



Positive Behavior Supports



Megan K. Lauman
mlauman@thetangramway.org



Positive Behavior Supports

Positive behavior support (PBS) is a behavior management system used to understand what maintains an individual's challenging behavior.

Inappropriate behaviors are difficult to change because they are functional; they serve a purpose.

These behaviors are supported by reinforcement in the environment.



Challenging Behaviors

- ◆ Not listening
- ◆ Hitting
- ◆ Spitting
- ◆ Throwing
- ◆ Kicking
- ◆ Yelling
- ◆ Cussing
- ◆ Running out of the room
- ◆ Crying
- ◆ Refusing to do an activity



Challenging Behaviors

The wisdom of Ross Greene

- ◆ Behaviorally challenging kids are challenging because they are lacking the skills not to be challenging.
- ◆ Challenging behavior occurs when the demands being placed on the child outstrip the skills he has to respond adaptively to those demands.



What is developmentally and age appropriate?

- ◆ 5 years old
 - Will understand the importance of rules but might divert from the rules when playing. Rules tend to be 'flexible' – for them at least.
 - May accuse others of cheating if they don't win a game.
 - Will start to show empathy and an understanding that other people might have points of view that are different to their own.
 - Will be able to share but might still find it difficult, especially when it comes to their special things.
 - Might be afraid of failure, criticism and spooky things like ghosts or monsters.
 - Attention span will start to increase which will impact on the type of discussions you are able to have with them.
 - Might come across as being an 'expert' on everything.
 - Will enjoy joking around and will start to develop 'potty' humour.
 - Will be looking to make their own decisions, particularly around what to wear and what to eat.



What is developmentally and age appropriate?

♦ 7 Years old

- Might tend towards complaining, usually about their parents or the rules, but also about friends and other kids.
- Will feel misunderstood by many.
- Can be dramatic about school, friends or life in general.
- Will try to use words to talk about how they are feeling but may become frustrated and angry when they are upset.
- Will be becoming more aware of what other people think



What is developmentally and age appropriate?

♦ 9 years old

- Friends will start to be more important than parents, and this will continue through adolescence.
- What their friends think will start to become more and more important.
- Will narrow the friendship field by having closer friendships, but less of them.
- Will share jokes and secrets with friends.
- Will push against rules and directions and may disrespect you.
- Will be able to be loving and silly but will also develop the capacity to be selfish, argumentative and abrasive.



What is developmentally appropriate?

♦ Teens

- Friends will be more important than family.
- They will become more argumentative and will push against you more. May become more emotionally distant from you (don't worry – they'll come back but maybe not until they leave their teens).
- Will experiment with their image, their identity, and the way they are in the world.
- They may become sexually active.
- They might be impulsive and they might start taking risks.
- They will often misread your emotional expressions – reading anger, hostility or disappointment when you feel nothing like any of that.
- Will want to make their own decisions about the things that affect them.

– Source: <https://www.veysigmund.com/developmental-stage/>



Autism

Social Difficulties

- ♦ Difficulty regulating emotions
- ♦ May appear to be “immature” - verbal outbursts, crying, disruptive, frustration, can be physically aggressive at times

Communication Difficulties

- ♦ Generally pick up well on body language and vocal tone
- ♦ Generally do not understand sarcasm, often takes statements literally

Repetitive Behaviors

- ♦ flapping arms
- ♦ walking on toes



Autism

Physical and Medical issues that may accompany Autism

- ◆ Seizure activity (Epilepsy)
- ◆ Genetic Disorders
- ◆ Gastrointestinal Disorders
- ◆ Sleep Dysfunction
- ◆ Pica (eating non edible items)



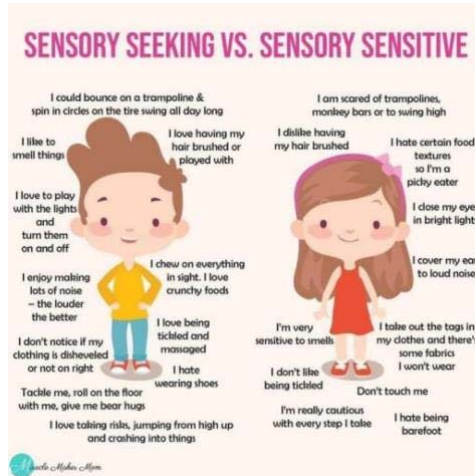
10 'SYMPTOMS' OF AUTISM

1. Someone who never gives up.
2. A loyal friend, trustworthy & dependable.
3. Truth seeker who wants to do what is right.
4. Caring, empathetic, sensitive & creative.
5. Ability to hyperfocus, analyse & systemise.
6. Loves details & notices patterns others may miss.
7. Perceives the world in a unique way.
8. Passionate about ideas & solving problems.
9. Amazing long term memory, can share helpful information.
10. Being awesome (autism ----> awetism).



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Sensory Processing Issues



Depression



Anxiety

8 WAYS A CHILD'S ANXIETY SHOWS UP AS SOMETHING ELSE

1. Anger

The perception of danger, stress or opposition is enough to trigger the fight or flight response leaving your child angry and without a way to communicate why.



2. Difficulty Sleeping

In children, having difficulty falling asleep or staying asleep is one of the hallmark characteristics of anxiety.



3. Defiance

Unable to communicate what is really going on, it is easy to interpret the child's defiance as a lack of discipline instead of an attempt to control a situation where they feel anxious and helpless.



5. Lack of Focus

Children with anxiety are often so caught up in their own thoughts that they do not pay attention to what is going on around them.

FOCUS

6. Avoidance

Children who are trying to avoid a particular person, place or task often end up experiencing more of whatever it is they are avoiding.



7. Negativity

People with anxiety tend to experience negative thoughts at a much greater intensity than positive ones.

8. Overplanning

Overplanning and defiance go hand in hand in their root cause. Where anxiety can cause some children to try to take back control through defiant behavior, it can cause others to overplan for situations where planning is minimal or unnecessary.



Oppositional Defiant Disorder (ODD)

- ♦ Angry and irritable mood:
 - Often and easily loses temper
 - Is frequently touchy and easily annoyed by others
 - Is often angry and resentful
- ♦ Argumentative and defiant behavior:
 - Often argues with adults or people in authority
 - Often actively defies or refuses to comply with adults' requests or rules
 - Often deliberately annoys or upsets people
 - Often blames others for his or her mistakes or misbehavior
- ♦ Vindictiveness:
 - Is often spiteful or vindictive
 - Has shown spiteful or vindictive behavior at least twice in the past six months



ADHD

Attention-deficit/hyperactivity disorder (ADHD) is a brain disorder marked by an ongoing pattern of inattention and/or hyperactivity-impulsivity that interferes with functioning or development.

Types-

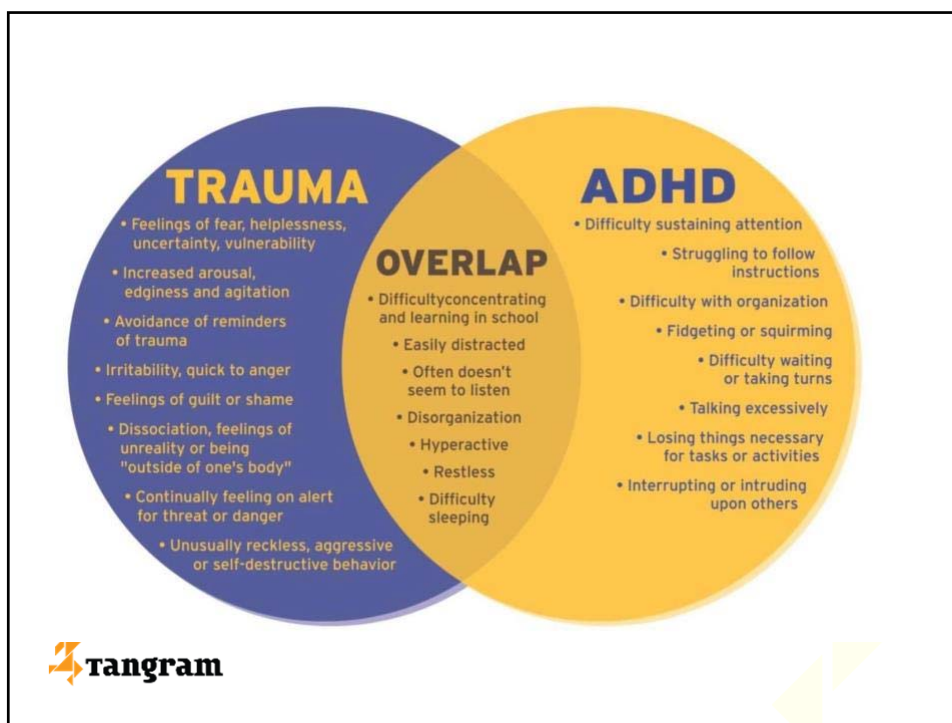
- ♦ **Inattention** means a person wanders off task, lacks persistence, has difficulty sustaining focus, and is disorganized; and these problems are not due to defiance or lack of comprehension.
- ♦ **Hyperactivity** means a person seems to move about constantly, including in situations in which it is not appropriate; or excessively fidgets, taps, or talks. In adults, it may be extreme restlessness or wearing others out with constant activity.
- ♦ **Impulsivity** means a person makes hasty actions that occur in the moment without first thinking about them and that may have high potential for harm; or a desire for immediate rewards or inability to delay gratification. An impulsive person may be socially intrusive and excessively interrupt others or make important decisions without considering the long-term consequences.



Trauma

- ♦ Know your participant's history
 - Have they been institutionalized?
 - In the foster care system and/or adopted?
- ♦ Know their triggers
 - What reminds them of their trauma?





What issues are your children facing?

- ♦ Are they responsible for siblings or taking care of a family member?
- ♦ Hungry
- ♦ Possible drug use at home
- ♦ Single parent households



- ♦ Do they have heat, electricity?
- ♦ Interrupted sleep
- ♦ Chaotic home?
- ♦ Trauma
- ♦ Learning disabilities
- ♦ Medication

Behavior

Behavior is a way to communicate.

Behavior tells us something.

Behavior serves a purpose.

Behavior continues because it works for the child

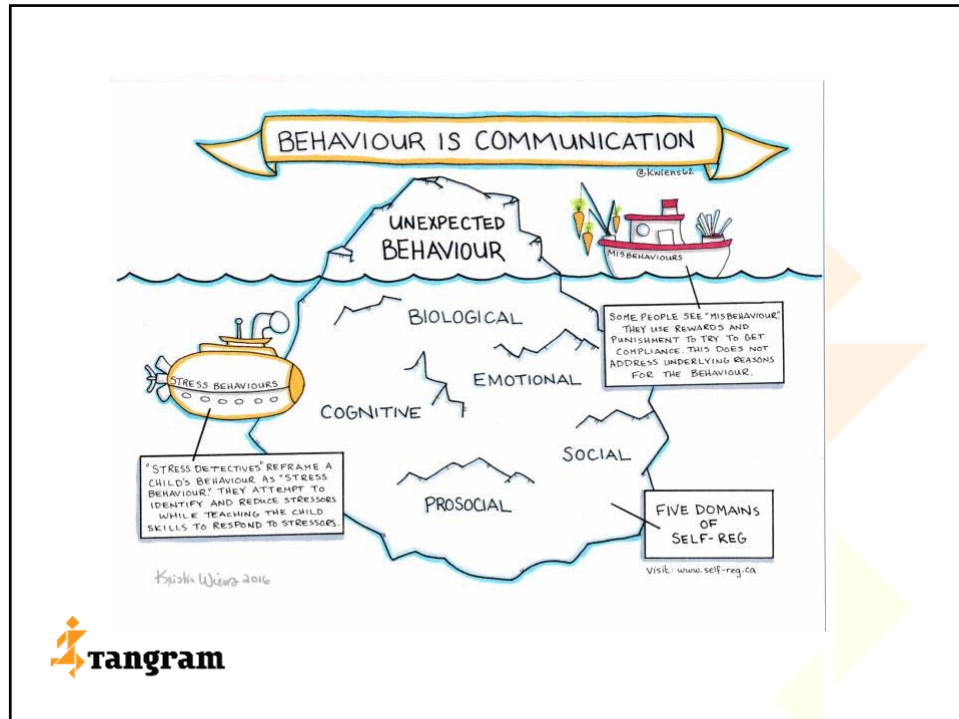


Our job is to determine what the behavior is communicating, what it is telling us, and what purpose it serves.

A.B.C.

- ♦ Antecedents (Setting Events)- What happened before the behavior started?
- ♦ Describe Behavior- What does the behavior look like?
- ♦ Consequence- How did the behavior stop?





Beneath every behaviour
there is a feeling. And
beneath each feeling is a
need. And when we meet
that need rather than
focus on the behaviour,
we begin to deal with the
cause not the symptom.

-Ashleigh Warner

What are they trying to tell you with their behavior?

Attention

- Pay attention to me
- Stop paying attention to someone else
- Even negative attention is better than none for some kids.
- Want to get a reaction from you.



Escape

- I don't want to do this
- I don't understand
- I'm nervous or embarrassed
- Leave me alone
- Stop asking me to do this
- I can't do this or don't know

What are they trying to tell you with their behavior?

Tangible

- I want that
- Give that back to me
- He has something I want
- Don't take that away from me



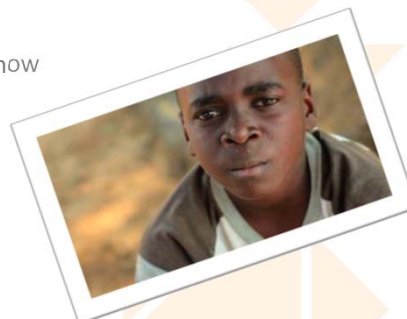
Physical

- Something hurts
- Something is uncomfortable
- I don't feel good
- Medication needs

What are they trying to tell you with their behavior?

Sensory/ self-stimulating

- This behavior makes me feel good.
- My senses feel overwhelmed right now
- It's too loud
- I need move- I can't sit still
- Too much is going on
- There are bright lights
- I'm not getting enough stimulation



Caretaker Behavior Effects

Children's behaviors are significantly affected by the people they interact with.



As a caregiver,
your behavior, responses,
and approach will
dramatically impact's
the child's behavior
performance.

Proactive strategies-

How to prevent the behavior from occurring

- ◆ Give choices
- ◆ Lead time
- ◆ Positive praise and feedback
- ◆ First, then statements
- ◆ Structure and routine
- ◆ Utilize visual supports (pictures)
- ◆ Clear expectations (positive, directed, observable)



Proactive Strategies

- ◆ Build rapport and get to know the child
- ◆ Help child communicate how they are feeling- "I statements"
- ◆ Modeling appropriate interactions
- ◆ Active listening
- ◆ Built in break times
- ◆ Pair desired/undesired



Proactive Strategies

Know your child's background and history.

- ◆ Do they have an IEP at school?
- ◆ Any known diagnosis?
- ◆ Do they take medication?
- ◆ What is their home life like?
- ◆ How was their school day?



"70% of your serotonin is made in your gut. What's going on in your gut is going to affect your mood - anxiety, depression, and focus."

— Dr. Frank Lipman

Neurochild





Consequences vs skill building

Ross Greene again

- ◆ Rewards and consequences don't work for challenging kids because they don't teach the kids the lacking skills or solve the problem.
- ◆ Lack of skills does not equal lack of motivation to do well.

So how do we build skills

- ◆ Describe the task vs the behavior.
 - Johnny is having difficulty with transition from the gym to art class
- ◆ Divide the problems up. Don't lump them together. BE SPECIFIC.
- ◆ Don't add your theories as to why the difficulty is occurring
- ◆ Don't apply solutions when describing the difficulty.



Replacement behaviors

What do you want the child to do instead?

- ◆ Make a choice
- ◆ Follow directions
- ◆ Take a break
- ◆ Use coping skills
- ◆ Ask for help
- ◆ Participate
- ◆ Self-advocate
- ◆ Keep hands to self
- ◆ Say how they are feeling (I am mad, I am hungry, I am tired)



Reactive strategies:

How to stop the behavior once it starts

- Avoid power struggles
- Redirection
- Planned ignoring
- Modeling
- State replacement behavior
- When a behavior is over, it is over. Don't keep reviewing
- Focus on positive and what you want the child to do.
- Use "Do this" statements and avoid "Don't do this" statements when possible



Documenting behaviors

- Remember the ABC formula. Document what happened before, during and after the behavior.
- Look for patterns and ways to predict or prevent behaviors

ABC (Antecedent, Behavior, Consequence) Chart Form

Date/Time when the behavior occurred	Student Which student(s) was involved	Activity What activity was going on when the behavior occurred	Antecedent What happened right before the behavior that <u>may</u> have triggered the behavior	Behavior What the behavior looked like	Consequence What happened after the behavior, or as a result of the behavior	Poss. Function (attention, escape, tangible, sensory, physical)



What to do in a behavioral emergency

1. If it is a life threatening emergency, call 911.
 - When contacting first responders, request the MCAT team and/or a CIT officer.
 - Report pertinent information to responders as agency policy allows
 - Diagnoses?
 - Medications?
 - Prior known history?
2. What is your agency's policy?

While waiting for help...

Remain calm.

Remove other others from the area. Stay in visual contact with the participant experiencing the crisis but remain at a safe distance.



10 WORDS TO ENCOURAGE YOUR CHILDREN

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1. I appreciate you...
2. Thank you for helping with...
3. I'm grateful when you...
4. You've really worked hard on...
5. You're fantastic at...
6. You make me proud when...
7. You listened well on...
8. You were responsible on...
9. Spectacular job at...
10. You excelled at...

