TANTRUMS & THE BRAIN

A quick guide to understanding the neurobiology of tantrums (and how therapy can help).

A resource for caregivers by Dr. Chelsea Conaway, PhD, LPC

What is a tantrum?

Tantrums are neurobiologically (brain and body) based **stress responses**. Tantrums can happen as a result of overwhelming internal (e.g., hunger, fatigue, illness) or external (e.g., being told no, challenging interactions with others) stimuli. They can be sudden or build slowly and are a typical aspect of child development. Tantrums are a behavioral cue that your child's nervous system is responding to an overwhelming stressor.

What happens in the brain during a tantrum?

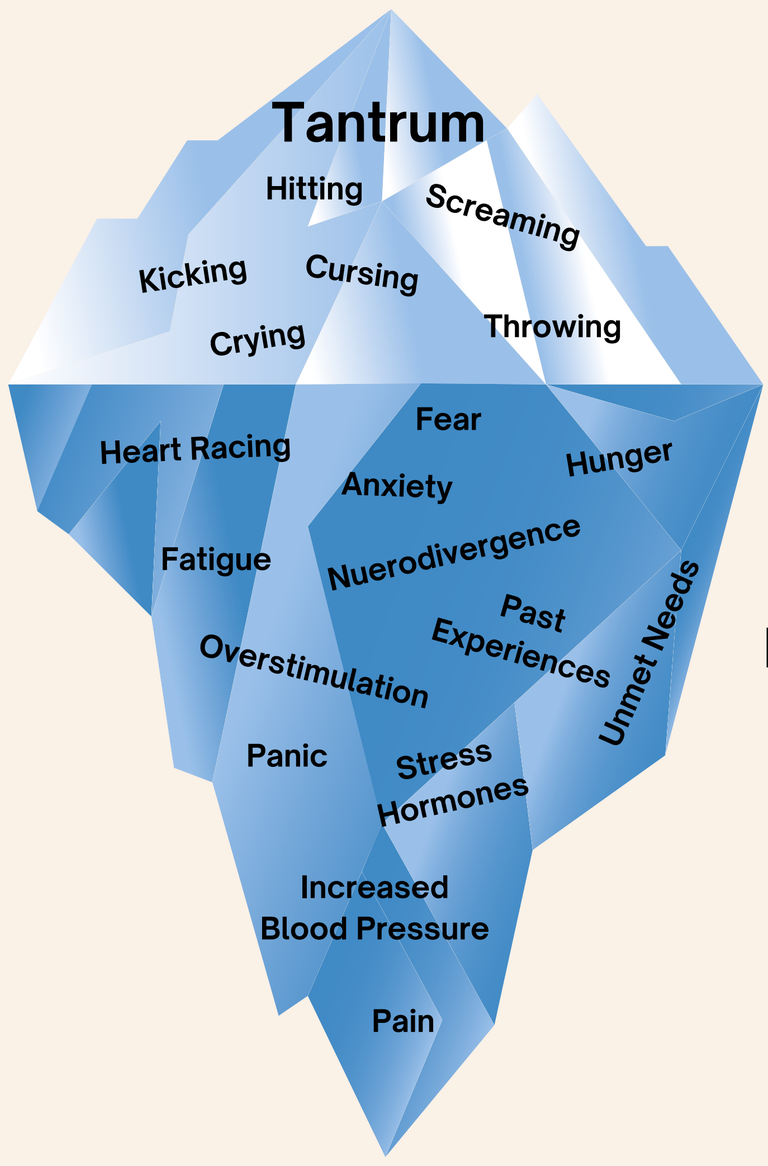
The brain has several mechanisms that help protect us from threats in the internal and external environment. When encountering a threat, the sympathetic nervous system activates the fight or flight response, resulting in the release of stress hormones such as cortisol and adrenaline, increased heart rate and muscle tension, and feelings such as fear, panic, anger, or rage. In adults, the mature prefrontal cortex (PFC) helps us maintain behavioral regulation during moments of intense sympathetic activation.

A tantrum is **fight or flight in action**. When your child encounters a stressor (whether that be fatigue or being denied candy before dinner) that exceeds their ability to cope, the sympathetic nervous system is activated, resulting in the overwhelming physical and emotional experiences described above. Because their PFC is not fully developed, your child has a limited ability to control the impact of this nervous system overload, resulting in emotional and behavioral dysregulation.

Every child's nervous system is unique, and several factors (such as hunger, fatigue, past experiences, sense of safety in the current environment, and more) contribute to your child's threshold for managing stressors at any given moment. This is why some children have more tantrums than others and why the same event (for example, having the iPad taken away) may trigger a tantrum one day but not the next.

Tantrum Iceberg

It may be helpful to look at tantrums as the behavioral tip of a neurobiological iceberg. What we see above water are undesirable (and sometimes violent) behaviors such as screaming, yelling, or hitting. What we do not see is the child's overwhelmed nervous system, the intense physical and emotional stress response, and potential invisible brain/body experiences that increase neurological vulnerability.



Many traditional approaches to caregiving focus on managing observed behaviors. While this approach can sometimes decrease undesirable behaviors, it is often reactive, does not address the neurobiological underpinnings of tantrums, and does not help parents understand and respond to their child's individual needs and experiences.

The behavior management approach often leads to playing a game of behavioral whack-a-mole, in which caregivers react to tantrums as they arise in an attempt to control their child's stress response. When another tantrum inevitably occurs, caregivers often feel frustrated and defeated. **Using a neurobiologically-informed lens, caregivers can learn evidenced-based ways of understanding and responding to tantrums** and feel confident and competent when dealing with challenging behaviors.

How can therapy help?

Tantrums are often overwhelming for children and managing them can be exhausting for caregivers. Many traditional caregiving approaches take a one-size-fits-all approach and do not account for each child's unique needs, abilities, and experiences. **Neurobiologically-informed play therapy can help children and caregivers navigate these challenges in a safe and non-judgmental environment.** Using a play therapy grounded, neurobiologically-informed approach, I will work with your child one-on-one and in playful engagements involving caregivers to 1) identify potential triggers for sympathetic activation, 2) support neurological resilience using evidenced-based strategies focused on attachment, safety, and relational connection, and 3) assist in the development of effective skills for coping with stressors. Additionally, I will work one-on-one with you to compassionately and non-judgementally discuss methods for building on the work done in therapy, develop strategies for responding to challenging behaviors, troubleshoot difficulties as they arise, and learn ways to manage the stress, frustration, and other difficult feelings that tantrums often trigger for caregivers.

It is important to understand that, while decreasing the frequency and/or intensity of tantrums may be the goal of therapy, it will not be the focus of therapeutic sessions. Rather, my focus will be on deepening your child's neurobiological resilience through safety and connection using the therapeutic power of play. Similarly, the focus of caregiver sessions will be to support you in building on your existing expertise on your child to develop the knowledge, tools, and confidence to support your child's behavioral regulation.

References

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