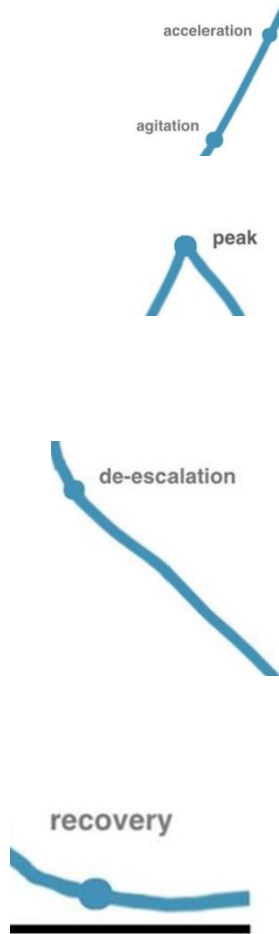
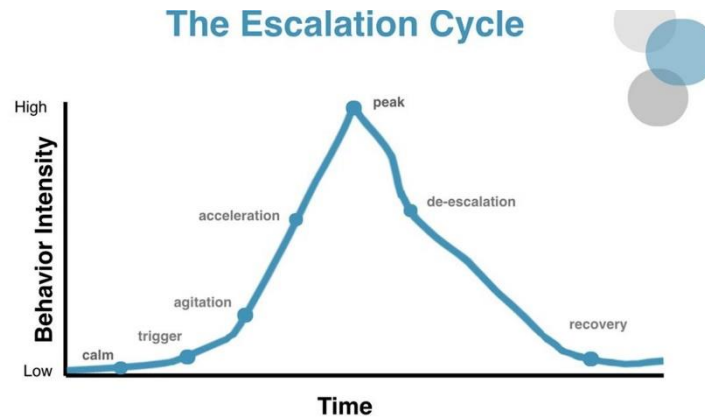


De-escalation and the anxiety cycle



Anxiety/escalation stage	What it may look like (child)	What adults can say/do
<p>Ascent - trigger start producing adrenaline Stress hormones kick in</p>	<p>Hyper vigilant to perceived or real threat Increased heart rate/breathing. Arms/legs ready for fight/flight May become very focused on threat - red mist Ability to remember not a priority</p>	<p>Remove pressure and stress from student Noticed physical changes - face flushes, tension in muscles - get in quickly with distraction or removing threat Remember child's memory likely impaired</p>
<p>Discharge or survival behaviour (cannot cope anymore)</p>	<p>Fight - attack threat Flight - run away from threat Freeze - very still and quiet not getting noticed, threat will pass</p>	<p>Keep child physically safe and away from threat. Either remove the threat or the child - whatever is safest. Simple safety messages - keep safe. JS language of safety guidance maybe useful here.</p>
<p>Descent - body recognises immediate threat has gone</p>	<p>Might look calmer but still very alert to threat. Hyper-vigilant poised for threat to reappear. Very vulnerable here - easily perceive another threat (telling off, consequence) and back to discharge behaviour (red). With the wrong response child may go back to red.</p>	<p>Be wary of thinking child is calm. Focus on calming child and away from threat. Distraction, mood boosting activities or favoured identified activities unique to child useful here. Ensure child away from threat allowing stress hormones to dissipate.</p>
<p>Crash - adrenaline draining away, depression or dip</p>	<p>Overly emotional/remorseful/exhausted May sleep - going through stress response cycle</p>	<p>Focus on resettling emotionally and physiologically - don't try to resolve. Again, mood boosting activities/distraction etc might be useful. If the child is safe it may be appropriate to do nothing and give space.</p>
<p>Getting back to normal baseline - get them back to their normal</p>	<p>Signs child is calmer - normal presentation unique to individual</p>	<p>Planning ahead for next time - learning conversations. Emotional coaching and or restorative. Make sure child ready to absorb. Deal with issue - repair and resolve. Any consequence delivered supportively and calmly.</p>



Guidance

When we are trying to de-escalate a child who has lost control of their emotions we need to react in a way that responds to their biology - work with their body chemistry rather than against.

Distress is a way of coping with stress or danger. Even though they are not in real life or death situation the brain misfires - reacting if they are in real danger. This is a perceived threat (something they think or believe to be threatening)

De-escalation is about responding in a specific way to each stage of the anger cycle and requires you to have a good understanding of the child. It is important to match the right techniques to where the child is the cycle.

This is a general resource and the individual and how this might apply needs to be considered. Some children go through this extremely quickly (externalise) some much more slowly (internalising) - everyone is different in terms of escalation and de-escalation.

This can form the basis of effective co-regulation and inform future emotional regulation planning such as developing a personalised 5-point scale.

De-escalation and the anxiety cycle

Anxiety stage	What it looks like	What adults can say/do
Ascent - trigger start producing adrenaline Stress hormones kick in		
Discharge or survival behaviour (cannot cope anymore)		
Descent - body recognises immediate threat has gone		
Crash - adrenaline draining away, depression or dip		
Getting back to normal baseline - get them back to their normal		