Positive Behaviour Support for Children with Down Syndrome

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“From Good to Great”
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Outline

• Why behaviour is a concern
• Behavioural characteristics of children with Down syndrome
• Context of child: positive behaviour support
• Context of problem behaviour
  • Functions of behaviour (or: learn to be a detective!)
  • Practice activity with videos
• Strategies!
Why Problem Behaviour is a Concern

Why worry if your child is exhibiting some problematic behaviour?

• It likely won’t go away over time, and may worsen
  • Behavioural issues in childhood predict those in adulthood

• Problem behaviour may negatively impact:
  • Safety
  • Learning
  • Social acceptance & inclusion
  • Family relationships
  • Placements in classrooms or work settings
  • Overall quality of life
Behavioural Issues in Down Syndrome

• A significant proportion (20-30%) of children with DS have comorbid diagnoses such as autism &/or behaviour disorders (Capone et al. 2006)
  • Attention-deficit hyperactivity disorder
  • Obsessive compulsive disorder
  • Anxiety (including selective mutism)
DSM-5 Criteria for Autism

• Autism Spectrum Disorder diagnosis
  • Deficits in social interaction
  • Restricted and repetitive patterns of behaviour or interests
  • All symptoms present in early childhood
  • Symptoms limit everyday functioning
Red Flags for Autism in Children with Down syndrome

• No interest in communicating with others (i.e. social indifference / withdrawal)

• General lack of interest in people

• No use of gestures

• Regression in cognitive, language, and/or social abilities

• Total lack of verbal communication, coupled with no attempts at using other modes

• Treating people as inanimate objects i.e. using someone’s hand to get desired object

• ‘Odd’ behaviours sometimes associated with autism e.g. smelling objects or self-injurious behaviours
When Problem Behaviour is Just Problem Behaviour!

• Among those without a secondary diagnosis, many may still struggle with behaviour enough that it impedes their ability to learn or participate fully in activities or daily life
• In other words, the behaviour “gets in the way”
Neurological Underpinnings of Problem Behaviour in DS

1. Reduced ability to process information, particularly auditory information

2. Decreased levels of intrinsic motivation

3. Problems with executive functioning, i.e., may be more impulsive, and may lack ability to plan their behaviour or think ahead of time about its consequences

4. Memory problems: reduced encoding and consolidation of new information

5. Hyper-awareness of other people
The “Ham Effect”

- During cognitive “work,” children with DS show:
  - Lower levels of task persistence
  - Higher levels of “off-task” behaviours
    - Overuse of burgeoning social skills
    - Party tricks

In other words, the “ham effect” has been documented in the research literature!

(Fidler, 2005; Pitcairn & Wishart, 1994; Wishart, 1993)
Behavioural Characteristics of Children with Down syndrome

• “Children with DS may also ‘overuse’ their social skills to compensate for other weaker domains of functioning” (Fidler 2005)
  • “MAY????”
The Importance of Context

- Context surrounding the child
Positive Behaviour Support

• Scientific, values-based approach to the assessment and intervention associated with problem behaviour
• Based on principles of applied behaviour analysis
• A professional using PBS will work collaboratively with the whole context surrounding the child: people and environments (home, school, and community)
The Importance of Context

- Context surrounding the **problem behaviour**
Amy is a delightful, playful 4-year-old girl with Down syndrome. She lives with her mum, dad, and 7-year-old sister. She loves playing with her dog, watching Paw Patrol and dancing around the living room with her sister and dad. She is in good health overall, but is a picky eater and on some days, she eats very little.

Lately, around bedtime, she has been engaging more and more frequently in some problematic behaviour. When her mum tells her it’s time to put on her pajamas, Amy begins to whine, saying, “No bed!” If her mother persists, she starts giggling and rolling around on the floor. Mum has to then try to wrangle her flailing body into bed, which does not always work because doing this often hurts her back. If Mum leaves Amy, she remains quiet in her room until she falls asleep on the floor in her clothes, but this can take a couple of hours. This is all more likely to happen on days when Dad is working late.
Setting event → Antecedent → Problem behaviour → Consequence (FUNCTION)
Context

• We can’t just look at the problem behaviour alone. We need to look at what happens around it; at 4 different points in time:
  1. Before or simultaneously with problem behaviour
  2. Immediately before problem behaviour
  3. Problem behaviour itself
  4. Right after problem behaviour
Setting Events

• = Before or at the same time as problem behaviour

• These are events, situations, or physical / emotional states that, when present, make the problem behaviour MORE likely to occur

• Common ones for people with DS: physical illness, fatigue, hunger, buzzing lights, too much noise, lack of peer / parent attention, behavioural history

(Mirenda, 2014)
Antecedents

- Immediately before problem behaviour
- Can be tricky to figure out, but:
  - Ask yourself: “What’s the one thing I can do to make the problem behaviour occur?”
- Another name for this is the *trigger*
Problem Behaviours

• = Problem behaviour itself
• “Operationally define” the behaviour; i.e. give a clear description of what the behaviour looks like, including intensity and frequency
  • “aggressive” vs “hits, bites and sometimes kicks peers approximately 3 times per day”
  • “doesn’t listen” vs “does not respond to instructions within 30 seconds”
Consequences

• =Immediately after problem behaviour
• Need to closely examine EXACTLY what happens at this point
  • It may surprise you; it may be different than the consequence you thought you were giving
• Most important piece of the 4-term contingency for assessment because it allows you to determine the FUNCTION of the behaviour
Functions of behaviour

What the behaviour “looks like” is not really all that important to this process... you must figure out WHY the behaviour is occurring
Functions of behaviour

• EVERY behaviour has a reason behind it
  • Contrary to popular belief, behaviours rarely “come out of nowhere”
  • Even if the behaviour doesn’t make sense to you, for the child with DS, the behaviour is logical and purposeful

*This is good news!!*
Functions of behaviour

• Even better news: the reasons for behaviour are limited in number!

• There are only 4:
  1. Attention
  2. Escape
  3. Tangible
  4. Automatic reinforcement
Attention

• “Mum, look at me!”

• Problem behaviour often occurs because the child is trying to get attention
  • This can be positive attention, OR negative attention! When you don’t get a lot of attention from other kids at school, any kind of attention will do

• Examples: a girl starts singing loudly as soon as her EA goes across the room to help another student & the EA comes rushing back over; a boy unravels the toilet paper all over the washroom in order to get a reaction from his peers
Escape

• “I don’t want to do this” / “this is too hard”
• Very common for children to behave problematically to “get out of” something
  • This could be a complete end to a non-preferred activity, or just a delay
  • This is also the function at play during the dreaded TRANSITION!!
• Examples: a girl crawls under the table during her speech therapy session & doesn’t come out for 10 minutes; a boy squirms and whines during circle time and his teacher gives him a time-out
Tangible

• “I want Oreos/iPad/TV/dollhouse/a bike ride/stickers/goldfish crackers/to go to the park!!!” (NOW!)

• Can happen when a child wants something that is physically inaccessible, currently unavailable, or taken away

• A boy grunts and yells while looking at his lunchbag until someone gives it to him; a girl begs and whines until her dad takes her to the park
Automatic Reinforcement

• Not a socially mediated function like escape, attention or tangible
• Sometimes referred to as “self-stimulatory” behaviours
• NOT just “an autism thing”
• May help a person feel more calm OR more awake
  • We all do these...
Amy’s 4-term contingency

Not enough to eat
Dad is working late

Demand: “Time to put on your PJs!”

Whines; says no; giggles; rolls around on the floor

Sits in room; does not go to bed (ESCAPE)
A few caveats...

• Function is not always easy to figure out
  • Usually more than one at play, but generally a primary culprit

• If your child is engaging in severe problem behaviour, the following strategies may not help
  • Property destruction
  • Lengthy or very intense tantrums
  • Running away
  • Injury towards self or others

• You will need to get professional help from a Board Certified Behaviour Analyst (Behavioural Consultant)
Strategies

• Best to have strategies that address each one of the 4 contextual places in time
  • This will result in the most effective plan

• Strategies can be very individualized, but here, we will only talk about ones that are generally effective
B. Positive Behavior Support Plan
Strategies that Make Problem Behaviors Irrelevant, Ineffective, and Inefficient

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Strategies: Setting events

• Ensure assessment and treatment is completed for all medical issues
  • During times when medical issues are at play, *reduce expectations*!
  • Work around the SE: ex., if poor sleep, then start the child’s day at school with a quick nap; give more rewards and breaks

• Work areas at home and school should ideally be free of distractions, excess noise / people

• Optimal health for learning with proper diet and exercise
Strategies: Antecedents

A LOT of problem behaviours can be prevented from occurring in the first place

• Provide choices
• Use effective requests
• Enhance predictability (use visual schedules or first-then boards)

• Incorporate preferences into difficult activities or routines

(Dunlap et al., 2013; Mirenda, 2014)
Provide Choices

Types of choices:

- **Task/Activity**: “Would you like to work on reading or counting?”
- **Materials**: “Would you like to use a coloured pencil or a crayon to draw with?”
- **How much to do**: “This many sight words (thin stack) or this many sight words (thick stack)?”
- **How long to do it**: You can work for 5 minutes or 10 minutes. Your choice.”
- **Sequence**: “What do you want to do first: Take a bath or brush your teeth?”
- **Reward after task or activity completion**: “After picking up your toys, you can earn time on iPad or a snack. What would you like to earn?”
Effective Requests

Guidelines:
1. Firm, confident, calm tone of voice in an appropriate volume
2. Use statements (not questions) & simple language
3. Make one request at a time
4. Be specific
5. Make realistic requests (appropriate for child’s age)

“Shoes on!” NOT “Could you please put your shoes on for mommy?”
Visual Supports to Enhance Predictability
Incorporating Preferences
Incorporating Preferences: Silly-ology

• Make your interactions more fun!

• Examples of silliness abound:
  • Making strange faces or noises
  • Pretending there is a “close call” (“Phew!!”)
  • Unexpected singing or dancing
  • Pretend napping, sneezing or mouth-burning
  • Putting random objects on your head
  • Pretending to eat inedible things
  • Any kind of over-exaggerated action

What makes your child laugh?
Strategies: Antecedents

• **Transitions** – they DON’T have to be **SCARY!!!**
Strategies: Antecedents

• Transitions!
  • Incorporate a slightly preferred activity or object as you go from a preferred activity to a non-preferred one
  • Behavioural momentum
  • Countdown (make it visual!)
Strategies: Behaviours

• Teach the child a message to say that serves the same function as the problem behaviour
  • Attention: “Mum, look!” or “I want to sit with you”
  • Escape: “I need a break” or “I want help”
  • Tangible: “I want ___, please”
  • Automatic: “I need to wake up” or “I need to calm down”
Strategies: Behaviours

• Teach new skills that will help the child cope better in a variety of settings
  • Academic skills
  • Social skills (e.g. at home: program to improve sibling interactions)
• Independent play skills
Strategies: Consequences

• Don’t inadvertently reward problem behaviour with what your child wants! (keep in mind function here)
  • Example: If your child is looking for attention, do not give it as a consequence
  • Tip: Negative attention is just as powerful as positive attention
Strategies: Consequences

- Consequences for desired behaviours: Reward desired behaviour! Immediately and enthusiastically
Praise

• Guidelines on content and delivery:
  • Use specific language (“Wow! You put your coat on!” vs. “Good job!”)
    • Children need to know exactly what it was that they do right so that they can do it again in the future
  • Use an enthusiastic / upbeat tone of voice (or whatever tone the child prefers)
  • Smile!
  • Use varied wording to avoid satiation / boredom
  • Couple with non-verbal praise, too (fist bumps, high 5s, clapping)

• Aim = 5:1 ratio (praise:corrections)
Examples of Praise: Colouring Activity

• I love that colour!
• Oh, that looks wonderful.
• You are trying so hard!
• The ____ looks great!
• You are so creative.
• What a great colour to pick for that ___!
• You are so good at colouring.
• Can you teach me how to do it?
• Wow, you are doing a great job staying inside the lines.
• Thanks for asking so nicely for that crayon!
• You are getting so much better at colouring.
• Wow! You are almost done the ___!
Take-home messages

• Be a detective with regard to problem behaviour: you need to dig into the context surrounding it, and you must figure out the reason for its occurrence!

• Put most of your effort into preventing problem behaviour from occurring in the first place

• Catch your kids being good and reward them for it!
Preventative Family Centered-Positive Behaviour Support for Families of Children with Down Syndrome

• Dissertation project; examining effectiveness of 16 weeks parent training
  • Pilot study in spring resulted in decreased problem behaviour

• In the process of recruiting 12 families with children aged 3 to 8 to participate; please contact DSRF if you or someone you know in the lower mainland of BC might be interested

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