

The illustration features a stylized mountain range with brown peaks and white snow patches. A yellow figure is shown in mid-air, jumping over the mountains. A red figure is climbing the side of a mountain. The background is a blue sky with white clouds. The title 'TEACHING IMPULSE CONTROL' is written in white, bold, sans-serif capital letters across the middle of the mountains. The author's name 'By Maria Sargent' is written in a smaller, black, sans-serif font at the bottom right.

# TEACHING IMPULSE CONTROL

By Maria Sargent

# Content of This Unit

\*Like any other skill, Impulse Control can be taught!

\*Many of these children have Processing Disorders which cause impulse control problems. Information on Processing Disorders begins on page 3.

\*With many children, you must Value Code Shift in order to motivate them to learn difficult skills. This critical technique is on page 8. Behavioral plans may also be needed in some cases. Information on this topic begins on page 10.

\*Younger Children must usually practice impulse control by itself. This is best done through play. Techniques for these younger children begin on page 11.

\*Elementary Students can often use techniques for "younger children" AND "older students". So, if you teach this group, you probably need to read the whole document 😊. The specific techniques for this age group begin on page 16.

\*Older Students almost always require Value Code Shifting (page 8) so be sure to read that section. Additional approaches begin on page 20.

# Processing Problems: **Vestibular Hyposensitivity**



A child with Vestibular Hyposensitivity does not receive enough information through their vestibular system **and will seek this information through movement.**

**What you will see:** These students move almost constantly. Even when “sitting still”, you will see them scratching, moving their feet, rubbing their skin or clothing, twirling their hair, or strongly chomping on their gum. If you ask them to be still, you will see them weight shifting on their feet or in their chair. Many of these children also have processing disorders (Central Auditory Processing Disorders) and other disabilities related to their hearing.

**What they will tell you:** These students may complain of feeling nervous, jumpy, or being “uncomfortable” when required to be still. Older students may say that they “think better” when doodling or chewing gum.

**What you should do:** These students may benefit from sensory integration therapy and/or a sensory diet. A good Occupational or Physical Therapist can help you determine the approach strategies for that student. In the classroom, you can help the student finding outlets for movement that do not disrupt the classroom. You can also directly teach having a “quiet body”. Some ideas to try will be covered in the sections for each age group. Also, see the *Sensory Integration* manual for additional ideas.

## Processing Problems: Vestibular Integration



A child with Vestibular Integration problems may not have the ability to control their sense of balance unless they remain in constant movement.

**What you will see:** These students move almost constantly. If they are required to stand or sit still, you will see them attempt it but then jerk as if falling or twitch parts of their

body. Many of these children have difficulty going to sleep and may wrap themselves in blankets or be found lying on the floor instead of their bed or cot. Some of these children have processing disorders (Central Auditory Processing Disorders) and other disabilities related to their hearing. Parents will also often report that the child is prone to car sickness.

**What they will tell you:** These students may complain of a “falling” or “spinning” sensation if required to stand or lay still. Some may also report tingling or crawling sensations in their skin---especially if made to stand or lie still with their eyes closed.

**What you should do:** These students benefit from sensory integration therapy and/or a sensory diet and may need movement or sensory input at all times. While you may reduce this sensory response, some may not outgrow the problem until older, if ever. Some ideas to try will be covered in each age group, but be sure to look at the *Sensory Integration* manual for more information.

## Processing Problems: **Proprioceptive**



A child with a proprioceptive problem does not understand where their body is in relation to other objects and people. They will often **seek this information and check their body position through movement.**

**What you will see:** These students will not move as constantly as other children with impulse control problems. What you will see is a form of “agitated” movement when they must deal with other objects, people, or difficult fine motor tasks. These children will appear to be “hyperactive” when moving through halls, seated on items that require a great deal of body balance (i.e. stools or on the floor, especially if forced to sit crossed-legged), in some gym activities (i.e. obstacle courses), and fine motor activities. At times, they may seem “aggressive” and lack impulse control since they need to hold objects tightly or touch them hard in order to feel them in their hand. Because of this lack of tactile sensitivity, these children will crush foam cups, break crayons, and appear to be “rough” with objects and people. They often will do poorly with games that require a light but fast touch (e.g., Duck, Duck, Goose).

**What they will tell you:** These students will often get in trouble for being rough. Some incidents will be severe enough to result in consequences. This causes the students to be upset and confused because they do not understand what they are doing wrong. They will express this confusion through crying, anger, or complaints.

## Processing Problems: Proprioceptive (Continue)

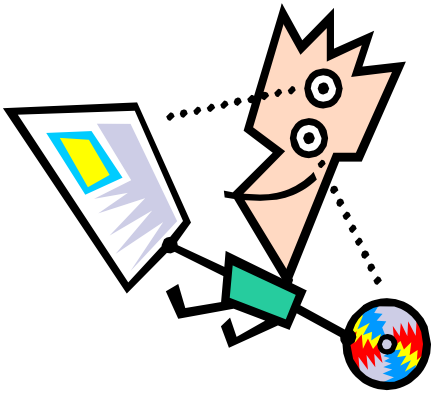


**What you should do:** These students will need a great deal of assistance to learn to judge their body position. At times, this may take the form of true sensory integration therapy (see manual online), but there are small things you can do in the classroom to assist them. Many only need a good teacher to show significant improvement.

Some of these children may have secondary problems, especially visual and auditory processing disorders (see manuals online). Because of this mixture of issues, even if you feel you can help these children in your room on your own, they should be checked by a professional to rule out these other processing disorders.

This is also the group that is often labeled as having behavioral problems related to aggression. It is always a good idea to screen for these processing problems prior to putting in place a behavior plan, especially if the child is very young. It does not mean that a behavioral plan should be skipped if a processing order is discovered, but the approaches you put in place will need to deal with the processing deficits in addition to the behavioral problem in order to totally remove the issue and/or keep other problems from emerging.

## Processing Problems: Other Processing Issues



A child with a hidden processing problem will often show unusual rates of movement and even behavioral problems. If they move a great deal, they may need to be referred for ADHD. In many cases, medication will not fully resolve the problem **because attention is not the total issue**. Here are some conditions that are often misdiagnosed as ADHD. These children will require formal diagnosis and therapy to improve.

**Visual Processing Problems:** These students move almost constantly, but if you really watch them, you can see it occurs when they have to use their eyes a great deal. They may turn their head back and forth to adjust their focus or move their whole body/head instead of turning their eyes to read. In the worst cases, the child may be using one eye to see far away and one eye to see close up. In these cases, you will see the child constantly turning one way and another depending on what they are doing (i.e. looking at peers or teachers across the room and then down to their book on a desk). Other students will only show this movement when faced with a visual task (e.g., reading, watching movie, etc.)

**Dysgraphia:** These students have a processing issue related to writing. You will see impulse control issues when writing is demanded. This may be caused by frustration but may also be unconsciously used by the student to avoid the writing task.

## Value Code Shifting: **Concept**



Students come to us with very different value codes. Often we must Value Code Shift to motivated them to learn a new or difficult skill. **Value code shifting is probably the most critical technique that can be used to encourage children to change behavior patterns and learn difficult skills.** Please see the manual on this topic for additional information.

**How do you do this?** This document does not have the space or the need to go into the whole Value Code Continuum, so know that there is more to this concept than what is given here. For our purposes, though, all you need to know is the student will be more likely to work on impulse control if you tie it in to something they value and/or wish to pursue in their life. Works like a charm.

**Some common themes that work:** Any personal goal will work. Some very popular items I have used in the past are: police, firemen, football, basketball, modeling, dance, cheerleading, computers, etc. I even tied the concept into race car driving once--LOL. The technique is simple and found on the next page. Beyond that, all you need is imagination!

If you are working with an older student, be very direct when helping them. Speak to them about the problem and some possible solutions. Most will have noticed their own lack of control and its impact on sports, etc. and will be grateful for the help!



## Value Code Shifting: Applications



The key to using Value Code Shifting is to relate the need to control impulses and/or keep a “quiet body” with a career or skill that interests the student. You really can use just about any concept and make it work with a little twisting.

For example, when I worked with that little one who was interested in becoming a race car driver, I related it back to the fact that the inside of race cars is very small and tight. So, I told him he had to learn to keep a quieter body so he wouldn't accidentally hit his gear shift or controls. We looked at pictures of the inside of the car, and this made total sense to him. I hit the right value that motivated him, and he really made progress after that. Some examples to get you started are below, but feel free to use any idea that you think will work:

- Football:** Have to stay still at line of scrimmage or you will be declared “off-sides”
- Basketball:** Have to stay still until jump ball or free throw is completed to avoid penalties
- Modeling:** Have to stay still or the pictures will be blurry
- Science:** Have to wait until the exact right moment to mix chemicals, etc.
- Dance:** Have to stay still until the correct count for your part
- Surgery:** Have to control body, not scratch nose 😊, etc. while in surgery

# Behavioral Programs



Even though you may decide that a student has a processing issue or some other reason that explains their lack of impulse control, that does not automatically mean you can ignore the behavioral part of the problem.

For example, a student who has difficulty standing in line because of proprioceptive problems may shove and knock people around accidentally *at first*. Once they do this a few times, though, they may see that this behavior WORKS GREAT and gets them the best place in line, makes the other children respect them, etc. In other words, the physiological processing problem that was at first accidental has now become a behavioral problem as well.

When this combination occurs, you must use **both** the impulse control teaching methods outlined in this packet and positive behavioral supports such as cue charts, plans, and even reinforcement and consequences in some instances (see full behavior support documents on this site for further information). If you do not hit the problem from both ends, you may end up teaching control and reducing the *processing* problem but still not see real improvement because of the purposeful behavior pattern that has emerged over time.

# Working with Young Children: Games

It is best to teach young children this skill through play. You should pick a game or activity that the child will **really** want to do. For example, I often use bubbles. Children LOVE bubbles and will immediately want to pop them. You can play this game either with one child or several, but if the child is having a great deal of difficulty, I suggest playing with them alone at first, if you can. Here is the sequence you can then follow all the way up to the elementary level. You can use the same approach with any other item that is highly desirable---art materials, musical instruments, towers of blocks to knock over, etc.---anything they like doing!



## Teaching Impulse Control Using Bubbles

1. Take turns blowing bubbles, and have the child wait for the word “go” before they pop them. Have the child delay only for a few seconds at first. Make sure your turn provides a good “waiting patiently” model.
2. Increase wait time very slowly over an extended period.
3. Keep increasing wait time until it is so long that the bubbles pop on their own or cannot be reached. This is a good time to teach the concept that, “Sometimes you can’t do things even once. Yes, that set of bubbles couldn’t be popped at all, but this next set WILL be your turn!”
4. Play the game with small groups. Let everyone pop the bubbles except one child at a time. This teaches the children how to show “Impulse control even when no one else is showing it” ....and important skill!

## Working with Young Children: Cues

\*Many teachers use auditory cues (speaking) to help children learn behaviors. This works for most children, but if the student needs help for a long time, the auditory cue isn't processed well and never gets put into memory.

\*One way to get around this problem is to drop down to visual (pictures or objects) or physical cues (actions). When these are used and taught, the student is forced to "speak" to themselves in their own minds. It is such a small change, but light-years ahead in terms of producing memory and internal impulse control.



\*For example, a preschool teacher can put masking tape "X's" on their own pants and matching ones on the child's clothes. They then show the child how to "put down their hands/keep them to their own body" by placing their hands down on the "X's" for a moment.

Then all the teacher has to do when the child is showing an impulse control problem is to call the child's name, dramatically hold up their own hands and put them down on their "X's". This will cause the child to think "**hands down**" in their own mind and copy the teacher's action----a wonderful way to begin to get impulse control into memory!

\*Once the concept of visual cueing is in your mind, you can cue impulse control in many ways. Some cues to get you started can be found in **Appendix A on page 22**.

# Working with Young Children: Vestibular Hyposensitivity Techniques

These children need a great deal of movement in their daily life. They will also need a great deal of sensory interaction. When they need to sit still, providing some type of movement or sensory input can help. Here are ideas that can help these little ones:

## **CLASSROOM ACTIVITIES:**

\*sensory: sand, water, etc.

\*play dough, tactile blocks, etc.

\*items on carpet that encourage movement

## **OUTDOOR ACTIVITIES:**

\*sensory: sand, water, etc.

\*swinging, slides, revolving objects

\*games that require a great deal of movement

## **CIRCLE AND OTHER QUIET ACTIVITIES:**

\*In circle, have the children move a great deal. Have them touch their heads, feet, left arm, right arm, etc. to signal their answers or opinions even when other children may be the ones answering verbally. For example: "If you like dogs, touch your toes. If you like cats better, touch your head. David, which one did you like?" This keeps everyone moving and engaged even when only one child is speaking.

\*Provide carpet squares that are tactile. Texture makes a difference, so some children will do better with carpet and others something softer. Encourage the child to sit with their hands under their knees and feel the carpet to maintain control if that sensory need is high.

\*Embed movement into stories as much as possible. Giving all children a piece of string or yarn to make the shapes they see on the pages of the book can be used in some instances. Other tricks, like having the children switch position (i.e. lean right, lean left) every four pages of the book can help, etc. The "touch your toes..." technique just described in the first part of this section can also work. For example: "The duck cannot find his mother!!! Put your hands in a heart if you think he will find her on the next page and an X if you think he won't."

## **HOME AND THERAPY (these should be guided by a trained therapist):**

\*Tight clothing---these can be true therapy garments, but Under-Armour®, tights, etc. can work great too.

\*Weighted blankets/lap pads (especially when sleeping), heavy work (small backpack with weight), and weighted toys can really help.

\*Rubbing lotion on legs, having children rub their arms and legs before sitting down, brushing, etc. can be useful in some cases.

# Working with Young Children: **Vestibular Integration Techniques**

These children not only need a great deal of movement and sensory interaction, but when it is missing, they will have great difficulty functioning. Any of the techniques for Vestibular Hyposensitivity will work (previous page). In addition, here are some other ideas to try:

## **CLASSROOM ACTIVITIES:**

\*Make sure the child can move while playing. Unlike other children, they will twist and turn when lying on the floor playing with blocks, etc. They will just need more room than other children.

## **OUTDOOR ACTIVITIES:**

\*Teach them to step back and forth in place or press hands together over and over when they have to wait in line (waiting for a slide)

## **CIRCLE AND OTHER QUIET ACTIVITIES:**

\*Make sure the child is in a corner if possible. Being able to lean back and feel pressure on their back can be enough for some children.

\*Teach them to press on first one leg and the other if they feel like they are going off-balance. Some children benefit from putting little circles of sticky-back fur on their pant legs that they can then feel while trying to sit still; others do better with objects that can be held in their hands (small little balls, silly putty, sticky-back tape). Figure out what works and what is a distraction for that child 😊

## **HOME AND THERAPY (these should be guided by a trained therapist):**

\*Some children have such a strong sensation of spinning when lying down that they will feel much better if swaddled tightly. Others may need to have a small “bed-tent” top placed over their bed so they feel “safe” from falling. Weighted blankets and toys also can help here.

\*Teach the child to identify which part of their body is tingling (**body outline provided in Appendix A**) so you can assist them in “turning off the nerves/tingles”. Eventually teach the child to do this on their own using deep pressure and other suggestions from an Occupational Therapist so they can manage the sensations on their own.

# Working with Young Children: **Proprioceptive Techniques**

These children do not understand where their body is in space. In some cases, extra movement or sensory information can help them, so be sure to review any of the techniques for Vestibular problems (previous pages). In addition, here other ideas to try:

## **CLASSROOM AND OUTDOOR ACTIVITIES:**

\*Make sure the child can lean on something while playing. Teach them to judge their space by inching their hand forward. Play lots of games that require eye-hand coordination and judgment of movement (i.e. trying to push car just enough to land in a winner's circle).

## **OUTDOOR ACTIVITIES:**

\*Use visual cues to show locations that are dangerous (e.g., behind swings). Play lots of games that combine impulse control with judgment of space (e.g., bubble game described earlier but having them catch the bubbles on their fingertips instead of popping them).

## **CIRCLE AND OTHER QUIET ACTIVITIES:**

\*Make sure the child is in a corner if possible. Being able to lean back and feel pressure on their back will help them feel where they are in space. Tactile cues that differ from those around them (i.e. their carpet square is soft, peers' around them are rougher) can help.

\*Teach them to press against their legs or press hands together to get a sense of their body. Also, teach them how to "measure" how close they are to people around them with their hands. Sticky back fur circles can be placed on the door jamb and placed on their pants when they walk in the hall. Feeling these will keep them from needing to touch the walls and other people to feel secure when they walk in open space. Working on skills like "gentle hands" will be essential in addition to impulse control work.

## **HOME AND THERAPY (these should be guided by a trained therapist):**

\*Sensory integration therapy (e.g., brushing, swinging, etc.) can help improve a sense of body. Other games like "Angles in the Snow" (children lay on floor and move body parts on command) will help. These children often have reflex maturity issues and may benefit from reflex integration work. A trained therapist can guide you and suggest additional appropriate games that will speed this reflex maturity. See the Sensory Integration manual for additional information about residual reflexes...

## Working with Elementary Students: Games

\*Many of the techniques outlined for young children will work; you will just need to adjust the toy or activity to make them age appropriate for this group. For example, the bubble game described on page 11 is perfect, but better done with a competitive twist (i.e. who can wait the longest and STILL reach the bubble before it pops).

\*Traditional outdoor games like Statues (children are spun around, stop, and then hold strange positions), Freeze Tag (children have to freeze when touched and hold the position until they are "unfrozen" by a team member) and "Mother May I" (children have to wait for permission to move) are great games that have faded away. Revive them and help these children!

\*Any indoor game that requires thought prior to movement can be useful. Jacks, Cat's Cradle, Jenga®, Pick-Up-Sticks, Paper Football (paper folded into triangle), quarter basketball, Don't Break the Ice®, Battleship®, etc. can be wonderful. Again, the goal is to require the child to fight that impulse to move rapidly, take a moment to plan their action, and then move with care. Any other game that falls in this category is perfect!

\*Most art activities require some degree of impulse control combined with eye-hand coordination. If the child's eye-hand coordination is good then these can be used. If not, it is best to stick with games that are more gross motor so the child is not frustrated by their lack of hand control. Activities that can be used include painting small objects, bead stringing, and any other art or construction project that requires slow and precise movement. Some computer-based work, especially with graphics can be substituted when appropriate and available.



# Working with Elementary Students: **Interventions**

Sometimes a teacher will need to systematically teach this skill to a student or maybe even a whole class. Here are some ways in which this can be done. Cues to support these and other activities can also be found in **APPENDIX B on page 32**. Notice that if wording is used in the cues, it is worded both as a positive (what to do) and a negative (what not to do). This trick ensures understanding from all children since some children are more exposed to "don't" language in their homes. Also, make sure to look at **APPENDIX A on page 22**. Some of the smaller cues may work perfectly on a student's desk. Remember to point to them with no words whenever possible so the student must "cue themselves" in their mind. In addition, here are some small interventions to get you started. Once you see them, I am sure you will come up with a lot more you can use--just make sure to plan these into your weekly schedule so they are not forgotten!

## Waiting-in-Line Technique

Make sure to use Value Code Shifting or this technique will not work (page 9). Tell the children they are going to begin training for their future careers. Discuss their career choices, and then begin to target "skills" they need to work well in these jobs. In this instance, you will be talking about impulse control and keeping the body quiet, but you really could use this to get rid of inappropriate language, bad attitudes, or any other undesirable behavior. If the program is run well, you will see the children competing with each other to see who can stand the quietest. Award prizes, if you wish, for improvement of *five or more seconds per week* (do not award for longest time or the child who needs this assistance the most will never win...)

## Quiet-Time Technique (extension of Waiting-in-Line Game)

Once the children have learned the previous game and can make it through a bathroom break without too much movement, extend the game into the classroom. I used to put up a sign during a quiet activity (silent reading or being read to both work great), have them stretch, and then try to keep their body as quiet as possible. Make sure to give them movement breaks here and there or you will cause failure. You will be able to tell when the children are beginning to struggle and should take a break in response.

### Break-the-Cardinal-Rule Technique

In student teaching, we were taught to NEVER give children materials before giving directions. We were told that we were setting children up for failure... Well, now I am telling you to purposefully do this a couple of times a week to provide impulse control practice and get a quick measure (data) of class improvement 😊

To run this intervention, pass out the materials, and then stop the children and tell them to put their hands down---you forgot to tell them something important! Cue the children to squeeze their hands together, sit on them...*whatever they have to do to keep their body quiet,* and then give them a very short added direction before you allow them to continue on with what they are doing. You can extend this "pause" over time...

Once they really seem to have the skill well in hand, go ahead and pass out materials on occasion first and then give directions. The only reason we were instructed as new teachers to NOT do this was because our children's impulse control was low. Well, let's teach this skill a bit and improve their ability so this is no longer a big problem. You know you have made progress when you can pass out a really interesting or new item (art and music can be wonderful places to work on this) and still see them sitting quietly until you give directions. A wonderful feeling of achievement for both you and the children!

### Cool-Project Technique

Any cool project can be used as an avenue to teach this skill. Just begin to think about how it can be woven into your already existing activities. Here are some approaches to consider:

- \*Making Movies---children will have to start and stop on the director's commands
- \*Paired Peers---activities that require more than two hands to complete (have to wait for peer help)
- \*Plays----make sure to have all the children on stage but "frozen" until the time for their line or part
- \*Purposefully using old/slow computer software---I am sure you can see how impulse control fits in 😊

Anything else along these lines will work wonderfully and can be used at your discretion.

# Working with Elementary Children: Techniques for Processing Problems

Most of the techniques outlined on pages 13-15 will work, but you will really have to adjust how obvious they are as the student gets older. Students this age get too embarrassed to use them if they think their peers will notice. So, here are some ways to hide this practice...

\*Have the student deliver mail for you every morning and then go to any sensory therapy that is needed. If the student had a longer session, I made them the official “kindergarten helper” and had them go to therapy and then stop in the kindergarten room to “help” for five minutes. None of their friends ever knew!

\*I used to give ALL children the option of working on the floor or standing as long as they did what they needed to do. This provided the movement that some needed within the context of the room. Some years, I also provided hard disks, pillows, or therapy balls for children to sit on. This engages their core muscles slightly and can be enough “movement” to calm their system. A therapist can guide you in this, but be warned, not all classes can manage this well 😊.

\*You can often teach an older elementary student to use the smallest of movements to assist themselves. Sticky-back tape on the bottom of a desk tray or seat that they can press their fingers against, learning to sit with one leg crossed up on their seat so they can wiggle it, using a soft foam pencil grip that can be squeezed, etc. are not noticeable and can provide the movement and sensory input the student needs without a great deal of notice.

\*There have been times that the items the student needed could NOT be hidden. Those years, I hooked the item they were using into “training” for something (i.e. football). So, for example, a student using a balance disk on their seat is working on “core muscle strength for football” or the half of foam ball a student presses their foot against under their desk is to improve “foot speed for ballet”. This makes it attractive to others and many will beg to try it too!

# Working with Older Students

\*The key to working with this age group is honesty and sensitivity. If a student is still having difficulty at this age, you are also probably having serious behavioral and emotional episodes. Often, the failure these students have experienced will cause them to be unresponsive or motivated. Value Code Shifting is a must for this group and can be found on page 8 and more fully in the manual of that title at my website. More often than not, you will also need to use some type of behavioral support/program to deal with the long-term habits that have developed. Beyond that, the teaching outlined in prior sections holds true for this group as well.

\*Some students will do much better with a mentor or trusted adult who can help them establish and then practice control skills. This person is not always a teacher, by the way. Coaches, lunchroom personnel, janitors, etc. will sometimes be able to assist much better than the person responsible for the day-to-day academics.

\*Teaching the student to recognize WHEN they are losing control is also a must for this group. Since they tend to misread these cues, I teach them to take their pulse, understand the speed of their breathing, and other physical signs that they are about to lose control. In extreme cases, I have worked with students to systematically lower their pulse rate...something that many of them are surprised they can do. They feel much more secure if they realize that they are not helpless and CAN control their impulses to some degree.

\*A great deal of the teaching should stem from what the student thinks will assist them. I, of course, do give them solutions, but if THEY think something will work, it usually will...even if it defies logic. So, ask the student what has helped in the past and then give it a try. Sometimes the silliest tricks will work!

\*Much of this work can be embedded in vocational programs, which will also support value code shifting needs. This allows the student to practice the skill in a real-life situation that will mimic later job demands. I have helped more students in cosmetology and auto-mechanic programs simply because they care about those things. Use anything you can find that you think will work.

\*Any cue used for this group should be very subtle. I often will make a slight symbol on their hand or have some type of pre-arranged sign (e.g., stopping at their desk and laying my hand flat) that signals to them that they are losing control. Only the student and I know this sign so they feel secure about me using it. You can try using picture cues for the younger students if the developmental level is on the lower end, but for typically developing older students, this quieter approach works much better.

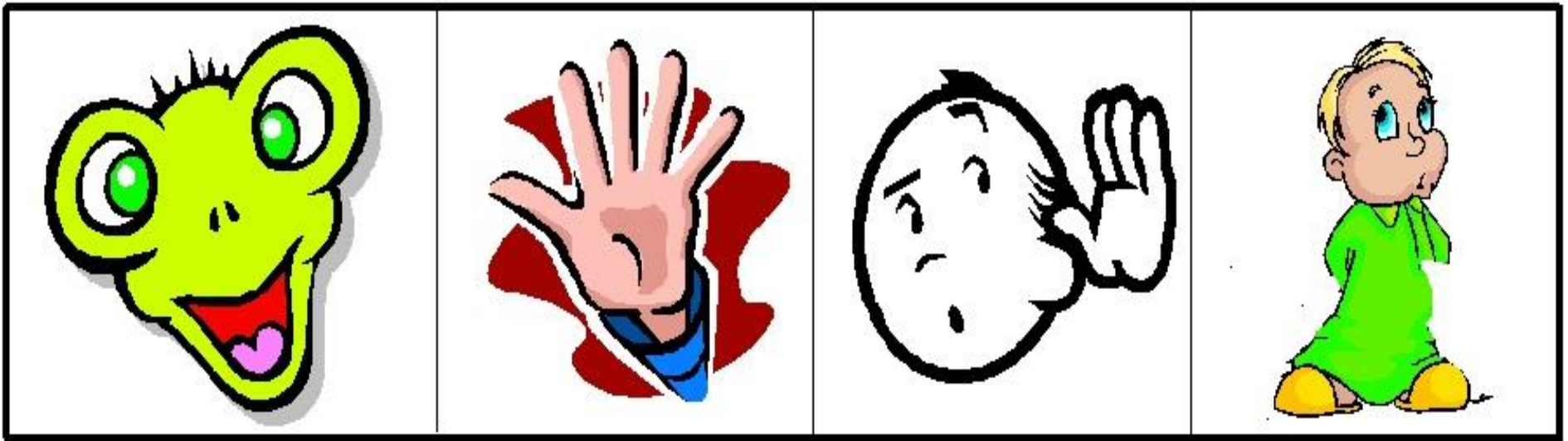
\*In return, I allow students to signal quietly to me that they need a break with another signal known only to the two of us. I will then send them on an "errand" so they can leave the room for a minute. As long as they do not abuse the privilege, they can use this strategy, and I have rarely had problems with overuse.

\*This group often has hidden processing disorders that have never been caught (i.e. visual, hearing, Irlen Syndrome, sensory, Dysgraphia, Dyscalculia, etc.). This document does not contain processing information, but if these conditions are unknown to you and you work with older students with chronic behavioral issues, please look for this material (I have full manuals online at this website and there is additional information on the internet--- just search). I cannot tell you how many "gang members", really tough kids, have broken down and cried when I explained why they "couldn't learn" and how we could fix it. Many of these difficult students are really just "big kids" who are hurting inside and feel as if they are "stupid" due to their chronic school failure. Their solution is to find something else to do, and that something is not academics...

\*Lastly, do not give up on this group. Yes, some of them will go on to some level of incarceration or serious consequences for actions in or out of school. I have had several, though, turn their lives around later and let me know that it was words casually spoken earlier that assisted them in making that change. Yes, they may not be listening right now, but they may still be hearing you! You never know how the assistance you provide to a student in the present may impact behavior and attitudes down the road. **Always** do what you can during the time you have them! If YOU believe in them---well, they may eventually come to believe too...

# **Appendix A**

## **Cues for the Younger Child**



This cue teaches the child to think about what they should be doing with their eyes, hands, ears and body. Cut the cue to make it work for you. You can hang this cue on the wall, place it on a table, etc., just remember to try to use it with as little auditory cues (talking) as possible.

You also might want to consider having the child "wear" the cue in some manner. Many of these little ones need constant and immediate reminders, so the cue being on their body helps a great deal.

I often use this type of cue on a slap bracelet on very young children. The kids think it is cool!



**raise hand**





stop



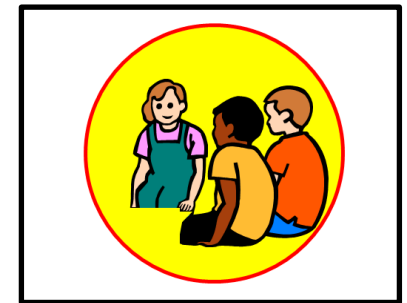


inside voice

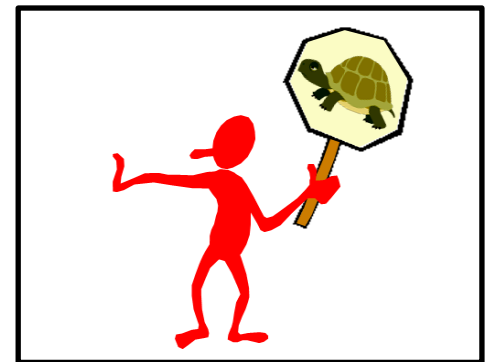
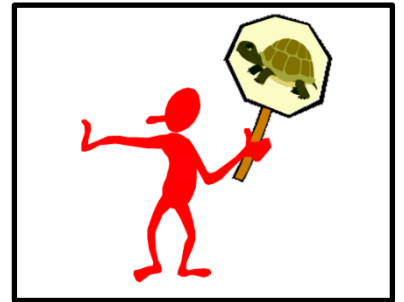
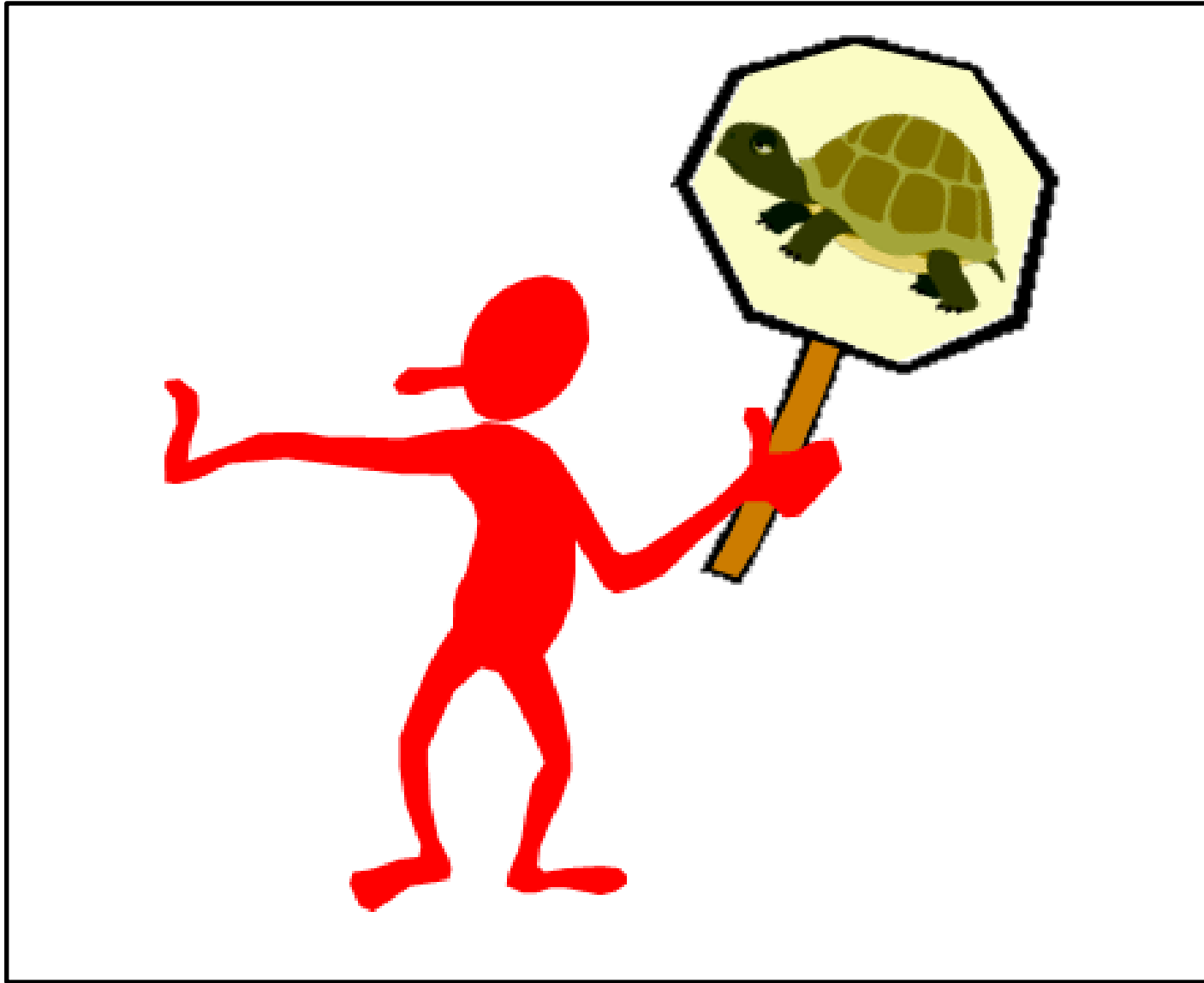




inside voice



sit down

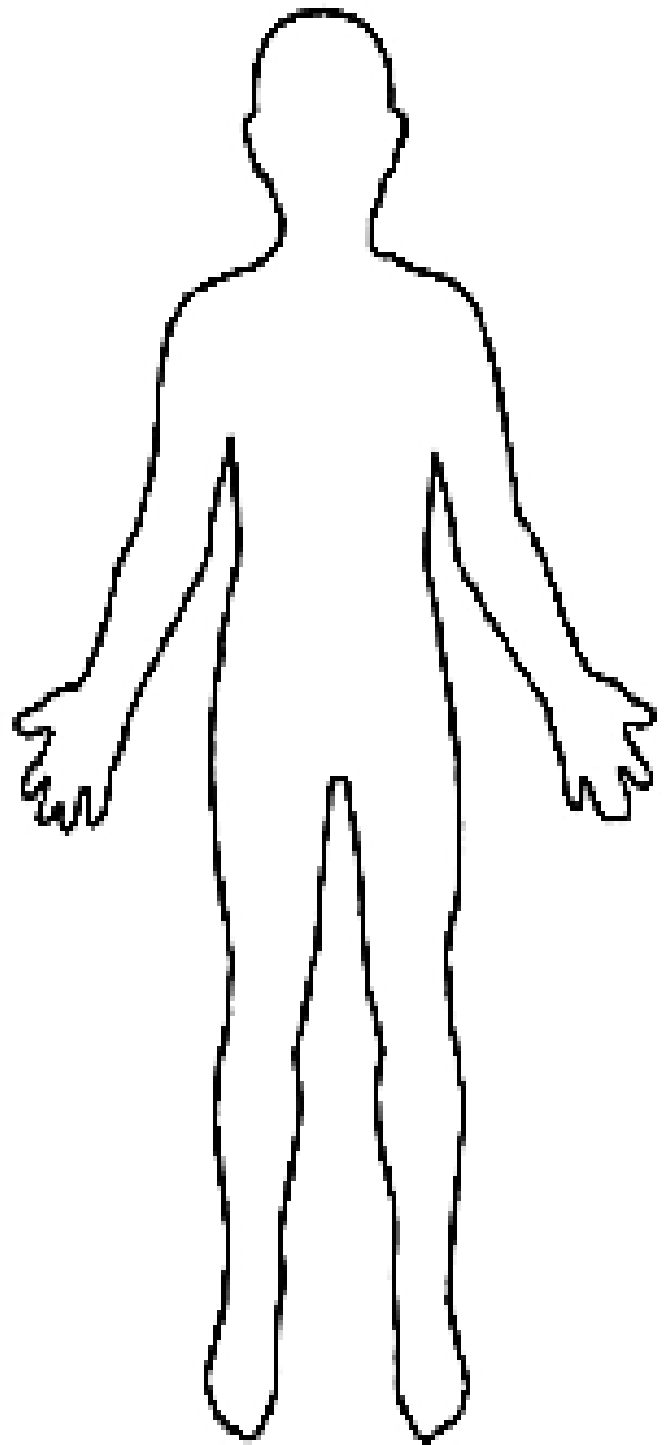
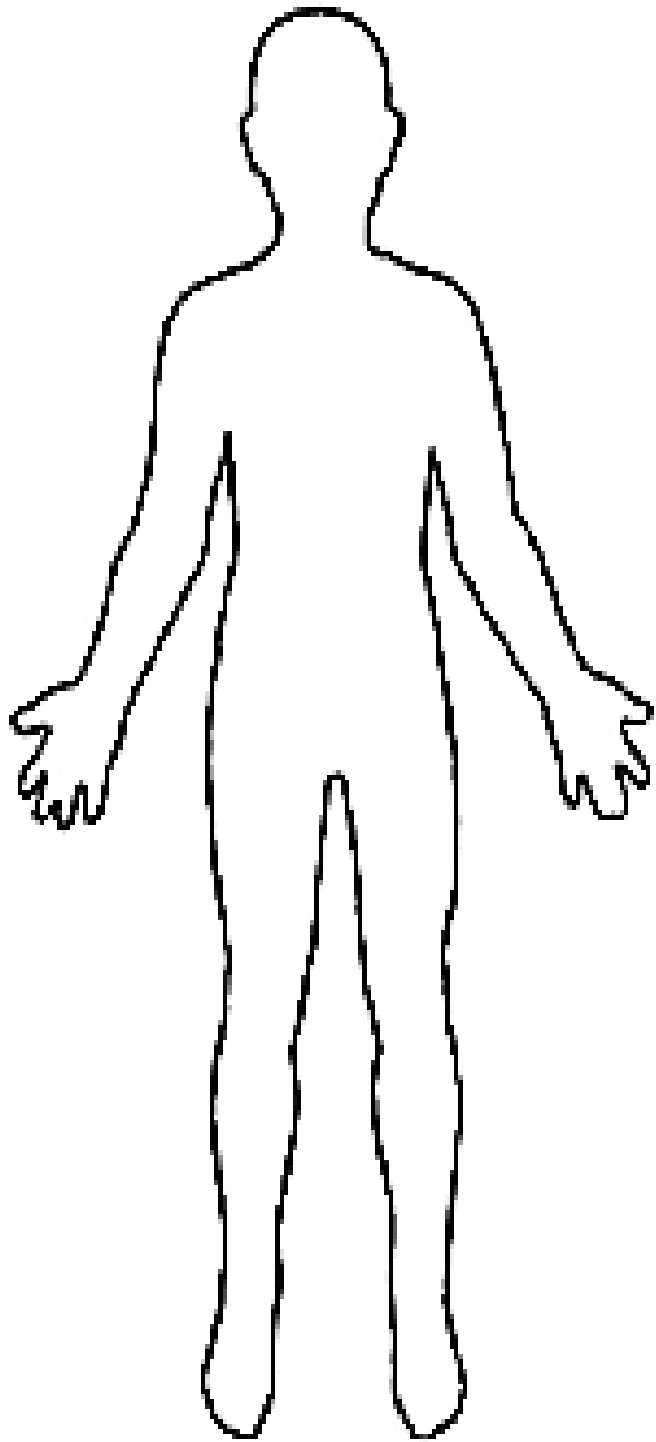


slow down



gentle hands





# **Appendix B**

## **Cues for the Elementary Student**





## **We will not let anyone control our emotions or actions**



**If someone says something mean...**

Say O.K.---then walk away!



**If someone says hurts our body...**

Leave and find an adult!



**If someone says hurts our feelings...**

Be BRAVE---ignore them and leave!





**We will not let anyone  
control our emotions or actions**



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Say O.K.---then walk away!



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## Ways to keep calm and ignore people who are being mean



If we feel like we are losing control, we will use one of these three solutions.

1. Deep breathing



2. Tighten then relax muscles



3. Think about a happy and calm place!





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## Weekly Goal



- \*Strong men can control their anger.
- \*Strong men can follow directions.
- \*Strong men have control over their emotions.
- \*Strong men can work and play well with others.

My goal for this week is...





## Weekly Goal



- \* Strong women can control their anger.
- \* Strong women can follow directions.
- \* Strong women have control over their emotions.
- \* Strong women can work and play well with others.

My goal for this week is...





# Playground Club Rules



**\*Strong men can control their anger.**

**\*Strong men can follow directions.**

**\*Strong men have control over their emotions.**

**\*Strong men can work well with others.**



**Listen to Adults**

**Do not ignore teachers.**



**Do not hit or kick others.  
Keep hands and feet to yourself.**

**Do not throw rocks and other objects.  
Leave them on the ground.**



**Do not fight.  
Use your solutions when you are angry!**





## Club Membership Card



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# Playground Club Rules



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# Quiet Challenge

Can you beat your best time?

