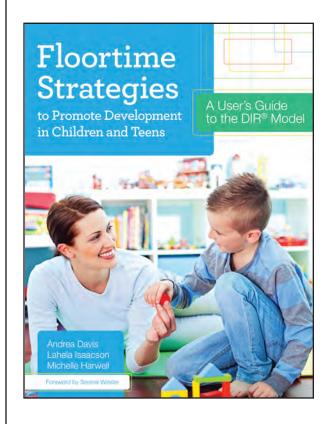
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# Floortime Strategies to Promote Development in Children and Teens

A User's Guide to the DIR® Model

by

Andrea Davis, Ph.D.

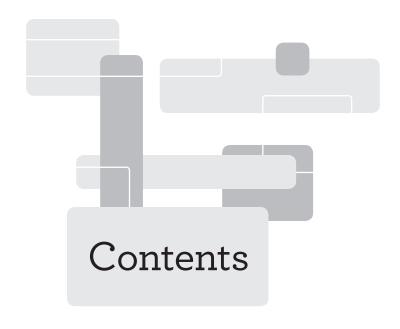
Lahela Isaacson, M.S.

and

Michelle Harwell, M.S.



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Andrea Davis received her B.A. in psychology from Swarthmore College, M.A. in theology from Fuller Theological Seminary, and Ph.D. in clinical psychology from Fuller Graduate School of Psychology. She completed her postdoctoral fellowship in infant mental health and early childhood disorders at Brown University Medical School. She returned to the west coast to join the UCLA Department of Pediatrics as Director of Research for the FOCUS project intervention study and to open a private practice in Pasadena, California. This practice grew into Greenhouse Therapy Center, a psychological center providing psychotherapy to individual adults, couples, parents, adolescents, and children from an attachment theory perspective. Greenhouse also offers intensive in-home Floortime or relationship-based developmental intervention for children and adolescents with developmental disorders and their families.

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Lahela Isaacson has devoted her professional career to working with children with special needs using the DIRFloortime® model. Ms. Isaacson received her B.A. in

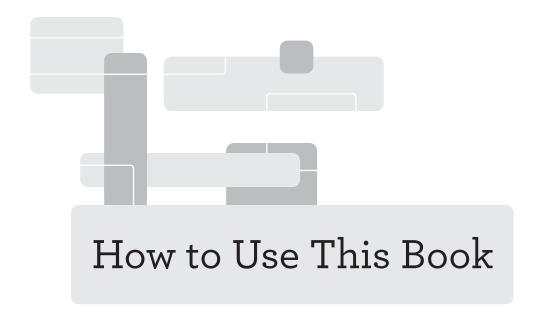
#### About the Authors

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psychology from Pepperdine University. She earned her M.S. in marriage and family therapy from Seattle Pacific University. Soon after graduating she was introduced to the DIRFloortime model and was captivated. Ms. Isaacson currently works at Greenhouse Therapy Center as a DIRFloortime supervisor and program manager.

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This book is designed to help professionals and parents more easily grasp and practice basic DIRFloortime® methods at home with children and teens. While the techniques are very useful for advancing the development of all children and adolescents, they are particularly relevant when there are developmental challenges including attention deficit disorder, sensory processing disorder, language delays, motor problems, trauma history, or autism spectrum disorder. We recommend first reading *The Child with Special Needs* by Stanley Greenspan and Serena Wieder (1998) and then getting more in-depth information through ICDL.com and Profectum.org.

The pages here greatly simplify Floortime concepts in order to help you visualize, remember, and put into practice relational strategies that are part of the DIR® approach. The book also simplifies the application of the model by identifying which methods are especially appropriate for each of the nine developmental capacities or milestones. The curriculum of strategies provides individual stand-alone teaching and learning resources in a step-by-step progression. This means any strategy may be selected as needed to address the child's individual differences, the parent's particular skills and needs, or the focus of the current DIRFloortime session.

Each specific strategy has been given a short, memorable, catch-phrase title to help you internalize the overall approach for natural and spontaneous use any time an opportunity arises. We encourage you to further personalize the pages by adding your own notes on your observations and the therapeutic team's recommendations. Use the two introductory chapters to remember and practice the foundational, overarching Floortime strategies that can be used to help all children and teens. Use the

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XVİ	How to Use This Book	

subsequent chapters to foster the nine social-emotional milestones or foundational developmental capacities of DIR. Use the varied examples for each strategy to stimulate your own creative ideas for your unique situation. Use the appendix to learn and apply strategies from a variety of parenting approaches to help children and adolescents grow out of problem behaviors.





Welcome to a journey of learning a new approach to helping children and teens reach their highest social-emotional and intellectual potential. DIR®, or the Developmental, Individual Differences, Relationship-Based model, is a unique intervention approach developed by Drs. Stanley Greenspan and Serena Wieder as a way for families and professionals to understand and help children, especially those with developmental differences. Floortime is the application of DIR principles to intervene with children and adolescents, by using intentional methods of playing and interacting to help them achieve crucial capacities in personal development. This book is based on DIRFloortime® as presented in *The Child with Special Needs* (S. Greenspan & S. Wieder, 1998; Da Capo Press).

First, professionals and parents evaluate and work with a child's or adolescent's profile of sensory needs and of strengths and weaknesses in language, motor, visual, and intellectual functioning. This understanding helps them adapt activities and interactive styles to optimize the child's or adolescent's abilities.

Next, they evaluate the child's or teen's current social-emotional level in a particular moment and interact with him or her at that level so that they are sure to connect, relate, and be most effective at fostering higher capacities. They join with the young person's natural interests and desires in playful interactions and close relationships, which provide natural motivation to engage in gradually higher developmental stages of normative emotional and intellectual development. Ideally, this can even blossom into a method and avenue to foster the often overlooked spiritual development of the young person.

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Most critical is that in DIRFloortime adults learn to evaluate and reflect on their own tendencies in the relationship and thereby become more adaptable and also more able to help the child or teen to become gradually more capable of self-reflection as well. Extensive research in intergenerational transmission of attachment security shows that caregiver self-reflection and self-awareness are essential for providing the attunement and affect regulation that allow children to develop the ability to think about their own minds and the minds of others.

DIRFloortime was developed out of developmental psychology research and applications, making it distinct from prevailing treatment approaches founded upon principles of behaviorism. The goals of DIRFloortime are grand: focus, intimacy, initiative, mutuality, purposefulness, imaginativeness, logical thinking, joy, spontaneity, empathy, and self-awareness. The means to get there are delightful: play combined with warm, attuned relationships. The positive emotions that result are critical for promoting deep learning and widespread brain integration/organization.

Research findings (Casenhiser, Shanker, & Stieben, 2013; Pajareya & Nopmaneej-umruslers, 2011; Solomon, Necheles, Ferch, & Bruckman, 2007) have provided scientific validation for Dr. Greenspan and Dr. Wieder's approach, with many more validation studies underway. Pervasive developmental disorders have been shown to be *disorders of connectivity* characterized by a lack of integration or coordination between complex brain systems. This is because of differences in brain development (e.g., less neuronal pruning for efficiency) and structure (e.g., smaller hemispheric connector or corpus collosum). DIRFloortime strategies were designed to engage all the major brain systems at once and to harness the therapeutic power of affect, or emotion, which plays an integrative role in the brain. From its inception, DIRFloortime has been aimed right at this underlying cause of developmental problems. This explains its unique transformative power.

#### What Is DIRFloortime?

The DIRFloortime Pyramid (see p. xix) is a graphic representation of Drs. Greenspan and Wieder's model; at our center we use the pyramid with families to make the approach easier to visualize. To sum up the basic idea, we say social-emotional and cognitive growth happens in the following manner:

- Adults in Floortime attune, engage, respond, expand, pretend, challenge, and reflect.
- Children and teens in Floortime regulate, connect, reciprocate, communicate, create, think, and self-reflect.

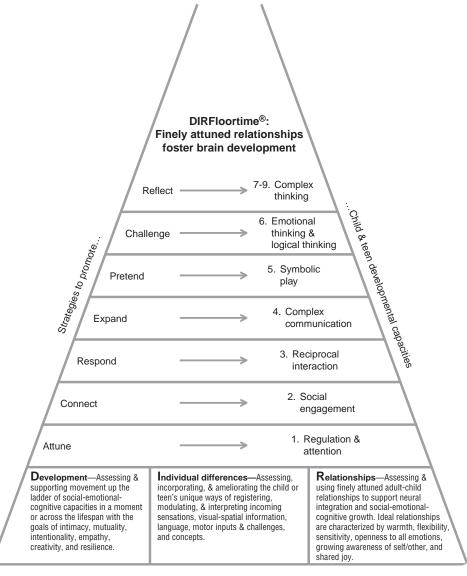
These capacities of adults and children or adolescents—listed here in the order of the chapters of the book—intertwine to support healthy, creative development.

- 1. When adults *attune* to the child and to themselves, children learn to become *regulated*.
- 2. When adults engage the child, children learn to connect emotionally with others.
- 3. When adults *respond* to the child, children initiate *reciprocal interaction* with others.

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- 4. When adults *expand* the child's initiations, children *communicate* and negotiate with others.
- 5. When adults enter the *pretend* realm, children learn to imagine and *create* ideas.
- 6. When adults *challenge* a child to solve emotional and logical problems, children develop *emotional thinking and logical thinking*.
- 7–9. When adults *reflect* with the child, children learn to *self-reflect* or think broadly and deeply about themselves in relationship to the world.

In this way, adults launch, and children and adolescents grow.



(Pyramid is based on descriptions of the DIR model in *The Child with Special Needs* by Stanley Greenspan and Serena Wieder [Da Capo Press; 1998] and Engaging *Autism* by Stanley Greenspan and Serena Wieder [Da Capo Press; 2006].)

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#### Steps to Begin DIRFloortime Home Intervention

Assessment: Obtain a comprehensive developmental evaluation or assessment of your child or teen's individual differences by a medical doctor, clinical psychologist, or multidisciplinary team specializing in developmental differences. The recommendations from the assessment report should help you begin to build an intervention team of the needed professionals and make a plan for school, clinic, and home intervention. This team can work with you to determine important social, emotional, and cognitive developmental goals and strategies.

**Focus:** Ask the educational and therapeutic team to help you select which pages of this DIRFloortime book might be most appropriate for your situation. You can also use the introductory page of each section to begin your own informal assessment of where you see the needs.

**Guidance:** Schedule regular sessions with a local (or long-distance) professional who has extensive training and experience in DIR to help you select, apply, and fine-tune the strategies for your family. (Find a professional at ICDLDirectory.com or Profectum.org or PlayProject.org.) This book is not meant as a replacement for working with a professional; it is a helpful supplement for working under the guidance of a professional who has been fully trained through the Interdisciplinary Council on Development and Learning (ICDL) or Profectum.

**Update:** Have a DIR professional implement the Floortime strategies alongside you or review home video clips to help you monitor ongoing progress, tailor your approach, and select areas for you to work on for your child or teenager and yourself as you each progress.

#### **DIRFloortime Professionals**

DIR professionals are trained and certified through the ICDL (ICDL.com) or Profectum (Profectum.org) after they have trained in another related discipline such as medicine, psychology, counseling, education, speech-language pathology, occupational therapy, physical therapy, and so on. They implement the approach described in this book by assessing and intervening with children and adolescents in home, school, or office settings.

More important, they create an affectively attuned, supportive relationship with parents, caregivers, teachers, and educational aides to help them implement Floortime with their children and students. In order to empower parents and

<sup>&</sup>lt;sup>1</sup> Behavioral evaluations are more common; however, they typically focus on problem behaviors. Developmental evaluations are often more appropriate because those with a developmental disorder need professionals who can test and observe them carefully to identify their individual differences or overall profile of challenges, abilities, tendencies, and needs.

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caregivers, DIR-trained professionals provide individualized coaching. This coaching ideally is tailored to the caregiver's individual differences, knowledge needs, and best learning style. Coaching may consist of one or more of the following coaching techniques:

- Observing adult–child interaction
- Modeling and demonstration of Floortime strategies for the particular child or adolescent
- Implementing Floortime side by side with the adult
- Offering tips or suggestions in the midst of Floortime interactions
- Recording Floortime and reviewing portions of the video together
- Offering written notes, observations, and suggestions after sessions or video reviews
- Reflecting together on the caregiver's observations of the child or teen and growing self-awareness in the relationship
- Collaborating on devising solutions to problems the child or teen is presenting
- Reviewing progress and setting goals together

To conduct this work well, DIR professionals continually seek out opportunities to reflect on themselves in relationship to their work with others who help them grow in self-awareness.

#### Overview of the Book's Structure

### Core Methods A. Strategies to Promote Social-Emotional and Intellectual Development

Learning to attend to cues, determining and meeting the current stage of socialemotional capacity in any moment and then moving the child or teen up the developmental ladder in each interpersonal interaction

# Core Methods B. Understanding and Addressing Individual Differences in Processing Profiles

Observing and using individual differences in sensory, motor, visual, auditory, and language processing capacities

# Capacity 1. Regulation and Attention: Attaining a Calm, Alert, Attentive State

Attuning—

Understanding the primary importance of a calm, alert state before expecting anything further in a given moment or in the overall growth trajectory

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#### Capacity 2. Social Engagement: Getting Involved and Connected

Connecting—

Facilitating the component parts of social engagement, including social interest, pleasure, mutual gaze, gestures, attachment, facial affect, initiating and responding to joint attention, clarity of bids, peer and sibling bonding, and more

#### Capacity 3. Reciprocal Social Interaction: Initiating and Responding Purposefully

Responding—

Supporting the growth of mutuality, reciprocity, and initiative

### Capacity 4. Complex Communication: Using Gestures and Words to Solve Problems Together

Expanding—

Instigating extended communication to pave the way for social cooperation and social problem solving

#### Capacity 5. Symbolic Play: Creating and Using Ideas

Pretending—

Prioritizing the formation of symbols, ideas, and narrative to foster emotional and cognitive growth

# Capacity 6. Emotional Thinking and Logical Thinking: Making Sense of Oneself, Others, and the World

Challenging—

Providing opportunities for understanding emotions and for building bridges between ideas to make sense of the world and to develop insight, empathy, judgment, and so on.

# Capacities 7–9. Complex Thinking: Multicausal, Gray Area, and Reflective Thinking

Reflecting—

Helping children and adolescents to think with more precision, nuance, and subtlety about the self, others, and the world

#### **Appendix. Reducing Problem Behaviors**

Supporting—

Providing for individualized needs and offering supports that help children and teens grow out of problem behaviors



# Regulation and Attention

Attaining a Calm, Alert, Attentive State

The D in DIR® embraces and promotes the stages of human personal development, starting with Capacity 1, Regulation and Attention, or the ability to be calm and alert and to focus. A developmental approach helps children and adolescents attain a calm, alert state before expecting them to achieve further accomplishments in their general developmental trajectory and in any given moment.

Families and professionals tune in and provide needed support for the child or adolescent to achieve regulation and attention. Repeated successes at this sort of relationship-supported regulation extend the child's or teen's eventual capacity to self-regulate and to focus. Research in developmental neurobiology shows the power of caregiver attunement to promote the growth of neural networks and integrated brain systems.

#### Strategies Include:

#### ATTUNING-

- 1.1. Support regulation: Help your child or teen get regulated before expecting more.
- 1.2. **Notice and adjust:** Notice and adjust your intensity to support an optimal arousal level.
- 1.3. **Calming choices:** Offer choices for help in calming down.
- 1.4. **Lengthen attention:** Attend to and join interests to expand focus and attention.
- 1.5. **Avoid flooding:** Support regulation at early stages of upset to avoid emotional "flooding."
- 1.6. **Practice modulation:** Practice modulation regularly in fun, playful ways.

# Support Regulation

1.1

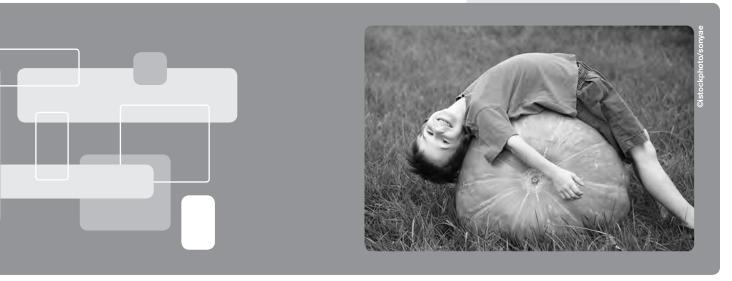
Help your child or teen get regulated before expecting more

#### Why?

Being in a calm, alert state is required before higher capacities can be expressed. In addition, many experiences and memories of adult-supported successful regulation build the child's or teen's ability to be more consistently regulated and eventually help him or her learn to self-regulate.

#### How do we get there?

- Notice and manage your own regulation states in order to be able to interact calmly.
- Help the child or adolescent reach a calm and alert state before trying to communicate to or expect anything from him or her.
- Help the child or teen learn to read his or her own body signals and cues.



#### Examples

**Preschool/elementary:** You are hurrying to get yourself ready and trying to help your son attend to getting dressed for school. He is running in circles and buzzing like a bee; you take this as a cue that he may be alert, but not calm! Using compassion for yourself and for him, calm yourself first with reassuring self-statements. Then provide whatever emotional and physical sensory supports he needs to calm down. Then point to his clothes.

**Middle school/high school:** You need to remind your adolescent of a chore, but she is focused on the television screen with a glazed expression. You take this as a sign that she may be calm, but not alert! You remember that you need to turn off any electronics before expecting attention, so you give a hand signal warning indicating "5 more minutes" before you are going to turn off the television to talk about the chore plan.