Behavior is Communication

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BEHAVIOR IS COMMUNICATION

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GOALS FOR TODAY

- Understand that all behavior is communication
- What Makes Sense?
- Illness and Challenging Behaviors
- The Power of Relationships
- Strategies to Prevent Challenging Behavior
- Final thoughts

GROWING UP WITH A BROTHER WITH AUTISM: BEHAVIOR IS COMMUNICATION

IT'S ALL ABOUT THE RELATIONSHIPS!

Love is one of the most profound emotions known to human beings.

RELATIONSHIPS

MATTER

BEHAVIOR IS COMMUNICATION

- The phrase “behavior is communication" refers to an individual’s effort to communicate dislikes, needs, desires, etc., but who cannot do so in a traditional verbal manner because of a communication deficit (e.g.,no speech, limited speech), and so communicate through actions.

WHAT DO WE ALL WANT IN LIFE!

What WE ALL Want!

- Be accepted
- Make choices
- Engaged in meaningful activities
- Be surrounded by people who care about us!
- Be listened to and heard by others!
- Be loved

What NONE of us Want!

- Be Ignored
- Thought to be incompetent
- Abused
- Controlled
- Bored
- Ridiculed
- Restrained
- Manipulated
- Disliked

COMMUNICATIVE FUNCTION

- Problem behavior is a way for individuals to communicate or express themselves about variables such as:
- Lack of choice, control and opportunities
- A poor quality of life
- Instructional or behavioral strategies that may not respect individual preferences or needs (e.g., sensory processing problems, unresolved medical issues)
- Frustration with boredom

WHAT HAPPENS WHEN WE CANNOT COMMUNICATE WHAT WE NEED?

If we cannot communicate something that we need, or want, or don't want, we might:

- Scream
- Cry
- Run away
- Take others toys
- Pull hair
- Scratch
- Make bad choices

"USE YOUR WORDS"

- A person may have a large vocabulary, but may not be able to retrieve the right word and then use it in a way that makes sense to others.
- Just because they can talk doesn't mean they can communicate and every situation calls for a slightly different use of vocabulary, intonation and body!

THE ROLE OF THE SENSORY SYSTEM

WHAT MAKES SENSE…

- Tim was obsessed with doors opening and closing
- Staff called and told me not to come pick him up for dinner because he was crying and screaming.
- Behavior plan was done that included calling the police when he was shaking the doors of apartments in his complex.
- Assigned to work in frozen foods section of a Costco
- He was saying "September 15th", my mothers birthday. She had recently died and we were approaching September 15th.
- An alternate route in walking around the apartment complex alleviated problems.

WHAT MAKES SENSE?

Does this make sense?

- Grab a persons chin to make them look at you!
- Give tokens to person when they respond
- Behavioral consultants do not know or understand the person whose behavior they are supposed to change
- Persons are ignored unless they perform behavior "correctly"

Unintended outcome:

- They grab others by the chin
- Person will not respond unless there are tokens
- Strategies will be useless and not positive in nature.
- Person is lonely , frustrated and ostracized from others.

CAN A LACK OF CHOICE AND CONTROL CAUSE CHALLENGING BEHAVIOR?

- Research has demonstrated that having choices and control regarding daily life events may decrease problem behavior.
- If an individual has choice and control over their life, their friends, where they live and who spends time with them, we are improving quality of life.
- When we improve quality of life, we are likely to see a decrease in problem behaviors.

THERE IS ALWAYS A REASON FOR THE BEHAVIOR…YOU JUST DO NOT KNOW IT!

CAN PHYSICAL ILLNESS CAUSES CHALLENGING BEHAVIOR?

- Illness (e.g., urinary tract infection, diabetes)
- Side effects of medication
- Food allergies
- Thirst or hunger, or the need to go to the bathroom
- Pain or discomfort (e.g., stomach ache, menstrual cramps)
- Dental problems
- Sitting too long in one position or in wet or soiled diaper
- Dislike of a taste, food type, drug
- Constipation (a common feature when an individual is on medication)

THE ROOT OF ESCALATING BEHAVIOR

Even when an emergency exists it is because of "*mistakes made by agents of control, ignorance or emergency situations*"

Sidman (1989)

BEHAVIOR IS COMMUNICATION

Behavior

- Biting self or others
- Repeatedly asking to go to the bathroom
- Disrupting class
- Screaming
- Running away
- Getting under desk
- Wetting pants (repeatedly)

What does it mean?

- I do not know what to do next
- I do not like who I am sitting by
- I do not know how to do the work
- I do not like the perfume the teacher is wearing
- I do not like the noises in the room
- I do not know what words to use
- If I am wet then I can get out of this place

POSITIVE BEHAVIORAL SUPPORT

- 1.An **Understanding** that people do not control others, but seek to support others in their own behavior change.
- 2.A **Belief** that there is a reason behind most difficult behavior and it should be treated with compassion and respect, as that they are entitled to lives of quality as well as effective services.
- 3.A **Conviction** to continuously move away from coercion- the use of unpleasant events to manage behavior.

WHAT HAPPENS WHEN WE DO NOT LOOK AT BEHAVIOR AS COMMUNICATION?

Confusion, loss of self-esteem, escape, avoidance, increased frustration

RECENT NEWS HEADLINES

The following are just a few of the many, many examples of aversive actions done to students with disabilities. These were identified by Lori McIlwain and the GAO Report on Seclusion and Restraint.

- Redwood City teacher accused of slapping, kicking students(CA)
- 230 pound teacher sat on student while he was facedown because he would not stay in seat (Texas)
- Seven year old boy was handcuffed (CA)
- Nine year old boy was in time-out room several hours a day (NY)
- Autistic children in Exley elementary were force fed vinegar soaked cotton balls (CA)
- Teacher punching student caught on video (CA)
- Tied down and blindfolded on bus (CA)
- Teacher hitting pupil (CA)
- Using hot sauce to discipline kids (CA)
- Sixteen year old student restrained facedown for 90 minutes until death (MI)

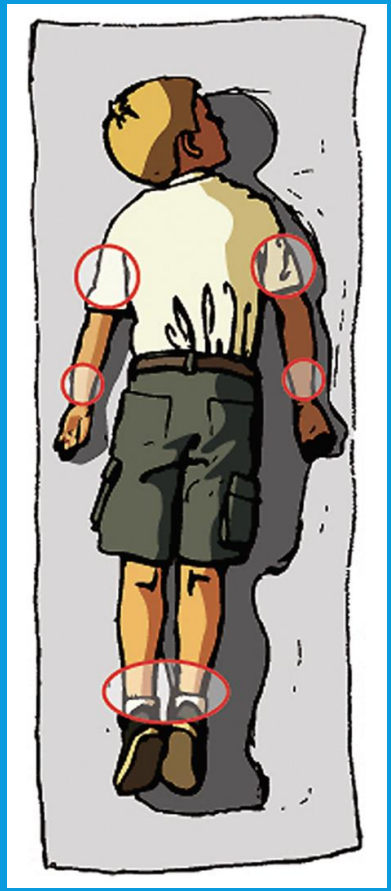
EMERGENCY OR A SYSTEM FAILURE

When it *appears* that a person might need to be restrained, secluded, or subjected to aversive interventions, it is because **of the lack of *our* skills to address the situation, or our *unwillingness* to address the situation,** rather than the actual need for such strategies.

POSSIBLE SIGNS OF RESTRAINT AND SECLUSION

- Bruises
- Escalated behaviors
- Anxiety issues
- Increased self-injurious behaviors
- Fear of going to school
- Bedwetting
- Fear of particular teacher
- Crying for unknown reason
- Sleep disturbances
- Not wanting to be alone
- Loss of appetite
- Loss of interest in previously enjoyed activities
- New problems, such as fear of spray bottles, seatbelts or closets

IS THIS BEING USED?
PRONE RESTRAINT IS PROHIBITED



US DEPARTMENT OF EDUCATION: DEFINITION OF *PHYSICAL RESTRAINT*

*The Civil Rights Data Center (CRDC) defines **physical restraint** as:*

- A personal restriction that immobilizes or reduces the ability of a student to move his or her torso, arms, legs, or head freely. The term physical restraint does not include a physical escort. Physical escort means a temporary touching or holding of the hand, wrist, arm, shoulder, or back for the purpose of inducing a student who is acting out to walk to a safe location.

US DEPARTMENT OF EDUCATION DEFINITION OF *MECHANICAL RESTRAINT*

The CRDC defines ***mechanical restraint*** *as:*

- The use of any device or equipment to restrict a student's freedom of movement.

TASH

Equity, Opportunity and Inclusion for People with Disabilities since 1975.

US DEPARTMENT OF EDUCATION DEFINITION OF *SECLUSION*

*The CRDC defines **seclusion** as:*

- The involuntary confinement of a student alone in a room or area from which the student is physically prevented from leaving.

PROBLEMS WITH SECLUSION, RESTRAINT AND AVERSIVE PRACTICES

PREVENTION IS KEY!

- If you can recognize the early warning signs, you may be able to prevent behavioral outbursts.
- For example, if being in a large group of children makes the person feel anxious and they become agitated, you could arrange for them to be in a smaller group or have one-to-one support.

WAYS TO REFRAME BEHAVIOR AS COMMUNICATION

- Presume competence
- Identify strengths
- Give choice and control
- Look for environmental/sensory barriers
- Put yourself in the person's place, would you like to do what they are doing?

FINAL THOUGHTS: GUIDELINES

- Always treat children/persons with dignity
- Presume competence ALWAYS
- Always model your expectations through words and visuals
- Is the person noncompliant or do they not know what the expectations are for the event!
- If possible, ignore inappropriate behaviors
- Use positive terms that say what you want to see.
- Work with children to develop rules that make sense.
- Make reinforcement plans

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