



DCDSB Understanding & Supporting All Learners

When is Aggressive Behavior a problem in children or teens?

Stress behaviour can sometimes present as aggressive behaviour in children. Young children often express these feelings physically because they lack the verbal skills to talk through their frustrations and/or, the self-regulation skills, that are not fully developed, to inhibit them from responding to a stressor in an appropriate way. By the time a child has the verbal skills to communicate their feelings, generally around age 5, physical expressions of aggression should begin to taper off. If physical aggression continues into the kindergarten and early grades, students will need parental and school-based interventions in developing the self-regulation skills to respond appropriately to everyday stressors. Children require adult's support to act as a co-regulator when they are struggling to regulate themselves.

Here are some tips to on how to support our children:

1. RECOGNIZE WHAT'S BEHIND THE AGGRESSION

Every action a child takes has a reason, and that reason always has a feeling attached. Maybe they are feeling helpless, frustrated or jealous. The key to helping an aggressive child is to get them to express these feelings without resorting to the aggression.

2. VALIDATE THE FEELINGS

When a child is angry, the first thing the adult must do is to acknowledge this feeling and validate it. Often, just that act of validation (e.g., "You look REALLY upset!"), can be enough to diffuse or reduce the physical reaction.

3. RESPOND FIRMLY AND STAY CALM

How an adult says things is as important as what they are saying. An adult's words should be firm and their expectations very clear, but they must also show they are on the child's side (e.g., "I can see that you are very angry, but we can't hurt our friends/family when we're angry. I need you to use your words to show you're anger. This way, I can help with what is bothering you"). If an adult reacts with their own anger, this will only reinforce the anger and aggression in the child. If an adult responds in a calm manner, it is more likely that the child will de-escalate rather escalate further.

4. ALLOW TIME TO COOL OFF AND REFLECT

Providing the child with a safe place to go and giving them time to calm down allows their brain to return to a state where they can think clearly. Some kids need space on their own and some need to do an activity to cool down. When they are calm, it is the optimal time to practice how to appropriately express their needs and feelings (e.g., "You were really upset a few minutes ago because of..... I could tell that you were so frustrated that you didn't know what else to do except hit. Did I get it right – is that how you felt?").

5. RESTORING/REBUILDING RELATIONSHIPS

After your child has expressed their feelings and calmed down, it's important for them to put things right with the victim of the aggression. This is not a forced apology (which will just be meaningless words), rather, it's whatever the child believes they can do to make things better. It may be the offer of a hug, the gift of a drawing, the lending of a special toy, or a sincere sorry and a promise to try to use their words the next time. The aggressive interaction will likely be forgotten by the next day, but it's the showing of empathy and the reestablishment of relationship that will be remembered long term.

If aggression continues through elementary school, the child will likely require increased intervention by their parents and school team. This may involve a behavioral safety plan as well as school-based supports. This may also involve referrals to community interventions and other mental health professionals. Certain verbal and physical aggression patterns can sometimes be identified and diagnosed by a mental health professional if they meet criteria. These diagnoses include:

Oppositional Defiant Disorder describes a pattern of consistent verbal defiance, disobedience, and argumentative behavior along with frequent angry and irritable moods.

Intermittent Explosive Disorder describes a pattern of anger-based verbal and/or physical tantrums, that are very disproportionate to the situation.

Conduct Disorder describes a pattern of engaging in behaviors that violate the basic rights of others, including theft, destruction of property, and assault.

All children with aggressive behavioral challenges (regardless of whether there is a diagnosis) will benefit from specific and tailored support to help them better regulate. If these behaviors are only occurring at home, it is strongly recommended that parents seek help. Talking to your child's teacher and school team is great first step to obtain this help.

Helpful Resources

For more information you may wish to explore the following resources:

Tips for Improving Self-Regulation: <https://self-reg.ca/>

Workshops for Parents: <https://www.durham.ca/en/living-here/children-with-special-needs-and-concerns.aspx#Durham-Behaviour-Management-Services>

Durham Region Central Intake-Number to Access Children & Youth Mental Health Services: 1-888-454-6275

This resource is not intended for diagnostic purposes. It is to be used as a reference for your own understanding and to provide information about the different kinds of difficulties you may encounter in your classroom.

