

STRAIGHT TALK *About* **Autism**

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Behavior is Not the issue *An Emotional Regulation Perspective on Problem Behavior*

Part One of a Two-Part Article

First Author's Note: I am grateful to Amy Laurent for agreeing to co-author this article. Amy is a valued colleague and a SCERTS Model collaborator. Her expertise in both occupational therapy and special education brings a unique developmental perspective to the issue of problem behavior.

It is likely that the term *behavior* is the most commonly used word when discussing autism. In most cases, it is used with a negative connotation such as, "Sarah has a lot of behaviors," or "We need a behavior plan," said in reference to behavior that is deemed difficult or problematic. We first heard the paradoxical phrase *behavior is not the issue*, from Ros Blackburn, a friend and internationally known speaker on autism, who also happens to have autism. In making this statement, Ros' plea to professionals and parents is to have us understand and consider the many complex and deeply rooted factors that underlie the observable behaviors that are considered problematic. According to Ros, it is disrespectful to reduce the discourse on autism to the level of behavior without considering the experience of, and the challenges faced by the person with autism to stay well-regulated emotionally.

What's the Problem? Issues in Defining Problem Behavior

There are many features that may result in defining behavior as problematic, ranging on a continuum from possibly problematic to definitely problematic.

Conventionality - *The degree to which a pattern of behavior is regarded as typical or atypical relative to a person's chronological age and the context in which it is observed.* Many repetitive behaviors—sometimes referred to as "autistic" behaviors—fall

into this category, including rocking, flapping, finger flicking, and echolalia.

Social Acceptability—*The degree to which other people consider behavioral patterns as acceptable or unacceptable given social norms.* Examples include behaviors such as removing one's clothes, self-talk in public settings, and excessive question-asking.

Disruptive or Interfering—*The degree to which a pattern of behavior creates disruptions or distractions for others, or interferes with the ability of others or the individual to engage and learn.* Examples include loud vocalizations and screaming, pacing, and grabbing items or materials.

Destructive - *The degree to which a pattern of behavior may result in physical damage to property.* Examples include throwing or breaking objects.

Harmful - *The degree to which a pattern of behavior may pose physical harm to the individual or to others.* Examples may include behaviors (intentional or unintentional) directed to others such as hitting or biting, or self-injurious behaviors such as biting or hitting oneself.

Clearly, these features are not mutually exclusive, and are deemed problematic or not subject to the beliefs and perceptions of the person observing the behavior.

Impact of Problem Behavior

The presence of problem behaviors has a significant impact on individuals with ASD and their families. They can be a great source of stress for family members and may result in

isolation, as family members and others may be hesitant to participate in activities and settings that result in dysregulation, and are therefore likely to trigger problem behaviors. Problem behaviors may also have a negative impact on the long-term development of relationships, as it is difficult to feel secure and safe in circumstances where a person's problem behaviors may be destructive or harmful to self or others. Problem behaviors may also be stigmatizing for a person with ASD, and may impact his or her quality of life if access to settings and activities that could be a source of enjoyment are restricted or limited.

Emotional Regulation: A Critical Concept

For many years, our work has been informed by research on emotional regulation in human development, culminating in an educational model (The SCERTS Model) that prioritizes emotional regulation as a major focus for all individuals with ASD. Emotional regulation is an internal process that is essential for maximizing learning, developing trusting relationships with others, and participating successfully in everyday activities. It is a developmental process that evolves and becomes more sophisticated, allowing a person to be available for task engagement and learning and to deal with the daily stresses and challenges of everyday life. Emotional regulation has been studied extensively in persons without disabilities, but has not been applied in a comprehensive manner to inform our understanding and treatment of problem behavior.

It is well known that approaches to problem behavior in persons with autism have been dominated by a behavior management perspective for many decades, having evolved from an early preoccupation with extinguishing problem behavior, to a deeper understanding of the functions served by the behavior and the setting events and triggers that can cause it. However, it is our belief that a developmentally-based emotional regulation perspective offers a person-centered approach to problem behavior that has great potential for fueling the next generation of respectful and effective practices for preventing problem behavior and supporting quality of life for persons with ASD.

An emotional regulation approach (ERA) does the following: 1) views most problem behavior as the outcome of a dysregulated emotional state; 2) considers biological, psychological and social factors that contribute to problem behavior; 3) focuses on enhancing a person's ability to regulate emotional arousal; and 4) prioritizes supporting emotional well-being, "availability" for learning, and social engagement.

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To best support emotional regulation, it is necessary to consider the many factors that challenge a person's capacity to maintain a well-regulated emotional state.

Challenges to Emotional Regulation: Risk and Protective Factors

Both risk and protective factors may be associated with either the presence or the prevention of problem behaviors. Risk factors are psychological, biological and social factors that make a person more vulnerable to developing problem behavior. Protective factors are those that make it less likely that problem behaviors will develop. An emotional regulation approach strives to minimize risk factors and maximize protective factors.

The following is a non-exhaustive list of key risk factors that are critical to our understanding of problem behavior.

Psychological/Emotional Factors

- Life is filled with unpredictability and unexpected changes. Due to learning style differences, people with ASD often struggle to predict the actions of others and therefore, have a difficult time coping with change and uncertainty. In describing the impact of this difficulty, Ros Blackburn has noted that the behavior of others often comes across as "very sudden and threatening," given that she is unable to predict what others will do, causing great anxiety and in some cases, problem behavior.
- Lack of control is another key factor impacting the arousal level and emotional state of a person with ASD. Being placed repeatedly in situations where one has little or no control over the level of stimulation or the behavior of others can cause great stress.
- Emotional memory, or the memory of the feelings associated with people, places, and activities, is another factor. A relative strength of people with ASD is their strong rote memories which enable them to recall each element of a place or activity precisely, based upon their previous experiences. Therefore if experiences are associated with negative or stressful feelings, strong negative emotional reactions accompanied by attempts to avoid those people, places, and activities—often in the form of problem behavior such as dropping to the floor, bolting, and/or vocal/nonverbal protesting—may be the result.

Biological/Physiological Issues and Factors

- Health status is a critical risk factor that may contribute to incidents of problem behavior. If a person is not feeling well, has not slept, or is dealing with a chronic health issue, he or she will have significantly more difficulty tolerating transitions, delaying gratification, and generally dealing with the stresses of daily life.
- Individuals with ASD are often hypersensitive and/or hypo-sensitive to environmental stimulation, referred to as unusual responses to sensory stimulation. These challenges often manifest themselves in states of overstimulation or understimulation which may result in problem behavior.
- As with all human beings, individuals with ASD have what is termed an arousal bias. This arousal bias may be towards a high state of arousal, putting them at risk for overstimulation, fight or flight reactions, or withdrawal. Other individuals with ASD have a bias towards a low state of arousal, putting them at risk for under-stimulation and disengagement.

Social Factors

- Problems in social understanding and the resulting social anxiety have a great impact on emotional regulation for persons with autism and are significant risk factors. Many persons with autism share that they feel confused and perplexed by how social rules and demands change from one situation to the next; how difficult it is to understand the feelings and intentions of others; and by people who often do not “say what they mean” (e.g., use sarcasm or cynicism). Seemingly simple social acts such as initiating interactions or requesting support when needed may cause overwhelming anxiety and result in problem behavior.
- Social communication limitations also serve as risk factors, since the ability to use language or other communicative means for social control, to express emotions, or to seek assistance reduces the need to do so through socially undesirable means such as the use of physical means to protest, refuse, or escape from challenging circumstances.

In this issue’s Straight Talk column, we’ve argued that an emotional regulation perspective offers a developmentally based, person-centered alternative to behavior management approaches for problem behavior. In part two of this article, which will appear in the May/summer issue of ASQ, we will consider in greater depth the characteristics of an emotional regulation approach to problem behavior. We will also provide a number of scenarios and examples to illustrate the way in

which an emotional regulation perspective can provide a different pathway to understanding and developing plans to address problem behavior in people with ASD. ■

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Bio

Dr. Barry Prizant is the Director of Childhood Communication Services and an adjunct professor in the Center for the Study of Human Development, Brown University. Barry has more than 35 years of experience as a researcher and international consultant to children and adults with ASD. He has published more than 90 articles and chapters on childhood communication disorders and has given more than 500 seminars and workshops at national and international conferences. He also serves on the Editorial Boards of six scholarly journals. Barry is a co-author of the SCERTS Model (Prizant, Wetherby, Rubin, Laurent & Rydell, 2006—www.SCERTS.com). In 2005, Barry received the Princeton University-Eden Foundation Career Award “for improving the quality of life for individuals with autism”. For further information about Barry’s work, go to www.barryprizant.com, or contact Barry at Bprizant@aol.com.



Amy C. Laurent, Ed.M, OTR/L is a pediatric occupational therapist who holds a Master’s degree in Special Education. Currently in private practice, Amy specializes in the education of children with autism spectrum disorders (ASD) and related developmental disabilities. The majority of Amy’s work involves collaborating with and supporting school teams and families. Her consultative services focus on the creation of educational programs and environments that facilitate children’s active engagement and learning at home, in schools, and throughout their communities. The SCERTS Model, of which she is a coauthor, along with differentiated instruction and developmental theory guide her practice. She works with educational teams in K-12 schools, pre-schools, and early intervention programs. Amy is also an adjunct faculty member at the University of Rhode Island and Emerson College in Boston, Massachusetts. Her private practice is affiliated with Communication Crossroads, Childhood Communication Services, and Childhood Communication Seminars. Website: www.amy-laurent.com

