Where’s the FUN in Functional Behavior Assessments?

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What is an FBA?

- A functional behavioral assessment (FBA) is a method of looking at behavior to try to decide why the child uses the specific behavior and how the world around the child affects the child and the behaviors.
- It has a narrower focus than a comprehensive assessment as it looks at one behavior at a time.

It’s all fun and games until someone figures out the function of your behavior.
What are they trying to tell us?

FBAs can:
- Provide an operational definition of behavior
- Identify events/places/people/times/other factors that are functionally related to the behavior
- Identify consequences that maintain the behavior
- Build a hypothesis about the behavior
- Provide information to confirm or deny the hypothesis
- Offer data to develop a plan to support the child in being successful

When should an FBA be done?
- When a student is not responding to current interventions
- When it is unclear as to why the behavior is occurring
- When a child’s behaviors require a behavior plan
- When antecedents and/or reinforcers cannot be readily identified
- When a student is suspended once or multiple times or has a high number of office discipline referrals
- When a child is getting into trouble frequently
- When a pattern or trend seems to be forming
- When a child seems to engage in the same behavior regardless of consequence
- When consequences and/or rewards seem ineffective
- When a child does not appear to care or be affected by attempts to address the behavior
- When the learning environment is disrupted
What influences an FBA?

- Your education, training, and experience
- The purpose of the FBA
- The diagnosis of the child
- Your foundation of belief about child behavior
- Your relationship with the child
- Your relationship with the parent/caregiver
- Preconceived ideas
- Cultural issues

Steps in an FBA

1. Establish a team
2. Define the behavior you are interested in (i.e., he runs out of the room)
3. Collect data
4. Analyze the data: be thorough, attention seeking, escape/avoid is NOT precise enough
5. Build a hypothesis (what is the child avoiding/escaping/seeking?)
6. Develop a plan (behavior intervention plan: BIP)
7. Try the plan
8. Re-work if not successful
9. Celebrate if successful

“Children do well if they can... if they can’t, we adults need to figure out what’s getting in the way, so we can help.”

- Dr. Ross Greene “The Explosive Child”
Who should be included:

- In-school and outside professionals who work with the child (e.g., counselors, occupational therapists, and speech therapists, for example)
- General education teachers
- Special education teachers
- Paraprofessionals
- School administrators
- Parents and caregivers
- Internal supports
- The child

Format of the FBA

- There are many examples of FBA templates
- Risks and benefits of checklists
- Risks and benefits of observations
- Risks and benefits of inclusion of outside team members
Example of an FBA format:

Adapted From:

FUNCTIONAL BEHAVIORAL ASSESSMENT INTERVIEW FORM

Focus person
Date of Birth
Sex M F
Interviewer
Date
Person answering the interview questions

DESCRIBE THE PROBLEM BEHAVIORS.
Define each problem behavior that is of concern. Include information about what it looks like, how often it occurs (per day, week, month), how long the behavior lasts and how damaging or destructive the behaviors are when they occur.
1. ____________________________
2. ____________________________
3. ____________________________
4. ____________________________
5. ____________________________
6. ____________________________

DESCRIBE THE PERSON’S SOCIAL BEHAVIOR.
Define positive social behaviors you have observed the person perform. Include information about what it looks like, how often it occurs (per day, per week, month) and when you are most likely to see the behavior.
1. ____________________________
2. ____________________________
3. ____________________________
4. ____________________________
5. ____________________________
6. ____________________________

Which of the behaviors described above are likely to occur together in some way? Do you see positive behaviors occurring before problem behaviors occur? Do all of the behaviors occur about the same time? If you see behaviors occurring in a sequence from least to more problematic, describe the order in which they occur.
Does the person have normal sleeping patterns or do they have any problems getting enough rest each night?

Are there any dietary or eating problems that might have an impact on problem behavior?

Environmental & Social Setting Events

Make a list of the activities where the person is successful and does not engage in problem behavior. Include the times when these activities occur.

<table>
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<th>Successful Activities</th>
<th>Problematic Activities</th>
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Are the activities on the daily schedule predictable for the person? Does the person know what to expect after one activity ends and the next begins? Is it clear to the person who they will be spending time with and for how long?

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Does the person get a chance to make choices about what he or she will be doing each day? Does the person choose what to wear in the morning, the activities that she will be experiencing and when she will be able to engage in fun and reinforcing events?

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Are there usually a lot of people around at home, school, or work (including staff, classmates, family members or roommates)? How does the person respond to crowded or noisy settings?

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Define specific immediate antecedent events that predict when the behaviors are likely and not likely to occur.

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<th>Settings that are most and least likely to trigger problem behavior</th>
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Describe something that you could do or say that almost always results in problem behavior. This may include a certain tone of voice (authoritarian, aloof, overly concerned, etc.), particular words or phrases (e.g., "no, that’s not right, do it again.")

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<th>Briefly describe what the person would do in the following situations.</th>
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<td>The person is asked to complete a difficult task.</td>
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<td>A highly preferred activity naturally ends or is interrupted.</td>
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IDENTIFY THE CONSEQUENCES OR OUTCOMES OF THE PROBLEM BEHAVIORS (WHAT HAPPENS RIGHT AFTER THE BEHAVIOR OCCURS)

Think of each of the behaviors you listed previously, and identify a specific routine (e.g., getting up in the morning, going to the store, etc.). Describe what happens right after the behavior. Does the person obtain something? Does the person escape or avoid something?

| Problem Behavior | Routine | What does the person obtain? | Escape or avoid?
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Positive Behavior | Routine | What does the person obtain? | Escape or avoid?
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CONSIDER HOW MUCH EFFORT IT TAKES TO ENGAGE IN EACH OF THE PROBLEM AND POSITIVE BEHAVIORS. THINK ABOUT (A) HOW MUCH PHYSICAL EFFORT IT TAKES TO ENGAGE IN EACH BEHAVIOR, (B) HOW OFTEN A BEHAVIOR OCCURS BEFORE IT IS REINFORCED, AND (C) HOW LONG THE PERSON HAS TO WAIT TO GET THE REINFORCER.

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<tr>
<th>Problem Behaviors</th>
<th>Low Effort</th>
<th>High Effort</th>
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<td>1 2 3 4 5</td>
<td>1 2 3 4 5</td>
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Positive Behaviors

|                   | 1 2 3 4 5  | 1 2 3 4 5   |

WHAT FUNCTIONAL ALTERNATIVE BEHAVIORS DOES THE PERSON ALREADY KNOW HOW TO DO?

Which socially appropriate behaviors or skills listed previously generate the same outcomes or reinforcers produced by the problem behaviors?

HOW DOES THE PERSON COMMUNICATE WITH OTHER INDIVIDUALS?

Describe the most common strategies a person uses to express himself and what communication strategies are available to the person. Communication used may involve speech, signs and gestures, communication boards, or electronic devices. Are there any problems with assistive communication systems that are currently being used?

Describe the person's receptive communication skills and ability to understand others. Can the person follow spoken requests or instructions that are simply stated? Give examples of simple and more complicated (if applicable) requests or instructions that can be followed. Does the person seem to understand and respond to requests or instructions that are signed or gestural? Give several examples of signed or gestural instructions that can be followed.

Can person imitate actions if you show the person how to do something? Give several examples of the types of actions that can be imitated.
Describe what you know about the history of problem behaviors identified previously or other problem behaviors that no longer are present. Include information about any interventions that have been tried in the past and how effective those interventions were at the time.

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<th>List past problem behaviors</th>
<th>Interventions</th>
<th>Effectiveness</th>
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Rate how much you like the following subjects:

- **Reading**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **Math**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **Spelling**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **Handwriting**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **Science**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **Social Studies**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **English**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **Music**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **P.E.**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much
- **Art**
  - 1 = not at all
  - 2 = a little
  - 3 = fair
  - 4 = very much

1. In general, is your work too hard for you? **Always Sometimes Never**
2. In general, is your work too easy for you? **Always Sometimes Never**
3. When you ask for help appropriately, do you get it? **Always Sometimes Never**
4. Do you think work periods for each subject are too long? **Always Sometimes Never**
5. Do you think work periods for each subject are too short? **Always Sometimes Never**
6. When you do seatwork, do you do better when someone works with you? **Always Sometimes Never**
7. Do you think people notice when you do a good job? **Always Sometimes Never**
8. Do you think you get the points or rewards you deserve when you do good work? **Always Sometimes Never**
9. Do you think you would do better in school if you received more rewards? **Always Sometimes Never**
10. In general, do you find your work interesting? **Always Sometimes Never**
11. Are there things in the classroom that distract you? **Always Sometimes Never**
12. Is your work challenging enough for you? **Always Sometimes Never**

Student assisted FBA
Ongoing Investigation

- Does the behavior occur around, who does/don’t?
- Where does the behavior occur and where doesn’t it?
- When does the behavior occur and when doesn’t it?
- Are there any patterns?
- What are the responses to the child, works and doesn’t work, skills might the child be lacking.

What else do you need to know?

- Sleep
- Hunger
- Medical issues including medications
- Sensory issues
- Sensory issues
- Trauma (big T, little t)
- Communication issues
- Lagging skills
- Processing difficulties
- Social issues
- What else is happening at home, in school, in the community?
Challenges to an FBA…

- Assessments
- Perspective
- Defining the issues
- Cherry picking data
- Mental health issues
- Ambiguity
- Preconceived ideas

Assessments
Perspective

Tantrum vs Meltdown

Nurture and Thrive

"NEXT TIME YOUR CHILD HAS A MELTDOWN, SEE THEIR SMALLNESS. OBSERVE HOW THEIR EMOTIONS ARE LARGER THAN THEY ARE. IN THAT MOMENT, YOU WILL FEEL EMPATHY INSTEAD OF EXasperation."

Ashley Stedlund Ph.D.
Definitions

Cherry Picking...

Mental Health Issues
The Kids We Lose, a 2018 documentary, we hear the kids describing how they've been manhandled (literally and figuratively) by the system; we also hear the self-blame and hopelessness that springs from being misunderstood and mistreated. We hear the parents describe how they have been inaccurately characterized as passive, permissive, inept disciplinarians, and we hear their isolation and desperation in trying to find the right help. We hear from classroom teachers — some of them "old school," others fresh out of training — who have received minimal training on understanding and helping kids with behavioral challenges but who are nonetheless on the hook for making things work in overcrowded classrooms that include many kids with special needs. Also, highlights the research that has accumulated on behaviorally challenging kids over the past 40-50 years, research telling us that these kids are lacking skills, not motivation.

**Assessment of Lagging Skills (ALSUP)**

Understanding why a kid is exhibiting challenging behavior is one of the most important parts of helping him or her. If you've taken the Walking Tour for Parents or Educators already, then you already know why kids are challenging: they're lacking the skills not to be challenging. Challenging behavior occurs when the demands of the environment exceed a kid's capacity to respond adaptively. That being the case, your first goal is to identify the skills that are lagging in the kid you're trying to understand and help. Your second goal is to identify the specific conditions (these are called "unsolved problems") in which challenging behavior is occurring. It's very hard to do Plan B without knowing the specific problems you're trying to solve. The goal of intervention is to solve those problems, and to do it in a way — collaboratively and proactively — that simultaneously teaches the child the skills he or she is lacking.
At the end….

- You should have enough information to develop an intervention plan.
- Don’t quit too soon. Be clear and concrete about the function.
- Create the plan with the team and the child.
- Make the plan clear and uncomplicated.
- Avoid interventions that don’t work.
- Try the plan.
- If the plan doesn’t work, change it. Neither the child nor the team fails; the plan can.
- Work out changes, one at a time.
- Meet frequently to review what’s working and what’s not.

Referrals for further information

- For occupational therapy assessments/therapy
- For speech and language assessments/supports
- For medical issues
- Neuropsychological assessments
- Specific assessments such as ASD or other developmental concerns, trauma
WE CANNOT SOLVE PROBLEMS WITH THE SAME THINKING THAT CREATED THEM.
ALBERT EINSTEIN

Resources
- Ross Greene
  www.livesinthebalance.com
- Temple Grandin, PhD
  www.templegrandin.com
- Michelle Garcia Winner: Social Thinking
  www.socialthinking.com
- Howard Glasser
  www.difficultchild.com
- Carol Gray
  www.thegraycenter.org
- Child Trauma Academy
  www.childtrauma.org
- Wright's Law
  www.wrightslaw.com

When adults rethink challenging kids, amazing things can happen.