The *FLIP IT* strategy offers a simple, kind, strength-based, commonsense, and effective four-step process to address children's day-today challenging behavior. The four steps are embodied in the FLIP mnemonic which stands for F – Feelings, L – Limits, I – Inquiries, and P – Prompts. *FLIP IT* is nothing new, but it does transform best practices into a strategy that is easy to remember, applicable in a variety of challenging situations, and portable. The *FLIP IT®* strategy provides an opportunity for children to think about how their feelings may affect their interactions with others. It is designed to help children describe their emotions accurately and identify appropriate regulation strategies—all supported by a trusting adult.

The heart of a good program for young children should hold focus on supporting social and emotional health (Gordon & Browne 2014). Children's social and emotional health affects their overall development and learning. In fact, researchers have found that children with higher emotional intelligence are better able to pay attention, have more positive relationships with others, are highly engaged in school, and are more empathic (Eggum et al. 2011). Adults can help promote children's social and emotional health in many ways. The ways adults build trusting relationships and intentionally teach and respond to daily moments shared with young children are significantly important. The FLIP IT strategy provides a four step structure to help adults respond to these daily moments with young children in ways that builds the relationship, emotional literacy and healthy coping skills. Young children learn and develop in the context of relationships—they are dependent upon their caregivers to create a safe, nurturing, and appropriately stimulating environment so they can learn about the world around them. In fact, a trusting relationships with their teachers are, on average, more willing to solve problems (O'Connor & McCartney 2007), which is a key component to the *FLIP IT* strategy. Educators and other adult caregivers play key roles in prioritizing and enhancing children's abilities to get along with others, resolve conflicts, share and take turns, and express their emotions in healthy ways. And *FLIP IT* can help educators, parents and caregivers intentionally teach and support emotionally aware problem-solvers to develop healthy coping skills that will last a lifetime.

Eggum, N.D., N. Eisenberg, K. Kao, T.L. Spinrad, R. Bolnick, C. Hofer, A.S. Kupfer, & W.V. Fabricius. 2011. "Emotion Understanding, Theory of Mind, and Prosocial Orientation: Relations Over Time in Early Childhood." The Journal of Positive Psychology 6 (1): 4–16.

Gordon, A.M., & K.W. Browne. 2014. Beginnings and Beyond: Foundations in Early Childhood Education, 9th ed. Belmont, CA: Cengage.

O'Connor, E., & K. McCartney. 2007. "Examining Teacher–Child Relationships and Achievement as Part of an Ecological Model of Development." American Educational Research Journal 44 (2): 340–69.

Rainkes, H.H., & C.P. Edwards. 2009. Extending the Dance in Infant and Toddler Caregiving: Enhancing Attachment and Relationships. Baltimore, MD: Brookes

In addition, FLIP IT has been studied as a four-step sequence and has been found to be an effective strategy for transforming challenging behavior. The most thorough evidence that currently supports FLIP IT's four-step sequence comes from a study completed by Miami University. This study shows that FLIP IT can be an effective strategy for decreasing children's behavior problems, anxiety, depression, withdrawal, and aggressive or delinquent behavior; and increasing children's initiative, self-regulation, and attachment. Researchers found these positive outcomes to be substantial and long-lasting, even after conducting only one FLIP IT parent training session. Download the **executive summary** and/or **full report** to read more.



The FLIP IT strategy indicates that three prerequisites should be firmly in place to ensure success. A secure relationship between the child and adult is critical for FLIP IT success, as every strategy is only as good as the relationship it is built upon. The 2nd prerequisite is the ability to have and show empathy for a child's feelings and experiences.

Source	Key Findings
#2017-79. Washington, DC: Office of Planning, Research,	During the first years of life, caregivers are particularly central to children's overall development. Young children are dependent upon their caregivers to create a safe, nurturing, and appropriately stimulating environment so they can learn about the world around them.
Hamoudi, Amar, Murray, Desiree W., Sorensen, L., & Fontaine, A. (2014). Self Regulation and Toxic Stress Report 2: A Review of Ecological, Biological, and Developmental Studies of Self-Regulation and Stress. OPRE Report # 2015-30, Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.	Self-regulation in children is conceptualized as being dependent on "co- regulation" provided by parents or other caregiving adults. That is, an interactional process in which a caregiver (i.e., parent or teacher) provides support, scaffolding, and modeling that facilitates a child's ability to understand, express, and modulate feelings, thoughts, and behavior.
9). Retrieved from	Given that brain development is a function of the interaction between biology and experience, children's social and emotional experiences play a critical role in the growth of the brain's architecture. Supported and directed through a secure attachment with a caregiver, these social and emotional experiences inform and shape brain development and are central to behavior, learning, and health.

Raby, K.L., Lawler, J.M., Shlafer, R. J., Hesemeyer, P.S., Collins, W. A. & Sroufe, L.A. (2015). The interpersonal antecedents of supportive parenting: A prospective, longitudinal study from infancy to adulthood. Developmental Psychology, 51(1), 115-123.	Children's social competence reflects skills that have a foundation in early parent-child relationship experiences.
Murray, D. W., Rosanbalm, K.D., & Christopoulos, C. (2016). Self-regulation and toxic stress report 4: Implications for programs and practice (Report # 2016- 97). Washington, DC: Office of Planning, Research and Evaluation, Administration for Children and Families, U.S. Department of Health and Human Services.	Self-regulation is an extension of co-regulation, whereby the development of self-regulation in a child's early years can be strengthened with support, instruction, reinforcement, and coaching provided by adult caregivers. Within a first phase of development, the infant and young toddler develop the awareness and ability to express and experience emotion within the context of the caregiver-child relationship. In this relationship, the caregiver is attuned to be responsive and sensitive to the child's emotions and provides a safe and supportive environment. This helps the child label these emotions and to safely express them. The manner in which the adult responds to the child, using affective control through tone and tempo of voice, touch, and gaze, helps infants and toddlers learn to better manage and reduce the intensity of their emotions on the path toward self- regulation. In the second phase, from three to five years of age, the relationship continues in this manner, and the child begins to understand and discern between and among their own emotions and those of others, as well as to deal with emotions in a regulated manner.
Kildare, C. A., and Middlemiss, W. (2017). Impact of parents mobile device use on parent-child interaction: a literature review. <i>Computers in Human Behavior</i> . 75, 579- 593.	A recent review found that increased mobile connectivity and technology distracts parents from parent-child interactions, and that distracted parents are more likely to be less responsive and sensitive to the needs of their children.
Rubin, K. H., Coplan, R., Chen, X., Buskirk, A. A., & Wojslawowicz, J. C. (2005). Peer relationships in childhood. In M. H. Bornstein, & M. E. Lamb (Eds.), Developmental science: An advanced textbook (pp. 469–512). Mahwah, NJ: Erlbaum.	Competent social interactions allow children to develop relationships with other children and, as children grow, these relationships develop into friendships based on shared activities, shared ideas, and shared thinking.
Fox, L., Dunlap, G., Hemmeter, M. L., Joseph, G. E., & Strain, P. S. (2003, July). The teaching pyramid: A model for supporting social competence and preventing challenging behavior in young children.	Optimal social-emotional growth is a function of attention being paid to nurturing relationships and instructional guidance that directs the young child toward prosocial competence and away from challenging behaviors.

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Young Children, 48–52.	
Cox, D. D. (2005). Evidence-based interventions using home-schoolcollaboration. School Psychology Quarterly, 20, 473–497.	The relationships level of the teaching pyramid model (Positive Behavior Support) includes teaching practices that are linked to positive child outcomes in behavior and social skills. Thesepractices include actively supporting children's play; responding to children's conversations; promoting the communicative attempts of children with language delays and disabilities; providing specific praise to encourage appropriate behavior; developing positive relationships with children and families; and collaborative teaming with colleagues and other professionals.
Peisner-Feinberg, E. S., Burchinal, M. R., Clifford, R. M., Culkin, M. L., Howes, C., Kagan, S. L., et al. (2000). The children of the cost, quality, and outcomes go to school: Technical report. Chapel Hill: University of North Carolina at Chapel Hill, Frank Porter Graham Child Development Center.	For problem behavior, they found that teacher–child closeness in the early childhood years had a predictive relationship to problem behavior and sociability in the second grade, with children who experienced higher teacher–child closeness demonstrating higher levels of social and behavioral competence.
Kontos, S., & Wilcox-Herzog, A. (1997). Influences on children's competence in early childhood classrooms. Early Childhood Research Quarterly, 12, 247–262.	Researchers found a relationship between positive caregiver interactions and prosocial skills and positive peer interactions.
Newcomer, L. L., & Lewis, T. (2004). Functional behavioral assessment: An investigation of assessment reliability and effectiveness of function- based interventions. Journal of Emotional Behavioral Disorders, 12(3),168–181.	Evidence suggests that interventions that address the function of the children's challengingbehaviors are more durable and effective than nonfunction-based interventions.
Joseph, G. E., & Strain, P. A. (2003). Comprehensive evidence-based social-emotional curricula for young children: An analysis of efficacious adoption potential. Topics in Early Childhood Special Education, 23, 65–76.	Empathy can be taught by having the children recognize and label emotions in themselves and others when thinking about the consequences of solutions to interpersonal conflicts. These techniques can be implemented as part of the curriculum as well as during the school day when incidents occur. For instance, the teacher can read stories involving a character who is facing a problem. Throughout the story, the teacher can pause and have the children discuss how the character may be feeling and what he may be thinking. The teacher can then assist the children in generating possible ways in which the character can appropriately regulate hisemotions and resolve the problem.

 Hughes, J., Cavell, T., & Jackson, T. (1999). Influence of the teacher-student relationship on childhood conduct problems: A prospective study. Journal of Clinical Child Psychology, 28(2), 173–184. Howes, C., Matheson, C., & Hamilton, C. (1994). Maternal, teacher, and child care history correlates of children's relationships with peers. ChildDevelopment, 65(1), 264–273. 	A high quality student-teacher relationship supports the child (e.g., offering praise, encouragement, guidance, and discipline) throughout the challenging and novel educational environment to which the child must adjust. Research demonstrates that a positive student- teacher relationship characterized by warmth and closeness decreases children's subsequent aggressive behavior in the classroom (Hughes, Cavell, & Jackson, 1999) and is a protective factorfor children at risk of behavioral problems (Howes, Matheson, & Hamilton, 1994).
Urdan, T., & Maehr, M. (1995). Beyond a two-goal theory of motivationand achievement: A case for social goals. Review of Educational Research, 65(3), 213–243.	A positive, warm relationship with a teacher motivates students to achieve to please their teachers.
Hamre, B. K., & Pianta, R. C. (2001). Early teacher- child relationships and the trajectory of children's school outcomes through eighth grade. <i>Child Development</i> , 72, 625–638.	A positive teacher-child relationship can function as a protective factor for children at risk fordeveloping school adjustment difficulties, due to behavior problems.
Ahnert, L., Pinquart, M., & Lamb, M. E. (2006). Security of children's relationships with non-parental care providers: A meta-analysis. <i>ChildDevelopment</i> , 74(3), 664–679.	By establishing emotional supportive classroom climates through affectively positive responses, sensitivity and involvement, teachers can foster feelings of caring for the children in their classroom and benefit the development of more positive (secure) dyadic teacher-child relationships.



The third prerequisite for FLIP IT success is the ability to recognize and understand the negative impact of trauma and risk factors (referred to as ICK) on a child and its connection to the use of challenging behaviors.

Cavanagh, Shannon E., and Aletha C. Huston. 2006. "Family Instability and Children's Early Problem Behavior." Social Forces 85(1): 551–81.	Children's behavior during the transition from kindergarten to first grade is moderated by their mothers' sensitivity (i.e., supportiveness, respect for autonomy and lack of hostility) and the quality of the home environment. Having a mother with low sensitivity, or living in a home environment with low levels of support and stimulation during this transition, further enhances problem behaviors of children experiencing family instability. When young children lack the support at home that they need to smoothly handle the transition, they demonstrate more negative behaviors.
Pears, K.C., et al., Early Elementary School Adjustment of Maltreated Children in Foster Care: The Roles of Inhibitory Control and Caregiver Involvement. Child Development, 2010. 81(5): p. 1550-1564.	associated with impaired inhibitory control and delay of gratification, excessive or blunted emotional reactions, and impulsive, disorganized thinking, which reflect self-regulation difficulties. In sum, stress is believed to impact underlying neurobiological processes of self-regulation as well as cognitive, affective, and behavioral aspects of self-regulation.
Raver, C.C., et al., Predicting individual differences in low-income children's executive control from early to middle childhood. Developmental Science, 2013. 16(3): p. 394-408.	Chronic exposure to stressful events, such as is typically experienced when children live in poverty, has been linked to difficulties in self-regulation development.
Larsen, Kristy L., "Organized Chaos: Daily Routines as a Potential Mechanism Linking Household Chaos and Child Behavior Problems" (2019). Master's Theses. 627.	It was recently highlighted that two distinct areas for review and research (constructs) are household chaos and family routines. More specifically, that lack of family routines represents a pathway through which household chaos adversely affects child outcomes.
Byrd, R. S., & Weitzman, M. L. (1994). Predictors of early grade retention among children in the United States. <i>Pediatrics</i> , 93, 481–487.	Researchers examining almost 10,000 children found that the single best predictor of early school failure was the presence of behavior problems.
Gilliam, W. S., & Shahar, G. (2006). Preschool and child care expulsion and suspension: Rates and predictors in one state. <i>Infants and Young Children</i> , 19, 228–245.	Study found that almost 40% of preschool teachers reported expelling a child each year due tobehavior problems.

 Wehby, J. H., Symons, F. M., Canale, J., & Go, F. (1998). Teaching practices in classrooms for students with emotional and behavioral disorders: Discrepancies between recommendations and observations. Behavioral Disorders, 24, 52–57. Walker, H. M., Severson, H. H., & Feil, E. G. (1995). Early screeningproject: A proven child-find process. Longmont, CO: Sopris West Educational Services. Wehby, J. H., Lane, K. L., & Falk, K. B. (2003). Academic instruction for students with emotional and behavioral disorders. Journal of Emotional and Behavioral Disorders, 11, 194-197. Shores, R. E., Gunter, P. L., & Jack, S. L. (1993). Classroom management strategies: Are they setting events for coercion? Behavioral Disorders, 18, 92–102. 	Students with severe challenging behaviors (a) are seldom praised for appropriate behavior (Wehby et al., 1998), (b) are seldom afforded effective academic instruction (Walker, Severson, & Feil, 1995; Wehby, Lane, & Falk, 2003), and (c) are often subject to ineffective, reactive, and punitive interventions from teachers (Shores, Gunter, & Jack, 1993).
Huffman, L. C., Mehlinger, S. L., & Kerivan, A. S. (2000). Risk factorsfor academic and behavioral problems at the beginning of school. Bethesda, MD: National Institute of Mental Health.	A variety of child and family risk factors contribute to early onset conduct disorders which lead tomore recalcitrant and intractable problem behavior as the child develops. Some of those risk factors include lack of prenatal care, low birth weight, maternal depression, early temperament difficulties in infants, developmental disabilities, early behavior and adjustment problems, and inconsistent and harsh parenting.
Ladd, G. W., & Burgess, K. B. (1999). Charting the relationship trajectories of aggressive, withdrawn, and aggressive/withdrawn children during early grade school. <i>Child Development</i> , 70, 910–929.	Problem behavior such as externalizing behavior (i.e., aggressive and hyperactive behavior) and/or internalizing behavior (i.e., asocial and anxious-fearful behavior) has proven to jeopardize the quality of relationship formation with teachers.
Eron, L. D. (1990). Understanding aggression. Bulletin of the International Society for Research on Aggression, 12, 5–9. Snyder,H. (2001). Epidemiology of official offending. In R. Loeber & D. P. Farrington (Eds.), Child delinguents:	Without early intervention, behavioral problems such as aggression, oppositional behavior, or conduct problems in young children may become crystallized patterns of behavior by age 8 (Eron, 1990), beginning a trajectory of escalating academic problems, school drop- out, substanceabuse, delinquency, and violence (Snyder, 2001).

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Development, interventionand service needs (pp.25–46).Thousand Oaks, CA: Sage.	
Nelson, J. R, Benner, G. J., Lane, K., & Smith, B. W. (2004). Academic achievement of K-12 students with emotional and behavioral disorders. Exceptional Children, 71, 59–73.	Students who engage in high rates of challenging behavior experience difficulties inreading, math, and language (Nelson et al. 2004) and are more likely to encounter school failure (Kauffman 2004).
Kauffman, J. M. (2004). Characteristics of emotional and behavioral disorders of children and youth (8 th ed.). Upper Saddle River, NJ:Pearson/Merrill Prentice Hall.	
Campbell, S. B. (1995). Behavior problems in preschool children: A review of recent research. Journal of Child Psychology and Psychiatry, 36, 113– 149.	It is estimated that approximately 10–15% of young children have noteworthy behavior problems. Approximately 50% of preschool children with externalizing problems continued to showproblems during their school years, with disruptive behavior showing the highest rates of persistence.
Lavigne, J. V., Gibbons, R. D., Christoffel, K. K., Arend, R., Rosenbaum, D., Binns, H., et al. (1996). Prevalence rates and correlatesof psychiatric disorders among preschool children. Journal of the American Academy of Child and Adolescent Psychiatry, 35, 204– 214.	Researchers conducted a 5-year longitudinal study of about 500 children 2–5 years old frompediatric practices in Chicago and determined that 21% of the children met criteria for a diagnosable disorder, with 9% classified as having a "severe" disorder of social- emotionaldevelopment.
Arnold, D. H., Ortiz, C., Curry, J. C., Stowe, R. M., Goldstein, N. E., Fisher, P. H., et al. (1999). Promoting academic success and preventing disruptive behavior disorders through community partnership. <i>Journal of Community Psychology</i> ,27, 589– 598.	Challenging behaviors of young children do not simply fade away but, in many cases, continue to deleteriously impact the child's development and social competence for many years.
Loeber, R., & Farrington, D. P. (1998). Serious and violent juvenile offenders: Risk factors and successful intervention. Thousand Oaks, CA: Sage.	Early behavior problems are highly associated with teenage delinquency, gang membership, school dropout, and contact with the adult criminal justice system as adults.



The first step of the FLIP IT process is to acknowledge and label children's feelings.

G. (2008). Emotion and cognition processes in preschool children. <i>Merrill-Palmer Quarterly, 54</i> (1), 102–124.	Young children's understanding of and ability to regulate emotion has been shown to be clearly linked with early academic success. Results from this study demonstrated that greater emotional understanding was significantly related to greater academic performance, and that greater emotional control was significantly associated with fewer social emotional problems.
,	High-quality relationships between a caregiver and a child, including positive responses and emotional attunement, are positively correlated with students' emotion regulation.
Parkes, F., & Miller, E. (2013). The components of young	Knowing how to help children understand and regulate emotion is fundamental. It has been shown that one important way in which children develop such skills is through adult–child conversations around emotions.
to estimating the effect of parenting on the	Researchers found that greater parental sensitivity and responsiveness provide positive (ongoing) effects in the development of executive functioning.
Honig, A., & Wittmer, D. (1992). Prosocial development in young children: Caring, sharing and cooperation: A bibliographic resourceguide. New York: Garland.	Children develop ideas about how to express emotions primarily through social interaction in theirfamilies and later by watching television or movies, playing video games, and reading books.
Michalson, L., & Lewis, M. (1985). What do children know about emotions and when do they know it? In M. Lewis & C. Saarni (Eds.), <i>The Socialization of</i> <i>Emotions</i> , 117-139. New York: Plenum.	

Zeman, J., & Shipman, K. (1996). Children's expression of negative affect: Reasons and methods. Developmental Psychology, 32(5), 842- 850.	The ability to regulate the expression of anger is linked to an understanding of the emotion and young children's ability to reflect on their anger is somewhat limited; therefore, young children need guidance from teachers and parents in understanding and managing their feelings of anger.
 Perlmutter, M. (1986). A life-span view of memory. In P. B. Baltes, D. L.Featherman, & R. M. Learner, <i>Life-Span</i> <i>Development and Behavior</i>, (Vol. 7). Hillsdale, NJ: Erlbaum. Miller, P., & Sperry, L. (1987). The socialization of anger and aggression. <i>Merrill-Palmer Quarterly</i>, 33(1), 1-31. Brown, J. R., & Dunn, J. (1996). Continuities in emotion understanding from three to six years. <i>Child Development</i>, 67(3), 789- 	Memory abilities improve throughout early childhood (Perlmutter, 1986) enabling young childrento better remember aspects of anger-arousing interactions. Children who have developed unhealthy ideas of how to express anger (Miller & Sperry, 1987) may retrieve the early unhealthy strategy even after teachers help them gain a more healthy perspective. This finding implies that parents and teachers may need to remind and teach children several times about the more appropriate and healthy ways of expressing anger. Talking about emotions helps young children understand their feelings.
Denham, S. A., Zoller, D., & Couchoud, E. A. (1994). Socialization of preschoolers' emotion understanding. Developmental Psychology, 30(6),928-937.	The understanding of emotion in preschool children is predicted by overall language ability. Children gain an impaired ability to understand emotion when adults show a significant amount of anger.
Jalongo, M. (1986). Using crisis-oriented books with	Preschool aged children better understand emotions when adults explain emotions. Well-presented stories about emotions validate children's feelings and give
young children. InJ. B. McCracken (Ed.), Reducing Stress in Young Children's Lives, 41-46. Washington, DC: NAEYC	information about anger.
Denham, S. A. (1998). Emotional development in young children. NewYork: Guilford Press.	Along with relationship building, teachers can promote preschoolers' emotion understanding by exposing them to feeling words, utilizing these words to label affect in themselves and others, and recognizing that actions can cause emotions. The teacher can then utilize social problem solving to improve the children's ability to think through and resolve interpersonal conflicts effectively.
Eisenberg, N., Fabes, R. A., Guthrie, I. K., & Reiser, M. (2002). The role of emotionality and regulation in children's social competence and adjustment. In L. Pulkkinen, & A. Caspi (Eds.), Paths to successful development: Personality in the life course (pp. 46–70). New York7 Cambridge University Press.	Emotion regulation has been linked to numerous aspects of social functioning in preschoolers, including socially appropriate behavior, popularity with peers, adjustment, shyness, and sympathy. Children high in behavioral inhibition tend to be constrained and over- controlled behaviorally, and this inhibition may often be involuntary;

	coping may tend to be passive and internal regulatory processes may be stressful. When faced with problems, their approach is to repress their emotionsrather than dealing with them.
Cole, P. M., Martin, S. E., & Dennis, T. A. (2004). Emotion	Emotion regulation accounts for complex processes beyond the simple
regulation as a scientific construct: Methodological	expression of emotion; it accounts for how and why emotions direct or
challenges and directions for childdevelopment	disrupt psychological processes, such as the ability to focus attention,
research. <i>Child Development</i> , 75(2), 317–333.	promote problem solving, and support relationships.



The second step of the FLIP IT process is to provide children with limits that create a sense of consistency and safety.

Martin A, Razza RA, Brooks-Gunn J. Specifying the links between household chaos and preschool children's development. Early Child Dev Care. 2012;182(10):1247– 63.	Household chaos represents the level of disorganization or environmental confusion in the family home and is characterized by high levels of background stimulation, lack of family routines, absence of predictability and structure in daily activities, and an overly fast pace of family life. Of significance, the construct of household chaos has been associated with a diverse range of adverse childhood outcomes, including poorer social- emotional functioning, cognitive development, academic achievement, and behavioral problems.
Eisenberg, N., R. A. Fabes, and L. Spinrad. 2006. "Prosocial Development." In Handbook of Child Psychology, Vol. 3: Social, Emotional, and Personality Development, edited by W. Damon and N. Eisenberg, 646–718. New York: Wiley.	Supportive and responsive relationships between children and adult care providers are associated with the development of children's prosocial predispositions. The early education programs designed to enhance prosocial values, behaviors, and attitudes can be effective, especially where adult staff are consistent in their instructions and expectations.
Eisenberg, N., Fabes, R., Schaller, M., Carlo, G., & Miller, P. (1991). The relations of parental characteristics and practices to children's vicarious emotional responding. <i>Child Development</i> , 62(6), 1393-1408.	Young children guided toward healthy and responsible anger management are more likely to understand and manage angry feelings directly and non-aggressively and to avoid the additional stress that often accompanies poor anger management.
Kellam, S. G., Ling, X., Merisca, R., Brown, C. H., & lalongo, N. (1998). The effect of the level of aggression in the first grade classroomon the course and malleability of aggressive behavior into middle school. Development and Psychopathology, 10,165–185.	Poor classroom management skills and low rates of teacher praise lead to classrooms with higher levels of aggression and rejection; these, in turn, have been shown to influence the development of individual children's continued conduct problems.
Hawkins, J. D., Catalano, R. F.,&Miller, Y. (1992). Risk and protective factors for alcohol and other drug problems in adolescence and early adulthood: Implications for substance abuse prevention. <i>Psychological</i> <i>Bulletin, 112, 64–</i> 105.	Inconsistent and negative teacher, as well as parent, interactions with children are considered proximal links in the chain leading to the escalation of conduct problems, academic failure, and later development of delinquency and substance abuse.
Pianta, R. C., & Walsh, D. J. (1996). High-risk children in schools: Constructing sustaining relationships. New York: Routledge.	Positive effects were reported of structured, supportive interactions with teachers on the social behavior of children at high risk for behavior problems.



The third step of the FLIP IT process is to use inquiries to engage children in the problem-solving task of finding alternate solutions and coping strategies. The final step of the FLIP IT process is offering prompts to children having difficulty problem solving. These prompts include cues, clues, and suggestions on how to solve the problem and find alternative coping strategies.

Vallotton, C., & Ayoub, C. (2011). Use your words: The role of language in the development of toddlers' self- regulation. Early Childhood Research Quarterly, 26(2), 169–181.	Adults can help children constructively express an emotion using words rather than actions, thinking about alternative ways to resolve the problem, making an informed decision between two articulated choices, and developing social skills by understanding the emotion of another. Using words in this manner, instead of maladaptive action, promotes internal organization and self-control.
	Giving children the opportunity to be a part of the conflict resolution process helps them develop the skills they need to resolve more problems in the future. As teachers search for ways to teach children to problem solve independently, it's important to look and plan for ways that the children can be actively involved in the problem solving process.
Bronson, M. (2000) Self-Regulation in Early Childhood. New York, NY: The Guilford Press.	Working through difficulties and achieving success bolsters children's self-control and perseverance.
Youngstrom, E., J.M. Wolpaw, J.L. Kogos, K. Schoff, B. Ackerman, & C. Izard. 2000. "Interpersonal Problem Solving in Preschool and First Grade: Developmental Change and Ecological Validity." <i>Journal of Clinical</i> <i>Child Psychology,</i> 29 (4): 589–602.	Social problem-solving skills include generating several alternative solutions to a conflict and understanding and considering the consequences of one's behaviors. These skills are linked to children's long-term behavioral outcomes (Youngstrom et al. 2000), school adjustment (Bierman et al. 2008), and academic success (Greenberg, Kusché, & Riggs 2001).
Bierman, K.L., C.E. Domitrovich, R.L. Nix, S.D. Gest, J.A. Welsh, M.T. Greenberg, C. Blair, K.E. Nelson, & S. Gill. 2008. "Promoting Academic and Social-Emotional School Readiness: The Head Start REDI Program." <i>Child</i> Development 79 (6):1802–17.	
Greenberg, M.T., C.A. Kusché, & N. Riggs. 2001. "The P(romoting) A(Iternative) TH(inking) S(trategies) Curriculum: Theory and Research on Neurocognitive and Academic Development." The CEIC Review 10 (6): 22– 23, 26.	

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Functions." Chap. 6 in Lifespan Cognition: Mechanisms of Change, eds. E. Bialystok & F.I.M. Craik, 70–95. New York: Oxford University Press.	Young children tend to act on their first impulse in a situation or on the first thing that comes to mind. To develop into good thinkers, children need to develop inhibitory control, "the ability to ignore distractions and stay focused, and to resist making one response and instead make another" (Diamond 2006). Inhibitory control helps children regulate their emotions and behavior and problem solve more effectively. Teachers can help children learn this important skill by encouraging them to pause before acting; consider multiple solutions to questions, tasks, or problems; and then choose a solution to try.
Denham, S. A., Blair, K. A., DeMulder, E., Levitas, J., Sawyer, K., Auerbach-Major, S., et al. (2003). Preschool emotional competence:Pathway to social competence. <i>Child Development</i> , 74, 238– 256.	The emergence of emotion regulation is vital to the creation and maintenance of positive relationships with peers (Denham et al., 2003); children who thrive in social interactions withpeers, particularly those who succeed in negative interactions, effectively regulate their own emotions and subsequent emotion related behaviors (Denham, Blair, Schmidt, & DeMulder, 2002).
 Denham, S. A., Blair, K. A., Schmidt, M., & DeMulder, E. (2002). Compromised emotional competence: Seeds of violence sown early? American Journal of Orthopsychiatry, 72, 70–82. Coie, J. D., & Dodge, K. A. (1998). Aggression and antisocial behavior. In W. Damon & N. Eisenberg (Eds.), Handbook of child psychology: Vol. 3. Social, emotional 	Directly training children in social skills, problem solving, and emotional management is an approach to treating children with conduct
and personality development (5th ed., pp. 779–862). New York: Wiley.	problems The theory underlying this approach is the substantial body of research indicating that children with conduct problems show cognitive and social skills deficits with peers.
Kazdin, A. E., Siegel, J. C., & Bass, D. (1992). Cognitive problem- solving skills training and parent management training in the treatment of antisocial behavior in children. <i>Journal of Consulting and Clinical</i> <i>Psychology</i> , 60, 733–747.	A controlled-trial evaluation with diagnosed children demonstrated that teaching children socialskills, problem-solving, and anger-management strategies is effective for reducing conduct problems.
Elicker, J., Englund, M., & Sroufe, L. A. (1992). Predicting peer competence and peer relationships in childhood from early parent-childrelationships. In R. Parke & G. Ladd (Eds.), <i>Family-peer relationships:</i> Modes of linkage (pp. 77-106). Hillsdale, NJ: Erlbaum.	Observation of parent-child interaction in developmentally appropriate problem-solving situationsis a common means of assessing the competence of children from infancy through middle childhood.
Blair, C. (2002). School readiness: Integrating cognition and emotion in a neurobiological conceptualization of children's functioning at schoolentry. <i>American</i> <i>Psychologist</i> , 57(2), 111–127.	Inefficient emotion regulation physiologically inhibits a child's use of higher order cognitive processes (e.g., working memory, attention, and planning) in the classroom.

Dunn, J., & Brown, J. (1994). Affect expression in the family, children's understanding of emotions, and their interactions with others. <i>Merrill-Palmer Quarterly</i> , 40(1), 120–137.	Children with better emotion regulation skills have been found to display greater social competence, better social skills, and greater peer popularity.
Saarni, C. (1990). Emotional competence. In R. Thompson (Ed.), Nebraska symposium: Socioemotional development (pp. 115-161).Lincoln, NE: University of Nebraska Press.	Emotional competence is central to children's ability to interact and form relationships.
Sanders, M. R., & McFarland, M. L. (2000). The treatment of depressed mothers with disruptive children: A controlled evaluation of cognitive behavioral family intervention. <i>Behaviour Therapy</i> , 31, 89–112.	Interventions that have provided families with behavioral techniques for teaching youngchildren behavior expectations and social skills, using positive reinforcement, teaching compliance, and addressing challenging behavior have resulted in positive outcomes.
Conroy, M. A., Dunlap, G., Clarke, S., & Alter, P.J. (2005). A descriptive analysis of behavioral intervention research with youngchildren with challenging behavior. <i>Topics in Early Childhood</i> <i>Special Education</i> , 25, 157–166.	Teaching young children skills that can be used to replace challenging behaviors is one of themost effective, scientifically based interventions available for these behaviors.
Kern, L., Ringdahl, J. E., Hilt, A., & Sterling-Turner, H.E. (2001). Linking self-management procedures to functional analysis results. <i>Behavioral Disorders</i> , 26, 214–226.	Teaching strategies that increase the use of appropriate behaviors have been effective in decreasing challenging behaviors, such as teaching self-management skills (Kern et al., 2001) and peer related social skills (Chandler, Dahlquist, Repp, & Feltz, 1999).
Lohrmann-O'Rourke, S., & Yurman, B. (2001). Naturalistic assessment of and intervention for mouthing behaviors influenced by establishing operations. Journal of Positive Behavior Interventions, 3, 19–27.	Researchers found embedding preference into difficult activities to be an effective interventionstrategy.
Grisham-Brown, J., Hemmeter, M. L., & Pretti- Frontczak, K. (2005).Blended practices for teaching young children in inclusive settings. Baltimore: Brookes.	The instruction of social and emotional skills requires a systematic and comprehensive approachusing embedded instruction within planned and routine activities. Effective teaching strategies include teaching the concept, modeling, rehearsing, role-playing, prompting children in context, and providing feedback when the behavior occurs.