

Chapter 7

Playful Approaches to CBT with Aggressive Children



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7.1 Emotion Competence and Regulation in Young Children

Emotional competence is a noteworthy concept in children's development. Children must gain mastery over understanding the meaning of emotions before expressing and regulating emotions. In 2000, Saarni proposed a model of emotional competence which emphasized cognitive and social moderators including awareness of one's own emotions, the skills to discern the emotions of others, and the capacity to cope adaptively with difficult emotions (Saarni, 2000; Suveg et al., 2007). One aspect of emotional competence is emotional knowledge or understanding. Pons and Harris (2000) developed the Test of Emotion Comprehension (TEC) to assess the hypothesized domains of emotional understanding. These domains have improved our understanding about how to guide youth through learning and understand the function and impact of their emotions. These domains are recognition of emotions, based on facial expressions; the comprehension of external emotional causes; impact of desire on emotions; emotions based on beliefs; memory influence on emotions; possibility of emotional regulation; possibility of hiding an emotional state; having mixed emotions; contribution of morality to emotional experiences.

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While youth must learn to understand their emotions, they must also master inhibitory control, the ability to inhibit or suppress salient thought processes or behaviors that are not relevant to the goal or task at hand (Carlson & Wang, 2007). Mostly develop this control mechanism during the preschool years, but if children do not develop these skills, they are left with poor inhibitory control and become easily frustrated and prone to reactive aggression.

Finally, the concept of emotion regulation (ER) has been emphasized in both the developmental and clinical literature. ER refers to the regulation of the experience of an emotion first by monitoring one's expressive behavior (Carlson & Wang, 2007). Then as an internal modulation of triggered emotions via the application of various behavioral and cognitive strategies (Cole & Jacobs, 2018). Explicit awareness of emotion regulation strategies emerges between ages 3 and 5 years. Then, over the preschool period, children acquire a new range of skills such as theory of mind, the capacity to inhibit a dominant response and the process of cognitive reappraisal (Sala et al., 2014). This crucial emotion regulation strategy requires that the child changes their ways of thinking about an emotional trigger in order to regulate their response. Overall, a review of available research indicates a universal acceptance of the idea that understanding one's emotional life is a central component of children's socio-emotional competence and adjustment.

7.2 Anger and Aggression in Young Children

Some aggression is normative in early childhood and generally declines during the transition to elementary school. Coinciding with language acquisition and increased expressive vocabularies, children between the ages of 2 and 5 years tend to rely less on physical forms of aggression and more on verbal abilities for emotional expression (Wilson & Ray, 2018). However, children who are persistently aggressive are at greater risk for poor academic and interpersonal outcomes (Evans et al., 2019). Aggressive behavior problems in young children are one of the most frequent referral issues for clinicians and since early patterns may predict later antisocial behaviors, early interventions are fundamental (Robson et al., 2020). Many risk factors that lead to the development of anger and aggression problems have been identified. These include a difficult or uninhibited temperament, deficiencies in affect regulation and social information processing, hostility biases and misappraisals, and poor problem-solving skills. Contextual risk factors have focused on parents who provide harsh discipline, poor monitoring, and inconsistent contingency management (Feindler, 1995). Finally, coercive patterns of family interactions and the absence of positive parenting behaviors are also influential in the development and maintenance of aggressive behavior patterns.

Emotion regulation, the ability to manage anger and frustration, influences the development of cognitive and social skills necessary for prosocial functioning. Young children who exhibit aggressive behaviors most likely experience intense levels of negative affect and have few internal coping skills to manage their

emotions. Children struggling with their self-regulatory processes often lack the ability to control their feelings and emotions and therefore may display aggressive behaviors out of impulse. High impulsiveness most commonly characterizes conflicts related to self-regulation and aggression. Very young children often express aggression through impulsive acts related to their feelings of anger, frustration, and the like (Wilson & Ray, 2018). Further, empathy and self-regulation are identified components of aggression that theoretically contributes to a child's inhibition and expression of aggressive acts. A child's ability to experience and demonstrate empathy is directly related to his or her ability to take on the emotional experiences of another and thus is largely connected to regulation of aggressive behavior (Wilson & Ray, 2018).

Within a cognitive behavioral theoretical model, anger is viewed as a subjective experience which can vary in intensity and duration and which emerges across various interpersonal contexts. Anger expression, which includes the ability to show it outwardly, to suppress it deliberately or to cope with it actively, varies between individuals (Sukhodolsky et al., 2004). Anger as one of the many emotions that children learn to master is a complex emotional construct composed of physiological, cognitive, and behavioral components. For young children, the link to aggressive behavior is fairly common and most children learn to control their aggression and express their emotional experience in a socially competent fashion. However, there are significant numbers of children who fail to achieve skills of emotional regulation and impulse control who will then need clinical intervention as early patterns of aggressive behavior tend to remain stable across time. Therefore, early intervention is advised for youth who display aggressive tendencies, have little impulse control, or have difficulty understanding emotions.

During the past 10 years, there has been a proliferation of cognitive behavioral anger management intervention programs. Based on the understanding that children's aggressive behaviors are the outcome of poor emotion regulation and self-control, programs have been developed to remediate these deficits. Social information processing theory indicates that children's emotions and subsequent actions (in this case anger and aggression) are regulated by the way they perceive, process, and /or mediate environmental/interpersonal events. Their experiences of frustration and anger are related to identifiable deficits and distortions in this cognitive processing sequence as well as deficits in problem-solving and appropriate anger expression skills. Thus, each child will need to learn ways to manage their subjective emotional experience, to reframe his or her cognitive appraisals of events and to respond to provocation in an effective prosocial manner (Feindler & Gerber, 2008). Yet, teaching young children coping skills and emotion regulation strategies is no easy feat. Play activities offer clinicians an accessible way to connect and work with younger children to improve their emotion regulation.

7.3 The Role of Play

Children's pretend play has long been proposed as a mode of social interaction that enhances the development of emotion regulation (Hoffmann & Russ, 2012). Pretend play provides children with a unique environment in which to practice and master social and emotional skills. According to Fein (1989) pretend play, by transcending literal meaning, provides a context to process, manifest, and modify experiences involving high levels of emotional arousal. Themes and stories acted out in play help to teach display rules about emotions, such as when and how to express anger as well as model aspects of modulating emotions (Hoffmann & Russ, 2012). Clearly, play is a learning mode for young children and should be incorporated into clinical interventions. Abstract forms of play allow for the processing of emotion reactions, attuning of motivational states, and enhanced understanding of interpersonal interactions (Peterson & Flanders, 2005). Many aggressive young children have difficulty playing imaginatively and instead release their aggressive impulses by acting out during play: hitting, throwing, breaking, biting, etc. Further, they seem to have difficulties engaging in rich or complex play and in coordinating symbolic play themes (Landy & Menna, 2001).

Opinions vary as to the availability of aggressive toys in clinical settings when working with young aggressive children. Some therapists see the use of toys such as the punching bag or Bobo doll, as necessary to a child's behavioral expression of emotion and underlying conflict (Trotter et al., 2003), while others see aggressive toys as possibly harmful. Schaefer and Mattei (2005) in their review of catharsis and children's aggression concluded that "when adults permit and encourage children's release of aggression in play, the children are likely to maintain this behavior at its original level or actually increase it" (p. 107). Therefore, many therapists incorporate the use of structured play to teach children numerous affect expression and regulation skills as well as teach children how to control aggressive impulses. Drewes (2008) concluded that the use of the Bobo doll and other aggressive toys is not effective and recommended alternative expressive material as providing a more constructive and perhaps symbolic means to express emotions. Unfortunately, little recent research comparing these cathartic strategies with other play therapy strategies when working with young aggressive children has been reported.

Instead, we recommend that child therapists work with age-appropriate toys, games, and books while implementing intervention strategies. Knell (2009, and this volume) has described an elegant but practical way to blend play therapy and cognitive behavior therapy for effective work with young children. Table 7.1 includes a list of anger management themed books and YouTube programs for young children to help with a bibliotherapy component as well. In *Appendix B*, there are several supplemental anger management intervention ideas that can be blended into clinical work with young children along with the Turtle Magic Intervention described next.

Table 7.1 Child-friendly resources

<i>Books:</i>
Alber, Diana: <i>A Little Spot of Anger</i> (2019) (30 pages)
Bang, Molly: <i>When Sophie Gets Really, Really Angry</i> (2004) (4–6 years) (40 pages)
Bartlein, Kate: <i>Lennon Bruce Fire Breather</i> (2019) (28 pages)
Boyd, Melissa: <i>B is For Breathe: The ABCs of Coping with Fussy and Frustrating Feelings</i> (2019) (4–6 years) (32 pages)
Crary, Elizabeth: <i>I'm Furious</i> (1994) (34 pages)
Dahl, Michael: <i>Little Monkey Calms Down</i> (2014) (20 pages)
Gaither, Jennifer: <i>I Can Yell Louder!</i> (2020) (48 pages)
Graves, Sue: <i>I Hate Everything</i> (2013) (28 pages)
Green, Agnes: <i>Today I'm a Monster</i> (2017) (42 pages)
Green, Andi: <i>The Very Frustrated Monster</i> (2016) (72 pages)
Herman, Steve: <i>Train Your Angry Dragon</i> (2018) (44 pages)
Huebner, Dawn: <i>What To Do When Your Temper Flares</i> (2007) (88 pages)
Kurtzman-Counter, Sam & Schiller, Abbie: <i>When Miles Got Mad</i> (2013) (30 pages)
Lite, Lori & Stasuyk, Max: <i>Angry Octopus: An Anger Management Story introducing active progressive muscular relaxation and deep breathing</i> (2019) (30 pages)
Madison, Linda: <i>The Feelings Book (Revised): The Care and Keeping of Your Emotions</i> (2013) (104 pages)
Maude Spelman, Cornelia: <i>When I Feel Angry</i> (2000) (Board Book) (24 pages)
Mayer, Mercer: <i>I Was So Mad</i> (2000) (24 pages)
Meiners, Cheri: <i>Cool Down and Work Through Anger</i> (2010) (40 pages)
Schiller, Abbie: <i>Sally Simon's Super Frustrating Day</i> (2013) (30 pages)
Verdick, Elizabeth: <i>Calm Down Time</i> (2010) (Board Book) (24 pages)
Viorst, Judith: <i>Alexander and the Terrible, Horrible, No Good, Very Bad Day</i> (1972) (32 pages)
<i>Movies:</i>
Inside Out
Frozen
The Incredible Hulk
<i>TV Shows:</i>
Daniel Tiger: Anger episode
Sesame Street: <i>Sticks learns to deal with his anger</i>
<i>YouTube:</i>
<i>A Little Spot of Anger:</i> https://www.youtube.com/watch?v=ptDqMeAcn9w
<i>When Sophie Gets Really, Really Angry:</i> https://www.youtube.com/watch?v=dNfd8WFDBAY
<i>B is For Breathe: The ABCs of Coping with Fussy and Frustrating Feelings:</i> https://www.youtube.com/watch?v=sEmIKSIZzNo
<i>Little Monkey Calms Down:</i> https://www.youtube.com/watch?v=5Yj6pWESqBU
<i>I Hate Everything:</i> https://www.youtube.com/watch?v=9F_wnrNtD58
<i>Today I'm a Monster:</i> https://www.youtube.com/watch?v=xUwIVR72Zpg
<i>The Very Frustrated Monster (2016):</i> https://www.youtube.com/watch?v=MaVEAtEJd7E
<i>Train Your Angry Dragon:</i> https://www.youtube.com/watch?v=0Z637pUJx2I
<i>When Miles Got Mad (2013):</i> https://www.youtube.com/watch?v=37Nv68AdrWo

(continued)

Table 7.1 (continued)

When I Feel Angry (2000): https://www.youtube.com/watch?v=mEMWNjIHL_U
I Was So Mad (2000): https://www.youtube.com/watch?v=xec0MvTNegc
Angry Octopus: An Anger Management Story introducing active progressive muscular relaxation and deep breathing: https://www.youtube.com/watch?v=6PxfJC_89Lk&t=153s
Calm Down Time (2010): https://www.youtube.com/watch?v=j6Ik72R2rjc
Alexander and the Terrible, Horrible, No Good, Very Bad Day: https://www.youtube.com/watch?v=w6HhKlpp7ok
<i>Board/Tabletop Games:</i>
Trouble
Jenga
Operation
Sorry
Don't Wake Daddy
Don't Break the Ice
Connect 4

7.4 Turtle Magic

7.4.1 *Turtle Magic Intervention Program Description*

Turtle Magic Intervention (TMI) is a short-term therapeutic treatment program originally developed for preschool-aged children informed by tenets of cognitive behavioral play therapy (CBPT). CBPT is based on the cognitive theory of emotional disorders and is designed to be developmentally appropriate for children for a range of presenting problems (Knell, 2009). TMI was originally designed as a pilot treatment for preschool-aged children who demonstrated marked externalizing problems and aggressive behavior in their classroom (Schira, 2018). TMI may be used as a psychoeducational emotion regulation program with young children.

The TMI program aims to teach children the skills necessary to identify and express their emotions, regulate their emotional responses by implementing coping skills, and solve problems in a developmentally appropriate way. TMI may be utilized in an individual or group format. TMI is designed as a nine-session treatment program with sessions lasting approximately 30 min. After the eight core sessions, a ninth “booster” session is administered approximately 1 month later.

7.4.2 *About Turtle Magic*

The Turtle Magic Intervention was developed to be used in conjunction with the short therapeutic storybook, *Turtle Magic*, that highlights the core anger management components (Feindler, 2009). The protagonist in the story, Timmy Turtle, struggles to adjust to school and get along with his peers, and can be seen engaging

in aggressive and impulsive behaviors. In the story, Timmy Turtle receives a recommendation from the Wise Old Turtle to use his shell as a calm space to relax and consider other possible solutions to a conflict (Feindler, 2009). The phrase “doing a turtle” involves “(a) recognizing anger as it swells, (b) interrupting the swell and pulling inside, (c) taking a few deep breaths and thinking about how to solve the conflict, and (d) returning to the scene and implementing a possible solution” (Feindler, 2009, p. 409). These skills can be applied on the individual level or with group related problems that provoke frustration in young children. Through *Turtle Magic*, children enhance their narrative abilities and therefore, view multiple perspectives on a situation and further develop their empathy (Feindler, 2009).

7.4.3 TMI Treatment Description

All meetings begin with the welcome song and discussion of the session agenda. The welcome song, described later in the TMI manual, outlines the rules for whole body listening with behavioral descriptions for their eyes, ears, voices, and bodies. Songs and choreographed body movements are playful and engaging ways to orient children to the sessions. Each week the child learns and practices target coping skills. The fundamental coping skills of TMI include relaxation, positive self-talk, and problem-solving. The TMI lessons are designed to progressively build on one another with ample opportunities for review and practice. Throughout each session, the therapist and child refer to the *Turtle Magic* (Feindler, 1991) storybook to identify and emphasize the skills being learned; the child will also role-play the story content using accompanying animal puppets and other play materials. Children engage in structured activities and games along with peers and the therapist to increase skill generalization. At the end of each session, the child receives a small prize and is awarded a skill badge based on the session’s target skill (e.g., Emotion Badge, Relaxation Badge).

Each of the nine TMI treatment sessions is divided into four components:

1. Welcome/ Check-In	The therapist welcomes participants and sings the Welcome Song. The therapist facilitates an emotion check-in e.g., “How are you feeling today?” Next, the therapist reviews the session agenda with the child/group, including a preview of the skill to be learned together
2. Fun & Learning	Each week the child/group will learn a new skill and engage in activities and games aimed at practicing the learned skills
3. Turtle Magic story	After the skill is explained and modeled, the child/group will read the <i>Turtle Magic</i> storybook about a young turtle named, Timmy Turtle, who struggles to adjust to school and get along with his peers, and often engages in aggressive and impulsive behaviors. The children will be instructed to identify the learned skill in the storybook and role-play the skill using animal puppets and play props

4. Reinforcement	At the end of each session, the children receive a small prize and are awarded a badge based on the session content and skill learned (e.g., Emotion Badge, Relaxation Badge)
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The following list outlines the materials needed for all the TMI sessions:

- *Turtle Magic* storybook: (Feindler, 1991) available online from author.
- Puppets (2 minimum): Turtles, one big, one small (Folkmanis Turtle Hand Puppet)
- To Do/Done Checklist: DIY (suggested white board, pen/paper)
- Whole Body Listening Cue Cards <https://lessonpix.com/materials/1090565/Picture+Cards>
- Stickers, prizes, and badges
- Emotion visual cue cards: happy, sad, angry, excited, surprised, scared
- Handheld Mirror
- Props and toys: *Pizza, Stop Sign, Microphone, Thought Bubble*
- Freeze Dance Song: <https://www.youtube.com/watch?v=2UcZWXvgMZE>
- Timmy Turtle problem-solving pages
- Additional animal puppets
- Yoga mat (optional)

The *Turtle Magic Intervention- Individual and Group Manual* (Fig. 7.1), available below, is available for application with young children in both individual and group formats. The suggested group size is between three and five group participants. Therapists are encouraged to have materials prepared before the session and to structure each session using the four-component outline: Welcome/Check-in, Fun & Learning, Turtle Magic Story, and Reinforcement.

7.4.4 *Brief Review of Evidence for Turtle Magic Intervention*

Schira (2018) conducted a single-subject, pilot study of TMI to examine the effectiveness and feasibility of the treatment program with three children at a special education preschool who were identified as exhibiting aggressive behaviors. Participants enrolled in the pilot study were 3 years old at the start of treatment. Eligibility was determined based on a T-score of 65 or above on the *aggressive problems* subscale, a T-score of 65 or above on the *oppositional defiant problems* subscale, or a T-score of 60 or above on the *externalizing problems* subscale on the Caregiver-Teacher Report Form for Ages 1 ½ to 5 (C-TRF; Achenbach & Rescorla, 2001). Evaluation of TMI treatment fidelity was coded using video-recorded treatment sessions implemented by a trained mental health professional. Within-participant analyses focused on comparing the subscale T-scores obtained from the C-TRF at three time points: pre (baseline), post (after completion of study), and at 4-month follow-up. Data collected from the C-TRF suggested that Child 1 displayed no significant change from pre- to post-assessment; however, at follow-up assessment, the teacher reported a significant decrease in all three subscales. Child 2 and 3, on the other hand, demonstrated an increase in problematic behaviors from

TURTLE MAGIC INTERVENTION- INDIVIDUAL & GROUP MANUAL
Alexandra Mercurio Schira, Psy.D.



SESSION 1: Therapy Induction

The first session of the TMI program begins with an induction to the therapeutic program including: an explanation of the program rationale, review of therapist and/or group confidentiality agreement, establishing the lesson agenda, and learning a welcome song about whole body listening rules. The child is also introduced to the *Turtle Magic* storybook themes, characters, and concepts.

Materials: *Turtle Magic* storybook, Puppets (2), To Do/Done Checklist, Whole Body Listening Visual Cue Cards, Reward stickers/prizes and Skills badge

Welcome/ Check-in

Introductions and Building Rapport:

Welcome Song: [sung in key of *Frere Jacques* nursery rhyme. Therapist should point to the corresponding body part when singing the welcome song.]

Lyrics: “Eyes are watching, Ears are listening, Voices Quiet, Body Calm... This is how we listen, This is how we listen, At group time, At group time.”

Fun & Learning

Therapist Introduction:

- The therapist introduces him/herself to the child and explains the agenda for the session and future sessions.
 - “*We will meet 8 times! We’ll get to have fun and do cool stuff like read books, play games, and practice learning new things!*”
- The therapist explains that their job is to help the child:
 - Learn about their bodies and feelings
 - Practice learning how to take care of themselves/feel good
 - Solve problems
- Therapist explains child roles:
 - Learn new things and practice in a safe space together with the therapist

Fig. 7.1 Turtle Magic Intervention—Individual & Group Manual

pre- to post-assessment, although these behaviors improved at follow-up assessment (Schira, 2018). Overall, researchers found that there was an improvement in teacher-reported prosocial behaviors from baseline to follow-up and that the treatment was implemented with high fidelity.

- Earn prizes for their work
- Therapist explains confidentiality:
 - This is a protected, safe space.
 - *“We want to feel safe together and practice trying new things. What is said in the session/group, stays in the session/group.”*
 - Therapist introduces: To Do/ Done checklist for the session using visual aid.

Turtle Magic Story

- Read *Turtle Magic*
 - Read the story interactively, stopping to pause and reflect on the different parts of the story that appeal to the child.
 - Map out story using puppets
 - *“We’re going to read a story and this puppet is going to help us read it!”*
 - *“What would you do? How would you respond in this situation?”*
- Role play with puppets (and/or other group members).

Reinforcement

Prize/Badge and Wrap-Up:

- Child receives Participation badge and picks from prize box

SESSION 2: Emotions

The second session is aimed at teaching the child to identify six core emotions and understand why emotions are important. In this lesson, the child learns that emotions help humans communicate about their wants and needs. Emotions are an everyday part of life, and we can usually tell how someone is feeling by looking at their faces or bodies to get some clues. Emotions also have a range of intensity- feelings can be big or small.

Additional Materials: Emotion Visual Cue Cards, Mirror

Welcome/ Check-in

Welcome Song

Recap

- Introduction for sessions and therapist/children role
 - *“Remember I’m here to help you learn about your bodies and feelings, teach you how to solve problems, and play games with you.”*

Fun & Learning

- Introduce Emotions/Feelings
 - Activities and games aimed at increasing emotional knowledge:
 - Emotion visual cue cards: Have child identify 6 core emotions - Happiness, Sadness, Fear, Anger, Surprise, Disgust
 - *“What feeling is this? How do you know? What might make someone have that feeling?”*

Fig. 7.1 (continued)

An adaptation to TMI was Turtle Magic Intervention for Groups (TMI-G) of young children was developed by Pazmino Koste (2021). Interventions in small groups of children offer increased opportunities for in vivo role-plays of frustration eliciting situations as well as the practice of emotion regulation and social skills with peers. The first study of TMI-G was to examine the treatment acceptability of

- Check yourself out: using handheld mirrors, children can practice making feeling faces with therapist or each other (i.e., personal mirrors or passing around shared mirror)
- *Intensity of emotions-big and small emotions
 - This may be incorporated if children are focused and capable.
 - *“You might feel a little angry if you had to wait your turn in a game or you might feel really scared if you couldn’t find your adult at the playground.”*

Turtle Magic Story

- Read *Turtle Magic* for connection to and emphasis of emotions - using emotion cards for visual recognition task
 - *“Remember Timmy Turtle? Let’s see if we can find any of the feelings we talked about today in the book.”*
 - *“How does Timmy’s face look? Why would he be angry? What did he do when he was angry?”*
- Child(ren) can hold the puppets and act out the emotions while reading story
- Normalize and provide psychoeducation about the nature of emotions and aggressive behavior
 - *“Everyone has feelings – grown-ups, teachers, children. Sometimes it helps to know how we are feeling to know what we are going to do about it.”*
- Expand with examples to generalize
 - *“I feel sad when I lose a game or get hurt on the playground.”*
 - Role play and play with puppets

Reinforcement

Badge/ Prize and Wrap-Up:

- Child receives Emotion/Feeling badge and picks prize from box

SESSION 3: Relaxation Strategies

In the third session, the child learns about body awareness and how to recognize when their body feels relaxed versus tense. The child will practice body clench/release techniques such as being a robot (tense, stiff) and wiggly worm (loose, relaxed) or uncooked spaghetti (tense, stiff) and cooked spaghetti (loose, relaxed). The child will also learn deep breathing exercises which can be aided using visual props and toys, including a pizza to smell and blow on hot pizza or cake prop to practice blowing out candles on a birthday cake. The child will also learn yoga poses, such as the turtle pose from the *Turtle Magic* storybook, when Timmy learns to tuck inside his shell. The child will then read *Turtle Magic* and role play with puppets and practice shifting from wiggly worm to the turtle pose.

Additional Materials: Pizza or Cake prop/toy, yoga mat (optional)

Fig. 7.1 (continued)

TMI-G for children with aggressive behaviors and emotion dysregulation. Further, this study examined whether the type of professional degree, years of experience as a school practitioner, or the type of school setting participants are employed would impact acceptability of TMI-G. Knowing the predictors associated with treatment

Welcome/ Check-in

Welcome Song

Recap:

- “We talked about emotions & feelings last time”- refer to emotion cue cards

Emotion Check in:

- Have children identify how they are feeling- referring to emotion cards
- Expand emotional vocabulary- “How does each emotion feel in your body? Why do we have emotions?”
 - Emotions tell people things. - “For example, a baby who is crying might want a snack or might have a dirty diaper.”

Fun & Learning

Fun and Learning Activity:

Today we are going to use our bodies ...

- Introduce Relaxation- “This is how your body feels when it is calm, and you are feeling good and safe.”
- Body awareness physical practice (Robot/Lego vs. wiggly worm, uncooked spaghetti vs. cooked spaghetti)
 - “Let’s see how your body feels when you are a robot! Lego character! Wiggly worm!”
 - Deep breathing: Model taking big inhale and exhale (incorporate images such as fresh flowers, pizza, birthday cake and candles)
 - Turtle pose (child practices tucking into shell and taking deep breaths)
- Incorporate body awareness and how it connects to emotions
 - “When you are calm, your body is relaxed, and you feel safe and happy. If you get upset, try to relax your body to help you feel good again.”
- Read *Turtle Magic* for reference and practice doing Turtle pose
 - Use puppets and play to act out turtle pose while reading story
 - “Remember Timmy? What pose does Timmy do?” “He uses the turtle pose to stay calm and peaceful.”
- Role play with puppets and practice shifting from wiggly worm to turtle pose (i.e., your friend will tag you to do the turtle pose!

Turtle Magic Story

- Read *Turtle Magic* for connection to and emphasis of emotions - using emotion cards for visual recognition task
 - “Remember Timmy Turtle? Let’s see if we can find any of the feelings we talked about today in the book.”
 - “How does Timmy’s face look? Why would he be angry? What did he do when he was angry?”
- Child(ren) can hold the puppets and act out the emotions

Reinforcement

Badge/ Prize and Wrap-Up

Fig. 7.1 (continued)

acceptability will help identify who would likely benefit from access to and training in TMI-G, which could foster engagement with the program. Finally, school practitioners were asked their opinion if TMI would be better implemented in an

- Child receives Turtle Pose badge and picks from prize box

SESSION 4: Stop and Freeze

In the fourth session, the stop/freeze skill is introduced and reinforced with the use of a stop sign as a visual prop. Active practice of behavioral inhibition is key for targeting impulsivity. The child will engage in activities, such as the freeze dance game and Simon Says, for practicing the skill. The therapist and child will read *Turtle Magic* and identify how Timmy uses the stop/freeze skill, thinks about his problem, uses his turtle pose to keep calm, and goes back into play with his peers calmly.

Additional materials: Stop sign prop

Welcome/ Check-in

Welcome Song

Emotion Check in:

- Have children identify how they are feeling referring to 6 emotion cards or visual cues
 - *“How are you feeling today? Remember emotions tell people things. How would I know you are sad? Show me in the mirror. What made you feel sad today?”*
- Expand emotional vocabulary- “how does each emotion feel?”
- Emotions tell people things

Recap:

- Review Relaxation and incorporate cues for relaxation using imagery, puppets, and props--- use body tension/relaxation to help identify how child is feeling
“Show me Robot (or Lego)! Show me Wiggly Worm!”

Fun & Learning

Fun and Learning Activity:

- Introduce Stop/ Freeze Skill- after children have learned how to recognize how their body feels relaxed versus tense, begin to introduce the Stop/Freeze skill. Children should practice inhibiting their behaviors and vocalizations.
- Play freeze dance game and Simon Says for skill practice
 - Take turns being “Simon”, use the stop sign prop

Turtle Magic Story

- Read *Turtle Magic* and refer to the stop/freeze skills Timmy uses
 - *“Timmy stops/freezes, thinks about his problem, goes into his shell, gets peaceful, and goes back into play.”*
- Reference stop sign prop in story, incorporate stop sign into play

Reinforcement

Badge/ Prize and Wrap-Up:

- Child receives Freeze Pose badge and picks from prize box

Fig. 7.1 (continued)

individual, group format, or other, and if preschool-aged children would benefit from the intervention.

Participants for this study included 92 licensed/certified school psychologists, licensed clinical and master social workers, school counselors, and guidance

SESSION 5: Self-Talk

The fifth session focuses on self-talk and identifying what the child can say to themselves when getting ready to calm down so they can solve a problem. A visual teaching tool, such as a microphone, will be used to reinforce this skill. The child will refer to the self-talk pages in *Turtle Magic* and identify how Timmy uses positive self-talk to calm himself.

Additional Materials: Microphone toy/prop, Thought bubble printout/prop

Welcome/ Check-in

Welcome Song

Emotion Check in

Stop and Freeze - play song, practice skill

Recap:

- Review Stop/Freeze skill- practice impulse control games (i.e., Freeze Dance, Simon Says)

Fun & Learning

Fun and Learning Activity:

- Introduce positive self-talk: positive statements and phrases that the child can say to themselves to feel better, slow down, and think of positive coping thoughts to deal with a situation.
- Visual teaching tool - using thought bubble and microphone prop
 - *"It's hard to wait, but I can do hard things"*
 - *"It's not my turn, but I am working on sharing so everyone can have fun"*
 - *"I don't want to stop, but I will play again soon."*
- Role play positive self-talk - use puppets, thought bubbles, and microphone prop
 - Incorporate thought bubble props with puppets (model thinking, feeling, doing process with puppets)
 - e.g., (Thinking) Sally the fox thought, "I wanted to use the paints during choice time."
 - (Feeling) She feels disappointed and sad she cannot use the paints.
 - (Doing) Sally will try building with blocks instead today. She makes a big castle tower with her blocks.

Turtle Magic Story

- Read *Turtle Magic* and refer to self-talk pages (p. 7)
 - *"How does Timmy use this skill? Point out the times he is talking to himself!"*
 Child(ren) may use microphone prop to demonstrate Timmy's self-talk

Reinforcement

Badge/ Prize and Wrap-Up:

- Child receives Self-Talk badge and picks from prize box

Fig. 7.1 (continued)

counselors who worked with children between the ages of 3 and 12 years old at preschools and elementary schools in the United States. Participants were recruited to read a case vignette of three aggressive preschoolers, followed by the TMI-G treatment description and then complete self-report questionnaires to assess for

SESSION 6: Problem Solving

The sixth session introduces problem solving and uses a visual problem-solving chart to teach the three steps: stop, breathe (three deep breaths), and think (“what else can I do?”). The child will play out various problems and solutions using animal puppets. *Turtle Magic* will be read, and the child will be asked to identify how Timmy uses his skills to solve his problems.

Additional Materials: Extra puppets (animals, people), Problem Solving visual

Welcome/ Check-in

Welcome Song

Emotion Check in

Stop and Freeze practice (song, Simon says)

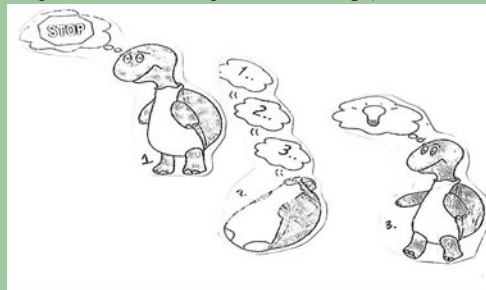
Recap:

- Recap positive self-talk: this is what I can say to help me feel better. “Timmy, keep trying. You can do this!” (Use microphone prop)

Fun & Learning

Fun and Learning Activity:

- Introduce Problem Solving: ways we figure it out, come up with an answer or plan for a problem or challenge
 - Include 3 steps and method for problem solving (include visual 3 steps)



- 1. Stop
- 2. Breathe-Take three deep breaths
- 3. Think-What else can you/I do?
- Play out problems and solutions in group - can use additional animal puppets

Turtle Magic Story

- Read *Turtle Magic* and refer to self-talk pages (p.7)
 - “How does Timmy solve his problems?”
- Child(ren) may use microphone prop, thought bubbles, turtle pose, etc. to demonstrate Timmy’s problem-solving

Fig. 7.1 (continued)

treatment acceptability of the *Turtle Magic Intervention-Group*. Scores on the Treatment Evaluation Inventory-Short Form (TEI-SF, Newton & Sturmey, 2004) range from 9 to 45, with higher scores indicating greater acceptance of a given treatment. A total TEI-SF score of 27 indicates moderate acceptability of a treatment

Reinforcement

Badge/ Prize and Wrap-Up:

- Child receives Problem solving badge and picks from prize box

SESSION 7: Skills Recap

The seventh session is a skills recap session during which the therapist reviews relaxation strategies, self-talk, and problem solving. Each skill is reviewed and practiced using games and learning activities previously introduced.

Welcome/ Check-in

Introduction
Welcome Song
Emotion Check in
Stop and Freeze
Recap:

- Recap positive self-talk: This is what I can say to help me feel better.
 - “Alex, keep trying. You can do this!”
 - Use microphone prop

Fun & Learning

Fun and Learning Activity:
 Review relaxation & deep breathing

- Robot vs. Wiggly Worm: Bodily sensations give us clues about how we feel
 - “When you are calm, your body is relaxed, and you feel safe and happy. If you get upset, try to relax your body to help you feel good again.”
- Deep breathing with Pizza, Flower, Birthday cake

Self-talk

- Thought bubbles
- Microphone [*If you feel angry you can help yourself. You can tell yourself to calm down: “It’s okay. I can wait.”*]

Problem solving

- Review behavioral cues:
 - Solidifying sequence of 3 steps to problem solving:
 1. Stop
 2. Deep Breath
 3. Think about problem, think what else I can do?

Turtle Magic Story

- Read *Turtle Magic* in context of all cues and skills.

Fig. 7.1 (continued)

intervention. Results from the present study indicate that participants found TMI-G to be above moderate acceptability (Mean = 33.77, SD = 3.90) for children with aggressive behaviors and emotion dysregulation. Correlations were used to determine the relations between treatment acceptability and type of professional degree,

Reinforcement

Prize/Badge & Wrap-up:

- Child receives Turtle Skills badge and picks from prize box
- Prepare for final session- Termination discussion

SESSION 8: Termination and Putting It All Together

The final core session, Session 8, focuses on termination and recapping the skills learned in the context of the *Turtle Magic* storybook.

Welcome/ Check-in

Welcome Song
Emotion Check in
Termination Discussion

- “This is the last time we will meet together for a while and learn with Timmy Turtle.”

Fun & Learning

Fun and Learning Activity:

- Putting it all together to RECAP all skills and concepts
 - Emotions, Relaxation, Freeze, Self-Talk, and Problem Solve

Turtle Magic Story

- Review *Turtle Magic* Story, skills, and cues

Reinforcement

Badge/ Prize and Wrap-Up

- Child receives the Turtle Magic badge and picks from prize box

SESSION 9: Booster Session

After four weeks, the child meets for a booster session during which time they review the skills learned throughout the sessions (Emotions, Relaxation, Freeze, Self-Talk, and Problem Solve).

Welcome/ Check-in

Welcome Song: “Eyes are watching, Ears are listening, Voices Quiet, Body Calm... This is how we listen, This is how we listen, At group time, At group time.” (With whole body visual cues)

Emotion Review & Check in:

- Emotion visual cue cards: identifying 6 core emotions: Anger, Disgust, Fear, Happiness, Sadness, Surprise

Fig. 7.1 (continued)

years of experience as a school practitioner, type of school setting, racial and/or ethnic background most prevalent amongst students, and geographical region in the US. No significant correlations were found. School practitioners were also asked if they believed TMI would be better implemented in an individual format, group format, or other. Of the participants, 65.1% indicated TMI would be better

- Check yourself out: use a handheld mirror, children can practice making feeling faces.
- *Intensity of emotions- this may be incorporated if child is focused and capable

Fun & Learning

Fun and Learning Activity:

Let's see how well you remember Timmy Turtle and all the things we learned and practiced together.

- Putting it all together to RECAP all skills and concepts
 - Emotions: Recap 6 core emotions and what our feelings help us to do
 - Relaxation: Calm body and nice thoughts about ourselves keep us feeling good and safe.

Turtle Magic Story

- Read *Turtle Magic* and refer to self-talk pages
 - “How does Timmy solve his problems?”
 - Child(ren) may use microphone prop, thought bubbles, turtle pose, etc. to demonstrate Timmy’s problem-solving steps

Reinforcement

Badge/ Prize and Wrap-Up:

- Child receives Booster Turtle Magic badge and picks from prize box

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Fig. 7.1 (continued)

implemented in a group format, while 10.8% preferred TMI for individual therapy. Additionally, 24.1% of participants selected “other” and provided short answer responses including TMI as a combination of individual and group therapy, and TMI as a classroom intervention. Of the school practitioners who completed this study, 94% believed preschool-aged children would benefit from TMI, while 6% did not believe it would be appropriate.

Since the TMI approach is so new, there has been limited research on its efficacy for young children. The single-subject pilot study (Schira, 2018) with three aggressive preschoolers indicated teacher observed changes in the right direction at follow-up. Excellent treatment implementation fidelity was also determined for each session of the TMI manual. Since the treatment acceptability study completed by Pazmino Koste (2021) indicated strong acceptability ratings from school mental health practitioners, the logical next step would be to examine treatment outcomes with small groups of children. The small group format was highly endorsed by these school practitioners and we would also recommend adding parent pre-post assessments to future program evaluations.

7.5 Summary

Incorporating play materials, games, stickers/badges, and stories, the *Turtle Magic Intervention* described in this chapter is based upon the integration of cognitive behavioral concepts and play therapy approaches as a promising treatment of young children with anger and aggression problems. The nine sessions of *Turtle Magic Intervention*, implemented either individually or in a small group, are engaging and enjoyable for young children and can be easily implemented in school or community settings. Tables 7.1 and 7.2 include child-friendly resources and additional anger management strategies that can be included to extend treatment and/or to supplement the TMI protocol. Although outcome results on TMI are currently limited, the treatment program seems highly acceptable to mental health professionals working with young and aggressive children.






Table 7.2 Supplemental anger management play strategies for kids

1. <i>Anger in my body</i> : Where does anger live in your body? Using an outline of a body, have the child draw where the anger lives inside them Examples: “anger explodes out of my hands, I hit or break things”, “anger comes from my mouth, I yell and say mean things”, “anger lives in my brain, I think mean thoughts about others”
2. Symbolize your anger: Draw what it looks like, personify it, give it a name or use a character: it is important for children to see their angry feelings as outside of themselves and therefore able to be worked through and managed Examples of fictional characters: <i>Draco Malfoy</i> (Harry Potter), <i>Scar</i> (Lion King), <i>Sid</i> (Toy Story), Regina George (Mean Girls)
3. Playful breathing exercises: <ul style="list-style-type: none"> • Blowing out birthday candles. Ask child to put all 10 fingers up, breath in and smell the flavored cake, and have them blow out the candles (fingers) as slow as they can • Five finger breathing: Trace your hand breathing. Hold up one hand taking long deep inhales when tracing upward and slowly exhaling when moving down the finger • Elsa breathing. Take the biggest and longest breath possible through the nose and slowly blow out of the mouth creating an amazing ice sculpture! • Rainbow breathing. Start at the bottom of the red arch and inhale on the way up the rainbow, exhaling on the way down, adding as many colors as they’d like

(continued)

Table 7.2 (continued)

4. 5 Point Rating Scale (Buron & Curtis, 2003): Use 5-point rating scale teach feelings and intensities concepts. Rate the different levels of target feelings (i.e., anger, worry, sadness). Use different feeling words to expand emotional vocabulary. Can expand to incorporate body sensations, thoughts, or strategies to use at each level

5		<p>Angry</p> <p>I've lost control. I'm not listening Anymore. I could hit, kick or bite. I need a quiet place to calm down.</p>
4		<p>Overwhelmed</p> <p>Everything is too hard. I'm losing control and need to leave the environment I'm in. Give me space</p>
3		<p>Frustrated</p> <p>I'm not getting it, I'm showing signs of stress I should take a break now.</p>
2		<p>Anxious</p> <p>Trying to stay focused, but having a hard time staying on task Use calming strategies now</p>
1		<p>Happy</p> <p>Ready and willing to Work</p>

5. *Trigger tracker* (identify typical triggers for angry feelings): have child write down triggers encountered in their day, as well as how affected they were (use scale 1–5)

- Being told “no”
- Getting teased
- Being Left out
- Losing a game/turn
- Fight with a friend
- Bad dream/poor sleep
- Hungry
- Bad grade on a test
- Forgot homework

(continued)

Table 7.2 (continued)

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- | | |
|-------|---|
| 6. | <i>Make an Anger Iceberg</i> : Explain that most of the iceberg is underwater and cannot be seen clearly. Anger works much in the same way. We may be able to see angry behaviors, but what it is underneath anger can give us important information about how it starts and how we can resolve it. Can use this along with the trigger tracker |
| <hr/> | |
| 7. | <i>Quiet corner</i> : Provide a quiet, calm corner for the child to use when they need a break. Build it with blankets, squishable toys, books, sensory fidgets, feelings poster, coping phrases basket |
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