

Challenging Behaviour

Over the years I have seen many children who were never aggressive become aggressive. This often seems common at around age 8 or puberty. Parents and Educators alike find this change in behaviour very distressing, and often need to turn to more comprehensive behaviour books to help find solutions.

Recently I have read two books that are full of great information to consider if you are have challenging behaviour and your traditional strategies are not working. According to John Clements, author of *People with Autism Behaving Badly*, sudden behaviour change tends to fall into four categories:

1. Medical problems: This can include seizures, headaches, sinus pain, allergies or gastrointestinal difficulties (I have seen this with constipation with a number of students over the years). He also mentioned mental health issues in this section. (See pg 25, 26 for more in depth information).
2. Trauma. This can include bullying, teasing, car accident, abuse, etc. (See pg 27 for more info)
3. Changes in Physical Environment This can include something that may seem small such as painting their room, moving furniture or change in lighting.
4. Changes in Social Environment: Loss or grief. Please note John Clements discusses this can be a delayed response up to six months after the loss of someone close. (I have seen this when parents separate too, where the behavioural change start months after the separation.)

The book includes some great strategies to respond to escalation from reflection (acknowledge their upset), problem solving (find out the reason), distraction (shift attention), calming (reduce arousal), positive redirection (assertive engaging), and authoritarian control. (See pg 36, 37 for more information about the strategies).

Once the incidents are underway there are a number of options from do nothing, clear the area, move the person, call for support, blocking and holding. (See pg 38).

After reading the book *People with Autism Behaving Badly* here is an example of a plan for a student which has been very effective:

- Sometimes behaviour is about getting a response – so stop responding!
- If X is hitting glass say “X hitting the glass is dangerous. The glass may break and you will get hurt. Put your hands on yourself.”
- X needs to know he is loved/liked. He needs to know we are not abandoning him and that we are here to support him through this difficult time.

- Once X appears to be calming from an incident do NOT talk to him, do not give him praise for calming as this pushes him back into aggressive mode. Stay quiet and carry on with what you were asking him to do. MUCH later you can tell him you are pleased he made a good choice about his behaviour.
- When X is calm and in a happy mood, encourage social interactions with everyone – siblings, peers, other adults. X may be experiencing a lack of social connectedness due to his behaviour and this can in turn be escalating the behaviour.
- Use authoritarian control and have this backed up by a second adult if needed. Be confident – if you aren’t then he will detect this and play on it. Use a strong voice and staunch body language. Tell him WHAT to do. Say “X stop that right now. X your bad behaviour will not be tolerated. X sit down (or walk away).”

The Debate on Restraint

Often at my workshops when I mention my concerns about restraining children, educators and parents approach me concerned they have been advised to restrain/hold a student during a meltdown. The worries I have about this approach are:

- Restraining a person in a meltdown typically escalates their aggression rather than subdue it.
- Adults can be hurt as most children have lost cognitive functioning and can be very strong in the final stage of a meltdown.
- Older children often seek the “physical restraint/holding” or become violent as that is what they have experienced in the past.
- Legally children on the spectrum have the same “human rights” and we need to be very careful not to break their rights.

I am particularly thrilled the new book *Autism Spectrum Disorder and De-Escalation Strategies* addresses my concerns and provides physical interventions as a last resort, within a legal framework. I highly recommend you read this book if you are wanting more advice on physical intervention and legalities as well as some great positive behaviour interventions.

“De-escalation is more often than not subtle, good child management. When staff de-escalate well, it is almost like the child doesn’t realise it”

(Pg 26 of ASD and De-Escalation Strategies)

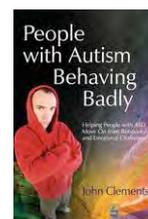
Fantastic Books to Support Challenging Behaviour

People with Autism Behaving Badly

By John Clements

Offers effective, long-term strategies to help resolve common problem behaviours such as physical aggression, self-injury, verbal abuse, rudeness and property damage. Organised around the common messages conveyed by behaviours and some of the underlying issues that drive these messages.

CODE B60 \$35 (incl P & H)



Autism Spectrum Disorder and De-Escalation Strategies

By Steve Brown

Discussing a variety of de-escalation and behaviour management strategies, this book offers practical guidance on using non-physical and physical interventions to support children (aged 3-18) on the autism spectrum or with emotional, social and behavioural difficulties, and to keep them and others safe.

CODE B136 \$35 (incl P & H)



Challenging behaviour is most often exhibited by people with developmental disabilities, dementia, psychosis and by children, although such behaviours can be displayed by any person. Contents. 1 Types of challenging behaviour. 2 Causes of challenging behaviour. 3 Behaviour response cycle. 4 See also. 5 Notes. 6 External links. Causes of challenging behaviour. Challenging behaviour may be caused by a number of factors, including biological (pain, medication, the need for sensory stimulation), social