Finding the Causes of Challenging Behaviour: Part 2

Mark Addison, Consultant Clinical Psychologist, Rapid Intervention Team, Somerset Partnership NHS and Social Care Trust.

All behaviour happens for a reason, and understanding the causes of challenging behaviour is vital. In this information sheet we aim to help further your understanding of the causes of challenging behaviour, and help you to identify times and situations when the behaviour may be more likely to occur.

We look at the causes, as well as the different stages of behaviour, and explain how a 'functional assessment' can increase our understanding of challenging behaviour.

Finding the Causes of Challenging Behaviour is the second information sheet in this series. It is recommended that it is read alongside “Understanding Challenging Behaviour: Part 1” and “Positive Behaviour Support Planning: Part 3”

Understanding why challenging behaviour is happening

Children or adults with a severe learning disability are typically either unable to talk, or have very limited verbal communication skills. This inability to express needs verbally can mean that the person may learn to use other ways to get their needs and wants met, including challenging behaviour. Often, the need that the person wants to have met is reasonable (e.g. wanting a drink, or wanting to stop an activity that they don’t like). However, the way they are telling us this is through their challenging behaviour. It is simply the way that they are communicating their need that is problematic.

People with learning disabilities sometimes have very little choice or control over their lives, which can lead to challenging behaviour. Anyone who is not given choices, and is unable to control what happens in their day to day life, is at risk of developing challenging behaviour, as it can be a very effective way of influencing what happens to you.

However it is very important to consider the degree of intent that lies behind behaviour. It may be tempting to think that people “know exactly what they’re doing”, but it is important to remember that many of our own immediate reactions to situations are fairly automatic, particularly when we are feeling scared or angry.

Challenging behaviour in children and adults with severe learning disabilities is not
necessarily deliberate or planned. Rather, in situations of need, people with severe learning disabilities may simply behave automatically in ways which have been successful in the past. People will learn to use what works!

The first step in understanding challenging behaviour is to try and find out why the behaviour is happening. Common reasons include:

**Health**

When trying to understand the reason(s) for a child or adult's challenging behaviour, it is important to first rule out an underlying medical problem. If the person is experiencing pain or discomfort, and is unable to tell carers this, challenging behaviour may occur.

Health is one of the first things to check with a medical professional (a GP or nurse) if someone’s behaviour suddenly gets worse. Common conditions such as ear infections, tooth-ache, constipation, urinary tract infections or epilepsy, may all cause or contribute to challenging behaviour, and it is essential to get the right treatment for these health conditions.

**Change**

It is also important to consider if there have been any big changes in the person’s life that could be causing the person to display challenging behaviour. For example, a brother or sister leaving home, a death in the family, divorce, a house or school move, or a favourite carer leaving. These are important issues and the person may need support to understand and come to terms with these.

**What purpose (or Function) does challenging behaviour serve?**

When challenging behaviour happens it may seem as though there is no obvious reason, and statements like, “That's just what John does” or “It just came out of the blue”, are common. However, there will always be a reason why the behaviour has happened. The challenge for parents and paid carers is to work out what purpose the behaviour serves for the person, and how to prevent it from happening again. Although there are many reasons why a person may display challenging behaviour, there are four common purposes:

1. **Social Attention:** We have all heard the saying, “It’s just attention seeking behaviour”. It isn't bad to want attention from others. However, for a variety of reasons (e.g., limited communication skills, boredom, or an inability to occupy themselves) some people may learn that behaving in a particular way is a reliable way of attracting others’ attention, even if it is negative attention. For example:

   | Sarah finds adult 1:1 interaction very rewarding, but at school Sarah has to share the teacher or assistant's time with the rest of the class. Sarah is | Sarah wets herself | The teacher or assistant take Sarah out of the classroom to help her clean up and change into dry clothes | Sarah gets 1:1 time with an adult. She learns that when she wants attention from an adult at school that she wets herself then she gets attention | The function of Sarah’s behaviour is that it gets her ATTENTION |

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2. **Tangibles**: Here it is the desire for certain things (e.g., food, drink, objects or activities) which is providing the motivation for the behaviour. Again, it isn’t *bad* to want these things. If you are hungry, it makes sense to try and get something to eat. If you see something in the shop that you like, it makes sense to try and get someone to buy it for you. However, it becomes a problem when the person learns to act inappropriately to get these things. For example:

<table>
<thead>
<tr>
<th>Tom is thirsty</th>
<th>He finds a cup and throws it at someone</th>
<th>Tom gets given a drink</th>
<th>Tom has learned that when he wants a drink he throws a cup and he gets a drink</th>
<th>The function of Tom’s behaviour is that it gets him something TANGIBLE (i.e., a particular item that he wants)</th>
</tr>
</thead>
</table>

3. **Escape**: Whilst some people like attention, some people would prefer to be left alone. Rather than behave in a particular way to get people’s attention, some people will behave in a way that helps them to avoid/escape situations or activities that they don’t like, or don’t find that rewarding. For example:

<table>
<thead>
<tr>
<th>Holly doesn’t enjoy/like group activities</th>
<th>Holly hits the person in the group sitting nearest to her</th>
<th>The teacher takes Holly to sit out in the quiet corridor</th>
<th>Holly learns that when she wants to be taken out of a group activity, she hits someone, and gets removed from the class</th>
<th>The function of Holly’s behaviour is that it helps her ESCAPE</th>
</tr>
</thead>
</table>

4. **Sensory**: Sometimes behaviour is internally rewarding, or self-reinforcing, i.e., what is happening around the person (externally) is not as important as what is happening inside the person. For example:

<table>
<thead>
<tr>
<th>Farhan has been on his own in the sitting room for 20 minutes, he is unable to occupy himself</th>
<th>Farhan rocks back and forth and hums loudly</th>
<th>Farhan likes the feeling he gets from this, he can do this for a long time</th>
<th>Farhan learns that when he has nothing to do he can stimulate himself by rocking and humming</th>
<th>The function of Farhan’s behaviour is SENSORY</th>
</tr>
</thead>
</table>

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These behaviours may appear pointless, annoying or distressing to the observer. However, for the person themselves, the behaviour may serve the function of helping them cope with unpleasant negative feelings such as boredom or anxiety. Although a challenging behaviour may appear negative to us, the behaviour may serve as a positive coping strategy for the individual.

Whatever the function of the behaviour is there will be certain times and specific situations when you could predict that a person may be more likely to display challenging behaviour. Known as “Setting events” and “triggers” to behaviour these two key areas are important for carers to understand. Further understanding of what the setting events and triggers are for the person you care for can help you to avoid certain situations or put things in place which could help to prevent an incident of challenging behaviour.

**Setting events**

A setting event is anything that increases a person’s level of anxiety or makes a person more sensitive to and less tolerant of people, environments and situations.

A setting event can be something that happened in the past (e.g., being near someone who was upset or angry; or not getting enough sleep the night before), or it can be about what is happening now (e.g., feeling ill, hungry or thirsty; or going into a crowded/noisy room).

Setting events build up over time, and increase the person’s level of anxiety or sensitivity. The more setting events there are, or the more anxiety they cause, the more likely someone is to display challenging behaviour in response to a ‘trigger’.

For example, asking a young person to put their shoes on might be fine on a good day, but on a day when several setting events have occurred, e.g., they’re feeling unwell and have had little sleep, the same request might trigger a response like throwing the shoes.

Setting events happen to everybody whether we have a learning disability or not. The difference is that we usually have a better understanding of what is happening and can do something about it. For example, if we have a headache we can take paracetamol, or if the environment is too noisy we can remove ourselves or just cope with it!

**Identifying triggers**

A trigger is the event that happens immediately before the challenging behaviour to ‘cause’ it. This is also known as an ‘antecedent’.

Being aware of the potential triggers for challenging behaviour can be the first step in reducing the behaviour. Knowing what the triggers are can help you to avoid them, or help you to predict specific times that challenging behaviour may be more likely to happen, so you can help the person to cope with them better.

Some common examples of triggers are:

- Being asked to do something - or told to stop doing something
• Being told you can’t have or do something you want
• A particular individual or activity
• Noisy, hot, or crowded environments
• Being bored, or not being spoken to or involved

Knowing the triggers for the person you care for e.g., crowded places, can help you to put things in place to reduce their anxiety. For example, you could identify quieter times to go shopping and teach the person a way to communicate that they are anxious and want to leave. Providing the person with more control over their environment and a way to communicate key messages could help them to manage their anxiety and prevent an escalation into challenging behaviour.

Different stages of behaviour:

Challenging behaviour is unlikely to come ‘out of the blue’, or happen without warning, but it can happen very quickly or with signals that are hard to spot. Behaviour develops in stages as shown in the ‘arousal curve’ diagram below.

Figure 1: Arousal curve showing different stages of behaviour

The Green ‘Proactive’ phase is where the person is feeling mostly calm and relaxed and is able to engage positively with you in a meaningful way. The aim is to try and support the person to stay in this phase as much as possible. It is important to think about what it is that is helping the person to feel calm and relaxed.

The Amber ‘Active’ phase is where the person may be starting to feel anxious or distressed and there is a chance that he/she may need to challenge you in some way.
Here we need to take swift action to support the person to return to the Green Proactive phase as quickly as possible to prevent challenging behaviour.

**The Red ‘Reactive’ phase** is where challenging behaviour actually occurs and we need to do something quickly to achieve safe and rapid control over the situation to prevent unnecessary distress and injury.

**The final Blue ‘Post Reactive’ phase** is where the incident is over and the person is starting to recover and become calm and relaxed again. We still need to be careful here as there is a risk of behaviour escalating again.

Identifying the different stages of behaviour can help you to make sure the person has what they need on a day to day basis. This provides an opportunity for those caring for the person to teach them useful skills to help them get what they want and need. It also provides information that acts as ‘early warning signs’ (in the Amber ‘Active’ phase) that the person is expressing that they are anxious; wanting something they are unable to ask for; not liking something; feeling bored, etc. These early warning signs provide the opportunity to intervene before the behaviour escalates to a full blown incident of challenging behaviour.

**Functional Assessment**

An assessment of challenging behaviour is usually called a ‘functional assessment’ or ‘functional analysis’ and aims to provide some answers about the causes of an individual’s behaviour.

By conducting a functional assessment, you are learning about people before you intervene in their lives. Rather than basing support strategies simply on ‘hunches’, ‘trial and error’, or ‘what seemed to work for someone else’, a functional assessment should guide the development of a more individualised behaviour support plan. A functional assessment is usually carried out by a Psychologist or other behaviour specialist in collaboration with parents/family carers or primary carers. How you access this service will vary in different parts of the UK, but your GP or Social Worker will advise you.

As a family carer, you are likely to be asked questions about the challenging behaviour of your family member. This may be in a face-to-face interview, by questionnaire, or you may be asked to fill in rating scales. You may also be asked to keep a recording chart (see next section). In addition to this, the person carrying out the functional assessment may also observe the behaviour where it usually happens e.g., in the family home, the school, or the supermarket.

The professional conducting the assessment will analyse all of the information collected to come to a conclusion about the most likely function(s) of the challenging behaviour.

**Recording Behaviour**

Keeping a record of challenging behaviour can help us to identify its function. It is important to record:

1. A clear **definition of the challenging behaviour in question**: Before conducting a functional assessment, it is essential to have a clear definition of the behaviour of concern – a description of what the behaviour looks like,
which may include specific examples of the behaviour, as well as how often it happens.

For example: Rather than saying “John has tantrums” which does not provide a clear description of the actual behaviour, it is better to agree a specific description such as, “John pulls another person’s hair with one or two hands”

As a functional assessment may consider information provided by more than one person, it is important that everyone has exactly the same definition of behaviour in mind.

2. **Early warning signs**: In addition to defining the challenging behaviour itself, it can be helpful to define the ‘early warning signs’. These simply refer to any physical signs or behaviours that tend to happen *before* the challenging behaviour occurs. For example, someone becoming red in the face and starting to pace up and down quickly may be a typical sign that they are feeling anxious which could lead to aggressive behaviour.

3. **An assessment of the trigger/antecedent (i.e. what happens before) events**: Certain things often appear to trigger challenging behaviour. They can be more immediate triggers (e.g., being told “no”, or being refused something), or ‘setting events’, which refer to situations where the person is more likely to resort to challenging behaviour (e.g., crowded/noisy environments, the time of day, unpredictable routines, pain, or illness).

4. **An assessment of the consequence (i.e. what happens after)**: What is the person getting, or not getting from the behaviour that motivates them to do it again, and again and again?

Many consequent events are *externally* motivating e.g., the consequence of banging your head may be that you gain more or less attention from people; get a desired object, food or drink; or escape from an activity or task.

Consequent events may also be *internally* motivating e.g., the consequence of banging your head when you are feeling bored, may be that you feel more stimulated.

There are lots of different methods of recording information about an individual’s behaviour, and a commonly used tool is known as the ABC chart; where A stands for ‘Antecedent’, B for ‘Behaviour’ and C for ‘Consequence’.

The aim of ABC charts is to identify links between the behaviour and its antecedent and consequent events, to aid understanding of the function that a particular behaviour serves for an individual.

- **Appendix 1** provides a blank chart which may be photocopied
- **Appendix 2** provides an example of an ABC chart which includes suggestions about the type of information that may be useful to include under each heading
- **Appendix 3** Provides an example of a completed ABC chart, showing good and bad examples of recorded information
Although the process of using ABC charts is relatively straightforward, it can be complicated by the fact that the recording is often done by more than one person (e.g., parents, respite carers and teachers). In addition, a person’s behaviour may actually serve *more* than one function, be used for different purposes in different locations and be responded to in different ways by different people. Again, this makes it really important for all concerned to decide on a good clear definition of the behaviour *before* people start recording.

**Outcomes of Functional Assessment**

The aim of a functional assessment is to understand what the purpose of the behaviour is, so that we identify better ways for the person to get their needs met.

Once you have a good idea about the function of the behaviour, you can start to think about how to respond to that behaviour. The results of the functional assessment should inform any strategies that are introduced, with the aim of stopping, reducing or encouraging alternatives to challenging behaviour.

Ultimately, the aim is to support the person to learn better ways to get their needs met, that are equally, if not more effective, than challenging behaviour. However, it is important to recognise that challenging behaviour can occur for very complex reasons, and there will be individuals for whom those reasons remain unclear, even after a functional assessment has been carried out. Nevertheless, even behaviour support plans based on tentative theories can prove useful in the long-term.

**Positive Behaviour Support Plans**

The next step is to use the information gained from the Functional Assessment to plan how to reduce challenging behaviour or lessen the impact on the person and those caring for them. A Positive Behaviour Support Plan draws together all the information from the assessment to create an individualised plan to help keep everyone safe, and to identify where the person would benefit from being taught additional communication or other skills. For example:

- Teaching a person another form of communication such as signs or picture cards to indicate they have finished an activity or to ask for a drink
- Teaching a person who has difficulty waiting strategies to cope better with waiting
- Helping someone to develop skills that will enable them to be more involved in day to day things, such as domestic chores, getting dressed and personal care

A good behaviour support plan can ensure that everyone involved with a person’s care and support has a shared plan, based on an agreed understanding of the causes of the person’s challenging behaviour. This provides a consistent approach, to helping people with severe learning disabilities feel secure and happy, and to increase their independence skills.

Further information about Positive Behaviour Support Plans can be found in the Challenging Behaviour Foundation’s information sheet “Positive Behaviour Support Planning”
<table>
<thead>
<tr>
<th>DATE &amp; TIME</th>
<th>NAME:</th>
</tr>
</thead>
<tbody>
<tr>
<td>ANTECEDENT Location, people, activity</td>
<td>ABC RECORD CHART</td>
</tr>
<tr>
<td>BEHAVIOUR Describe what you saw</td>
<td></td>
</tr>
<tr>
<td>CONSEQUENCE What did the carer do/how did the person react</td>
<td></td>
</tr>
<tr>
<td>POSSIBLE REASON/PURPOSE</td>
<td></td>
</tr>
</tbody>
</table>
Appendix 2

Record the ANTECEDENT events (Things that happened BEFORE the behaviour) –

1. What did the person reach, do/how did the person react?
2. Describe what you saw
3. Location, people, activity

How to complete the ABC CHART

Antecedent

Consequence

Behaviour

Record the ANTecedent events (Things that happened BEFORE the behaviour)

Record the CONSEQUence (What did the carer do/how did the person react)

Record the BEHAVIOUR (what happened AFTER)

This involves documenting:

- What happened AFTER
- Describe a detailed description
- What did it look like?
- This involves recording: behaviours (what happened AFTER)
- Record the CONSEQUences of the behaviour

Provide a step-by-step description

Was anyone else around or had anyone just joined?

Were there any obvious setting events, e.g.:
- Feeling well
- Bad night's sleep, missing their mum or dad?

Were there any obvious triggers, e.g.:
- Too noisy
- Wanting something
- Did the person seem to be communicating?
- Happy, sad, withdrawn, angry or distressed
- How did the person look or sound?
- Where were they? What were you doing?
- Had an activity just ended or been cancelled?
- Had a request been made of the person?
- Did the person ask for, or want something specific to eat or drink?
- Did the person ask for, or want a specific object or activity?
- Where were you? What were you doing?
- How did the person's mood appear? E.g.
- Did the person seem to be communicating?
- Happy, sad, withdrawn, angry or distressed
- How did the person look or sound?
- Was anyone else around or had anyone just joined?

Record the BEHAVIOUR (what happened AFTER)

Provide a step-by-step description

Approximately:

Head with his right hand

Stood in the kitchen

Ran out of the living room

What happened E.G.

Specific object or activity

Something specific or internal

Heard a request for, or did they want a

Something specific or internal

Heard a request for, or did they want a

Heard a request for, or did they want a

Heard a request for, or did they want a
<table>
<thead>
<tr>
<th>DATE</th>
<th>TIME</th>
<th>Antecedent</th>
<th>Behaviour</th>
<th>Consequence</th>
<th>Purpose</th>
<th>Possible Reason</th>
</tr>
</thead>
<tbody>
<tr>
<td>Monday 6.1.09</td>
<td>9.15am</td>
<td>Tom got up late</td>
<td>Tom looked confused; he made a loud grunting noise and grabbed John's glasses.</td>
<td>Tom ran out of the kitchen crying.</td>
<td>Told off.</td>
<td>Tom has a poor night's sleep.</td>
</tr>
<tr>
<td>Monday 6.1.09</td>
<td>6.1.09</td>
<td>John asked Tom to clean up the drink he had spilled.</td>
<td>Asked Tom to clean up the drink.</td>
<td>John shouted 'No' loudly and asked Tom to stop.</td>
<td>He is aggressive</td>
<td>He is spoilt</td>
</tr>
</tbody>
</table>

Example of how to observe behaviour, with a bad example and a good example shown.