

Replays: A new play based technique for helping children with WS with emotional and behavioral challenges

Replays is a new 'tool' that can minimize, even eliminate intense emotional responding, through fun, interactive symbolic play. Parents, teachers and therapists across all disciplines (Speech therapists, Occupational therapists, Psychologists etc) can learn and use this technique.

Karen Levine, Ph.D.
Naomi Chedd

Most children with WS are blessed with happy, sociable, charismatic personalities. At times, however, many children struggle with anxiety, fears and intense responding, which create emotional and behavioral challenges for the child, family and school. Common triggers for strong emotional responses include the following:

- Sensory overload, especially heightened sensitivity to sounds, resulting in anxiety and fear. Such responses may have begun in response to specific issues (e.g. fear of balloons popping or being among loud, screaming children, leading to fear of birthday parties ; fear of thunder resulting in fear of any rain storm or even cloudy skies; or even developing school phobia due to fire drills or loud, unpredictable public address system announcements.) Some children develop a heightened sensitivity and have extreme emotional reactions in response to tactile experiences (e.g. getting a haircut;; having nails trimmed or wearing certain items of clothing).
- Intense sadness in response to seemingly minor 'sad' events such as the end of a favorite TV program or movie, or the departure of a friend.
- "Contagious" or extreme responses to others' emotions, such as crying in response to seeing someone cry or hearing sad music, becoming anxious or upset in response to a teacher

scolding another student.

- Dramatic, negative emotional responses to seemingly small frustrations (e.g. sharing toys, turn taking or being told 'no'; unexpected intrusions into a favorite activity)

There are many interventions for such challenges, including teaching relaxation strategies, implementing sensory integration therapy, adapting the environment, providing positive behavioral supports and using visual aids (e.g. picture schedules and Social Stories™ to help the child understand the sequence and nature of potentially upsetting events). For some children, medication may help reduce anxiety and/or intense emotional responding. All of these approaches used alone and in combination can be useful.

Replays is an additional new 'tool' that can minimize, even eliminate intense emotional responding, through fun, interactive symbolic play. Parents, teachers and therapists across all disciplines (Speech therapists, Occupational therapists, Psychologists etc) can learn and use this technique. It integrates play therapy methods with what we know about the roles of interaction, communication and play by which typically developing children develop regulatory capacity. Replays is especially effective for situations that once were truly aversive for the child, such as putting on shoes for an infant or toddler with heightened sensory sensitivities, and to which the child has developed a learned pattern of intense responding, even

though the child's sensitivity level has improved.

How do you do Replays? The adult playfully acts out, with props and the child, everyday situations that are predictably troubling to the child. The child increasingly participates in these re-enactments, taking on different roles, experiencing small but tolerable amounts of negative emotion triggered by the events and paired with fun, high affect replaying, with a trusted adult (parent, teacher or therapist). Gradually the trigger situation becomes much less potent for the child who, through practicing and developing new affec-

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tive memories, becomes able to tolerate and participate in previously aversive experiences.

Unique to Replays is that the child's own intense emotional responses, such as crying, wriggling away, or pushing away the aversive trigger (e.g. shoes) are incorporated into the re-enactment, but with playful affect. The goal of Replays is to help the child decrease intense upset responses and develop more adaptive responses. Incorporating undesirable behavior into what the adult 'models', while at first counterintuitive, allows for direct work with the child's emotional system, beginning with emotional responses the child knows well and gradually shaping them to more

adaptive responses. It is important that the behaviors playfully incorporated by the adult, include only those behaviors frequently exhibited by the specific child and never new undesirable behaviors. Hence the adult is not ADDING to the child's repertoire of negative behaviors, but rather is using the child's common responses as a 'starting point' in play with the child, to help work through and desensitize the child to the trigger event.

Why does Replays work? This kind of play fosters immediate emotional recognition from the child, as the adult-driven re-enactment reflects a very familiar experience sequence. This playful demonstration of intense responding is highly motivating and amusing to the child, who increasingly wants to participate. Replaying such a familiar sequence enables the child to re-experience the aversive event and their own response in a slowed down and happy, interactive format in which they have increasing control. Once their own intense responding decreases, the child is able to engage in the 'correct' behavior, such as putting on shoes or sitting calmly through a haircut.

For children who can process at a more advanced level, Replays stories, incorporating the child's intense responses along with a resolution, can be created. This allows the child to 'reread and review their experiences as often as they like or request this from adults. Through repeated, interactive, playful re-enactment, children become desensitized to 'trigger' aspects of dysregulation, form new emotional memories and master their responses to the event. For many, it is remarkable how quickly this process occurs.

Many behavioral challenges based in intense emotional responses to seemingly small events can be resolved in one or two sessions. Parents can quickly learn these techniques and practice at home, just before predictably upsetting events, such as a visit to the doctor or a birthday party. For some children,

the process may take much longer and require numerous repetitions and manipulating certain aspects of the Replay by (for example) coming up with several alternative happy endings.

We have been using Replays for the past 8 years in our clinical practices with great success and very positive response from families. We began using it with typically developing young children around everyday upsets such as putting on snowsuits and diaper changes. We then expanded it to children with a variety of different developmental disabilities including Williams syndrome and, most recently with children with autism.

Unlike most behavioral interventions, Replays is fun for the adults as well as the children, and creates a series of happy interactions around events that have had negative associations for parents as well as children. Alleviating parent and/or teacher stress around 'trigger' events likely contributes to improved child regulation as well.

We have found that Replays can reduce the impact of many events and situations that were originally based on sensory issues but have become learned patterns. These include tantrums in response to dressing, taking medicine, putting on Band-Aids or getting a haircut. Children with obsessive-compulsive (OCD) tendencies (e.g. extreme reactions to changes in routine, broken or missing toys, out of order objects, making mistakes, or not being first), and those with phobias also respond positively. Children just discovering mischief are likely to respond quickly while more complex, internally driven regulation problems may require multiple approaches. We have also found that Replays while based in pretend play, can be effective even for children who appear to have limited symbolic play skills. We hypothesize that this is because the scenarios being 'replayed' are so familiar and have such strong emotional salience to the child and hence

require less abstraction -- or less of a symbolic leap.

Background Developmental and Research Literature

The model for Replays, which integrates several bodies of clinical and research literature, is briefly outlined below. There is not yet a full understanding of why intense emotional responding is common in so many children with Williams syndrome. However, we do understand some of the developmental processes that occur with children who have this characteristic. ALL typically developing infants show intense responding and little capacity to soothe, with great variation regarding when and to what extent self-soothing/self regulation develops. Often parents can calm infants through a combination of interactions -- soothing voice, calming facial expressions, gentle and secure holding -- as well as sensory soothing, such as swaddling in a blanket, bouncing or turning. What works for agitated and upset children varies considerably but parents by necessity quickly learn how best to soothe their infants! Toddlers are also intense responders (hence the 'Terrible Twos') but become increasingly able to use language, symbolic play and interaction to help them become more emotionally regulated and less

While young children with WS are often able to use some of these typical interactive and sensory tools with their parents, common delays in language and pretend play may reduce their capacity to develop emotional regulation. They may also be biologically predisposed to responding more intensely. Due to their challenges in plan and communication, many young children with WS have more dysregulated systems coupled with reduced capacity for regulation by accessing the tools used by typically developing toddlers.

reactive.

When a child experiences an

intense physiological response to a 'trigger' event (e.g. balloons popping at a birthday party), their fear of such an event is more likely to continue, even escalate, rather than diminish. It is also likely to 'spread' to associated events such as the birthday party itself, whether or not there are balloons present. Once the upset has passed, neither the anxious child nor the weary parent attempts to revisit or relive the event. The next time it comes up, the child and parent continue to have the same or even increasing negative responses, often awaiting the event with fear-

his hair cut. His parents have tried every way imaginable to accomplish the unpleasant task -- doing it at home, at the barber, with Dad only, even while he's asleep -- and still Joey gets fearful, angry and out of control as soon as he realizes what is happening. His OT has suggested desensitizing his head to touch with various playful head rubbing games. This has helped him tolerate wearing his hat outside and pulling his shirt over his head, but has not reduced the trauma of getting a haircut. The behaviorist suggested telling Joey he would get a reward after the haircut.

Elmo once again playfully imitate Joey's typical response "NO! NO! GO AWAY!" shaking Elmo as if he were having a meltdown.

During the Replay, Joey's father watched his response closely to make sure he was enjoying it and not scared. He hesitated before resuming the play, and Joey brought over the toy scissors and gave them to his father to get him to do it again. This time his father put the scissors next to Elmo and waited, then Joey laughed, saying "NO NO NO!" and grabbed Elmo, making him kick and wriggle. Joey replayed the scenario over and over, (about 15 times) each time with great delight. His father then gave the scissors to Joey and put Joey's hand to his own head, while playfully saying "NO NO NO HAIRCUT", assuming the part of Joey. Joey comforted him, saying "It's OK Daddy" and his father pretended to calm down as Joey "cut" his hair. His father then had another pretend upset and Joey again 'calmed him down'. The family replayed the same sequence several times in the days before the next real haircut and included Joey's big sister and mother in the play. Joey especially enjoyed when the other family members had pretend tantrums; he took the lead and calmed them down. Joey's speech therapist also joined in and put together a quick "Replays Story" about haircuts, using pictures she had on her computer, including several of crying children. She added the familiar words, "NO NO HAIRCUT" and then resolved the story with a smiling child sitting calmly for a haircut and then getting a Spiderman sticker and popsicle, two of Joey's favorites.

Joey's parents decided to then try cutting his hair for real at home. They did many Replays in the morning and read the story with him. And then amazingly, when they got out the real scissors, Joey went right to the chair where they had been playing and sat through the haircut without any apparent problem. Of course his story ended with a sticker

Replays addresses and revisits the event and the child's reaction. The technique uses the 'language' of the child's familiar emotional experience sequences, highlighted with familiar props and made playful and motivating through high affect interaction with parents, counselors or teachers. Replaying the event repeatedly in a fun and often exaggerated manner helps the child form new emotional memories associated with prior 'triggers' for dysregulation.

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Replays can be used in conjunction with other approaches simultaneously in order to address the same kinds of regulation-based behavioral challenges. Complementary approaches include positive behavioral supports, Social Stories™, sensory integration, environmental adaptation, and communicative supports, such as PECS and Assistive /Augmentative Communication (AAC).

An Example of Replays

Joey, a 4 year old with strong emotional response to many different sensory experiences, hates having

He liked the reward but it did not keep him from getting upset during the haircut. His teacher and speech therapist made a Social Story™ explaining with pictures the process of getting a haircut so Joey would be familiar with all the steps involved. Joey likes to look at and hear the story, but it didn't help him control his intense behavioral response when the actual haircut began.

Then they tried Replays. They first showed Joey that it was time for Elmo, his favorite companion, to have a haircut, and they took out a play scissors. Joey got a little anxious at the mention of the word, haircut, and seeing the play scissors, but his father quickly began the playful re-enactment, sitting Elmo in a chair, exaggerating cutting sounds and actions with the scissors, then having Elmo playfully yell "NO NO NO HAIRCUT!!!" while kicking and shaking his head, just as Joey did in the same situation. Joey looked to his father and smiled, instantly recognizing the scenario. He repeated the same sequence, very slowly approaching Elmo and saying, "Time for your haircut," and then making

and Popsicle too, as well as a smile and feeling of pride.

Some FAQ's:

WHEN should you do replays? In general Replays seem to be most effective when the child is NOT upset and repeatedly, just before the upsetting event will occur. For minor upsets around frequently occurring events (e.g. diaper changes) sometimes you can do Replays as the event is just beginning. Once a child is truly upset however, simply calming him is key before any other intervention is likely to be helpful.

WHAT can replays accomplish? Replays can't fix all behavioral or emotional challenges for every child. For example, Replays will not fix hyperacusis, the oversensitivity to sound that can be common in children with Williams syndrome. However, Replays can help with the secondary fears, the build up of anticipatory anxiety and the degree of upset a child with hyperacusis may experience. That is, a child afraid of noisy, popping balloons may respond positively to Replays and may no longer fear birthday parties or even touching and playing with balloons, but may continue to melt down if a balloon actually pops, or get anxious watching someone blow up a balloon.

WHAT if the child becomes fearful or upset during the play? Sometimes when one is playing through a typically upsetting event, even in a silly, pretend manner, the child may actually become upset. This is an indication that the adult should make the play even more playful/silly and more removed from the actual event through symbolic play. For example, if a child has a fear of people coughing, the adult may first try to have a doll pretend to cough and the adult (or another doll) pretend to be afraid. If the child continues to get upset, they can switch it to a non-person figure (e.g. Thomas the Train, Winnie-the-Pooh) and use a sneeze instead of a cough. You know you are 'getting it right' when the child laughs with recog-

nition but is not afraid. Then the adult can gradually work Thomas' sneezing into whisper coughs or a quiet, in-between sound the child can tolerate, gradually getting closer to a real cough.

Can anyone do Replays with a child?

Parents, therapists, teachers and other caregivers can all do Replays. For some children and some issues it is very straightforward, fun for all, and works quickly. For more complex issues or with children with especially intense responding, or for adults for whom this sort of silly play does not come naturally, it can be helpful to work with a play therapist. Such a partnership can help the parent or teacher to fine tune or combine Replays with other approaches.

Many more details, examples, strategies and FAQs can be found in our new book *Replays: Using Play to Enhance Emotional and Behavioral Development for Children with Autism Spectrum Disorders (2006)*, Jessica Kingsley Publishers, London, England.

Please note that while the title refers to autism, the technique is useful for all children with intense emotional responding who are typically developing or have other developmental disabilities including Williams syndrome.

We hope you find Replays fun and helpful for your child or the child you are working with. Feel free to contact us with questions, success stories or problems you encounter.

Replays Using Play to Enhance Emotional and Behavioral Development for Children with Autism Spectrum Disorders

Karen Levine and Naomi Chedd



"Replays is a wonderful, clearly accessible, resource that integrates contemporary play-based practices to directly address problematic behavior in children. Levine and Chedd clearly demonstrate how a child's partners are best able to support a child's emotional regulation through responsive, respectful and fun 'replays' of problematic experiences, thus reducing or preventing strong emotional reactions. Replays is a 'must-have' resource for both parents and professionals."

— Barry M. Prizant, Ph.D., CCC-SLP, Director, Childhood Communication Services; Adjunct Professor, Center for the Study of Human Development, Brown University

Replays addresses the challenging behaviors of children through interactive symbolic play. It shows parents and professionals how to help children access their emotions, whether the child is verbal or not, cognitively able or impaired, even-tempered or volatile. The chapters introduce and show readers how to implement Replays, and describe ways of adapting this intervention to address specific issues in different settings and circumstances. Replays is an easy and fun tool that provides numerous step-by-step examples and illustrations. It enables parents and professionals to guide children with autism spectrum disorders towards mastering, and changing, their emotional and behavioral responses.

Jessica Kingsley Publishers
available at Amazon.com