



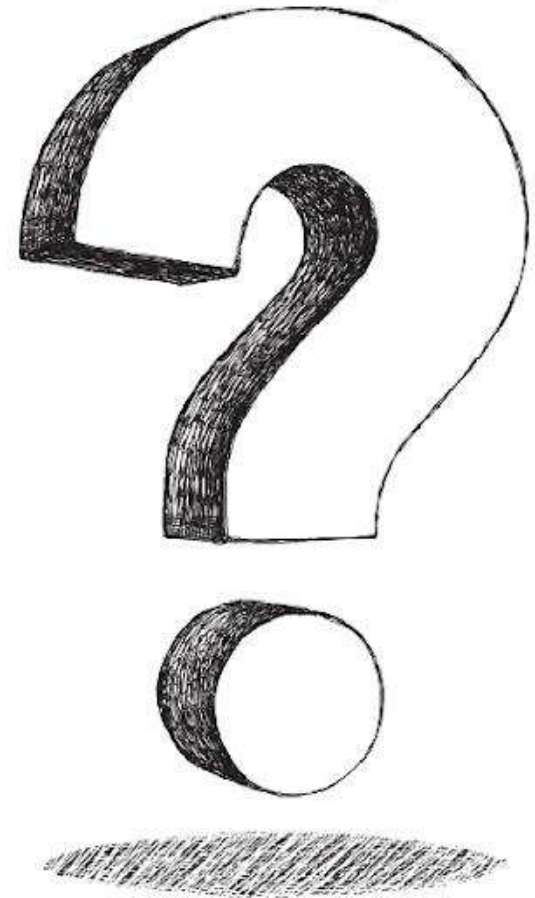
Supporting dysregulation, proactive strategies & regulation

Aims

1. Understand what behaviour is
2. Understand that all behaviour has a cause
3. Establish what the common causes for heightened reactions for children with SEN
4. How to understand what the behaviour is telling us
5. Create a plan for how we and others can help



What are Behaviours and Behaviours of Concern?



Understanding Behaviour

- What is behaviour?
 - Everything we do (getting out of bed, saying hello, making a cup of tea and even breathing and blinking)
 - Is in response to a stimulus
 - Is learned (apart from reflexes)
 - Is measurable
 - Behaviour is a form of communication!



What are behaviours of concern?

‘Culturally abnormal behaviour of such intensity, frequency or duration that the physical safety of the person or others is likely to be placed in serious jeopardy.....

.....or behaviour which is likely to seriously limit use of or result in the person being denied access to ordinary community facilities’

What could be the issue with terms such as “Behaviours of concern” or “Behaviours that challenge”?





Common causes of dysregulated reactions



Emotional Regulation

Q: What does it LOOK like and FEEL like if someone is emotionally regulated?

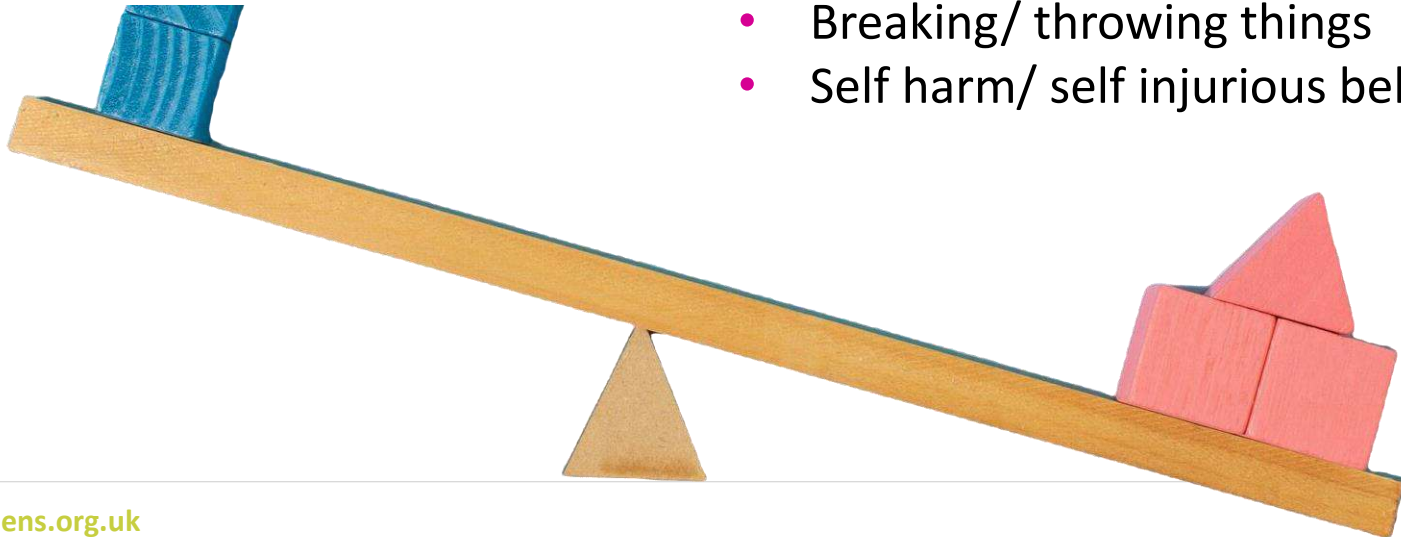
- Calm, focused and able to concentrate
- Willing to learn and participate
- Balanced and in control of their mood and behaviour
- Ask questions and join in discussion
- Visible/audible signs of engagement (smiling, nodding, laughing)
- Feels safe and connected



Signs of Dysregulation

Q: What does it LOOK like and FEEL like if someone is dysregulated?

- Anxiety (worrying, fretting OR irritability and anger)
- Tired/ low energy
- Tears or inappropriate laughter
- Disruptive (noises, fidgeting)
- Withdrawn/ neglecting self care
- Wandering off/ running away
- Targeting others - hitting, name calling
- Shouting, swearing
- Breaking/ throwing things
- Self harm/ self injurious behavior



Iceberg Model of Behaviour

All too often focus is put on the behaviour. We ignore what is happening to the child/ young person. What the behaviour is telling us! i.e. are there any skill deficits? i.e. communication

















- Sensory processing
- Predictability?
- Life stresses?
- Health issues?
- Meaningful activities?
- Choices
- Cognitive ability

The young person feeling miss-understood and not validated

For example,
angry outbursts

- Fears and phobias
- Literal interpretation
 - Poor communication skills
 - Misinterpretation of events
 - Overloaded by sensory stimuli
 - Poor understanding of social rules

The Key Differences Between Compliance-Based and Interoception-Based Approaches

Compliance-Based	Interoception-Based
<p>Focuses on controlling behavior</p> 	<p>Focuses on deeply understanding behavior sources</p> 
<p>Blame is on the child (how can the child change the oppositional, defiant, attention seeking, avoidant behavior?)</p> 	<p>Ownership is on the adult (how can I change my behavior to be a better support?)</p> 
<p>Assumes to know the why based on observable behavior</p> 	<p>Seeks to determine the "why" via inner curiosity</p> 
<p>Forces child to mask or hide inner experience to comply</p> 	<p>Validates and supports the child's unique inner experience</p> 
<p>Use of external forms of motivation</p> 	<p>Builds internal motivation thru self-understanding</p> 
<p>Rooted in a power hierarchy (please me to earn your reward)</p> 	<p>Rooted in safe relationships (do well because you feel safe with me)</p> 
<p>Forms conditional self-worth (good behavior=good child)</p> 	<p>Creates unconditional self-worth (your feelings are valid)</p> 
<p>May see immediate results to the detriment of mental health</p> 	<p>Gradual results with long term positive mental & physical health</p> 



Interoception

UNDER-SENSITIVE

Unaware of hunger pains or thirst, needs reminders.

Appears not to feel pain, an itch can hurt or pain, feel ticklish.

Cannot tell when they are feeling unwell or tired.

Won't notice when they need the toilet - leading to accidents.

May experience vague internal sensations but cannot identify where these come from in the body or what emotions they represent. This can cause them to feel confused, distracted, or anxious and lead to meltdowns.

OVERSENSITIVE

May feel constant aches and pains, low tolerance to feeling unwell.

Always hungry or thirsty, may lead to overeating.

Hyper aware of touch and texture.

Constantly need the toilet to avoid discomfort.

Experiences emotions very intensely, leading to overwhelm and meltdowns.

Judged as impatient and 'over the top' for reactions they can't control.

Common Causes

Demand avoidance profile

Cognitive ability (learning disabilities)

High levels of anxiety

Unpredictable, ambiguous or

Health reasons & Pain

Differences associated with a diagnosis (ASC, TS, ADHD ETC.)

Unpredictability & loss of control!!!

Social anxiety due to social communication differences

unpredictable, picking up on, regulating

processing differences

Negative thinking/ low self-esteem

Impoverished social networks

Previous negative life events & Trauma

Communication differences (2/3 of children excluded have communication difficulties) Royal college of Speech & Language



Behaviour as a Form of Communication



Behaviour as a form of communication

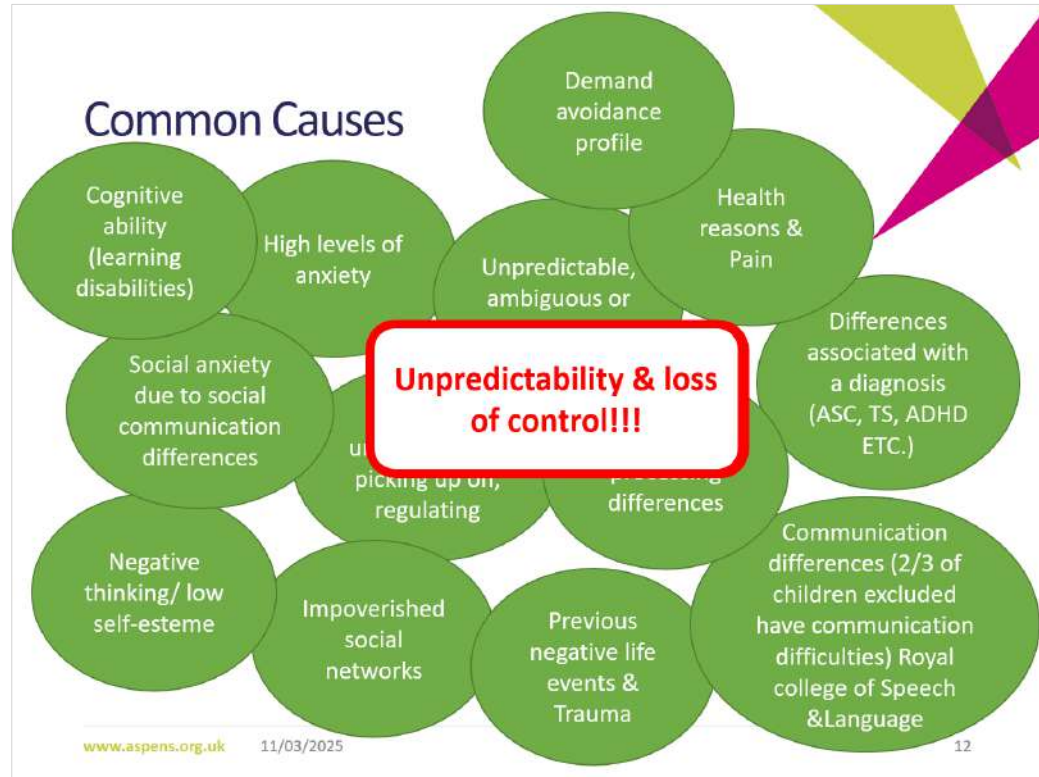
Think of a baby or toddler crying.

1. What is this behaviour telling us?
 2. Why do they present in this way?
- There is a need (attention/ help)
 - They have yet to develop the verbal skills to communicate
 - When they cry people respond
 - This reinforces the behaviour of initiating interaction



What do dysregulated reactions tell us?

That there is a need!!!



Finding out the Cause

- Observe the behaviour
- Keep a record: days, times, what was the setting (where they were at the time, who else was there, how many people) (what were they and doing) (what was the behaviour, what happened) (what was the behaviour)
- Talk to the child, use tools (mapping, emotion cards, grading activities etc.)
- Talk to others such as teachers and support workers. Can they carry out observations?
- Another way is to carry out a functional assessment in order to establish the function behind it (note we still need to know more than just the function)



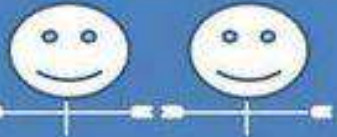

Remember as parents you are the experts & know your children better than anyone!



© CanStockPhoto.com

Establishing its function (what it is telling us)

4 Functions of Behaviour

		What It Does For Me	When Does it Happen
S Sensory		Provides preferred sensory experiences; behaviour feels good to do	Anytime, even when alone. Especially if I'm anxious
E Escape		Removes undesired activities or interactions	When task is too: hard, easy, boring, or scary
A Attention		Provides access to people or interactions	When I want social interaction
T Tangibles		Provides preferred items or activities	When I want a preferred item or activity

ABC Charts

ABC Data Sheet – Version 2

Record each instance of one behavior, as well as the antecedent (what happened right before the behavior), the consequence (what happened right after the behavior), and what the possible function of that behavior was (what outcome did it achieve for the child/student?).

Describe the target behavior: _____

Date/ Time	Setting Events (what's going on at that day/time? Tired/didn't sleep well, substitute teacher, etc.)	Antecedent	Behavior	Consequence	Function (Attention, Access to items/ activities, Escape, Sensory)

ABC Charts – what is the trigger, behaviour, consequence & function?

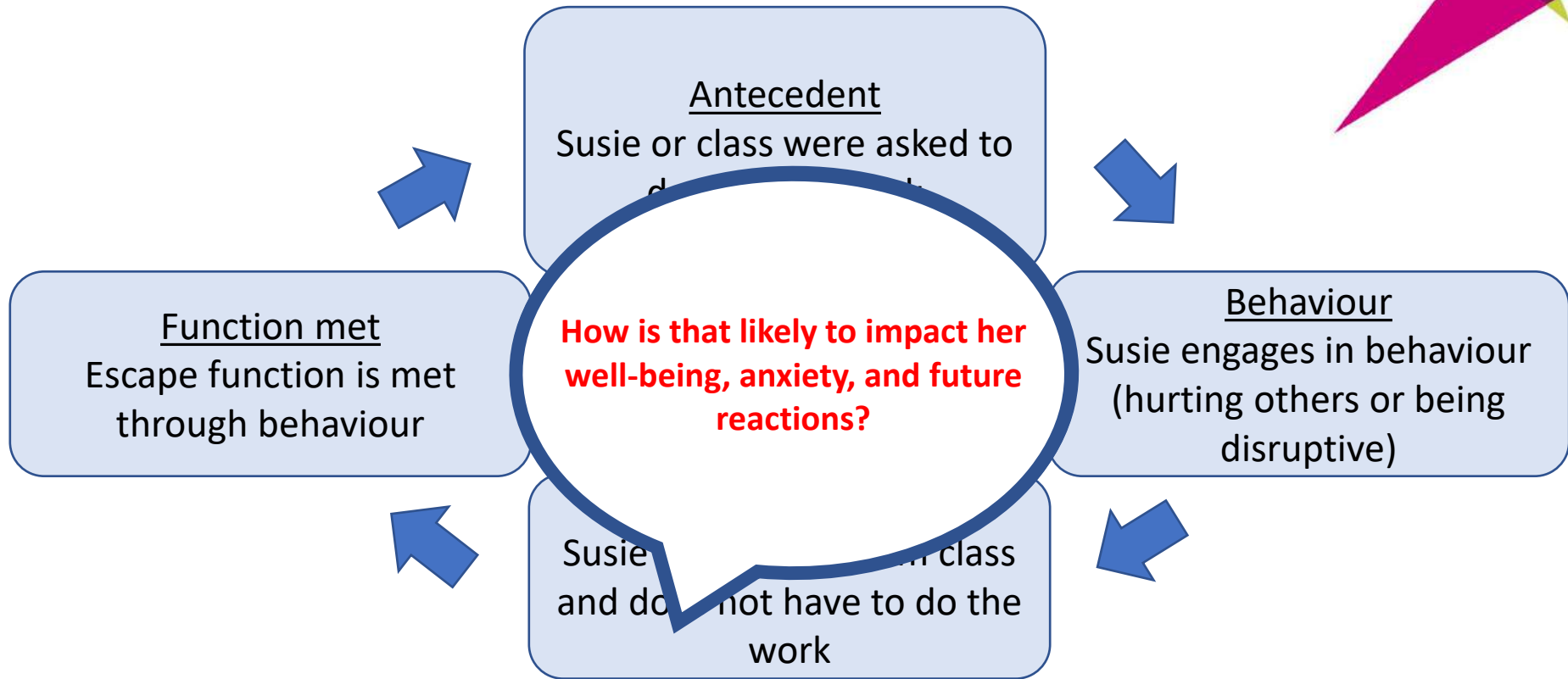
A-B-C DATA SHEET

NAME: _____

OBSERVER: _____

Date/Time	Antecedent: Setting/Situation – What was happening before the behaviour? (Include setting events such as illness)	Behavior: What did the child do? (Include frequency, intensity & duration)	Consequence: How did you respond? (Include reactions of others, such as peers)
3/3/15	The class were asked to complete their maths worksheets.	Susie began throwing pieces of paper at Ben.	The teacher put Susie outside of the room until the others had finished because she was distracting Ben and others.
5/3/15	The teacher was at the front of the room instructing students on spellings.	Susie pulled Becca's ponytail and Becca started to cry.	The teacher sent Susie to the principal's office.
5/3/15	Students were asked to fill in a page in their maths workbooks.	Susie threw her books off her desk onto the floor.	The teacher reprimanded Susie and put Susie sitting outside the door to think about what she had done.

Cycle of behaviour



Why is it likely that such behaviour keeps on happening?

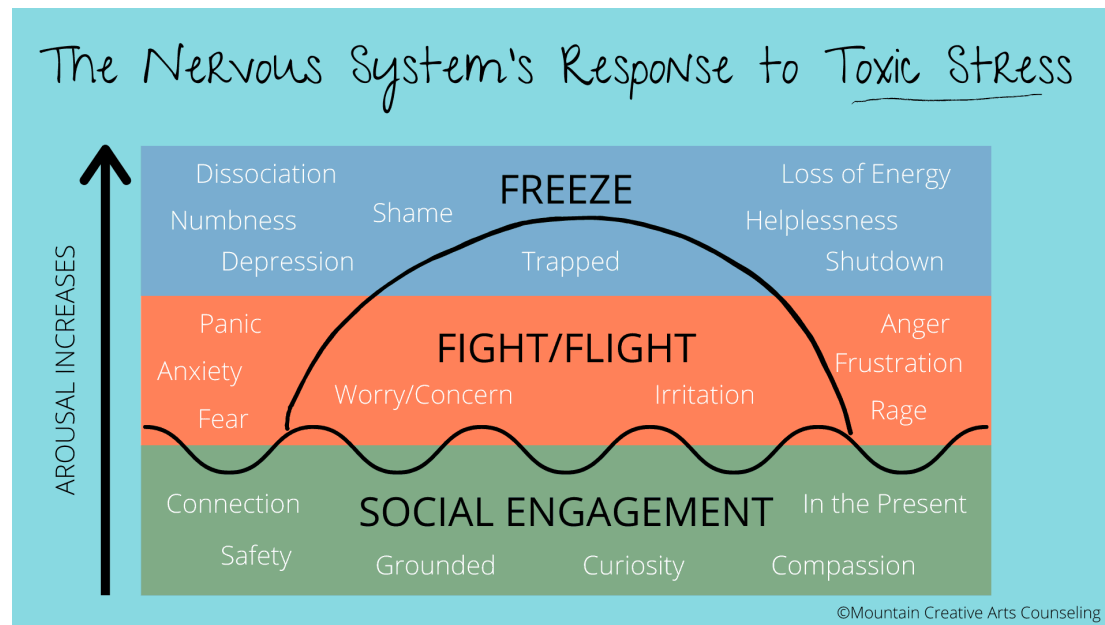


High Levels of Anxiety & dysregulation



Anxiety & Dysregulation

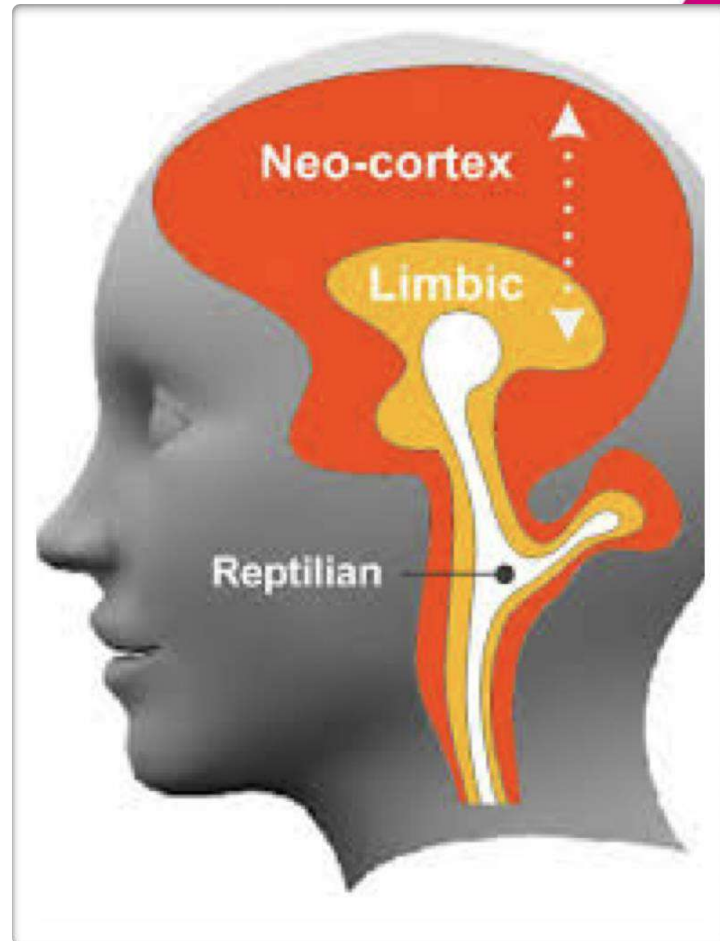
- 3 types of behaviour - fight, flight and freeze
- Also important are **masking** and **fawning**
- All have the same function to avoid, escape or protect the perceived danger
- They are NOT “naughty” or “bad”, it is the brains reaction to a perceived danger. It cannot, at that moment be controlled!
- Remember all of our behaviour is a form of communication and behaviours that challenge are telling us that there is a need!



What happens to the brain in crisis

- Message of danger is sent from senses
- Amygdala and brain stem (action brain) respond
- Neo-cortex (thinking brain) and Limbic (emotions brain) shut off
- Stress hormones are released into the body which goes into fight, flight or freeze
- Dysregulation happens!

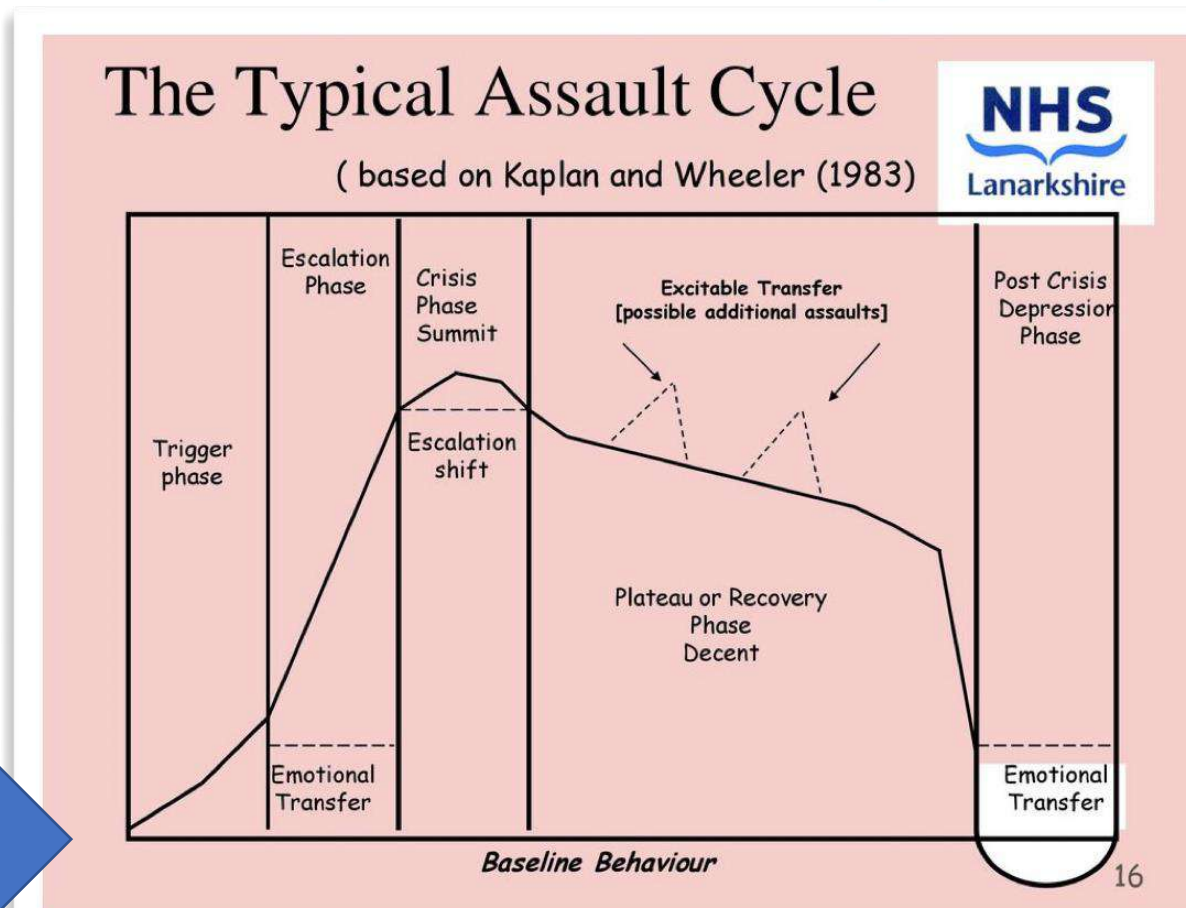
*Photo from researchgate.net



Be aware of spikes in anxiety

- As the trigger happens, anxiety rises
- If nothing is done to reduce anxiety, it continues to rise
- It reaches the crisis phase (fight, flight or freeze)
- The body begins to calm and anxiety reduces
- Stress hormones remain, the individual is at risk of spikes when faced with other triggers

Important part of support should happen here!!





Putting a Plan in Place & How to Help



2 types of plan

- **Reactive** – what to do at point of crisis
- **Proactive/ Preventative** – how the behaviours can be reduced
- Both of these types of plan are important

However
proactive
support is key
to reducing
behaviours!!!



What's
the
plan?

Proactive Strategies

1. Complete observation/ recording to better understand triggers, what your child finds difficult
 - Think about the causes we have discussed. For example:
 - Health and Diagnosis
 - Current situation (additional stressors, change, demands, expectations)
 - Previous experiences
 - Adaptions to your and others approach
 - Adaptions to the environment
 - Are they trying to gain or avoid something? What they find difficult
2. Provide a safe space for moments of crisis
3. Put a plan in place to help with what they are finding difficult
 - **Reduce ambiguity – Increase predictability**



Proactive Strategies - Plan

Help them (and us!) to understand their triggers and anxiety and put a plan in place to follow

- What it feels like (the signs for them)
- How to communicate when anxious
- What to do (step by step plan, including calming strategies)
- What others can do to help



	What it feels like	What it looks like	What can I do about it?
5 	 Feels like Bomb . I can't seem to control my angry feelings. I need help.	<ul style="list-style-type: none"> * Shouting * Crying * Throwing Things * Banging Things 	 <ol style="list-style-type: none"> 1. I can leave the room to an agreed safe space to calm down. 2. I can go for a walk
4 	 Feels like Red . Everything seems to be going wrong.	<ul style="list-style-type: none"> * Head feels like it's overheating * Start to say mean or hurtful things * Some crying * Take things away from people * Banging on things 	 <ol style="list-style-type: none"> 1. I can go for a walk 2. I can hold my angry bear or squeeze my stress ball 3. I can bring out my calm box and do some fine-motor activities
3 	 Feels like Chuck . I might accidentally say or do something I didn't mean to.	<ul style="list-style-type: none"> * <u>Anxious/Worried</u> * Don't want to talk about it * A little scared * Tummy starts to hurt * Repeating Words 	 <ol style="list-style-type: none"> 1. Take a movement break Deep breathing 2. I can have a drink of water 3. Playing with a favourite toy/reading a book.
2 	 Feels like Matilda . You are finding things a little hard.	<ul style="list-style-type: none"> <u>Might be hard for me but</u> * I will try to do it * I will let my teachers help me * I will listen 	 Self talk, Reassure myself that I can do it! Remind myself about my tokens and the rewards I will get
1 	 Feels like Stella . Optimistic and Bright. I'm good at this!	<ul style="list-style-type: none"> * Happy * Calm * Peaceful * Interested in something 	 Stay happy!

Proactive Strategies - Plan

Make adaptations and put in support

- Identify priorities/ reduce some demands/ build slowly brick by brick
- Support communication
- Adapting the environment/ activities (sensory tool kit, time out and movement breaks, break activities down into manageable steps)
- Providing a predictable environment (visual supports, prepare for new experiences, Social Stories, emotional understanding/ regulation)
- Support with worries/ negative outlook
- Graded exposure/ remove unnecessary
- Try to think about what we do (predictability)
- Psycho education (understanding themselves)
- Help others (teachers etc) to understand (causes, signs, how to help, adaptations required including recovery period)
- **UNDERSTANDING & VALIDATION!!!**

**MAKING THEIR WORLD
PREDICTABLE WILL BE KEY!!!!**



Tips for Reactive Strategies

Have something they can use to exert energy from. Dest

Try to remain calm in your presentation. Reduce verbal

Ask the child the way that you/ can help

- Breathing exercises
- Loud gargling of water
- Massage - Foot or shoulders
- Exposure to something cold (cold shower, cold compress on back or shoulders, splashing face, drinking cold water, sucking on ice cubes)
 - Dots and squeeze
 - Sensory tool box
 - Exercise
- Music (humming and singing)
 - 54321

a plan for in other nents/ new iences

Use distractions if helpful

elements of the conversation to try and steer the incident towards something positive.

clear step by step plan for them to follow in high levels of stress

Key factors

Understand cause (leads to validation & understanding)

- Observe
- record
- Help others understand (remember you know your child best!)

Communication support

- Communication style
- How to communicate when anxiety heightened/ dysregulated
- Clear plan for when feeling a loss of control

Manage sensory needs

- Think about how they process the environment (what they seek/ avoid)
- Think environment and adapt

Predictability

- How to make their world predictable



All leads to understanding & adapting to the individual

Some Examples of Proactive Strategies

Window of Tolerance

Flight/Fight

During extreme stress you move out of your window of tolerance and into fight or flight mode.

Anxiety | Panic | Fear | Anger | Aggression

Overloaded

Window of Tolerance

Where you can handle and process your feelings in a healthy way while being able to function and thrive.

You increase your tolerance with coping skills.

Safe | Capable | Grounded | Self-Aware

Mindful | Engaged | Self-Soothing | Connected

Comfortable

Freeze

During extreme stress you just completely shut down and withdrawal physically/emotionally.

Depression | Fatigue | Numb | Disconnected

Disassociated | Checked Out | Unfocused

Shut Down

Understanding triggers, Anxiety & Emotions



How can you help yourself?

The BLUE zone	The GREEN zone	The YELLOW zone	The RED zone
How might you feel?	How might you feel?	How might you feel?	How might you feel?
sad tired bored moving slowly	happy okay focussed ready to learn	nervous confused silly not ready to learn	angry frustrated scared out of control
What might help you?	What might help you?	What might help you?	What might help you?
Talk to someone Stretch Take a brain break Stand Take a walk Close my eyes	The goal of this exercise is to get to the GREEN zone. What can you do to be happy, calm and ready to learn?	Talk to someone Count to 20 Take deep breaths Squeeze something Draw a picture Take a brain break	Stop what I'm doing Make sensible choices Take deep breaths Ask for a break Find a safe space Ask for help

Scared? What has happened? what is going on with your body?	Thoughts? What are you thinking?	Other helpful thoughts? What is something else that you can think?	Plan! What can you do when this happens to help?
A sudden loud noise has shocked me and hurt my ears. I feel anxious	That shocked me and hurt my ears. I do not feel safe	The noise will stop. I am safe	Move away from the noise and go somewhere quiet. Put my headphones on or do something that helps me to calm down



WHEN WE FEEL EMOTIONS, WHERE DO THEY HAPPEN?



HAPPINESS:
throughout the
entire body



ANGER:
upper half of the
body and the arms;
also some activation
in the legs and feet



FEAR:
upper half of the
body, excluding
the arms; also
some activation
in the feet



DISGUST:
upper half of the
body and the arms



SADNESS:
the chest and
head; decreased
activation in
the arms, legs,
and feet



SURPRISE:
the chest and
head; decreased
activation in
the legs



ANXIETY:
increased activation
above the pelvis,
excluding the arms;
decreased activation
in the arms, legs,
and feet



LOVE:
throughout the
entire body,
though not much
in the legs



DEPRESSION:
decreased
activation in the
lower body



CONTEMPT:
the head and
hands; decreased
activation in the
pelvic and leg areas

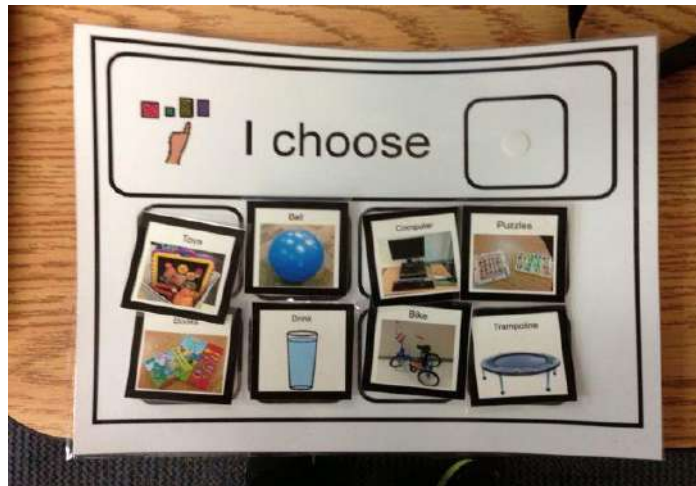
Improving Interoception

Look for ways to help your Autistic family member focus inwards...

- Breathing exercises
- Mindfulness activities
- Meditation (which guided meditations would work for your family member?).
- Create learning opportunities, helping them notice their bodily sensations and emotional states. E.g. When I'm thirsty I get a dry mouth and can't concentrate very well. Having a drink refreshes me and gives me energy. What does it feel like when you are thirsty?
- Gentle prompting and reminders can help healthy habits develop over time.

Aiding communication

Visuals are a great way of helping someone who is non-verbal to communicate. A SALT assessment may be required.

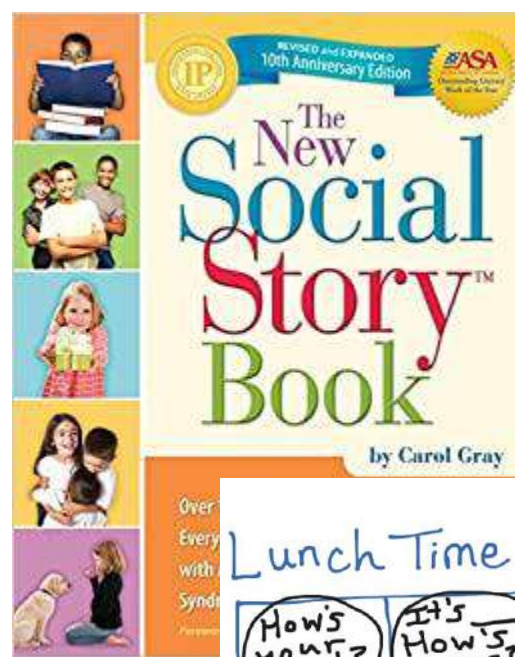


Aiding Receptive Communication

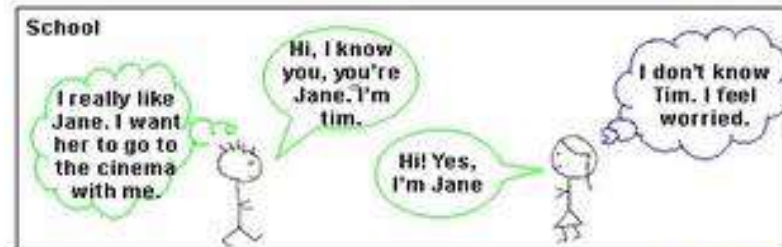
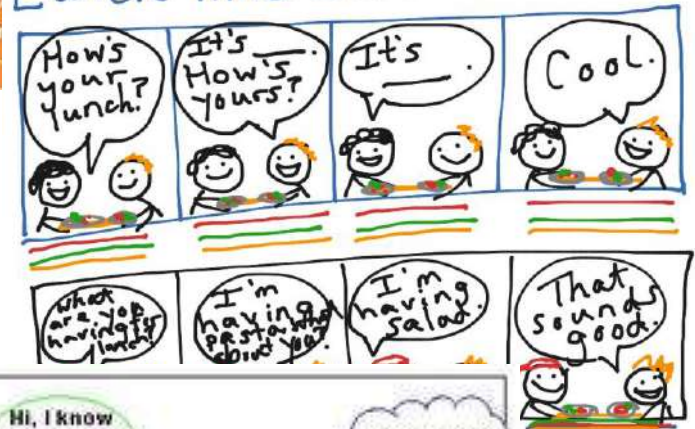
- Use key words and reduce filler words (you may need to use 1-2 at a time)
- Give them time to process what has been said, speak clearly and say it slower
- Give one instruction at a time
- Use visuals to back up what you are saying (pictures, symbols, Makaton, gestures, objects of reference, task lists, timetables etc.)
- Say their name before you provide them with any further information
- Think environment (background or distracting stimuli)
- Avoid using sarcasm, idioms, and irony etc.
- When providing instruction, demonstrate first and display visually (i.e. when cooking)
- Use closed question (display choice visually)

Social Skills

- Social Stories
- Comic Strip Conversation
- Reflection
- Opportunity to practice (start small)



Lunch Time Conversation:



Sensory - Think Environment

- Keep environments low arousal when working with someone who has hyper-sensitivities
- Think about background noise (TV, radio, talking)
- Have a quiet area that can be used if required, movement breaks at school
- Be aware of any changes in the environment that may trigger who you are supporting (has it become busier, noisier etc. are there any new smells i.e. lunch being served)
- Think about sensitivities, make the environment predictable
- Have equipment to hand for those that seek sensory input. Sensory rooms, swings, trampoline, gym ball
- Help prepare for new or difficult environments



Creating Predictability

THE *very* VISUAL SCHEDULE



Daily Schedule			
1	arrive at school	7	Journal
2	check in	8	P.E.
3	reading	9	lunch
4	writing	10	art
5	math	11	shared reading
6	recess	12	bus



Now	Next
Tidy toys up 	10 minutes on iPad 



Demand avoidance (Declarative Language)

- Declarative language **does not require a response** from the other person.
- You share information, inviting the individual to engage on their own terms. They choose how and when to respond.
- **Statements that share our feelings or experiences**
'I'm thirsty for cold lemonade. I'm going to have lots of ice'
- **Commenting or describing**
'My day was so tiring! I was late to work because of the traffic!'
- **Think-aloud/problem solving statements**
'I wonder what would happen if we tried...' or 'I think it looks like rain, I'll grab my raincoat just in case'

<https://www.declarativelanguage.com/>



Thank you for listening
any questions?

familysupport@aspens.org