BEHAVIORS THAT CHALLENGE OUR SYSTEMS
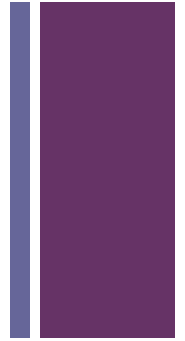
A Better Way of Living
DEVELOP YOUR POTENTIAL

NEW MEXICO DEPARTMENT OF HEALTH

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GOALS/OBJECTIVES

- Consider our definitions of and problematic use of the term 'behavior' when supporting people with intellectual and/or developmental disability (I/DD)

- Discussion of the general model of behavioral analysis.
    - What's missing from this?
    - How we do it differently when it comes to our personal lives.

- The problems with punishment

- Non-Aversive Intervention
    - Building lives, not being lives
    - Reinforcement
    - Dignity of Risk

- Individualized crisis intervention and support – Interactive Activity
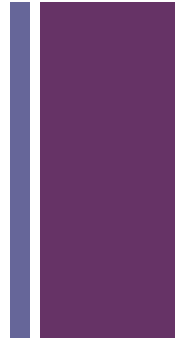
THE 'ONE SLIDE'

1. THE 'BEHAVIORS' WE SPEAK ABOUT (NEARLY CONSTANTLY IN THIS FIELD) ARE <u>ALMOST ALWAYS A FORM OF SELF-ADVOCACY</u>

OUR JOB IS TO FIGURE OUT WHAT A PERSON IS ADVOCATING FOR, PROVIDE IT IF WE CAN, AND THEN TEACH 'MORE APPROPRIATE' METHODS OF SELF-ADVOCACY

2. IF YOU WANT TO CHANGE SOMEONE ELSE'S BEHAVIOR – CHANGE YOUR OWN FIRST

# DEFINE 'BEHAVI OR' – But first...

- What is meant when we hear the word 'behavior' in our systems for people with I/DD?

- What might be some of the problems with this 'underground meaning'?

- The 'zero behavior client'

'Behavior' – General Definition

- "The way in which one acts or conducts oneself, especially toward others"

- Or, "The way in which an animal or person acts in response to a particular situation or stimulus"

Takeaways:

1) This is more about our behavior than the behavior of the people we support.

2) *We* are the situation. *We* are the stimuli.
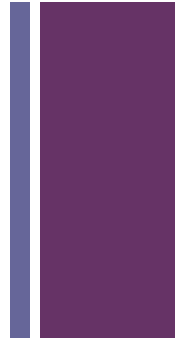
The Problem with the term 'Challenging Behavior'
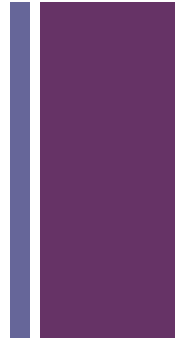
- **From whom's perspective are we defining this?**
  - The Behavior Support Consultant perspective
  - The Direct Support Professional perspective
  - The parents, guardians, that state, the next provider

- **Challenging for whom?**
 - Is the person 'challenged' by their behavior? Have we asked?

How we speak to, about, and around a person influences other's opinions, attitudes, and ultimately other's/our actions (Social Construction…)

Just by calling it 'challenging behavior' we have decided on the most 'important' perspective.

We have then lost a core aspect of person centered planning.

We have boiled the person down to parts we think we can measure.
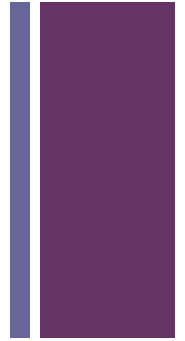
+ Once a diagnostic label is attached there is the risk that all the [individual's] characteristics are filtered through this diagnosis or explanatory mechanism resulting in a tendency to view the [individual's] behavior as symptoms, rather than as expressions of his or her unique personality. Furthermore, by ascribing to this perspective the source of the 'disability' is firmly located within the individual and not as a result of the expectations of the social contexts in which the individual exists'' (Molloy & Vasil, 2002, p. 661).
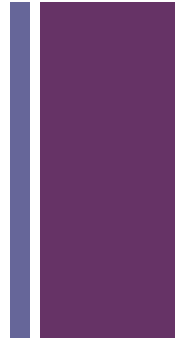
Diagnostic Overshadowing

"The practice of attributing the presenting problem solely to the person's intellectual disability"

(Reiss & Szysko, 1983, p. 396)

Have you seen this? Done this? (don't worry – we have too...)

So – What to do instead?

Behavior that Challenges the System

Places the onus of change on the system not the person
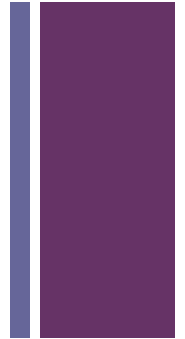
This is our job. This is their life.

How can we change ourselves, our programs, our environments to better support this person?
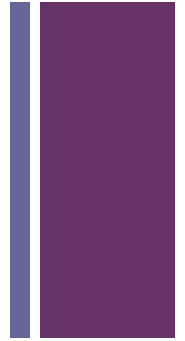
People with Challenging Reputations

Acknowledges the potential bias in previous records, analyses, and/or terminology.

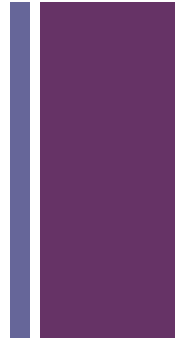Exs: 'Aggressive 27 times a day'; 'Elopes 1000 times a month'
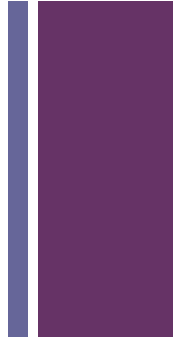
THE 'A-B-Cs' OF BEHAVIOR

<u>A</u>NTECEDENT → <u>B</u>EHAVIOR → <u>C</u>ONSEQUENCE(S)

But wait! – Isn't there's more to this, to *us*, than that?
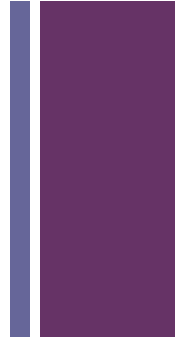
+ BEYOND THE ABCs

SO, WHAT IS IT THAT'S MISSING?
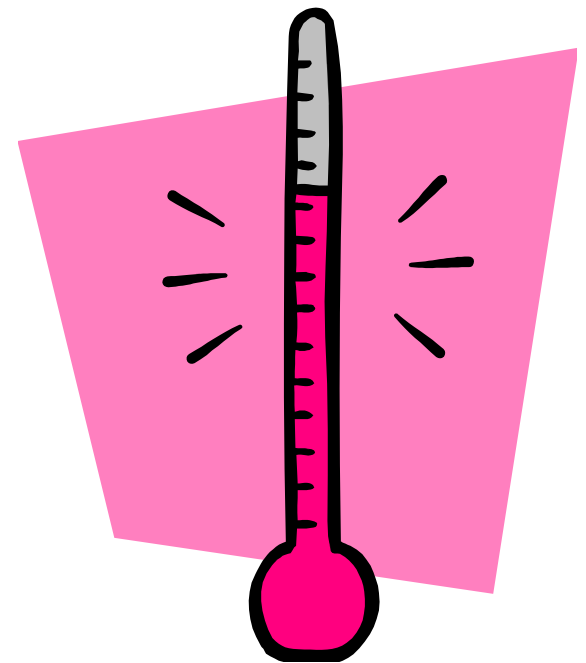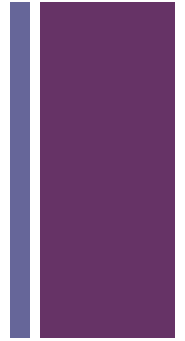
EMOTION

Let's Exercise…

What do you need when you've had a 'challenging day'?

+ Diathesis/Stress

- Think about yourself…

- The relationship between

Stress and Behavior

- Then add genetic predisposition

(Diathesis) and/or current

 medical status

- Our job – REDUCE STRESS

- How does punishment affect the

diathesis-stress model? How would <u>you</u> respond?

Let's talk about punishment and consequences…

- Punishment
  - Definition
  - Evidence for and against
  - When did it change?
  - Why did it change?
  - DDW standards and the non-aversive philosophy

- Consequences
  - 'natural' v 'artificial' consequences

  - How do punishment/artificial consequences play out over time?
    - Nightline - The Judge Rotenberg Center

+

Let's talk about punishment and consequences…

- What consequences have the people we support already faced in their lives?

- Did any of these events result in long-lasting change in behaviors?

# + Let's talk about punishment and consequences…

- What skills does a person learn from punishment?

- People get used to punishment and it needs to be increased much of the time
  - Positive support is life-wide and can lead to less paid services over time; Reinforcement programs may be faded

- Punishment (or the attempt) often:
  - Satisfies <u>our</u> needs – not those of the person we support
  - We become reinforced when using aversive interventions

- Any intervention that is intended as a 'punishment' that either:

  1) is not associated with any data; or

  2) data indicates no change, or an increase in frequency/severity

  IS NOT 'PUNISHMENT'.

 IT IS POTENTIAL ABUSE AND SHOULD BE REPORTED AS SUCH

+ PUNISHMENT and AVERSIVES

- "every teacher makes a decision to run a classroom in such a way that students behave appropriately to avoid unpleasantness from the teacher OR in such a way that they behave appropriately because the teacher provides many opportunities for positive reinforcement" (Alberto and Troutman, 2003, p.331).

- "Any procedure we find offensive for ourselves should not be used for a person with disabilities" (Jackson & Panyan, 2002).

- "Our energies are better put to eliminating the *need* for difficult behavior than in trying simplistically to eliminate the behavior itself" (Lovett, 1996, p. 94).
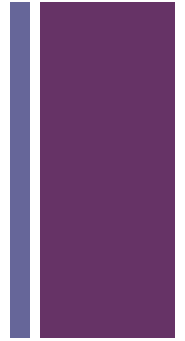
+ PUNISHMENT and AVERSIVES

- "People who use punishment become conditioned punishers themselves. Others will fear, hate, and avoid them. If we punish other people, we, too, become punishments. Our very presence will be punishing. If we simply some near those we customarily punish, we will put a stop to whatever they are doing. If we just threaten to approach, they will flee. All the side effects that shocks generate, we, too, will generate. Anyone who uses shock, becomes a shock" (Sidman, 1989, p. 79).

- "From being an art of unbearable sensations punishment has become an economy of suspended rights…the expiation that once rained down upon the body [has been] replaced by a punishment that acts in depth on the heart, the thoughts, the will, the inclinations" (Foucalt, 1977, pp. 11,16).
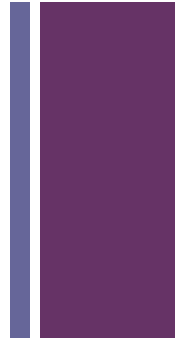
NON-AVERSIVE INTERVENTIONS

First, second, last, and at all points between:

DOES THE PERSON 'HAVE A LIFE'?

Would you trade places? Even for a minute?

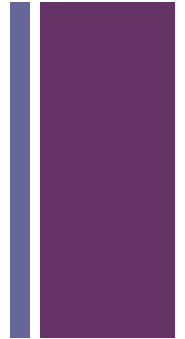~Our job is to <u>build</u> peoples' lives – not <u>be</u> peoples' lives~
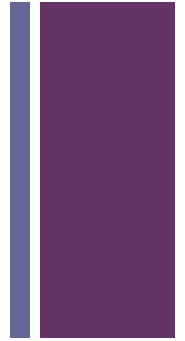
+

FOCUS ON SKILLS

Keep it simple:

Any time that people feel more competent in their lives they have more satisfaction. When people are satisfied…

COMPETENCY→ SATISFACTION → LOWER AROUSAL

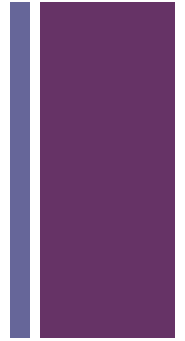WHAT ACTIVITY/PART OF YOUR LIFE BRINGS YOU A SENSE OF COMPETENCY? A SENSE OF SATISFACTION? CONTENTMENT? HAPPINESS?

Competency→Satisfaction→Lower Arousal

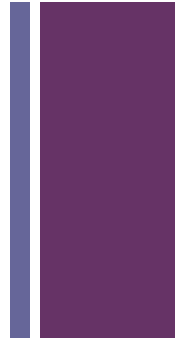## SO – WHAT SKILLS ARE/WERE NECESSARY TO GET YOU TO THIS PLACE?

Ex: 'Shifting Logical Levels'

Try the MMMMMenu

- Music
- Movement
- Manipulatives
- (M)ater
- Mom
- Mutts

- Maps
- Motivation
- Meditation
- Medication
- Masturbation
- Medical cannabis
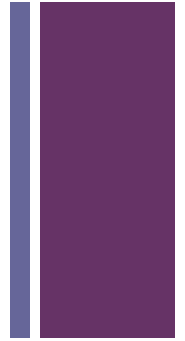
More 'formal' programs/tools

- **NON-CONTINGENT REINFORCEMENT**
  - The unnecessarily formal term for the basics of what makes your life fun, worth it, pleasant etc.

- **DIFFERENTIAL REINFORCEMENT**
  - A focus on what you want – not what you don't.
    - Catch 'em being good
  - DRO(ther/pposing), DRA(lternate), DRL(ower-rate)
  - Exs:
    - 'The Healthier Choices Program'
    - 'Zero Failure Programs'
    - 'Progressive Payments'

Risk, Care, Duty, Support, and Dignity

- These are huge topics.

- This is just a 'sampler platter' of the much larger issues behind the philosophies that guide our work.

- So, we are going to take a few bites but feel free to order the full platter at a later date ☺

At its root, these conversations are about.

"the tension between safety
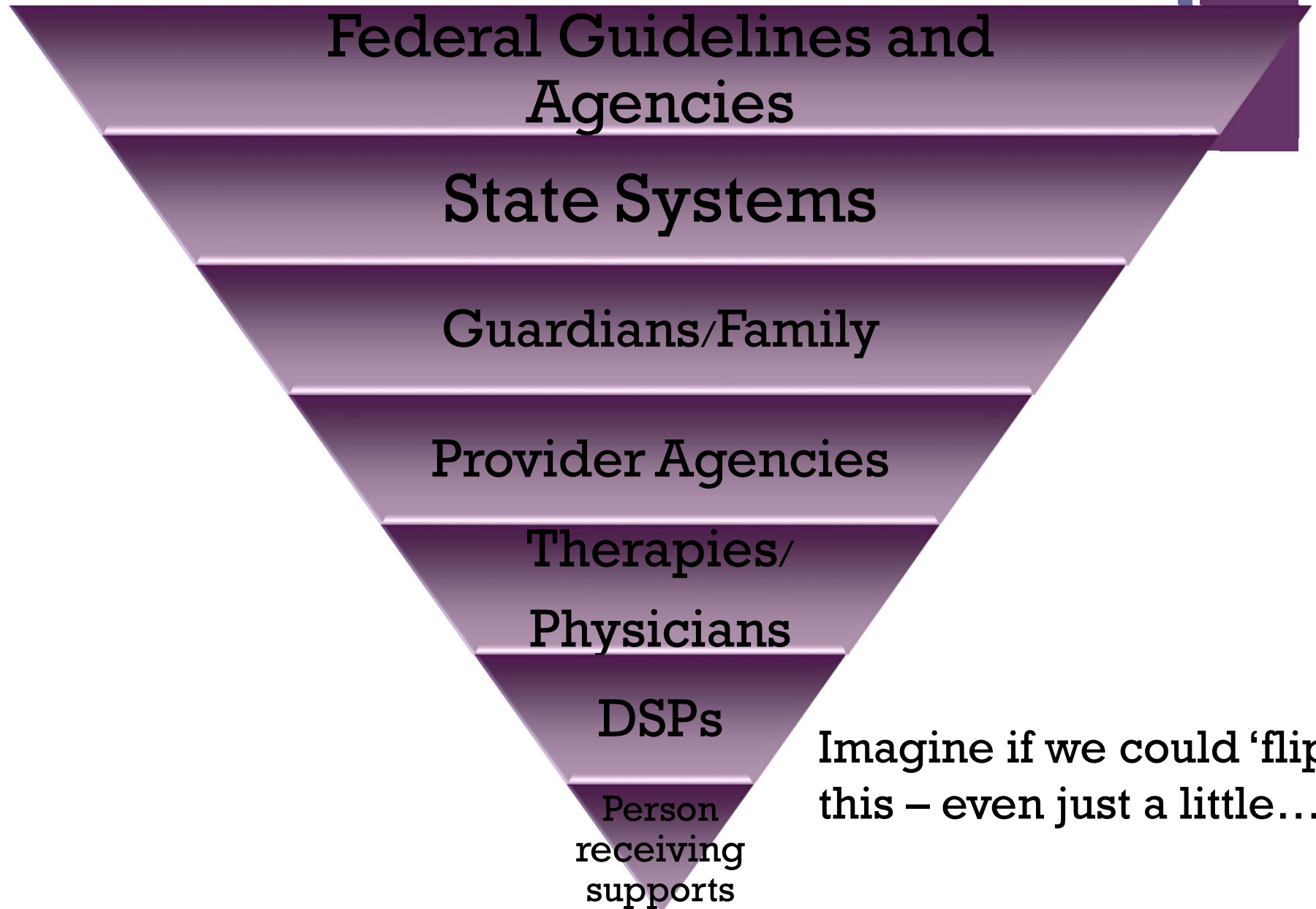and empowerment"

(Alaszewski & Alaszewski, 2002, p. 62)

"It can be easy to feel an urgent need to use whatever means are necessary to reduce risks as quickly as possible.

It can be easy for professionals to lose sight of just how much power they hold over the people in their charge.

Finally, it can be easy to believe that one is not capable of causing harm to people in our care"

(Prescott, 2014, p.1).

THE PYRAMID OF POWER

Federal Guidelines and Agencies

State Systems

Guardians/Family

Provider Agencies

Therapies/ Physicians

DSPs

Person receiving supports

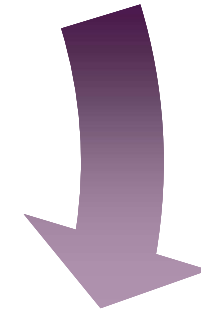Imagine if we could 'flip' this – even just a little…

Dignity of Risk

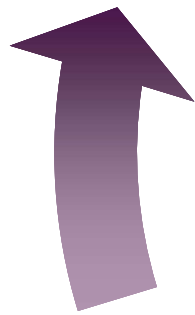"The cycle of education and human rights…[wherein] individual learning leads to personal empowerment, which in turn leads to the ability to make meaningful choices, which leads to the ability to take purposeful risks, which leads to more and deeper learning" (Luckasson, 2006, p. 14).
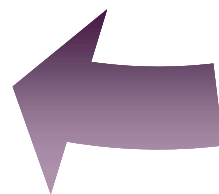
D of R– Why is it important?

From Luckasson, 2006

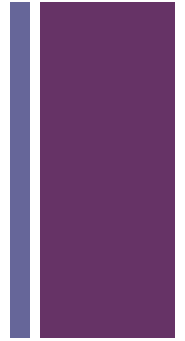Purposeful Risks → Individual Learning → Personal Empowerment → Meaningful Choices → Purposeful Risks
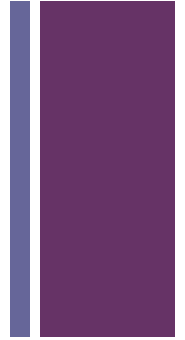
When things get intense:
Let's Build a Crisis Plan

- There comes a time when we've got to get more specific.

- Important factors:
  - Truly individualized planning;
  - Use the expertise already present (i.e., the person him/herself, DSPs);
  - Interactive formulation;
  - Create a language of support
    - E.g., General Support →Aware →Alert →Action →Ancillary Supports

Closing Thoughts, Questions, Comments?

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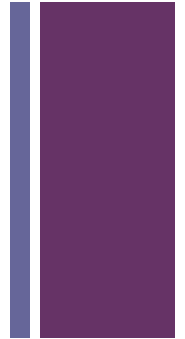
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