

# Behavioral Treatments for Challenging Behavior in Individuals with Autism Spectrum Disorder

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# Disclosures

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- NIH: R21 MH108873 *Behavioral Economic Measures of Sensitivity to Social Reward in Children with ASD*
- DoD AR160059 - “A Multidisciplinary Intervention for Encopresis in Children with ASD”
- NIH R01 MH104363 *Comparing Behavioral Assessments Using Telehealth for Children with Autism*
- NIH R21 MH104363 *Objective Measurement of Aggression and Self-Injury in Children with ASD*
- NIH: R03 082436 *A Feasibility Study of the Elopement Prevention and Safety Training Program*

# Understanding Aggression

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# Behavioral Approaches to Aggressive Behavior

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- There is a long history of behavioral interventions for aggressive behavior
- Historically, these have shown the potential for success, but inconsistently

# Functional Approaches

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- Inconsistent success is usually due to the strategy not taking function into account
- Function = the purpose the behavior serves for the individual: *“what do they gain or escape from as a result”*

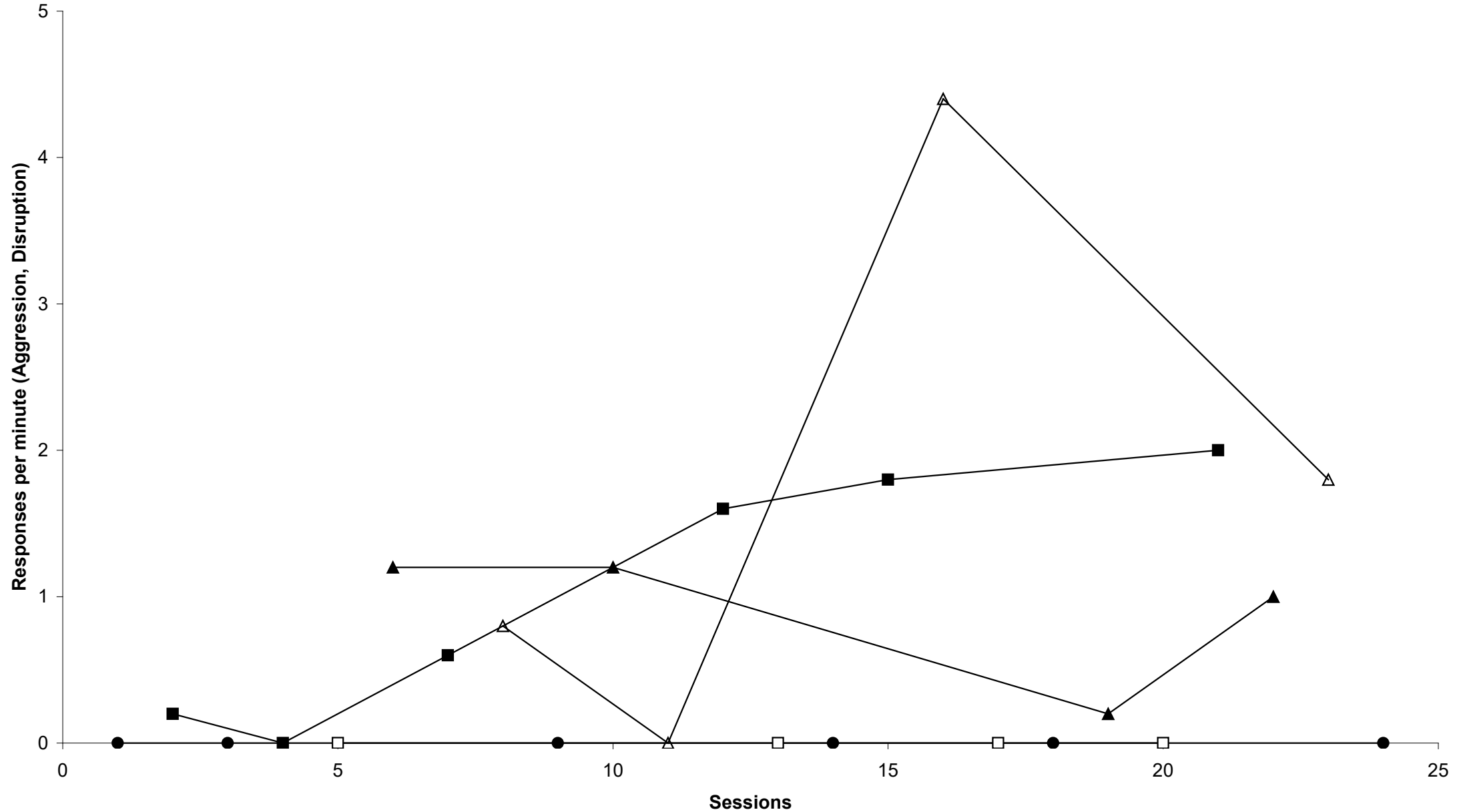
# Identifying the Function of aggressive Behavior

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Gold standard is a **Functional Analysis**

- Direct manipulation of the environment in “analog” test and control conditions
- Sometimes compared to a “behavioral allergy test”

# An Example of a Functional Analysis



# Interventions

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# Four Approaches to Addressing Aggressive Behavior

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- 1. Prevention:** steps taken to avoid the occurrence of aggressive behavior
- 2. Behavioral Intervention:** a set of procedures that will decrease (over time) the frequency of aggressive behavior

# Four Approaches to Addressing Aggressive Behavior

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3. **Behavior Management**: a strategy that will decrease the impact/effects of aggressive behavior on the individual, caregivers, or the environment (but not the frequency/probability)

4. **Crisis Management**: doing whatever is necessary to minimize harm to individuals and/or the environment

– aggressive behavior will not likely decrease and could even increase

# Over Reliance on Prevention

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Both of these are reasonable points of view, and caregivers have the right to choose where they fall on the continuum

The problem comes when a caregiver chooses one position on the continuum but expects a different result

# 1 Step Backwards → 2 Steps Forward

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Interventions will frequently require decreasing expectations in other areas while aggressive behavior is addressed

- Academics
- Compliance with tasks
- Communication
- Schedule of reinforcement

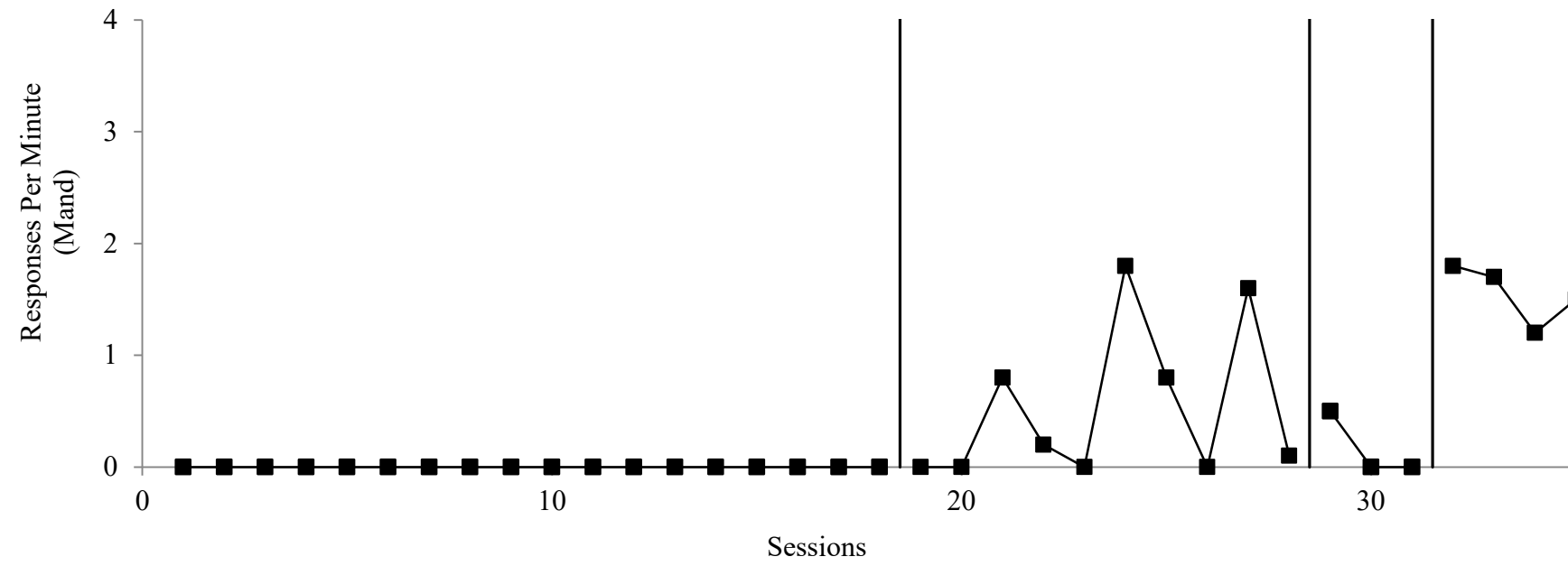
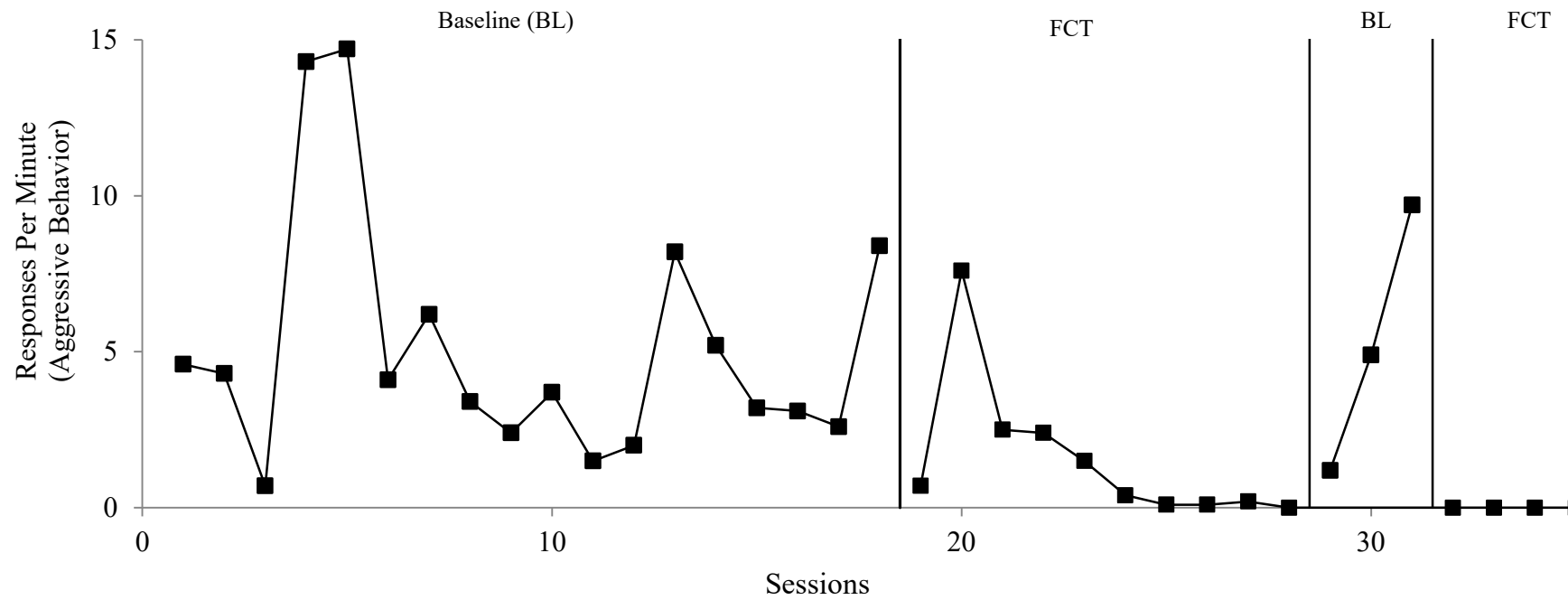
Some may object to decreasing expectations (sometimes out of a sense of “justice” or differing priorities)

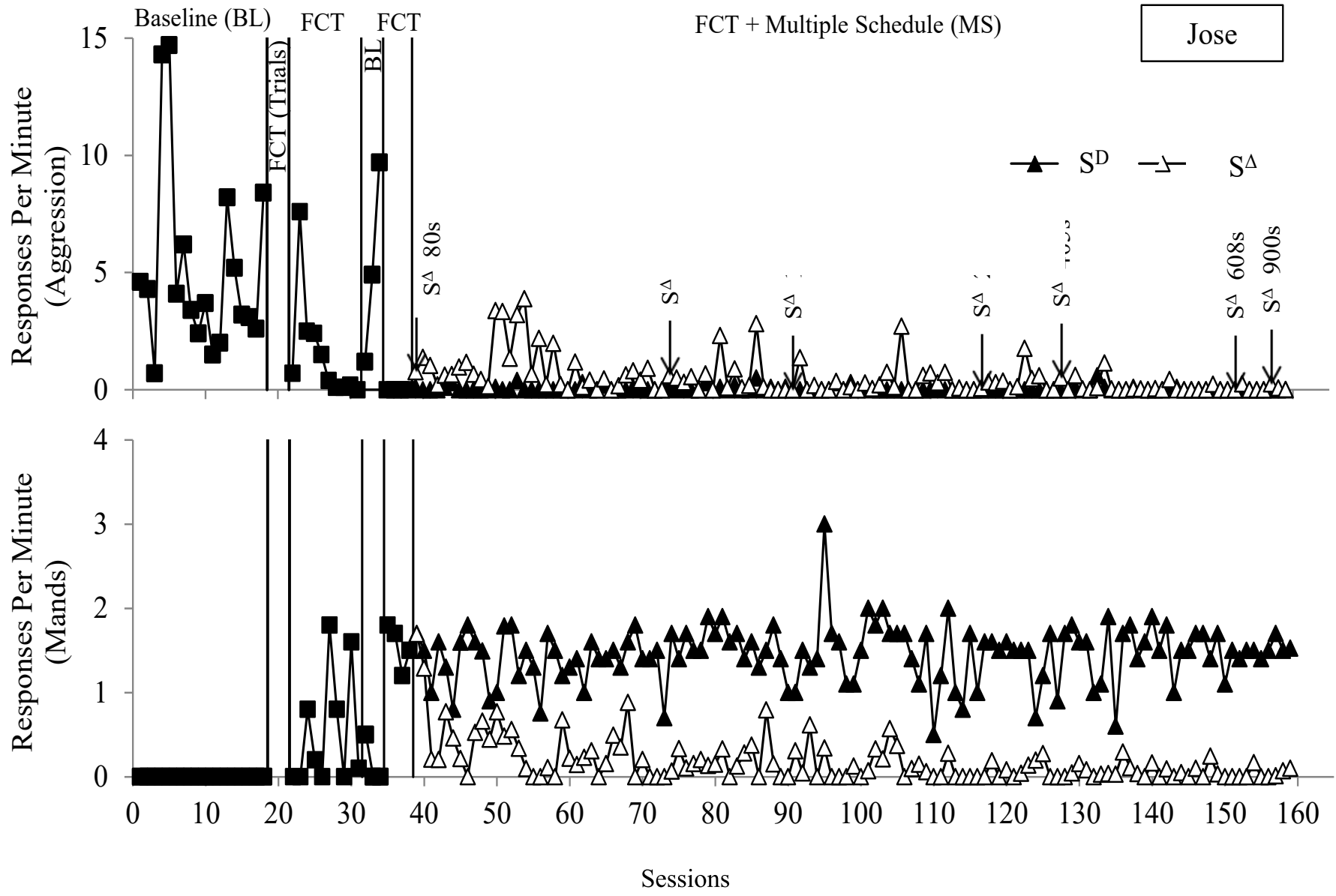
- Typically, performance in these areas is already poor and inconsistent
- Decreasing expectations so that structure can be added allows for eventually exceeding current levels of performance

# Common Components of Behavioral Interventions

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1. **Extinction**: disrupt relationship between aggressive behavior and the functional reinforcer
2. Reinforce an **alternative behavior** that serves the same function
3. Increasing **social validity**





# Behavioral Interventions for Aggressive Behavior

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- Based on the individual learning
  - Learning that aggressive behavior is no longer “functional”
  - Learning alternative means of producing the same outcome
- Implications of learning-based interventions
  1. Behavioral interventions take time
  2. They must be implemented in the natural environment by caregivers
  3. As circumstances change or the individual develops, the behavior may re-emerge from time to time



# Behavioral Interventions Take Time

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- How much time? Unfortunately, there's no simple answer
- What can you can do increase the chances that it will work as rapidly as possible?

## Vigilance & Consistency

- Inconsistency can actually be worse than nothing (intermittent schedule)
  - Better to not start than to start and not follow through

# Caregiver Implementation

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- Aggressive behavior can be context specific
  - Occurs in one situation or with specific people
- To produce improvements at home, treatments have to be generalized to home and with caregivers
- Who can help me?
  - Board Certified Behavior Analysts (BCBAs) receive training in behavioral interventions
    - Not all will have substantial experience with the kinds of assessments or procedures to address aggressive behavior, especially more severe forms
    - Ask about specific experience working with individuals like your child

# Practice Sessions

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- Give yourself opportunities to practice the skills in a low-pressure situation where you can...
  - plan ahead
  - be systematic
  - leave suddenly without too much inconvenience or embarrassment
  - control as much as possible about the situation
  - follow-through on behavior management strategies
  - end on a good note

# Practice Sessions

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Times when you should **not** implement a new strategy for the first time

- You make a trip to the grocery store because the family has no food in the fridge
- You are on the phone with the bank and you've waited 20 minutes to talk to a real person
- The family is going out to eat for a family member's birthday
- You are in a rush to get the kids out the door for school and you are already late

# Practice Sessions

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## Good times to practice a new strategy for the first time

- You take a trip to the grocery store when you don't really have to buy anything
- You make arrangements with a friend to have her give you a phone call but you tell her ahead of time you may hang up suddenly
- The family goes out to eat with the specific goal of using that time to practice
- You are not in a hurry to go anywhere and you've got some spare time to practice

# Practice Sessions

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- Keep realistic expectations
- Limit problematic factors that are not crucial to the experience
  - E.g., if your child sometimes has a hard time waiting, but you aren't specifically working on waiting, make modifications to limit waiting
- Follow through on use of the behavior management strategy
- Use a function-based behavior management strategy
- Have an exit plan
- Always end on a good note, don't push your luck!

# Practice Sessions (Example): Going out to Eat

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- Define success ahead of time
- Go early, maybe 4:00 (no waiting)
- Go to a Mexican or Italian restaurant (food on the table when you sit down, i.e., less waiting)
- Tell your server what you are doing, and that you may leave suddenly, maybe even ask them to run your credit card early if possible
- Only address significant aggressive behaviors (keep realistic expectations)
- Ignore or block less serious aggressive behaviors or those that you are not specifically targeting
- Stick to your rules: Follow-through
- Use a function based-strategy
- Don't push your luck. It is tempting to overstay (end on a good note)

# Behavior Management Strategies

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- Example: Elopement
  - Establish an elopement emergency plan
  - Post emergency contact numbers in an easy to reach location
  - Learn local laws/policies about emergency response
  - Identify those willing to help search in the event elopement occurs
  - Teach key safety skills (e.g., giving safety information, ability to swim)
  - Use technology that can help retrieve a missing child rapidly



# Using Protective Equipment

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This is an extreme example, but shows what is possible



# More Common Protective Equipment

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Allows one to use  
work with an  
aggressive patient  
without injury



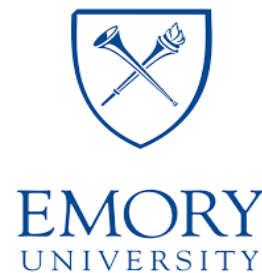
# Crisis-Management

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- Doing whatever it takes to end a crisis as quickly as possible
  - Generally countertherapeutic from a behavioral intervention standpoint (i.e., over the long term, de-escalation is likely to reinforce the aggressive behavior)
- For this reason, a situation should only be considered crisis the first time it occurs
  - Thereafter, you should have a plan for how you will address it without needing to use de-escalation

# Take Home Points

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- Aggressive behavior is usually **orderly**, even if it seems random
- Reducing aggressive behavior depends on addressing the cause, which for most kids involves knowing what consequences are maintaining it (i.e., it's **function**).
- **Caregiver behavior** has to change in order to change child behavior
- Making those changes is often hard, so **plan ahead** and get help from someone **with experience**

# Thanks for Your Attention

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