



**The Child's Side
of the Story—
and What You
Should Do**

ADHD Meltdown

Brandi Walker, PhD, and Griffin Rouse

downs

In children with ADHD, meltdowns are one of the most difficult to manage, difficult to witness, and misunderstood symptoms.

Meltdowns are not a tool for manipulation; they are a total and catastrophic loss of control triggered by the reflexive and innate need for self-preservation. For parents dealing with a child's meltdown, both the event and the aftermath, it is important to remember that your child's meltdown is not happening to you. It is happening to *them, they are the victim*. Through a meltdown, a child struggles; they are in pain, they feel completely alone.

The child would give anything to make the meltdown stop. When you witness a child's ADHD meltdown, part of what you see is the desperation to control, or at least understand, what is happening to them. I had a teen client once tell me about his meltdown that he feels like he wants to carve himself out of his chest with a knife. "It's like I'm stuck inside myself, I just want it to stop," he told me.

When I coach families who are dealing with meltdowns, I often have to remind my clients' parents about how difficult it is to be the person having the meltdown. For whatever reason, parents are inclined to believe that a meltdown is their child's way of "getting back at them" for taking their video game away, or "lashing out" because they didn't get what they wanted, or "ruining things on purpose" when a meltdown comes at an inopportune time (as they very often do).

The reality is, the ADHD child experiencing the meltdown is the real victim of that meltdown, and everyone else is just collateral damage. Of course we don't want collateral damage, and we aim to minimize it as much as possible. But our focus in a meltdown needs to primarily be on the victim. This means taking the time to remember that the child is struggling for control because they are in severe pain.

Repeatedly banging on the walls, slamming doors, yelling, and cursing these are all desperate, and usually successful, albeit short-lived, attempts to relieve the pain the child is feeling. This is, in part, why you will see your child revert to similar behaviors over and over again during a meltdown. Your child has found that this behavior, for perhaps even fractions of a second, relieves their pain, and in that moment nothing else matters.

How you react is crucial

When you consider how to approach a meltdown, it helps to think of the meltdown like a broken leg. You would never suggest that a child is ruining your day on purpose if they'd broken their leg. If your child came to you with a broken leg, you wouldn't think that they broke it to get back at you for a decision they didn't like. And you wouldn't tell your child to calm down or get over it if the pain of that injury made them upset. You'd likely immediately assess the situation, prioritize that child amongst any other children you have, and triage that child's leg based on the information they provided to you, and the information you could gather from your own observations, and perhaps how they reacted if you tried things to help.

Parents often ask me if it is appropriate to punish their child for having a meltdown. But would you punish your child for breaking their leg? The thing about meltdowns is that your child truly has no idea how to stop it, let alone the skills to actually do so. They've been thrown into the deep end of the pool with no idea how to swim. They're thrashing around trying not to drown, and it does not do any good to punish them for getting you wet in the process.

It can be frustrating, and even infuriating, to be a part of the turmoil and destruction that can accompany a meltdown. I have had child clients who have put holes in walls during a meltdown, and that's difficult to watch as a parent. But when we take a step back, we can recognize that the important thing to take care of in a situation like that is the child, not the wall, and how you react to a destructive meltdown can help your child

.....

Meeting the meltdown with patience and empathy and letting your child take the lead will help it end more quickly and do far less damage than yelling, punishing, or blaming your child.



understand that they are more important than that wall. This is the kind of messaging that shortens and minimizes the severity of meltdowns over time. The wall is much more easily fixed than your relationship with your son or daughter.

Ultimately, the easiest way to get through a meltdown is to follow your child's lead, just as you would with a broken leg. They know what they need in the immediate moment, and they are unable to think beyond that in the moment. Following their lead is likely going to hurt. It's going to mean sacrificing the wall and having hard conversations explaining to siblings what's going on and why it's important to meet the meltdown with patience instead of anger. It will mean fighting the voice inside of you that says you're enabling the behavior—you are not enabling it, you are enabling your child.

Meeting the meltdown with patience and empathy and letting your child take the lead will help it end more quickly and do far less damage than yelling, punishing, or blaming your child. You may come out of the meltdown with a hole in the wall, but you'll be one meltdown closer to a largely meltdown-free household, and your relationship with your child will remain intact, and that's the important thing.

Looking more deeply at meltdowns

As we pursue a deeper, clinical understanding of meltdown behaviors, it's important to consider if anxiety, depression, or trauma symptoms are expressing in that moment or behind the scenes, fueling a slow-burning fire. In terms of context, what was going on earlier that day, week, or month may also be contributing factors. The presence of signs indicating that the

child or adolescent has been having problems or challenges or experiencing distress is critical to know.

Consider these investigative questions: What is the true source of the adolescent's distress? Is it something ongoing in which the child is exposed to a stressor repeatedly or continuously triggered by it?

For example, a significant stressor could be a classroom environment in which a child may be academically struggling and is often singled out or publicly ridiculed. Similarly, lacking friends or allies in a middle school or high school environment could be stressful, frustrating, and even a vulnerable setting. Remember, when there is significant stress, the body will protect itself via a flight, fight, or freeze response.

We once thought this response was only related to threats in which our lives are in physical danger, but science is evidencing that extreme life or death situations aren't the only initiators. The two situational examples noted above could trigger a flight, fight, or freeze response in the body. It all depends on how the child is registering or perceiving the situation: whether as a threat to physical safety or security, or a threat to their mental or emotional safety or security.

The child's capacity to endure the distress, hold it together, and manage, is usually relative to how they're handling the accompanying thoughts and emotions. Without good coping skills or support they deem reliable and helpful, a child will cope with distress in a way that offers relief, regardless of whether it's healthy or not. Consider the meltdown as synonymous to a volcano erupting. Distress in the body is like hot lava brewing and breaking the surface once it can no longer be contained.

What parents can do

Now, let's be honest. Who plans to approach a volcano that's erupting with more fire? How can that be productive? On the other hand, who ignores an erupting volcano or doesn't take what's occurring seriously? We know immediate action is necessary, such as keeping calm, ensuring safety, and gathering information—ironically this approach is best in the case of a meltdown, too.

Even more helpful is considering how environmentalists and meteorologists work. They typically stay in tune with volcanoes and have a pretty good idea of relevant atmospheric factors that create and sustain both normal and eruption conditions. This approach is adaptable for parents and caretakers: being and staying in tune with your kids while creating an atmosphere of open communication affords an outlet for a child's distress. Even if the outlet happens to be another trusted adult (aunt, uncle, coach, and so forth) who is easily accessible, the child or adolescent now has a pressure valve to diffuse some of their distress.

Teaching the child coping strategies and skills to manage their emotions (such as deep breathing, mindfulness exercises,

physical activity, healthy hobbies, journaling/writing, open communication, emotion management with tools like a Feelings Wheel, and so forth) can be valuable. Of course, these should be tools the child engages routinely and not just when a meltdown is on the rise.

Additionally, creating a consistent atmosphere of listening, healthy, nonjudgmental communication and patience is a critical component that has to be fostered by parents. Further, as noted above, parents have to be okay with managing their emotions and their own flight or fight response to personal distress during a meltdown. It's perfectly fine to take a few moments to breathe, ground, and gather yourself prior to being present for your child because you have to maintain self-control and not allow your own volcano to erupt.

Once the situation diffuses, take time to process your emotions and thoughts, and engage in self-care and/or professional care as needed. Returning to the relationship regardless of the meltdown's magnitude with open, transparent communication is invaluable. Similarly validating the child and addressing the behavior, without shaming their character, is even more critical. **A**

.....

Returning to the relationship regardless of the meltdown's magnitude with open, transparent communication is invaluable.



A licensed clinical and research psychologist, **Brandi Walker, PhD**, is the CEO of Marie Pauline Consulting, LLC, her private practice dedicated to providing educational, clinical, and psychological guidance and expertise to organizations seeking to improve their social climate, employee and customer relations, and/or enhance their cultural humility and cultural consciousness. An alumna of Howard University and the University of Maryland, she served as an Army psychologist and faculty member at Womack Army Medical Center at Fort Bragg, North Carolina. A recently retired Army commissioned officer, she worked directly with veterans, service members, and their families for over a decade, and proved critical to the development of initiatives and collaborations that are in sync with the Army's holistic health and fitness programming. She spent the last eight years working with various hospitals, clinics, and schools conducting research on children with ADHD. Her community efforts also entailed collaboratively initiating the Prince George's County, Maryland, CHADD chapter and CHADD's Southern Regional Support Center. She subsequently founded Villages Overcoming Intersections: The Collaborative Empowerment (VOICE) for Neurodiversity (VFN), a research-based nonprofit that builds partnerships with experts and organizations across various fields to collectively improve access to care and quality of life for neurodiverse individuals and/or communities encountering systemic and societal obstacles.



Diagnosed with ADHD when he was eight or nine years old, **Griffin Rouse** holds a bachelor's degree in public and community service from Providence College. After graduating, he spent seven years working with at-risk youth and saw clearly that many of these bright, misunderstood young men and women were simply ADHD adolescents who lacked the structure and support to succeed. This experience inspired him to channel his passion into a field where he could make a difference in the lives of young people with ADHD. This led him to coaching. His coaching style is built on the foundations of asset-based development, a practice that encourages participants to reframe the things traditionally considered to be liabilities as assets or solutions. He obtained his ADHD and life coach training through MentorCoach.