

Positive Behavior Supports for Home and School



2019 AXYS Family Conference | Atlanta,
Georgia | June 28-30

HANNAH ACEVEDO, MS, LEP, ABSNP, BCBA

LICENSED EDUCATIONAL PSYCHOLOGIST #3809

DIPLOMATE IN SCHOOL NEUROPSYCHOLOGY#10836

BOARD CERTIFIED BEHAVIOR ANALYST #1-04-1575



Types of Behavioral Concerns Commonly Reported in Youth with X and Y Chromosome Variations

- Poor attentional control (distractibility, impulsivity)
- Executive functioning deficits (poor inhibition, flexibility, planning, problem solving)
- Emotional lability/ sensitivity (“meltdowns,” “tantrums”)
- Anxiety (somatic complaints, fear, avoidance, repeated questioning)
- Depression (withdrawal, sadness)
- Social Problems
- Aggression
- Oppositionality
- Thought problems



What is Getting in the Way?

Will Deficits: Behavior due to a lack of motivation

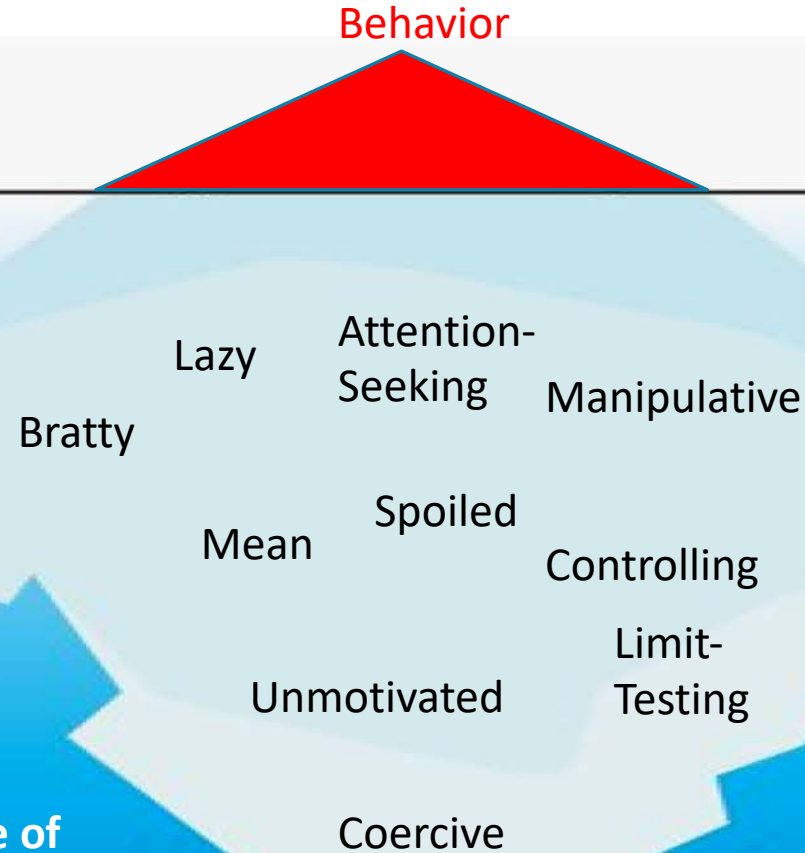
“Kids do well if they wanna.”

Skill Deficits: Behaviors due to a lack of skills

“Kids do well if they can.”



“Kids Do Well If They Wanna” Philosophy



“This leaves the parent with the role of punishing or trying to motivate with reinforcement.”

- Ross Green



“Kids do Well if They Can”- Ross Green

*“Your philosophy will guide your actions.
No philosophy, No guide.”*

Neurological Underpinnings of Behavior

Behavior



“Behavior challenges can be understood as a form of developmental delay in flexibility/ adaptability, frustration tolerance, and problem solving.”

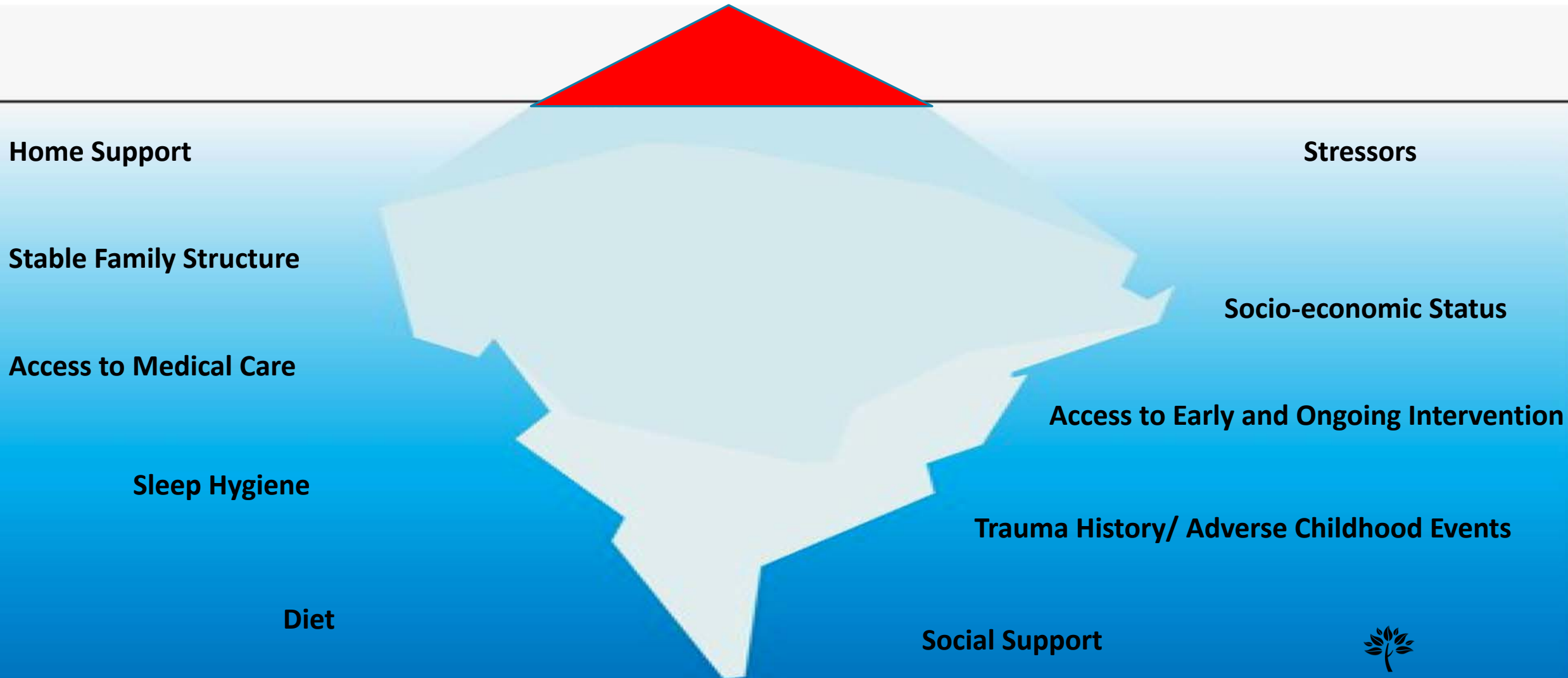
-Ross Green's Bill of Rights for Behaviorally Challenged Kids



Common Lagging Skills

- Difficulty seeking attention in appropriate ways
- Difficulty expressing concerns, needs, or thoughts in words
- Difficulty maintaining focus
- Difficulty the likely outcomes of behaviors (impulsivity)
- Difficulty considering a range of solutions to a problem
- A poor sense of time
- Difficulties seeing “grays,” literal, concrete black and white thinking
- Difficulties interpreting social cues
- Difficulty managing emotional response to frustration, fear, or confusion

Environmental Influences on Behavior that Impact Motivation (Will) and Long Term Outcomes



ABCs of Behavior:

Looking at the ABCs helps us to identify the *function* of the behavior.

Antecedent: What occurs before a behavior

Consequence: What occurs after a behavior



Antecedent	Behavior	Consequence



Functions of Behavior

To get or gain access to:

- Attention
- An object or activity
- Sensory stimulation



To avoid or escape:

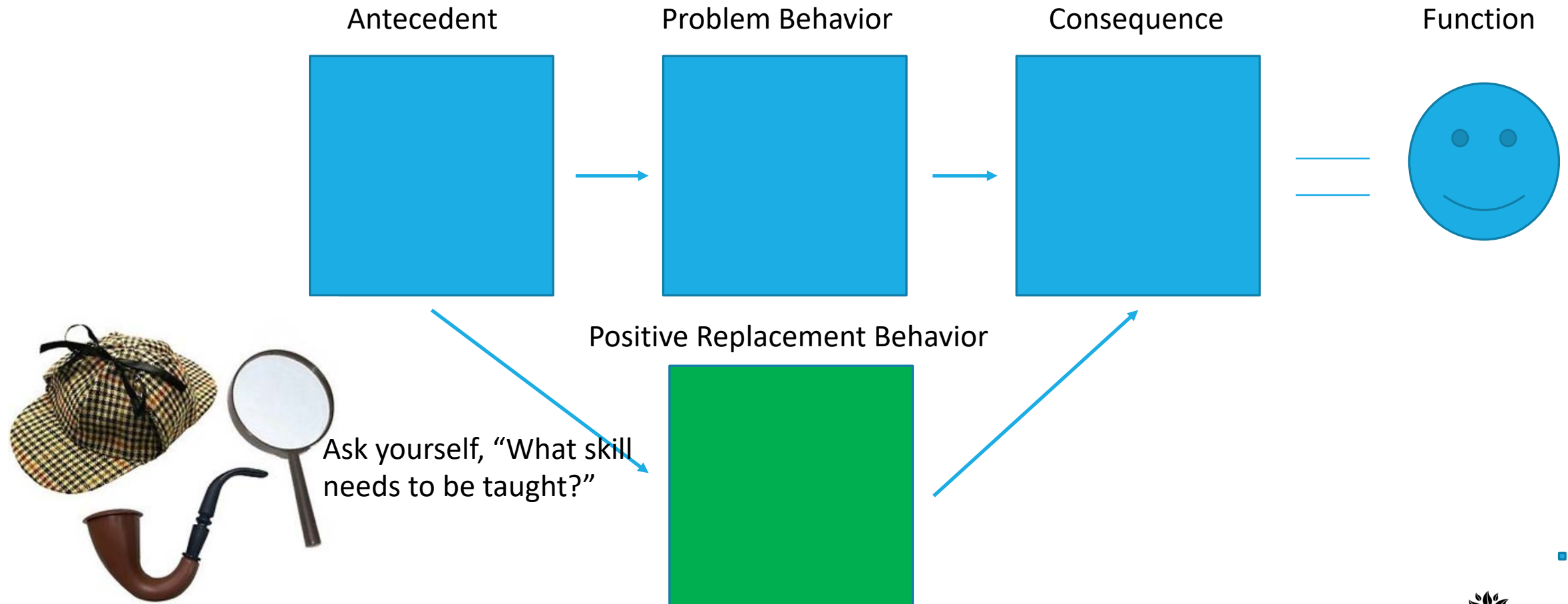
- Attention
- An undesired activity
- Sensory stimulation

All behavior serves a function!

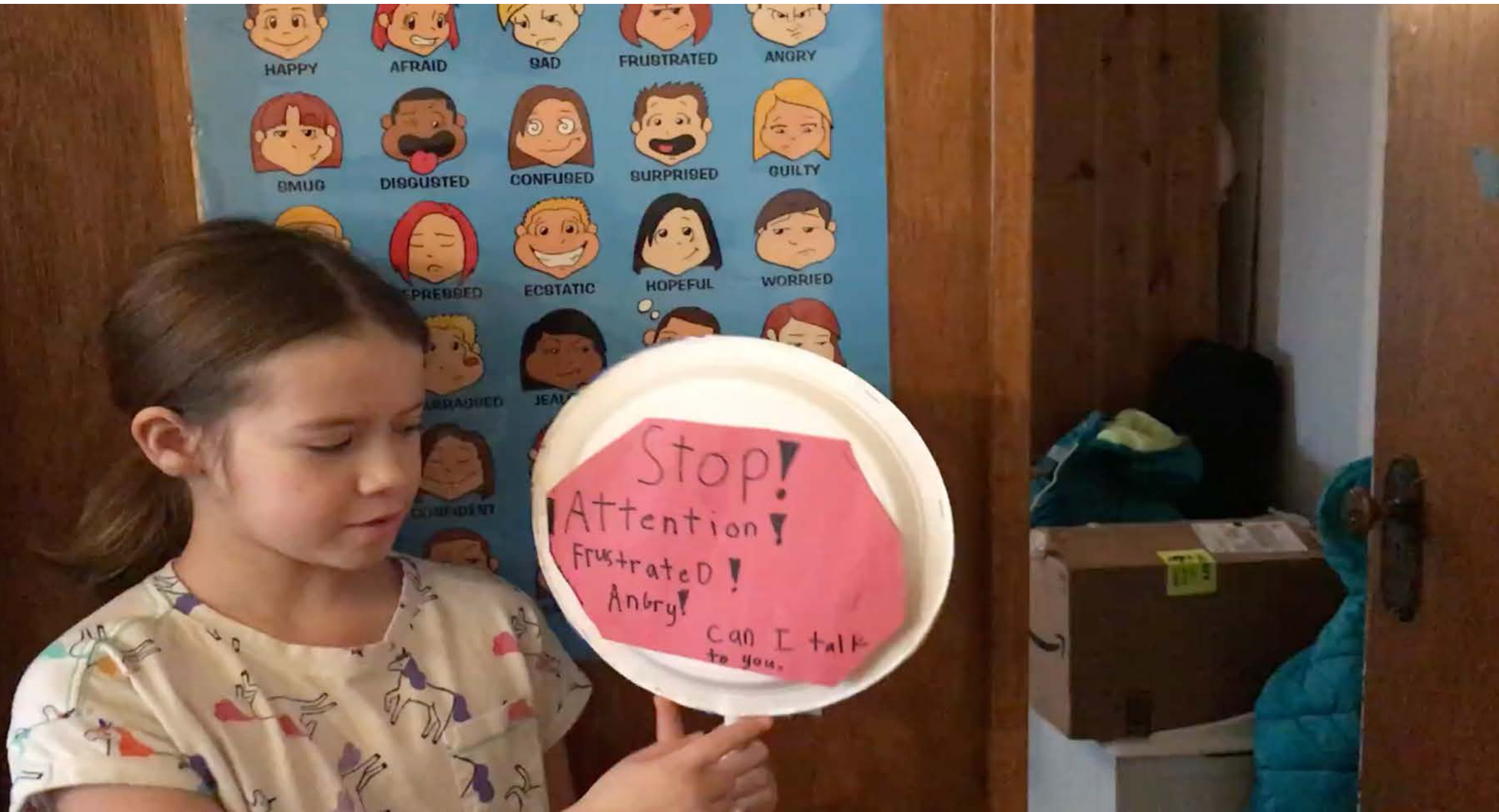
Behavior is a form of communication.



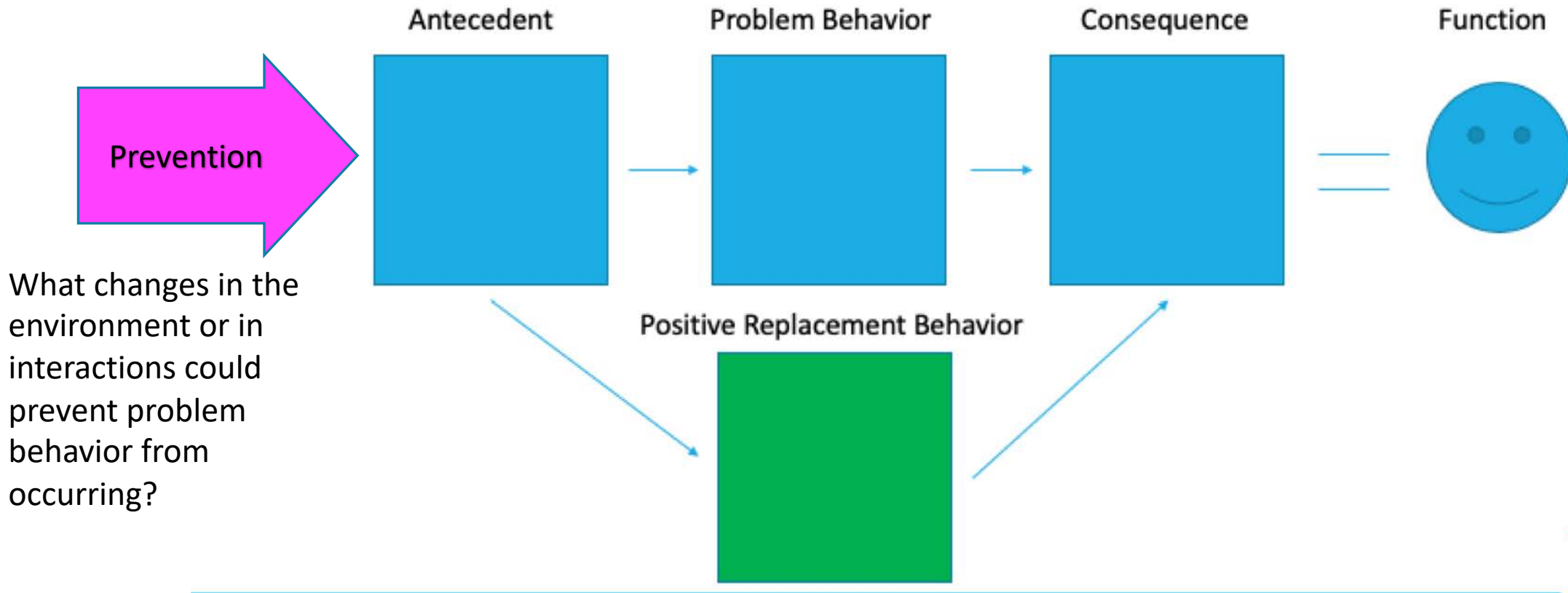
Finding a Positive Replacement Behavior



Lucia's Positive Replacement Behavior



Strategies to *Prevent* the Behavior



Strategy #1

Before the
Behavior



Establish predictable routines and physical environment.

With a familiar routines, your child will know what to expect which will result in less anxiety and frustration, as well as fewer tantrums or meltdowns!

Most important routines:

- Bedtime
- Morning
- Mealtime
- Homework
- Clean up/ Chores
- Drop off/ Pick up
- Any time of day when there is a consistent problem

Morning Routine							
							
Go potty	Wash face	Eat breakfast	Brush teeth	Put PJs in laundry	Get dressed	Pick up toys	Put on shoes
							
Well Done!	Well Done!	Well Done!	Well Done!	Well Done!	Well Done!	Well Done!	Well Done!

Bedtime Routine							
							
Pick up toys	Go potty	Brush teeth	Put dirty clothes in laundry	Bath time	Put on pajamas	Story time	Go to sleep
							
Well Done!	Well Done!	Well Done!	Well Done!	Well Done!	Well Done!	Well Done!	Well Done!

OUR DAILY ROUTINE	
	
	
Bathroom: <ul style="list-style-type: none">• Potty• Wash hands & face• Brush teeth• Comb hair	Pick up toys & tidy room
	
Make bed	Pack backpack
	
Get dressed	Put on PJs
	
Put dirty PJs in hamper	Put dirty clothes in hamper
	
Eat breakfast	Bathroom: <ul style="list-style-type: none">• Tub time• Potty• Wash hands & face• Brush teeth
	
Take vitamins	Read for 15 minutes
	
Goodbye hugs	Lights out



Strategy #2

Before the
Behavior

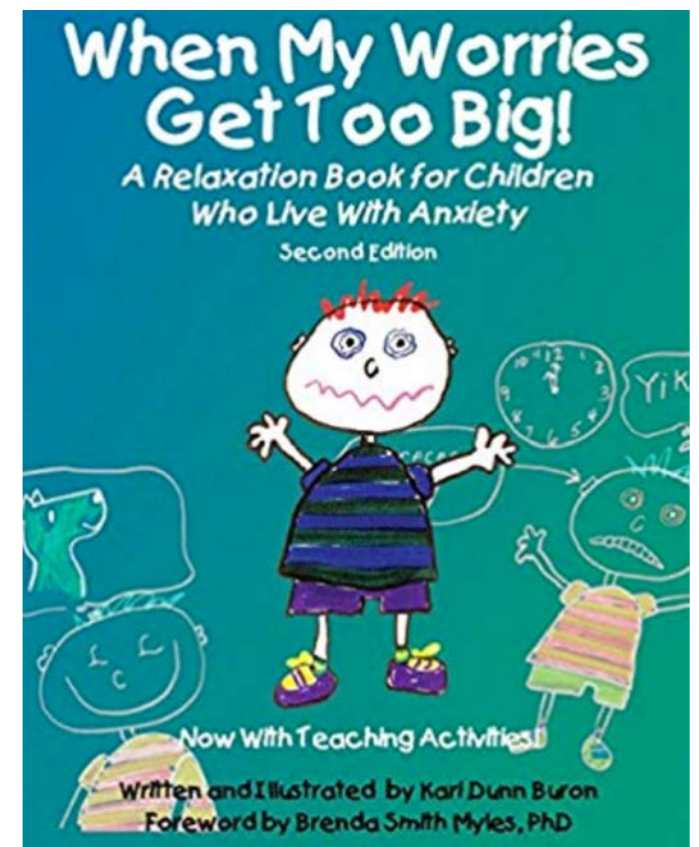
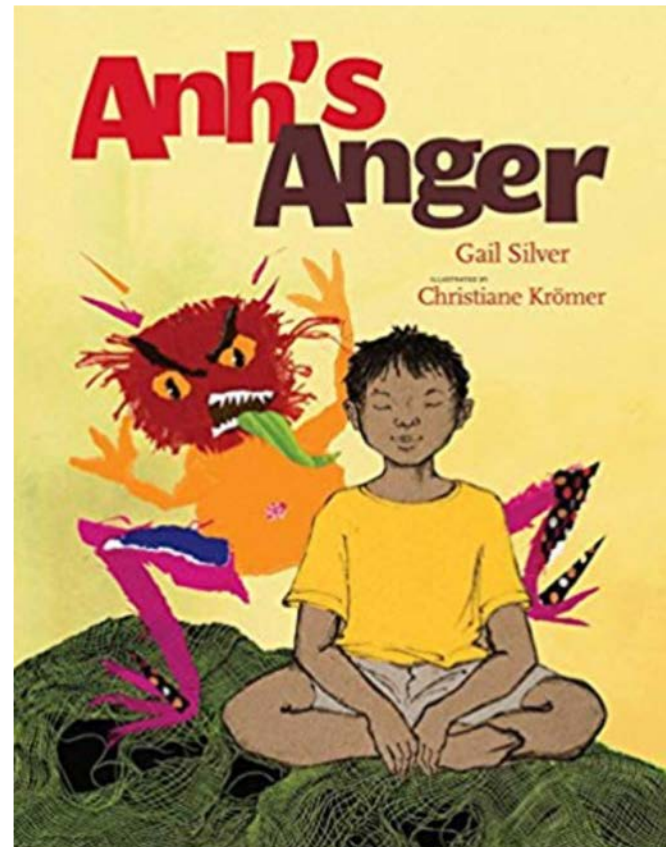
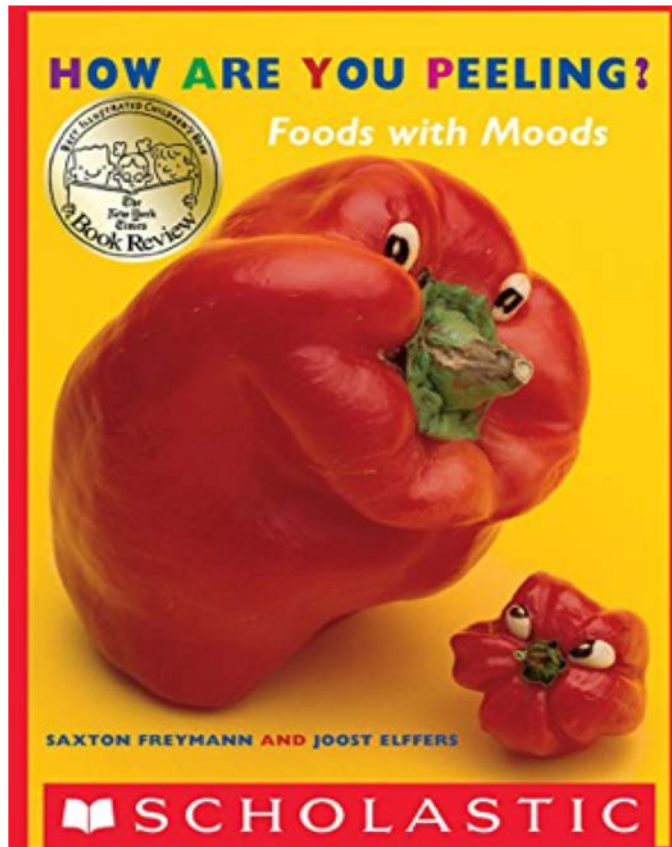


Teach positive behaviors, skills, and routines.

- Don't assume that the child understands what you want.
- Teach an emotional regulation vocabulary
- Teach routines
- Pre-correct/ prime for success
- Access appropriate therapies (speech, occupational therapy, physical therapy, ABA)



Books that Teach About Emotions



Curriculums that Teach About Emotions/ Behavioral Regulation

The ZONES of Regulation®

BLUE ZONE	GREEN ZONE	YELLOW ZONE	RED ZONE
Sad Sick Tired Bored Moving Slowly	Happy Calm Feeling Okay Focused Ready to Learn	Frustrated Worried Silly/Wiggly Excited Loss of Some Control	Mad/Angry Mean Terrified Yelling/Hitting Out of Control

FREE DOWNLOADABLE BLANK SCALES
The Incredible 5-Point Scale:
The Significantly Improved and Expanded Second Edition
Assisting students in understanding social interactions and controlling their emotional responses
Kari Dunn Buron and Mitzi Curtis

NEW! Picture word cards for younger children and those with more severe communication needs
A "5" Could Make Me Lose Control!
An activity-based method for evaluating and supporting highly anxious students
Kari Dunn Buron

A 5 Is Against the Law!
Social Boundaries: Straight Up!
An honest guide for teens and young adults
Kari Dunn Buron
2008 ASA LITERARY WORK OF THE YEAR

THE ZONES OF REGULATION®
A CURRICULUM DESIGNED TO FOSTER SELF-REGULATION AND EMOTIONAL CONTROL
Written and Created by Leah M. Kuypers, MA Ed. OTR/L
Foreword and Selected Lessons by Michelle Garcia Winner

Social Behavior and Self-Management
5-Point Scales for Adolescents and Adults
This award-winning tool now expanded for adults!
Kari Dunn Buron, MS
Jane Thierfeld Brown, EdD
Mitzi Curtis, MA
Lisa King, MEd
Foreword by Stephen Shore, EdD

When My Worries Get Too Big!
A Relaxation Book for Children Who Live With Anxiety
Second Edition
Now With Teaching Activities!
Written and Illustrated by Kari Dunn Buron
Foreword by Brenda Smith Myles, PhD

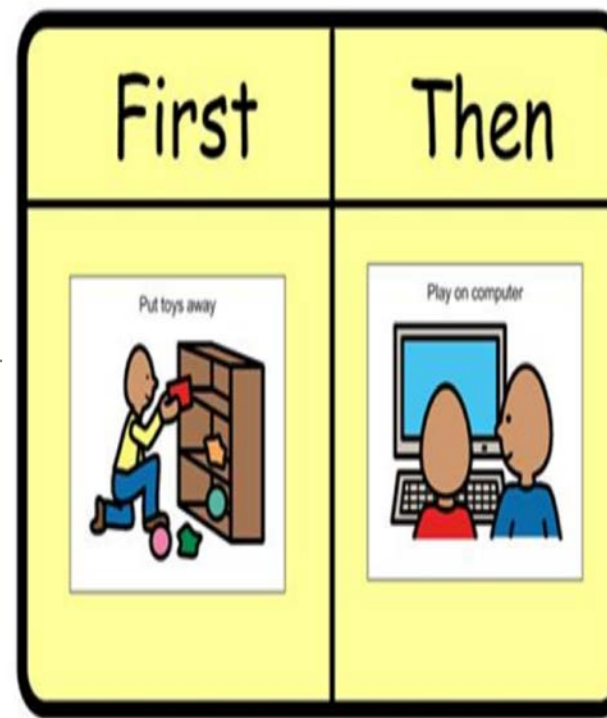
SUPERFLEX®... A Superhero Social Thinking® Curriculum
Superflex takes on Rock Brain and the Team of Unthinkables... A New Beginning...
WRITTEN BY STEPHANE MADRIGAL
ILLUSTRATED BY KELLY KNOPP
BY STEPHANE MADRIGAL & MICHELLE GARCIA WINNER

Whole Body Listening!
Larry wants to remind you to listen with your entire body

Strategy #3

Use visual supports.

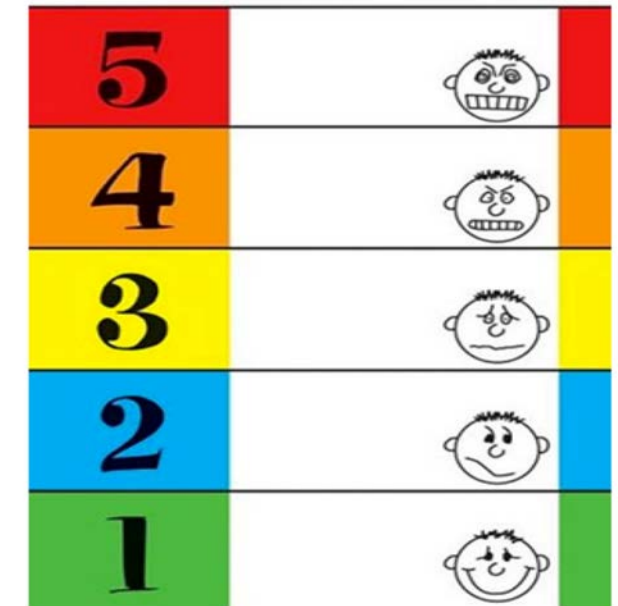
- Visual Schedules
- Visual of Emotions
- Visual Scales



HOW DO YOU FEEL?



CHECK IN



Strategy #4

Before the
Behavior



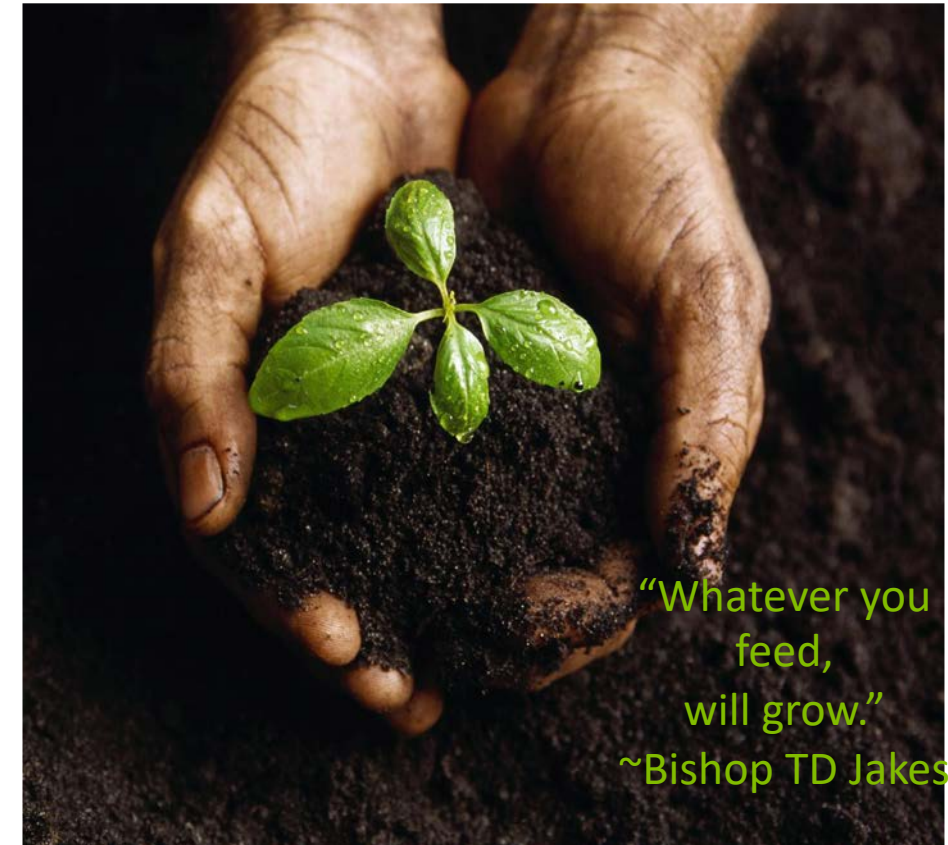
Use at least a 4:1 positive to corrective ratio.

+ Positive Interactions

- Specific praise
- Positive attention

- Negative Interactions

- Corrections
- Ignoring



“Whatever you
feed,
will grow.”
~Bishop TD Jakes



Strategy #5

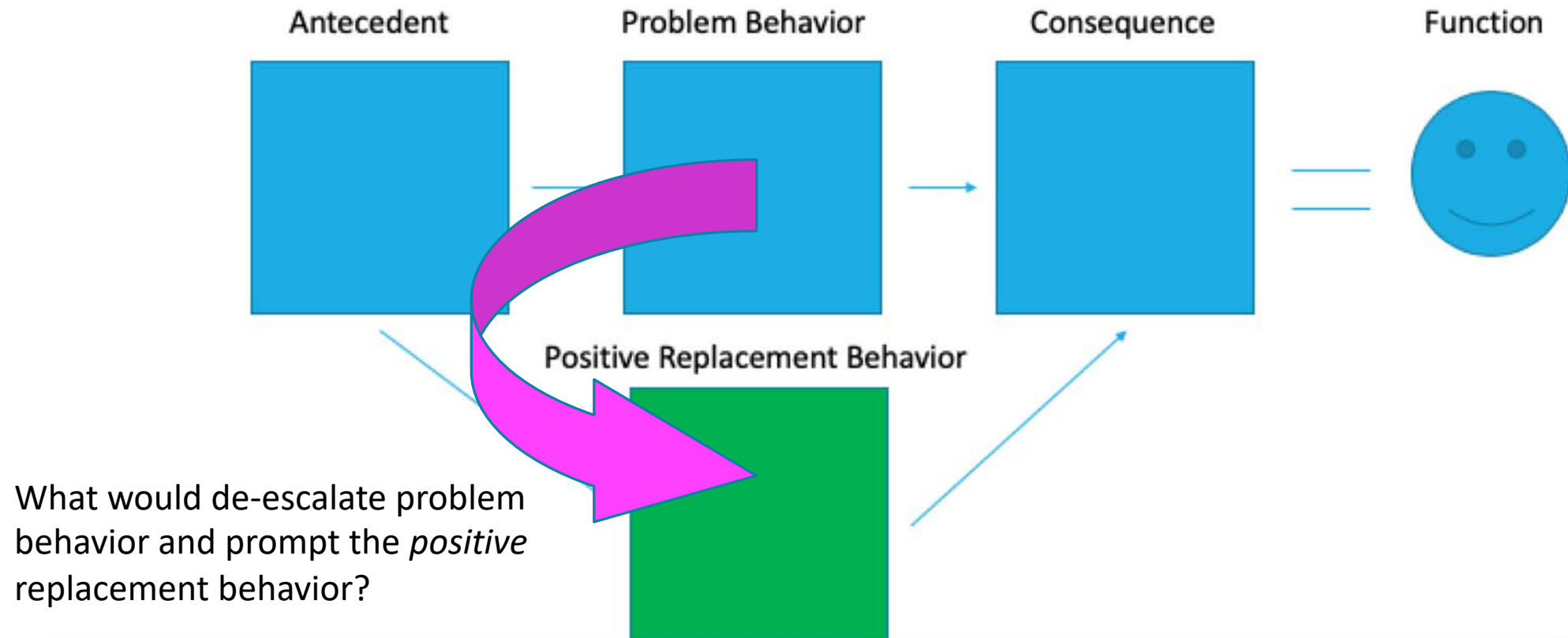
Use positive acknowledgement systems to increase behaviors.

Steps to setting up an acknowledgement system:

- Collaboratively choose one behavior you would like to increase
- Pick a token you will give each time you see the behavior
- Determine an activity or item that the child can obtain
- Look for the positive behavior and specifically acknowledge it while putting the token on the chart.



Strategies for *During* the Behavior



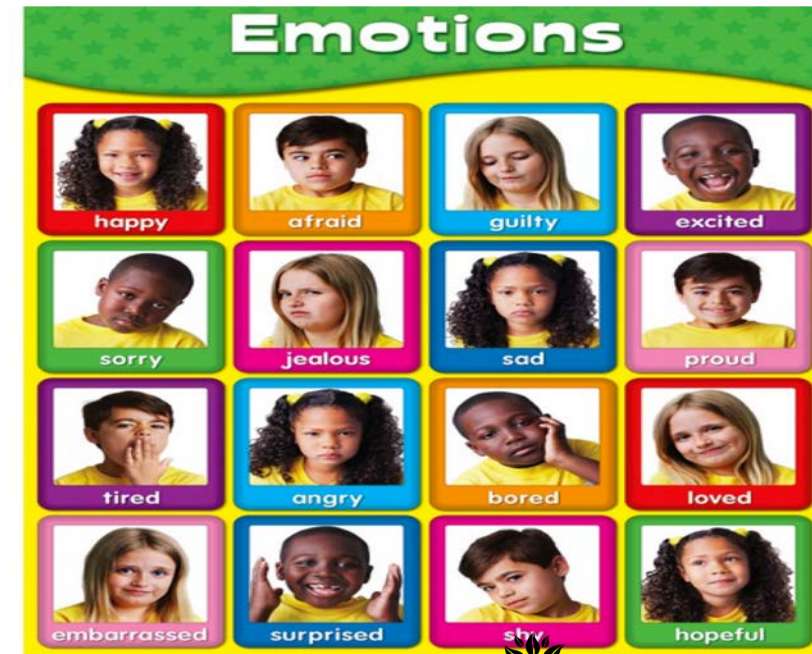
Strategy #6

Name it to tame it.

- During problem behavior, try to label the emotion for the child.
- Naming the emotion can have a regulating effect and can also teach emotional vocabulary over time.

Examples:

- “I see you are feeling so *frustrated* right now.”
- “You feel so *disappointed* right now.”
- “That was so *surprising*!”



Strategy #7

Limit use of words during a behavioral episode.

When you speak:

- Use short, direct sentences telling the child what to do rather than what not to do
- Prompt the positive replacement behavior
- Maintain calm tone of voice
- Keep an open posture

Do not:

- Engage in a power struggle
- Use a lot of words
- Inadvertently reinforce the behavior with negative attention.



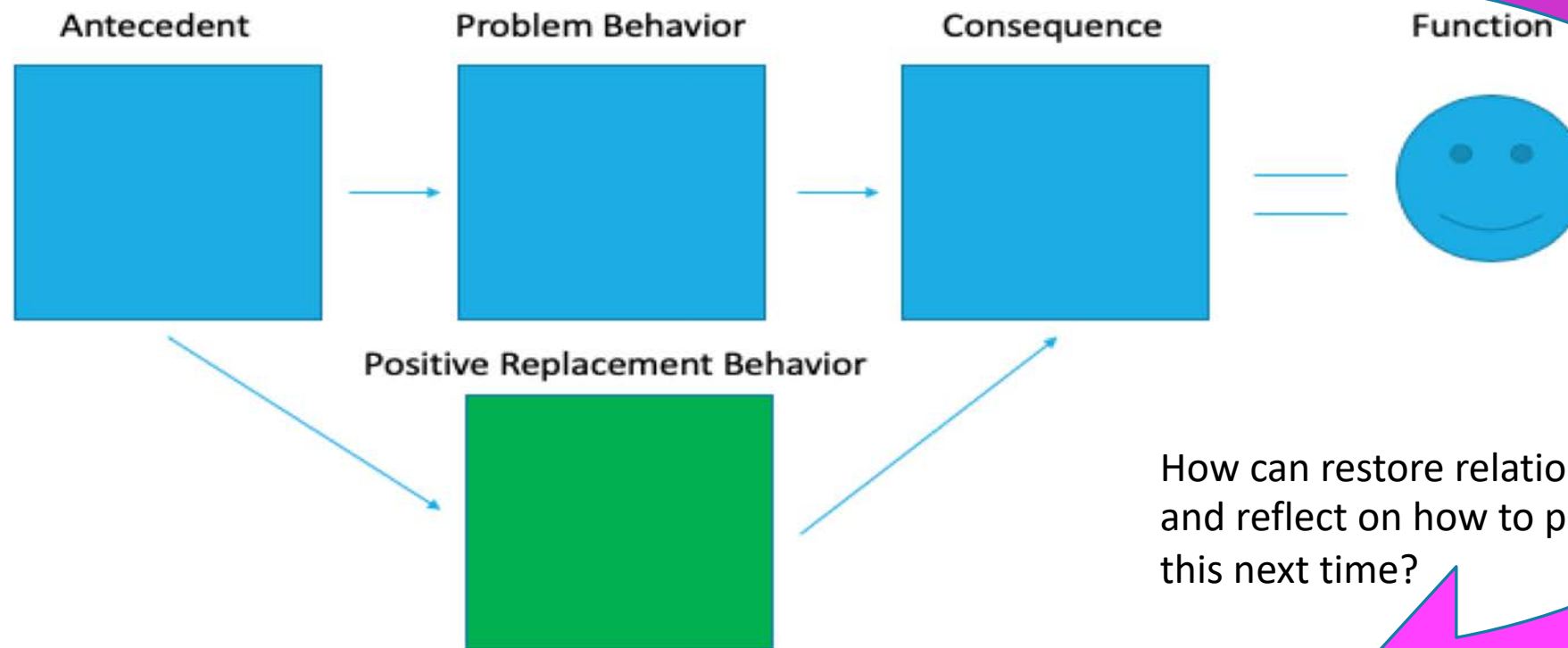
Strategy #8

Use a predictable response strategy.

- Set limits by offering choices (i.e., prompt the positive replacement behavior)
- Allow space and time to process
- Remove the audience (i.e., other family members, visitors)
- Praise any approximation at using a positive behavior



Strategies for *After* the Behavior



Strategy #9



After the
Behavior

Use predictable, developmentally appropriate and restorative consequences.

This helps by:

- Providing a guide for adult behavior/ decreasing the likelihood of overreacting
- Decreasing both the caregiver and the child's anxiety
- Decreasing opportunities for limit testing
- Improving the child's relationship with the family and community
- Communicating to others that adults care



Examples of Consequences



After the
Behavior

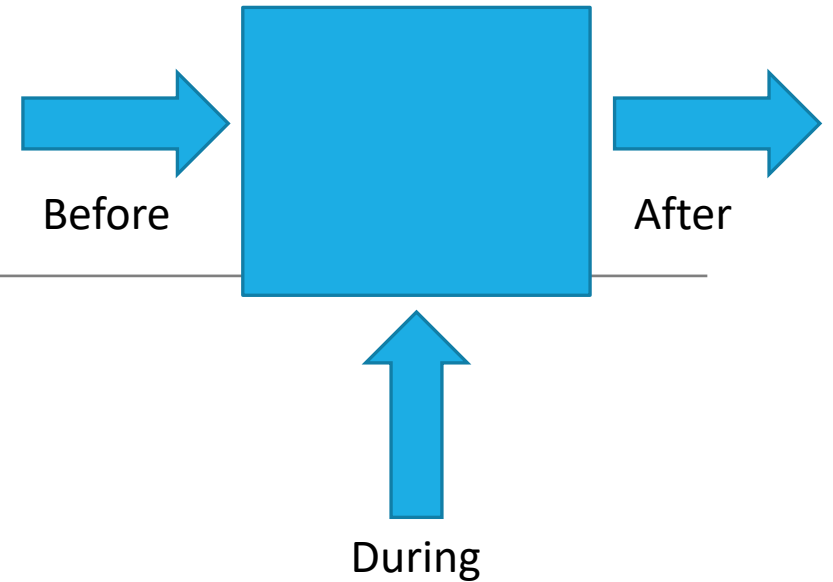
- Positively recognize *any* attempt to use the positive replacement behavior
- Return to the routine and schedule (for lower cognitive levels)
- Use natural consequences when possible (i.e., no longer having the object that was broken in a tantrum, not earning points for that period)
- Link consequences to the behavior (i.e., wiping down the table written on when angry, short time away if aggression to gain attention)
- Restore relationship by apologizing or discussing what happened- thinking of alternative responses for the future



Strategy #10

Take care of yourself.

- Keep physically and emotionally healthy
- Take your own break after the behavior
- Debrief with a loved one
- Assemble your support team
 - Use your community for support (family, religious/ spiritual affiliation, friends)
 - Seek professional help if needed



Seek Professional Help If:

- Behavior is getting worse over time
- Behavior is getting worse rapidly
- Behavior episodes last over an hour or occur several times per week
- Receiving suspensions or other forms of punitive discipline (i.e., missing recess, being sent to the office) at school
- One or more family members is experiencing ongoing distress caused by the behavior(s)
- Current forms of support are not feeling sufficient
- Behaviors include:
 - Violent rages
 - Severe aggression or property damage
 - Danger or harm to self or others



Types of Professional Help

- Regional Center/ State Services for Individuals with developmental disabilities (look up your state at: <https://www.thearc.org/>)
- Applied Behavior Analysis services (ABA Therapy)
- School district special education services, ages 3-22 (i.e., Behavioral Goals added to IEP, Behavior Intervention Plan, Functional Behavioral Assessment, Psychoeducational Assessment, special class placement, nonpublic school)
- Health care provider or private: Social worker, Therapist, Board Certified Behavior Analyst, Speech Therapist, Occupational Therapist, Psychologist, Neuropsychologist, Psychiatrist, Developmental Pediatrician, etc.
- ACRC Multidisciplinary Clinic or Single Specialty Clinic
- Advocate/ Lawyer



Recommended Reading for Parents

The Explosive Child, by Ross Green

From Emotions to Advocacy, 2nd Edition, Pam Wright and Pete Wright

How to Talk So Kids Will Listen & Listen So Kids Will Talk and *How to Talk So Teens Will Listen & Listen So Teens Will Talk*, by Adele Faber and Elaine Mazlish

Parenting a Child who has Intense Emotions: Dialectical Behavior Therapy Skills to Help Your Child Regulate Emotional Outbursts & Aggressive Behaviors and *Parenting a Teen Who Has Intense Emotions*, by Pat Harvey and Jeanine Penzo

Positive Discipline and *Positive Discipline for Teenagers: Empowering your teens and yourself through kind and firm parenting*, by Jane Nelson and Lynn Lott

Smart but Scattered: The Revolutionary “Executive Skills” Approach to Helping Kids Reach Their Potential and *Smart but Scattered Teens*, by Peg Dawson and Richard Guare.

Understanding Girls with ADHD, by Kathleen Nadeau, Ph.D., Ellen Littman, Ph.D. and Patricia Quinn.

The Whole Brain Child by Dan Siegel and Tina Payne Bryson

Resources

For Teaching Emotional/ Behavioral Regulation and Problem Solving:

Social Thinking <https://www.socialthinking.com/>

- *When my Worries Get Too Big*, by Kari Dunn Buron
- *Zones of Regulation*, Leah Kuypers, <http://www.zonesofregulation.com/index.html>
- The Incredible Five Point Scale, by Kari Dunn Buron
- A Five is Against the Law, by Kari Dunn Buron
- Superflex Curriculum by Stephanie Madrigal and Michelle Garcia Winner

Lives in Balance (Ross Green) <https://www.livesinthebalance.org>

Books for Children:

Ahn's Anger, by Gail Silver

Steps and Stones, by Gail Silver

When Sophie Gets Angry-- Really, Really Angry, by Molly Bang

How are you Peeling?, by Saxton Freymann

Attention, Girls!: A Guide to Learn All About Your AD/HD, by [Patricia O. Quinn](#)



References

- Bardsley, MZ, Kowal, K, Levy, C, Gosek, A, Ayari, N, Tartaglia, N, Lahlou, N, Winder, B, Grimes, S, Ross, JL. 2013. 47, XYY syndrome: clinical phenotype and timing of ascertainment. *J Pediatr* 2013 Oct; 163(4): 1085-94.
- Isaacs Cover, V. 2012. *Living with Klinefelter Syndrome (47, XXY), Trisomy X (47, XXX) and 47, XYY*.
- Ross, J, Roeltgen, D, Kushner, H, Zinn, A, Reiss, A, Bardsley, M, McCauley, E Tartaglia, N. 2012. Behavioral and social phenotypes in boys with 47, XYY Syndrome or 47, XXY Klinefelter Syndrome. *Pediatrics* Volume 129, Number 4, April 2012.
- Ross, J, Tartaglia, N, Merry, D.E., Dalva, M, Zinn, A.R. 2015. Behavioral phenotypes in males with XYY and possible role of increased NLGN4Y expression in autism features. *Genes Brain Behv.* 2015 February ; 14 *2): 137-144.
- Tartaglia, N, Ayari, N, Howell, S, D'Epagnier, C, Zeitler, P. 2011. 48, XXYY, 48, XXXY, 49, XXXXY syndromes: not just variants of Klinefelter syndrome. *Acta Paediatr.* 2011 June ; 100(6):851-860.
- Tartaglia, N, Ayari, N, Hutaff-Lee, C, Boada, R. 2012. Attention-Deficit Hyperactivity Disorder Symptoms in children and adolescents with sex chromosome aneuploidy: XXH, XXX, XYY, and XXYY. *J Dev Behav Pediatr.* 2012 May; 33(4): 309-318.
- Tartaglia, N, Howell, S, Sutherland, A, Wilson, R, Wilson, L. 2010. a review of trisomy X (47, XXX). *Orphanet Journal of Rare Diseases*, 2010, 5:8
- Tartaglia, N, Wilson, R, Miller, J, Rafalko, J, Cordeiro, M.S., Davis, S, Hessel, D, and Ross, J. 2017. Autism spectrum disorder in males with sex chromosome aneuploidy: XXY/ Klinefelter syndrome, XYY, and XXYY. *J Dev Behav Pediatr*, 2017 Apr. 38(3): 197-207
- van Rijn, S, Stockmann, L, van Buggenhout, C, van Ravenswaaij-Arts, C, Swaab, H. 2014. Social Cognition and underlying cognitive mechanisms in children with an extra X chromosome: a comparison with autism spectrum disorder. *Genes, Brain and Behavior* (2014) 13: 459-467.
- Wigby, K, D'Epagnier, C, Howell, S, Reicks, A, Wilson, R, Cordeiro, Tartaglia, N. 2016. Expanding the phenotype of triple X syndrome: A comparison of prenatal versus postnatal diagnosis. *Am J Med Genet Part A* 9999A:1-12