What are the Positive Strategies for Supporting Behavior Improvement?

As highlighted in the previous section, there are many possible contributors to the development of challenging behaviors. It is important to investigate and evaluate these, but also to take action sooner rather than later, since many behaviors can become increasingly intense and harder to change as time goes on.

Often a necessary approach to managing behavior involves a combination of addressing underlying physical or mental health concerns, and using the behavioral and educational supports to teach replacement skills and self-regulation. There is no magic pill, but there are a number of strategies that can often be helpful.

The use of Positive Behavior Supports is more than just a politically correct approach to behavior management. Research shows that it is effective. The alternative is usually punishment, which decreases the likelihood of a behavior by taking something away (such as removing a favorite toy) or doing something unpleasant (yelling, spanking.) While punishment might work immediately, it has been shown to be ineffective in the long run and can increase aggressive behavior, provide a model for additional undesirable behaviors, and strain the relationship with the caregiver (you). It is worth noting that to continue to be effective and maintain improvements, positive supports and feedback need to be ongoing as well.

“Withholding reinforcement for problem behavior (i.e., extinction) is technically an example of punishment. Proponents of Positive Behavior Support (PBS) acknowledge that controlling access to reinforcement is necessary when trying to change behavior. What PBS does not condone is the use of aversive (e.g., demeaning, painful) procedures to suppress behavior. Such approaches have been demonstrated to be ineffective in producing durable changes in people’s behavior and do not improve to quality of their lives.” –Association for Positive Behavior Support

If you have made changes to improve your child’s health or happiness, and these have not helped to improve his behavior in a reasonable time frame (a couple of weeks), or you are concerned about safety, help may be needed. Positive strategies and an intervention plan can be developed by a behavioral or educational team, usually in response to what is learned in a functional behavior assessment (FBA) as described in the previous section.

When several challenging behaviors exist, it is important to establish priorities. You may want to first target behaviors that are particularly dangerous, or skills that would help to improve situations across several behavioral scenarios. Remember to set goals that are realistic and meaningful. Start with small steps that can build over time. A non-verbal child is not likely to speak in full sentences overnight, but if learning to hold up a ‘take a break’ card when he needs to leave the table allows him to exit, and keeps him from throwing his plate, that is a huge success.

A plan for you and your team should meet four essential elements:

- **Clarity:** Information about the plan, expectations and procedures are clear to the individual, family, staff and any other team members.
- **Consistency:** Team and family members are on the same page with interventions and approaches, and strive to apply the same expectations and rewards.
**Simplicity:** Supports are simple, practical and accessible so that everyone on the team, including the family, can be successful in making it happen. If you don’t understand or cannot manage a complicated proposed behavior intervention plan, speak up!

**Continuation:** Even as behavior improves, it is important to keep the teaching and the positive supports in place to continue to help your loved one develop good habits and more adaptive skills.

Please recognize that many skills take time to develop, and that changes in behavior require ongoing supports to be successful. In some cases, especially when you are ignoring a behavior that used to ‘work’ for your child, behavior may get more intense or more frequent before it gets better. Your team should keep good records and track progress and responses to intervention to know if the plan is effective.

Being realistic at the outset is crucial. It can help parents and caregivers appreciate that they are making small yet meaningful changes in their lives and the lives of the individual they care for. Making goals realistic means they are achievable. Being realistic keeps the picture positive. It focuses attention on progress towards a goal, rather than perfection.

**Setting Realistic Behavioral Goals:**

Setting goals allows us to objectively measure progress toward an identified desired outcome. It also allows caregivers and parents to ask themselves, “What behavioral changes would really make the greatest improvements in our lives together?” It allows them to identify what really matters. For instance, it may be more important to address a behavior such as throwing things during a classroom activity than to address that person’s tendency to stand up during meals.

For example, it is possible that you or your team may have misinterpreted the function of a behavior, or that the function has changed over time. A-B-C data often indicates that screaming has the function of attention, because attention from others is a common (and usually natural) consequence. But it may be that screaming is triggered by painful reflux and attention is not the true function. Tracking and interpreting the data is important since it may help to show that more investigation is needed, and the plan may need to be adjusted to be effective.

Information on supports for teaching behavior management can be found in the Autism Treatment Network’s *An Introduction to Behavioral Health Treatments* and *Applied Behavior Analysis; A Parent’s Guide*.

In the end, you are trying to teach your child that life is better, and that he can get what he needs, without having to resort to challenging behaviors. The suggestions below are strategies to help make individuals with autism feel more comfortable and more empowered.

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There are increasing numbers of tools and apps for behavioral intervention tracking that are portable and simple to use. Links can be found [here](#).
Adapt the Environment

As you learn to think like a detective about your child’s behavior, your observations (or the FBA) are likely to show that behavior occurs at specific times, with certain people or in particular environments. You and your team will need to tune in, learning to recognize the signs of increasing tension, anxiety or frustration that eventually lead to challenging behaviors. Often there is a ramping up, or escalation period, and learning to recognize that early and using many of the approaches here can help to calm a situation and prevent behavioral outbursts. Sometimes these signs may be very subtle—red ears, a tapping foot, heavier breathing, higher pitched speech—but it is essential that everyone on the team responds to the importance of tuning in and working towards de-escalation.

Changing the environment can often reduce behavioral episodes. Expand situations, relationships, places and opportunities that are successful. If possible, try to adjust or avoid situations that are triggers for challenging behavior. Incorporate ways to reduce frustration and anxiety and increase understanding. Below are some things to consider when working to create a more successful environment:

- **Organize and provide structure:** Provide clear and consistent visual schedules, calendars, consistent routines, etc. so that the person knows what is coming next.

- **Inform transitions and changes:** Recognize that changes can be extremely unsettling, especially when they are unexpected. Refer to a schedule, use countdown timers, give warnings about upcoming changes, etc.

- **Use Visual Supports:** Pictures, text, video modeling and other visuals are best for visual learners, but they are also critical because they provide information that stays. The ATN Visual Supports Tool Kit provides a step-by-step, easy-to-understand introduction to visual supports.

- **Provide a safe place and teach when to use it:** A calming room or corner, and/or objects or activities that help to calm (e.g. bean bag) provide opportunities to regroup and can be helpful in teaching self-control.

- **Remove or dampen distracting or disturbing stimuli:** Replace flickering fluorescent lights, use headphones to help block noise, avoid high traffic times, etc.

- **Pair companions or staff appropriately for challenging activities or times:** Some people are more calming than others in certain situations. If going to the store with dad works better than with mom, focus on that and celebrate successes.

- **Consider structural changes to your home or yard:** These changes might address some of the specifics of your situation to increase independence or reduce the risks when outbursts occur. Making Homes that Work includes a range of potential changes that can be made to reduce property damage, improve safety, and increase choice and independence.

“One of the barriers that we often find for children with autism in toilet training has to do with the condition of the bathroom itself. Often times we find that people with ASD can be very tactfully defensive so the space itself needs to be as neutral as possible. There needs to be enough room around the toilet so people don’t feel too confined. It is really helpful if the space is warm and you address other types of sensations around the toileting experience. For example, is it cold, is there a fan running, is the light too bright, or not bright enough? You can sometimes help encourage people to use the toilet if the bathroom is a friendly place for them to be

— George Braddock, President, Creative Housing Solutions LLC
What else can I do to promote a Safe Environment?

Even the best-laid plans don't always work in every situation or at the necessary speed. Despite proactive strategies, particularly challenging times and stressful situations can get beyond our control. Aggression or self-injury can get to a point where the situation is dangerous. It is good to be prepared if you think this might happen.

Communicate to Others

Many families have found it helpful to communicate to those around them about their child's special needs and some of the behavioral situations that might arise. Sometimes it is helpful to let others know what is going on so that they can also be observers and help provide helpful input about your child. Some families have found it helpful to talk to their neighbors, or to communicate with others in the community using stickers, cards, or other visuals.

Preparing for an Autism Emergency

Because autism often presents with special considerations, tools have been developed to help families prepare ahead of time for some situations that might arise. The following resources have suggestions for families, as well as information that can be shared with local law enforcement and first responders:

- Autism Speaks Autism Safety Project
- First Responders Tool Kit
- Community and Professional Training Videos for First Responders
- National Autism Association’s Big Red Safety Boxes
- Autism Wandering Awareness Alerts Response and Education Collaboration (AWAARE)
- Making Homes that Work

Use Positive Behavior Supports

Your team should develop strategies for you to use to increase the behaviors you want to see in your child. These will need to be individualized to his particular needs and challenges. They can often be helpful in building a sense of pride in accomplishments and personal responsibility, and a sense of what is expected. This will reduce the anxiety and reactivity that results in aggression or other behaviors. Some helpful strategies:

- Celebrate and build strengths and successes: Tell him what he does well and what you like. A sense of competence often fosters interest and motivation. Strive to give positive feedback much more frequently than any correction or negative feedback. ‘Great job putting your dishes in the sink!’

- Respect and listen to him: You may have to look for the things he is telling you, verbally or through his choices or actions. ‘You keep sitting on that side of the table. Is the sun in your eyes over here?’

- Validate his concerns and emotions: Do not brush aside his fears or tell him not to worry. His emotions are very real. Help to give language to what he is feeling. ‘I know you do not like spiders. I can see that you are very afraid right now.’ ‘I can see that you are angry that our plans have changed.’
Provide clear expectations of behavior: Show or tell your child what you expect of him using visual aids, photographs or video models. A great way to teach new skills is Tell-Show-Do.

Set him up for success: Provide accommodations. Accept a one word answer instead of demanding a whole sentence. Use a larger plate and offer a spoon to allow him to be neater at the dinner table. Use Velcro shoes or self-tying laces if tying is too frustrating.

Ignore the challenging behavior: Do your best to keep the challenging behavior from serving as his way of communicating or winning. This is hard to do, but in the long run it is effective. Do not allow his screams to get him out of brushing his teeth, or his biting to get him the lollipop that he wants. Behaviors may get worse before you start to see them get better. Stay the course! And make sure all family and team members are consistent in this approach and that you pair this with other positive strategies.

Alternate tasks: Do something that is fun, motivating or that your child is good at. Then try something hard. He will be less inclined to give up or get agitated if he is already in a positive framework.

Teach and interact at your child's or loved one's learning level: Take care to set him up for growth and accomplishment, rather than the anxiety produced by constant failure or boredom.

Give choices, but within parameters: Everyone needs to be in control of something, even if it is as simple as which activity comes first. You can still maintain some control in the choices that you offer. 'Do you want to eat first, or paint first?'

Provide access to breaks: Teach the individual to request a break when he needs to regroup (e.g. use a PECS card that represents “break”). Be sure to provide the break when he asks so he learns to trust this option and does not have to resort to challenging behaviors.

Promote the use of a safe, calm-down place: Teach him to recognize when he needs to go there. This is a positive strategy, not a punishment.

Set up reinforcement systems: Use simple, predictable processes that reward your child for desired behavior. Catch him being good and reward that, verbally and with favored activities, objects or ‘payment.’ ‘I love that you stayed with me during our shopping trip. You earned a ride on the airplane toy!’

Allow times and places for him to do what he wants: Even if it is a ‘stim’, it is important to provide these options when it is not an intrusion or annoyance to others.

Reward flexibility and self control: ‘I know you wanted to go to the pool today and we were surprised when it was closed. For staying cool and being so flexible about that change in plans, let’s go get some ice cream instead!’

Pick your battles: Strive for balance. Focus on the behaviors and skills that are most essential. Be sure to include positive feedback and intersperse opportunities for success and enjoyment for you, your family, and your loved one with autism. Be resilient. Celebrate the fun and the good things!

Use positive/proactive language: Use language that describes what you want the individual to do (e.g. ‘I love how you used a tissue!’), and try to avoid saying ‘NO’, or ‘don’t’ (e.g. ‘stop picking your nose.’).
Teach Skills and Replacement Behaviors

Since behavior often represents communication, it is essential to replace behavior by building more adaptive skills. It is important that you and your team not assume that a child has the skills needed to do something ‘the right way’ and that you are prepared to use systematic instruction and motivation to build new abilities.

Focus on communication and functional skills to promote greater independence, social skills to promote greater understanding and reduce apprehension, and self-regulation skills. The team should specifically work on skills that will address the behavior’s function, and thereby help to replace, the target behavior. Skill building can take some time, so be persistent and celebrate the small steps along the way.

“Communication-based intervention refers to an approach that reduces or eliminates problem behavior by teaching an individual specific forms of communication. Because the communication forms that are taught are more effective ways of influencing others than the problem behavior, they eventually replace the problem behavior itself… By communication training, we mean that individuals are taught specific language forms including, for example, speech, signing, and gestures that can be used to influence other people in order to achieve important goals.”

– Ted Carr, Ph.D.,
State University of New York at Stony Brook

When you adjust to give different feedback or to help your child develop a new skill, celebrate yourself as much as you celebrate your child’s growth! Reward a sibling for being extra patient or modeling a skill you are teaching. Use the pride in your successes to help you stay focused and dedicated, and to help you reflect on the good things in your child and your family.

It is essential to teach skills in the context of a positive learning situation, which is NOT while a behavior is occurring. These skills need to be part of a comprehensive educational plan. Just like math facts, they may need to be practiced many times during the day when the child or adult is calm and attentive. Label ‘calm’ and ‘ready to learn’ states and teach your child what they feel like.

- **Develop and expand functional communication:** Find a way to build effective communication that is appropriate for the person across his daily activities. Use language instruction, PECS, sign language, communication devices or other tools. For example, teach an over-stimulated child to ask for quiet time (using his words, PECS, pointing to a picture, or an iPad app), instead of running away. Functional communication should be rewarded with immediate access to the requested item to build the connection. This allows you to use request = item rather than behavior = item. A trained autism specialist or speech therapist will be very helpful in choosing and supporting effective interventions for functional language development. More information and possible resources:

  - The National Professional Development Center’s Functional Communication Training
  - Functional Communication Training
  - Severe Behavior Problems: A Functional Communication Training Approach (Treatment Manuals for Practitioners), by V. Mark Durand

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Picture Exchange Communication System (PECS) and Associated Apps

Other Autism Apps, such as Proloquo

Developing a voice can be life changing, and finding the right supports can help to increase functional communication in a variety of ways. For one dramatic example, watch Carly’s story.

Teach Social Skills: Use social stories to explain expectations and build skills and awareness. Recognize that some skills might require a team approach. For example, messy eating or toileting can be the result of a combination of sensory concerns, motor planning and social awareness, so working with an occupational therapist and using social stories as well as behavioral interventions might be needed.

Create Activity Schedules: Teach the use of schedules using pictures, written words or videos to help organize a chunk of time (e.g. a day, a class period, etc.) and break tasks into small, manageable steps. These schedules often reduce anxiety, provide skill development, and promote independence. Examples and resources:

- Picture Activity Schedules, from Do2Learn
- Other Autism Apps, such as ReDo

Teach Self-Regulation and De-escalation Strategies: Learning to self regulate is essential to a person’s ability to remain calm in the face of the assaults that the world will undoubtedly bring his way. Your child is most likely to show problem behaviors when he is in an emotional state of anxiety or agitation. Strategies and programs for building self-regulation relate to both arousal and emotions. Many of us have had to learn these ourselves—counting to ten, taking a deep breath—and the same principles apply to the learning needs of an individual with autism.

“My behavior began to improve when I started to learn about emotions—how to recognize them not only in others, but in me. This was an essential step to learning self-regulation, and it was then that I started to take more control of my actions.”

– RH, adult with autism

- Use The Incredible 5-Point Scale to teach social awareness and emotions
- Teach recognition of arousal levels: The Alert Program: How does your engine run?
- Employ Behavioral Relaxation Training (BRT) which uses motor exercises (posture, breathing, etc) to find a relaxed state, and has been shown to be helpful in individuals who are less able to talk through issues or concerns.
- Teach self control and behavioral targets using Social Stories or Cognitive Picture Rehearsal.
- Teach the individual to recognize the triggers for his behavior, and ways to avoid or cope with these when they occur.
- Find ways to arouse and ways to calm your child, which can vary from person to person, and teach him to do these when he needs to.
- Review additional tips and hundreds of sample behavior charts and targets, including feeling charts.
Find providers who use Cognitive Behavior Therapy or teach cause and effect, self-reflection, and social understanding through tools such as the Social Autopsy. While these techniques lend themselves to more verbal individuals, they can be used with individuals of all verbal abilities with appropriate accommodations such as use of visuals and role-play.

Teach Self-Management Skills: Self-management focuses on becoming aware of one’s actions and learning responsibility for behavior and tasks without the support of caregivers. This is especially important in the adolescent years, as young adults with autism often feel the need for greater autonomy and independence just like their peers. Teaching self-management provides your child with a sense of personal responsibility, pride and accomplishment. Some books include:

1. How to teach self-management to people with severe disabilities: A training manual, by Lynn Koegel
2. Self-Management for Children With High-Functioning Autism Spectrum Disorders, by Lee A. Wilkinson

Promote Exercise: Exercise can be a powerful factor in overall quality of life, for reasons beyond just physical fitness and weight issues. Research shows that aerobic exercise can influence behavior, decreasing self-stimulatory behaviors such as rocking and spinning, as well as discouraging aggressive and self-injurious behavior. Sometimes the challenges of autism (e.g. sensory input, motor planning, social aspects of team sports, etc.) can require a little extra creativity in terms of designing an approach to physical activity that is beneficial and motivating for a specific person. However, if implemented appropriately, the addition of physical activity to an autism intervention program can address some of these specific challenges, increase self-confidence and social interactions, and improve overall quality of life. The same interventions that are used to teach other skills (ABA, structured teaching, etc.) can be used to build exercise skills and routines.

Address Hormones and Sexuality Considerations: The hormone and brain changes of puberty can make a typical child seem like a stranger, and these same effects occur in people with autism. However, in autism, additional considerations come into play because of the language and social deficits. Tell your child, even if you think he may have difficulty understanding, about what is happening to his body. Specific teaching to the skills of appropriate social considerations (personal space, privacy, feelings vs. actions, etc.) can help to keep an individual with autism out of situations that others might find disturbing or inappropriate.

Responding to Inappropriate Sexual Behaviors Displayed by Adolescents With Autism Spectrum Disorders by Jenny Tuzikow, Psy.D., BCBA-D has helpful insights.

Editor’s Note: This story reflects the need for the team to take into consideration the culture and comfort of those being asked to take part in an intervention. Your family’s perspective and concerns need to be considered as you program, as a team, for your child.

“Just like any other teenage boy, my 13 year old son with autism starting having occasional, unexpected erections that seemed outside of his control. He found them funny, but obviously others did not. We explained to him what was taking place, but that it was something that he should keep private. Even if he understood what we were saying, we recognized this would be difficult to do when you don’t have the language to let others know you just ‘need a few minutes at the desk.’ His behavioral team thought the way to address this was to give it an outlet, suggesting some
Victoria’s Secret catalogs and some modeling from Dad. I was so relieved that I could not be asked for this duty! But we were also concerned about what else we were teaching him. What if Victoria’s Secret became his ‘trigger’ and we went to the mall?? We reasoned with the team, and instead taught our son to ask for Private Time—in his room, at home, with a Private Time sign on his door. Eventually he outgrew this phase and it has not been an issue. We can even go to the mall and pass Victoria’s Secret without concern!”

— ES, a mother

An Intervention Example: C.O.P.E.S.™

One school intervention team has had success using strategies for 12 teenage students with long histories of failed interventions and high incidence of aggressive and self-injurious behaviors. C.O.P.E.S.™ involves consistent implementation of a collection of individualized approaches. This program incorporated several interventions to greatly reduce behaviors and build positive skills and happier students. For a description and accompanying visual examples, please see the Appendix at the end of this section.

Punishment vs. Rewards: What does science tell us?

Punishment is often used in shaping behavior. It works because it reduces the chances that the behavior will happen again. Punishment often takes two forms—doing something such as spanking or giving extra chores, or taking something away such as TV time or the car keys. We often use punishment in its more subtle forms without even realizing it—raising our voices, removing a favorite toy or withdrawing attention.

The short term consequences of punishment bring focus to a problem and may stop the behavior in the moment. But studies show that punishment is largely ineffective in the long run, especially when it is not used together with positive and preventive approaches. It can promote emotional responses such as crying and fearfulness, and aggressive behavior by providing a model (e.g. hitting). It can also promote a desire for escape and avoidance of the person or the situation that caused the punishment. It often needs to be repeated and often becomes more intense, because punishment may teach what not to do, but does not build skills for what to do. The negative feelings associated with punishment are often paired with the person delivering the punishment, causing the relationship with the parent or caregiver to be affected as time goes on.

Of course, every child exhibits behavior that needs to be corrected, or shaped, so what else can I do?

Rewards, or using reinforcement, are one of the most consistent ways to change behavior and build desired responses. For people with jobs, the reward is a paycheck at the end of the month. Children, especially those with autism, often need their rewards much more immediately, and in connection with the desired behavior. So, as soon as he buckles his seatbelt, he gets a ‘high five’.

Sometimes reinforcement is viewed as simple, such as giving an M&M after a correct response, but reinforcement can be much more than that. When a tangible reward (M&M) is paired with a social reward (‘Great job saying Good Morning to your brother!’), the positive feeling of success gets paired with both the verbal praise, and the person giving the reward. This helps to build the desired behavior, and also often improves the relationship with the parent or teacher using the reward.

Reinforcers can vary considerably from person to person. It is important to observe your child to learn what he finds rewarding so that you can give him what he wants after he has responded in the way that you desire. Watch what he does in his free time, or when he has choices—some children love to be tickled, others do not. Consider edibles (such as a cookie or other favorite food) but also other tangibles (a toy, bubbles, etc.) or experiences (listening to music, taking a walk, curling up on the bean bag). Be creative and mix it up. Know that the more opportunities a person has to encounter a reinforcer, the less rewarding it might become—so the ‘power’ of a reward is often increased if it is saved for certain times when you want to celebrate your child’s behavior.
Research shows that positive, reinforcement-based strategies are most effective in creating long-term behavioral change. However, it is also important to have an immediate response to a behavior in order to maintain safety or minimize disruptions. Planning in advance for the type of situation is important, so that caregivers across settings (home, school, etc.) are consistent in their responses and delivery of consequences. Most reactive strategies fall into three areas as listed below.

- **Ignoring the behavior** (*extinction*) is often used when the behavior is used for attention, and is mild or not threatening.

- **Redirection**, often supported with visuals, may involve redirection to an appropriate behavior or response and is often paired with positive strategies.

- **Removal from a situation or reinforcement** through a time out is often used for calming down opportunities.

Ignoring challenging behavior means not giving in to the behavior that you are trying to eliminate, to the best of your ability. If he kicks to get a cookie, ignore the kicking and do not give him a cookie. But, use other strategies here to teach him to request a cookie, and be sure to give the cookie when he asks, so as to build his trust in you. Note that when you first start to ignore a behavior (called *extinction*) it may increase the behavior. This is called an *extinction burst* and is very normal. Stay the course.

- Certain behaviors (those that are dangerous or injurious) are more difficult to ignore and sometimes need to be redirected or blocked (e.g. putting a pillow by his head so that his self-hitting does not do damage), even as you strive to not allow the behavior to ‘win.’

> “When Joey was little, every time he spilled his glass of water, he banged his head on the edge of the table. I learned to wipe-up his spilled water quickly, in order to avoid this self-injurious behavior. If I was really fast, he’d attack me on my way to cleaning it up – grabbing my hair and pulling. I also noticed that his aggression didn’t stop once I had cleaned up the obvious puddles, but continued as I wiped what I thought was a dry surface.

This behavior continued because, try as we might, we could not completely avoid spilling water. By the time Joey was age 9, the entire family was very alert to the importance of not spilling water and the need to respond quickly trying to reduce the duration of Joey’s aggression. Only after we started a home ABA program was it pointed out that my rushing to clean up spilled water followed Joey’s becoming self-injurious and aggressive. By wiping up the water, we were reinforcing Joey’s inappropriate behaviors. I realized that Joey did not know how to clean up the water himself. He also did not have another way to ask us to clean up the spilled water or to tell us that it bothered him, other than banging his head or pulling our hair.

> With the help of our behavior consultant, we learned to clean-up the spilled water only before Joey becomes aggressive or self-injurious. We also learned to prompt appropriate language “clean up” as we cleaned up. If Joey aggressed, we ignored the spilled water and followed our behavior protocol. After practice, Joey learned to say “clean up” instead of banging his head and pulling hair. Eventually, we taught Joey how to ask for a towel or to get a towel and clean up the water himself.”

— BH, parent

Redirection can be a very powerful tool, giving you the opportunity to steer your child into a situation that is more positive, or more manageable. It also helps to avoid or calm an escalating situation. The use of a time out can vary considerably, and to be most effective, it is important that it is done correctly. A time out is not just a change in location—it means your child loses access to something he finds rewarding or cool. For more complete discussion on how best to use time out, see the ATN ABA guide or this parent training information.
Other strategies your behavioral team might employ include teaching accountability (if he spilled the milk, he is the one to clean it up), or using positive practice, sometimes known as do-overs. For example, if he let the door slam in someone’s face, he might practice in the doorway how to enter the house and hold the door five or ten times. ‘Oops, let’s practice doing that that the right way.’ In doing this, try to limit the sense of punishment, keeping positive strategies employed (reinforcement, praise) to build the desired behaviors over time. I love that you noticed I am right behind you and you held the door open!

- When behavior does occur, be careful not to:
- Feed into the behavior, give in or provide what your child wanted to get from the behavior
- Show disappointment or anger
- Lecture or threaten
- Physically intervene (unless necessary for safety, such as keeping a child from running into the street)

A new look at time-out

Contrary to popular belief, time-out is not sitting in a chair for a few minutes. Time out is losing access to cool, fun things as a result of exhibiting problem behavior, usually by removing the individual from the setting that has those cool, fun things. Time-outs can only occur when the individual is in time-in. That is, if nothing enjoyable was happening before time-out, you are simply removing the individual from one non-stimulating, non-engaging room to another.

For example, if the individual is watching her favorite TV show, but hits and screams at her sibling for getting in the way, taking her to a chair located in the same room will not serve as a time-out since she can still see and listen to the TV. Removing her from accessing the TV completely, however, is an example of a time-out. In this case, time-in (watching a favorite show) was in place, allowing for time-out to be effective upon the occurrence of the problem behavior. Once the individual is in time-out, let her know that she must be calm for at least 10 seconds (or a duration of your choosing, usually shortly after he is calm) before she can return to time-in. Do not talk to the individual or explain to her what she did wrong while she is in time-out. You may use a timer to indicate to the individual when the time-out will be over. When the timer goes off, he should be allowed to return to what he was doing, i.e. time-in.

How to use time-out correctly

- A fun, enjoyable activity should be in place before using time-out (e.g. playing video game, visiting friends).
- Time-out should not lead to the individual avoiding or delaying an unpleasant task or work activity
- Time-out should take place in a boring and neutral setting.
- No attention should be given during time-out. Simply tell the individual, “You hit your brother, no TV. Go to time-out until you are calm”.
- Time-out should be discontinued shortly after the individual is calm and quiet (approximately 10 seconds of calm behavior).

— page 74, Targeting the Big Three
Resources:

Behavioral Relaxation Training and Assessment
by Roger Poppen

Behavioral Relaxation Training (BRT): Facilitating acquisition in individuals with developmental disabilities
by Theodosia R. Paclawskyj, Ph.D., BCBA, and J. Helen Yoo, Ph.D.,

The Cycle of Tantrums, Rage, and Meltdowns in Children and Youth with Asperger Syndrome,
High-Functioning Autism, and Related Disabilities
by Brenda Smith Myles and Anastasia Hubbard

How to teach self-management to people with severe disabilities: A training manual
by Lynn Koegel

Self-Management for Children With High-Functioning Autism Spectrum Disorders
by Lee A. Wilkinson

Taking Care of Myself: A Hygiene, Puberty and Personal Curriculum for Young People with Autism
by Mary Wrobel

Targeting the Big Three: Challenging Behaviors, Mealtime Behaviors, and Toileting
by Helen Yoo, Ph.D, New York State Institute for Basic Research

Autism Fitness.com: Leading Authority in Autism Fitness
Eric Chessen

Depression and Anxiety: Exercise Eases Symptoms
Mayo Clinic

Exercise for Mental Health
Primary Companion to the Journal of Clinical Psychiatry
The COPES program uses individualized programs for each of their students that incorporates the following elements:

- **Communication:** students were given immediate access to communication for emotional issues. Multi-access approaches were tailored to the student’s needs using YES-NO boards, icons, and iPads with augmentative apps. Teach communication at his level and start with what is most essential.

- **Organization:** many of the students showed considerable anxiety and a complex array of escape and avoidance behaviors since they had no systems to help them organize and anticipate events, daily schedules, changes in schedules and or future events. Simple schedules and training on basic contingency management and use of visual supports showed rapid changes in behavior and reduced anxiety.

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<tr>
<th>Tommy’s Schedule Monday</th>
<th>All Done</th>
</tr>
</thead>
<tbody>
<tr>
<td>Put Backpack in Cubby</td>
<td></td>
</tr>
<tr>
<td>Independent Work</td>
<td></td>
</tr>
<tr>
<td>Morning Meeting</td>
<td></td>
</tr>
<tr>
<td>Reading Time</td>
<td></td>
</tr>
<tr>
<td>Music Class</td>
<td></td>
</tr>
<tr>
<td>Lunch</td>
<td></td>
</tr>
<tr>
<td>Recess</td>
<td></td>
</tr>
<tr>
<td>Special Reading Group</td>
<td></td>
</tr>
<tr>
<td>Pack Up Backpack</td>
<td></td>
</tr>
<tr>
<td>Go Home</td>
<td></td>
</tr>
</tbody>
</table>
Positive behavior supports: Even though all of the students had prior FBAs and complex contingency management systems, the interventions often failed since they were too little, too late. By being reactive instead of addressing why the behavior occurred in the first place, the previous interventions were sending the message that the student’s behavior was frustrating, but missing the opportunity to prevent its occurrence in the future. Prevention had to be addressed as a primary objective and replacement skills needed to be built using positive behavior supports. Simple token charts were introduced and each student was reinforced for success, as simple as walking into a room nicely to sitting for a minute in a chair. The students responded immediately to being honored and acknowledged for the things they did right, though they were in shock at first since they were accustomed to primarily negative feedback. You could almost see the questions in their faces—What do you mean I’m being given constant feedback? And it’s positive! Example of reinforcement steps to earning computer time:

Emotional regulation: Starting on day one of the behavior support plan, each student was systematically taught to understand and identify his own regulatory state and escalation cycle. Proactive programming was essential. Empowerment and self-determination was a significant part of the program and the students responded immediately to their involvement in their plans. The plans were based on knowing that the student who understands that stress, anxiety and specific activities or situations often result in tension, frustration, and behaviors, is a student who has a chance of self-regulating.

The program has been taught successfully to numerous students with limited to no verbal skills. Individuals with limited verbal skills are often assumed to be without a full range of emotions, with limited ability to comprehend what others are saying. As a result they live frustrating lives. These students are often misunderstood and their emotions, feelings and responses are not fully considered. People talk about them as if they are not there and they make judgments and statements that do not take into account for the full depth of their feelings, thoughts and opinions.

Teaching the student his escalation cycle does two main things:

- it allows him to have some say or opinion in his program
- it teaches him to be aware of the things that cause him anxiety or frustration that often leads to disruptive behaviors, and teaches him corresponding strategies for self-regulation
An example of the visuals used to teach a student to identify his regulatory state and what to do to ‘get to green’:

**My Self-Management Plan**

<table>
<thead>
<tr>
<th>I AM HIGH</th>
<th>The behaviors I exhibit when I feel this way</th>
<th>What I need to do-</th>
</tr>
</thead>
<tbody>
<tr>
<td>I grab others</td>
<td>Sit and breath - deep breaths</td>
<td></td>
</tr>
<tr>
<td>I hit and bite</td>
<td>I need to be in a safe place</td>
<td></td>
</tr>
<tr>
<td>I yell loud</td>
<td>go to the beanbag and stay there!</td>
<td></td>
</tr>
<tr>
<td>I cry loudly</td>
<td>Get to yellow</td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>I AM LOW</th>
<th>The behaviors I exhibit when I feel this way</th>
<th>What I need to do-</th>
</tr>
</thead>
<tbody>
<tr>
<td>I look tense, my shoulders and body are tense</td>
<td>Take a sensory break</td>
<td></td>
</tr>
<tr>
<td>I bite my tongue</td>
<td>Ask for help</td>
<td></td>
</tr>
<tr>
<td>I click my neck and fingers</td>
<td>I need someone to write and explain what’s going on!</td>
<td></td>
</tr>
<tr>
<td>I look red and sad</td>
<td>I need to take DEEP breaths</td>
<td></td>
</tr>
<tr>
<td>I need everything to be in its place</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

<table>
<thead>
<tr>
<th>I AM CALM</th>
<th>The behaviors I exhibit when I feel this way</th>
<th>What I need to do-</th>
</tr>
</thead>
<tbody>
<tr>
<td>I can sit and focus</td>
<td>I can earn my points and get preferred breaks</td>
<td></td>
</tr>
<tr>
<td>I can follow my schedule</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I can answer with my voice</td>
<td></td>
<td></td>
</tr>
<tr>
<td>I do respond to others and I look relaxed!</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

- **Sensory and social:** Each student has a systematic exposure to community and or social outings that includes the golden rule--no community and/ or social access when the student is in any other state but green. This decreases the chances for the student to be in dangerous situations where staff have to try to manage behavior and risk inadvertently reinforcing behaviors because the safety risk is too high.

Social skills are focused on as reciprocal interaction, not necessarily frustrating, overwhelming exposure to typical students. The social success is based on the student being motivated and able to access the social situation. Start small and be successful. Building confidence in the student has to come first and regulation is key to that confidence.