

DOWN SYNDROME SOUTH AFRICA

BEHAVIOUR and DOWN syndrome

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EMOTIONAL and BEHAVIORAL BARRIERS to LEARNING and DEVELOPMENT

Specific Outcome:

It is not **ALL** children or adults with Down syndrome that experience challenging behaviour, however it does occur and then it can be quite perplexing to parents, caregivers and teachers.

This Webinar is going to focus on challenging behaviours, implement strategies in understanding and analyzing challenging behaviour; and provide guidelines in supporting positive behaviour.



INTRODUCTION

- Previously few children with Down syndrome and other special needs
 (Educational) needs attended preschool, mainstream schools and joining
 in social activities with typically developing brothers, sisters, cousins and
 friends.
- We are now seeing a growth in the number of these children participating in most mainstream activities.
- Can respond positively to many of today's challenges in mainstream schools, further education learning opportunities, employment and independent living.
- Are being recognised as people in their own right and are able to participate meaningfully in their communities' activities.



- Our attitude to disability lies in the fear of disability, presumptions and preconceived ideas that we may have on disability.
- These presumptions often lead our thoughts to influence our behaviour and actions towards disability.
- Staff need to be aware of and guard themselves against commonly held attitudes to disability.
- Don't feel sorry for children with a learning disability and as a consequence give them special treatment.
- Children do not 'suffer' from Down syndrome (as it is not an illness) and special treatment will only serve to isolate them from their peers. "Special treatment leads to Special problems"



- Common Myths used to describe persons with Down Syndrome
- People with Down syndrome are "Special"
- People with Down syndrome are "God's Angels"
- People with Down syndrome are always "Happy"



PITY
Leading to:
Overprotection and
Special treatment

PATRONAGE
Leading to:
Knowing best, failing to
listen or speaking for the
child

THE CHILD

DISCRIMINATION
Leading to:
Denial of access to
opportunities

VICTIMISATION
Leading to:
Bullying or subject to
Painful or inhumane
treatment



- Certain presumptions about disability is beginning to prove people wrong.
- Research has increased our knowledge about the capabilities of persons with Down syndrome.
- Significant advances in healthcare, early intervention and family support have vastly improved the quality of life for a person with Down syndrome
- Changes in education law have given children with Down syndrome and other Educational needs the right to full time education.

Professor Sue Buckley sums up the situation thus:

"Individuals with Down syndrome are people first, with the same rights and needs as everyone else. Their development is influenced by the quality of care, education and social experiences offered to them, just like all other people."



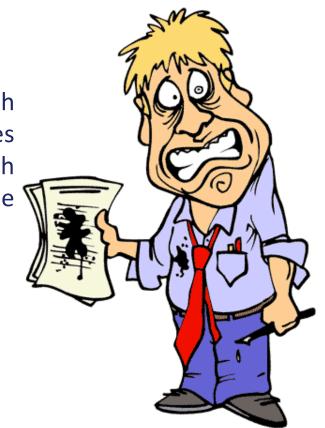
EMOTIONAL and BEHAVIORAL BARRIERS to LEARNING and DEVELOPMENT

- Remember misbehaviour is part of normal development. One needs to make the distinction between normal misbehaviour of early childhood and behaviours that are becoming disruptive and destructive.
- Behaviour difficulties are not part of the specific learning profile for learners with Down syndrome, nor are their behaviour problems unique to learners with DS. However, much of their behaviour will be related to their frustration in not being able to communicate their feelings and needs through well formed sentences.



CHALLENGING BEHAVIOUR

Challenging behaviour is defined as that which results in self-injury or injury to others, causes damage to the physical environment, interferes with acquisition of new skills, and or socially isolates the learner.





FORMS OF CHALLENGING BEHAVIOUR

Challenging behaviour takes on many forms such as:

- Stubbornness
- Non- Compliance
- Compulsive behaviour rearranging objects and repeating certain actions
- Social withdrawal
- Self talk
- Attention problems
- Aggression
- Tantrums
- Inappropriate oral sounds
- Swearing, screaming and yelling
- Mishandling objects throwing, tearing
- Inappropriate touching hugging, kissing, public masturbation and touching peers inappropriately
- Self injury, injury to others





Every behaviour has a setting event such as:

- Biological factors
- Social factors
- Family situations
- Learning Environment



Biological Factors: Persons with Down syndrome have added medical complications. A high incidence of illnesses may significantly increase the likelihood of challenging behaviour.

- Upper respiratory infections are very common in children with Down syndrome due to their low immune system
- Otitis Media (collection of fluid in the middle eardrum)
- Poor vision, short term auditory working memory
- Sleep Apnea (obstruction of the airways)
- Low muscle tone, which makes them tire more easily



Social factors:

- Others may be affected by Autism or Attention Deficit Disorder (ADD), which will influence their social development - more difficult to manage
- Also found in children with particularly delayed language and cognitive skills, so care should be taken in diagnosis
- Peer Isolation age approriate social skills, much older than his peers
- Communication does the learner have the spoken language and understanding to know how to react and respond in certain situations
- **Sex and Relationship Education:** What is acceptable behaviour in school, public and private spaces, how to separate friendships from relationships



Some children with Down syndrome experience high levels of anxiety - may feel a need to cling to routines and rituals.

Routine: Children with Down syndrome trive on routine and structure – does the learner understand what is expected of him/her and how to behave in the class, corridors, assembly and the school grounds.

Family: Divorce-Not having consistent rules – different rules in each household. Death of a loved one or relocation to new home or location.

Learning Environment: This includes the set-up of the environment such as temperature, lighting, large classrooms size and loud noises which can lead to high levels of anxiety.



Children with Down syndrome engage in two types of behaviours:

Attention seeking behaviour

Escape/Avoidance behaviour



The most common form of inappropriate behaviour in all children is behaviour designed to gain attention. Children with Down syndrome may be particularly attention-seeking because they:

- Enjoy being the centre of attention and dislike being ignored
- Often the clown of the class
- Have been successful in using attention-seeking behaviours in the past to get their own way or avoid work
- **Differentiation:** May find that the work they are being given is too difficult, too easy or just boring
- May want to do the same work as everyone else, but an adult insists they do something different or special, often outside the classroom;



- May get annoyed when other people don't take the time to understand what they are trying to say
- Misbehave because they are angry or frustrated
- They may imitate immature or badly behaved peers
- Demand for certain things (other children's belongings or lunch)
- Access to activities (a trip, a game, only play their song)



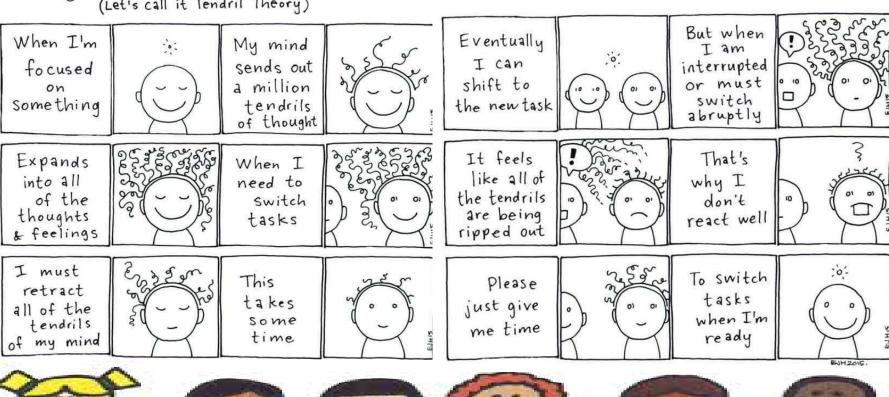
Escape/Avoidance:

- Task too difficult
- May have forgotten what they have been told
- May have failed to understand instructions they have been given
- May be confused by different adults giving conflicting messages
- Often subjected to a higher level of structure and supervision
- May refuse to co-operate with their teacher or assistant as a matter of principle
- May be difficult if they feel they are given no opportunities to choose their own activities
- They may feel under pressure and need a break
- Difficulty with transitioning- Exposed to a situation they are not familiar with



TRANSITIONING

Why it's hard to switch tasks (Let's call it Tendril Theory)





Strategies for dealing with behavioural challenges



There is a perception that you cannot discipline a person with Down syndrome because they won't understand what you are saying or trying to teach them.

- "If a child doesn't know how to read, we teach"
- "if a child doesn't know how to swim, we teach"
- "If a child doesn't know how to multiply, we teach"
- "If a child doesn't know how to drive, we teach"
- "If a child doesn't know how to behave, we
-punish?



So when do we intervene, when behaviour takes control over all aspects of your

life.



"I am so frustrated by these behaviours, some days I feel so incompetent, sometimes I cry not because he is hurting me but because I don't know what to do with him".



How can I learn to understand my learner's behaviour:



• Learning takes places in three stages – Receiving, Processing and Expressing – By observing and identifying the barriers, early intervention strategies can be put in place.

 Learning is an ACT-tivity – Learners have to be active to learn. The more one uses their strengths the more you are likely to engage them.



- Every behaviour has a trigger setting event;
- Before trying to change a child's behaviour, it is important to understand the behaviour
- Try to work out why the child is doing it and what rewards they are getting from the behaviour. There is always a reason for behaviours.
- Remember best way to minimise problem behaviour is to replace it by teaching a more desirable alternative.
- Never take good behaviour for granted. Always be ready to praise and encourage the child even if they are doing something that is very ordinary.



- Describe the behaviour very clearly. Observe the learner in different settings and at different times
- Try to work out why the child is doing it and what rewards are they getting from the behaviour.
- Rearrange the room; support the child more etc.
- If the child appears to be seeking attention, try to ignore the behaviour and give the child attention whenever they behave in an acceptable manner. Make sure no other person gives them inappropriate attention.
- Anger and frustration tackled as a source. Try and understand the cause of the anger. Take the child to a quiet place give them time and space to calm down.
- Confusion is best dealt with by very consistent handling and clear instructions.

 Make sure all adults treat the child in the same way both at home and at school.



- Monitor and observe behaviour (ABC)
- Measure the behaviour
- Use a behavioural chart
- Ensure all staff understand the learning profile of a child with Down syndrome
- Ensure the rules are clear and visually presented
- Stick to routine
- Use short, clear instructions
- Use a picture folder or emotion chart so leaner can express feelings
- Provide choices
- Teach consequences
- Role Play
- Teach age appropriate social skills
- Place next to positive role models
- Offer Rewards



LET'S KEEP IT SIMPLE

- Select ONE Behaviour
- Begin by choosing one problem behaviour that you feel disrupts your teaching the most.
- By choosing one behaviour at a time, both you and your learner will be more successful.



ABC OBSERVATION TABLE

Name of Child:			
Date of Incident			
A for Antecedent	B for Behaviour	C for Consequence	
What provoked the behaviour?	What did the child do?	What happened after?	Where did it happen and with whom



CASE STUDY

Cody was a 3 year 10 month old boy with Down syndrome who attended a preschool program where he received a combination of intensive instruction and participation in an integrated preschool class in which half of the children had mild disabilities and half were typically developing. In his preschool class, Cody had a tendency to engage in challenging behavior that consisted of refusal to comply with teacher requests (i.e., ignoring the requests and flop & drop). A functional assessment revealed Cody engaged in noncompliant behavior often accompanied with dropping to the floor when his teachers requested that he transition from one activity to another (i.e., the antecedent). In many instances, following engagement in the challenging behavior, Cody ultimately avoided transitioning to the next activity.



INTERVENTION

Cody's education team chose to implement two different antecedent interventions prior to requesting that Cody transition. One of the interventions, prespecified reinforcer, involves informing the child what she/he will receive upon completion of a specific task (in this case, the transition). For Cody, the reinforcing items (e.g., computer games, stickers, crayons, and bubbles) were chosen based upon the specific transition. For example, Cody consistently engaged in challenging behavior when asked to come in from the playground. As a result, one of his favourite activities in his classroom, playing on the computer, was prespecified prior to requesting him to enter the school (e.g., "Cody, we have your favourite game all ready for you to play on the computer. Quick let's get on line and go inside so you can take a turn.").



IMPAIRED THINKING AND REASONING SKILLS

Difficulty to transfer skills from one situation to another.

Difficulty to understand abstract concepts / subjects

Difficulty in problem solving

- 1. Do not assume that skills will be transferred automatically.
- 2. Teach new skills by using a variety of methods, materials and contexts.
- 3. Reinforce abstract concepts with visual and concrete materials.
- 4. Offer additional explanations demonstrations.
- 5. Encourage problem solving by using meaningful and practical everyday life situations.



Know each learner as a person, not only as a learner – get to know them through information gathering, Their likes and dislikes: what is your favourite TV show, what do you like to eat, who is your favourite singer, are you afraid of loud noises, are you afraid of big crowds ect....



EMOTIONAL SUPPORT

Learners will learn best if they:

- Feel encouraged
- Are being listened too
- Are not left alone
- Feel liked and loved
- Feel respected
- Have rules and limits
- Are praised
- Are disciplined
- Can listen to stories
- Are forgiven
- Feel secured and accepted



To reduce attention seeking behaviours:

- Give the child attention when they are behaving well
- Try to ignore attention-seeking behaviour encourage peers to do the same
- Work closely with the parents to ensure that they support the school
- To reduce frustration: Ensure tasks are appropriately matched to the child's ability
- Use teaching strategies that build on the child's strengths.
- Children should spend the majority of time in class (85% or more) with some time in small groups with other members of the class
- Keep withdrawal sessions to a minimum
- Take time to listen to what the child is trying to tell you. Use a simple home/school diary to share information with parents or care-givers.



To avoid confusion:

- Make sure instructions are clear and language is simple
- Teach the basic rules of behaviour and reinforce them with pictures or lists on the wall
- Compare notes with your colleagues and with the child's parents
- The use of social stories can help to reinforce acceptable behaviours

To give the child more control over their life:

- Make sure they have opportunities to choose, refuse an activity or do it later;
- Use work boards
- Choose work matched to the child's ABILITY;
- Keep the child in the classroom for additional work whenever possible. If withdrawal is really necessary, allow them to bring a friend;
- Give the child the opportunity to interact with their peers without continual adult supervision.

To reduce the effects of inappropriate models:

- Keep your expectations as high as possible. Expect the child to behave ageappropriately;
- Try to give them regular opportunities to mix with children displaying age-appropriate behaviours;
- Encourage parents to give them age-appropriate experiences.



Specific learning styles of children with Down syndrome



Persons with Down syndrome are not:

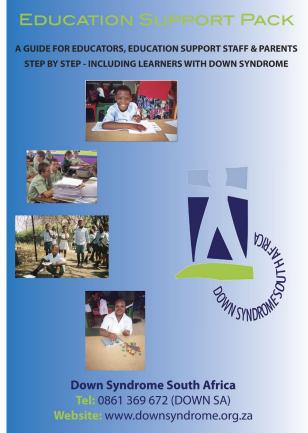
- Just developmentally delayed they have a specific learning profile of strengths and weaknesses
- Visually Strong and kinaesthetic learners
- The pupil will understand language and concepts much more easily if they are reinforced visually with pictures, diagrams, symbols and easy read text.
- Learners with Down syndrome learn through association, a strong desire to learn from peers, to imitate and take their cue from them
- Knowledge and understanding of the <u>specific learning profile</u> for pupils with Down syndrome is <u>vital</u> - why behaviour difficulties may occur, how we manage the behaviour, and how we create strategies for the pupil to enable them to be successful in promoting positive models of behaviour.





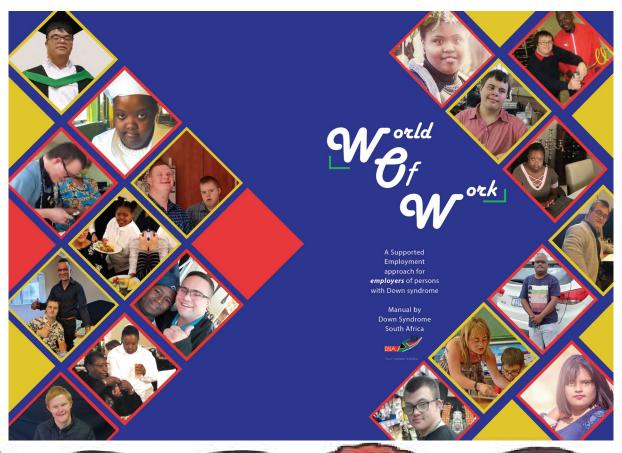


EDUCATION SUPPORT PACK





SUPPORTED EMPLOYMENT









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