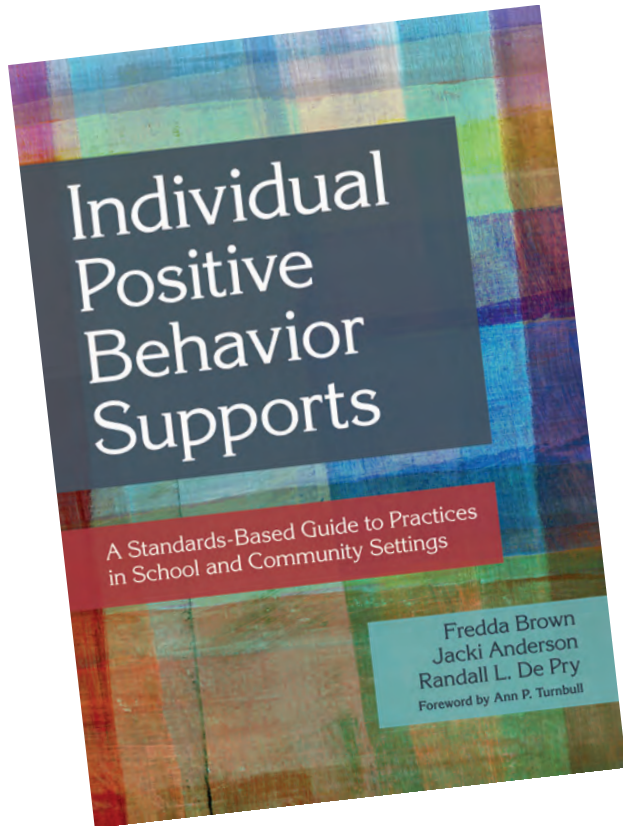


Thank you for downloading a free excerpt from



Individual Positive Behavior Supports

A Standards-Based Guide to Practices in
School and Community Settings

\$69.95 | Stock # 72735 | 2015
584 pages | 7 x 10 | paperback

For more information or to purchase visit,

<http://www.brookespublishing.com/individual-positive-behavior-supports>

Connect with us online

and get access to exclusive **FREE** content and special offers!



@BrookesPubCo



www.facebook.com/brookespublishingco



<http://pinterest.com/brookespubco>



www.youtube.com/BrookesPublishing



<http://www.brookespublishing.com/about-us/newsletters>

www.brookespublishing.com | 1-800-638-3775

Individual Positive Behavior Supports

A Standards-Based Guide to Practices in School and Community Settings

edited by

Fredda Brown, Ph.D.
Queens College
New York, New York

Jacki L. Anderson, Ph.D.
California State University East Bay
Hayward, California

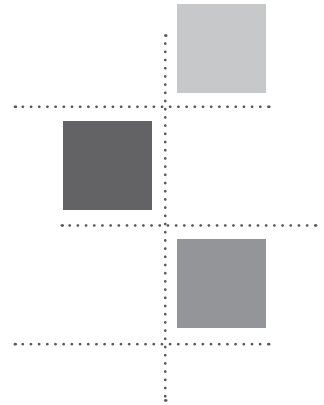
and

Randall L. De Pry, Ph.D.
Portland State University
Portland, Oregon

· P A U L · H ·
BROOKES
PUBLISHING CO.®

Baltimore • London • Sydney

Contents



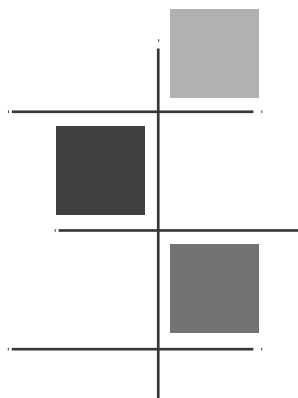
About the Reproducible Materials.....	vi
About the Editors.....	vii
Contributors.....	viii
Foreword <i>Rud and Ann Turnbull</i>	xi
Preface	xiv
Acknowledgments	xvi
I Foundations of Positive Behavior Support	1
1 A Historical Perspective on the Evolution of Positive Behavior Support as a Science-Based Discipline	3
<i>Joseph M. Lucyshyn, Glen Dunlap, and Rachel Freeman</i>	
2 Foundational Assumptions About Challenging Behavior and Behavior Interventions.....	27
<i>Fredda Brown and Jacki L. Anderson</i>	
3 Effective Teaming for Positive Behavior Support.....	47
<i>Linda M. Bambara and Catherine Kunsch</i>	
4 Person-Centered Planning Teams	71
<i>Jennifer McFarland-Whisman</i>	
5 Supporting Individuals with Challenging Behavior Through Systemic Change.....	89
<i>Randall L. De Pry, Kavita V. Kamat, and Richard Stock</i>	
II Basic Principles of Behavior	103
6 Applied Behavior Analysis as a Conceptual Framework for Understanding Positive Behavior Support.....	107
<i>Teri Lewis</i>	

7	Antecedent Strategies to Change Behavior	123
	<i>Sheldon L. Loman and Amanda K. Sanford</i>	
8	Consequence Strategies to Change Behavior	145
	<i>Chris Borgmeier and Billie Jo Rodriguez</i>	
9	Facilitating Generalization and Maintenance of Behavior Change	163
	<i>Jeffrey Sprague</i>	
10	Defining, Measuring, and Graphing Behavior	181
	<i>Matt Tincani and Elizabeth R. Lorah</i>	
11	Single-Case Designs and Data-Based Decision Making.....	201
	<i>John McDonnell, Robert E. O'Neill, and Breda V. O'Keeffe</i>	
12	Systematic Instruction.....	221
	<i>Angel Lee, Leah Wood, and Diane M. Browder</i>	
III	Comprehensive Function-Based and Person-Centered Assessments	237
13	Integrating and Building on Best Practices in Person-Centered Planning, Wraparound, and Positive Behavior Support to Enhance Quality of Life	241
	<i>Rachel Freeman, Matt Enyart, Kelcey Schmitz, Pat Kimbrough, Kris Matthews, and Lori Newcomer</i>	
14	Conducting Functional Behavioral Assessments.....	259
	<i>Robert E. O'Neill, Leanne S. Hawken, and Kaitlin Bundock</i>	
15	Using Functional Behavioral Assessment Data	279
	<i>Lee Kern and Beth Custer</i>	
16	Conducting Functional Analyses of Behavior	295
	<i>David P. Wacker, Wendy K. Berg, Brenda J. Bassingthwaite, Todd G. Kopelman, Kelly M. Schieltz, Yaniz C. Padilla Dalmau, Scott D. Lindgren, and John F. Lee</i>	
IV	Function-Driven Interventions.....	315
17	Strategies to Promote Self-Determination	319
	<i>Michael L. Wehmeyer</i>	
18	Strategies for Self-Management.....	333
	<i>Martin Agran</i>	
19	Visual Supports as Antecedent and Teaching Interventions	347
	<i>Pat Mirenda and Brenda Fossett</i>	
20	Curricular Modification, Positive Behavior Support, and Change.....	361
	<i>Ann Halvorsen and Tom Neary, with contributions by Deanna Willson-Schafer and Mary Wrenn</i>	
21	Strategies for Functional Communication Training.....	385
	<i>V. Mark Durand</i>	

V	Comprehensive Multielement Positive Behavior Support Plans.....	397
22	Building Supportive Environments: Toward a Technology for Enhancing Fidelity of Implementation.....	401
	<i>Kent McIntosh, Joseph M. Lucyshyn, M. Kathleen Strickland-Cohen, and Robert H. Horner</i>	
23	Implementing Multielement Positive Behavior Support Plans	417
	<i>Meme Hieneman and Glen Dunlap</i>	
24	Cultural and Contextual Fit: Juan’s Family as Active Team Members	433
	<i>Bobbie J. Vaughn and Lise K. Fox</i>	
25	Developing a Multielement Behavior Support Plan for a Middle School Student from a Diverse Background with Significant Behavioral Challenges.....	447
	<i>Randall L. De Pry and Julie Esparza Brown</i>	
26	Application of a Multielement Positive Behavior Interventions and Supports Plan for Alie, an Elementary Student with Intellectual Disabilities.....	463
	<i>Richard W. Albin and Anne W. Todd</i>	
VI	Future Directions.....	481
27	Positive Behavior Supports and Quality of Life	485
	<i>Lisa S. Fleisher, Sharon Ann Ballard-Krishnan, and Nila F. Benito</i>	
28	Ronda’s Story: Living a Quality Life.....	513
	<i>Scott Shepard and Ronda Michaelson</i>	
29	Taking Positive Behavior Interventions and Supports into the Future	533
	<i>Allyson Satter, Nikki Wolf, and Wayne Sailor</i>	
	Association for Positive Behavior Support Standards of Practice: Individual Level (SOP-I)	549
	Index.....	555

Foreword

Rud and Ann Turnbull



Personal narratives connect the past with the present by enabling the narrator to explain the “why” and “how” of a drama begun long ago but persisting even now. More than that, the narrative requires the narrator to reflect on the past and to interpret it. Here, then, is a personal narrative that forewords the usual foreword. It is by Rud Turnbull. Ann and Rud then introduce the book with a more formal foreword.

* * *

The year is 1973; the place, a science-driven institution for those then known as “the mentally retarded.” The setting is a large conference room filled with administrators; psychiatrists; and other physicians, psychologists, social workers, nurses, clergy, and institutionally appointed patient advocates.

I am there because the state’s governor asked me, as the father of a child with intellectual disabilities and a lawyer on the faculty of the state’s flagship university, to investigate “aversive therapy.” The governor had received complaints about it from families of “patients” and was determined to learn what it was and why it spawned concerns.

The presentation about aversive therapy begins. Psychologists explain about baseline data. Being from New York City, I knew

“baseline” was a marker at Ebbetts Field, where my beloved Brooklyn Dodgers played baseball when I was a kid.

The psychologists explained about baselines and about the injury that residents do to themselves and other residents, the risk they pose to staff, and their need to be deterred from these behaviors.

They explain about drug therapy, behavior modification, restraints, and a new technique. It is the “learning to be better box.” That device allows them to “correct inappropriate behavior” and then chart subsequent and presumably appropriate behavior against the baseline data.

I ask, “Tell me about the box. What does it do?”

They answer, “When a resident misbehaves, we hold him down, lift his shirt and lower his pants, and use the box on his lower abdomen, where the skin is very sensitive.”

I: “What does the box do?”

Answer: “It corrects his behavior.”

I: “You are not answering my question. Let me see the box, please.”

Answer: “It’s in another building.”

I: “Please go get it.”

Answer: “It’s far away.”

I: “I am asking you to get it and let me see it and how it works. It seems to me that you are thwarting the governor’s request for me to

investigate. I am requesting that you get it and show me how it works. Do that now or else I will report to the governor that you refused to cooperate with his personally appointed investigator."

Minutes pass; we all await the courier; he arrives, box in hand.

It is a strange plywood contraption, obviously handmade. It is between 3 and 4 inches square. Two battery nodules protrude from one side, connected by copper wire. A switch on another side is in the usual, switch-down, off position.

I: "Have many of you have used this on yourselves?"

*Answer, with obvious incredulity: "Oh, no! It's for **them!**"*

I remove my blazer, roll up my sleeve, turn on the switch, and apply the copper wire to my bare arm. I am jolted out of a comfortable position in my chair, involuntarily rising some 3 to 4 inches.

And that is how my professional career began. A literally shocking experience impelled me to conduct research on the use of aversive therapy and then to advocate for legal reform.

* * *

Neither of us knew at the time that this "aversive therapy" and other such interventions were widely accepted by some members of the scientific community. We soon learned that they were, despite a growing number of professionals, family members, and other advocates who condemned aversives and sought a better way to replace problem behavior with appropriate behavior.

Of the leaders in this reform movement, none was more transformative than Madeleine Will, Assistant Secretary of Education, U.S. Department of Education. Guided by her sensitivities as the parent of a son with intellectual disability, Will determined that there would be a better way: to establish a research and training center to investigate what was referred to at that time as nonaversive behavioral interventions; to fund researchers and

trainers such as Ted Carr, Rob Horner, Glen Dunlap, Wayne Sailor, Bob and Lynn Koe-gel, and Jacki L. Anderson; and to persuade U.S. Assistant Attorney General William Bradford Reynolds, whose sister was institutionalized, to become personally involved in investigating institutional abuse and aversive interventions.

This book tells the result of approximately 3 decades of positive behavior support (PBS) research. A word or two about those decades enriches the content of this book.

In the early 1980s, the disability rights movement was in its infancy. The right to treatment, manifested in the strategy of deinstitutionalization by repairing institutional conditions, preventing institutional placement, and ensuring release from institutions; the right to education; the right of newborns to receive treatment and not to suffer preventable death because physicians or parents colluded to withhold or withdraw lifesaving medical treatment from them; the right to not experience discrimination solely because of a disability and the search for employment strategies to accompany that right; and the establishment of early intervention and early childhood education—all these initiatives arose within short time frames of each other, were synergistic in their effect, and had scientific bases.

What might be said of this explosion of rights and associated science? At the very least, and perhaps most important of all, it must be said that what passed as acceptable at one time became unacceptable.

Specific to aversive interventions, some scientists defended the intervention on the ground that it was necessary to prevent self-injurious or aggressive behavior. They based their argument solely on science. Their opponents—scientists, lawyers, parents, and other advocates—asserted the contrary proposition that using science as a morally and legally objectionable strategy would not be the only ground for debate.

Indeed, those who relied on ethical and legal challenges to aversive interventions

affirmed science's value and the body of scientific knowledge. They demanded, however, that scientists must create a science of positive interventions: "Do no harm; use no 'learning to be better' boxes. Do only what is positive, not punishing; do only evidence-based practices that can withstand ethical and legal muster."

Thus it was that the science of PBS arose out of a sometimes objectionable science. The search for a new science and the marriage of ethics, law, and research focusing on positive, comprehensive lifestyle change, ecological focus, prevention, multidisciplinary partnerships, and systems-level change, were the seeds of PBS. And this science, today, has majestically reformed the lives of people with disabilities (including our beloved son) and their families (including ours).

Our friend and mentor, Ted Carr, one of the fathers of PBS, envisioned PBS as follows, notably combining science with ethics and law that requires system change:

What are happiness, helpfulness, and hopefulness as they pertain to PBS? Collectively, they represent an empirically driven concern with QOL [quality of life], with support through systems changes, and with linkage to multiple behavioral, social, and biomedical sciences. This is the expanding vision of PBS, a vision that impels us to create meaningful lives and not simply to eliminate psychopathology, a vision that spurs us to change systems and not just people, a vision that motivates us to

seek collaborative possibilities with our colleagues in many different sciences to that we can transcend our superficial differences and focus on deeper commonalities. It is a vision that holds promise for each one of us so that at the end of our lives we can say, "I made a difference." (Carr, 2007, p. 12)

We admonish you to use the accumulated knowledge in this book to become like Ted Carr: a difference maker.

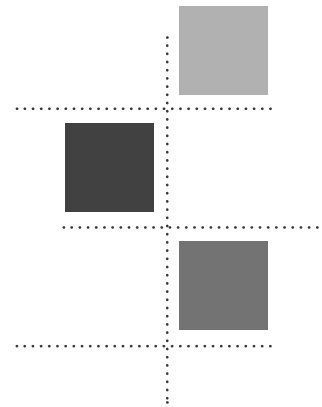
And while you are at it, remember this: "Knowledge itself is power" (Orwell, 1945). That is true, however, only when the powerful use science that rests on morally and legally defensible grounds. The evolution of science results in a revolution of quality of life only when three disciplines inform each other: science, ethics, and law. That is the essential teaching about PBS. It is a science born of many sources. It is the science you will learn by reading and rereading this book. PBS is a science without hidden boxes.

*Rud and Ann Turnbull
Distinguished Professors of Special Education
Codirectors, Beach Center on Disability
University of Kansas*

REFERENCES

- Carr, E.G. (2007). The expanding vision of positive behavior support: Research perspectives on happiness, helpfulness, hopefulness. *Journal of Positive Behavior Interventions*, 9, 3-14.
- Orwell, G. (1945). *Animal farm*. London, England: Secker and Warburg.

Preface



Individual Positive Behavior Supports: A Standards-Based Guide to Practices in School and Community Settings brings together the work of leading scholars to present the foundational knowledge, skills, and dispositions needed to effectively and respectfully support individuals who engage in challenging behaviors. Relying on both the science and the technology of positive behavior support (PBS), this book explores the standard-based competencies that are necessary for individuals, their families, and professionals who work with people who experience challenging behavior across ages, disabilities, and settings.

The book is intended to be comprehensive in scope, and as such, it explores a wide range of topics such as the history of PBS; applied behavior analysis; effective teaming; collaboration with individuals, families, professionals, and other stakeholders; systems-level supports; and examples of the assessment, development, and implementation of multicomponent plans of PBS. The book is organized into the following major sections: I) Foundations of Positive Behavior Support, II) Basic Principles of Behavior, III) Comprehensive Function-Based and Person-Centered Assessments, IV) Function-Driven Interventions, V) Comprehensive Multielement Positive Behavior Support Plans, and VI) Future Directions. The chapters in this book are aligned with the Association for

Positive Behavior Support (APBS) Standards of Practice–Individual Level (SOP-I). These standards were designed to encompass the skills that practitioners of PBS should espouse that underscore both the science *and* values of PBS. To impart these skills, we have invited contributions from leading scholars, researchers, self-advocates, family members, and practitioners in the field of PBS.

POSITIVE BEHAVIOR SUPPORT AS AN APPLIED SCIENCE

To us, PBS is the *zeitgeist* of what we know and believe about supporting people—how they learn, how they thrive, and how they can strive and achieve a personal vision of a good quality of life. Individual PBS brings together values and science. Many in the field of disabilities claim to use PBS, but what does this mean? For people with chronic or persistent challenging behavior, we know that using positive reinforcement in the absence of building skills that will improve quality of life is not sufficient. We know that using person-centered planning without effectively addressing problem behaviors is not sufficient. We know that avoiding the use of aversive interventions without effectively addressing the problem behaviors is not sufficient. We hope that this book will help readers acquire a deep understanding of PBS as an applied science.

POSITIVE BEHAVIOR SUPPORT STANDARDS OF PRACTICE AT THE INDIVIDUAL LEVEL)

Since the mid-1980s, PBS has flourished. In 1999, the *Journal of Positive Behavior Interventions* published its first issue, and in 2003, APBS held its first conference. These important activities helped establish the discipline of PBS (Carr, 2002) and moved the discipline to an internationally recognized applied science in a relatively short period of time. In 2005, APBS made the decision to develop standards of practice for PBS. The board recognized the need for standards of practice given the widespread use of PBS, the multiple disciplines that utilize PBS procedures, and the various theoretical perspectives that professionals bring to their respective PBS practices. Drs. Jacki L. Anderson, Fredda Brown, and Brenda Scheuermann were assigned as cochairs of a new committee to organize and coordinate the process of developing and drafting the standards of practice document. This document was developed through a collaborative effort of many individuals who have committed themselves to research and development of PBS over many years. The SOP-I was approved by the APBS board in 2007. Since then, the SOP-I has been a support to the PBS community in a variety of ways, including the following:

- Encouraging dialogue about PBS within the field
- Encouraging dialogue about PBS with professionals of different philosophical orientations
- Developing applied behavior analysis (ABA) and PBS course competencies in higher education
- Developing ABA and PBS course competencies for professional development
- Developing guidelines (for professionals and families) for evaluating the quality of the assessment and program development process provided for any given individual
- Developing guidelines (for professionals and families) for evaluating the quality of the outcomes and associated processes of PBS
- Developing guidelines (for professionals and families) for evaluating the competence of PBS experts/consultants

- Developing guidelines for selection of university or in-service training programs
- Developing guidelines for individuals considering careers as advocates or consultants in the area of PBS
- Developing guidelines for schools, districts, or agencies for developing job descriptions for special education teachers, PBS intervention specialists, or behavior specialists
- Developing guidelines for grant evaluators to assess quality of proposed training/intervention programs for individual-level supports
- Developing guidelines for local, state, and national policy makers relevant to the provision of behavior support in schools, homes, and communities

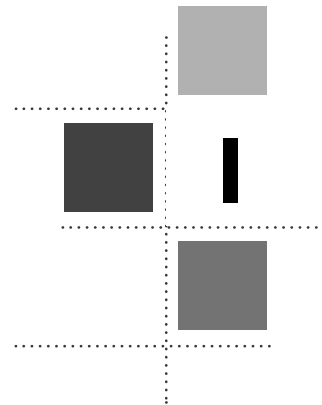
Our intent is that this book provide the information necessary to ensure the effective implementation of these standards and PBS practices in general wherever PBS can improve lives.

WHO IS THIS BOOK FOR?

This book was written with a variety of audiences in mind. For the higher education audience, we believe that it will support the work of professors as they teach their graduate classes in the subjects of ABA and PBS and meet the complex task of infusing the values and science of the field. Thus this book is appropriate for graduate classes in the following areas: ABA, PBS, special education methods, and behavior management. Furthermore, it is appropriate for training clinical personnel in educational and community-based settings, including adult, vocational, and residential supports. We also believe that this book will be a valuable resource for families. The focus on quality of life across so many of the chapters, the voices of families, and the different ages and types of disabilities that are used to demonstrate the many PBS concepts will be helpful as families face the many changing challenges as their children grow.

REFERENCE

- Carr, E.G. (2007). The expanding vision of positive behavior support: Research perspectives on happiness, helpfulness, hopefulness. *Journal of Positive Behavior Interventions*, 9, 3–14.



Foundations of Positive Behavior Support



STANDARDS ADDRESSED IN THIS SECTION

- I. A. Practitioners of positive behavior support (PBS) have the following perspectives on the evolution of PBS and its relationship to applied behavior analysis (ABA) and movements in the disability field:
1. History of applied behavior analysis and the relationship to PBS
 2. Similarities and unique features of PBS and ABA
 3. Movements in the field of serving people with disabilities that influenced the emergence of PBS practices, including the following:
 - a. Deinstitutionalization
 - b. Normalization and social role valorization
 - c. Community participation
 - d. Supported employment
 - e. Least restrictive environment and inclusive schooling
 - f. Self-determination
- I. B. Practitioners applying PBS with individuals adhere to the following basic assumptions about behavior:
1. Challenging behavior serves a function.
 2. Positive strategies are effective in addressing the most challenging behavior.
 3. When positive behavior intervention strategies fail, additional functional assessment strategies are required to develop more effective PBS strategies.
 4. Features of the environmental context affect behavior.
 5. Reduction of challenging behavior is an important—but not the sole—outcome of successful intervention; effective PBS results in improvements in quality of life, acquisition of valued skills, and access to valued activities.

(continued)

- I. C. Practitioners applying PBS with individuals include at least 11 key elements in the development of PBS supports:
1. Collaborative team-based decision making
 2. Person-centered decision making
 3. Self-determination
 4. Functional assessment of behavior and functionally derived interventions
 5. Identification of outcomes that enhance quality of life and are valued by the individual, their families, and the community
 6. Strategies that are acceptable in inclusive community settings
 7. Strategies that teach useful and valued skills
 8. Strategies that are evidence based and socially and empirically valid to achieve desired outcomes that are at least as effective and efficient as the challenging behavior
 9. Techniques that do not cause pain or humiliation or deprive the individual of basic needs
 10. Constructive and respectful multicomponent intervention plans that emphasize antecedent interventions, instruction in prosocial behaviors, and environmental modification
 11. Ongoing measurement of impact
- I. E. Practitioners of PBS understand the following legal and regulatory requirements related to assessment and intervention regarding challenging behavior and behavior change strategies:
1. Requirements of IDEA with respect to PBS
 2. State/school/agency regulations and requirements

The four chapters in this first section of the book set a framework for understanding the remaining chapters. The section begins with Chapter 1, “A Historical Perspective on the Evolution of Positive Behavior Support as a Science-Based Discipline.” In this chapter, the authors provide us with the historical evolution of positive behavior support (PBS)—from its beginnings in the late 1980s to today. This chapter defines PBS and explores the early movements in the field of disabilities that contributed to the development of PBS, the relationship between applied behavior analysis (ABA) and PBS, and the core features of PBS. In Chapter 2, “Foundational Assumptions About Challenging Behavior and Behavior Interventions,” the authors discuss, through the case studies of two individuals, the critical elements that make PBS a unique discipline in its merging of values and science. Chapter 3, “Effective Teaming for Positive Behavior Support,” and Chapter 4, “Person-Centered Planning Teams,” focus on teaming. In these chapters, we learn about

the importance and the processes involved in developing person-centered behavior support plans that are developed by collaborative teams and aligned with the individual and his or her family’s vision of important outcomes. Finally, in Chapter 5, “Supporting Individuals with Challenging Behavior Through Systemic Change,” the authors discuss the complex interplay between the environment and the individual’s behaviors. Systemic change—such as in the environmental contexts of home, school, community, work, and social systems—is critical for successful and sustainable outcomes for the individuals whom we support.

The chapters in this first section of the book will provide you with a core of information and perspective that will make the chapters that follow more meaningful. It is the synergy of the ideas covered here that will allow you to appreciate the broad impact that PBS has on the lives of individuals with challenging behavior.

Fredda Brown