The UK’s European university
Positive Behaviour Support
Talking Mats is 21
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Outline of presentation
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• Working out the reasons for behaviour that challenges
• Why can’t we just ask people directly?
• Communication challenges
• Communication quality
• Gaining views directly using Talking Mats
• Addressing communication within PBS

Background
People with Intellectual and Developmental Disabilities are at increased risk of displaying behaviours that challenge (Totsika et al., 2011). Without appropriate support such behaviours tend to persist (Murphy et al., 2005). Significantly impact on the health and wellbeing of the child and those that care for them (Emerson and Einfeld, 2011).

Working out the reasons for behaviour that challenges - Functional Assessment
CB often serve important functions for the individual who displays them (Hastings et al., 2013).
Interventions that respond proactively to functions of CB identified for an individual and support:
• communication,
• quality of life,
• health and wellbeing more broadly,
most effective way of reducing challenging behaviour over the long term (Gore et al., 2013).

Completion of a Functional Assessment
This process requires individualised and systematic gathering of data to identify factors that lead to the development and maintenance of challenging behaviour.
Typically this involves:
• completing direct observations of the individual
• perspectives of other people who support the individual via use of questionnaires and structured interviews

What about the views of the person themselves?
Not traditionally been included in FA procedures
Typically those who are more able in terms of their communication skills and who have mild IDD and have had mixed results
The views of the person cont.

Wehmer et al., (2004) included students with a range of IDD (all of whom had sufficient verbal abilities to be interviewed using spoken language)

1) Rate whether daily activities (from a list of 20) were a big problem, a problem or not a problem;
2) Say what happens, what they do and what happens next in relation to each problem area (antecedents, behaviours and consequences);
3) Q about broader setting events that might impact on the student’s behaviour (i.e., tiredness, illness).

Close correspondence between student responses and staff responses (on a traditional FA interview) for behaviours reported, and consequences and less clear correspondence in terms of antecedents and setting events.

Why don’t we just ask people?

- Communication challenges
- Quality of communication typically like for adults with IDD living in supported accommodation?

What is the impact of having communication challenges and poor experiences of communication?

- Is there a link between communication challenges and behaviour that challenges?

The quality of communication support (Bradshaw et al., 2014)

- Communication from staff matching service user need – 1/3.
- Service user communication getting a response – 50%
- Vast majority of communication from staff verbal (over 80%).

What’s the link?

- Child development research
  - Hitting and crying decrease as communication skills increase
  - Children with SLCN more likely to have difficult behaviours than their typically developing peers (see also the work on the over-representation of people with SLCN in offenders)
- IDD research
  - Challenging behaviours typically increase in frequency, intensity or duration when communication difficulties increase.

Quality of communication support cont…

(Bradshaw et al., in submission)

- You don’t get much interaction from staff
  - Average other contact from staff 13% (range 0-47%)
- You don’t get much choice
  - Two people were observed to receive good support for choice (8%) and three people (12%) had NO choice
- You don’t get much at all in terms of adapted modes of communication
- You don’t experience better communication if...
  - You have a communication passport
  - You have a speech and language therapy assessment
- You do experience better (communication) support if you are more able
Using Talking Mats – Bradshaw, Gore and Darvell, 2018

TM may provide one way in which a wider range of children can be directly involved in giving their views of behaviour that challenges.

The Mats

Rather than ask the children to reflect on their CBs, each TM was designed to find out the children’s views on the aspects that research has shown to be influential in the maintenance of CB.
- Likes and dislikes
- Difficult behaviours
- Things that help
- Things that don’t help
- General preventative variables

Reinforcers (Topic: All about me. Top scale: Like, unsure, don’t like). This was the most concrete mat.
- This section of the interview allowed children to highlight events and items they did and did not like (e.g. foods, drinks, activities).

Difficult behaviours (Topic: My behaviour. Top scale: This is me, unsure, this is not me).
- In this section, children were asked about a number of CBs (including kicking, hitting and self-injury). Children were invited to use the Mat to indicate whether each behaviour was something they did (“this is me”) did not do (“this is not me”), or was something they were “unsure” about.

Design a Talking Mat

- Either
  - What helps (on a bad day)
  OR
  - What makes a bad day
  - What will your top scale be?
- What options will you use (up to 15)?
- (What order will you present these in?)
• Things that help (Topic: What helps (on a bad day). Top scale: Helps, unsure, not help).
• Children were asked about things that helped them on a “bad day” (when CB occurred or might be likely) in the third section of the interview.

• Mats 4 and 5: things that make a bad day (setting events, motivating operations and discriminative stimuli).
• The fourth and fifth Mats asked children to indicate variables that contributed to a “bad day” for them (i.e. when CB might be more likely). The fourth Mat included items that corresponded to different periods of the day, different locations and sensory stimuli.

• The fifth Mat continued an exploration of antecedent variables, with a focus on more specific events that commonly influence CB (such as being told “no”, waiting, not understanding).
• In both cases, children were asked to indicate whether a given event or setting was easy or difficult for them (or was something they were not sure about) by placing items in corresponding areas of the Mat.

• General preventative variables (Topic: Good for me. Top scale: Important, unsure, not important).
• In the final Mat, children were given an opportunity to highlight variables that were important for their general wellbeing and life quality and might therefore reduce the likelihood of behaviour that challenges. This included family and friends, health-related behaviours, and different forms of support. Children used the Mat to indicate whether the item was important, not important or something they were not sure about.
Capable environments (McGill, Bradshaw, Smyth, Hurman and Roy et al.)

- Positive social interactions
- Support for communication
- Support for participation in meaningful activity
- Provision of consistent and predictable environments which honour personalised routines and activities
- Support to establish and/or maintain relationships with family and friends
- Provision of opportunities for choice
- Encouragement of more independent functioning
- Personal care and health support
- Provision of acceptable physical environment
- Mindful, skilled carers

How can we increase the opportunities for people to influence?