An Optimistic Approach to Helping Students with Challenging Behaviors

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Outline

• Comprehensive intervention for challenging behavior
• The role of optimism in caregivers

How Do We Help This Child?

Why I don't yell at my son with Aspergers.wmv
Explanatory Framework

• How do we explain why some children become more challenging as they age?
• Positive, negative and automatic reinforcement processes – explain child behavior.
• Why do others (family members, teachers) behave in ways that can increase problems?

Explanatory Framework

• The “coercive family process” is the defining explanatory framework for problem behavior in children with conduct disorder (Patterson, 1982).
• It explains the nature of severe behavior problems and the family’s role in its development and maintenance.
Coercive Family Process

Explanatory Framework

- No similar model exists for these behaviors as observed in children with autism spectrum disorders.

Prevention Project

- Prospective longitudinal study
  - N=128
  - Age 3 to age 6

Developmental Progression

- Child Temperament
- Family Stress
- Child Skills
- Parenting Style
- Behavior Problem

Predicting Later Problems

- Not severity of disability
- Not severity of behavior problem

Predicting Later Problems

- Best Predictor?
- Parental pessimism
How you see yourself as a parent/teacher

Pessimistic Thoughts
- I cannot control this child.
- I have doubts about my ability to help this child improve his/her behavior.

Optimistic Thoughts
- I am usually able to handle problem situations.
- I am capable of helping this child improve.

How you think others see you as a parent/teacher

Pessimistic Thought
- When this child misbehaves, people see me as a bad parent/teacher.

Optimistic Thought
- I believe I am a good parent/teacher.

How you think others view this child

Pessimistic Thought
- I think that other people judge this child when he/she is misbehaving.

Optimistic Thought
- Most parents/teachers have times when their child/student misbehaves.
How you see the child’s ability control his/her behavior

Pessimistic Thoughts
• This child is not capable of behaving better.
• This child’s behavior is related to the disability.

Optimistic Thought
• This child is capable of behaving better.

How you view the problem situation

Pessimistic Thought
• All of these situations are always a major problem.

Optimistic Thought
• This particular incident was a problem.

How you view the future

Pessimistic Thought
• Things will never get better or will get worse.

Optimistic Thought
• Things can and will get better.
Who is responsible for a problem situation (Child)

Pessimistic Thought
• The child is doing this on purpose.

Optimistic Thought
• The child is not intentionally being disruptive.

Who is responsible for a problem situation (Others)

Pessimistic Thought
• If only others would follow my suggestions correctly, this child would be better behaved.

Optimistic Thought
• Everyone is doing their best under the circumstances.

Who is responsible for a problem situation (Self)

Pessimistic Thought
• It is my fault that things are going wrong.

Optimistic Thought
• I am doing the best that I can under the circumstances.
Who should be responsible for the problem situation

Pessimistic Thought
- Why am I always the one who has to be responsible for these situations?

Optimistic Thought
- Everyone is doing the best they can under the circumstances.

Attitudinal Influences

Explanatory Framework
- The “concession process” may help integrate a variety of observations about the development of challenging behaviors in ASD and how we react to them.
Child-Adult Interactions

Child Behavior
- Escalation

Adult Behavior
- Escalation (Coercion)
- De-Escalation (Concession)

Outcomes
- Child Abuse
- Intermittent Coercion
- Avoidance

The Concession Process

- The tendency to change environments and approaches to avoid problem behavior
Concession Examples


Rules

- Rule #1: Do not yawn. Especially no yawning and talking at the same time.
- Rule #2: Do not have loud background noise. That means TVs, radios, computers, vacuums, or hand mixers (can use, but need to alert him first).
- Rule #3: Do not sneeze and scream at the same time (some people do that without realizing it).

- Rule #4: Do not say “blah, blah, blah …” while speaking.
- Rule #5: I need to see all your old photographs when I visit.
- Rule #6: I also need to take a mental inventory of all your DVDs, and any VHS movies you may have.
- Rule #7: I rule the TV. I will block the other channels while I’m here, but will unblock them before I go.
Rules
- Rule #8: No loud unexpected laughter. Please.
- Rule #9: Unlimited baths are expected.
- Rule #10: Friday night is pizza night. It must be gluten-free.
- Rule #11: I need to touch you on the chin and the head every time you yawn, sneeze, or sing.

Rules
- Rule #12: Keep things orderly and predictable. Please. I need to know the schedule.
- Rule #13: No deviations in the schedule. Please.
- Rule #14: Absolutely do not change your mind or give me more options.
- There are so many other things I could add, so many that they don’t even seem odd to me anymore.

Evidence
- What experimental evidence exists for the concession process?
- Research with families and teachers
Positive Family/Teacher Intervention

- Can we make pessimistic families/teachers more optimistic?
- Integrating cognitive-behavioral intervention with positive behavioral support

Positive Teacher Intervention

- Research underway (with Dr. Elizabeth Steed – Georgia State University)
- Relies on Motivational Interviewing to improve optimism

Positive Teacher Intervention

- Teachers implemented significantly more strategies to teach children social skills and involved families in their child’s social emotional development.
- At the end of intervention, there were significantly fewer children with serious social emotional difficulties in teachers’ classrooms.
Positive Family Intervention

- Standard protocol
- 8 weeks
- 1 1/2 hours per individual session
- Standardized measures
Positive Family Intervention

- Session 1: Establishing Goals
- Session 2: Gathering Information
- Session 3: Analysis and Plan Design
- Session 4: Preventing Problems
- Session 5: Managing Consequences
- Session 6: Replacing Behavior
- Session 7: Putting Plan in Place
- Session 8: Monitoring Results

Positive Behavior Support

Assess the Function of Behaviors
Short-Term Prevention
Replace

Self-Talk Journal - Session 1

<table>
<thead>
<tr>
<th>Status</th>
<th>Routine</th>
<th>Comments</th>
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</tbody>
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### Self-Talk Journal

<table>
<thead>
<tr>
<th>Situation</th>
<th>Beliefs</th>
<th>Consequences</th>
</tr>
</thead>
<tbody>
<tr>
<td>When my son sat down for dinner, he started whining and crying. (difficulty)</td>
<td>I thought &quot;We will never have a normal dinner&quot; and felt defeated, thinking that meals will always be a problem.</td>
<td>I gave him cookies so he would stop crying.</td>
</tr>
</tbody>
</table>

### Session 2: Gathering Information

- To explore the relationship between thoughts and behavior
- To understand the purpose and goals of behavior
- To learn how to gather information through:
  - observing behavior
  - interviewing people
  - recording information
- To begin gathering information

### Situations & Beliefs

- Identify situations that provide triggers to negative thinking (e.g., What was exactly happening? Where were you? What did your child and others do?)
- Identify beliefs associated with the event (e.g., What were you feeling and thinking while this was going on? What did you say to yourself?)
Identifying Situations & Beliefs

Share a Difficulty

• Example - “She wouldn’t leave the TV to go to school.”
• What were you thinking?
• Pessimistic Scenario – “Here we go again.”
• Optimistic Scenario – “I knew this might happen and I have a plan to handle her if she tantrums.”

Share a Success

• Example - “My son sat through a whole meal without yelling.”
• What were you thinking?
• Pessimistic Scenario – “He must be in a good phase.”
• Optimistic Scenario – “My efforts and patience are beginning to pay off.”
Consequences
• Identify the consequences or results of the negative (and positive) thinking (e.g., When you were thinking _____, how did that affect what you did? What were the results of your actions – both immediate and long-term?)
Session 3: Analysis and Plan Design

- To use distraction to deal with unproductive self-talk
- To use information to analyze patterns
- To summarize patterns / generate hypotheses
- To use patterns to brainstorm intervention ideas

Distraction

- Strategy to help with pessimistic beliefs
- Distracting oneself from the pessimistic thoughts

CRNG Distraction Example
Session 4: Preventing Problems

- To understand the disputation process
- To discuss circumstances that increase the likelihood of behavior
- To learn strategies for avoiding difficult situations
- To learn strategies for improving difficult situations
- To learn ways to provide a child with choices
- To learn strategies for prompting good behavior

Disputation - A strategy for challenging beliefs

- Step 1: Identify the negative belief (e.g., What exactly do you say to yourself that is pessimistic?).
- Step 2: List evidence that supports the belief. (e.g., What makes you believe that to be true?)

Disputation

- Step 3: Find alternative explanations for the problem (e.g., Are there other possible reasons/motives?).
- Step 4: Evaluate the usefulness of maintaining the belief. (e.g., In what ways does that belief benefit you/ others or improve the situation?)
Disputing Negative Beliefs

Session 5: Managing Consequences

• To use affirmations to replace pessimistic beliefs
• To understand how reactions may maintain your child’s behavior
• To learn how to manage consequences
• To take precautions when using punishment

Substitution

• Replace the pessimistic ideas with positive thoughts or affirmations (e.g., “This is a difficult situation and I am handling it well. I am a committed, loving parent. If I can follow through with my plan, things will get better.”)
Substituting Positive Thoughts

Session 6: Replacing Behavior

- To practice cognitive restructuring
- To select replacement behaviors for your child
- To teach your child skills

Short-Term Prevention

- Modify the environment
  - reduce work
  - increase attention
- Personal intervention
  - mood induction
  - sleep treatment
Short-Term Prevention

- Dangers
  - Perception of treatment
  - Eliminates the crisis
  - Limited transferability
- Should be viewed as temporary

Session 7: Putting Plan in Place

- To review self-talk and apply cognitive strategies
- To design a behavior plan
- To make sure the behavior plan fits
- To improve your child and family’s lives
- To create an action plan

Session 8: Monitoring Results

- To review self-talk and continue to apply cognitive strategies
- To make a monitoring plan
- To learn how to make adjustments over time
- To complete the training and continue on your own
### The Role of Optimism in Caregivers

#### Child Outcomes

- A two-way repeated measures ANOVA on the SIB-R GMI scores - significant differences between pre and post treatment.
- PBS - (Cohen's $d = 1.25$)
- PFI - (Cohen's $d = 2.20$)
- PFI Versus PBS Post Treatment (Cohen's $d = 0.94$)

Effect Sizes - small, $d = 0.2$, medium, $d = 0.5$, and large, $d = 0.8$

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#### Standardized Behavior Change Data

<table>
<thead>
<tr>
<th>SIB-R GMI (N=34)</th>
<th>Pre</th>
<th>Post</th>
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<tbody>
<tr>
<td>SIB-R General Maladaptive Behavior Index</td>
<td></td>
<td></td>
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<tr>
<td>Serious</td>
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<td>Moderately Serious</td>
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<td>Marginally Serious</td>
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<tr>
<td>Normal</td>
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Quality of Life

- Families from both groups reported significant improvements on following questions:
  - Other members of the family have to do without things because of my child.
  - Sometimes I feel very embarrassed because of my child.
  - My child is able to take part in games or sports.

Quality of Life

- Mothers in PFI condition reported improvement on these questions:
  - My child will be limited in the kind of work he/she can do to make a living.
  - I get almost too tired to enjoy myself.
  - There is a lot of anger and resentment in our family.
  - I am worried much of the time.
Self-Efficacy

- PFI group responded more positively than mothers in the PBS groups.
  - I feel less tense when I take my child out in public.
  - I am less likely to avoid taking my child out in public.
  - Members of our family get to do the same kinds of things other families do.

Child Behavior Change Data
One Year Follow-Up

Child Behavior - Standardized Data (N=10)
Parent Fidelity Data
Post Intervention and One Year Follow-Up
One Year Follow-Up - Group Parent Data

Pre-Intervention

Follow-Up PBS
Summary of Results

- Both PBS and PFI result in significant improvements in child behavior
- These improvements continue after one year
- Parents report overall improvements on QoL
Summary of Results

- PBS families tend to use avoidance strategies to improve child behavior
- PFI families tend to use more active strategies
- PFI families report more community involvement with their children and less anxiety

The Concession Process

- The tendency to change environments and approaches to avoid problem behavior

Positive Family/Teacher Intervention

- Addresses the needs of children with challenging behavior
- Addresses the need of family members and teachers who carry out the plans
- Better outcomes when we address both
- Improved family/school partnerships
How Effective Are We?

• Are our interventions only successful with highly motivated families/professionals?
• We need to begin to design our strategies to reach those families/teachers who need our help the most.

Optimistic Parenting
