

Module 2: The ABCs of Challenging Behaviours

Welcome and Module Overview

This summary reviews the key points discussed in Module 2. In this module you were introduced to two new families who talked about their own experiences caring for people with traumatic brain injury. You learned what a Positive Behavioural Support Plan is and how to look at what happens both before and after the challenging behaviour to see what triggers it or keeps it going. You also learned about types of consequences of the behaviour: rewards and punishments.

Topics covered in this summary?

Here is a list of the topics we will cover in this Summary. Tick these off as you go:

1. Jenny's Story: Tran
 - a. Poor drive and motivation after brain injury
2. Ahmed's Story: Helima
 - a. Acting without thinking after brain injury
3. The Positive Behaviour Support Plan
4. Defining Challenging Behaviours
 - a. who, what, where, why, when?
 - b. Is the behaviour normal for the situation?
5. What happens before the behaviour: Antecedents
 - a. Preventing Behaviours: Changing Antecedents
6. What happens after the behaviour: Consequences
 - a. Stopping Behaviours: Dealing with Consequences
7. What not to do!
8. Your Checklist
9. Summary

1. Jenny's Story: Tran

Tran is a 49 year-old man who got his brain injury when he fell from some scaffolding in a workplace accident. Tran has significant difficulty with motivation and drive. He often says he wants to do things, but then doesn't get up and do them. This is very frustrating for his wife Jenny, who is his

carer. Below is a list of challenging behaviours that Tran shows as well as some others. Tick the boxes of the ones that your family member has difficulties with:

- Saying he wants to do something, but doesn't do it
- Spending a lot of time sitting
- Complaining of boredom
- Not following through with plans
- Loss of interest in activities he used to find interesting
- Reduced emotional response

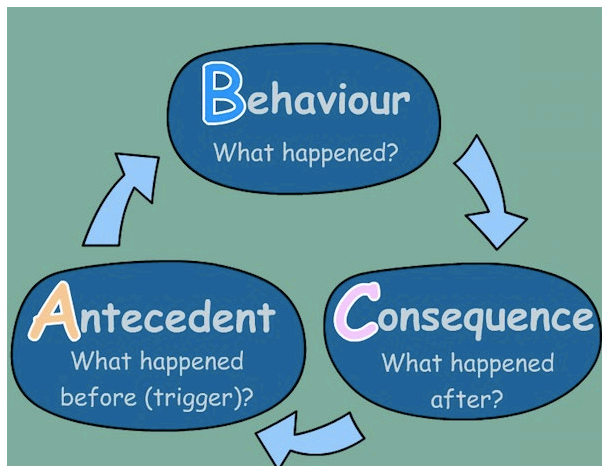
2. Ahmed's Story: Helima

Helima is a 35 year-old woman who lives with her husband and three small children. She had her brain injury when she was struck by a car when crossing the road near her home. Helima's mother has also come to live with the family to help Ahmed take care of her and the children. Below is a list of challenging behaviours that Helima shows. More have been added. Please tick the boxes of the challenging behaviours that your family member has difficulties with:

- Personality changes
- Saying or doing things without thinking about the consequences
- Increased spending
- Behaving in unsafe or dangerous ways
- Overreacting or saying hurtful things when angry

3. The Positive Behaviour Support Plan

A positive behaviour support plan is a comprehensive and collaborative document that describes the detailed approach to supporting a person with challenging behaviours arising from a brain injury. In order to develop an effective Positive Behaviour Support Plan we need to understand the **behaviours** (B), what happens before them, or the **antecedents** (A) and what happens after the behaviours, or the **consequences** (C). Hence, the ABC model!



The Positive Behaviour Support Plan can be a lengthy process – it needs to be individualized to the person with brain injury and it often takes a “trial and error” approach. It’s also important to think about the *goals* of the family member with brain injury as well as the *environment* in which the behaviours are happening.

All of the strategies involved rely on basic foundations of respect for the person involved - we may dislike a certain behaviour but will maintain respect for the person, and look for positive ways to encourage appropriate behaviour instead of using punishment or coercion:

- Develop a positive rapport
- Establish consistent routines
- Remain calm and respond positively during a behaviour
- Involve the person in discussing behaviour issues.

The things we need to consider when developing an individualized Positive Behaviours Support Plan are:

Set achievable goals

Take a look at the person’s life and identify opportunities to increase and improve participation in activities and roles that they enjoy and find meaningful. It’s also important to help the person develop the skills they will need to do this. Rebuilding a person’s independence by engaging in activities and social roles is one of the most effective ways to support positive behaviour change.

Make sure we send clear, consistent messages

We want to make sure that we are sending clear and consistent messages to the person with the brain injury. They need to know what is going to happen if the challenging behaviour occurs and equally what will happen by not acting that way. It is very important that ALL family members (and close friends) are on board with the plan.

Develop structure, routine and predictability around the behaviour

This allows the person to be prepared for what is coming next. We want to avoid any sudden changes or surprises as this can be overwhelming and distressing for the person. For example, having most activities such as meals, getting ready or showering around the same time each day.

4. Defining Challenging Behaviours

Who, what, where, why and when?

It's important to gather as much information about a challenging behaviour as you can, so that you can best understand and support the person to change. You can ask the following questions to help you understand:

- Who
- What
- Where
- Why
- When

Let's work through an example from a challenging behaviour that John does: yelling at his brothers

Who: John to his brothers

What: John yells repeatedly in a very loud voice to his brothers to stop playing football in the backyard

Where: John is inside watching TV in the lounge room and his brothers are outside in the backyard

Why: John says he can't hear his TV program when they are playing

When: In the afternoon when the TV program he wants to watch is on.

It's important to remember that behaviours (whether challenging or not) are a form of communication. So, if we know what the person is trying to communicate (why is the behaviour happening), we have a better chance of influencing how it happens or whether it happens again.

Is the behaviour normal for the situation?

Sometimes after brain injury challenging behaviours can be new and sometimes they can just be old behaviours that are worse or "more challenging".

For example, many people swear or yell from time to time, especially when they stub their big toe or whack their hand on the table. In this situation, it would be normal to yell out or swear. When it happens all the time though, it can be challenging.

We can tell if a behaviour is challenging if there is a bad outcome for the person with the brain injury. For example, if their friends start avoiding them or they are likely to get hurt again. Behaviour is **not** considered *challenging* just because others disapprove of it.

Using the previous example of John yelling at his brothers when he wants to watch TV, it is understandable that someone wants to hear the TV, but it is not acceptable to continually scream and swear or expect silence from others while John is inside and his brothers are outside.

Three helpful questions we can ask to identify the outcome of the behaviour are:

1. Does the behaviour create a safety risk or injury to the person or others?
2. Does the behaviour limit the person's access to activities or reduce participation?
3. Does the behaviour cause other people to withdraw and result in social isolation?

5. What happens before the behaviour: Antecedents (A)

Antecedents come before the behaviour and include all the things that can influence whether a behaviour happens or not. These are known as the "triggers".

Preventing Behaviours: Changing Antecedents

Prevention is better than treatment! Managing antecedents or triggers is much easier, more effective and less dependent on the person with brain injury's ability. A Positive Behaviour Support Plan will emphasise proactive strategies that can reduce the frequency of challenging behaviours as well as reduce the escalation and impact once the behaviour is triggered.

There are three types of antecedents:

1. **Environmental factors:** type of setting, noise, temperature, time of day, physical space
2. **Activity-related factors:** nature of the task, degree of choice, familiarity of the task, time allowed
3. **Other people:** family, significant others, carers, neighbours, service providers

It may be possible that a *small* change to one of these makes a *big* change to the behaviour, the person with brain injury and the whole family.

Using John as an example, if he likes to watch a particular show at a particular time, it could be recorded so that it doesn't have to be watched at the same time as his brothers play in the backyard (i.e., when they come home from school).

Important: What we can't change are things related to the brain injury. These are things like memory, tiredness or mood. But, we may be able to compensate for these.

Using Helima as an example, by having a clear outline of the family's budget and a clear list of what is needed next to the computer, Helima can see how much money is available for her to spend and what is needed.

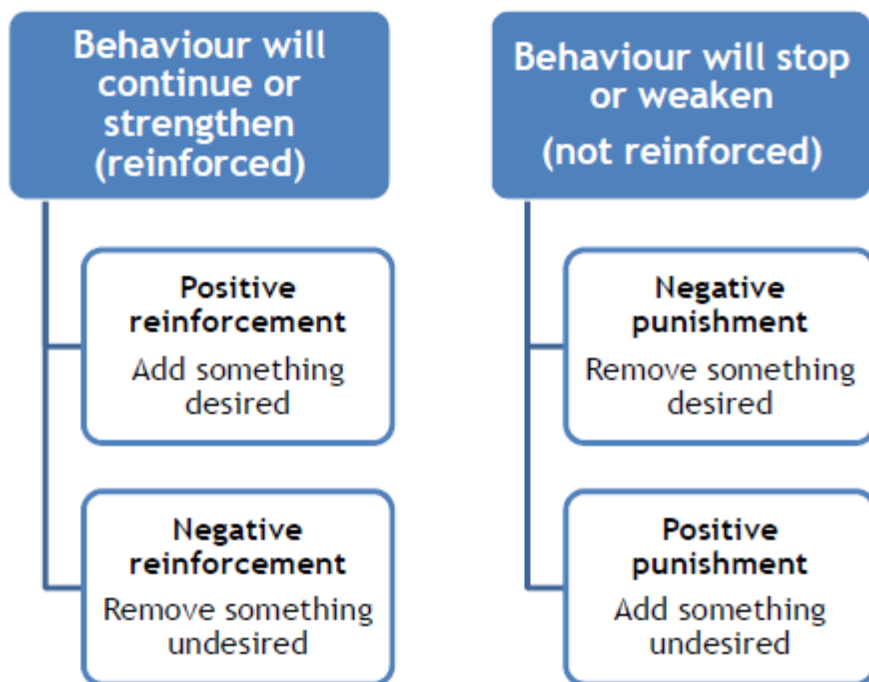
6. What happens after the behaviour: Consequences

The consequences of the behaviour include things that happen after the behaviours has happened. Consequences can tell us whether the behaviour is likely to happen again. A consequence can either reinforce the behaviour (the behaviour will continue or increase) or not reinforce the behaviour (the behaviour will stop or reduce). How we respond can make a big difference to whether a behaviour will happen again.

Stopping Behaviours: Dealing with Consequences

There are a number of different ways we can stop a person's challenging behaviour and reduce the likelihood of it reoccurring. One is to reward behaviours that are good and appropriate. Another is to remove reinforcements that are keeping the challenging behaviour going. A third is to provide negative reinforcement (remove something desired) or punishment for behaviours that are inappropriate or challenging behaviours.

Let's have a look at these in more detail using a Reinforcement Grid:



Positive reinforcement

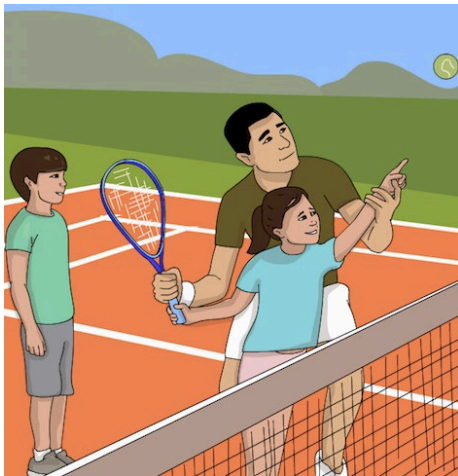
This is generally the most effective strategy. An incentive is given immediately when a desired behaviour occurs. For example, John usually becomes quiet when anxious then suddenly starts shouting at everyone. He is learning to tell family members when he is getting anxious and do his deep breathing exercises. Every time he remembers to do this, his actions are praised.

Positive reinforcement is not bribery - reinforcement comes after a task is completed, bribery is offered before. Try to make sure the reinforcer is practical, ethical and valid for the behaviour being targeted. Timing is critical - ensure the positive reinforcement happens immediately after the desired behaviour.

Let's have a look at how these might work using examples from our families.

Tran: Positive Reinforcement

If Tran wants to be more independent and make his meals for himself each day, Jenny can reinforce this behaviour (Tran making his meals) by giving him an outing to a football match on the weekend (something he desires). He might also be able to make meals that he enjoys, which would also be rewarding.



Helima: Negative Reinforcement

Removing reinforcements that keep a behaviour going (e.g., boredom) can also be helpful. When Helima does not have anything interesting to do, she is more likely to spend time on the internet buying things or gambling. By giving Helima helpful tasks that are enjoyable and meaningful so that she feels useful, she is engaged in more stimulating and appropriate activities.

Punishment

Another way of responding to challenging behaviours is *punishment*. Punishments tend to work less well than reinforcements. Often punishments can happen in the moment and when family members

are tired, upset or frustrated. When this happens, sometimes the punishment actually ends up reinforcing the behaviour more (increases the amount the behaviour is happening).

7. What not to do!

There are a few things that are helpful **not** to do. These things are easily forgotten, but make a difference!

1. Not allowing for changes to the person's ability level. These include changes such as memory loss and difficulties with executive function, such as those discussed in Module 1.
2. Not allowing for lack of drive or motivation caused by the brain injury. For example, saying "S/he's just being lazy".
3. Making value- judgments about the person's behaviour. For example, thinking "S/he's just rude".
4. Personalising the person's behaviour. For example, "S/he's just doing it to annoy me".

Summary

Congratulations on completing the second module of the This Way Ahead program. In this summary we discussed what a Positive Behaviour Support Plan is and how it is used in families. We also discussed how to assess whether a behaviour is challenging using the "who, what, where, why, when" strategy. We explored looking at Antecedents and Consequences to Behaviours (ABC model) in order to support your family member to make changes.

Great work, you have now completed the second module. Remember, you can come back whenever you like and re-read Module 2. In fact, we would encourage you to re-read it at least one more time this week.

Now that you have completed the first two education modules, you can choose which challenging behaviours you would like to focus on. You can do as many or as little as you like depending on your family's needs.

Your Checklist

Your tasks to do following this module are:

- Review Module 2 again
- Re-read and print out this module summary (it won't take long!)
- Understand what a Positive Behaviour Support Plan is.
- Monitor your family member's behaviour using "who, what, where, why, when".
 - Is it a challenging behaviour?

- Examine the Antecedents (before) and Consequences (after) of the Behaviour (ABC model).
- Understand Reinforcements and Punishments of behaviours
- Explore the frequently asked questions and extra resources sections on the website
- Reward yourself for completing Module 2!