The Story of Samantha

Samantha, 10, likes to write poetry, use computers, and listen to music. The principal describes her as a model student. Last year no one would have said Samantha was a model student. She scratched, hit, bit, damaged equipment, ran out of classrooms, and pulled her educational assistant's long, blonde hair. Sam's parents lived on the edge, always waiting for "the phone call" from school.

This third grader with autism and moderate speech disabilities who did not "belong," become the fourthgrader genuinely welcomed at school thanks to a strategy known as positive behavioral support.

Traditionally, people did not ask why inappropriate behavior occurred. They just wanted to "fix" a situation. If they had spent time investigating "why," they might have realized the behavior had a purpose. In Samantha's situation, outbursts were her methods to communicate. When she threw an object, it was her request for attention. Pulling hair got her out work that she did not want to do.

Find the reason for the behavior, then teach a more acceptable behavior. That's what a team of people who best knew Sam did. In her situation, like most others, contributing complex factors first had to be understood and were pinpointed in a "functional assessment."

In Samantha's functional assessment, trained special-

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ists from the University of Washington at Seattle talked with people in Samantha's life and directly observed her. When the team had a detailed description of the challenging behavior, members made predictions when the behavior most likely (and least likely) occurred. Then they tested their ideas to see whether their hunches were on target.

Samantha's functional assessment showed that she used her outbursts to avoid difficult tasks, obtain attention, and to express her frustration at not being able to make choices or have some control in her environment. Lack of sleep and changes in routine also set off her outbursts.

Once they knew Sam's triggers and the reasons for her behavior, the support team made changes for her life that gave her day greater predictability, more choices (but not so many that would overwhelm her), fewer instructions, and added relevance to her school work.

Changes happened at home, too. Once, Samantha behaved better, her parents, school staff, and others who cared about Samantha got together and discussed the "ideal" life for Sam. All thought that making friends, spending more time in the regular classroom rather than the resource room, and medications with fewer side effects were part of that ideal life.

Soon Sam was in the school band, Girl Scouts, an arts program, and a church group. This exposure helped Sam's social skills, but she still got frustrated easily when she did not get her way. Sam's parents and

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school staff taught her to recognize anger through picture cards. They also encouraged Samantha to talk about her feelings and go to a quiet place for relaxation when she got mad.

To help make these new changes stick, Sam's appropriate behaviors were continually rewarded. To make rewards ones that Sam really liked, the team asked those who knew Sam for suggestions and they asked Sam herself. Samantha had very definite ideas about things that she liked! Ice cream ranked at the top, followed closely by "slurpees," a drink from a local store; Barbie doll items; and McDonald's restaurant food. In time, she did not need as many material rewards. But she always received continual praise for her desirable behavior.

Bit by bit, Samantha's new life took form. Yet, the course did not necessarily run smoothly. Since they never knew exactly when Samantha might have an outburst, her support team prepared advance plans to deal with possible relapses.

Samantha's behavior changed relatively quickly. But old habits often resurfaced. Checking weekly (even daily) for progress, such as counting the number of times a behavior does or does not occur, decreases in medicine dosages, writing in a daily log, and other methods, helped keep the plan working. Behavior has truly changed when in the child's everyday environment, each of these is true:

• The behavior does not happen in a normal environment.

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- When things that once set off the behavior happen, the child uses a more appropriate, positive strategy.
- The child can be in different settings and behave well even if someone is not there to be a guide or assist.

If you would like to know more about Samantha's story, see the videotape "Samantha," available for \$30.00 prepaid (price includes shipping and handling) from the Beach Center on Families and Disability, 3111 Haworth, University of Kansas, Lawrence, KS 66045.