

Psychotherapies for Aggression in IDD – Part 2

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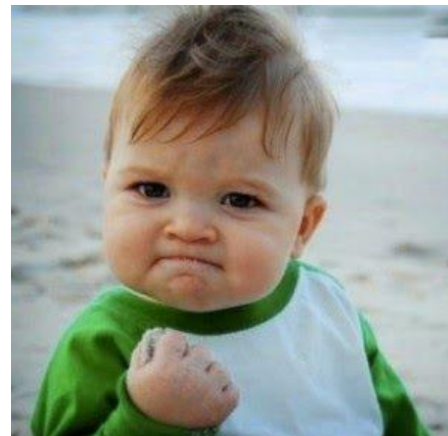
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Outline for Today

1. Things to Remember
2. How to Treat Aggression
3. Antecedent-Based Strategies
4. “In the Moment” Strategies
5. Consequence-Based Strategies



Things to Remember ...

1. Persons with IDD are at a high risk for engaging in a variety of negative behaviors, including aggression, then other patient populations
2. May be a byproduct of inherent core deficits with IDD
 - Behavior is **not part of the disorder**
 - Rather
 - Challenges/deficits may lead to anxiety and frustration
 - Communication challenges may limit ability (not desire) to express needs/frustration
 - Behavior serves as **Communication**
3. During treatment:
 - We want to set up for success and not let negative behavior work anymore
 - Clearly define and describe the behavior we are talking about

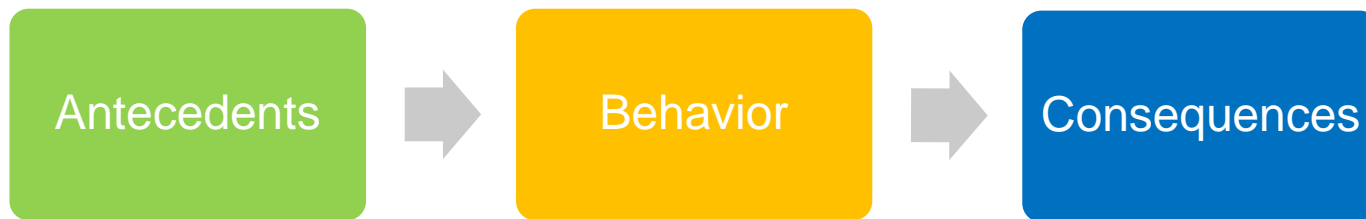
How to Treat Aggression

All behaviors serve a purpose

<i>Purpose</i>	<i>What it Means</i>
Attention	“Come see Me!”, “Look at Me!”
Tangible	“I want X!”, “Don’t take X away!”
Escape/Avoidance	“I don’t want to do X!”, “Oh no, X is about to happen!”
Automatic/Sensory	“This behavior feels good!”
Pain/Illness	“I don’t feel so good!”



How to Treat Aggression



- Often include a combination of strategies to use:
 - Proactive/preventative (antecedent-based)
 - In the moment (when target behavior occurs)
 - Consequence (after the target behavior occurs)
- Best interventions are
 - individualized to the child/family
 - keep in the mind the “purpose” of the target behavior

Antecedent-Based Strategies

1. **Medical and other setting events intervention**
2. Increase (physical and visual) supports and structure
3. Environmental Modifications
4. Leisure/Play Skill Training
5. Other therapies for deficit areas (OT, ST, PT, feeding difficulties, etc.)
6. Other strategies for co-occurring psychiatric issues (modified CBT, modified DBT, modified TF-CBT, medications, etc.) or family needs (PMT, MST, respite, etc.)




Antecedent-Based Strategies


1. Medical and other setting events interventions


2. Increase (visual) supports and structure


- One thing at a time/break things down
- Clear, concise, instructions
- Be consistent, calm, and positive
- 1:1 time

Vitals Schedule


Height 

Weight 

Temperature 

Blood Pressure 



FIRST	THEN
	

Options for THEN:

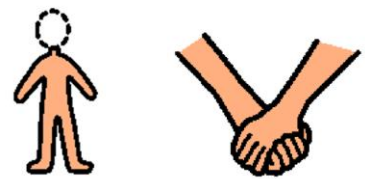
Choose:

Cheese crackers

Cookies

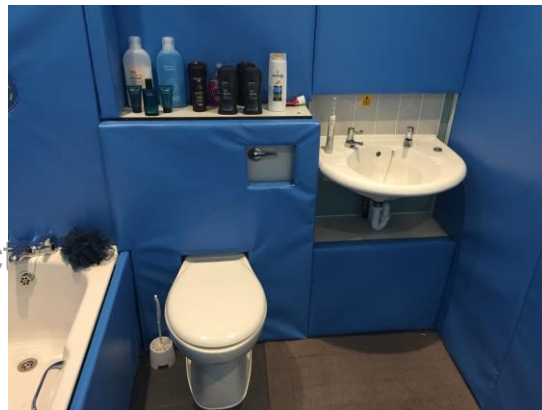
Gummy bears Popcorn

Keeping my Body and Hands to Myself



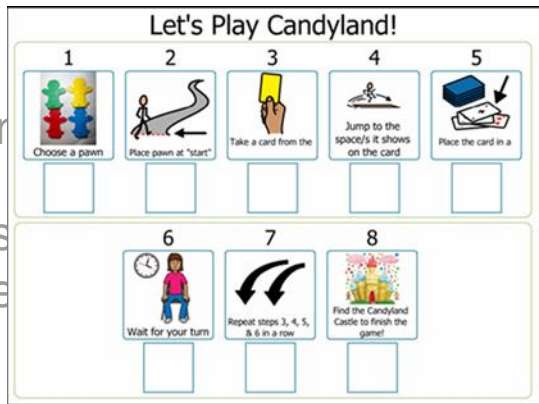
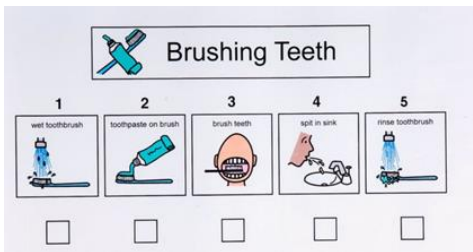
Antecedent-Based Strategies

1. Medical and other setting events intervention
2. Increase (physical and visual) supports and structure
3. **Environmental Modifications**



Antecedent-Based Strategies

1. Medical and other setting events intervention
2. Increase (physical and visual) supports and structure
3. Environmental Modifications
4. **Leisure/Play/Adaptive Skill Training**



Antecedent-Based Strategies

1. Medical and other setting events intervention
2. Increase (physical and visual) supports and structure
3. Environmental Modifications
4. Leisure/Play Skill Training
5. **Other therapies for deficit areas (OT, ST, PT, feeding difficulties, etc.)**
6. **Other strategies for co-occurring psychiatric issues (modified CBT, modified DBT, modified TF-CBT, medications, etc.) or family needs (PMT, MST, respite, etc.)**



“In the Moment” (behavior occurs) Strategies

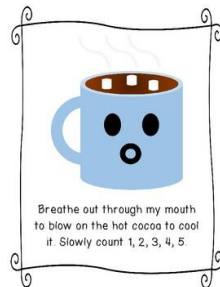
1. Replacement Skills Training

- Functional Communication Training
- Competing Items
- Coping/self-regulation/relaxation skills
- Hobby box

"SUDS" Distress Ratings

The Subjective Units of Distress Scale... or SUDS... is an easy way to track and let others know how much distress you are feeling at any given time. The scale ranges from zero to 100.

SUDS Rating	Level	Description
100	High Distress	Experiencing Complete/Overwhelmed. The more you can imagine that you are in, only more so.
75	Medium Distress	Feeling agitated and/or on high levels of fear, anxiety, sadness or anger that is not tolerable for long.
50	Mid Distress	A "bad day", but you can still do what you need to do. Talking with others or using coping strategies might be helpful for you.
25	"Normal"	Alert and focused.
0	Relaxed	Very calm, contented feeling. Mind and body are at ease. Life is very meaningful to you, or at least you are at a vacation on a cold day, or walking peacefully in the woods.

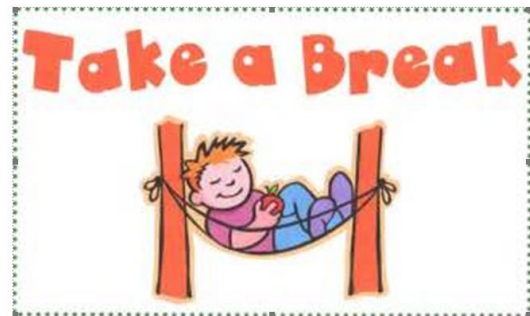


When someone is bothering me I should

1. Ask them to "stop please".

2. If the person does not stop then I should ask an adult for help.

HELP



Calming Choices

Stretches

Heat pack

Tylenol

Count to 100

Weighted blanket

W.W.W.D

Be the Wolf

Talk about feelings

Bubble wrap

Coloring

Silly putty

“In the Moment” (behavior occurs) Strategies

1. Replacement Skills Training

- Functional Communication Training
- Competing Items
- Coping/self-regulation/relaxation skills
- Hobby box



2. Differential Attention

- Positive praise – for appropriate/calm behavior
- Ignoring/Extinction – for inappropriate behavior




3. Have a “crisis” plan identified ahead of time


- Help, Prompt, and WAIT

“In the Moment” (behavior occurs) Strategies



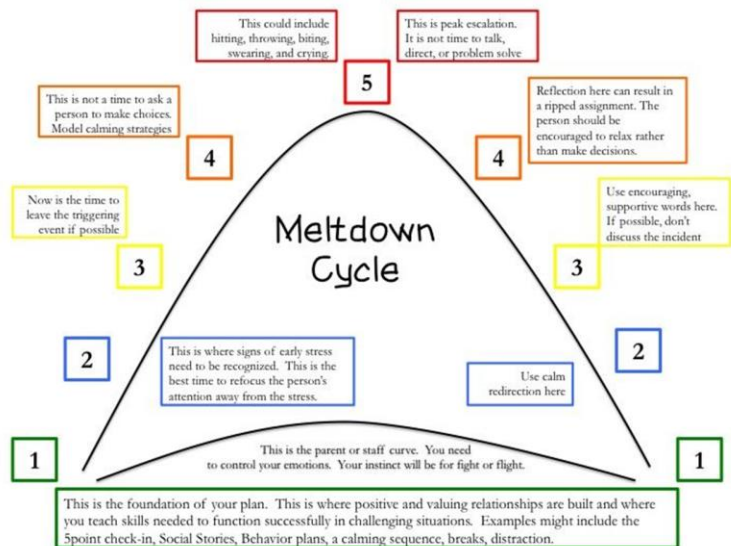
1



This is Cucumber
 No matter what,
 Cucumber keeps it Cool
 Cucumber just doesn't Care
 Cucumber is Smart.
 #BeLikeCucumber



2.

- 3. Have a “crisis” plan identified ahead of time**
 - Help, Prompt, and Wait

Consequence Strategies

1. Differential Attention

- Positive praise – for appropriate/calm behavior
- Ignoring/Extinction – for inappropriate behavior

2. Token Economies/Reinforcement Systems

- For Absence of Behavior

3. Punishment Based Strategies

- Time-out (from positive reinforcement)
- Response cost



Negative Behavior



Positive Behavior



Consequence Strategies

1. Differential Attention

- Positive praise – for appropriate/calm behavior
- Ignoring/Extinction – for inappropriate behavior

2. Token Economies/Reinforcement Systems

- For Absence of Behavior

3.

WORKING FOR M&M'S!



Star Program



Patient can earn up to two stars for each time slot. Patient can purchase an activity or reward from his/her "Star Rewards" Menu when the Bank is Open. If Patient is actively having a behavioral episode at the time of reward cash-in, no stars may be redeemed. Points earned in the morning can roll over to the afternoon / evening if they are unused. Each day starts back at zero star points.

Time	Activity	Follow Directions with 1 prompt or less	Keep my Hands and Feet to Myself
8:00 am – 9:00 am	Breakfast Vitals, Meds Goals with Staff		
9:00 am – 10:00 am	School		
10:00 am – 10:15 am	Snack		
10:15 am – 10:45 am	Zones Group		
10:45 – 11:15 am Reward Time	Total Stars Earned:	Reward Chosen:	

Date _____

My Morning Schedule

- Go to Bathroom
- Shower
- Clothes down to laundry room
- Get dressed
- Brush teeth
- Get a drink
- Finish homework
- Wait for bus quietly

4 = reward

peanut butter cup

stickers

M & M's

Hershey Kiss

IF THEN

I Use My Calm Voice

NO SCREAMING
NO BACKTALKING
NO THREATS

CANDY

Consequence Strategies

1. Differential Attention

- Positive praise – for appropriate/calm behavior
- Ignoring/Extinction – for inappropriate behavior



2. Token Economies/Reinforcement Systems

- For Absence of Behavior

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Questions?

