

## Behavioral Supports\*

### Issue

People with intellectual and/or developmental disabilities (I/DD) need good care and support from the people in their lives so they can live happy, active lives. This includes support to deal with “behaviors of concern.” Behaviors of concern are behaviors that:

- Can harm the person with I/DD or other people.
- Make it hard to be around other people and get along with them.
- Make it hard to participate in activities.
- Get in the way of the person with I/DD living a good life at home, school, work, and in the community.

Aversive procedures have been used a lot on people with I/DD to deal with behaviors of concern, especially in the past. Aversive procedures are actions people take to make people with I/DD change how they behave. It is used to stop behavior that is harmful or dangerous. Aversive procedures hurt people with I/DD, sometimes very badly. Aversive procedures are things like:

- Not letting someone visit friends and family. This is called “deprivation.”
- Not letting someone eat. This is also “deprivation.”
- Spraying someone with cold water.
- Secluding someone, sometimes for a long time. This means putting someone in a room or area where they are alone and cannot leave.
- Physically restraining someone. This means holding them down or doing other things that keep them from moving.
- Using prone restraints. This means holding someone face-down to control them. People have died from this.
- Using electric shock.

Aversive procedures like deprivation, physical restraints, and seclusion do not help people with I/DD change behaviors of concern. Instead, aversive procedures can make it harder for people to learn good skills and behaviors. Aversive procedures are dangerous. They make people feel less human and take away their dignity. That is not ok – we must treat everyone with respect and dignity.

## **Position**

Support that helps people with their behavior is called behavioral supports. Behavioral supports should be:

- Based on what has been proven to work well.
- Easy to get.
- Provided in people's homes and other places where they usually spend their time. These are called "natural settings."
- Positive.

Families, caregivers, teachers, direct support professionals, and others should be trained and supported to use positive behavioral supports .in ways that help people with I/DD. Behavioral supports should:

- Be positive and help people with their behavior.
- Be based on each person's individual needs.
- Help people learn.
- Give people choices.
- Help people be a part of their family and community.
- Respect the person's beliefs and way of living.
- Include making changes to the person's environment, if they need it.

The Delaware Developmental Disabilities Council is against all aversive procedures. This includes using medication to control people's behavior. Behavioral supports must not keep food and drink from people with I/DD, hurt them, or humiliate them (make them feel embarrassed or ashamed).

Physical restraints should only be used to stop a person from hurting themselves or others and only after everything else has been tried.

These things should be considered when a positive behavioral supports plan is developed:

- What was going on when the behavior happened? (The circumstances)
- Where was the person when the behavior happened? (The environment)
- What do the person and their family think about the situation? (Their perspectives)
- What are the person's and family's beliefs and way of living? (Social and cultural background)
- What might make the person act the way they do? For example, being sick or in pain, medicine they are taking, or things going on around them. (Contributing factors)
- Is there enough information about the person's behavior to make a good plan? (Complete and accurate data)
- What is the behavior like and how long has the person been behaving that way?
- Why does the person behave the way they do? What are they trying to communicate?

People must also think about these things when setting up positive behavioral supports:

- Bad things that could happen. (Secondary effects and risks)
- What the law says. (Legal implications)
- How it will affect the person and others. (Social implications)
- Whether it is a good, decent way to treat the person. (Ethical implications)
- Whether it is possible to provide behavioral supports as planned. (Practicality of implementation)
- How hard it will be to provide behavioral supports. (Ease of implementation)

- Whether the supports can be provided in a way that respects the person and their family's beliefs and way of living. (Values and culture)

Positive behavioral supports should be:

- Developed using person-centered planning that includes the person with I/DD.
- Developed as part of a plan that also includes good medical, mental health, educational, and other services.
- Based on understanding why the person behaves the way they do, their abilities and contributions, and how support and treatment worked in the past.
- Described in a written plan that limits the person's rights and freedoms as little as possible. (It is "least restrictive")
- Based on what research has shown works well, including:
  - Supporting behaviors that help the person with I/DD meet their needs.
  - Teaching new skills that can be used instead of behaviors of concern.
  - Supporting positive behavior instead of rewarding behaviors of concern.
  - Making sure people are safe.
  - Providing information about how the support is working.
- Used in a kind, caring way that respects the person.
- Carried out by staff, family members, and others who have been trained and can provide behavioral supports in a positive way.
- Include changes to the environment in ways the person with I/DD and their family think are positive.
- Monitored (checked) to make sure the supports are:
  - Meeting the person's needs in a positive way.
  - Reaching the goals set in the behavioral support plan.
  - Changed quickly if not meeting the person's needs or goals.

\* The DE DD Council's position statement is based on the American Association on Intellectual and Developmental Disabilities (AAIDD) and The Arc United States position statement.

Revised: January 2024