickly as possible is desirable. Of course, preventing an overload before it happens is always the BEST plan!
- Even giving a child a hug when they are overloaded is a bad idea: GOOD or WELL-INTENTIONED stimulation is still stimulation, and makes the overload worse. Words are largely tuned out at this point, and so talking ‘too much’ and ‘too soon’ about the situation is also a bad idea for the same reason – this can draw out the overload longer. Also, the words will not have the impact you hope them to have during the overload, no matter HOW appropriate or well-chosen those words are!

➤ **Learn ways to ‘lessen the load’ again (i.e. ways to “empty his/her beaker”):**

- Adults give themselves quiet space all of the time; sports teams take time-outs to re-strategize in order to win the game. Teach the child to use time-outs/Detours like this: as a valuable tool used to regain control rather than a punishment that happens when you get in trouble. **Time-outs/Detours should NOT be used as a punishment!** In fact, a child who is working towards recognizing (s)he needs to regroup, and who shows the willingness to minimize problems by taking a break, should be generously rewarded for such behaviour!
- Model going to your room to deep-breath (in through the nose for the count of 5, out through the mouth for the count of 5, relaxing for the count of 5), or to distract yourself with something interesting. Afterwards, share how you feel and act and think differently when you are no longer overloaded. Help the child to learn how to recognize when (s)he is no longer overloaded too: everyone is a little bit different. Be flexible in the length of the time-out; it ends when the load is light enough to manage being around others again.
- Use the method of CPS (Collaborative and Proactive Solutions) to compromise on decisions that would lead to overload. This is a method developed by Dr. Ross Greene and is described in his book, "The Explosive Child" and his video, "Parenting the Explosive Child". An important first step in collaborative problem-solving is empathy – asking "what's up" and reflecting what the child is saying allows the child to indicate the problem from their perspective and to feel heard. Being validated in this way (whether or not you ultimately agree with the child) is a great way of emptying a beaker!
- Having a haven is very important. This is a quiet space to 'recharge' that is entirely under the child's control. When (s)he is in there people leave him/her alone or ask permission to come in, and the child can keep this space however (s)he likes (messy OR very clean!). Again, given the lack of control that the child feels over him/herself this helps to compensate by giving more external control to the child. Everyone needs to feel a certain amount of control in their life to be happy, and avoid the depression and anxiety that leads to overload.

Once you begin to play the "Beaker Game", you start to pick your battles carefully – you realize that some things just aren't worth doing or getting excited about if it is going to take up a lot of space in that beaker. It can even become a way of making life choices – some people have chosen the community they are going to live in based on how much it fills their beaker. I did that – I have a pretty full beaker too! I've learned how to keep it from overflowing and making me rage, though, and so can your child.

Finally, parents, be sure you request that any relevant accommodations found on this hand-out are added to a formalized **I**ndividualized **E**ducation **P**lan (IEP). An informal IEP may not be implemented or transitioned, whereas a formal IEP is part of a legislated process that also includes the **I**dentification **P**lacement and **R**eview **C**ommittee (I.P.R.C.) and the IEP **must** be adhered to (Education Act, Regulation 181/98). Any child identified with special needs has access to this process.



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