

Changing Behavior



I like
school



Can't get up.
Refuses to get
up for school.

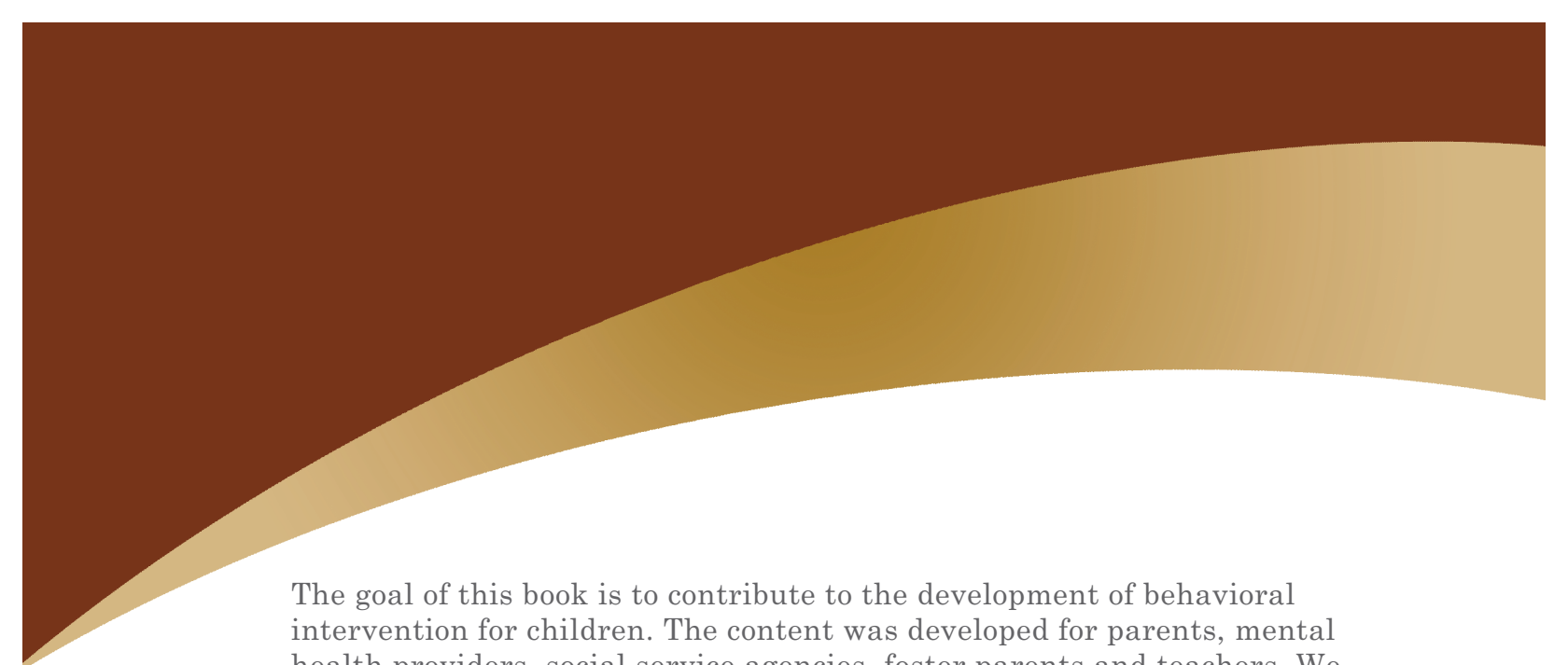


Mostly
happy



Sad
Poor sleep
Angry
Thoughts of
self harm

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The goal of this book is to contribute to the development of behavioral intervention for children. The content was developed for parents, mental health providers, social service agencies, foster parents and teachers. We cover several common behaviors and provide a general approach to behavior management.

A few key concepts:

- ♦ Focus on rapid change.
- ♦ Begin with skills you want to increase in frequency.
- ♦ When possible use positive rewards.
- ♦ Try it for a week or two then see if we are making progress.

A Few Tips to Help Us

Keep descriptions of behavior short: (hits).

Keep description of consequence short: (hits = 1 minute time out or five minutes no hitting gets a reward).

Talk less: consequence more.

Too much talking confuses children: He hits - You say don't do that. If you hit me you will have a time out. I'm not going to warn you again.

Better: He hits = 1 minute time out - no talking.

Less talking is especially important for children with speech/language or learning disorders. For older children talking about an issue after you have said "no" means that you are open to discussion and that it might be possible to change your mind. When you continue talking about an issue frustrated children may become angry. They feel they are SO CLOSE to getting you to change your mind but you just won't do it. They just can't get you to listen to reason (their reason).

Often talking less improves communication.

How to use this form

Rating Problem Behaviors - *Behaviors we wish to decrease or eliminate*

This form is designed to help you track problem behaviors in your child. The first step is to identify up to five behaviors you would most like to see change. Use the 10-point scale to rank the severity of the problem. Circle “0” if the problem is not present, ‘5’ if it’s a moderate problem, and ‘10’ for very severe problems.

Frequency - *Establishing a baseline of behavior*

The next step is to establish a baseline to determine the frequency and severity of the behavior currently. This requires the completion of several behavior ratings. How often does this happen? Does it occur several times hourly, several times daily, or several times weekly? Do these same steps for all each behavior. This establishes an average of occurrence for the behavior.

Name _____ Age _____ Date _____

List up to three behaviors you want to see **DECREASED** in frequency or severity. Write a brief description of the behavior you will rate. (hits others, runs away, yells at siblings, etc.)

How much of a problem?

Describe the first behavior

Frequency Score _____

mild moderate severe

1 2 3 4 5 6 7 8 9 10

Describe the second behavior

Frequency Score _____

mild moderate severe

1 2 3 4 5 6 7 8 9 10

Describe the third behavior

Frequency Score _____

mild moderate severe

1 2 3 4 5 6 7 8 9 10

How often does this happen?	Frequency Score
0-1 (Up to 1x/week)	1
2-4 (Up to 4x/week)	2
5-7 (Up to 1x/day)	3
8-28 (Up to 4x/day)	4
29-49 (Up to 7x/day)	5
50-70 (Up to 10x a day)	6
71-112 (Up to 1x/hour)	7
113-224 (Up to 2x/hour)	8
225-448 (Up to 4x/hour)	9
0 to 1 (More than 4x/hour)	10

Frequency Score

	1	2	3	4	5	6	7	8	9	10
1	1.4	2.2	3.2	4.1	5.1	6.1	7.1	8.2	9.1	10.0
2	2.2	2.8	3.6	4.5	5.4	6.3	7.3	8.5	9.2	10.2
3	3.2	3.6	4.2	5.0	5.8	6.7	7.6	8.8	9.5	10.4
4	4.1	4.5	5.0	5.7	6.4	7.2	8.1	8.9	9.8	10.8
5	5.1	5.4	5.8	6.4	7.1	7.8	8.6	9.4	10.3	11.2
6	6.1	6.3	6.7	7.2	7.8	8.5	9.2	10.0	10.8	11.7
7	7.1	7.3	7.6	8.1	8.6	9.2	9.9	10.6	11.4	12.2
8	8.1	8.2	8.5	8.9	9.4	10.0	10.6	11.3	12.0	12.8
9	9.1	9.2	9.5	9.8	10.3	10.8	11.4	12.0	12.7	13.5
10	10.0	10.2	10.4	10.8	11.2	11.7	12.2	12.8	13.5	14.1

Total Severity Score

Overall Severity Score

Behavior 1 _____

Behavior 2 _____

Behavior 3 _____

Total Severity Score _____

Rating Desirable Behaviors -

Behaviors we wish to increase in frequency

This form is designed to help you track desirable behaviors in your child. The first step is to identify up to five behaviors you would like to occur more frequently. Use the 10-point scale to rank the severity of the problem. Circle '0' if the behavior is not present, '5' if it happens some of the time, and '10' if it happens frequently.

Frequency - *Establishing a baseline of behavior*

The next step is to establish a baseline to determine the frequency of the behavior currently. This requires the completion of several behavior ratings. How often does this happen? Does it occur several times hourly, several times daily, or several times weekly? Do these same steps for each behavior. This establishes an average of occurrences for the behavior.

Trying treatment and tracking change

Our next step is to try to change these behaviors. This baseline rating allows us to tell when we are making progress.

Name _____ Age _____ Date _____

List up to three behaviors you want to see **INCREASED** in frequency. Write a brief description of the behavior you will rate. (looks at people, follows directions, calms self, etc.).

How much of a problem?

Describe the first behavior

Frequency Score _____
 absent acceptable excellent
 1 2 3 4 5 6 7 8 9 10

Describe the second behavior

Frequency Score _____
 absent acceptable excellent
 1 2 3 4 5 6 7 8 9 10

Describe the third behavior

Frequency Score _____
 absent acceptable excellent
 1 2 3 4 5 6 7 8 9 10

What percent of the time does this occur?	Frequency Score
0-10%	1
11-19%	2
21-30%	3
31-40%	4
41-50%	5
51-60%	6
61-70%	7
71-80%	8
81-90%	9
91-100%	10

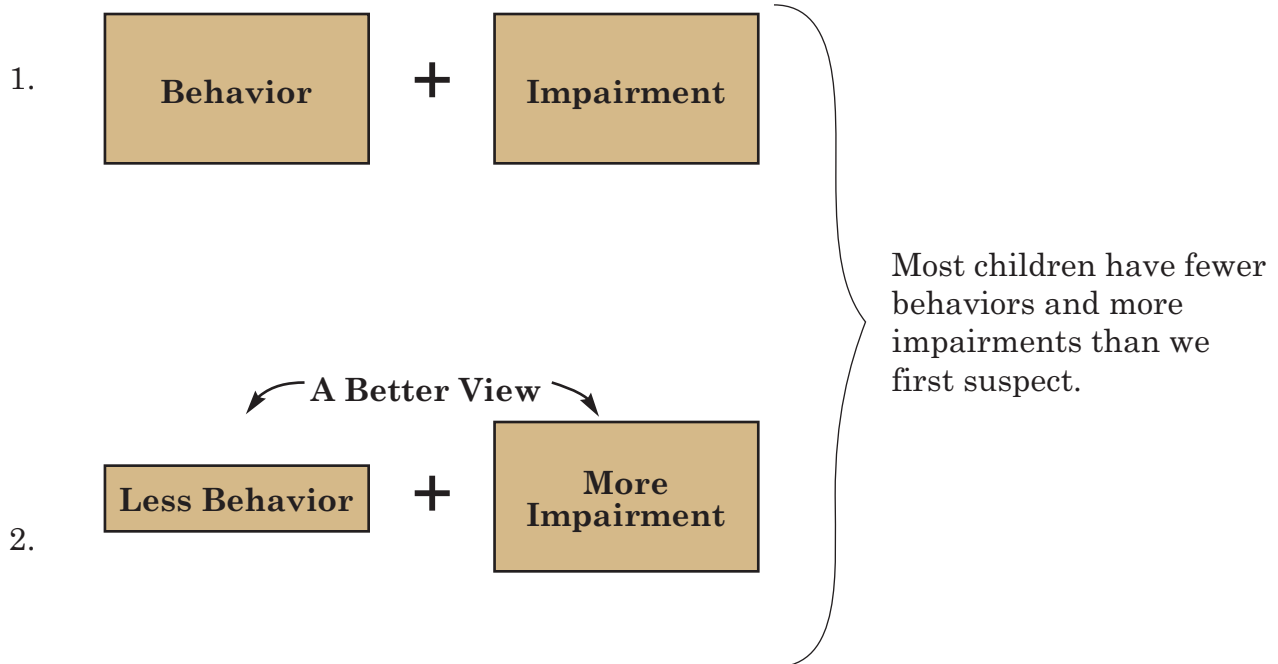
Frequency Score

	1	2	3	4	5	6	7	8	9	10
1	1.4	2.2	3.2	4.1	5.1	6.1	7.1	8.2	9.1	10.0
2	2.2	2.8	3.6	4.5	5.4	6.3	7.3	8.5	9.2	10.2
3	3.2	3.6	4.2	5.0	5.8	6.7	7.6	8.8	9.5	10.4
4	4.1	4.5	5.0	5.7	6.4	7.2	8.1	8.9	9.8	10.8
5	5.1	5.4	5.8	6.4	7.1	7.8	8.6	9.4	10.3	11.2
6	6.1	6.3	6.7	7.2	7.8	8.5	9.2	10.0	10.8	11.7
7	7.1	7.3	7.6	8.1	8.6	9.2	9.9	10.6	11.4	12.2
8	8.1	8.2	8.5	8.9	9.4	10.0	10.6	11.3	12.0	12.8
9	9.1	9.2	9.5	9.8	10.3	10.8	11.4	12.0	12.7	13.5
10	10.0	10.2	10.4	10.8	11.2	11.7	12.2	12.8	13.5	14.1

Total Appropriateness Score

Overall Score
 Behavior 1 _____
 Behavior 2 _____
 Behavior 3 _____
 Total Score _____

Behavior Disorders: What we First See



Inconsistent Performance



General Interventions

Use at least equal levels of negative and positive interventions

Pick rewards that make a difference.

Focus on 1 or 2 behaviors at a time. Change if you see no progress.

Emphasize and prioritize skill building.

Think ahead.

What will make a difference for this child?

Once a child earns a reward we will not take it away

5 possibly good rewards

- ♦
- ♦
- ♦
- ♦
- ♦

5 probably not so good rewards

- ♦
- ♦
- ♦
- ♦
- ♦

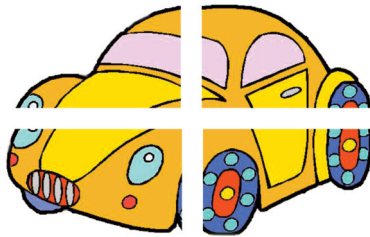
Rewards

How do we identify a useful reward?

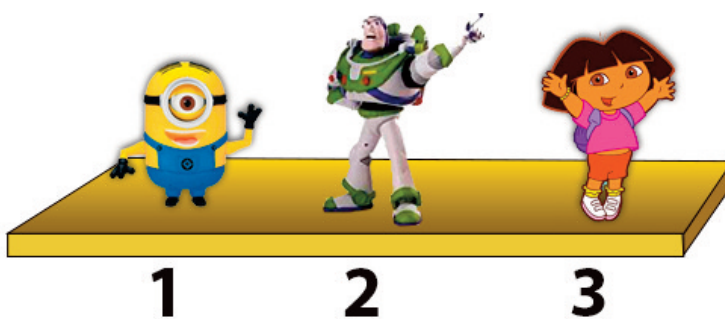
A few key concepts:

- ♦ Use what works
- ♦ Big behavior change requires a big reward for the child.
- ♦ How often should we use a reward?

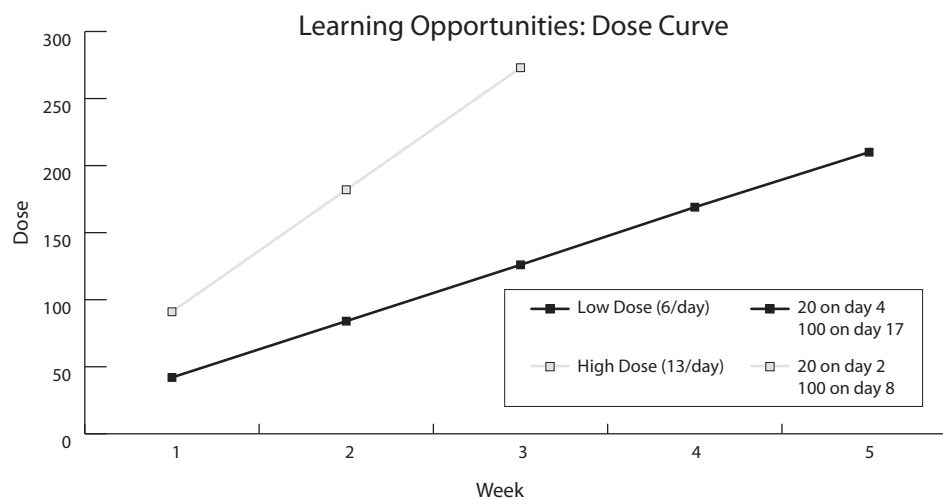
Can we divide a reward into pieces?



The reward shelf



How often will we apply the consequence for the behavior.



Behaviors that might respond to:

Rewards

- ♦ Social skill or play deficits
- ♦ Getting work finished
- ♦ Going to bed on time
- ♦ Staying in bed
- ♦ Listening
- ♦ Getting Organized

Consequences

- ♦ Hitting
- ♦ Kicking
- ♦ Biting
- ♦ Throwing
- ♦ Yelling
- ♦ Interrupting

Using Time Out

Behaviors:

Hits

20-30 times a day

Easily frustrated and has speech delays

Doesn't sleep well

Plan

What: Time out 1-2 minutes

How often: 20-30 times a day

Expect change in: 2-4 days (20 to 100 learning trials).

Other Concerns:

- ♦ Speech and language therapy will really help
- ♦ More sleep may be helpful
- ♦ Routine will decrease demands on child
- ♦ Avoid the most difficult situations (Wal-Mart on Dec. 24th for 3 hours of shopping)

Hitting



Plan = Hit → Time Out → 1-2 Minutes

No Warnings

No Talking

Only 1-2 minutes

1 2 3 4 5 6 7 8 9 10

For each time out reward a positive behavior at least once.

Older children require a different strategy.



Temper Tantrums

Plan = Walk away

No talking

2-3 Minutes

Emphasize the need to apply the plan consistently (10 in a row)
Tantrums

1 2 3 4 5 6 7 8 9 10

Reward a positive behavior 2 or 3 times for each time out.

Reward:
Plays nice:
5 times in AM
5 times in PM

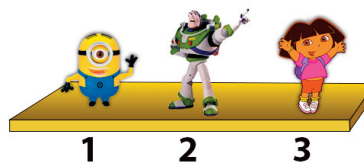


Won't go to bed on time

Our Plan

Bedtime 8:15

- 1) It's time for bed
- 2) PJs
- 3) Brush teeth
- 4) Story (must be in bed)
- 5) Show reward for tomorrow morning



Gets up



No Talking
No Hugs
No Drinks
No Food



Put in bed (over & over)

10 in a row

1 2 3 4 5 6 7 8 9 10

For behaviors that are very difficult

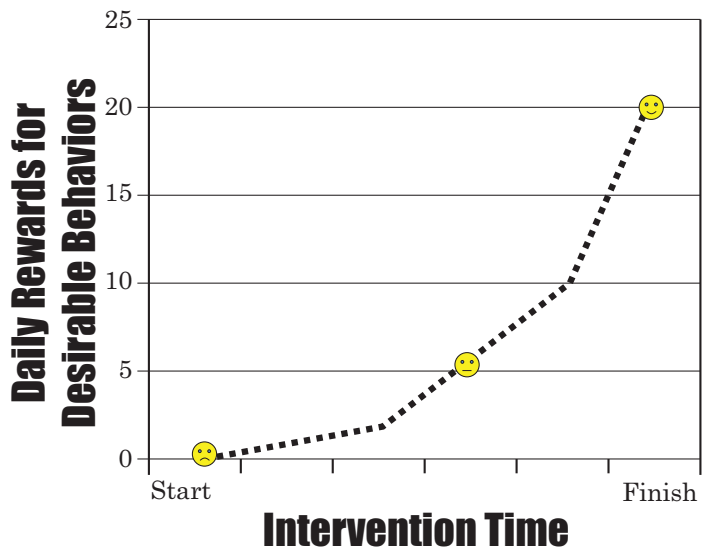
Our goals:

Manage disruptive behavior, temper tantrums, and meltdowns

Reduce frequency by 25%

Increase frequency of positive behavior by 25%

- ♦ **Temper Tantrums Handout**
- ♦ **Calm Down Book**
- ♦ **Card Based Interventions**
- ♦ **Positive behavior management for competing behaviors**



Impairments often persist over the lifespan. Same Problems—Different Age

Age **What it looks like**

- 2 Irritable, impulsive, difficult, requires lots of attention
- 4 Poorly organized, can't finish, easily distracted, forgets
- 6 Loses and forgets, comprehension deficits, social deficits
- 8 Can't finish, loses stuff, needs help every day, avoidant/aggressive
- 12 School problems, doesn't get stuff home or back to school, social deficits, extra help-helps
- 14 Late, social deficits, school problems, cognitive delays, behavior problems, does best at home, school problems often severe
- 20 Can't get things finished, avoidant, anxious, easily overwhelmed, memory is poor, why doesn't he/she change, poor choices
- 22 Same thing over and over with no benefit. We should strongly consider this as an impairment.
- 24 Late or misses meetings; easily overwhelmed; avoidant; social choices are poor; nods in agreement, but doesn't understand; can't finish (ex: substance abuse treatment, anger management, parenting classes). So, after 20+ years who/what needs to change?

Thinks About Speech and Language

Common problem:

- Starts early in life and persists
- Changes over time
- Therapy really helps
- Often discharged too soon

Linked to:

- Irritability
- Temper tantrums
- Poor academic achievement
- Social deficits
- ADHD

Always think about comprehension:

- I have to explain
- Short directions
- Extra help
- Poor memory
- Forgets easily

School

Same problems across grades - just looks different

Attracts negative interactions

Impairments often confused with behavior - makes change difficult

Aggression/avoidance/impulsive

Some teachers can make a huge difference (positive or negative)

Social deficits

Memory deficits

Anxiety is very common (decreases learning and performance) and leads to avoidance

Homework may dominate family life

Consider these issues:

Same problem since early childhood - just looks different

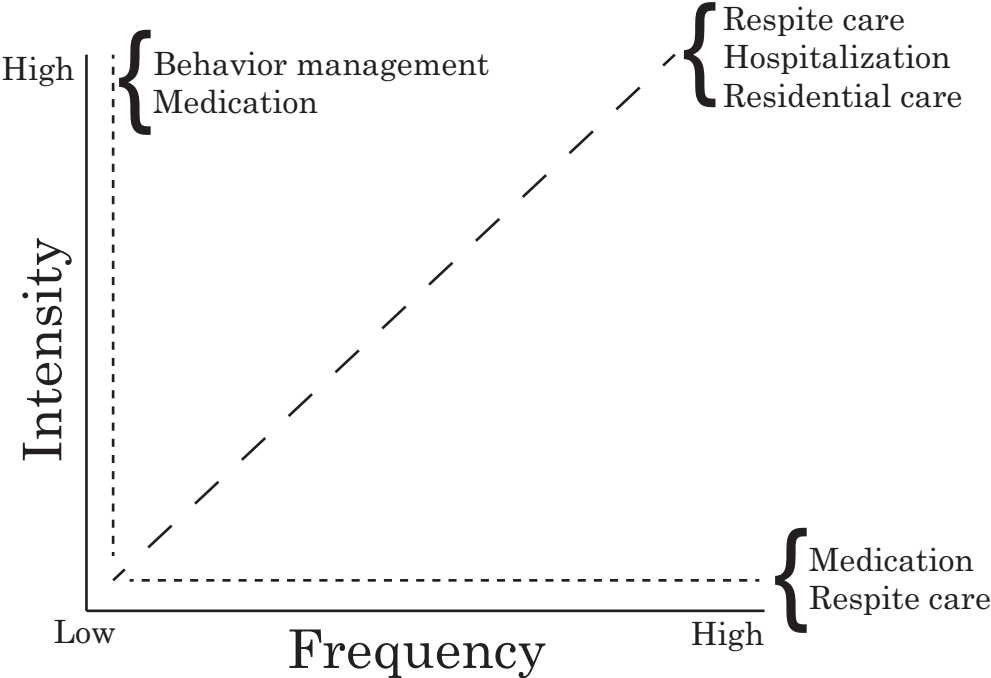
Failure to appreciate deficits or impairments lead to increasing conflict

Positive management is under utilized

Over reliance on negative consequences that DO NOT CHANGE BEHAVIOR

Behaviors: Which are severe and require intensive interventions?

Behaviors are most likely to be seen as very difficult if they are either very frequent or very intense or severe. The interventions differ for the two types of behavior. Medications are likely to be very useful for these problems.



Many disorders in children with severe behaviors are impulse control problems




Parental Capacity

The Lift

$$\frac{\text{Child's Needs}}{\text{Parental Capacity}} = \frac{25 \text{ pounds}}{50 \text{ pounds}} \qquad \frac{75 \text{ pounds}}{50 \text{ pounds}}$$



How much can a parent do, handle or tolerate. This is the lift. If the demands of parenting, caring for, and keeping a child safe exceeds the parent's capacity, it cannot continue. This is a common cause of intervention failures.



How can **YOU** help?

Wishing and anger are not effective interventions

These impairments result in long term problems requiring long term interventions.

If the person, child, or parent has limited capacity, how long does it take us to recognize this?

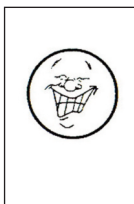
Can our systems of care change to meet the needs of the person?

Can we adapt to meet their needs?

Behavior Plan

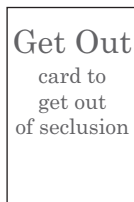
- Problem:
- 1) Far too much aggression
 - 2) Difficulty changing behavior
 - 3) Sudden outbursts
 - 4) Long duration of behavior problems
 - 5) Severe impairment of social interactions

- Plan:
- Increase attention to:
- 1) Positive behavior
 - 2) Low level behavior problems
 - 3) More frequent rewards for interaction



When child has this card he can earn rewards
Remove card as a signal of low level inappropriate behavior
Take away the card for 3 minutes, not longer

This is a signal that behavior is not appropriate. Can be done many times per day.



These cards can be used to get out of seclusion.

Child gives card to nurse or requests a referral activity - she asks him to complete some small task to demonstrate that his behavior is improving (write your name, count these). Goal: Get him doing something to de-escalate behavior.

Name _____ Date _____

Behavior:

Plan:

Other Concerns:

⋮

Name _____ Date _____

Behavior:



Plan:



Other Concerns:

⋮

Name _____ Date _____

Behavior:

Plan:

Other Concerns:

⋮

