Management of Common Behavioural Problems in Children

‘The 15-Minute Behavioural Consult’

Linda L. Chard
Consult Liaison Team, Starship
University of Auckland
Dept. of Psychological Medicine
lchard@adhb.govt.nz
Consult Liaison Child Psychiatry at Starship

- Child Psychiatrists
  - Louise Webster
  - Penny Palmer
  - Leah Andrews
  - Paul Vroegop

- Nurse Specialist
  - Noeleen Glubb

- Social Worker/Therapist
  - Andrew Thompson
  - Matt Shepherd

- Team Support
  - Joce Fisher

- Senior Clinical Psychologists
  - Linda Chard
  - Heather McDowell

- Neuropsychologists
  - Kris Fernando
  - Kathryn Murrell
  - Sanchia Logie

- Child Psychotherapists
  - Vicki Taylor
  - Mary Ryder
Behaviour Theory

- ‘Complex interaction of a number of variables’
  - Genetic/temperament
  - Past learning history
  - Current physiological state
  - Current environmental factors
Focus of Behavioural Assessment

- **A** (antecedent) – what precedes the behaviour?
- **B** (behaviour) – target problem behaviour and desired behaviour?
- **C** (consequence) – what happens after the behaviour?
- **O** (organism) – temperament? Particular needs?
- **C** (context) – environmental factors? Activities, events, interactions
Functional Behavioural Analysis

- Determination of controlling variables for problem behaviours
- Determination of clinically significant, controllable and causal relationships for target behaviours
- Problem behaviour is not as random and unpredictable as it seems
Table 1
Clinical Judgments That Contribute to the Functional Analysis and the Design of Treatment Programs

<table>
<thead>
<tr>
<th>Component</th>
<th>Description/comments</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. The identification of a client’s behavior problems/goals</td>
<td>Clients may have multiple problems and goals; behavior problems have multiple modes (behavioral, physiological, cognitive), multiple dimensions (e.g., onset, duration, magnitude), and can vary across situations and time.</td>
</tr>
<tr>
<td>2. The relative importance of a client’s behavior problems</td>
<td>Importance may reflect client prioritization, potential for harm to self or others, degree of functional impairment.</td>
</tr>
<tr>
<td>3. The relationship among a client’s behavior problems</td>
<td>Behavior problems may be functionally related (causal or correlated).</td>
</tr>
<tr>
<td>4. The effects of a client’s behavior problems</td>
<td>The effects of a behavior problem or its sequelae affect the estimated magnitude of effect of a treatment focus.</td>
</tr>
<tr>
<td>5. The identification of important causal variables for a client’s problems</td>
<td>An emphasis on contemporaneous social–environmental and cognitive antecedent and consequent variables; multimodal causes that can differ across situations; contextual factors; reciprocal causation; may be at systems level (e.g., family, occupational, cultural environments); change across time.</td>
</tr>
<tr>
<td>6. The modifiability (clinical utility) of causal variables</td>
<td>Causal variables can differ in the degree to which they are modifiable through clinical interventions (e.g., historical events such as physical traumas cannot be modified, but their sequelae may be reduced).</td>
</tr>
<tr>
<td>7. The relationship between causal variables and behavior problems</td>
<td>May be unidirectional or bidirectional; may vary in strength and form (e.g., catastrophic, linear); may change over time.</td>
</tr>
<tr>
<td>8. The relationship among causal variables</td>
<td>Causal variables may be embedded in causal chains; they may be additive or interactive.</td>
</tr>
<tr>
<td>9. The operation of causal mechanisms</td>
<td>Causal mechanisms can explain “how” or “through what means” a causal variable affects a behavior problem.</td>
</tr>
<tr>
<td>10. The operation of moderating variables</td>
<td>Moderating variables affect the strength of relationship between two other variables (important with unmodifiable causal variables).</td>
</tr>
</tbody>
</table>

Three functions of behaviour

- Child gets something
- Child avoids/escapes from something
- Child changes level of stimulation
Behavioural Assessment

Collaboration

- Select and define target behaviours
- Description of relationships
- Generation of hypotheses
- Continue to evaluate

- Write down objectives
- Target behaviour
- Method
- Time frame
- Monitor and phase out
Collecting information

- Which of the child’s behaviours do you consider ‘challenging’ and what do they look like?
- When and where does this behaviour occur?
- When and where does the child behave appropriately? What activities does he enjoy?
- Who is present when the behaviour occurs? And who is present when the child is behaving appropriately?
- What activities, events and interactions take place just before the challenging behaviour?
What happens after the behaviour? How do you react? How do others react? Can you think of a more acceptable behaviour that might replace this one?

What approaches work well for him and which don’t?

Different culture? Does the behaviour have the same concern for the family, is it troubling to them?
Parents need to:

- Have a positive relationship with the child
- Descriptive praise
- Have appropriate expectations
- Accept uniqueness, temperament
- Provide predictability and structure
Practical Strategies

- Context
- Star charts
- Looking for good behaviour
- Time out/quiet time
- Ground rules
- Contracts
Any behavioural program:

- Does the young person understand?
- Do the parents interpret-
  - Clearly?
  - Fairly?
- Reward follows desired behaviour
  - Consistently?
Context- changes

- Enrichment
- Rescheduling
- Preceding with another request
- Exercise
Looking for good behaviour!

- Useful for all ages
- Parents-negative mindset
- Reinforce behaviours already in place
Star Charts

- Useful in preschool, school age children
- Short bursts-to help form new habits
- Must be developmentally appropriate
Beyond star charts

- **Star chart checklist**
  - Is the chart being used consistently & appropriately?
  - Is the parent’s emotional message congruent with the verbal message?
  - Does the child have the skills to perform the desired behaviour?
  - If ‘yes’ to all of the above & the star chart is still not working......
Beyond Star Charts

- Sensation-seeking children
  - Low tolerance for predictability
  - Ballot for weekly draw with rewards of varying value
  - “Lucky dip” rewards

- Temperamentally rigid
  - Low tolerance for changes in routine
  - Keep star chart system in place for a while without changes

- Negativistic children
  - Check mood disorder

- High sensitivity to stimulation
  - Keep praise low key
  - Child chooses when to get reward

- Difficult to motivate
  - Reward behaviours easily done
  - Praise and reinforce any engagement

- Encourage parents.

Manassis and Young 2004
Punishment

- Withdrawal of positive reinforcement
- Response cost
- Overcorrection
- Aversive stimuli
- Concerns about physical punishment
Time out/Quiet time

- Quiet, boring safe place
- Practice first
- One warning
- Calmly and firmly placed in time-out
- Pretend to ignore
- When time is over, fresh start
Older children:

Ground rules:
- Consistency
- Collaborative effort
- Clearly written and agreed on
- Time to review/revise set in place

Contracts:
- Useful for older children, teenage
- ‘Businesslike’
- Can be a longer term arrangement
When to refer on…

- **Contextual complexity**
  - Are there a number of problem behaviours?
  - Are there problems in the child’s environment/family system that will impair the implementation of a programme? e.g. parental depression, no supports, limited resources
  - Are there problems in different settings? e.g. home; school; caregiver
To summarize:

15 Minute Behavioural Consult

ASSESSMENT:

- Attachment
- Behaviour
- Context
- Child
The Plan--Week 1

- For Week 1 ask parents to:
  - Keep track of number of good behaviours of child
  - Plan one ‘child led’ activity per day
  - Only ask the child to do things they will normally comply with
Week 2

- Parents to pick a target behaviour they want to change
- Help them to describe/observe-the A---B---C of that behaviour

- Pick a behavioural strategy
  - Help parents formulate a plan
  - Write out!
  - Descriptor of dealing with a problem
  - Determine how to keep track of results
Week 3

- Review last week’s data
  - If change-
    - Reinforce efforts of parents
    - Pick another target
    - Formulate new plan
  - If no change-
    - Review
    - ?parents consistency
    - ?target
    - Reassess complexity
- Refer on
Basic Assumptions of Behaviour Modification

- Same principles
- Focus on current determinants
- Specificity
- Tailored treatment
- Applied science to clinical problems
Resources

- Parenting programs:
  - PPP
  - Incredible Years

- NZ Books:
  - Glen Stenhouse
  - Diane Levy
  - SKIP

- Websites:
  - www.parenting.com
  - www.parenting.org
  - www.kiwifamilies.co.nz
  - www.zerotothree.org

- CAMHS

- NGO’s
Further reading:


