

Positive Behavior Supports and Functional Assessment of Behavior

reprinted from *Families and Disability Newsletter*
 Beach Center on Families and Disability, University of Kansas
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Introduction

When the *Individuals with Disabilities Education Act* (IDEA) was amended in 1997, two key provisions related to positive behavioral support were enacted. First is a requirement that the Individualized Education Program (IEP) team address behavior of students when it impedes their or other students' learning. IEP teams are to consider strategies, including *positive behavioral interventions*, to address the behavior.¹

The second provision requires schools to conduct a *functional behavioral assessment* and implement a *behavioral intervention plan* if it has not already done so for students who have been disciplined. If the student already has such a plan, it

must be reviewed, and, if appropriate, revised.²

This *PEER Information Brief* is one of two that discuss positive behavioral approaches.³ This *Brief*, with information reprinted with permission from the *Families and Disability Newsletter* (Winter 1997),⁴ focuses primarily on the implications of the new IDEA

² Students have a right to a *functional assessment* and *positive behavioral support intervention* if they are disciplined for weapons, drug violations, or for other reasons, and the intervention must address the behavior for which they are punished (20 U.S.C. 1415 (k)(1)(B)). As a practical effect of this provision, students may be able to acquire interventions that will prevent them from being disciplined and placed in a highly restrictive setting.

³ The *PEER Information Brief* "Effective Discipline Policies and Practices: A Schoolwide Approach," by Diana MTK Autin, discusses the concepts of positive behavioral support as they apply to shaping systems and settings that foster responsible, desirable behaviors conducive to learning as opposed to systems that rely on exclusionary, punitive approaches.

¹ As one of the special factors the IEP team must consider: "...for a student whose behavior impedes his or her or others' learning, appropriate strategies, including *positive behavioral interventions, strategies, and supports*, to address that behavior[.]" (Emphasis added.) IEP development, 20 U.S.C. 1414 (d)(3)(B)(I).

⁴ The *Families and Disability Newsletter* is published by the Beach Center on Families and Disability at the University of Kansas in Lawrence. The PEER Project gratefully acknowledges the Beach Center for granting permission to reprint here the articles on "Positive Behavioral Support" and "Functional Assessment of Behavior" as well as items for the "Resources" section.





requirements as they apply to individual students, especially students with more complex, significant disabilities whose behaviors present extreme challenges. Nevertheless, the general principles and strategies are widely applicable.

Many parents and advocates view the emphases on positive, supportive approaches as a revolutionary shift in the public policy approach to students with challenging behavior. Essentially the shift is one from control and suppression of behavior to support for learning new skills and adopting positive behaviors. The shift is based on the belief that all behavior is purposeful, and often has a communicative intent. From this perspective, it is possible to begin to understand the intent of undesirable behaviors, and to identify effective supportive strategies for changing behavior.

This Brief is organized into the following sections:

Positive Behavioral Support

First Steps, Strategies, and Monitoring Improvement.

Functional Assessment of Behavior

Strategies for how to examine and understand the purpose of the behavior.

Resources

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Part 1: Positive Behavioral Support

Have you ever heard the phrase, “Treat the symptom, ignore the disease”? Many people handle discipline that way. They try to eliminate disruptive or dangerous behavior without looking into why the behavior occurred.

Positive behavioral support is different—even revolutionary—because it is based on asking “Why?” Why does Pat never seem to sit in his seat at school? Why does Richard bang his head repeatedly? Why does Anastasia wander off?

Behavior usually happens for a reason. For example, an individual may use it seeking attention or self-stimulation. Behavior can be a form of communication—particularly for people with limited language capabilities—that may express frustration, anxiety, physical pain, other emotions, or needs.

When students throw objects in the classroom, they may be expressing a need for attention. Yelling may be their way to get out of an assigned task. Or they could be exhibiting challenging behavior because they feel excluded or overly controlled.

If you think about it, challenging behavior does work—to a certain degree. People do get more attention, higher levels of physical contact, or escape from work. But disruptive behavior (such as aggression) interferes with inclusion: It can endanger the person exhibiting it and others, upset staff, and contribute to a negative attitude toward people with disabilities.

Then get rid of the challenging behavior, right? Not so simple. One goal in positive behavioral support is not merely to “eliminate” but to understand the behavior’s purpose. The individual can then learn to substitute a more positive behavior that achieves the same function. People learn better ways to make their feelings and needs known.

First Steps

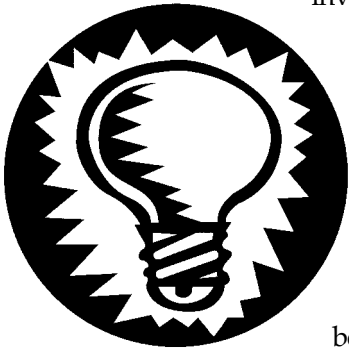
Just as in beginning any project, first obtain the necessary materials. In positive behavioral support, this involves making sure this approach is right for your family, gathering the people you need, having an idea of what you want, and finding out what purpose the challenging behavior serves.



Ensuring fit with your values. If you use this approach, you will have to be ready to forge ahead (rather than waiting for others to take the lead). You will also have to be prepared to custom-fit the plan to the person you are focusing on. This is not a “one size fits all” type of plan. And, instead of accepting whatever happens, you must be ready to actively solve problems, even anticipate them. This approach, too, focuses on rewarding good behavior, not punishing challenging behavior. Keep these values in mind when deciding whether this approach will work with your family.

Putting together a collaborative team.

You probably could do this approach by yourself. But the odds for success would not be in your favor. A better way is to



involve family, professionals, friends, and community members. Those sensitive to the culture, skills, routines, and values of the individual and family are ideal. Also, find those who can best work with the child. Rapport—the ability to “connect”—can often be the miracle ingredient in behavioral changes.

Creating a vision. This approach is not an overnight, silver bullet cure. It takes time and effort. A vision of the ideal life for the individual with challenging behavior will fuel and help guide the journey. Typically, this vision begins with shared great expectations and incorporates to the maximum extent possible that individual’s preferences for inclusive activities, relationships, and daily/weekly routines.

Completing a functional assessment. Challenging behaviors do not happen repeatedly without reason. Finding out “why” the behavior occurs is the key to positive behavioral support. Technically, the finding-out process is known as *functional assessment* and is a method of collecting and testing information. After you identify and clearly define the challenging behavior so that any one observing would know exactly what you are talking about, check to make sure you are on target about the probable purpose(s) of the behavior (for instance, to quit doing a difficult task). This can be done by someone who has knowledge of the person or by technical experts.

Strategies

Now, the next phase in this model of positive behavioral support begins: Strategies to encourage behavioral changes. These include (in no particular order):

Teaching new skills. Challenging behavior often occurs because the individual does not know a more appropriate way to achieve a result. Determine necessary skills, then work together to encourage their development. Just as importantly, decide whether people working with the person who has the behavioral challenge need to learn new skills. If so, they, too, need to start acquiring new skills.

The new skill may successfully replace the behavior right from the start or it may take longer. When a flare-up does occur, ignore the behavior problem (in cases of physical injury, it may be impossible and unethical to ignore behavior) and introduce known methods that promote good behavior.

Appreciating positive behavior. Gathering information for the functional assessment caused you to focus on the individual. During that time you should have learned what the person views as rewards. Using those rewards when the person exhibits targeted positive behavior reinforces the likelihood that those behaviors will happen again. At the same time you concentrate on rewarding targeted behavior, remember to recognize other appropriate behavior and work toward encouraging the individual to have a positive identity.

Altering environments. If something in the person’s environment influences the

challenging behavior, it is logical to organize the environment for success. When adjusting the environment, focus, too, on what happens between challenging behavior incidents as well as on what happens when challenging behaviors occur. Arranging what happens during the day, when it happens, and how it happens decreases the chance of challenging behavior. The goal of the positive behavioral support model presented here is not to avoid all places where challenging behavior might occur or simply to give in to all the individual's requests. Rather, the goal is to create a rich pattern of preferred activities and relationships that encourage desirable rather than undesirable behavior.

Changing systems. After working on the immediate environment, examine your system of services to see whether it is as responsive and personalized as possible. If not, do what you can to make it that way. Teachers can, for instance, request time for collaborative planning on behalf of the student with challenging behavior. A parent can explain positive support practices to school representatives. You may find that despite your efforts, the system is not changing directions or quickly enough for your family. In that situation, you may consider literally changing your system for another (e.g., changing schools).

Monitoring Improvement

As the support program develops, devise a recording system to find out what works and what doesn't. There will be fine tuning and changes along the way. If the initial plan is not working, take care to understand why it is not working. You can then use that

information to design a new approach for the plan.

For example, a person can get bored doing the *same* tasks with the *same* people for the *same* rewards at the *same* time of day. Creating variation may solve this problem. The second roadblock is that the people overseeing the positive behavioral support may get bored and less responsive to the person and his or her communication efforts. Taking a break and adding variety helps get past this roadblock.

In some situations, you may find that in spite of your best efforts, the behavior was not affected. Ask yourself whether you gave the plan enough time, or if you or others criticized the person exhibiting the behavior or pled with the person to behave well. Both tactics can actually increase the challenging behavior. Positive behavioral support also may not be effective in self-injury that gives the child sensory stimulation (e.g., children may poke their own eyes to make a visual effect), or is in response to not enough or too much stimulation. Self-injury or aggressive behaviors also can be initiated or set off by underlying psychiatric conditions, such as depression, obsessive-compulsive disorders, or other disorders. Some scientists have even suggested that some self-injury may represent a type of addictive behavior that gives a "high."



Crisis Anticipation

Also necessary from the start and throughout is a plan that anticipates dangerous situations. When someone has a behavioral challenge that results in property

destruction, self-harm, or physical injuries, you can't be caught unaware. Devise a detailed, word-by-word script for how to respond to dangerous situations and distribute it to everyone in contact with the individual. Not only will this foresight increase the plan's effectiveness, it will provide support persons with a security blanket.

End Results

Positive behavioral support draws from teaching, systems design, behavior

management, and social support to frame environments where people succeed and feel good about themselves. The results of this evolving approach support the independence, productivity, and inclusion of people with disabilities.

However, as one mom said, "Employing positive behavioral support is not like tightening a few nuts and bolts. It is about relationships as much as techniques. It always matters who does the intervention as much as what they do."

Strategies to encourage behavioral change:

Teach new skills. Sometimes challenging behaviors occur because students do not know more appropriate ways to express themselves or to get the results they want. By acquiring new skills, the individual can successfully replace the behavior. Staff may also need to learn new approaches and skills.

Appreciate positive behavior. Once you know what is rewarding to the person with challenging behaviors, use those rewards to recognize appropriate behaviors. Broaden the focus beyond the targeted behavior to reward other appropriate behavior. Help the individual shape a positive identity.

Alter environments. Organize environments for successful change by creating a rich pattern of preferred activities and relationships that encourage desirable behaviors.

Change systems. Parents and teachers have important roles to play in shaping systems to be responsive and personalized.

Monitor improvement. Devise a recording system to find out what works and what doesn't. If the plan is not working, find out why. Be sure to give the plan enough time to work. Be willing to design a new approach if necessary.

Anticipate crises. Devise a specific plan to respond to difficult situations and distribute the plan to everyone in contact with the individual. This foresight increases the plan's effectiveness and provides support persons with a security blanket.

Part 2: Functional Assessment of Behavior

The functional assessment is a foundation of behavioral support. It is not a medical diagnosis that comes with a prepackaged plan. Instead, the functional assessment’s results let caregivers design an environment that “works” for people with communication and behavioral challenges. In this model, the person with the challenges and those who best know the person collaborate with a person trained in behavioral analysis. Together, they plan how to meet the challenges of problem behavior.

Functional assessment methods look at the behavioral support needs of people who exhibit the full range of challenging behaviors, such as self-injury, hitting and biting, violent and aggressive attacks, property destruction, and disruptive behaviors (e.g., screaming or tantrums).

Those who exhibit challenging behaviors may be labeled as having a developmental disability, autism, mental retardation, mental illness, emotional or behavioral disorder, traumatic brain injury or may carry no formal diagnostic labels at all. These individuals vary greatly in their overall support needs and ability to communicate and participate in their own behavioral support.

Information about when, where, and why challenging behavior occurs builds effective, efficient behavioral support, because unplanned strategies can make behaviors worse. Also functional assessments are mandated by the Individuals with Disabilities Education Act for use by Individualized Education Plan (IEP) teams addressing

behavioral concerns. Many states, too, have laws or regulations stipulating the need for a functional assessment before permitting significant behavioral interventions. The observations may find out that behavior strategies aren’t necessary. Instead, the behaviors may have a medical cause. Allergies, infections, menstrual cycle effects, toothaches, chronic constipation and other medical conditions may bring on challenging behaviors. Medication also can influence behavior.

Generally, a functional assessment:

- Clearly describes the challenging behaviors, including behaviors that occur together;
- Identifies the events, times, and situations that predict when the challenging behaviors will and will not occur across the range of daily routines;
- Identifies the consequences that maintain the challenging behaviors (what the person “gets out” of the behaviors, e.g., attention, escape, preferred items);
- Develops one or more summary statements or hypotheses that describe specific behaviors, specific types of situations in which they occur, and the reinforcers that maintain the behaviors in that situation; and
- Collects directly observed data that support these summary statements.



A functional assessment can be done in many ways and at different precision levels depending on the behavior. A person who has observed undesirable behavior in

different situations and concluded that “she does that because...” or “he does that in order to. . .” has also developed a summary statement about the variable-influencing behavior.

A complete assessment allows confident prediction of the conditions in which the challenging behavior is likely to occur or not occur and when there is agreement about the consequences that perpetuate the challenging behavior.

Functional assessment methods usually fall into three general strategies:

1. Information gathering (interviews and rating scales).

This method involves talking to the individual and to those who know the individual best. It also consists of formal interviews, questionnaires, and rating scales to identify which events in an environment are linked to the specific problem behavior.

Questions to answer include:

- What challenging behaviors cause concern?
- What events or physical conditions occur before the behavior that increase the behavior’s predictability?
- What result appears to motivate or maintain the challenging behavior?
- What appropriate behaviors could produce the same result?
- What can be learned from previous behavioral support efforts about strategies that are ineffective, partially effective, or effective for only a short time?

2. Direct observation.

Teachers, direct support staff, and/or family members who already work or live with the person observe the person having challenging behaviors in natural conditions over an extended period. The observations must not interfere with normal daily environments. In most cases, observers record when a problem behavior occurs, what happened just before the behavior, what happened after, and their perception as to the function of the behavior. When an observer collects 10-15 instances of the behavior, he or she might discover where a pattern exists.

3. Functional analysis manipulations.

Taking the assessment one step further is the functional analysis. In this process, a behavior analyst systematically changes potential controlling factors (consequences, structural variables, i.e., task difficulty or length) to observe effects on a person’s behavior.

These determinations involve creating situations that will reduce, eliminate, or provoke the challenging behavior to test whether the hypothesis is correct. Functional analysis—expensive in time and energy—may be the only way, in some cases, to ensure an adequate assessment. It is the only approach that clearly demonstrates relations between environmental events and challenging behaviors. To support the functional assessment, also consider measuring activity patterns (the variety and degree of community integration and relationships).

Behavioral support must be conducted with the dignity of the person as a primary concern.

This portion of the *Information Brief* was reprinted from an article prepared by *The Family Connection* which was adapted with permission from O'Neil, R. E., Horner, R. H., Albin, R. W., Sprague, J. R., Storey, K., & Newton, N. S. (1997). *Functional assessment and program development for problem behavior. A practical handbook*. Pacific Grove, CA: Brooks/Cole.

The Family Connection, under the directorship of Rob Horner (University of Oregon), the Research and Training Center (RRTC) on Positive Behavioral Support, conducts research on the causes of challenging behaviors and strategies for support. It is a program funded by the National Institute on Disability and Rehabilitation Research of the U.S. Department of Education. The Beach Center on Families and Disability at the University of Kansas (3111 Haworth, University of Kansas, Lawrence, KS 66045, 785-864-7600) takes the researchers' work and gets it to families in as many ways as possible.

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This publication has been reviewed and approved by the U.S. Department of Education, Office of Special Education and Rehabilitative Services (OSERS). Funding for this publication was provided by the Office of Special Education Programs, OSERS, U.S. Department of Education, through grant #H029K50208.

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Resources

Demchak, M., & Bossed, K. Assessing problem behaviors. (1996). *Innovations*, 4. American Association on Mental Retardation, 444 N. Capitol St. NW, #846, Washington, DC 20001.

DeVault, G., Krug, C., & Fake, S. Why does Samantha act that way?: Positive behavioral support leads to successful inclusion. (1996, September). *Exceptional Parent*, 26, 43-47. (Prepared by Family Connection Staff).

Foster-Johnson, L., & Dunlap, G. (1993). Using Functional Assessment to Develop Effective, Individualized Interventions for Challenging Behaviors. *Teaching Exceptional Children*, 25, 44-50. To order, call 888-232-7733. Ask for JTEC253.

Guidelines: Effective behavioral support. Pennsylvania Dept. of Education: Bureau of Special Education. Free. Call 717-523-1155, x213 to order.

Koegel, L. K., Koegel, R. L., & Dunlap, G. (Eds.). (1996). *Positive Behavioral Support: Including people with difficult behavior in the community*. Baltimore: Brookes. \$37.95. Call 800-638-3775 to order.

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