POSITIVE TEACHING TECHNIQUES AND STRATEGIES

Anyone can use the following positive teaching techniques and strategies. Paid caregivers (agency staff, individual providers or family members) will use the parameters of the Individual Support Plan (ISP) in applying these techniques and strategies.

1. **Shaping** is a teaching technique that reinforces efforts to get closer to a desired response. When the task is introduced, any response that even vaguely resembles the desired response is reinforced. After the response occurs with regularity, the expectation is stepped up to be closer to the desired response.

   **Example:** Joe has a difficult time being in the same areas as other people while learning new things. Each time Joe walks toward a group of people, positive reinforcement will be given. Once he is doing this regularly, Joe will need to get even closer to the group before the positive reinforcement is given. Over time Joe will be expected to get closer and closer to the group before he is given the reinforcement.

2. **Chaining** is a teaching technique that breaks a task into small steps. Each step is then taught in sequence. Forward chaining teaches the steps from beginning of the task to the end. Backward or reverse chaining teaches steps from the end of the task to the beginning. This technique is good for repetitive tasks that can be worked on over time.

   **Example:** Joe is learning to brush his teeth, but he shows frustration trying to remember everything. The caregiver breaks down the task into steps, such as picking up the toothbrush, wetting the brush, putting toothpaste on the brush, etc. The caregiver starts with having Joe pick up the brush. When this is mastered, the next step is taught. Then as step one and two are put together Joe is ready to add step three. Giving positive reinforcement will add encouragement and increase Joe’s interest in learning the task.

3. **Voluntary Exclusion using Time Out or Quiet Time** is a teaching technique and strategy that either by a request or choice an individual will go to a less reinforcing environment to relax or settle down. After the individual has calmed down for about five minutes, he/she should be ready to return to the original situation. It also provides time to think about good choices.

   **Example:** Joe becomes frustrated when he watches school children walking across a corner of his yard. Joe jumps up and down and screams. The caregiver is not always able to find a diversion for Joe when school lets out. Joe has learned that before he gets upset he will go to his bedroom and relax. By not reinforcing his inappropriate behavior, but associating the situation with a time to be calm, Joe now will ignore the children or sometimes wave at them.
4. **Active Listening** is a strategy to help with expression of thoughts and feelings productively, avoiding inappropriate verbal or physical actions. When a person is frustrated or mad (and expresses it physically or with yelling), this strategy may be effective. The caregiver would engage the individual in conversation and actively listen to the feelings and thoughts being expressed. The caregiver will paraphrase back using action verbs. Expressing empathy and validation of feelings make this a good initial approach.

**Example:** Joe is playing a video game. He starts yelling at the game and slapping the television screen. The caregiver asks Joe, “What’s going on?” Joe may respond with “dumb game.” The caregiver can paraphrase back, “Are you telling me that the game is too hard and you are mad?” With a positive response from Joe, the caregiver should validate the feeling, such as “Joe I understand that the game can make you mad.” Sometimes games make me mad, too.” If the situation is not defused Joe should be helped with a solution, e.g. asking if he wants help with this game, play a different game or change activities. The caregiver could suggest a deterrent for future occasions such as, “Joe next time the game makes you mad, just say “I’m mad,” and let me know when I can help.”

5. **Environmental Engineering** is a strategy that is usually the least aversive. It involves taking clues from the environment and modifying the environment to resolve current issues and prevent future occurrences of the same issue.

**Example:** Joe and Sally sit across from each other at a table to work. Materials such as pens, paper and newspaper are located between them. Each wants exclusive access to the materials and they become angry and start hitting each other. The caregiver evaluates the situation and moves Joe and Sally to different tables where each has their own space and materials that they don’t have to share.

**OR**

Joe cries every time his mother prepares a meal making a stressful situation for both Joe and his mother. After some observation, Joe’s frustration seemed to happen when his mother leaves his sight. The living room sofa blocked Joe’s view of his mother. With some rearranging of furniture, Joe could see his mother, his crying stopped and he was able to play in the living room while his mother prepared meals.

6. **Reinforcement** is a strategy that rewards or reinforces a desire behavior. Reinforcers can be praise, approval, awards, privileges, etc. The reinforcement should be given immediately following a behavior to increase the likelihood of the behavior occurring again.

**Example:** Joe took his plate to the kitchen and washed it. The caregiver told Joe, “Thank you for taking care of your plate. You washed the plate correctly. Good job.” It is important to be specific about what is being praised. Praise should be sincere and enthusiastic.
7. **Redirection** is a strategy that redirects a person to a variety of options and choices and the person becomes involved in one of the choices. Redirection can be helpful when a behavior needs to be changed.

   **Example:** Joe is getting tired of feeding the birds on the back porch. He throws down the bag of seeds. The caregiver noticed that prior to this he was looking at the swing, the back gate and the door to the house. The caregiver starts a conversation with Joe. The caregiver asks if he would like to sit down on the swing, go for a walk or go back in the house. Joe begins to swing. It is important to make the redirection something that is acceptable to the individual.

8. **Talking** is a strategy to bring calmness to a situation. This ideally is done more as a preventive measure rather than a difficult situation arises, but can be used for both. The caregiver should include discussion of the situation, the option/alternative choices the individual can make and the positive outcomes that come from the choice made.

   **Example:** Joe likes to go the mall, but gets separated from the caregiver and then yells. Before the next outing, the caregiver talks with Joe about the mall. The caregiver says that Joe is expected to stay close. Joe says he likes to stop and look at things. When he does, the caregiver keeps walking. Joe says he doesn’t like the caregiver getting lost so he yells. Joe and the caregiver work on a solution that Joe will tell the caregiver when he would like to stop. The caregiver will give Joe time to look at things. When he is finished, they will continue the outing.

9. **Bridging** is a strategy used to move from one behavior to a more positive behavior.

   **Example:** Joe flaps his hands. The caregiver observes that he does not flap his hands when eating or using his pressure pad to listen to music. So when not eating, Joe is offered the pressure pad and other items to keep his hands busy. The caregiver is giving Joe the opportunities to move or bridge from activity to another.

10. **Token Economy** is a strategy where “tokens” are used as re-enforcers/rewards. Tokens may be check marks on a board, poker chips, points or small items. After earning the tokens they may be exchanged for items, activities or privileges. Token economies should never require an individual to earn money or basic necessities that they are already entitled to receiving.

   **Example:** Joe has a difficult time getting to the bus stop on time and is routinely late for work. The caregiver discussed the token process with Joe and gave Joe a token every time he made the bus on time. Joe could use the token for gum, other small items or he could save them. Joe often saved them and exchanged them for a trip to the movies.
11. **Generalization Activities** is a strategy to develop activities that require little or no supervision or direction. This gives the individual freedom to choose an activity when no structured activities are occurring.

**Example:** Joe is pacing around the room, twirling and interrupting others. The caregiver needed to give one-on-one attention to someone else. The caregiver tried to redirect Joe, but his behavior soon started again. The caregiver realized that Joe needed an activity that he could enjoy that did not need direct supervision. A shelf with books and magazines was setup. Joe now goes to this activity when the caregiver is busy. His pacing, twirling and interrupting others has stopped. Joe seems to enjoy his freedom.

12. **Selective Attention** is a strategy that minimizes the attention given to undesired behaviors and gives attention to functional behaviors. This is very powerful. By giving attention to a behavior it can be reinforced. The first step is to recognize desired and undesired behavior. When a desired behavior is occurring the caregiver should reinforce with verbal praise and acknowledgement that specifically addresses the behavior. When an undesired behavior is occurring, the caregiver should give no attention to the individual, turn away and give attention verbally to someone else. The caregiver should be aware of the reaction by the individual. If this method is working, the caregiver may see the individual looking at or approaching him or herself and decreasing the undesired behavior. When any of these happen, the caregiver gives attention again to the individual by telling them that their current specific behavior is good. Another strategy that works with this is modeling the desired behavior.

**Example:** Joe will pick scabs on his arm. The response by the caregiver had been to rush to Joe and make a fuss over his arm, sometimes not in a very positive manner. The caregiver decided to ignore Joe when he picked his arm and purposely walked across the room and without facing toward Joe, spoke with someone else. When the caregiver noticed that Joe was intently watching and not picking his arm, the caregiver praised Joe for keeping his hands busy with his activity. It took a couple of times, but Joe and the caregiver found a better way for Joe to get attention. Joe rarely picks his scabs.

13. **Situational Support** is a strategy to get the desired behavior by changing the environment. By making elements of the environment conducive to the desired behavior, the better the results will be.

**Example:** Joe is standing in the leaf-covered yard. The caregiver is sitting on the porch giving Joe verbal direction and prompting the rake the leaves. Joe does not respond until the caregiver joins him with raking leaves.
14. **Incidental Teaching** is a strategy that makes the most of opportunities. The caregiver who is running a behavioral plan or any plan for an individual will also look for opportunities outside the structured plan to reinforce the concepts. These opportunities are less formal and formal data may not be recorded.

**Example:** Joe has been working on using the correct dinnerware at home. On a trip to the fair, a food vendor asked Joe if he wanted a fork or spoon. The caregiver took this opportunity to allow Joe to make the decision and then verbally praised him for his efforts.

15. **Fading** is a teaching technique that gradually reduces or withdraws the amount or method of assistance given to an individual. This is a good technique and can effectively be used in conjunction with Chaining.

**Example:** Joe successfully uses the rest room independently when cued with “t”, the American Sign Language sign for toilet. The caregiver now cues Joe 3 times daily, but wants to reduce and possibly eliminate cuing completely. The staff begins by reducing cueing to 2 times a day. As success with this is reached, cueing will continue to fade and eventually cueing may not be necessary.

16. **Modeling** is a teaching strategy using demonstration and imitation.

**Example:** Joe is learning to fold his clothes. The caregiver, family member or living companion works at the same task. Through demonstration, Joe has the opportunity to imitate the task. It might be effective for the demonstrator to talk about what they are doing. Reinforcement is always an added benefit.

17. **Discrimination** is a technique teaching discrimination of where and when an event should happen and what the appropriate environment is.

**Example:** Joe indiscriminately masturbates. Instead of trying to stop the behavior, Joe is taught how to select an appropriate time and place such as a private time in his bathroom or bedroom.

18. **Prompt** is a teaching technique that may be spoken, a gesture or physical guidance to cue an individual to do a task. A prompt can also be used as a behavior to change behavior.

**Example:** Joe has learned to clean the table after a meal, but does not do it independently. The caregiver prompts Joe by handing him a cloth and asking him to clean the table.

- 5 -
19. **Graduated Guidance** is a teaching technique that “fades” the guidance of a task as the ability to perform the task increases.

   **Example:** Joe was learning to sweep the patio. Joe needed to learn the skill of sweeping. Physical guidance was needed. The caregiver physically guided Joe by providing a constant touch to his elbow. As time went on, the caregiver used less and less touch. Joe can now sweep the patio without assistance.

20. **Relaxation Teaching** is a technique to teach relaxation. This typically may involve:

   - Teaching to tense and relax muscles and muscle groups is an orderly manner.
   - Verbal instructions given in a calm and soothing voice.
   - A quiet environment away from the other people and distractions.

   **Example:** Joe gets very tense when he is frustrated or anxious. It makes it difficult for him to focus on what he needs to do. The caregiver worked with Joe on how to relax. Joe was taught how to tense and then relax his muscles. A quiet area was made available for Joe with a tape machine. Joe can make the choice of playing either soothing music or sounds. A little relaxation time puts Joe in a receptive mood.