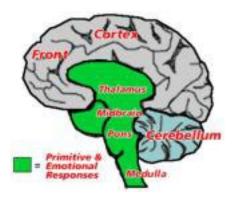
Stage	Characterised by	Strategies
The Trigger Stage	A precipitating event, such as a perceived personal attack, threat to self-esteem or property – something happens.	At this point, if child/young person wants to avoid getting to crisis stage, they can apply the gauge/relaxation method to bring them down, e.g. a discussion of what particular triggers are.
	Feelings such as fear, anxiety or frustration leading to	Pre-planned self-talk, visualisation or relaxation strategy.
	changes in behaviour, which may be subtle at first. The beginnings of physiological arousal.	Previous trigger-identification.
		Distraction (change task/activity or pre-planned alternative, e.g., favourite book).
		Relocation.
		Awareness of feelings about peer and adult physical proximity.
The Escalation	The body preparing itself for fight or flight, e.g. tension	Some of those strategies used at the trigger stage may still be helpful together with:
Stage	in the muscles, rapid breathing.	Individually tailored and well-practised interventions which are aimed at physical calming.
	Reasoning and rational behaviour reduces.	Moving to a pre-agreed place to calm down, i.e. remove from the immediate environment.
	Energy level rises: pacing, talking more quickly/loudly.	Adult needs to avoid using language which will escalate things more quickly, such as "pull
	Ability to listen reducing.	yourself together!"
	Becoming focused on a particular issue.	Action by the adult to reduce non-verbal signals which may be perceived as aggressive;
	Others' behaviour becoming over-interpreted and perceived as threatening.	adult should sit down, 'soften' eye contact, and speak more quietly.
The Crisis Stage	A high state of physiological arousal.	The strategies open to use at this stage are few. The focus is on management of the
	Control over aggressive impulses lessens.	situation.
	Volatile behaviour, e.g. kicking, lashing out.	High rationality, low emotion.
	Inability to make rational judgements.	Assertive; aware of volume, tone, eye contact and proximity.
	High egocentric frame of mind.	Give plenty of space.
	Difficulty in responding to external stimuli.	Remove potentially dangerous things.
	Confusion, combined with absolute focus.	Remove other children, if necessary.

		Send for help.
The Plateau/ Recovery Stage	The end of the immediate crisis.	Awareness that the aroused state can last up to 90 minutes, do not try to rush this as it
	Slow subsiding of anger.	can easily be ignited in this period, with little/no build up.
	The real possibility of re-escalation.	Need to protect from repeating/fresh triggers.
	Over sensitivity to triggers and others' behaviour.	Provide a space and time which feels safe.
	Vulnerability and confusion.	Calm tone and body language from adult.
	Guilt feelings may be starting to emerge.	No inquests at this point.
Post-Crisis/ Depression Stage	The need to rest and recover.	Help the child to distinguish between feelings about self and feelings about behaviour.
	The beginnings of a return to rationality.	Look for ways to help child start to put things right.
	The likelihood of unhappiness about what has	Discuss how things can be done differently next time.
	happened.	Encourage child to believe you want to help them make it better.
	Guilt leading to negative feelings about self.	
	Further threat to self-esteem.	



The brain is divided into three areas: the reptilian brain, the limbic system and the neocortex.

The **reptilian brain** constitutes the most primitive brain region. It is responsible for the flight-or-fight response when there is a perceived threat to our survival and for many basic biological functions.

Emotions are concerned with the pull and push of the "here and now".

Rationality, problem solving, is concerned with the *longer-term* view considering alternatives, *foreseeing* and evaluating the pros and cons of acting in a certain way.