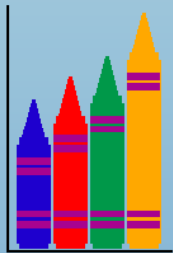




*Providing Positive
Behavior Support to
Toddlers with
Challenging Behavior
and their Families*



Center for Evidence-Based Practice:
Young Children
with Challenging Behavior

Early Intervention



Positive Behavior Support

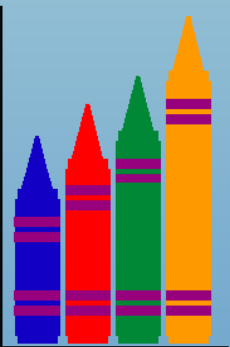


➤ To provide families, caregivers, and others with positive strategies and skills that will result in the child's acquisition of appropriate social and communication skills

➤ To assist young children with challenging behavior and their families with support to achieve quality of life outcomes

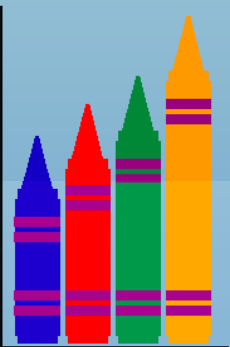
Intervention Components

- Screening to determine potential eligibility
- Family/Child Care visit to determine severity of behavior within natural environment and daily routines
- Person-centered planning with family system and circle of support
- Functional assessment within home and child care environments



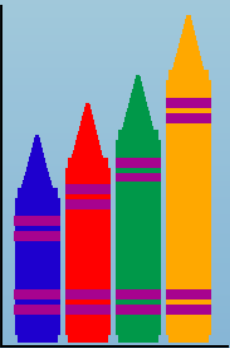
Intervention (continued)

- Family-centered, comprehensive behavior support plan development
- Coaching in natural environments
- Family support and education
- Ongoing evaluation and monitoring



Process of Positive Behavior Support

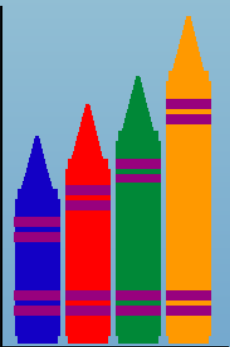
- Step 1:** Convene a team and identify goals of intervention
- Step 2:** Gathering information (functional assessment)
- Step 3:** Developing hypotheses
- Step 4:** Designing behavior support plans
- Step 5:** Implementing, monitoring, and evaluating outcomes



Outcomes

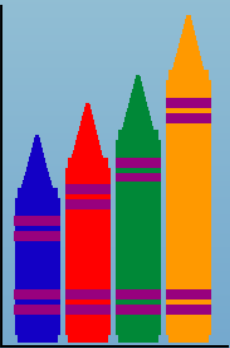
Child/Family

- Problem behavior reduction
- Increased social and communication skills and active engagement
- Placement stability
- Reduced family stress
- Increased family confidence and parenting satisfaction
- Greater community inclusion for children and families



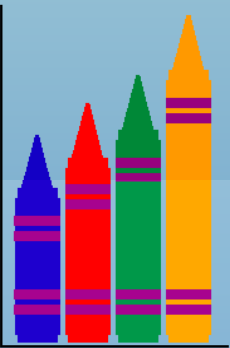
Gregory

- 24 months old; lives with mother and father; both employed full-time
- Mother –clerical; Father – tug boat crew
- FSP Outcomes: improve language, improve behavior
- Assessment: overall mild delays; moderate delays in language development
- EI services: speech therapy 30 min./2x week



Initial concerns

- Tantrums (rolls on floor, ear-piercing screams, runs away, falls to floor, pulling hair, kicking, hitting)
- Difficult activities: diaper changes, washing hair, bath, coming in from outside play, grocery store, changes in routine (seems to be o.k. at family child care)



Methods

➤ Single Subject Design:

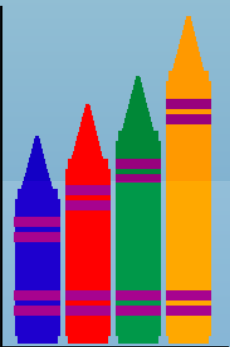
- Concurrent multiple baseline across routines

➤ Conducted during three daily routines:

- 1. Diaper change; 2. Bath time; 3. Transition from play

➤ D.V.= Greg's challenging behavior and engagement

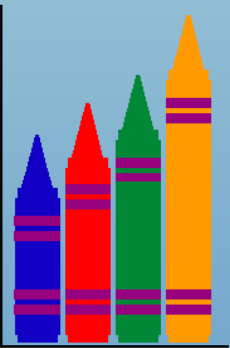
➤ I.V.= Implementation of assessment-based behavior support plan



Greg displayed challenging behavior in an attempt to escape from routines that were not preferred

Diaper Change Routine

- Environmental modifications
- Visual schedule & choice board
- Preferred toy
- Active Participation
- Gesture for a hug
- Ignore and redirect
- Praise

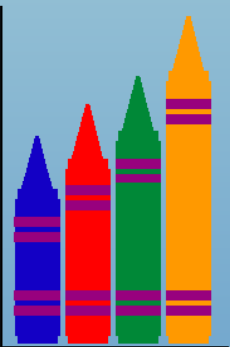


Greg displayed challenging behavior in an attempt to escape from routines that were not preferred

 **Bath Routine:**

- Environmental modifications
- Safety signal
- Object cue for transition
- Preferred activities/toys
- Active participation
- Choose toys
- Ignore and redirect
- Praise

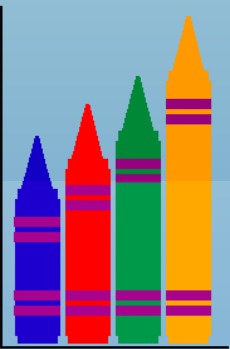
 **Transition from Outdoors:**

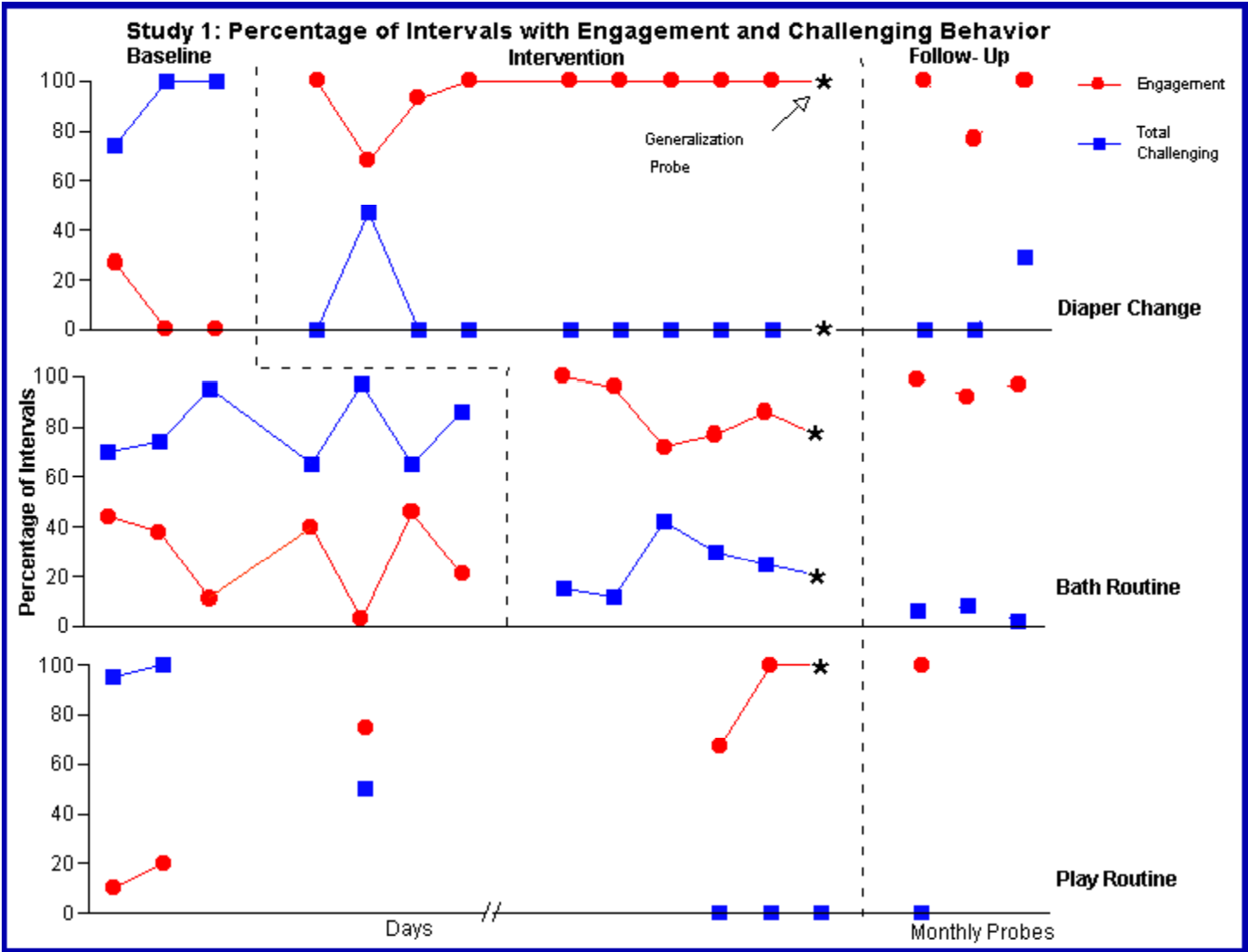


Primary Dependent Measures

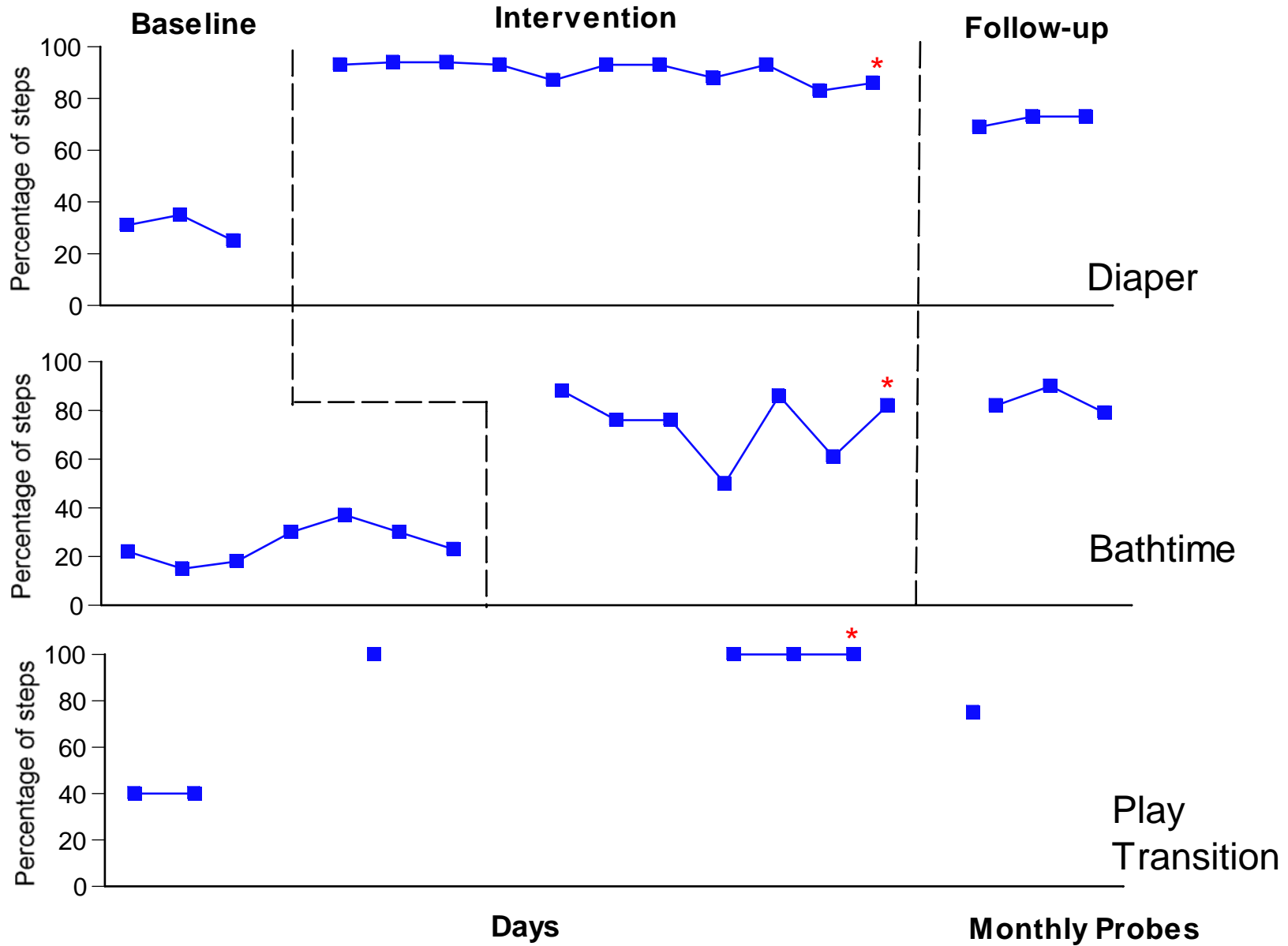


- **Total Challenging**: Any occurrence of aggression, collapsing on floor, arching back, out of area, property destruction, or screaming
- **Engagement**: Following directions, participating in activity appropriately for majority of interval
- **Other**: Parent positive interaction; child communication; duration of diaper change



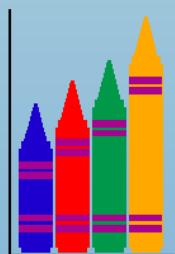


Procedural Fidelity Percentage of Steps Completed



* Generalization probe- (Dad)

Max, Zak, & Emmy



Center for Evidence-Based Practice:
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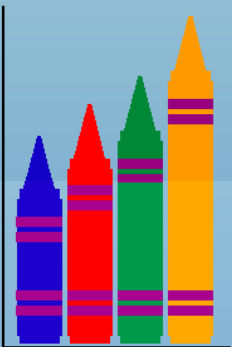
Who: Max (30 months)

Medical Concerns/Challenges:

- History of failure to thrive & feeding difficulties
- Difficulties with expressive language & articulation

Problem Behaviors:

- Tantrums, hitting, biting, throwing toys, excessive crying, turn taking, off-task, elopement



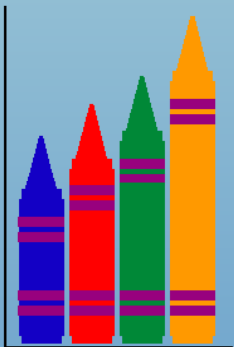
Step 1: Identify Goals

- Family's Initial Concerns
 - Wanted help with Max only

- Team Building/Rapport

- Interventionist's Observations
 - Quickly realized concerns were related to all three children (Max, Zak, & Emmy)

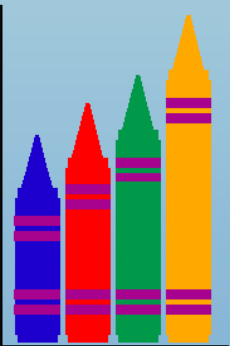
- Identify Parent Responses & Strengths



Who: Zak (30 months)

Problem

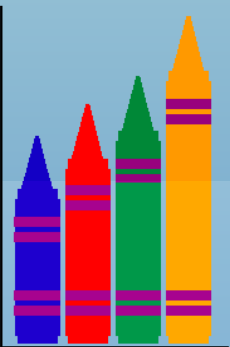
Behaviors: Hitting, food dumping, spitting, off-task, biting, throwing toys, excessive crying, elopement



Who: Emmy (5 ½ years)

Problem Behaviors:

- Hitting, kicking, taking toys away, throwing objects, negative interactions with mother
- Models & encourages inappropriate language & behavior with younger brothers



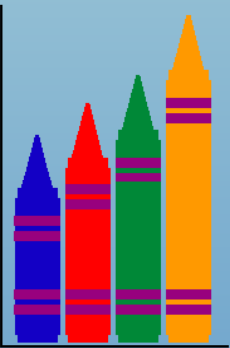
Step 2: Functional Assessment



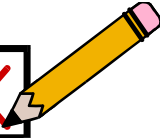
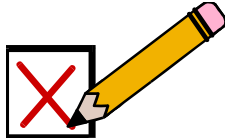

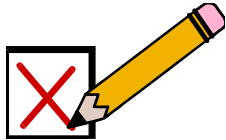

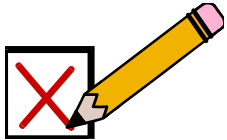
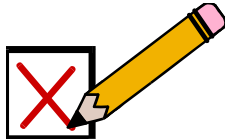

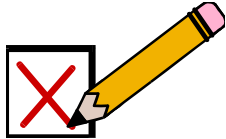
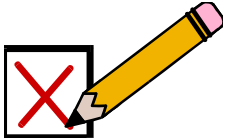
 Identify Target Routines

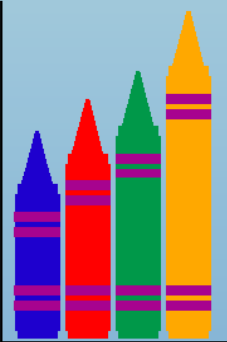
 Functional Assessment:

- Functional Assessment Interview- Revised for young children (O'Neill et al., 1997)
- Systematic behavioral observations across times & routines
- Sibling interview-Emmy
- Unstructured interview with mother



Target Routines

Routines	Max	Zak	Emmy
Clean Up	<input checked="" type="checkbox"/> 	<input checked="" type="checkbox"/> 	
Twin Play	<input checked="" type="checkbox"/> 	<input checked="" type="checkbox"/> 	
All Play	<input checked="" type="checkbox"/> 	<input checked="" type="checkbox"/> 	<input checked="" type="checkbox"/> 
Dinner	<input checked="" type="checkbox"/> 	<input checked="" type="checkbox"/> 	<input checked="" type="checkbox"/> 



Methodology

Single Subject Design:

- Multiple baseline across routines
- Used to evaluate changes in composite & individual data

Supplemental Data:

- Procedural Fidelity

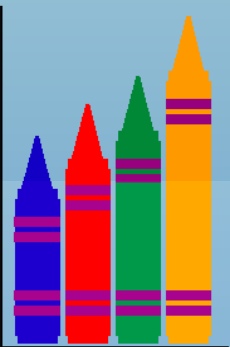
Dependent Variables:

- Percentage of observed intervals with challenging behavior
- Percentage of observed intervals with engagement

Independent Variable:

- Process of PBS (i.e., development & implementation of comprehensive assessment-based intervention)

Interobserver agreement calculated for 30% of sessions at minimum of 96% reliability for all behaviors coded.



Step 3: Hypothesis for Twin Play

TWIN PLAY

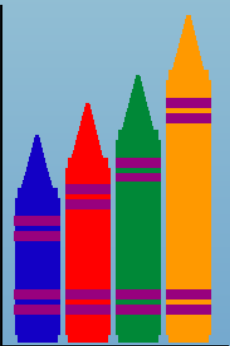
Hypothesis:

- When their mother left the area or stopped playing with them, Max & Zak displayed challenging behavior in order to obtain their mother's attention.



Parent responses:

- Stopped her activity
- Came into room
- Consoled child



Step 3: Hypothesis for Dinner

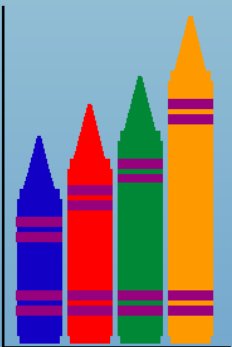
DINNER

Hypotheses:

- When engaged in the dinnertime routine, the children displayed challenging behavior in order to obtain attention from their mother.
- When engaged in the dinnertime routine, Zak threw or dumped his food and/or beverages in order to escape nonpreferred food and/or to leave area.

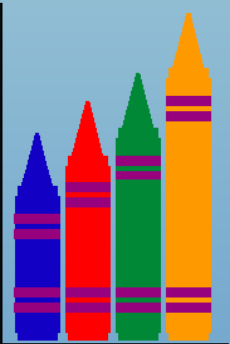
Parent responses:

- Gave in to demand
- Excused from dinner
- Verbal reprimand



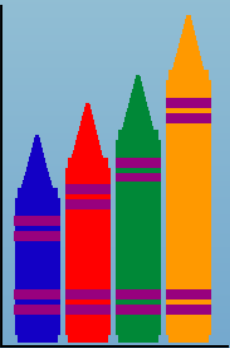
Step 4: Behavior Support Plans

- Developed based upon family's goals & functional assessment data.
- Created in collaboration with the natural intervention agent (i.e., the mother).
- Customized to fit within the family's natural environment and routines.



Step 5: Implement Intervention

- Implementation was initiated sequentially across routines.
- Coaching was provided during each session to ensure mastery of prevention & intervention components.
- Procedural fidelity data were collected to:
 - Ensure accurate implementation of each support plan
 - Determine which intervention components the mother was most comfortable using independently.



Twin Play: Plan Components

Prevention Strategies

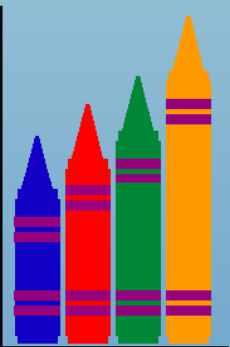
- Choice given (toys)
- Structure activity (clear beginning & end)
- Length of activity shortened to 15 min.
- Toy selection (quantity & ability for independence)
- Clear expectations (visual & verbal)

Parent Responses

- Noncontingent specific praise
- Ignoring
- Redirection (using expectations)

Skill Building

- Teach children how to play independently & follow age-appropriate expectations



Dinner: Plan Components

Prevention Strategies

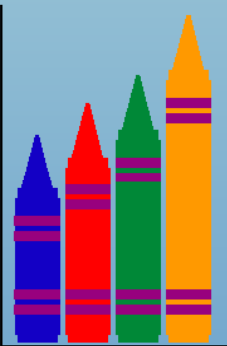
- Structure (Consistently follow same sequence such as prayer)
- Choice for food (back-up)
- Seating arrangement (mother stayed at table, next to Emmy)
- Food on table to prevent need for mother to leave area
 - Emmy's preferences embedded within plan

Parent Responses

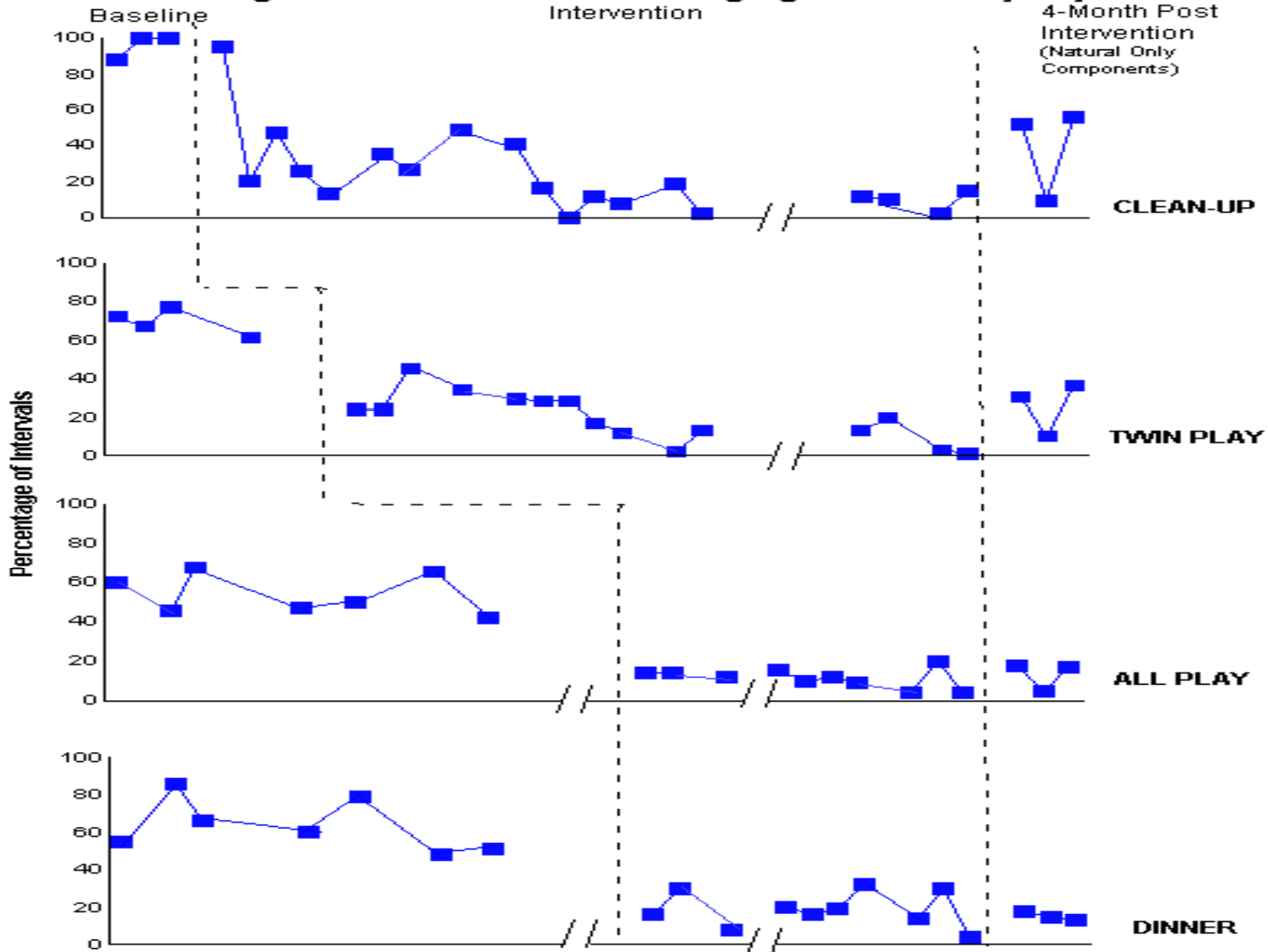
- High rates of specific praise
- Ignoring
- Redirection (using expectations)

Skill Building

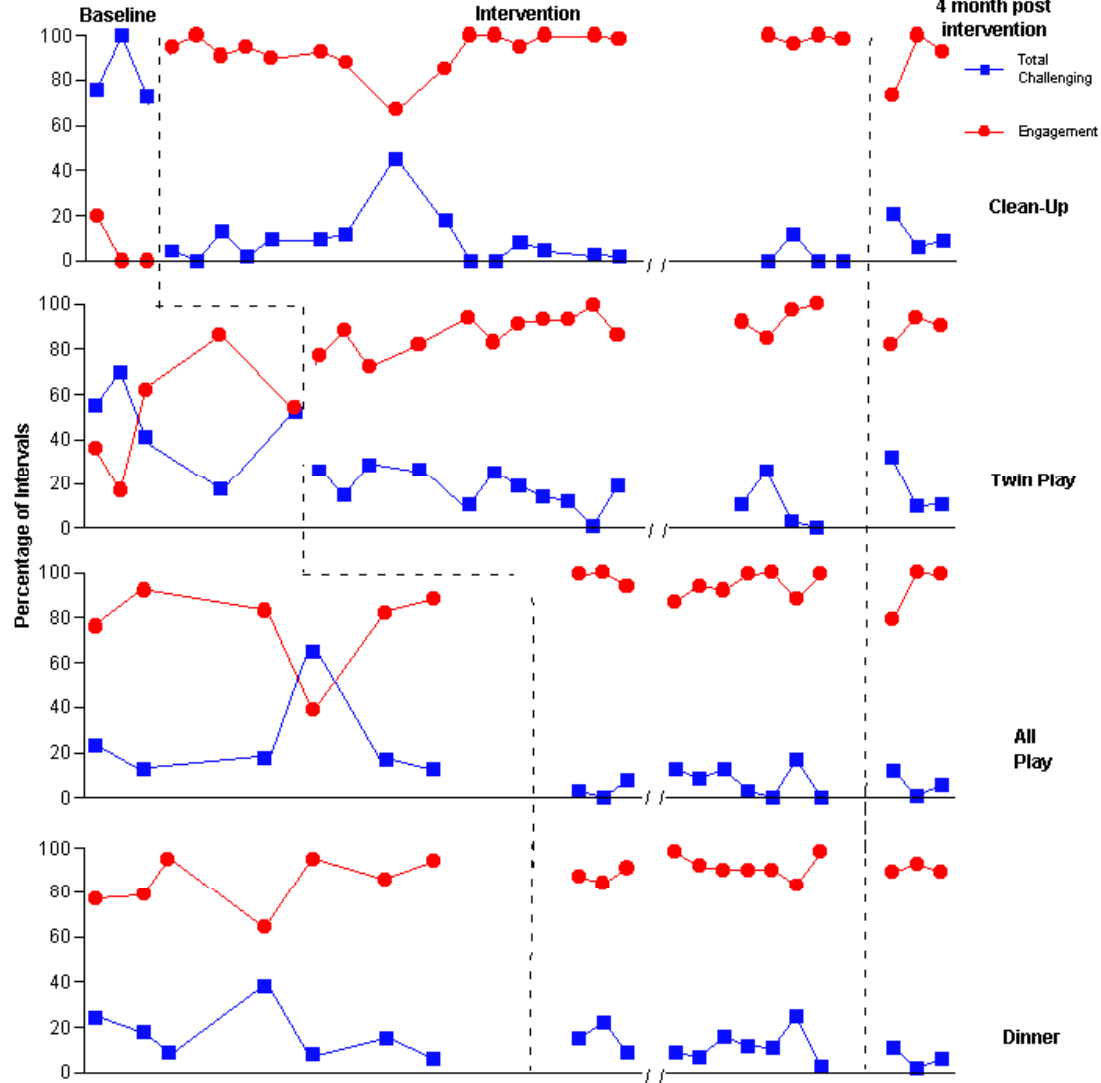
- Emmy takes on role of helping/taking lead
- Emmy's self-management plan:
 - Emmy & mother independently evaluate her performance & compares ratings after dinner (i.e., the steps Emmy reported completing versus the number of steps the mother observed Emmy completing)
 - Menu of reinforcers provided for 80% of steps completed



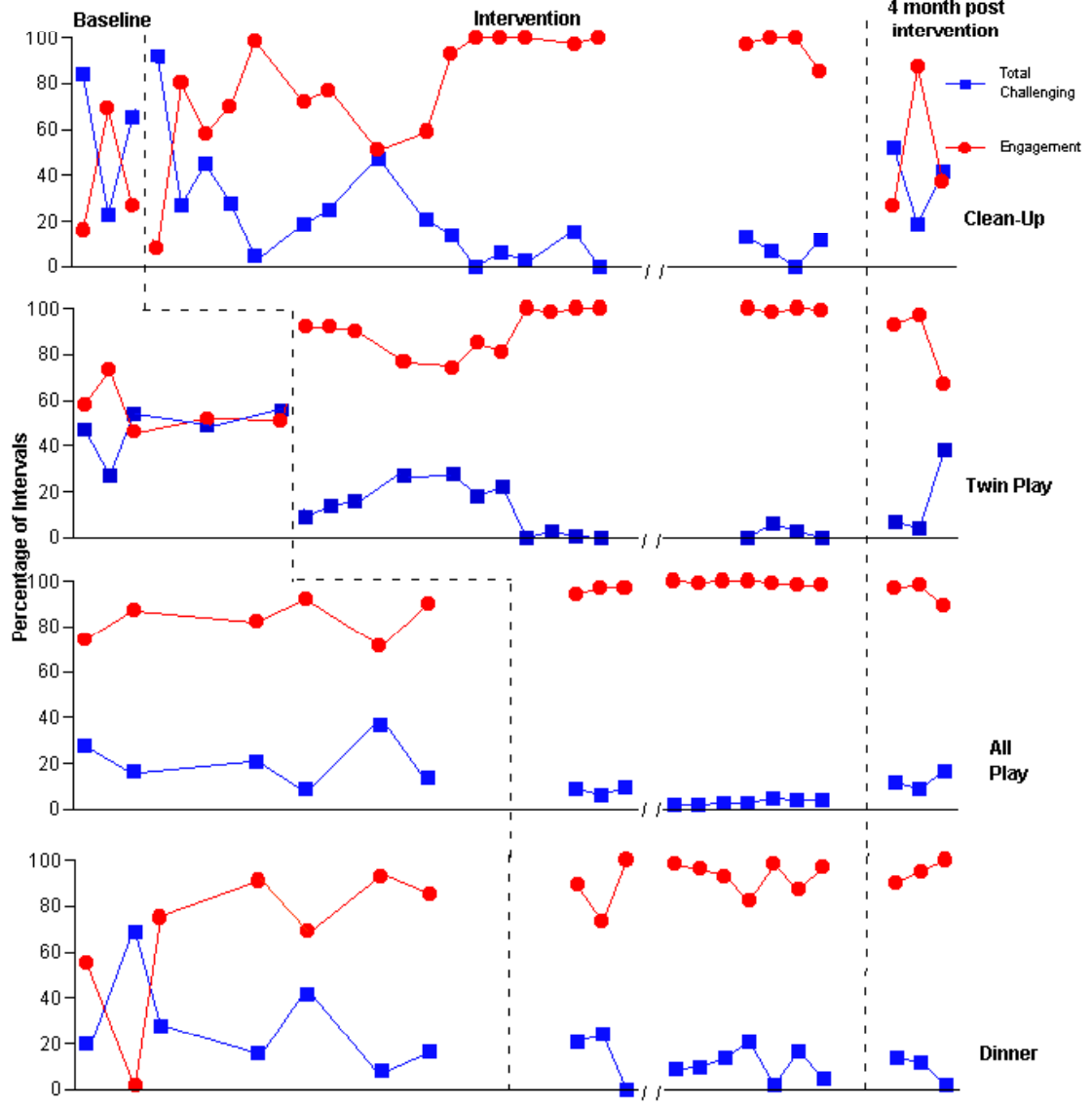
Percentage of Intervals with Challenging Behavior By Any Child



Percentage of Intervals with Engagement and Total Challenging Behavior - MAX



Percentage of Intervals with Engagement and Total Challenging Behavior - ZAK



Percentage of Intervals with Engagement and Total Challenging Behavior - EMMY

