

Behavior is Communication

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information, support, and education

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

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GROWING UP WITH A BROTHER WITH AUTISM: BEHAVIOR IS COMMUNICATION



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IT'S ALL ABOUT THE RELATIONSHIPS!



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

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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.

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WHAT DO WE ALL WANT IN LIFE!

What WE ALL Want!	What NONE of us Want!
<ul style="list-style-type: none">• 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	<ul style="list-style-type: none">• Be Ignored• Thought to be incompetent• Abused• Controlled• Bored• Ridiculed• Restrained• Manipulated• Disliked

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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

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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

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"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!

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THE ROLE OF THE SENSORY SYSTEM



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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.

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WHAT MAKES SENSE?

<p>Does this make sense?</p> <ul style="list-style-type: none"> • 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" 	<p>Unintended outcome:</p> <ul style="list-style-type: none"> • 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.
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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)

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slideshow

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)

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slideshow

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

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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.

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

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

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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 Esley 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 40 minutes until death (MI)

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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.



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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



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IS THIS BEING USED? PRONE RESTRAINT IS PROHIBITED



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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.



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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.



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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.



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PROBLEMS WITH SECLUSION, RESTRAINT AND AVERSIVE PRACTICES



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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.

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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?

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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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We are here to support you!

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Michigan Alliance for Families

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