

## **Tutorial: Teaching Positive Communication Alternatives To Negative Behavior** (See also Tutorials on **Behavior Management: Prevention Strategies**; **Behavior Management: Contingency Management**; **Positive Behavior Supports**.)

### **WHAT ARE POSITIVE COMMUNICATION ALTERNATIVES TO NEGATIVE BEHAVIOR?**

All behaviors potentially communicate something to someone. Communication does not require words. For example, smiles and hugs can communicate positive messages of approval and fondness. Frowns and threatening gestures communicate negative messages. Nonverbal behavior may or may not carry an intended message. For example, when one person continues to sit silently when another enters a room, the message communicated might be lack of interest even though there was no intent to send that message.

Often students with behavior problems communicate (intentionally or not) their desires and needs with negative behaviors. These behaviors may include physical aggression, running out of the room, using threatening language, and the like. Sometimes a behavior may begin as other than intentionally communicative (e.g., a student covers his ears when a loud noise is present). However if the behavior has a positive effect (e.g., somebody eliminates the loud noise), then the behavior (hands over ears) may become part of that student's communication repertoire. In this way, aggressive behavior, for example, may become a way of communicating a desire to escape a difficult task. That is, if the aggressive act leads to removal from the task, then aggression may come to communicate, "Remove me from this task!"

Because most negative behaviors communicate in this sense, it is a mistake to call them maladaptive behaviors. Aggression, withdrawal, or self-injury may be quite adaptive in that they successfully communicate what the student wishes to communicate – and achieve the student's (conscious or unconscious) goals of communication. For example, if hitting or screaming results in removal from math class – and removal is what the student wants – then hitting must be seen as successful and adaptive for that student.

One of the procedures used to eliminate or reduce such negative behavior is to teach an alternative behavior that communicates the same message, but is a positive form of communication. For example, if a student screams or hits to communicate a need to escape a difficult task, a positive alternative would be a polite request for a break. Most negative behaviors communicate a desire to escape (e.g., escape a person, place, activity, or demand) or to acquire or gain access (e.g., gain access to a person, place, activity, thing, attention, or approval). More complex messages may also be communicated with negative behavior. For example, an aggressive behavior may mean, "I interpret what you have done or said to me as disrespectful and I will not tolerate disrespect."

### **WHY ARE POSITIVE COMMUNICATION ALTERNATIVES TO NEGATIVE BEHAVIOR IMPORTANT FOR MANY STUDENTS WITH TBI??**

Effective management of behavior is important for all children, especially in a school context, because compliance and orderly behaviors are critical in creating an effective learning environment. Following severe TBI, students may experience an extended period of time in which usual behavioral expectations have been suspended. For example, in a hospital or rehabilitation setting – or even after return to school – disruptive or resistive behaviors may be tolerated more than in a typical school setting. The student may become accustomed to short work sessions and to controlling activities more than is generally allowed in school. More specifically, the student may be inadvertently trained to use negative behavior to communicate basic intentions, such as a need to escape an activity or a desire to acquire something. For example, screaming may have the effect of ending a stressful physical therapy session in the hospital or in school. For these reasons, a consistent and well implemented behavior management system, possibly including the teaching of positive communication alternatives to negative behavior, may be particularly important for the student with TBI in the school setting.

Well implemented behavior management systems are additionally important because behavioral difficulties are a common consequence of brain injury. Among the most common concerns after TBI are difficulties with impulsiveness and risk taking. This is particularly true of students who are injured at a young age and who subsequently fail to mature adequately in the areas of impulse control and safety judgment. Students with damage to the bottom parts of their frontal lobes typically think and act impulsively – much like young children or children who experienced their TBI early in life. They often present with increasing challenges in this domain as they age. Their impulsive behavior naturally leads parents and teachers to worry about effective disciplinary practices. (See Tutorial on [Discipline.](#))

### **WHAT ARE THE MAIN THEMES IN TEACHING POSITIVE COMMUNICATION ALTERNATIVES TO NEGATIVE BEHAVIOR?**

Three important themes dominate the teaching of positive communication alternatives to negative behavior. First, careful assessment is required to identify the meaning (i.e., function) of the student's negative behavior. Second, most of the student's everyday communication partners, including staff at school and parents at home, need to be involved in the planning and implementation of the intervention. The student is unlikely to switch from negative behavior to a positive communication alternative unless the positive alternative is reasonably effective across many contexts of his life. If not well oriented to the plan, communication partners may unintentionally trigger negative behavior with inappropriate demands or interaction (on the antecedent side) or unintentionally reinforce negative behavior with ill-advised responses, like removing a disruptive child from an undesirable task (on the consequence side). Third, communication partners in the student's life need to commit themselves to both phases of the intervention plan, described below.

**Functional Behavior Assessment:** Systematic assessment is required to identify the meaning (function) of the negative behavior. This involves both systematic observation (i.e., what are the stimuli (antecedents) and responses (consequences) that are associated with the undesirable behavior in varied everyday contexts?) and active experimentation with hypotheses regarding the meaning or function of the negative behavior. For example, if communication partners routinely reward polite verbal requests for a desirable activity, does the challenging behavior disappear? If so, the meaning or function of the negative behavior was probably: "I want that activity!"

**Pre-Teaching Decisions:** Before the teaching process begins, staff and parents must collaboratively make two important decisions. First, if the function of the negative behavior is to access something desirable or escape something undesirable, they must decide when escape and/or access are acceptable. For example, if the goal of intervention is to substitute "I need a break" for hitting as the person's way of communicating the need to escape a task, then communication partners must agree on what tasks can be escaped (at least temporarily) and what tasks cannot be escaped. Similarly, if the goal is to substitute the sign for "want" as a substitute for grabbing desired objects or foods, then communication partners must agree on the objects and foods that can be legitimately accessed. Battles must be chosen wisely. It is important to avoid control battles, particularly those that communication partners are unlikely to win. The worst situation is one in which the adult refuses to honor the positive communication alternative followed by the student resorting to the negative behavior which then is ultimately rewarded.

Second, staff and parents (and possibly the student) must collaboratively select a positive communication alternative to the negative behavior. The communication alternative should have the following characteristics:

- *Easy to produce:* If the alternative is harder for the student to produce than the negative behavior it is intended to replace, it is unlikely to be adopted.
- *Satisfying:* The positive communication alternative should fit the student's personality and communication milieu. For example, excessively polite verbal requests may not be acceptable to tough adolescents with a history of behavior problems.
- *Effective:* The alternative must be at least as effective for the student as the negative behavior it is replacing.

- *Promptable*: There is sometimes an advantage to selecting physically promptable communication alternatives (e.g., signing, gesturing, pointing to a picture on a board) versus those that are not physically promptable (e.g., talking) in the initial stages of teaching.
- *Interpretable*: The communication alternative must be interpretable by all relevant communication partners.

### **TEACHING PHASE 1: TEACHING THE POSITIVE COMMUNICATION ALTERNATIVE**

Staff and parents should collaboratively ensure many successful positive communication routines daily in a variety of communication contexts. Opportunities for the positive communication alternative can be both naturally occurring and contrived by communication partners. The initial goal should be a high ratio of positive communication alternatives to challenging behavior (say, 10:1), using prompts and other supports as necessary. Prompts and other supports should then be gradually reduced as it becomes possible to do so. The goal is to create communication routines that will be automatically accessed by the student when needed.

As always, good judgment is required. For example, it is not always necessary for staff and parents to honor “I need a break” if that is to be the alternative to aggression for escaping a task. There are times when staff or parents might say, “C’mon, we can get through this; I’ll help.” The point of the training is to create a habit of using positive communication as an alternative to negative behavior as a means of communicating a need or desire.

### **TEACHING PHASE 2: SYSTEMATICALLY RE-INSTATE NORMAL EXPECTATIONS FOR WORK AND COMPLIANCE**

When the positive communication alternative has largely replaced the negative behavior, normal demands for work and compliance should then be gradually re-instated. The student may have grown comfortable with his ability to escape (temporarily) undesirable tasks with the positive communication alternative. In this case, the entire repertoire of behavioral procedures listed in the tutorial on Positive Behavior Supports may be needed as staff and parents attempt to re-instate normal expectations for work and compliance. For example, communication partners may need to pay special attention to building positive behavioral momentum before introducing a difficult or stressful task that the student would otherwise reject. If procedures of this sort are not used, the student may resort to the negative behavior that was once successful in enabling him to escape a difficult task.

### **OBSTACLES TO TEACHING COMMUNICATION ALTERNATIVES**

**1. Staff and family member insularity:** The success of this teaching depends on all or most everyday communication partners being on the same page. To achieve this goal, staff should try to include all relevant adults in the student’s school and home environments in the initial functional assessment. Furthermore, the intervention plan should be negotiated so that all relevant communication partners agree that it is reasonable and do-able.

**2. Concern about contributing to the behavior problem:** Many staff and family members express concern that rewarding positive escape behavior (e.g., saying “I need a break”) or access-motivated behavior will turn the student into an “escape monster” or an “access monster”. This concern should be addressed by pointing out that research and experience both show that this natural fear is unfounded if both phases of the teaching are implemented correctly. Behavior and communication specialists should emphasize that normal demands will be reintroduced once the negative behavior is substantially eliminated.

**3. Concern that some activities are mandatory, others forbidden:** Clearly there are some things and activities that cannot be escaped (e.g., taking medication) and some things and activities that cannot be

accessed. Communication partners should try to achieve agreement about those few activities that are mandatory (e.g., taking medication, going to school) and those that are forbidden (e.g., harming others, interacting with dangerous materials, placing oneself at risk). In addition, staff and parents may need to be reminded that improving behavior and communication in students with significant behavior problems is a high priority.

**4. No choice times heavily outweigh choice times:** Communication partners may find that “no choice times” occur more frequently than choice times, so the student has insufficient practice in producing positive communication alternatives that are rewarded. In this case, communication partners should create, artificially if necessary, a large number of choice occasions so that the student has many opportunities to practice and be rewarded for the positive communication alternative.

**5. Behavior management is somebody else's job:** Occasionally one encounters staff who believe that behavior problems should be dealt with by behavior specialists and not by all everyday communication partners. In this case, the intervention team should ensure that all relevant communication partners are involved in identifying the need for behavior change, in implementing the functional analysis of behavior, and in modifying everyday routines of communication so that the individual has many opportunities to practice positive communication alternatives.

**6. Difficulty with timing:** Whoever is responsible for coordinating the team should ensure that all communication partners know that they must respond to the positive communication alternative promptly - knowing that if they wait, the student is likely to revert to the negative behavior, and then will likely be unintentionally rewarded for that negative behavior.

Written by Mark Ylvisaker, Ph.D. with the assistance of Mary Hibbard, Ph.D. and Timothy Feeney, Ph.D.