

DMDD in the Classroom

What is DMDD?

DMDD stands for Disruptive Mood Dysregulation Disorder. Children and adolescents with DMDD experience significant and ongoing irritability and anger as well as frequent temper outbursts. These difficulties are inconsistent with their developmental age and out of proportion with the situation at hand.

Don't all kids get angry and irritable?

Of course, all kids get angry and irritable; however, children with DMDD experience these emotions all the time. Think about how you feel on a bad day - as an example, you spilled your coffee, misplaced your keys, forgot your lunch, you're running late... No wonder something that seems small could cause a big reaction! Imagine living with that feeling constantly and possibly more intensely than most people. Then, top it off with difficulty managing those feelings, the demands of the school day, and being in a place where you frequently feel unsuccessful.

Research indicates that DMDD may be caused by an underactive prefrontal cortex (the part of the brain responsible for many executive functions) and an overactive amygdala (fight/flight/freeze).

What doesn't work:	Instead, try:
Often, rewards and consequences don't work consistently - because no matter how much he/she wants to make a good choice, a child with DMDD can't always do so.	Offering choices, and helping the child accept the outcome of the choice - without excessive negative, punitive outcomes for poor choices.
Raising your voice/yelling when a child is escalated, irrational, or angry.	Keeping a calm, neutral face and a quiet, calm voice. Using as few words as possible to state expectations or offer choices. Then giving the child time to process and self-calm if possible and safe.
Ignoring questions or requests because they're not asked politely or insisting that the child ask nicely before accessing a coping strategy (i.e., take a break).	Answering questions that are seeking information. This can help to reduce anxiety. (Not necessary to answer the same question over and over, though!) If a child is attempting to use a coping strategy to self-calm, allow it (if possible). Encourage attempts to self-calm.
Changing the expectations, or assuming the child knows what is expected.	Teaching expectations explicitly and keeping them consistent. Reviewing regularly. Providing specific, genuine, age-appropriate praise when a child is meeting expectations.

<p>Engaging with a child who is in the midst of a tantrum or rage; physically moving a child (unless absolutely necessary for safety as a last resort).</p>	<p>When a child with DMDD is in the midst of an episode, keep a calm expression. Don't talk to the child unless necessary (then calmly, and one person - not several different people), and give space. Remove the other students from the classroom if necessary and possible. Safety first! Do not make forceful gestures, statements, or anything that will be perceived as a threat by the child. Allow the rage to subside.</p>
<p>Attempting to process with a child immediately after the episode.</p>	<p>Waiting until after the child is calm. Having a conversation about what happened, what was so frustrating/irritating/ infuriating that triggered the episode, etc. The child may not know or remember! Behavior is communication - and the goal should be focusing on helping the child learn to communicate his or her needs in a better way.</p>
<p>Blaming the child or the parent.</p>	<p>Work together with the child's family. Establish a positive rapport with the child - trust is essential! Remember, the child's parents are the experts on their child and have been through this before! Respect their knowledge and experience. Work as a team for the benefit of the child - that's why you're all there!</p>