

# Trying to Make Sense of Behavior

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There seems to be a presumption with disabilities that if behavior is weird

- It must be part of a diagnosis
- It can have little or no meaning
- It is out of the child's control
- I think otherwise
  - All behavior has a purpose
  - All behavior is communication
  - Behavior is chosen to solve a problem



# What is the difference?

**Behavior is learned**

**Behavior is chosen**



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# The child chooses a behavior to solve their situation, and then



- It works, and so they keep doing it
- It does not work, but the reaction of others maintains the behavior
- It is reinforced by the reaction of others and so becomes habit and no longer chosen



**It changes things when we look at behavior as  
chosen**



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# Understand behavior first

- What is required?
  - Belief that all behavior can make sense
  - Close and careful observation



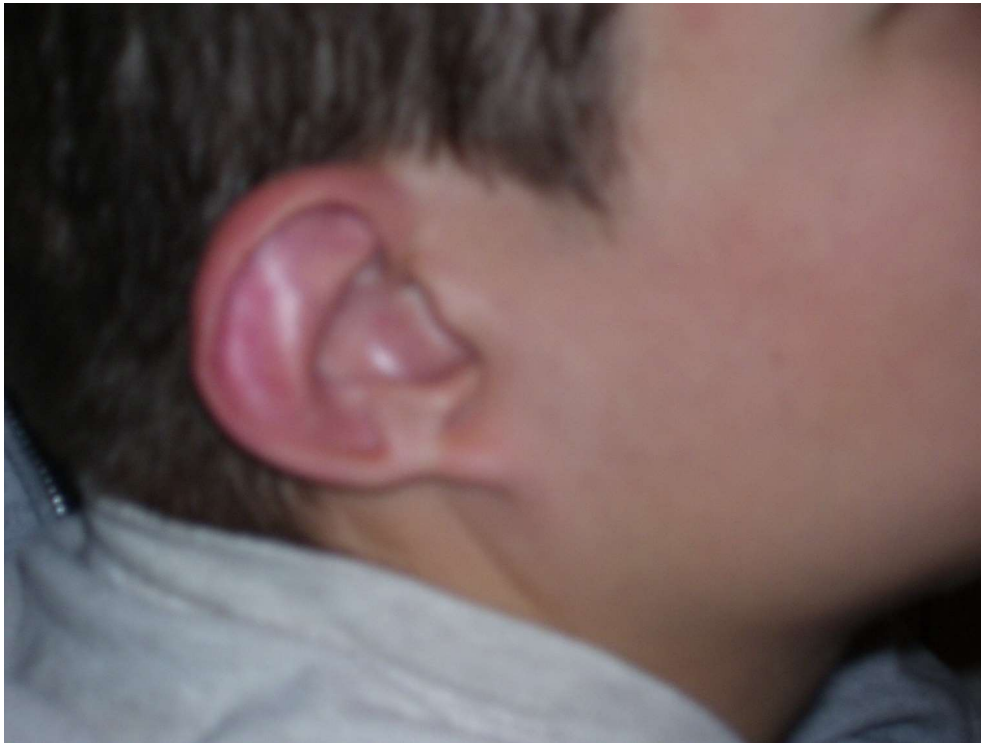
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# The Big Three

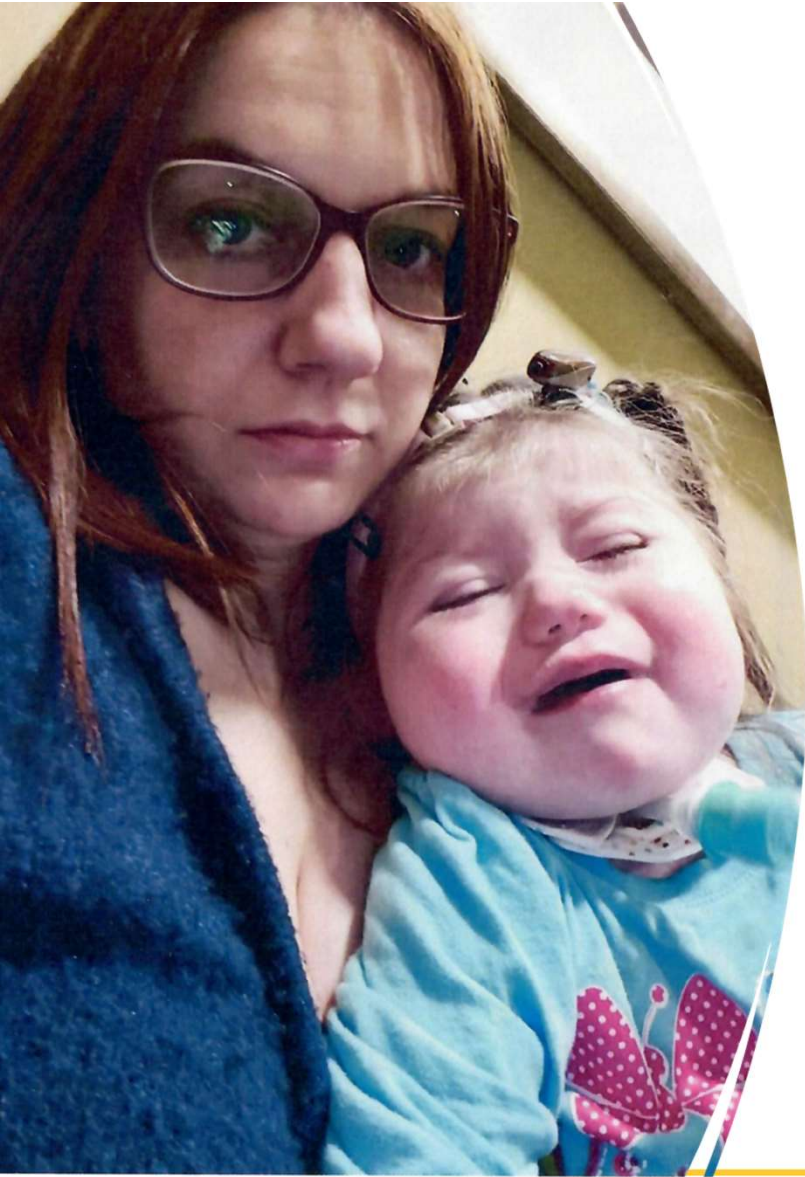




## Pain: Jacob's ear



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## Why pain is so important

- Can affect normal brain and neurological development
- Can affect sleep
- Can interfere with exploration of the environment and learning
- Can interfere with the development of attachment and trust
- Once tolerated may be ignored even while it is affecting health and behavior



# Sensory Deficits in CHARGE

- Hearing – sensorineural hearing loss
- Vision – coloboma
- Smell – anosmia
- Taste – prefer strong tastes
- Tactile – defensiveness
- Vestibular – balance issues
- Proprioceptive – awkwardness



# Sensory processing problems

- Frequently occurring in genetic syndromes
- Exacerbated by sensory impairments
- Associated with anxiety and OCD
- Even incidental sensory events may overload the child
- May lead to sensory self-stimulation
- Need to intervene very carefully to avoid meltdowns





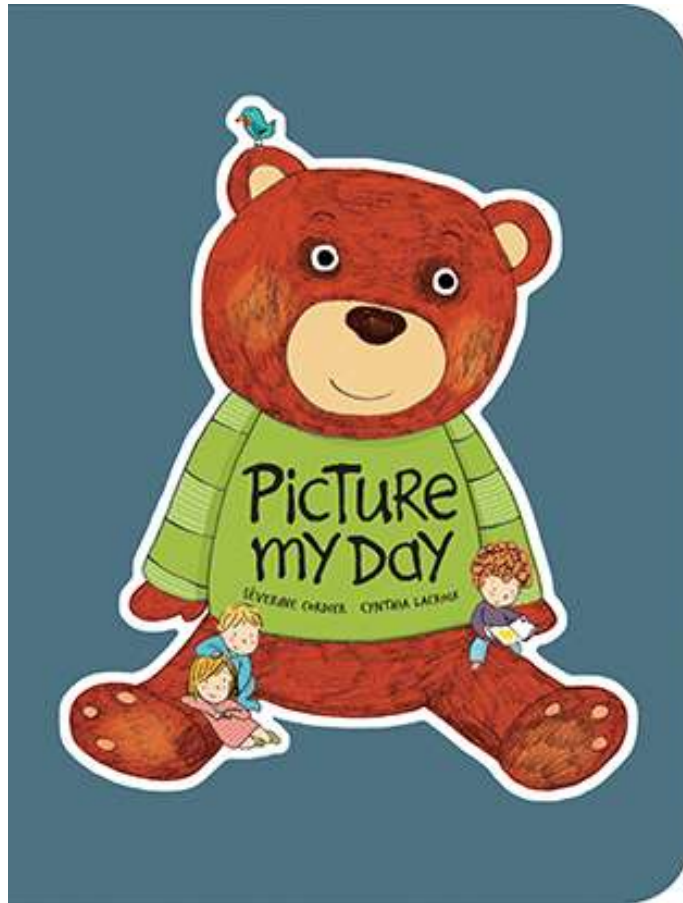


What could  
our kids  
possibly have  
to be anxious  
about?



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We like to know what is going on.



- What are we doing right now?
- What are we going to do next?
- What did we just do?

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## When we are not sure...

- We become anxious
- We engage in behavior which expresses our feelings
- We engage in behavior or activities that help us feel more secure

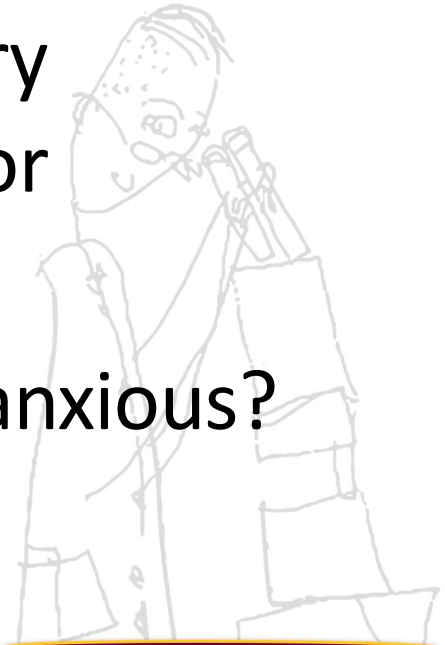


- \*Pessimism and negative thinking patterns**
- \*Anger, aggression, restlessness, irritability, tantrums, defiance**
- \*Constant worry about things that might happen or have happened**
- \*Crying**
- \*Physical complaints such as stomachaches, headaches, fatigue**
- \*Avoidance behaviors**
- \*Sleeping difficulties**
- \*Perfectionism**
- \*Excessive clinginess and separation anxiety**
- \*Procrastination**
- \*Poor memory and concentration**
- \*Withdrawal from activities and family interactions**
- \*Eating disturbances**



## Thinking about behavior

- Is it due to pain?
- Are the sensory systems over or underloaded?
- Is the person anxious?



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## Self-regulation begins with a goal

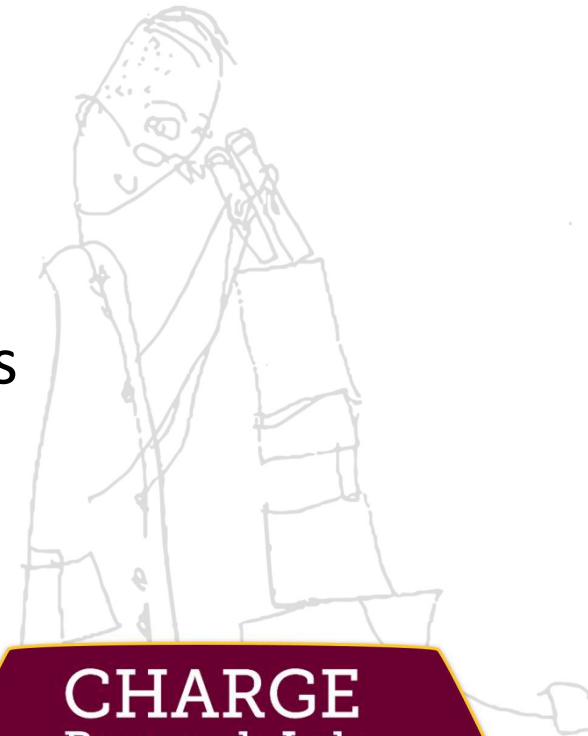
- What do you want to have happen?
- What must you do to make it happen?



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## Self-regulation of pain

- Pain anxiety and pain catastrophizing
- Tension, distress, nervousness, irritability
- The role of stress
- Changing one's thoughts and expectations
- Meditation
- Distraction



This is self-regulation of sensory systems



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# Self-regulation of anxiety

- Making life more regulated
  - Routine
  - Predictability



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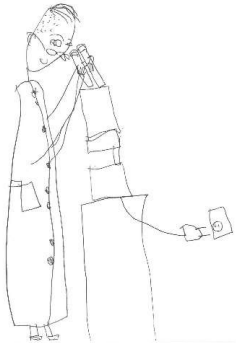
# It is a communication relationship



- Behavior is the foundation for building communication
- Communication develops in the context of relationship
- Our response to behavior is part of a communication event
- What does our response communicate to the child?
- Think about what you want your response to say, keeping in mind the goal of communication
- Think about how you are responding



CHARGE Syndrome Research Lab  
At Central Michigan University



## Thanks to my Lab

