Supporting Challenging Behaviour in Autistic Students

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CEBM
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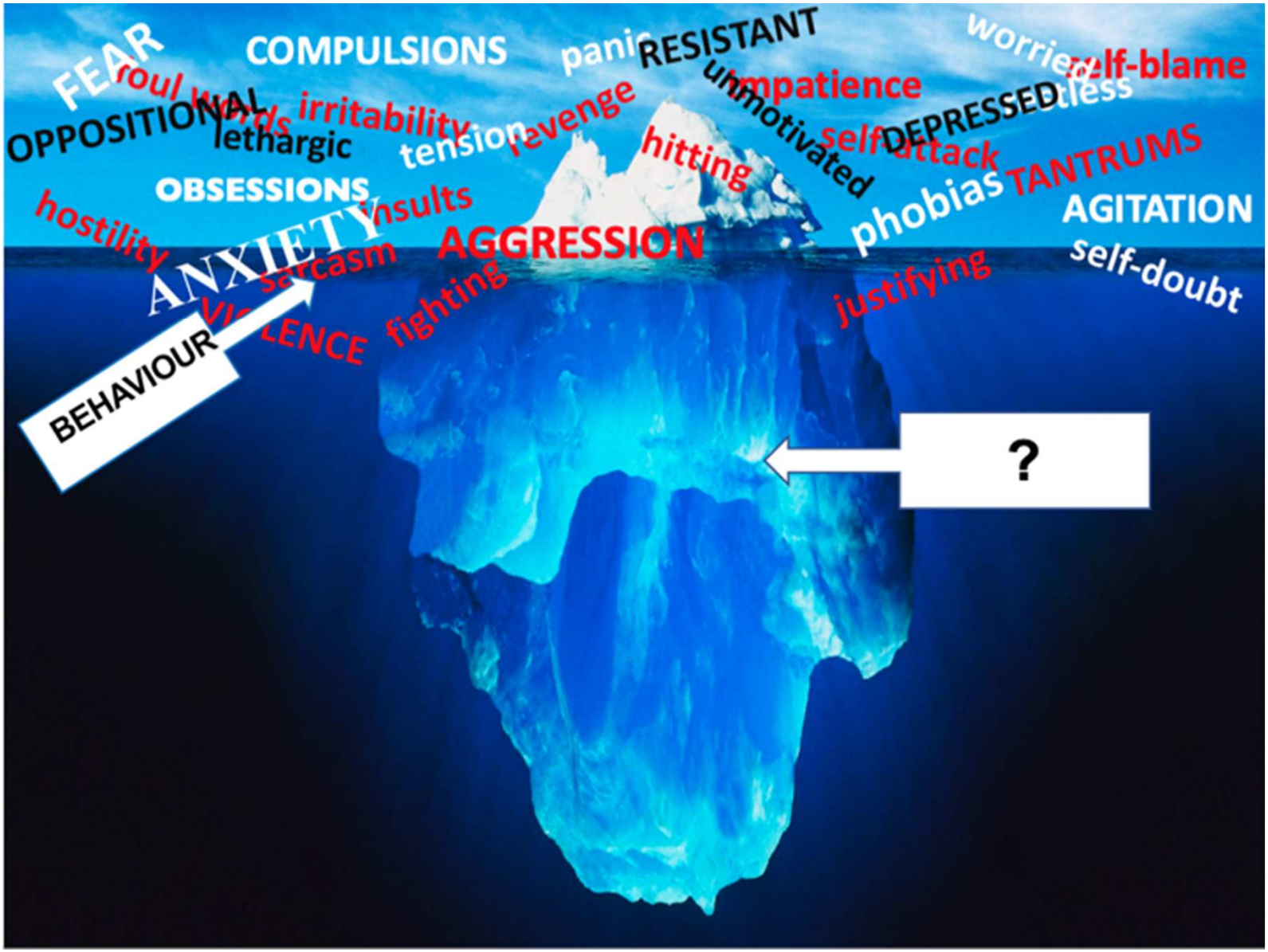
Outline

- What is behaviour?
- What is at the root of behaviour?
- How does behaviour change?
- Why look at autism and behaviour? Are behaviour problems in students with autism different from neurotypical students?
- What to consider when looking at behaviour?
- Other concerns and comorbidities: developmental trauma in ASD students
- How can we support a student with behavioural challenges? Practices to avoid and why, best practices, etc.

What is behaviour?

- Behaviour “is the way in which an animal or person acts **in response to** a particular situation or stimulus whether internal or external” (definition from dictionary).
- Behaviour “is the **adaptive responses** assembly that a body equipped with the nervous system performs” (Neveanu, 1978).
- Behaviour
  - is communication and reveals an underlying need
  - can be conscious* or subconscious
  - is influenced by heredity and environment

** Even though student may seem ‘conscious’ of their behaviour, we must understand that they are being pushed by their emotions (survival) and instincts (attachment defense) to react.*

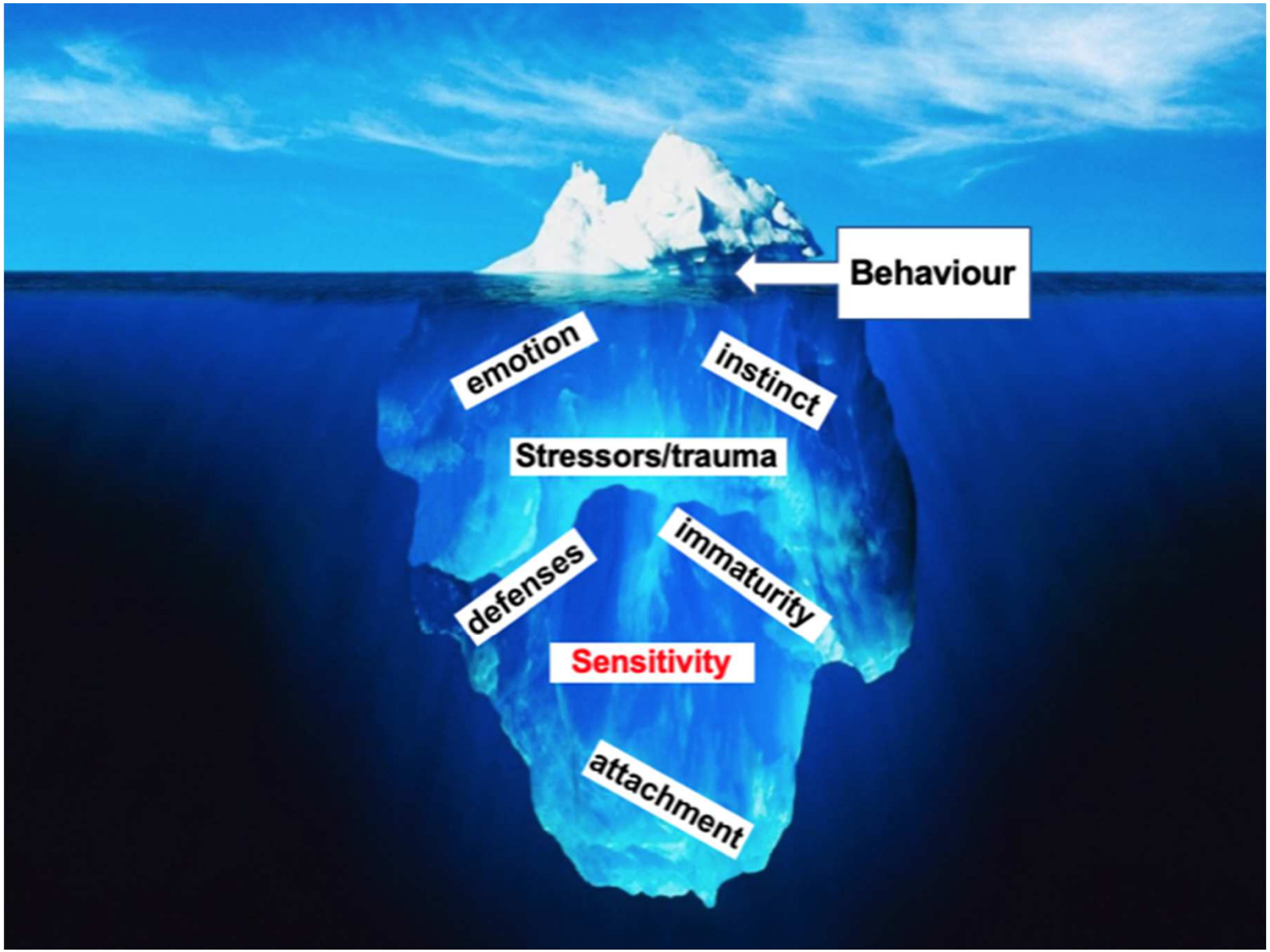

FEAR
COMPULSIONS
panic
RESISTANT
worried
self-blame
foul words
irritability
impatience
OPPOSITIONAL
lethargic
tension
revenge
unmotivated
self-attack
DEPRESSED
hitting
phobias
TANTRUMS
OBSESSIONS
AGITATION
hostility
insults
ANXIETY
AGGRESSION
self-doubt
sarcasm
justifying
fighting
BEHAVIOUR
?

What is at the root of behaviour?

- Cannot view behaviour **in isolation***, but rather must be informed by neuroscience, child development and attachment theory.
- Behaviour isn't always what it seems, we need to dig deeper and look at what's happening beneath, at the root.

** Behaviour can be influenced by so many factors: immaturity, hypersensitivity, environmental stress/trauma, defenses, emotions, instincts, etc.*

Tantrum vs. Meltdown: myth or fact?


Behaviour
emotion
instinct
Stressors/trauma
defenses
immaturity
Sensitivity
attachment

A Continuum of sensitivity

Developmental differences

Sensory meltdown

Neurological differences

Sensitive autonomic stress response

Introvert

Hyposensitivity

Highly reactive

Hypersensitivity

Autism Spectrum Disorder

Giftedness

Neurodivergent

Overstimulation

Shyness

Sensory processing issues

Intense emotions

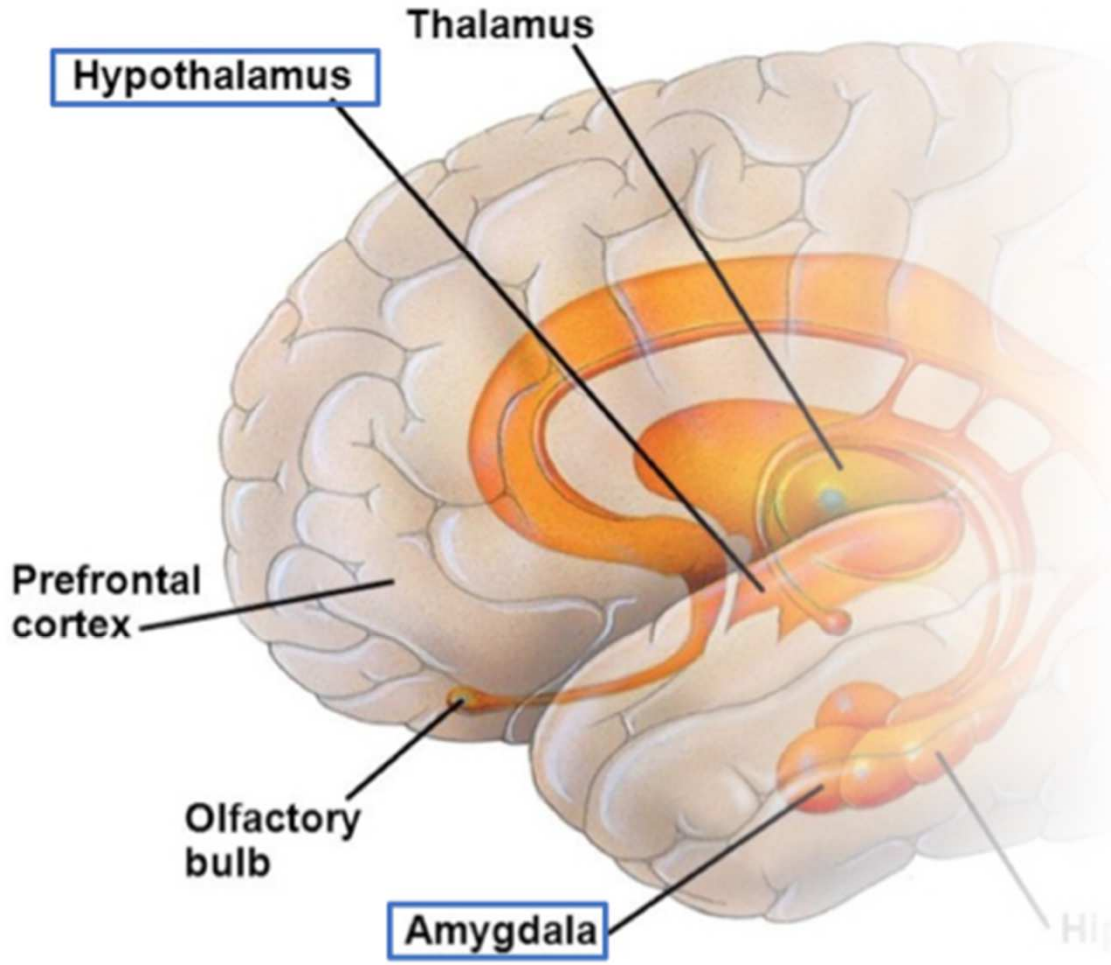
Emotional dysregulation

Attention problems

Aspergers

Level of support required

The limbic system



- Mediated by the **LIMBIC SYSTEM** (emotional brain – alarm system)
- **Amygdala** registers the threat (like a smoke detector)
- **Hypothalamus** orchestrates the response (it links the nervous system to the endocrine system via the pituitary gland)
- Which triggers the **SYMPATHETIC NERVOUS SYSTEM**

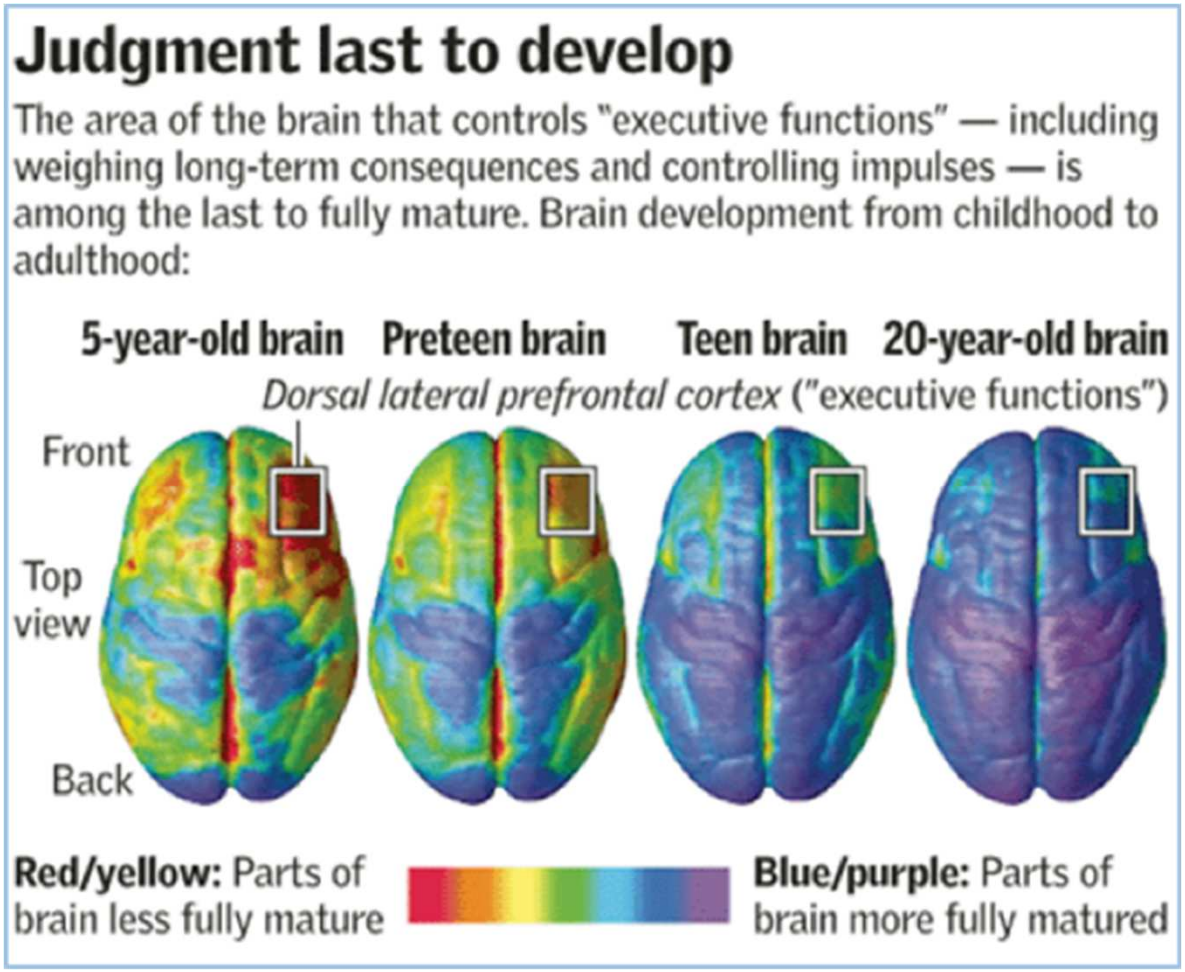
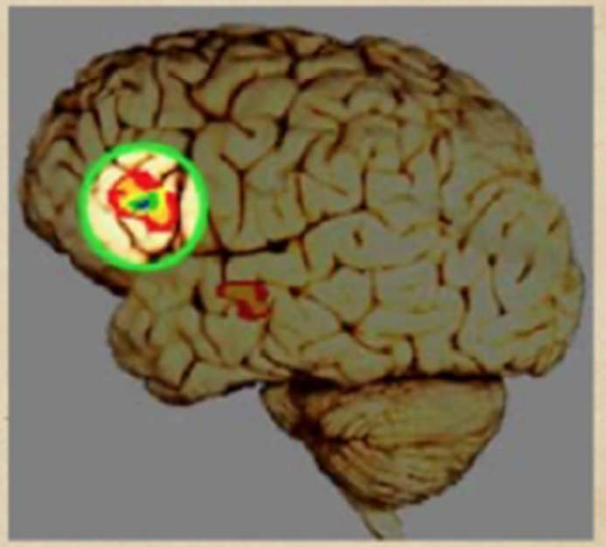


Image from the National Institute of Mental Health; Paul Thompson, Ph.D., UCLA Laboratory of Neuro Imaging

SELF REGULATION requires Prefrontal cortex development

Youth rely more on the **Amygdala** (limbic system)



Adults rely more on the **Prefrontal Cortex**

How does behaviour change?

BEHAVIOUR CHANGES WHEN…

Sensory - Stress Response

Behaviour changes when the body/brain is feeling safe

Attachment

Behaviour changes when feeling connected to a nurturing adult

Vulnerability - Emotions

Behaviour changes when emotions are felt

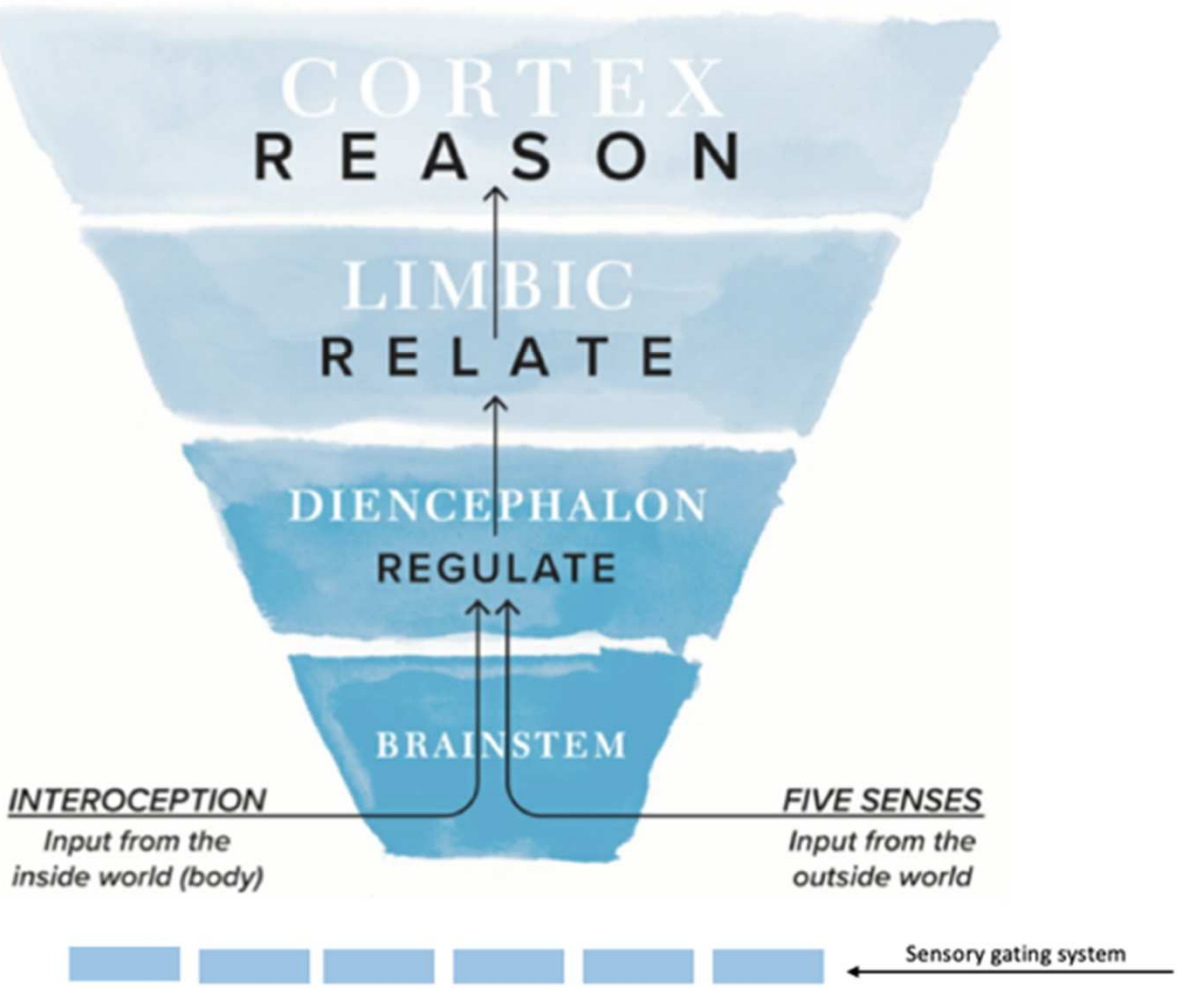
Maturation

Behaviour changes as the brain matures

How does behaviour change?

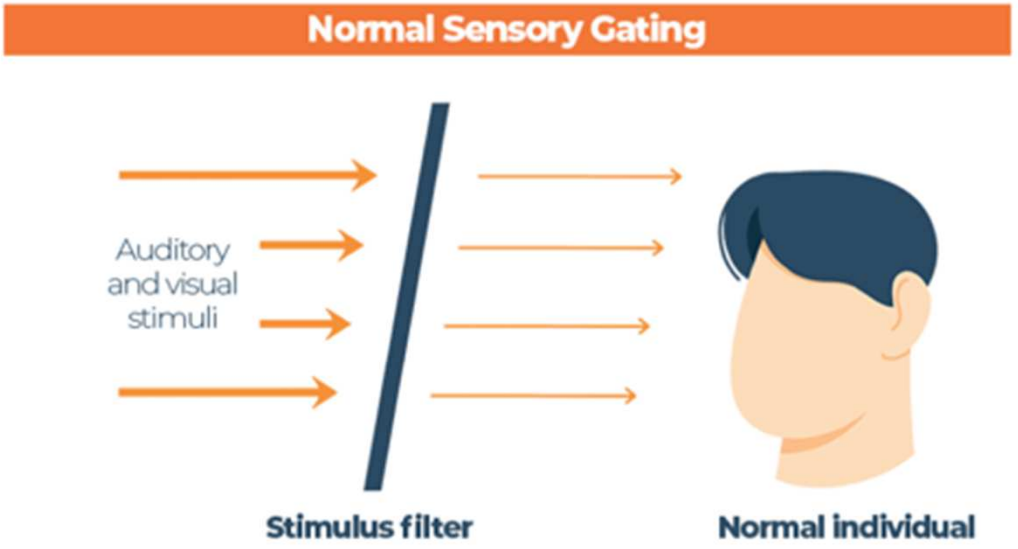
A student's behavior cannot be addressed without having answered to their irreducible needs first:

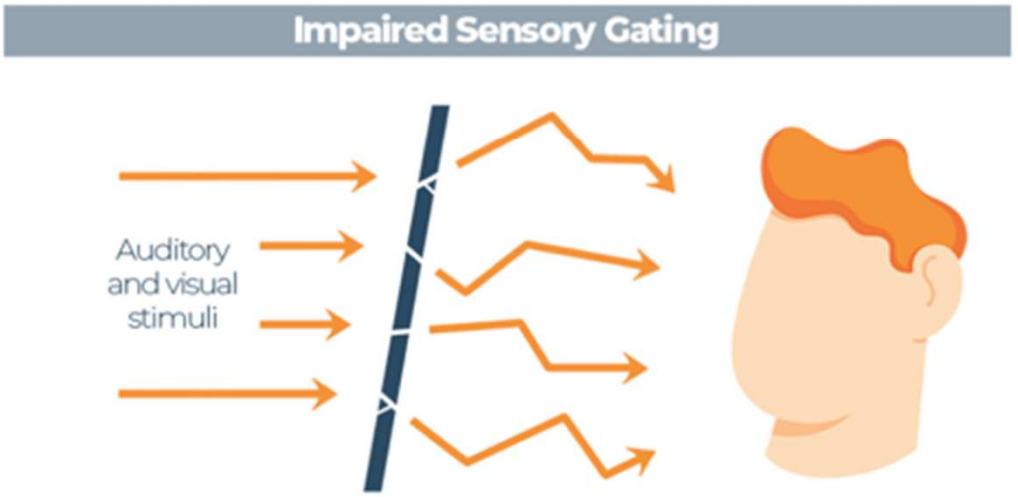
- **SAFETY**: helping the brain become regulated and receptive
- **ATTACHMENT**: providing nurturing and safe relationships
- **EMOTION**: inviting the whole range of emotional expression
- **PLAY**: making space for true play



Dr. Bruce Perry (2021) *What Happened to You?*

Sensory Gating System

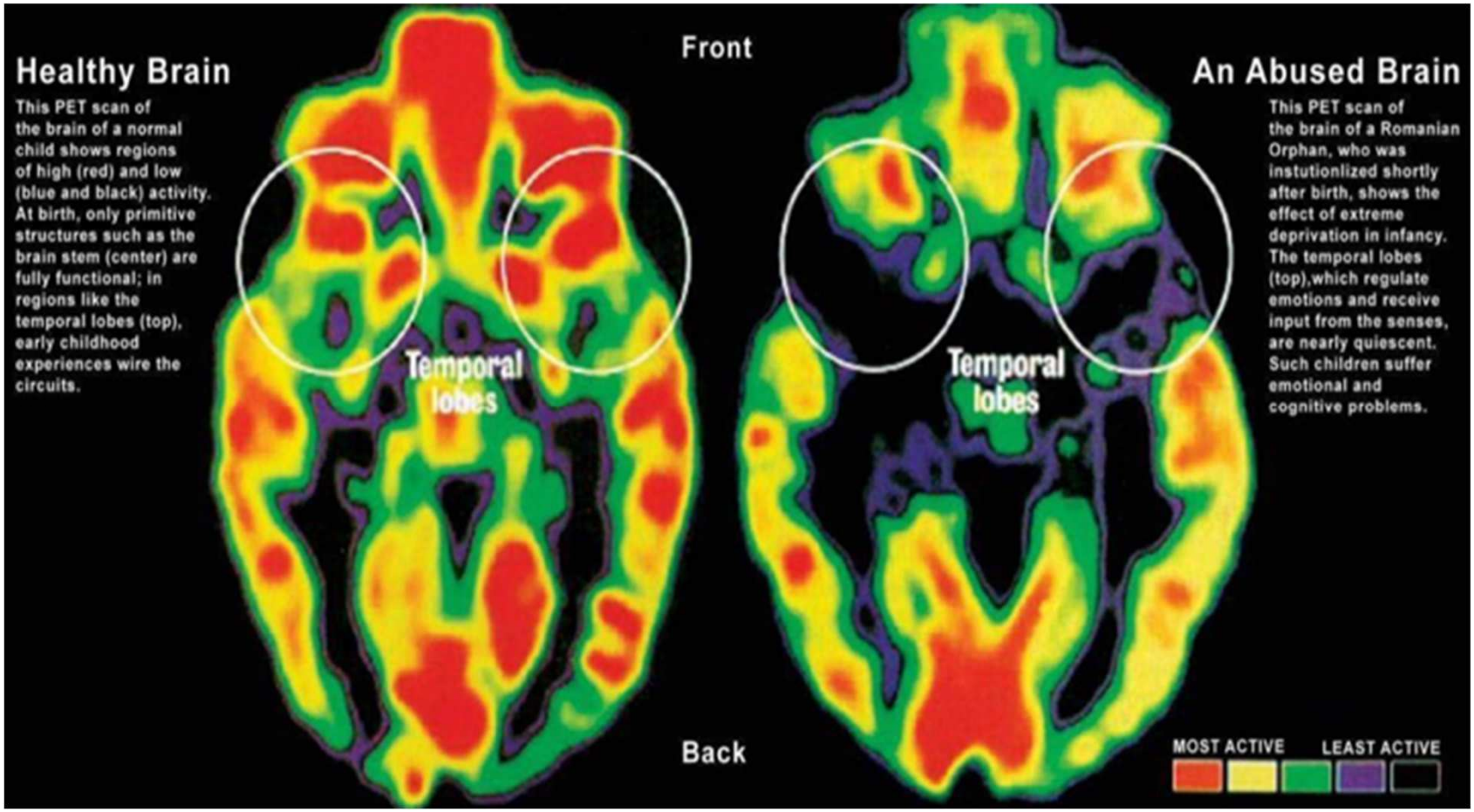




Impact of Sensitivity and Emotional intensity

Greater children are hypersensitive and emotionally intense:

- More easily they are affected and moved by their emotions
- More easily they are overwhelmed by their emotional experience
- More likely they are to be ”stuck” emotionally:
  - Emotional intensity evokes more defenses
  - Intellectualization of experiences (escape of emotions)
  - Loss of tears necessary for adaptation
- More adults attempt to calm the child in order to avoid emotional eruptions, which doesn’t help the situation

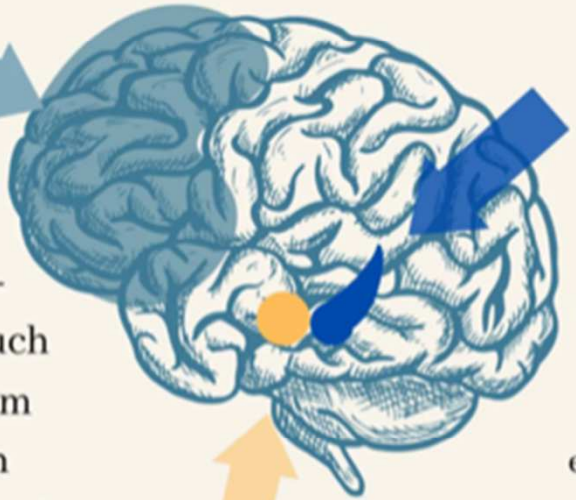


Effects of TRAUMA on the Brain

HOW TRAUMA AFFECTS THE BRAIN

Prefrontal Cortex

Rational thinking - regulates emotions such as fear responses from the amygdala - with PTSD this has a reduced volume



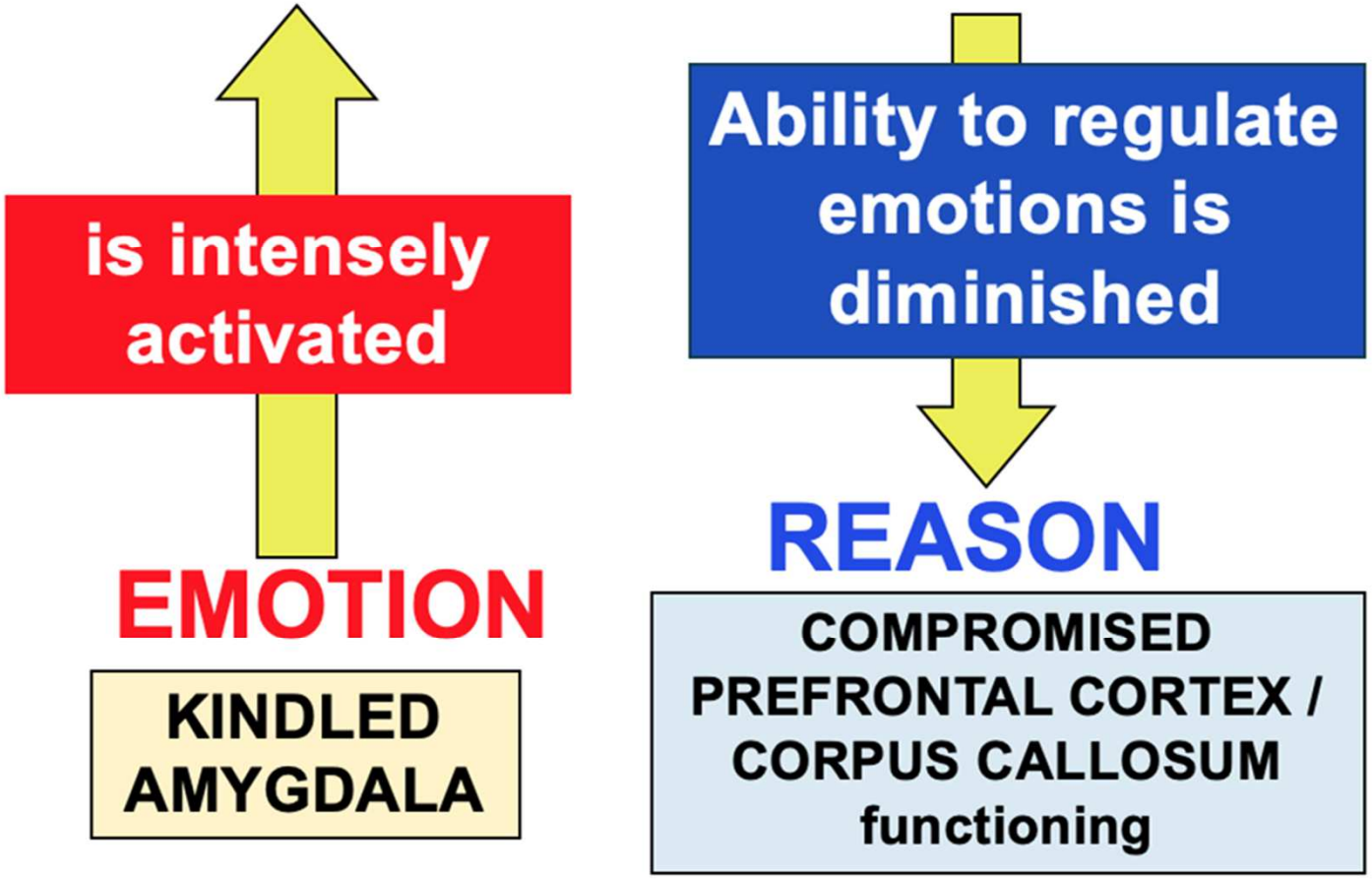
Hippocampus

Responsible for memory and differentiating between past and present – works to remember and make sense of the trauma. With consistent exposure to trauma, it shrinks.

Amygdala

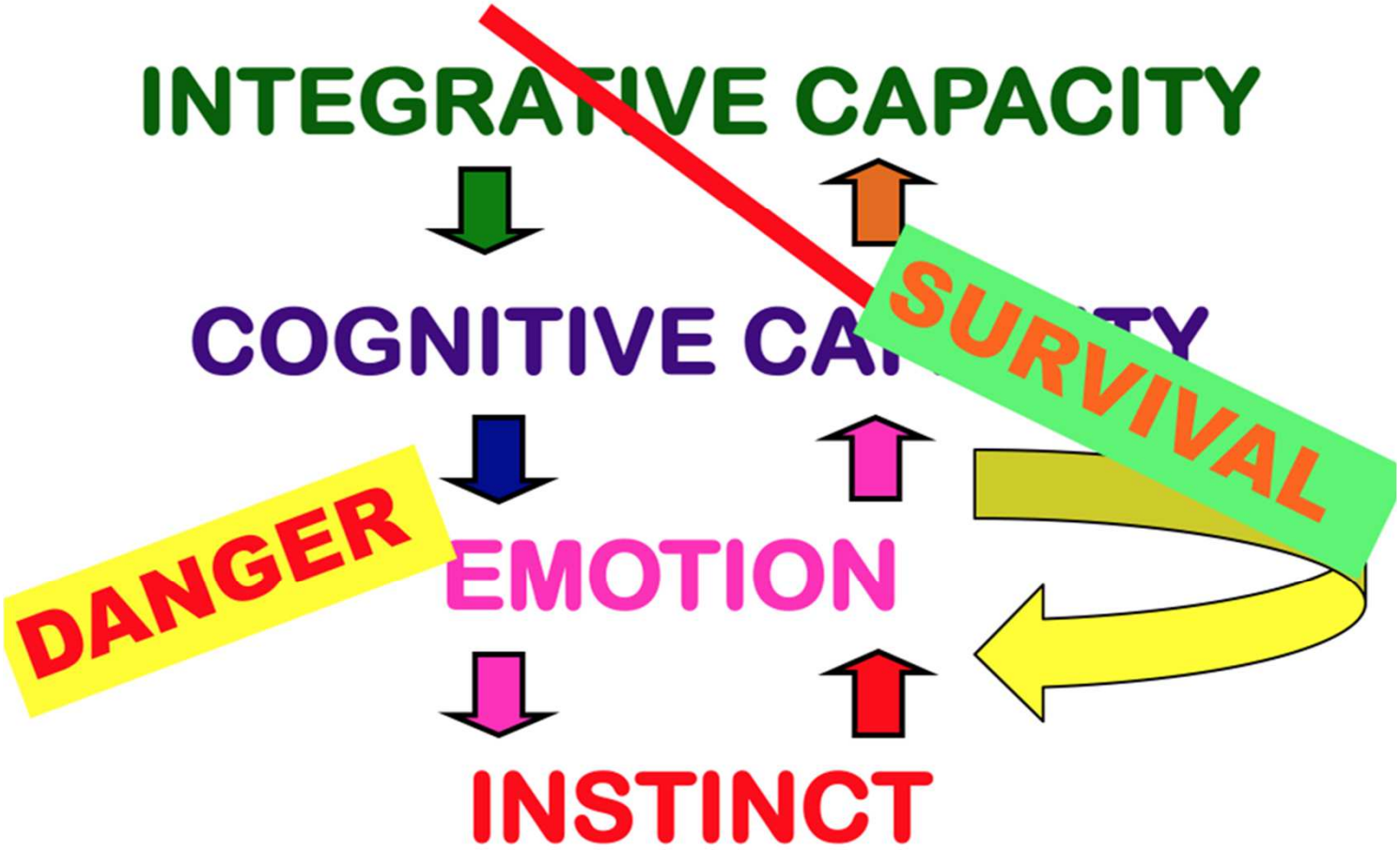
Wired for survival, when active it is hard to think rationally. The more hyperactive the amygdala is, the more signs of PTSD are present.

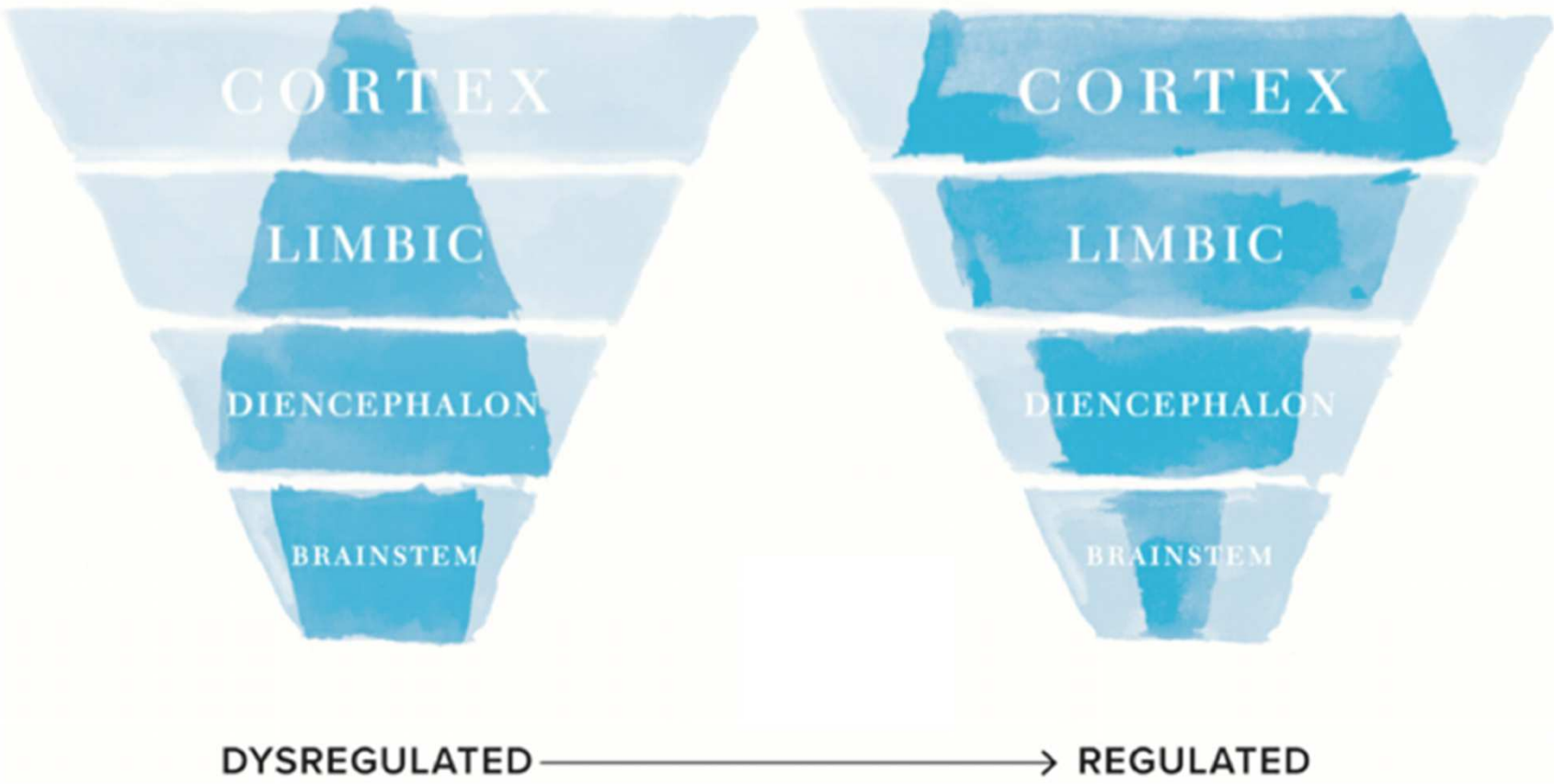
Effects of Adverse Childhood Experiences



THE DOUBLE *INVISIBLE* HANDICAP

Effects of Adverse Childhood Experiences





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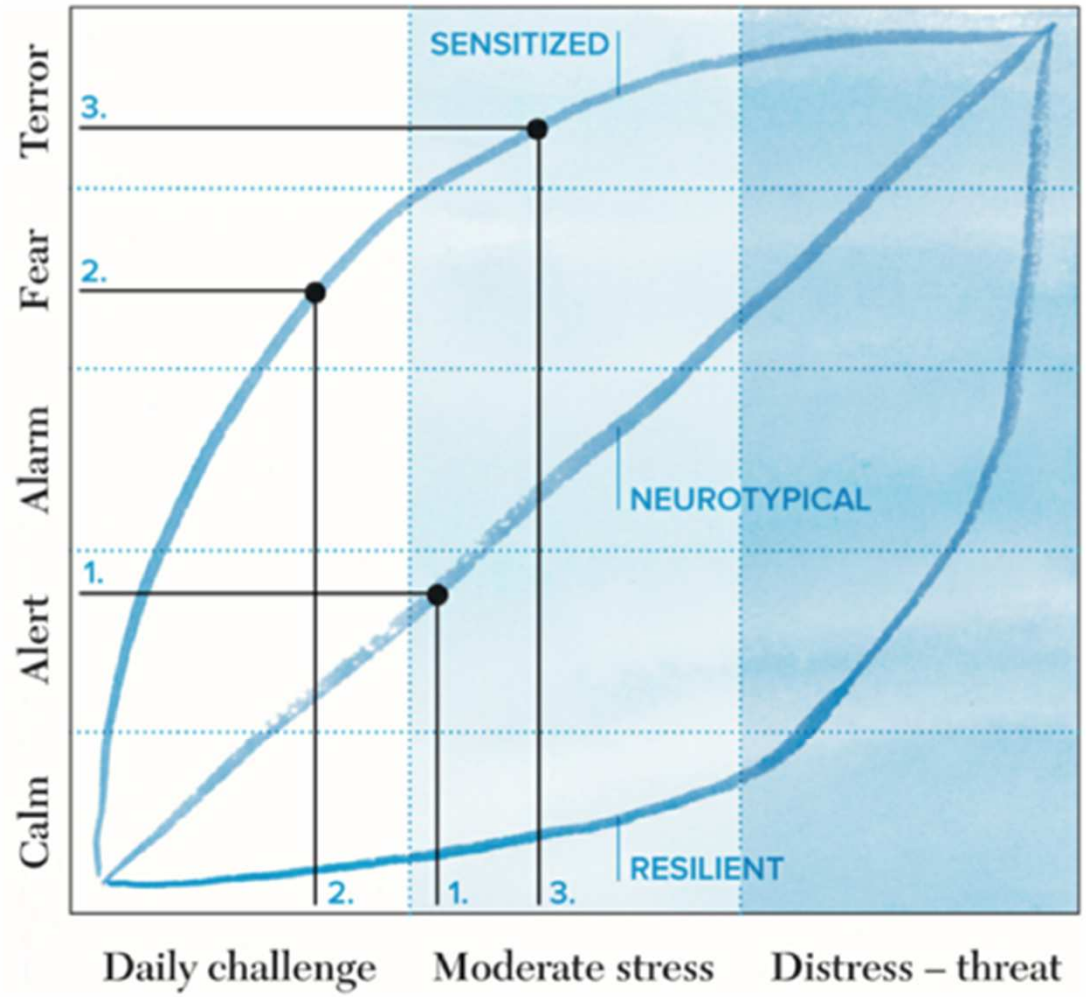

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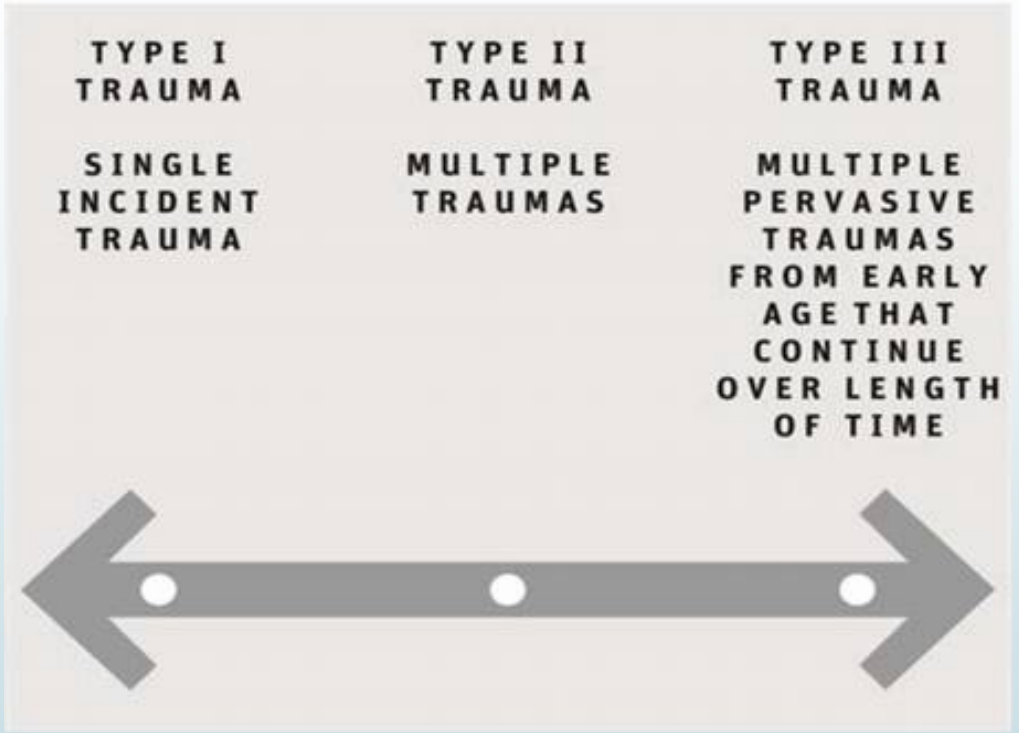
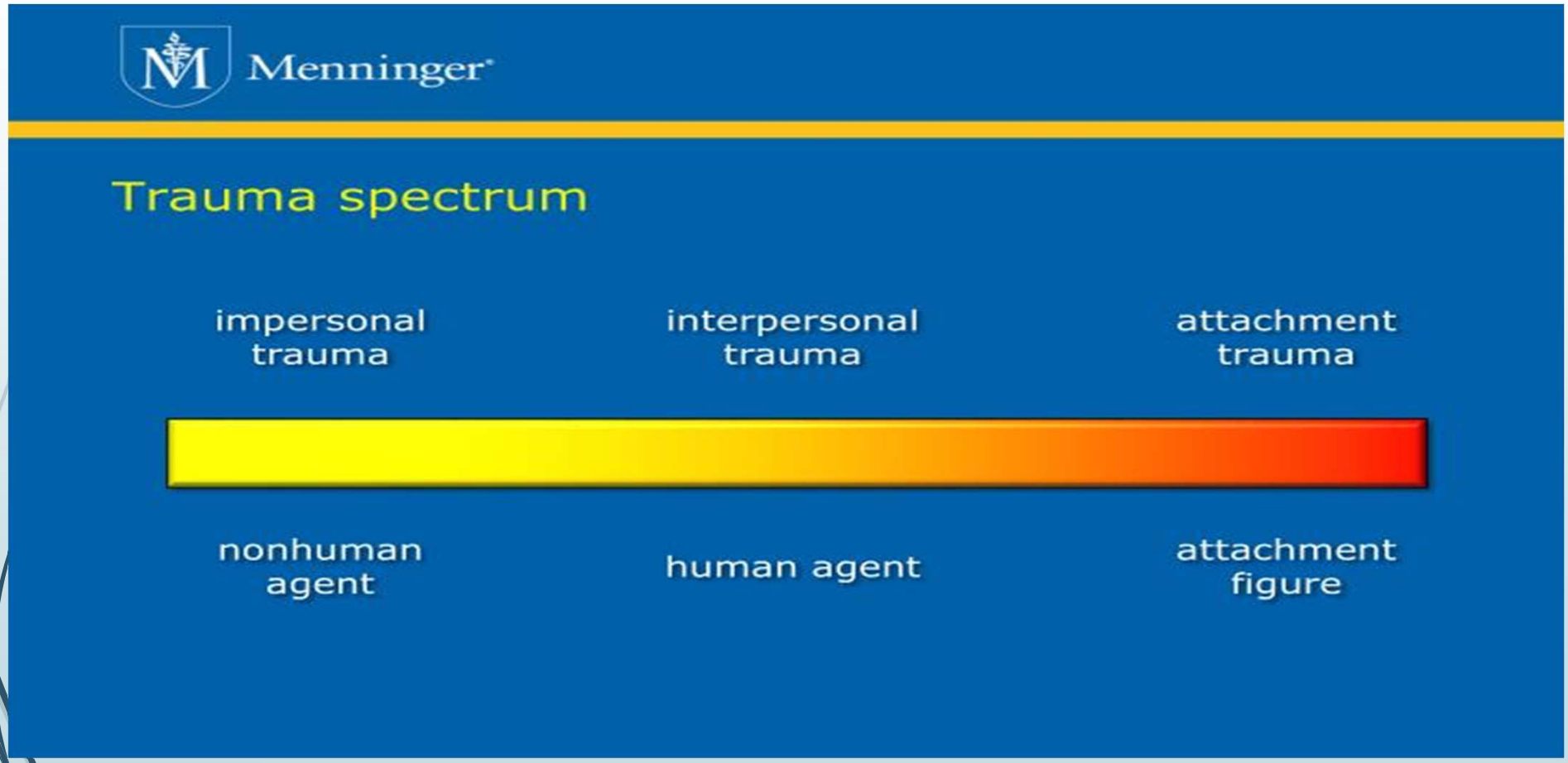
Trauma & ASD

What do we mean when we say *trauma*?

- **Type I (Acute trauma):** Results from exposure to a single overwhelming event or experience (car accident, natural disaster, single event of abuse or assault, sudden loss or witnessing act of violence)
- **Type II (Repetitive trauma):** Results from exposure to multiple, chronic and/or prolonged overwhelming traumatic events (i.e., receiving regular treatment for an illness, going to war)
- **Type III (Developmental trauma):** Results from early onset exposure to ongoing or repetitive relational trauma (as infant, child or teen)



Developmental Trauma – Long-Term Impact



Developmental Trauma

- 'Developmental trauma is probably **the single most important public health challenge** in North America – a challenge that has the potential to be largely resolved by appropriate prevention and intervention. Each year, more 3 million children are reported to authorities for abuse or neglect in the US: About **1 million of those cases are substantiated**… Most trauma begins at home; the **vast majority of people responsible** for child maltreatment are the **children's own parents**(i.e., about 80% of the time)'
  - Bessel van der Kolk – The Body Keeps the Score

Why is Developmental Trauma (DT) so important?

- DT is a very **powerful predictor** of poorer **physical** & **mental health** later in life
- DT greatly **impedes children's social, emotional, behavioral, & academic functioning** in the here and now
- On the surface it seems like it is **hard to quantify DT**
- **The ACEs Study –** *The most important public health study you may not have heard of*

Measuring Developmental Trauma (Felitti & Amanda, 2002)

***Adverse Childhood Experiences* scale** (ACEs)

- *The Relationship Between Adverse Childhood Experiences and Adult Health: Turning Gold into Lead*
- The **ACEs Study began in 1995** at Kaiser Permanente Department of Preventive Medicine, the **largest HMO in California**, in partnership with the US Center for Disease Control (CDC) and involved **17,337** participants followed for 15+ years
- 75% White, 75% attended university, Ave Age = 57 years

Developmental Trauma - Origins: ACES Study

- Initially **Felitti & Amanda** were interested in the HMO's weight loss program **drop-outs**
  - Detailed life interviews revealed that **childhood abuse** was **remarkably common**
- Many patients spoke openly of an association between their obesity & their childhood abuse
- **Counterintuitively**, they shared that **obesity** was **not their problem** but a **protective *solution***
- Striking remark of a woman who was raped and gained 105 pounds in the next year:
  - "***Overweight is overlooked - that's the way I needed to be***."

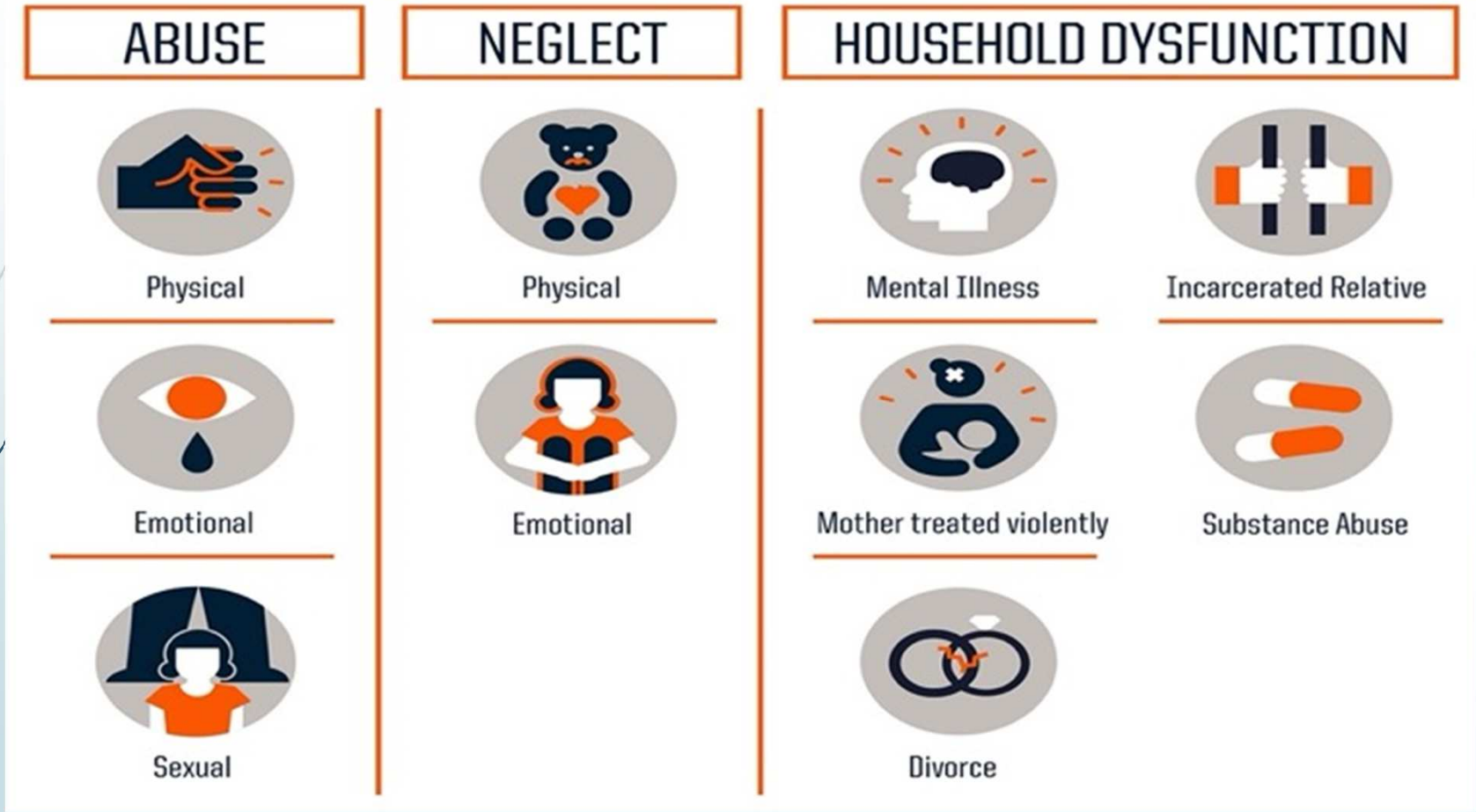
Adverse Childhood Experiences (ACEs)

Instructions: Below is a list of 10 categories of Adverse Childhood Experiences (ACEs). From the list below, please place a checkmark next to each ACE category that you experienced prior to your 18th birthday. Then, please add up the number of categories of ACEs you experienced and put the *total number* at the bottom.

Did you feel that you didn't have enough to eat, had to wear dirty clothes, or had no one to protect or take care of you?	
Did you lose a parent through divorce, abandonment, death, or other reason?	
Did you live with anyone who was depressed, mentally ill, or attempted suicide?	
Did you live with anyone who had a problem with drinking or using drugs, including prescription drugs?	
Did your parents or adults in your home ever hit, punch, beat, or threaten to harm each other?	
Did you live with anyone who went to jail or prison?	
Did a parent or adult in your home ever swear at you, insult you, or put you down?	
Did a parent or adult in your home ever hit, beat, kick, or physically hurt you in any way?	
Did you feel that no one in your family loved you or thought you were special?	
Did you experience unwanted sexual contact (such as fondling or oral/anal/vaginal intercourse/penetration)?	
Your ACE score is the total number of checked responses	

Do you believe that these experiences have affected your health? ☐ Not Much ☐ Some ☐ A Lot

ACES – 3 Types

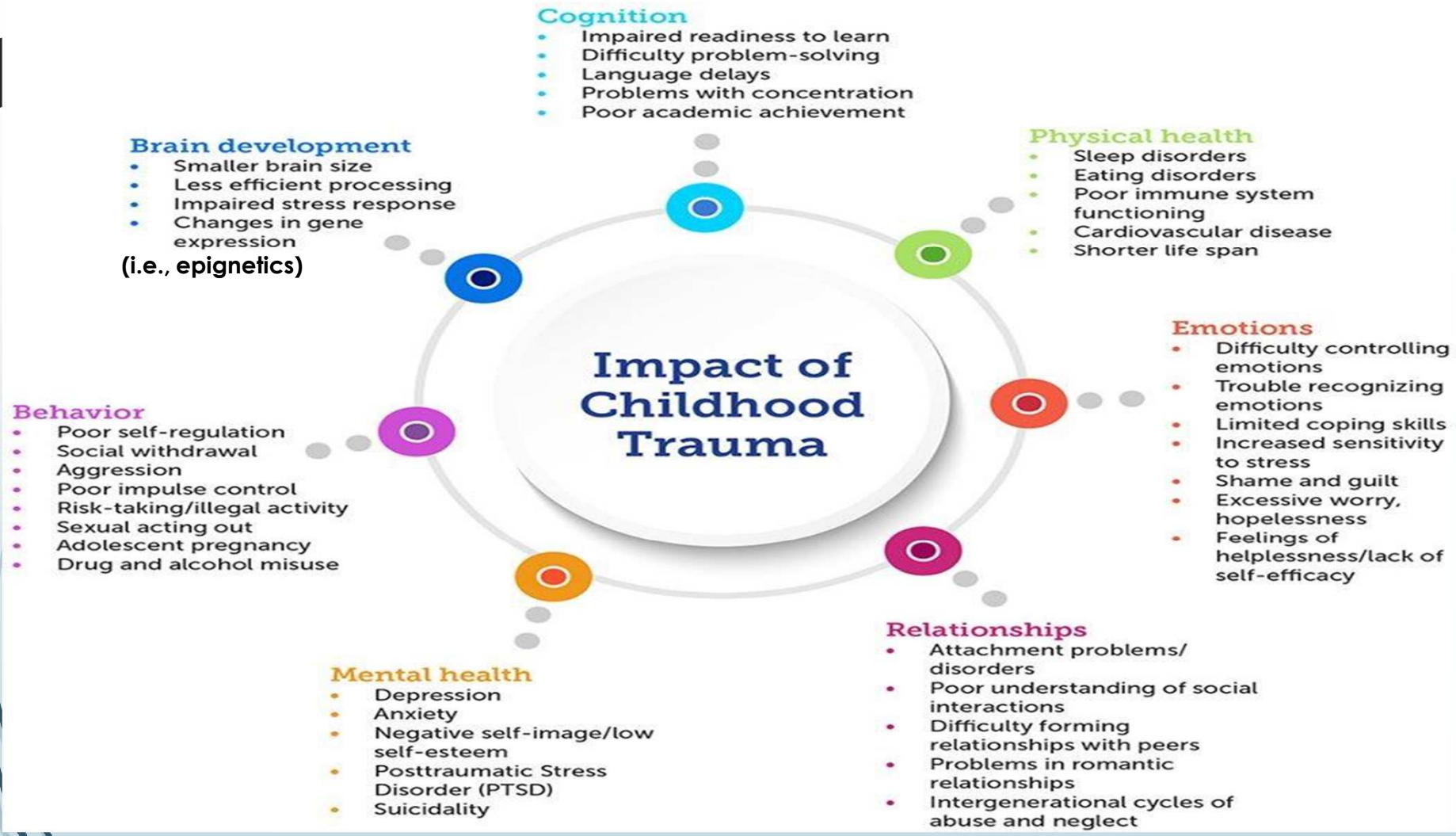

ABUSE
Physical
Emotional
Sexual
NEGLECT
Physical
Emotional
HOUSEHOLD DYSFUNCTION
Mental Illness
Incarcerated Relative
Mother treated violently
Substance Abuse
Divorce

Scoring the ACEs Scale

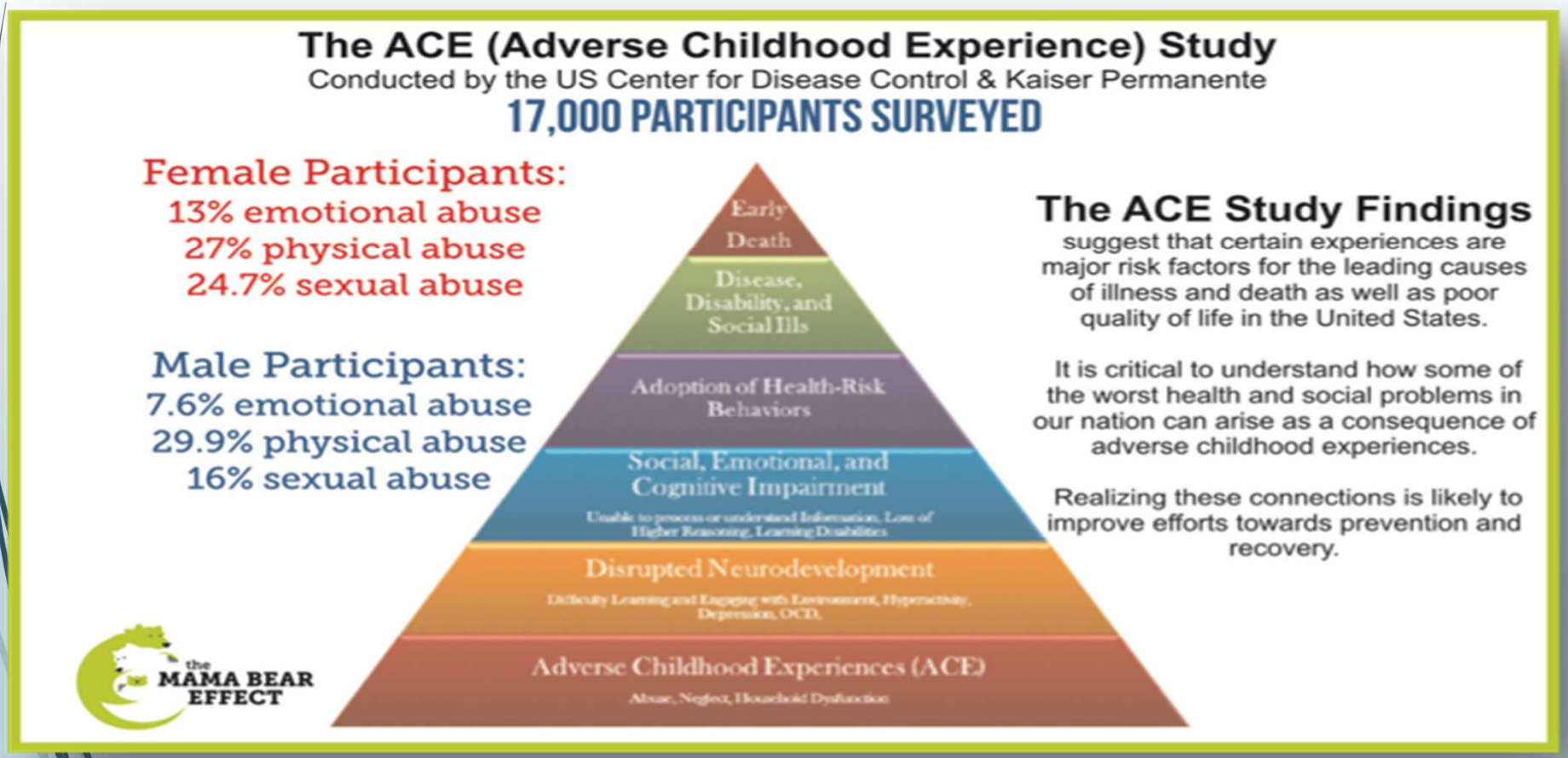
- **Ten questions** - Each type of trauma **counts as 1**, no matter how many times it occurs (**Total Score** range **= 0-10**)
- The **more ACEs you have, the greater the risk** for chronic physical disease, mental illness, violence, and being the victim of violence
- Thus, ACEs have a *graded dose-response (i.e.* a **response** to a drug such that as the **dose** of drug increases the intensity of the **response** increases – **like alcohol**)
- Magic number is **4** for **adults** but during **childhood** it is **3**
- People with an ACE score of **6** or higher are at-risk of their **lifespan** being **shortened by 20 years**

ACES – Later Problems

Impact of Childhood Trauma



Original ACEs Study



Developmental Trauma & ASD

What the Evidence Shows:

- Individuals with ASD are at least as likely to experience DT and probably at greater risk for ACES
  - But the effects of DT on this group are not well-understood
  - But we know that less extreme experiences than ACEs (e.g., fire alarms, loss of a pet) can be destabilizing for those with ASD
- About 70% of those with ASD have a comorbid psychiatric disorder but PTSD/DTD are largely overlooked in this group
  - Until recently very few studies looked at ASD and DT and those that did suggested that about 3% of those with ASD had DT
  - But emerging research suggests that the % is much higher
- Children with ASD are bullied/socially ostracized more often than peers with other disabilities and more often than non-disabled peers
  - Social ostracism is a very potent trauma trigger among those with ASD

WHAT ARE SOME CHALLENGES THAT ASD STUDENTS CAN FACE DURING THEIR DAY?

- Change, unpredictability
- Unstructured time
- Social interactions/ Social demands
- Sensory build up
- Hunger/fatigue/unwell
- Anticipation of the day/the afternoon/or going home
- Transitions
- Demands and/or requests

Best Practices

1. Build a positive relationship
2. Use visuals
3. Structure the environment
4. Address sensory needs
5. Address emotional needs and stress response
6. Teach and reinforce social skills
7. Understand the root cause driving the behaviour
8. Assume competency, tap into strengths not deficits
9. Use proactive/positive language- Declarative versus imperative language
10. Emotion coaching

1- Build a positive relationship

- Listen
- Get down to their level
- Play
- Engage
- Connect
- Be mindful of your verbal and nonverbal communication
- Respect the student and pay attention to what he is saying to you, whether verbally or through his choices or actions.

2- Use Visual Supports

Visual supports can help:

- Decrease stress as students will know what comes next
- Give clear expectations
- Support the students' difficulty with sequential memory and organization of time
- Eliminate dialogue and the potential to dispute
- Promote independence
- Information last longer

WHY USE VISUALS?

I don't want him to look different

He understands everything I tell him to do.

He already knows what is happening in the day. He tells me.

I can never find the pictures. They are always getting lost

He never even looks at his schedule

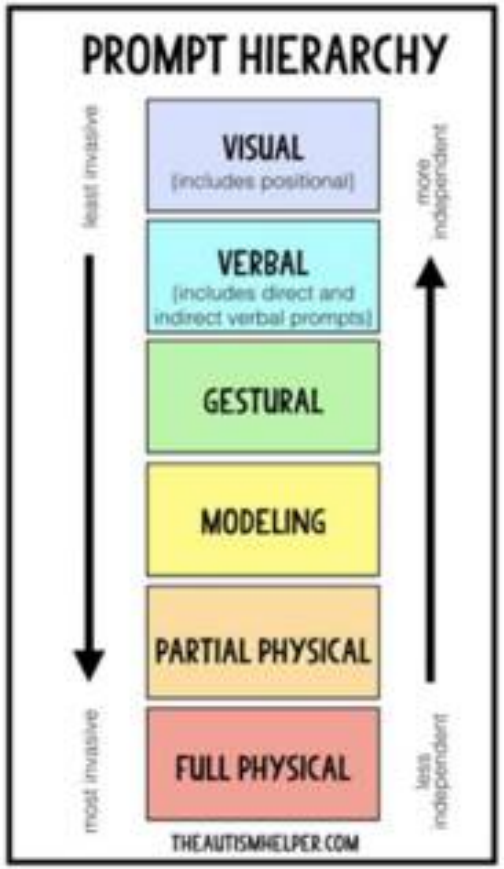
WHY USE VISUAL SUPPORTS?

To give information to students in a concrete visual form

Visual supports can help:

- ✓ Decrease anxiety as students will know what comes next
- ✓ Give clear expectations
- ✓ Support the students' difficulty with sequential memory and organization of time
- ✓ Eliminate dialogue and the potential to dispute
- ✓ Promote independence

PROMPT HIERARCHY



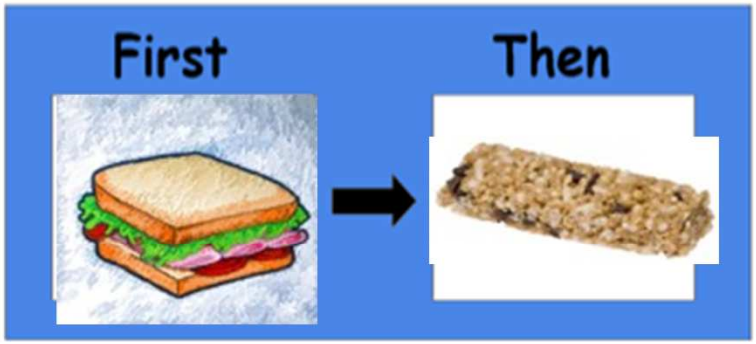
At the bottom are the most intrusive prompts where students have the least amount of independence. As you move up the list, prompts become less invasive and students independence increases.

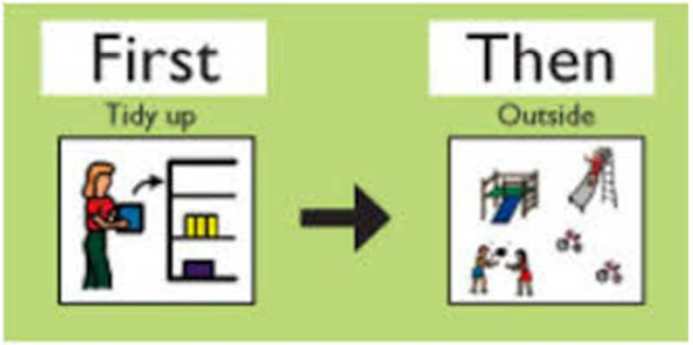
VISUAL SCHEDULES

Morning	**Done √**
Math	
Recess	
Gym	
Reading	
Lunch	

Schedules provide the following *information* to the student:

- What is happening today
- ***What is not happening today***
- What is the sequence of events
- ***What is changing that I normally expect***
- When it is time to stop one activity and move onto another one





www.lessonpix.com

3- Structure the Environment

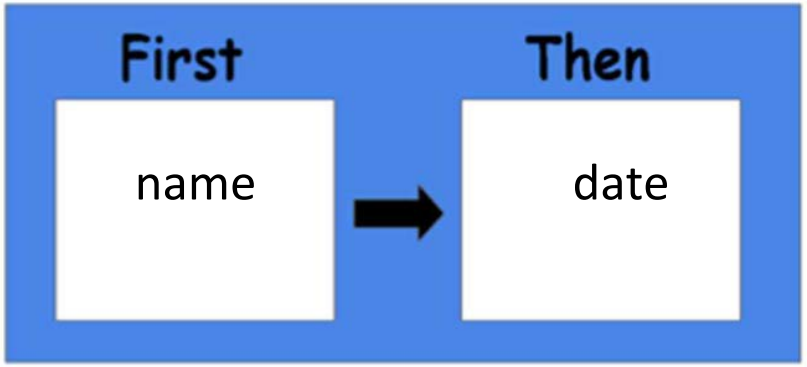
As you learn to think like a detective about your student's behaviour, your observations are likely to show that behaviour occurs at specific times, with specific people, or in specific environments. You and your team will need to pay attention and learn to recognize the signs of increasing tension, anxiety, or frustration, which can lead to challenging behaviours. There is frequently a ramping up, or escalation period, and learning to recognize that early on and using many of the approaches presented here can help to calm a situation and prevent behavioural outbursts. These indicators can be subtle at times.

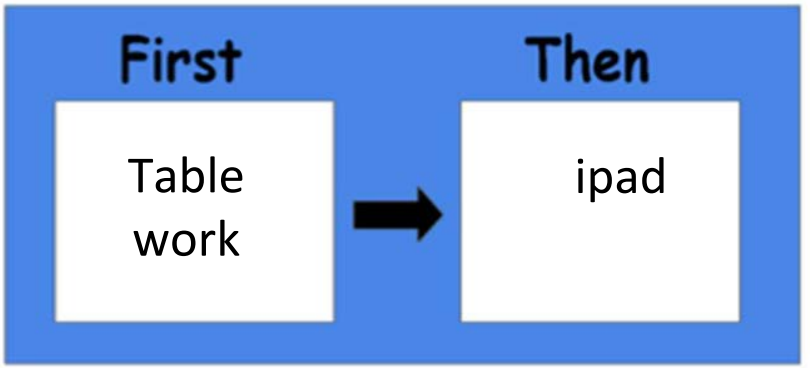
- Clear, concise expectations
- Provide opportunities for structured play
- Eliminate the "unknown"
- Differential seating: seat child in front of class for minimal distraction or near door for easy access to walks and breaks.
- Use peers as positive role models
- Provide a safe space and teach the student how and when to use it: A calming room or corner, as well as objects or activities that aid in relaxation (e.g., a bean bag)

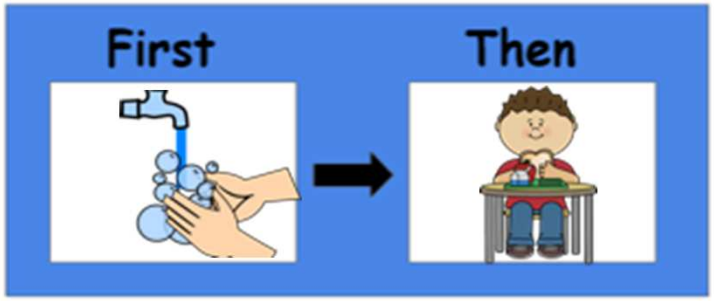
STRUCTURE THE ENVIRONMENT

The following must be made clear to the child prior to beginning any task or activity:

- What is expected of the child
- Where the task begins and ends
- What is expected once the job is done
- What the reinforcement will be
- That the child is capable of doing the task








WHEN A FLOWER DOESN'T BLOOM, YOU FIX THE ENVIRONMENT IN WHICH IT GROWS, NOT THE FLOWER.
ALEXANDER DEN HEIJER

4- Address sensory needs

Individuals with autism frequently report on their various ways of experiencing the world, and it is important to keep these issues in mind when evaluating a person's specific behaviours.

It is critical to consider whether the individual has a sensory need that is not being met.

Is it the tag on his shirt, the lighting, the sound, the crowd, or the odours that he finds painful or overwhelming?

5- Address emotional needs and stress response

Fight/ flight/ freeze response

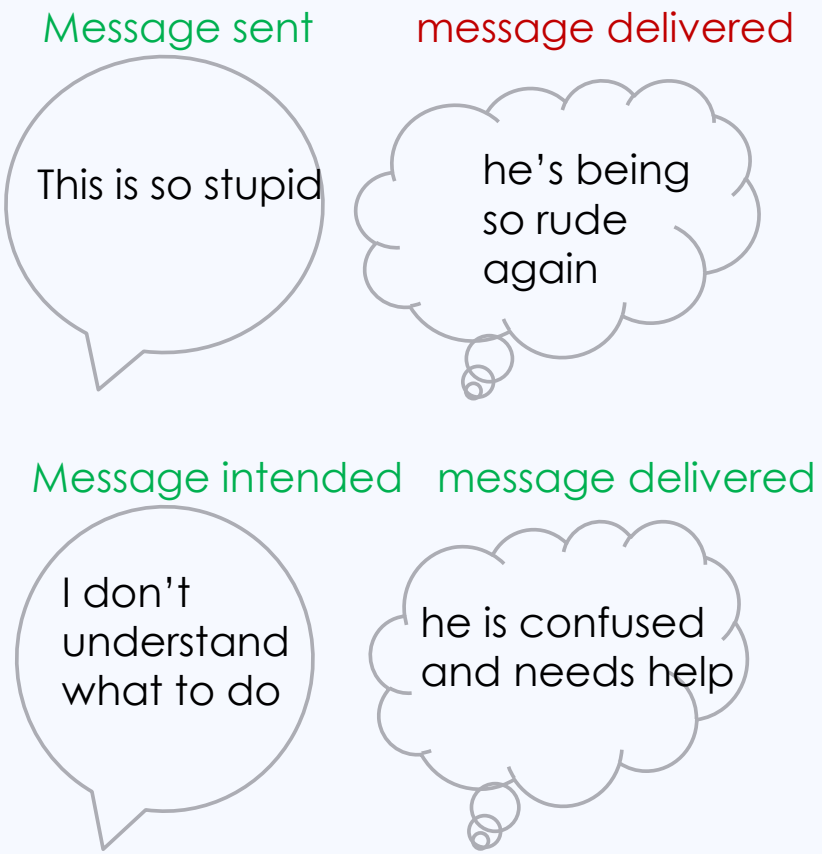
The student may respond with a dramatic reaction (fight response) and maintain a high level of arousal or move into shutdown (freeze response) where they do not appear to be responding to sensory input at all. A student that appears to be "avoiding" a situation, a task or an activity may actually be having a physiological flight response.

6- Teach and reinforce social skills

- Script and model
- Role play
- Lead by example

Children with ASD may need to explicitly be taught things that other children learn innately. Do not assume they know better, but do assume they want to do better. Because behaviour represents communication, it is critical to replace behaviour by developing more adaptive skills. It is critical that you do not assume that a child possesses the skills required to do something "the right way." Use systematic instruction and motivation to develop new skills.
Skill development can take time, so be patient and celebrate the small victories along the way.

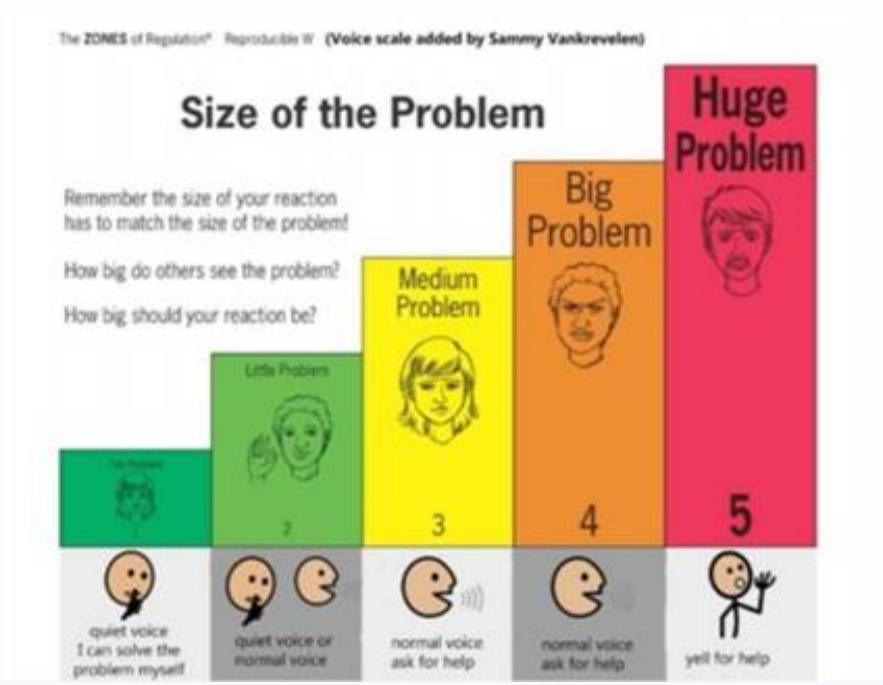
https://www.socialthinking.com/Articles?name=teaching-through-thought-bubbles-speech-bubbles



Our thought bubble

- Teach students that everyone has a thought bubble. People can have comfortable or uncomfortable thoughts about you.
- Your actions and words give people thoughts and feelings about you.
- Sometimes the Intended message is different from the message received.

https://www.socialthinking.com/Articles?name=learning-control-emotional-reactions-part-problem-solving



Size of the problem

Help students identify that problems come in all different sizes. Some are easy to solve and some take longer. They may be able to fix a problem on their own or they may need an adult to help.

Size of the problem must match the size of the reaction.

Small problem= small reaction

Big problem= big reaction

https://www.socialthinking.com/Articles?name=why-use-expected-unexpected-social-thinking-vocabulary

Expected/ unexpected behaviors

- Use consistent language.
- Expected behavior makes people have good thoughts
- Unexpected behavior gives people uncomfortable thoughts.

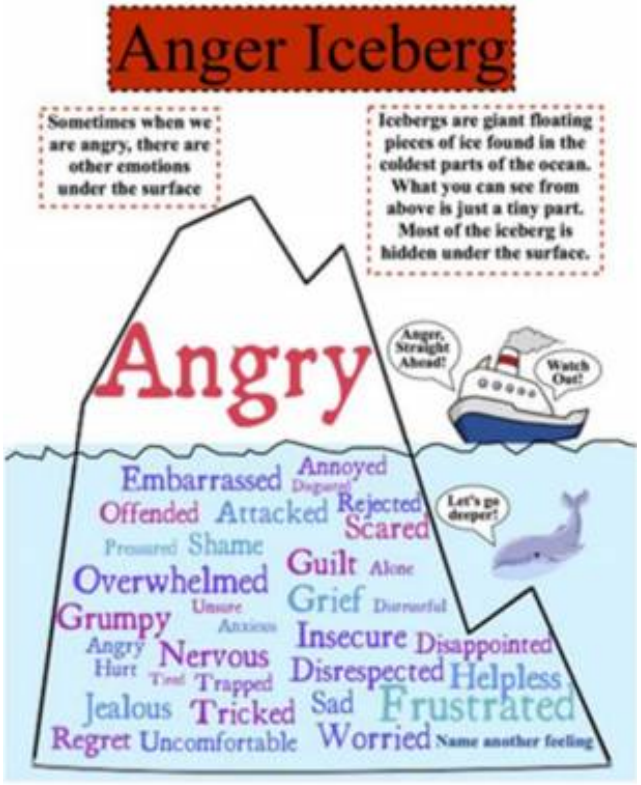
7- Understand the root cause driving the behaviour

Think of the behaviour you observe as just the tip of an iceberg, below the surface of the waterline lies the cause of the behaviour. We need to dive below the waterline and address the root cause, not simply the behaviour that we are seeing.

What looks like anger may be insecurity, helplessness or worry

What looks like defiance may be confusion or fear

Why is he running out of the class?
Why is she refusing to do the worksheet?
Why will he not put his snow pants on?
Why is she kicking, punching, hitting…?



?

Underlying emotions and/or the environmental factors driving the behaviours

OUR CURRENT APPROACH IN EDUCATION IS SURFACE LEVEL INTERVENTION

Identify the behaviour → **Intervention**

Examples of surface level approaches:

- o Loss of privileges
- o Use of a strong reinforcer
- o Planned Ignoring
- o Removal from the classroom

- ➢ Focus literally on the observed behaviour
- ➢ Fixing what the behaviour looks like

These strategies might extinguish negative behaviours in the short term but they do not help us understand and get to the real, authentic problem.

8- Assume competency, tap into strengths/ interests not deficits

Teach and interact at your student’s level of understanding: Build on strengths and not deficits in order to foster success and growth, rather than the anxiety and/or frustration that comes from constant failure or boredom.

Celebrate and build on the students strengths and successes. A sense of competence frequently stimulates interest and motivation. Make an effort to provide positive feedback far more frequently than any correction or negative feedback. 'Excellent job waiting your turn!'

Enthusiasms versus obsessions- Dr. Barry Prizant

9- Declarative versus imperative language

- Comment
- Declaration
- Prediction
- Reflection

Declarative language does not elicit, require or demand a physical or verbal response but rather declarative language *invites* a response.

- Directives/commands
- Prompts
- Questions
- Requests

It elicits a response of some kind. It limits the opportunity for students to think for themselves, make choices and problem solve on their own.

Why Declarative language?

Using declarative language can make a huge difference in the student's ability to share experiences and memories; become better observers (read the room); problem solve; develop their critical thinking skills; understand perspective; and communicate on a more meaningful level.

Examples of Declarative language

- I'm wondering where your shoes are
- I'm wondering where your pencil is
- Oh my, I don't want you to trip on your shoelaces
- Your books might fall out of your bag
- I notice your calendar did not make it to your bin
- I see books out on the table
- I heard your friend say that he would like to borrow your scissors
- If you don't sit with your feet on the ground, you may hurt yourself
- I'm thinking you may be safer if you sit with your bottom on the chair
- I notice that you haven't started your work
- I notice that you really like sharpening your pencil often
- I notice all the students are lining up
- I am so happy to see everyone working
- I see the other students are packing up their belongings
- I see the other students getting ready for recess
- It makes me so happy when I see my friends working quietly at their desks
- Oh geez, I made a mistake, that's ok
- It looks like you are having a hard time
- Oh that's loud, it hurts my ears
- I'm finding it hard to hear you when you are shouting
- I think we need more time, we aren't ready just yet
- It must be frustrating when our friends don't follow the rules
- I wonder if taking a break might be the best choice
- I wouldn't want you to have to miss…
- I wonder if we can be flexible and move on
- Counting to 10 makes me feel so much better
- I notice that your friend wants a turn
- I think going for a walk is a good option
- I wonder what we can do so that we can both be happy
- I wonder what we can do so that you can stay in the class
- I notice you are standing very close to…
- I forgot why you don't want to…
- It's ok to be mad, but it is not ok to yell at me

10- Emotion coaching

1- Label:

This helps the child start to identify their emotions and feel seen and heard by you. Expressing your curiosity helps you figure out exactly what the child is feeling (sad, mad, angry, frustrated, embarrassed) before moving forward to coach them through the feeling.

Sample:

- I see you are feeling...
- I notice you are (clenching your hands, frowning, getting hyper)...
- I hear you saying...
- Tell me more about what you are feeling.
- It sounds like you are feeling ____, is this correct?

2- Empathize and validate:

Empathizing is reflecting and experiencing another person's emotions, or put another way, imagining you are the child and reacting with their emotions and past experiences. This also means putting aside your own feelings, judgments, reactions and experiences.

Sample:

- It's normal to feel ____ when this happens.
- I would feel that way too if this happened to me.
- I understand why you feel this way.

3- Set limits:

Clarify for the child that although the feeling is perfectly valid and understandable, not all behaviours triggered by the feeling are acceptable.

Sample:

- It's okay to feel ____, but it's not okay to _____
- It's okay to feel angry, but it's not okay to punch,hit, kick, scream.
- It's okay to feel embarrassed, but it's not okay to make fun of other people.
- It's okay to feel nervous, but it's not okay to lie about what happened.

Emotion coaching

Declaire, J. & Gottman, J. (1997). The Heart of Parenting How to Raise an Emotionally Intelligent Child. New York: Simon & Schuster.
John Gottman –Emotion Coaching
https://emotioncoaching.gottman.com
https://www.emotioncoachinguk.com/

4- Problem solve:

Prompt the child to think of options. The best ideas come from children themselves, when they explore the problem from their own perspective and knowledge.

Sample:

- Looking back now, what would you do differently?
- How could you handle it differently next time?
- What are two other ways of solving the problem?

5- Coach a skill:

If the child is unable to think of any possible solutions, explore with them what they might have done differently

Sample:

Something that I know works with other kids or for myself is ____,would this be something we can work on together?

- Asking for help
- Talking to someone I trust
- Taking a break
- Go outside
- Doing relaxation activities (mindfulness, deep breathing, drawing)
- Doing something physical and repetitive (walk,jumping jacks, push-ups, running)

When to use Emotion Coaching?

Emotion coaching can be used to de-escalate a situation before it develops into a crisis.

Also use this approach to debrief with the child after a crisis has occurred.

Example: Student loses his glove during recess, does not come in when the bell rings.

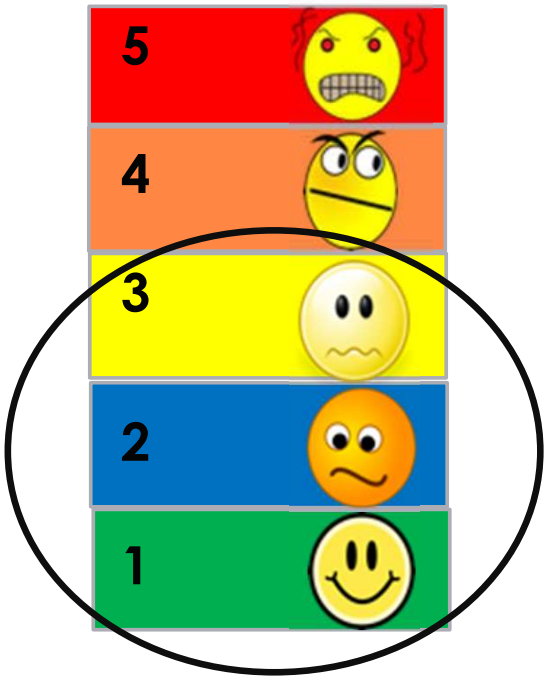
5 STEPS:

1) Label: I see that you are worried that your glove is missing
2) Validate: I would be worried too if I didn't know where my glove was.
3) Set limits: It is ok to be worried and want to look for your glove but it is not ok to ignore the bell.
4) Problem solve: At our next recess, I will go out with you to look for your glove.
5) Coach a skill: Next time you are worried about not having your gloves, you can come see me or next time you take your gloves off, perhaps you can put them in your pocket…

This is when you STOP TALKING. Provide a safe place for the student to work through the problem.	5 
	4 
Observe and assess the needs of the student.	3 
	2 
This is the optimal time to: redirect and provide calming strategies	1 

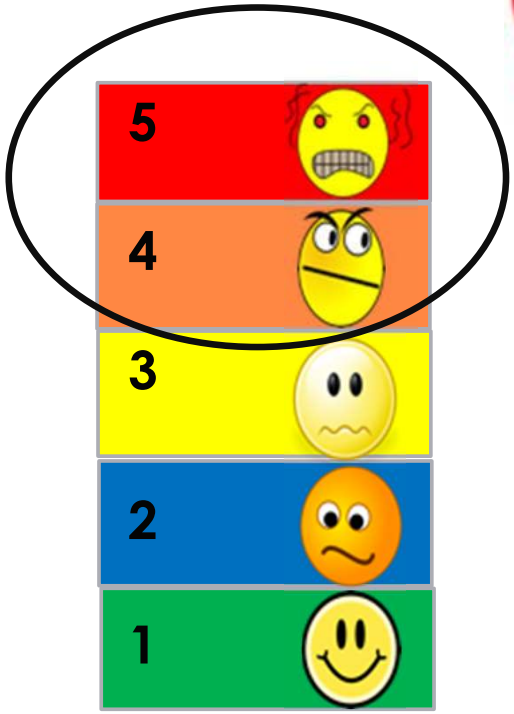
Proactive measures

- Build a positive relationship
- Use visuals
- Structure the environment
- Address sensory needs
- Address emotional needs and stress response
- Teach and reinforce social skills
- Understand the root cause driving the behaviour
- Assume competency, tap into strengths not deficits
- Use proactive/positive language- Declarative versus imperative language



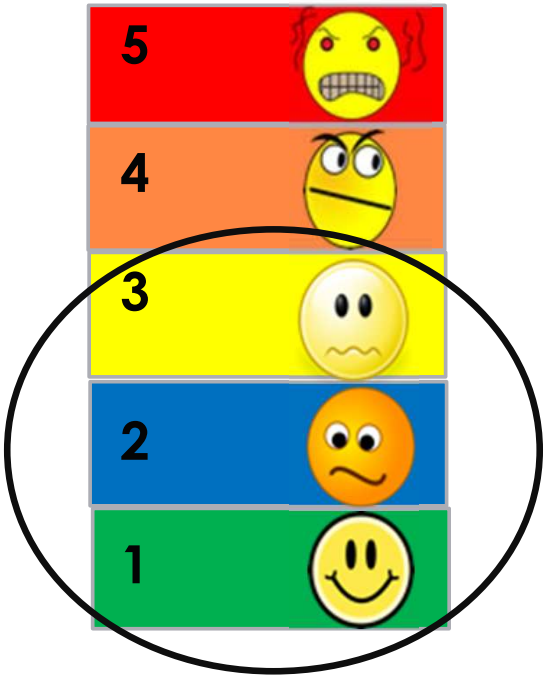
Reactive measures

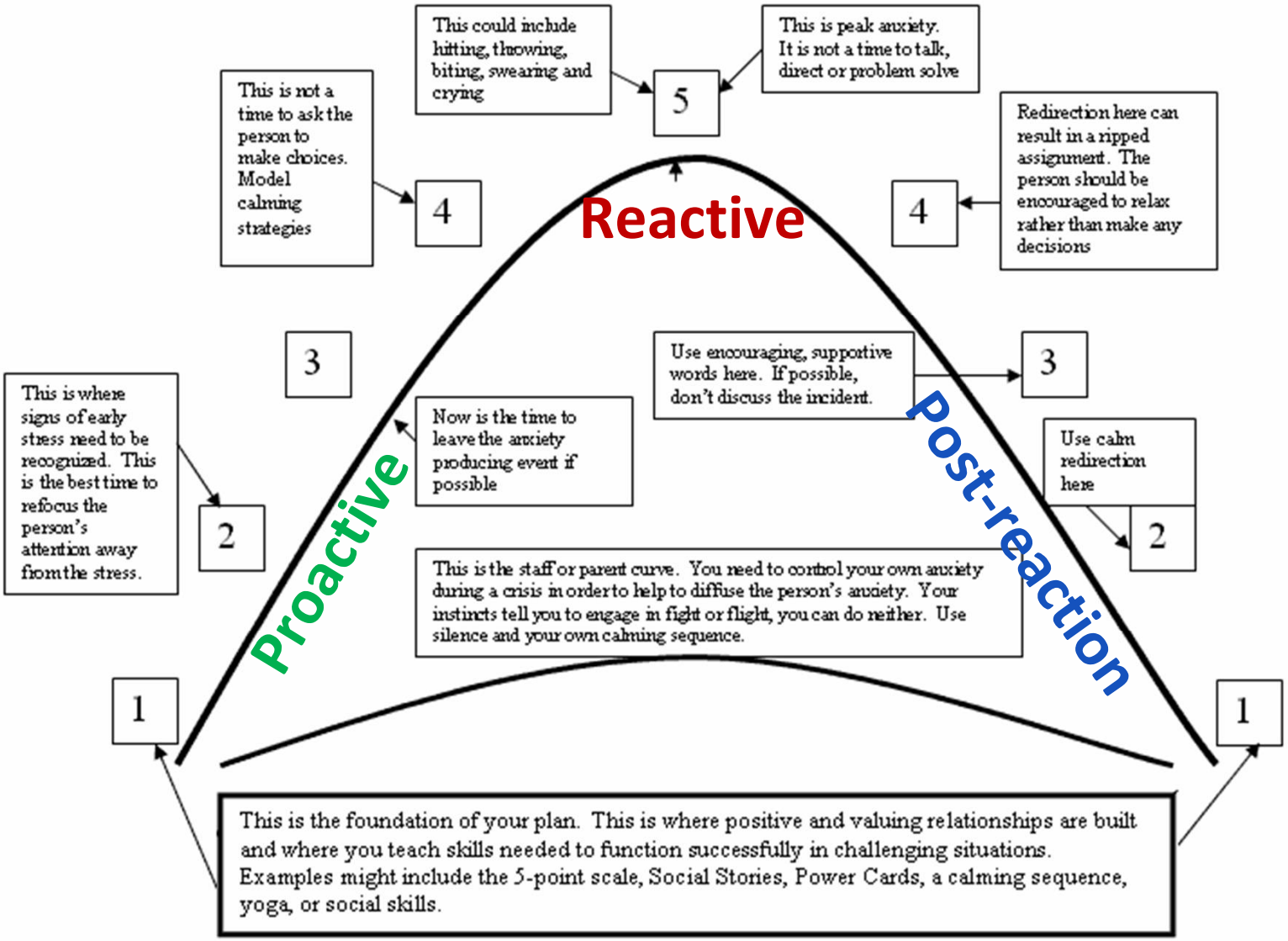
- Do not talk to the student
- Ensure the student's safety
- Ensure the class's safety
- Ensure your own safety
- Preserve the student's dignity
- Allow for the outburst to conclude



Post reaction

- Follow through- follow up
- Re-connect
- Foster any relationship that was affected by the student's behaviour




This could include hitting, throwing, biting, swearing and crying
This is peak anxiety. It is not a time to talk, direct or problem solve
5
This is not a time to ask the person to make choices. Model calming strategies
4
Reactive
4
Redirection here can result in a ripped assignment. The person should be encouraged to relax rather than make any decisions
3
Use encouraging, supportive words here. If possible, don't discuss the incident.
3
This is where signs of early stress need to be recognized. This is the best time to refocus the person's attention away from the stress.
Now is the time to leave the anxiety producing event if possible
Proactive
Post-reaction
Use calm redirection here
2
2
This is the staff or parent curve. You need to control your own anxiety during a crisis in order to help to diffuse the person's anxiety. Your instincts tell you to engage in fight or flight, you can do neither. Use silence and your own calming sequence.
1
1
This is the foundation of your plan. This is where positive and valuing relationships are built and where you teach skills needed to function successfully in challenging situations. Examples might include the 5-point scale, Social Stories, Power Cards, a calming sequence, yoga, or social skills.

ALL INTERACTIONS SHOULD BE:

- Aimed at developing the student's autonomy, not obedience
- Be based on acceptance of the student including his or her autistic traits
- Be about what the child needs not what we need
- Be about what we should do, not what the student should do
- Be meaningful and functional

CONCLUSION

- Visual supports are a powerful and effective tool
- Decipher between skill deficits & motivational deficits
- Address the “WHY” of the behaviour rather than intervening with the behaviour itself
- The measure of a good day is not the absence of negative behaviours
- Build a relationship & preserve student dignity
- Promote student autonomy

http://coeasd.lbpsb.qc.ca/

Catherine Korah and Martine Demers
Centre of Excellence for Behaviour Management

www.cebm.ca

A website that helps schools to use a Developmental Approach.