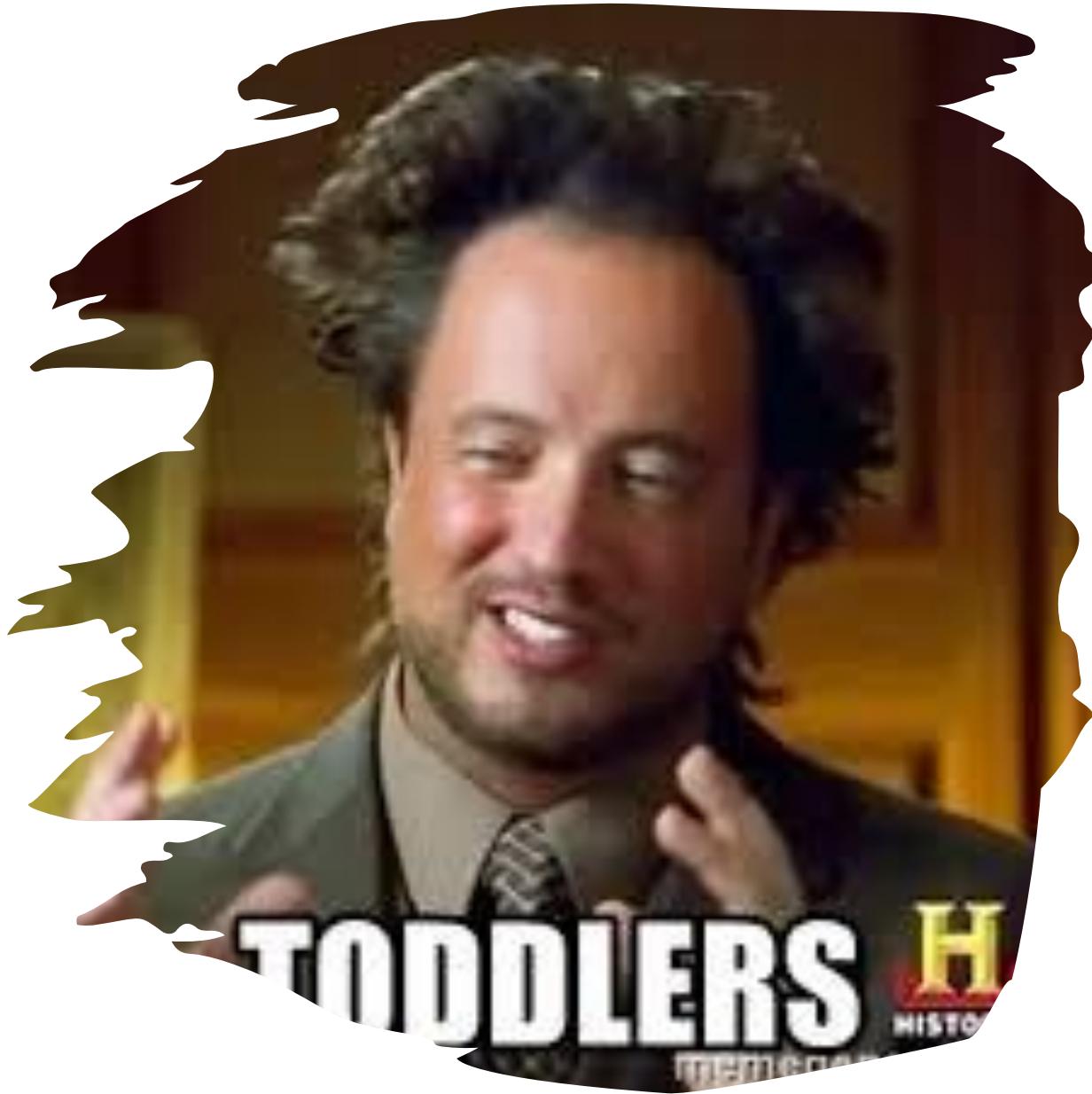


# *Temper Tantrums: What a child-less pediatrician needs to know*

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# *Why do we need to know this as General Pediatricians?*

Just think back to your siblings or cousins when they were toddlers. Or to the last time you went to the mall or grocery store...

Odds are you can remember a temper tantrum.

Odds are at some point a parent will ask you for advice and you should be ready to offer guidance. So here's a 101 for the child-less PCP.



## *Is this normal?*

- Temper tantrums are common in toddlers
- Usually begin around 12-18 months of age
- Peak at 2-3 years old
- Should become uncommon by school age & rare by adolescence





# *Why does this happen?*

- Immature way of expressing emotions (especially frustration & anger)
- Toddlers lack:
  - Verbal skills to put emotions into words
  - Impulse control
  - Ability to pause & self-calm
- Child may be trying to:
  - Express independence or idea of self
  - Test limits and rules
  - Express hunger or tiredness
- Child may be reacting to:
  - Surrounding stressors (environment, family)
  - Transitions in activities (ie.- daycare to home)

## Piaget's Stages of Cognitive Development



**Sensorimotor  
Stage**

Birth to 2 yrs

**Preoperational  
Stage**

2 to 7 yrs

**Concrete  
Operational  
Stage**

7 to 11 yrs

**Formal  
Operational  
Stage**

12 and up



*But they  
happen all the  
time and for  
different  
reasons...*

Main types of tantrums:

- Frustration-related
  - Child is frustrated with limitations
  - Child is unable to put something together or express something
- Demanding type
  - Trying to “get their way”
- Refusal type
  - Refusing to follow instructions/rules
- Screaming type
- Aggressive type
- Rage type







# *So what can I do when they happen?*

- Help child put feelings into words
  - “You feel angry because...”
  - Needs to know that feelings are normal but need to be expressed appropriately
  - Praise child when able to control temper and express feeling verbally
- Teach child that temper tantrums don’t work
  - Don’t change your mind or give in
  - Stay calm & speak in a soft voice
  - Be a role-model in your own relations
  - Avoid screaming or having an “adult tantrum”





# *So what can I do when they happen?*

Figure out the type &/or cause of the tantrum to help your child deal with it

- Frustration-related – support & encourage child, steer away from areas of difficulty when tired or hungry
  - “I know it’s hard, you’ll get better at it. Anything I can help you do?”
- Demanding type – ignore, shift child’s attention, move away if in a safe place, state understanding but don’t give in, don’t try to reason
  - “You’re mad because you want a cookie but not before dinner.”
  - “I can see that you are angry. I’ll leave you alone until you calm down. Let me know when you want to talk to me.”





# *So what can I do when they happen?*

Figure out the type &/or cause of the tantrum to help your child deal with it

- Refusal type – gently move child, let it go if unimportant or be firm if important, give a 5min warning
  - “Bedtime soon. In five minutes we’re brushing teeth.”
- Screaming type – give a time-out, clarify no screaming rule
  - “No screaming in our family.”





## *So what can I do when they happen?*

Figure out the type &/or cause of the tantrum to help your child deal with it

- Aggressive type – give a time-out
- Rage type – hold child and tell him/her that you know he/she is upset & transmit calmness; if child does not want to be held, respect this



# *Anything that I should avoid doing?*

- Punish child for having a temper tantrum
- Give in to demands just to stop the tantrum
- Talk too much to a child during the tantrum
- Hit or spank as punishment
- Bribe to stop tantrum



# *How can I prevent or reduce the risk of a tantrum?*

- Give enough positive attention
  - Praise good behavior
- Set firm and common limits
  - Make sure all caretakers are aware & stick to them
- Stick to a routine as much as possible
- Let your child choose between options
  - “Do you want an apple or a banana for your snack?”
  - “Time for your bath. Do you want to walk or do you want me to carry you?”
- Try not to say “no” too much
  - Choose your battles



# *How can I prevent or reduce the risk of a tantrum?*

- Give a few minutes warning before changing activities
  - Especially when ending playtime or changing locations
- Encourage child to use words to express emotions
- Have healthy snacks on hand to avoid hunger-related tantrums
- Make sure child gets enough rest
- Set a positive example in your own interactions
- Have clear and realistic expectations
  - Be aware of developmental stages



# *Does my child need to be seen by a doctor because of this?*

May need further evaluation for behavior or developmental disorders if:

- Hurt self or others during tantrum
- Tantrums happen 5+ times per day
- Tantrums happen at home AND at school/daycare
- Child has multiple other behavior problems
- Not improving despite following techniques explained before



## *Where can I learn some more?*

- “SOS! Help for Parents: A Practical Guide for Handling Common Everyday Problems” by Lynn Clark, PhD
- “The Difficult Child” by Stanley Turecki, MD and Leslie Tanner
- “Bring out the Best in your Children”- AAP
  - [www.aap.org/en-us/Documents/ttb\\_bring\\_out\\_best.pdf](http://www.aap.org/en-us/Documents/ttb_bring_out_best.pdf)
- Positive Parenting Tips – CDC
  - [www.cdc.gov.ncbddd/childdevelopment/positiveparenting/index.html](http://www.cdc.gov.ncbddd/childdevelopment/positiveparenting/index.html)

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