How to Think Like a Behaviorist

Lina Patel, PsyD

Director, Down Syndrome
Behavioral Health Collaborative
Children's Hospital Colorado

Teresa Unnerstall
BS-Education
DS-ASD Consultant

Objectives

- ✓ Explore functions of behaviors specific, how to do detective work to determine triggers and setting events that might be leading to behaviors.
- ✓ Learn about proactive strategies and supports and how to use them effectively to support the child.
- ✓ Identify target behaviors, recognize what setting events and triggers could be contributing to these, and understand how to come up with viable take home strategies.

Brains of Individuals with Down syndrome

- At or just before birth, the brain of an individual with Down syndrome is almost indistinguishable from the brain of individuals without any genetic anomalies
- Neuropathological differences begin to show after 3–5 months of age and demonstrate definite differences by 6 months.
- Once mature, the brains of people with Down syndrome are about 20% smaller than average and have fewer neurons, as well as abnormal connections between cells.

Areas of the Brain that are Affected

- Areas of the brain that seem to have differences in volume or circuitry include:
 - Hippocampus which is responsible for memory and learning
 - **Prefrontal Cortex** responsible for higher level cognitive tasks such as planning, decision making, problem solving, personality expression, modulation of social behaviors, inhibition, etc.
 - Cerebellum responsible for coordination of movement and learning, as well as attention and language.



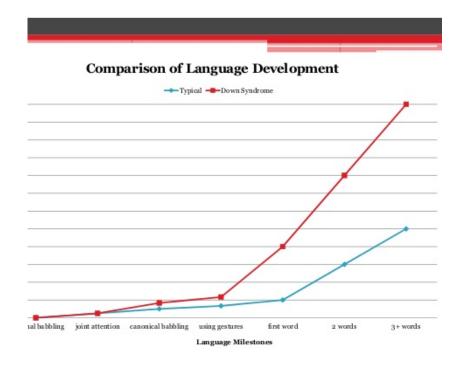
Probabilistic Behavioral Phenotype

More likely to show one or more of these characteristics or behaviors, but this does not mean every child will display these characteristics or behaviors.



Neurological Differences + Typical Changes

Children with Down syndrome still go through the typical stages of development on top of having these neurological differences. In the research world, this is a "developmental approach".





Additional Setting Events

Setting Events Checklist

tudent: Respondent:					
Behavior Interest: Date:					
Instructions: The list below includes events that could possibly increase the likelihood of problem behavior occurring. If an event contributes to the student's behavior, check the appropriate column to indicate when the event occurs in relation to when it contributes to the problem behavior. For longstanding influences, note only those that contribute to the current incident or behavior.					
SETTING EVENT (by type)	Same Day	Day Before	Within Week	Long Standing	
Ph	ysical				
Meal time change or meal missed					
Sleep pattern (including duration) atypical					
Medications changed or missed					
Appeared or complained of illness					
Appeared or complained of pain or discomfort					
Allergy Symptoms					
Seizure					
Chronic health condition					
Other (specify):					

Date/ Time	Setting Event Antecedent Behavior		Consequence	Severity	
3/22 8:30am	 ✓ Lack of sleep ☐ Peer conflict ☐ Lack of food ☐ Pain/illness ☐ Other: 	☐ T prompt ☐ T correction ☐ Alone ☐ Other:	verbal aggression	☑ Tattn ☐ Tangible ☑ Escape ☐ Peer attn ☐ Other:	5 yelling, swore
3/22 9:15am	☐ Lack of sleep ☐ Peer conflict ☐ Lack of food ☐ Pain/illness ☐ Other:	☐ T prompt ☐ T correction ☐ Alone ☐ Other:	verbal disruption	☐ Tattn ☐ Tangible ☐ Escape ☐ Peer attn ☐ Other: work removed	4 yelling
3/23 8:15am	 ✓ Lack of sleep ☐ Peer conflict ☐ Lack of food ☐ Pain/illness ☐ Other: 	☐ T prompt ☐ T correction ☐ Alone ☐ Other:	throws pencil + paper	☐ Tattn ☐ Tangible ☑ Escape ☐ Peer attn ☐ Other: head down w/ hood	4
3/26 9:00am	☐ Lack of sleep ☑ Peer conflict ☐ Lack of food ☐ Pain/illness ☐ Other:	☐ T prompt ☐ T correction ☑ Alone ☐ Other:	said "I'm not doing this"	☐ Tattn ☐ Tangible☐ Escape ☐ Peer attn☐ Other: assigned as hwk	Ē.

<u>Summary</u>: After 2 weeks of data collection, it appears that having slept less than 8 hours is associated with increases in the frequency and severity of Tobias' escape/avoidance problem behaviors (verbal aggression and disruptions), often lasting throughout the morning.

How Does This Knowledge Intersect with Behavior?

- Higher demand versus ability to cope
- Chronic higher state of anxiety (fight or flight) due to incomplete data
- Higher frequency of behaviors due to higher rate of exhaustion on internal resources
- More likely to engage in distraction strategies when tasks are too difficult or unmotivating
- Less motivation to show what you know
- Highly rewarded by social attention compared to everything else
- Challenging Behaviors=Communication of a mismatch between the child and something in their environment.



So What?

Behaviors occur with the context of a situation, but also occur within the context of neurodevelopment and chronic issues. Understanding that better prepares us to find a more meaningful solution.

Visual schedules and "first-then" directives	
Break down tasks into smaller components	
Use a multimodal approach to teaching including modeling (Learn by "doing")	
Turn the abstract into something concrete	
Limit visual/auditory overstimulation	
Prespecified reinforcer	
Preferred item as a distractor	
Offer an adult directed choice	
Teach emotion regulation	
Tell the child what to do instead of what "not" to do	
Use strengths and interests to engage	
Give time to process	
Errorless learning	
Visual Roadmap	

Components of a Schedule



"What do I do?"



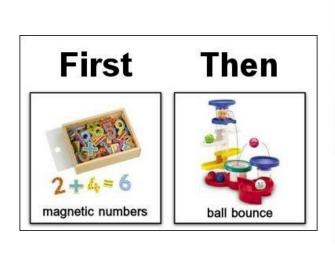
"How much work needs to be done?"

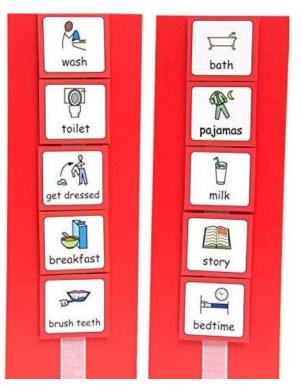


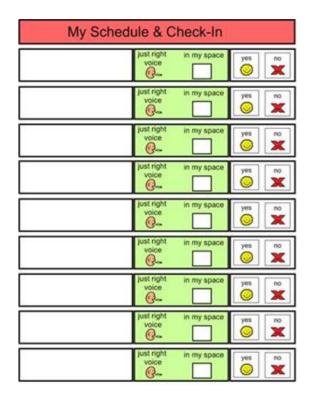
"When am I finished?"

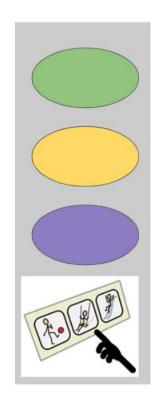


"What happens next?"









Types of Schedules

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Examples





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Least Restrictive / Most Independent

Most Restrictive / Least Independent

	Visual	Verbal	Gestural	Modeling	Partial Physical	Full Physical
Week of:	Visual clue or guide	Telling	Pointing or motioning towards	Demonstrating	Guiding by elbow	Hand-over or hand-under hand
Goal	Wha	at prompt level i	s needed for this	student to compl	ete his / her IEP	goal?

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Time









Visual Countdown Timer 4+

Fun visual countdown timer Fehners Software LLP

**** 4.6, 9K Ratings

Free · Offers In-App Purchases





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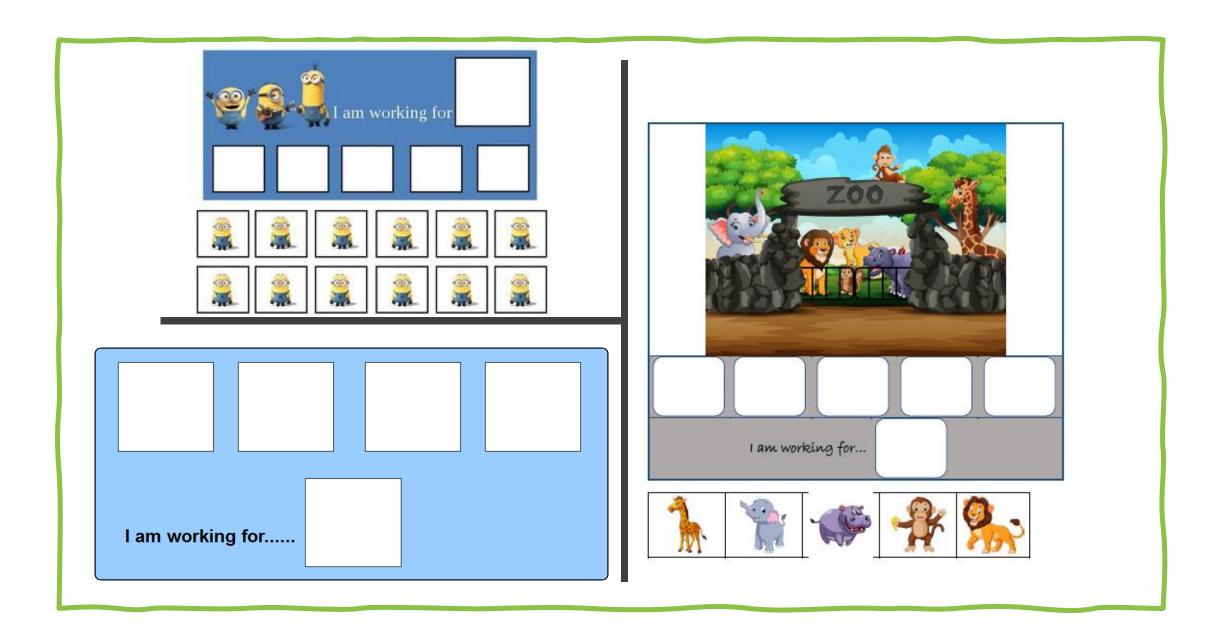




Over and under stimulation

- Planned sensory breaks
- Planned sensory diet for input
- Minimize visual and auditory stimulation
- https://www.youtube.com/w atch?v=plPNhooUUuc

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Example

• Behavior: Refusal to transition. Flopped on the floor.

• Strategy: ????



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Tell the child what to do instead of what "not" to do
Use strengths and interests to engage and to reward
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Reinforcement/Reward Inventories

Sometimes this can involve another object or sometimes it might be something that they do repetitively with their body and do not seem to have a clear purpose. We call these sensory seeking behaviors.

Auditory (Sound)

Behav	iors you m	ay observe: humming, verbalizations, tappin	g on obje	cts, lister	ning to r	music,
puttin	g ear to ob	ojects.				
Behaviors observed that may be auditory seeking:			Who has access? (list any additional environments your child may go)			
Liked	Disliked	Things to try:	Home	School		
		Toys that make noise				
		Drums				
		Triangles				
		Tambourine				
		Bells				
		Keyboard				
		Whistles				
		Radio				
		Push / Pull toys that make noise (See and				
		Say)				
		Music boxes / Jack in the Box				
		Hair Dryers				
		Books on Tape				
		Music				

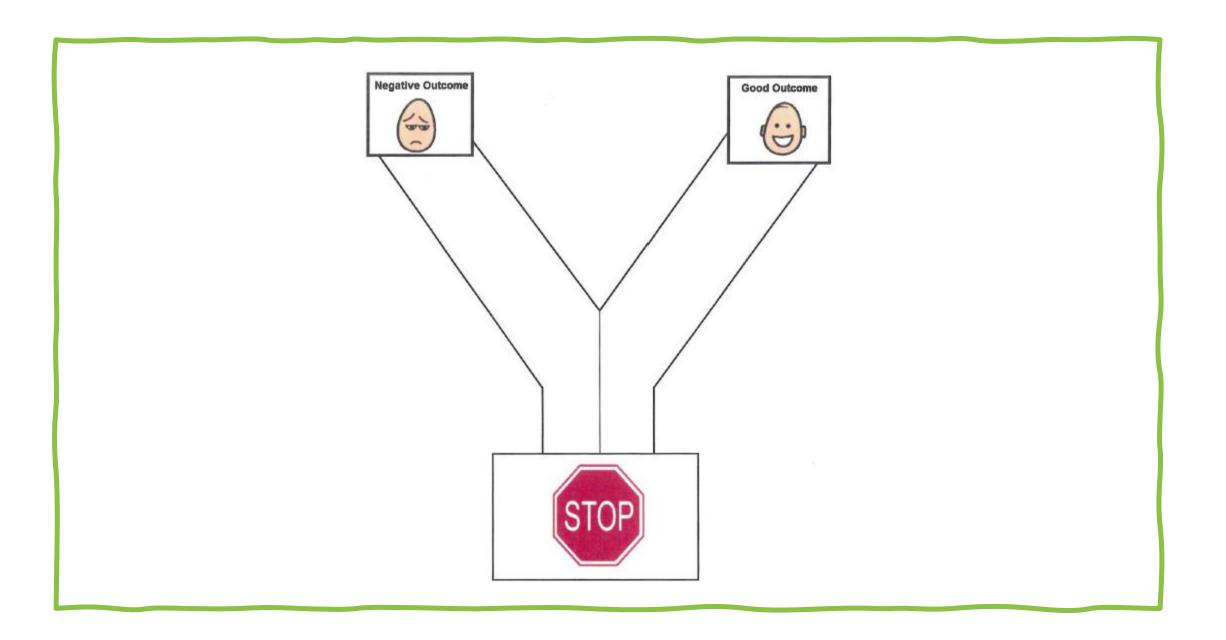
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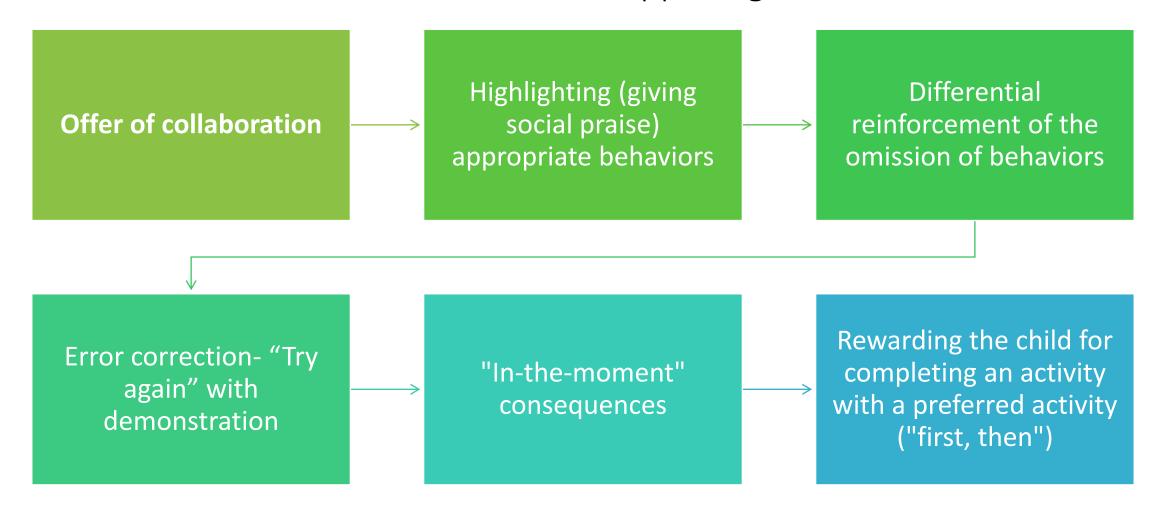
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Consequence Strategies

Ensures the behavior will or will not happen again





And yet, we still have challenges....

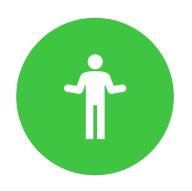
Behaviors

TRANSITIONS/REFUSAL TO GO
IMPULSIVENESS
PROPERTY DESTRUCTION
AGGRESSION (SELF AND OTHERS)
FREEZE RESPONSE
MELTDOWNS
PERSEVERATIVE SPEECH/YELLING
CONSTANT STIMMING
TEETH GRINDING
FECAL SMEARING
SELF-EXPOSURE/MASTURBATING
COMPULSIVE BEHAVIORS

Common Functions of Behavior



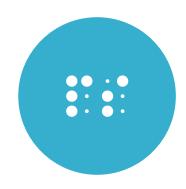
Social Attention: A person may engage in a certain behavior to gain some form of social attention or a reaction from other people. For example, a child might engage in a behavior to get other people to look at them, laugh at them, play with them, hug them or scold them.



Tangibles or Activities: Some behaviours occur so the person can obtain a tangible item or gain access to a desired activity. For example, someone might scream and shout until their parents buy them a new toy (tangible item) or bring them to the zoo (activity).



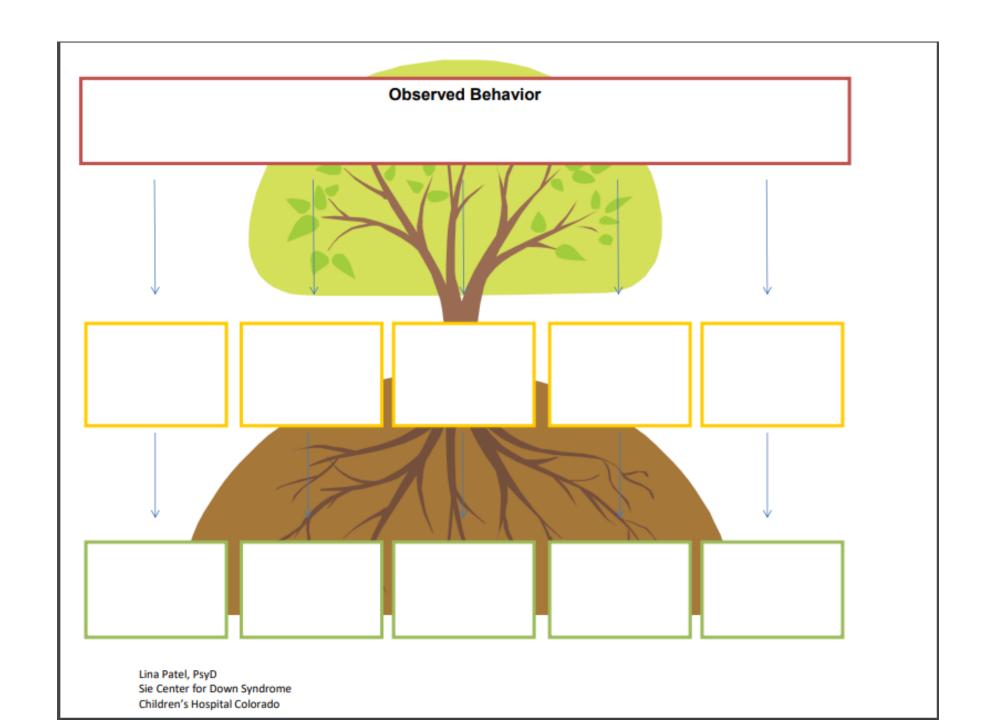
Escape or Avoidance: Not all behaviours occur so the person can "obtain" something; many behaviours occur because the person wants to get away from something or avoid something altogether (Miltenberger, 2008).

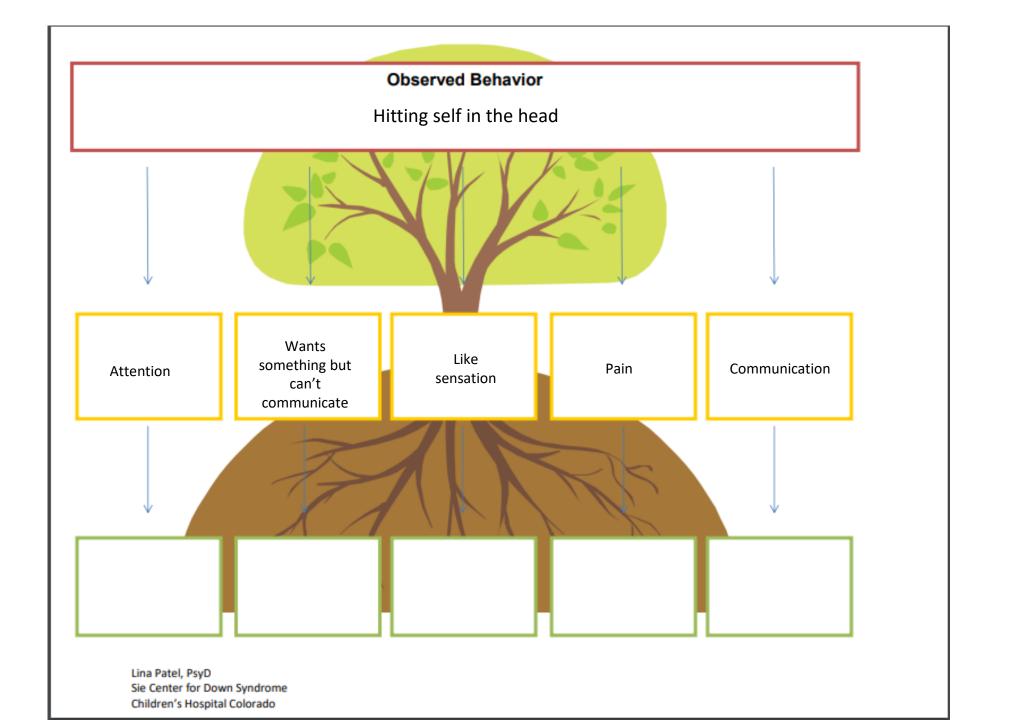


Sensory Stimulation: The function of some behaviours do not rely on anything external to the person and instead are internally pleasing in some way.

Data Tracking

Time/ Date/ Activity Initials of person documenting	Antecedent/ Trigger/ What happened right before?	Behavior/ Details of behavior	Consequence/ What happened after?	Function of the behavior?







Nick age 29, diagnosis of DS-ASD and Verbal Apraxia www.teresaunnerstall.com

Behaviors that Impact DS-ASD Individuals and their Families:

<u>www.teresaurmerstan.com</u>
Elopement
Sensory aversion (Haircuts, nail trimming, medical procedures, etc)
Sleep
Self-Stimulation (stimming)
OCD/ Need for sameness
Boundaries personal and others
Impulse Control
Property Destruction
Aggression/Meltdowns
Transitions
Outburst that seem out of the blue
Nudity
Toileting incontinence/Fecal smearing (code brown)

Nick's Escape Behaviors:



- Haircuts, nail trimming
- Blood draws, vaccinations & flu shots
- Running into the street
- Transitions
- Crying babies
- Group family photos
- Air fryer

Nick's Attention Seeking Behaviors: www.teresaunnerstall.com

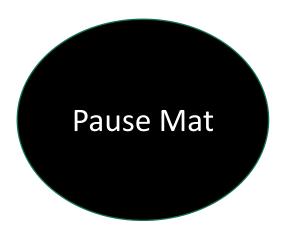
- Running faucets, pushing microwave fan button, pushing car remote alarms
- Pulling fire alarms
- Knocking and swiping things off tables
- Breaking picture frames
- Burping & passing gas
- Tapping objects
- Vocal stimming



Tangible or Activities

- Ending a preferred activity
- Taking away a tangible
- Getting upset when you can't get a tangible or do a preferred activity







Nick's Sensory Stimulation

- Vocal stims/ yelling
- Tapping
- Rocking
- Spitting
- Wiping bodily fluids/feces
- Throwing, swiping, breaking objects



What is the function of behaviors?

"I see you're dealing with a lot of stress. Have you tried knocking a bunch of stuff off the table?"



Behavior Support for DS-ASD:

- Determine function of behaviors.
- Identify triggers and setting events.
- Collaborate on supports needed and how to help the child to avoid/manage triggers.
- Identify replacement behaviors to fulfill the need.
- Use behavior support plan across all environments.



Putting it all Together:

www.teresaunnerstall.com
The Lid

Antecedents:

- *Time of day/AM
- *Hurry for bus
- *Transition
- *Taking highly preferred stim away

Behaviors:

- *Yelling
- *SIB's
- *Non-compliance in transition to bus
- *Hitting bus window

Supports:

- *Visual Schedule
- *Time Timer countdown
- *Stop Icon Bin
- *Allow for
- processing
- *Praise

How we Supported Nick

- Address Speech with an AAC Evaluation
- Implemented a steady sensory diet
- Visual schedules, social stories, process time
- First-Then Pop Sprite
- Offer choices= Feeling in control
- Re-direct behaviors
- Use replacement behaviors & saturate the day with meaningful activities/jobs
- Respond and don't react

About Me Resume

www.teresaunnerstall.com



NICK UNNERSTALL

28 YEARS OLD. DIAGNOSIS:CO-OCCURING DOWN SYNDROME AND AUTISM (DS-ASD)

VISION STATEMENT

We wish for Nick to be valued and respected and meaningfully included throughout his life. We hope that you meet Nick at his level and presume competence as you embrace his strengths and the gifts that he has to offer the world. We envision Nick having a happy, meaningful and productive life surrounded by those who will care, support and love him.

STRENGTHS

- *Receptive Language
- *Visual Learner
- *Good at matching and putting things away
- *Takes pride in his work
- *Heavy work and Structured TEACCH activities
- *Funny and Social
- *Likes to please

CONTACT DETAILS

Teresa Cell Al Cell

Email: tjunnerstall@comcast.net Blog: www.nickspecialneeds.com

Facebook/Instagram:

edownsyndromewithasliceofautism

WHAT WORKS FOR ME

- *Routine
- *Visual Schedule and Communication System
- *Allow for processing time in activities and transitions
- *Social Stories
- *First-Then Cues and Work Charts
- *Breaking down steps to learn new tasks
- *Giving me choices
- *Praise accomplishments and good behavior
- *Respecting my need to stim
- *Reminders what am I working for
- *3-2-1 Countdown
- *Stop sign icon and visual timers to indicate all done

What I Struggle With

- *Being told no, instead say all done, stop, later or use 3-2-1 countdown
- *When someone corrects my work or effort, instead say oopsie or oh no-try again.
- *Taking things away from me, instead hand me a box with a stop icon
- *Being rushed, instead allow time for me to process
- *Being overstimulated, watch for signs of stress like biting my ID bracelet and pinching my cheek.
- *Healthcare checkups, blood draws, immunizations
- *Impulse control especially pulling fire alarms, dumping and spilling drinks, throwing and other forms of property destruction

Favorite Things

- *Family and Personal Support Workers
- *Music and Movies
- *Community activities like restaurants, movies, parks, etc.
- *Watching YouTube videos
- *Hot tub and deck time
- *Taco Bell, Culvers, Olive Garden
- *Being Silly and joking
- *Dancina
- *Tapping objects to help me regulate
- *Movies on Demand: The Nutty Professor, Dr. Doolitte, Norbit, Mrs. Doubtfire, Snow Dogs, Flipper, Stuart Little, Cats and Dogs, The Other Guys, A Dolphin Tale, Rug Rats Thomas the Tank Engine Classic Series

Shifting the Language to a Place of Empathy:

www.teresaunnerstall.com

Attention seeking Connection seeking

Challenging behaviors:



Skill gaps in the ability to communicate, regulate senses/emotions, and control impulses.

Follow us on Facebook & Instagram: Down Syndrome with a Slice of Autism Email: tjunerstall@comcast.net

www.teresaunnerstall.com

A New Course Book and Blog:





The important point is that difficult behaviors do not occur by accident, or because someone has a disability. Difficult behaviors are expressions of real and legitimate needs. All behavior, even if it is self-destructive, is "meaning-full".

David Pitonyak, PhD Blacksburg, VA Down Syndrome News