

# Happy People Don't Act Out: Looking at the Whole Picture

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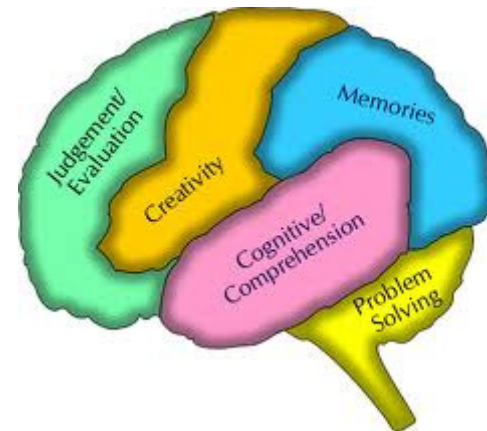
# Building blocks to Happiness

- A new way of looking at the individual
- A new look at the system of support
- A new way of looking at yourself



# What's the brain got to do with it?

- Neurodevelopmental Framework:  
Understanding individuals in terms of developmental level




- A multimodal approach develops appropriate supports based on a biopsychosocial model



# Neurodevelopmental Foundation

- Differences in the brain cause:
  - Learning differences
  - Sensory differences
  - Behavioural difficulties
  - Memory problems
  - Frontal lobe differences (Executive functions)
  - Etc.



# Behaviour does not exist in isolation: it is related to:

- History/Experience
- Medical
- Psychological/Psychiatric
- Central nervous system dysfunction
- Social
- Environmental
- Emotional
- Ability/Understanding/Learning
- Crisis

# Our responses are key to developing positive supports

- We make attributions about behaviour
- Do we personalize these attributions?
- Do we expect too much? Not enough?



- Our attributions may lead to secondary problems

# Values and values clashes (Malbin 2011)

1. Primary characteristic	2. Values, expectations	3 Interpretation <i>Feelings</i>	4. Interventions	5. Secondary characteristics	6. Accommodations Build on strengths
Dysmaturity	Act your age	Being a baby, Lazy, not trying <i>Frustrated</i>	Punish, take things away	Anxiety, anger	Think younger, adjust expectations, think “stretch toddler”
Difficulty abstracting	Plan, organize, follow through Predict outcomes	Irresponsible, doesn't care <i>Fear, anger</i>	Talk, reason, threaten	Anger, denial	Recognize brain dysfunction, keep it simple and concrete
Memory problems	Good memory, Expect to have to teach only once	Unmotivated, lazy <i>Frustration, anger</i>	Demote, Terminate employment	Anger, frustration	Accept need to reteach, based on learning strengths
Slow processing pace	Learn fast—think fast	Not trying, doing it on purpose, <b>at me</b> <i>Anger, frustration</i>	Speed up, talk louder, embarrass	Shut down, fear, avoidance, withdrawal	SLOW DOWN! Use fewer words
Difficulty generalizing, gets the piece, not the picture	Learn and remember rules in different settings	Breaking the rules, on purpose <u>Should</u> follow rules! <i>Anger, frustration</i>	Talk, ground, other punishments	Frustration, confusion, fear, anger	Show don't just tell Repeat in different settings. Accept need to reteach

# Unhappy = Secondary Problems

- If expectations too high
- If supports not appropriate
- If illness not recognized
- If bored





## Secondary behavioral symptoms

- Easily tired, fatigued
- Anxious
- Lonely, isolated
- Shut down; flat affect
- Fearful, withdrawn
- Depressed
- Frustrated, short fuse, angry
- Aggression
- SIB





# Tertiary Problems

- Loss of housing
- Mental health issues
- Hospitalization

**YELLOW BLUE ORANGE**

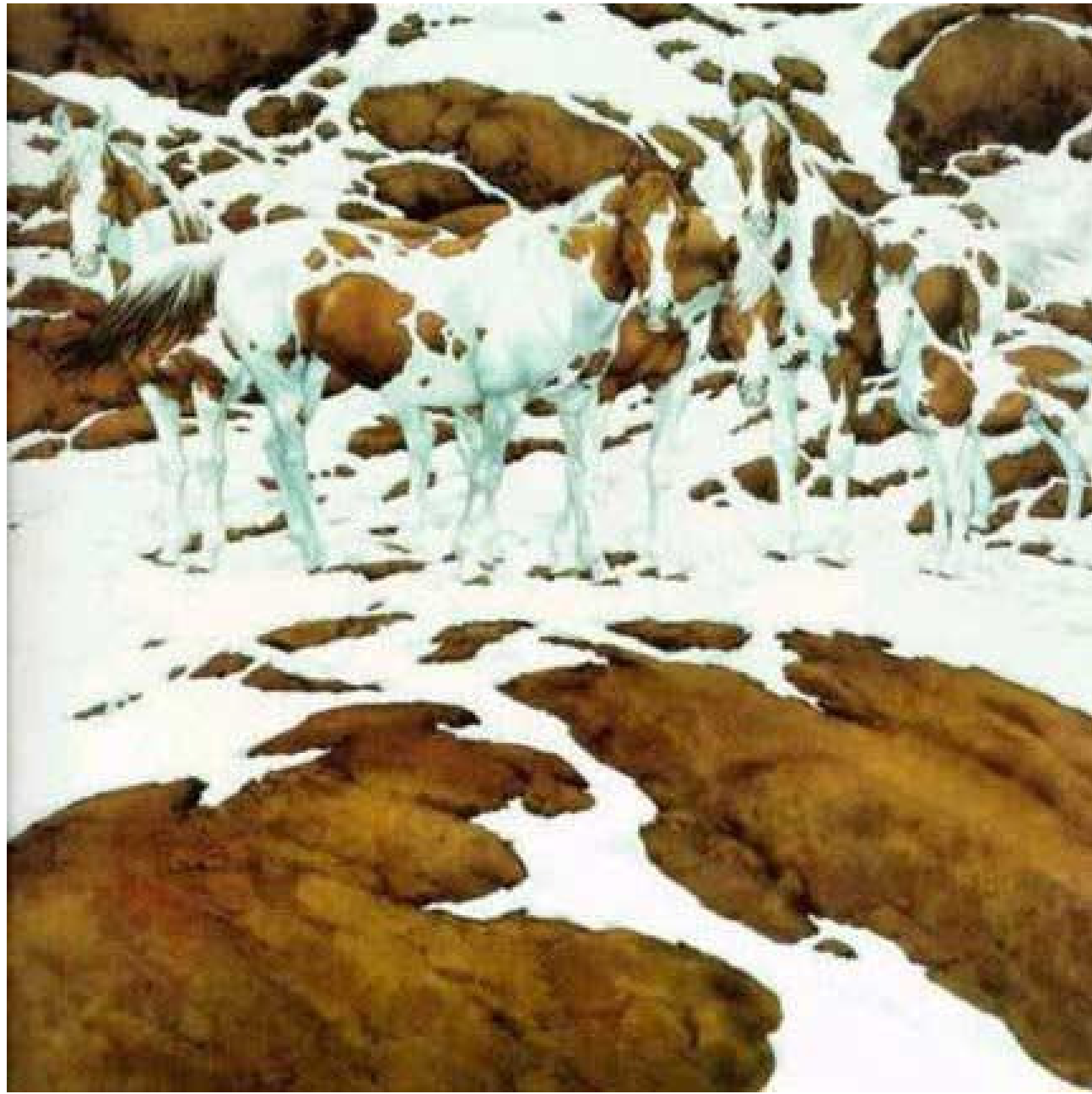
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**ORANGE GREEN BLACK**

**BLUE RED PURPLE**

**GREEN BLUE ORANGE**



# Changing Attitudes: A Professional Shift

**From**



**To**

- |                      |                        |
|----------------------|------------------------|
| • Won't              | • Can't                |
| • Stopping behaviour | • Preventing problems  |
| • Changing people    | • Changing environment |
| • Is a problem       | • Has a problem        |

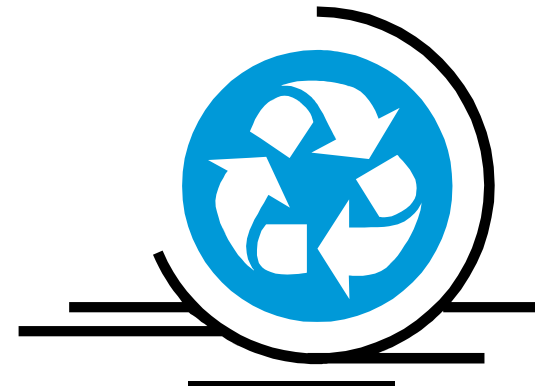


# Problem Solving

- Problem Identification
  - Observe, gain information
  - Check your attitude
  - Consider the goals of behaviour change and the barriers
- Consider solutions
  - Think about adding something to a person's life rather than controlling behaviour

# Philosophy of Positive Systems Approach

- The underlying philosophy of PSA is that every individual functions within a system, and behavioural change cannot occur without first considering all aspects of that system and its synergistic effect (i.e. – the individual affecting the system and the system, in turn, impacting on the individual).





# Systems issues

- We cannot change the way that a person behaves without having a thorough understanding of the system that that person functions in.
- We are often able to change behaviour simply by changing the environment and the way that we interact with that person – as opposed to trying to change the individual (e.g. – through behaviour modification techniques).
- This is a much less intrusive and positive approach to changing human behaviour – and, often, much more successful in terms of achieving enduring changes that generalize to various situations.





# BioPsychoSocial Assessment

- Look at ALL factors that may affect someone or influence their behaviour
- Behaviour as a symptom
- Vulnerabilities
- Identify and alter the conditions that create or cause these behaviours

# I: Bio

- Medical factors
  - Syndromes
  - Illness
  - Pain
  - Neurological factors
  - Medication reactions
  - Psychiatric diagnosis





## 2. Pain & Illness

- Indicators may be verbal reports, quality of speech (tone), crying/ moaning, facial expression, guarded behaviour, holding/grabbing body areas, frequent bathroom visits, holding mouth/throat, irritability, agitation, respiration, pallor, flushing, sweating, muscle tension, fatigue, swelling, disordered thoughts, confusion, withdrawal, apparent fear



# Pain & Illness

- Don't ignore
- Observe, Document, Investigate
- Symptoms of Pain & Illness which are not addressed may lead to self-injurious, aggressive, destructive, agitated or withdrawal behaviours



### 3. Medication Reactions

- Tardive Dyskinesia
- Neuroleptic Withdrawal Symptoms
- Neuroleptic Malignant Syndrome
- Drug induced Psychosis
- Anxiety
- High Blood Pressure
- Lethargy/Fatigue
- Incontinence
- Nausea
- Dizziness
- Weight Gain



## 4. Other Physiological Conditions

- Anemia/Low Iron
- Hearing/Vision Impairments
- B12 Deficiency
- PMS/Menopause
- Folic Deficiency
- Allergies
- Hormonal Imbalance
- Arthritis



## 5. Neurological

- Examples:
  - Seizure Disorder
  - Frontal Lobe Disorder
  - Acquired Brain Injury
  - Stroke
  - Brain Tumour

## II Psycho

- Factors intrinsic to the individual
  - Personality
  - Skills
  - Learning styles
  - Developmental level
  - Interests
  - Likes
  - Dislikes
  - Syndrome driven behaviour







### III. SOCIAL

- The SOCIAL in Bio-Psycho-Social refers to Environmental and Social factors such as
- Housing
- Relationships
- Support
- Meaningful Activities
- Autonomy
- Environmental stressors/support



# Housing

- Any areas of risk? (e.g. poor air quality, steep stairs, poor lighting, busy street, etc.)
- Is it accessible for the person?
- Is it overcrowded or allows adequate living space?
- Is there provision for privacy?
- Is there space for leisure?
- If there are behavioural or safety issues, have modifications been made for safety and security?
- Compatibility of roommates



# Relationships

- Does the person have a network of friends
- Does he/she get along with workmates and housemates
- Does he/she maintain contact with family
- Does he/she receive respect
- Does he/she have appropriate social interaction skills – understand social boundaries
- Does he/she have an intimate relationship



# Relationships & Rapport

Studies suggest that success with challenging behaviours is largely due to the "special bond" or close relationship between caregiver and the individual

consistency = trust





# Support

- Is physical/environmental support adequate based on the persons needs and abilities (e.g. transportation, meal prep, etc)?
- Is emotional support adequate based on the persons needs and abilities?
- Does the support address the persons interests/wishes/choices?
- Does the support address any disorders/conditions adequately?



# Meaningful Activities

- Does the person have regular meaningful activities to engage in such as employment, volunteer activities, educational activities, stimulating activities?
- What is meaningful?
- Does the person have enjoyable leisure activities and opportunities?
- Boredom and/or lack of meaningful activities can lead to behavioural or emotional/self-esteem difficulties

# Stimulation

Research has shown us that exposure to fun and stimulating activities and positive reinforcement can have a significant impact on reducing negative behaviours







# Autonomy

- Does the person have autonomy within a supportive framework?
- How can we help the individual make appropriate choices?
- Is he/she provided with information at his/her level to reduce stress/misunderstanding?
- Does he/she have materials needed for autonomy (e.g. ambulation devices, visuals, etc.)

# REMEMBER

NEVER assume the individual is choosing not to behave in an appropriate manner

*BUT ...*

that the individual *MAY NOT have the skills* in the first place



## Non Compliant? Willful disobedience?

- Performance deficit
  - Assumes that the individual has the skills
  - Assumes that the individual is choosing to act inappropriately
  - Value judgements/ blame, punish
- Acquisitions deficit
  - Understand that the individual may not have the skill or may not be able to generalize to other situations
  - Teach the skill, practice in many situations/locations



# Tips for teaching

- Don't assume that because you showed/told that the individual can do it
- Practice in many environments
- Aim for overlearning
- Use different modalities
- Model appropriate behaviour
- Be positive!
- Eavesdropping technique
- Planned ignoring

# Principles of Positive Reinforcement

When working with a challenging individual, the amount of positive feedback and interaction should far exceed what you would normally expect to see

(at least 10x the amount)





# Guidelines for Positive Reinforcement

- Be immediate
- Be consistent
- Be specific
- Be sincere
- Reinforce effort
- Vary the reinforcer
- Give it time
- Always respect
- If the reinforcement does not work it is not reinforcing!
- Adapted from Hingsburger, 1996



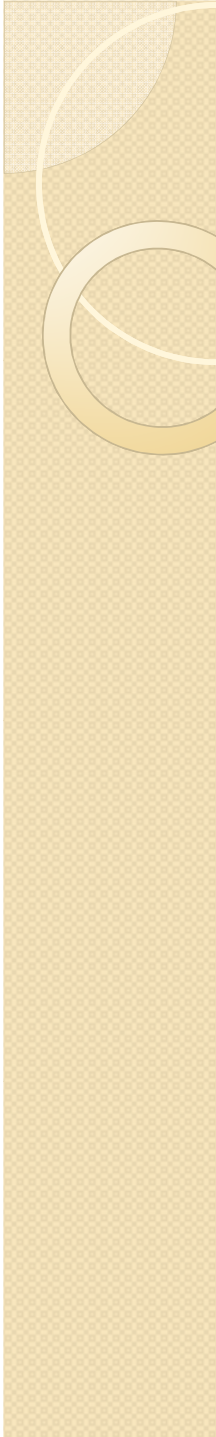
# WHAT TO DO?

- Take a close look at the history for that person
  - family, institutional life, previous trauma
- Define who the person is
  - their strengths and their needs

# WHAT TO DO?

- What areas of their lives are currently creating problems for them or for others?
- **Listen!!!**
- Can solutions, re-inforcers and engagement activities be found in their strengths?
- **Teach skills!!!**





If strategies don't work: don't  
try harder,  
Try something different!!!

Malbin, 2006

# Last, but **Most** Important

- Happiness breeds Happiness
- Happiness is an antecedent to positive behaviour, Hingsburger
- Positive health



# Agency/ Team Support

- Debrief success
- Put praise on the agenda
- Affirmation
- Sharing
- Positivity



- Hingsburger, 2011

# You

- Take care of yourself
- Educate yourself and others
- Pick your battles
- Maintain own interests and hobbies
- Have patience
- Surround yourself with positive people
- Don't sweat the small stuff





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