



The Autism

Mommy's Guide to Reducing
Aggressive / Problem Behavior

A young child with blonde hair, wearing a red t-shirt and patterned pants, stands next to a white toilet. The child has a wide, joyful expression with their mouth open. The background is a white tiled wall with colorful letters and numbers (X, Y, Z, 1, 2, 3) mounted on it. A blue potty training seat is visible on the floor next to the toilet. The bottom half of the image has a red overlay with faint line drawings of children's faces and objects.

The Big 3

What I call the "BIG 3"

The skills every CHILD with Autism needs for a CHANCE at a life of INDEPENDENCE:

- 1 | Potty Training
- 2 | Communication
- 3 | **Aggressive/Problem behavior at zero (or close to zero) and can sit and attend**

A young child with blonde hair is lying on their back on a bed with a green blanket. They are wearing a grey t-shirt and patterned shorts. Their legs are raised high in the air, and they are wearing a yellow paper crown. The background is a plain white wall with a white headboard visible on the left.

The Big 3

What I call the “BIG 3”

The skills every CHILD with Autism needs for a CHANCE at a life of INDEPENDENCE:

I consider aggressive/problem behavior one of the **MOST IMPORTANT** foundational skills to tackle because it can be so disruptive to quality of life for the child, family, caregivers, etc.

So when I am working with a family that is dealing with these behaviors I tackle it like a member of the Bomb Squad.



The Big 3

What I call the "BIG 3"

The skills every CHILD with Autism needs for a CHANCE at a life of INDEPENDENCE:

Bomb Squad Mentality

- | | | |
|--------|--|--|
| Step 1 | | Approach and Inspect |
| Step 2 | | Disarm |
| Step 3 | | Structured dismantling of the explosive behavior |

A smiling Black woman with curly hair, wearing a grey patterned dress, stands in a classroom holding a tablet. She is addressing a group of young students who are sitting and looking at her. The background shows a classroom with a bulletin board and a whiteboard.

Disclaimer

This information and all the information in my Guides not Workshops are not intended to serve as a substitute for consultation with medical and behavioral professionals. Only qualified professionals who know and work with a child on an ongoing basis can adequately assess and supervise a child's program. I always recommend including a Board-Certified Behavior Analyst on a child or client's team. This is especially important if a child is in danger of hurting themselves or others.

The background of the slide is a photograph of a young person with dark, curly hair, wearing a light-colored long-sleeved shirt. They are shown in profile, covering their face with their hands, suggesting a state of distress or emotional pain. The image is overlaid with a semi-transparent purple filter. In the bottom half of the image, there is a pattern of faint, white line-art icons representing various children's activities and emotions, such as a soccer ball, a child's face, a child running, and a child holding a heart.

Step 1:

**Slowly Approach Your BELIEFS
around the Problem Behavior**

REDUCE AGGRESSIVE/PROBLEM BEHAVIOR

2 of the most frequently asked questions we get at Champions for Our Children is:

-Why is my child hurting themselves/me/or others? or

-Why does my child MELTDOWN/Tantrum?

As a toddler, neurotypical children go through their stages of biting, tantruming, hitting and expressing themselves emotionally.

Around 1-2 years old, this behavior starts to subside because communication starts to bud and they can communicate their needs and get their needs met through vocal language. This is an IMPORTANT skill Typical Parents take for granted.

However, for Parents like us, this may not be the case. **Most things a neuro-typical child learns through living life unconsciously, our children need to be taught.**

REDUCE AGGRESSIVE/PROBLEM BEHAVIOR

Reducing Aggression/Problem Behaviors is one of the BIG 3's and unlearning these behaviors is required for a chance at an independent future.

If we do not see our children make this monumental step on their Autism Journey, it will not only continue to be detrimental to them, it will continue to be detrimental to us, their parents.

There is something that happens to us mentally when this behavior continues. It can keep us in a negative mental place, keep us stuck and hijacks our child's progress toward a life we know they deserve.

We then become more like firemen putting out fires vs. a BOMB SQUAD BOSS whose going to disarm these behaviors from happening.



REDUCE AGGRESSIVE/PROBLEM BEHAVIOR

Studies show that

68% of children and teenagers with autism **had been aggressive to a caregiver**, and **49%** had been aggressive to someone else at some point. **More than half** of the youth studied were currently having **mild to severe aggressive behavior**.

and Excessive Tantruming/Meltdowns are linked to Autism.

REDUCE AGGRESSIVE/PROBLEM BEHAVIOR

In our Coaching Program we've been able to reduce Aggressive/Problem Behavior for **Non Verbal Children, ages 2 years old up to teenagers..**

We've been able to reduce Aggressive/Problem Behavior, decrease meltdowns, and improve quality of life for the families we work with.

All of which we've been able to do **in a matter of WEEKS in my Coaching Program.**

So if that's the case..

Why is Aggressive/Problem Behavior such a huge area that parents are still struggling with?

This is the single **MOST IMPORTANT THING** you need to know..

Getting our Autistic Children to reduce their Aggressive/Problem Behavior starts with our **BELIEFS in what WE THEIR PARENTS are capable of FIRST and what THEY are capable of 2nd!**

The # 1 reason stopping your child from decreasing problem behavior are your thoughts about it.

Your thoughts create your RESULTS.



**This is the single MOST
IMPORTANT THING you
need to know..**

What is your own personal experience with aggressive/problem behavior?

- 1 | Maybe you were brought up where hitting and slapping occurred from family members and when your child does it, it's bringing up past negative memories?
- 2 | Maybe you had an experience where you were physically abused/assaulted growing up?
- 3 | Maybe you were even yelled at growing up in your home or yelling and screams were a staple in your household?

A woman with long brown hair is shown in profile, covering her face with her hands as if crying. The background is a soft, out-of-focus indoor setting. A purple overlay covers the bottom half of the image, containing text and illustrations of children's faces and objects like a soccer ball and a stroller.

This is the single **MOST IMPORTANT THING** you need to know..

"Lifetime Member of the Picky Eater Club"

"She keeps running away"

"He's getting stronger, his hitting is scaring me"

"DIAPERS IN ADULT SIZES"

"NON VERBAL, I just want to know what he wants!"

What are you thoughts around your child's aggressive/problem behavior?

- 1 | Do you think they are capable of changing?
- 2 | Do you think YOU are capable of helping them reduce these behaviors?
- 3 | Does your kid get a free pass to behave however they want because they have Autism?
- 4 | **Does Autism mean CANCER to you?**



**This is the single MOST
IMPORTANT THING you
need to know..**

The Brain's job is to not make us happy, it's to keep us safe.

By design, our brain's are supposed to look for the negative, which functions to protect us.

For anyone reading this that has tried and failed at anything, you will have repeated thoughts you've been thinking for a while about it.

For Us: Losing Weight, Making More Money, Getting a new Job, Quitting Smoking/Drinking

For our kids: Potty Training, Communicating, Reducing Aggressive/Problem Behavior..



**This is the single MOST
IMPORTANT THING you
need to know..**

You've been defaulting to unsupportive beliefs.

You've been defaulting to bullshit beliefs, this is what our brain does! SAFETY is staying the path of least resistance, its NOT Trying new things (for fear of failure), It's keeping things status quo because it's familiar.

But now We want **to think NEW THOUGHTS on purpose to create new beliefs to
yield NEW RESULTS.**



This is the single **MOST IMPORTANT THING** you need to know..

Your **THINKING** needs to be **setting yourself and your child up for success** when it comes to preventing and reducing problem behavior.

A photograph of a young boy and girl hugging. The boy is on the left, wearing a blue and white baseball-style shirt. The girl is on the right, wearing a pink shirt. They are both smiling and looking at the camera. The background shows white kitchen cabinets. The bottom half of the image has a red overlay with white text and faint line drawings of children's faces.

This is the single **MOST IMPORTANT THING** you need to know..

ALL THOUGHTS ARE OPTIONAL!

You get to CHOOSE your thinking to get NEW EMOTIONS, ACTIONS AND **RESULTS!!!!**

I HELP PARENTS TO THINK INTENTIONALLY TO GET THE RESULTS THEY WANT FOR THEIR CHILDREN WITH AUTISM.

A young child with light brown hair and a serious expression is holding onto a dark wooden post. The child is wearing a striped shirt and a white wristband. The background shows a white picket fence and some greenery. The bottom half of the image has a blue overlay with white text and faint line drawings of children's faces and toys.

**This is the single MOST
IMPORTANT THING you
need to know..**

CFOC FORMULA to Creating New Beliefs:

FACTS—>THOUGHTS —>EMOTIONS—>Action/Inaction= RESULTS

Knowing that your **THINKING** is **CREATING** your current **EMOTIONS** around your child's behavior....

Now knowing that your **EMOTIONS** are **CREATING** your current **ACTIONS** or **IN ACTIONS** around your child Aggressive/Problem Behavior....

Therefore – Your thinking is **CREATING** your current **RESULTS** around your child's behavior

**This is the single MOST
IMPORTANT THING you
need to know..**

T.E.A. LINE EXAMPLE (Thought, Emotion, Action)

DEFAULT TEA LINE

Circumstance/Fact – My child is headbutting

Thought: "I don't know what to do, she's going to hurt herself"

Emotion: defeated, hopeless

Action: Don't even try to intervene anymore

Result: Not stopping the headbutting

INTENTIONAL TEA LINE

Circumstance/Fact – My child is headbutting

Thought: "My child **MUST** learn to express herself in an appropriate way"

Emotion: Felt like her **BOSS Mom**, **EMPOWERED**

Action: Observed, diverted and created an action plan

Result: My child has reduced/minimized this behavior!

Step 2

**Inspect / Observe
the Behavior**



| INSPECT / OBSERVE THE BEHAVIOR

#1 ALWAYS rule out medical issues for behavior

Ruling out medical problems is an ongoing process and should never be a once and done thing.

I've worked with too many clients where people go, "Oh, mom already took him to the doctor and ruled out medical problems 3 months ago."

You can't do this, especially with non-vocal or minimally verbal children or adults who can't really express their pain, where it's coming from, or how often it's occurring.

Any physical ailment the individual is experiencing. This needs to be assessed by a doctor in order to be ruled out BEFORE any type of assessment/intervention is implemented: *Toothache, stomachache, gastrointestinal issues, etc.*

INSPECT / OBSERVE THE BEHAVIOR

We really want to define what the child is doing

What is the actual behavior? Tantruming? Is he twisting on adults' fingers? Is she trying to choke peers? Is he hitting, biting, or kicking legs of adults or peers?

Objective and observable definitions are best so anyone that interacts with the child will know what the aggressive behaviors are and what to look for.

INSPECT / OBSERVE THE BEHAVIOR

When and what is going on when the behavior occurs?

Data serves as a tracking system to help us better understand triggers, timing, how often the behavior happens, etc.

Frequency – tally or count how many times a behavior occurs

Latency – how long does it take for the behavior to occur

Duration – how long does the behavior last

Intensity – on a scale, how intense a behavior is

ABC Data – antecedent, behavior, consequence data helps to identify what happens before and after behaviors

Antecedent – what happens before the behavior

Consequence – what happens immediately after the behavior

Ex: During free play when his brother is playing with the toy train, he engages in spitting. Immediately after he spits, his father comes into the room and yells at him.

Antecedent – his brother playing with the toy train

Consequence – the father yelling at him

WHY MIGHT THIS BEHAVIOR BE HAPPENING?

After We've ruled out Medical.... Could it be:

Escape – the individual wants to get out of non-preferred tasks.
Homework, working with therapist, eating non-preferred foods, etc.

Attention – the individual wants attention
This can be positive (wants social praise/someone to pay attention) or negative (reprimands or scolding for bad behaviors)

Tangibles – the individual wants an item/activity
Favorite toy, favorite_____

Sensory – the individual has difficulty receiving and responding from their senses
light, sounds, touch, taste, smell

A young girl with dark hair in a braid, wearing a green shirt, is sitting on a bed and hugging a doll. She has a sad or distressed expression on her face. The background shows a yellow pillow and a white headboard.

WHAT CAUSES PROBLEM BEHAVIOR? (FUNCTIONS OF BEHAVIOR)

Much of the focus of a functional analysis is on other people's reactions to problem behavior. This approach makes sense because, in many cases, other people's response may actually cause the behavior to become consistently unmanageable, even though those reactions might work for other children. Once the cause is determined, an effective and individualized treatment can be developed.

A functional analysis will determine which type of reaction (or combination of reactions) is causing problem behavior to persist:

Attention or another type of reaction from caregivers (reprimands, scolding, consoling, giving toys or food to calm down, etc.) is the cause of problem behavior approximately 30% of the time (behavior analysts call this **social-positive reinforcement**).

Getting out of doing unpleasant tasks (doing homework or chores, brushing teeth, getting a bath, etc.) is the cause approximately 30 percent of the time (**social-negative reinforcement**).

Sensory reasons, which do not involve a reaction from anyone at all, are the cause approximately 20 percent of the time (automatic reinforcement); interestingly, behavioral treatments can be very effective in many of these cases as well.

The remaining 20% are a combination of reactions.

HOW ARE THE REINFORCEMENTS?

We also believe that another reason why problem behavior can occur is when the demands are too high and/or reinforcement is too low.

It's our job as the people working with children to move that scale down so that the demands become lower and the reinforcement gets higher.

This doesn't mean that we can't ever increase demands, we have to scale back so aggression is under control first, then demands can slowly increase later on.

Reinforcement – anything that is added or removed which increases the likelihood that the behavior will occur again in the future

Positive reinforcement – anything added to increase the likelihood of a behavior occurring again in the future

- *Social praise, giving the child a toy, giving the child edibles = behavior occurs in the future*

Negative reinforcement – anything taken away to increase the likelihood of a behavior occurring in the future

- *Reducing demands, lowering volume in environment*

DATE/TIME DURATION	ANTECEDENT	BEHAVIOR	CONSEQUENCES
-----	<input type="checkbox"/> Large Environment	<input type="checkbox"/> Hitting	<input type="checkbox"/> Ignored
-----	<input type="checkbox"/> Academic Time	<input type="checkbox"/> Kicking	<input type="checkbox"/> Attention To Others
-----	<input type="checkbox"/> Item/Activity Restricted	<input type="checkbox"/> Throwing Object	<input type="checkbox"/> Removal of Object
-----	<input type="checkbox"/> Attention Restricted	<input type="checkbox"/> Scratching	<input type="checkbox"/> CDR
-----	<input type="checkbox"/> Transition	<input type="checkbox"/> Elopement	<input type="checkbox"/> Physical escort to CDR
-----	<input type="checkbox"/> Peer Play	<input type="checkbox"/> Verbal Threat	
-----	<input type="checkbox"/> Other -----	<input type="checkbox"/> Other -----	<input type="checkbox"/> Other -----
-----		PEER OR STAFF	
-----	<input type="checkbox"/> Large Environment	<input type="checkbox"/> Hitting	<input type="checkbox"/> Ignored
-----	<input type="checkbox"/> Academic Time	<input type="checkbox"/> Kicking	<input type="checkbox"/> Attention To Others
-----	<input type="checkbox"/> Item/Activity Restricted	<input type="checkbox"/> Throwing Object	<input type="checkbox"/> Removal of Object
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-----	<input type="checkbox"/> Other -----	<input type="checkbox"/> PEER OR STAFF	<input type="checkbox"/> Other -----

-----	<input type="checkbox"/> Large Environment	<input type="checkbox"/> Hitting	<input type="checkbox"/> Ignored
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-----	<input type="checkbox"/> Transition	<input type="checkbox"/> Elopement	<input type="checkbox"/> Physical escort to CDR
-----	<input type="checkbox"/> Peer Play	<input type="checkbox"/> Verbal Threat	
-----	<input type="checkbox"/> Other -----	<input type="checkbox"/> Other -----	<input type="checkbox"/> Other -----
-----		PEER OR STAFF	

DATE/TIME DURATION	ATTENTION RECEIVED PRIOR	HYPOTHESIZED FUNCTION
-----	<input type="checkbox"/> 1:1 with Michelle	<input type="checkbox"/> Reaction From Peer
-----	<input type="checkbox"/> 1:1 with Stella	<input type="checkbox"/> Gain Attention
-----	<input type="checkbox"/> 1:1 with -----	<input type="checkbox"/> Gain Item
-----	<input type="checkbox"/> Small Group Instruction	<input type="checkbox"/> Escape Demand

-----	<input type="checkbox"/> Large Group Instruction	<input type="checkbox"/> Escape Sensory
-----	<input type="checkbox"/> 1:1 with Michelle	<input type="checkbox"/> Reaction From Peer
-----	<input type="checkbox"/> 1:1 with Stella	<input type="checkbox"/> Gain Attention
-----	<input type="checkbox"/> 1:1 with -----	<input type="checkbox"/> Gain Item
-----	<input type="checkbox"/> Small Group Instruction	<input type="checkbox"/> Escape Demand

-----	<input type="checkbox"/> Large Group Instruction	<input type="checkbox"/> Escape Sensory
-----	<input type="checkbox"/> 1:1 with Michelle	<input type="checkbox"/> Reaction From Peer
-----	<input type="checkbox"/> 1:1 with Stella	<input type="checkbox"/> Gain Attention
-----	<input type="checkbox"/> 1:1 with -----	<input type="checkbox"/> Gain Item
-----	<input type="checkbox"/> Small Group Instruction	<input type="checkbox"/> Escape Demand

-----	<input type="checkbox"/> Large Group Instruction	<input type="checkbox"/> Escape Sensory

Data Collection Chart

DATE:	TIME:	DURATION:
ANTECEDENT	BEHAVIOR	CONSEQUENCE
What specifically happed before behavior occurred? Example: given a worksheet to complete, teacher directive to get in line:		What did the student gain or avoid by this behavior? Check all that apply <input type="checkbox"/> Teacher Attention <input type="checkbox"/> Peer Attention <input type="checkbox"/> Escape Work <input type="checkbox"/> Escape Teacher Demand <input type="checkbox"/> Escape Internal Feelings (i.e. fear) <input type="checkbox"/> Tangible (access to somethin desirable) <input type="checkbox"/> Sensory

DATE:	TIME:	DURATION:
ANTECEDENT	BEHAVIOR	CONSEQUENCE
What specifically happed before behavior occurred? Example: given a worksheet to complete, teacher directive to get in line:		What did the student gain or avoid by this behavior? Check all that apply <input type="checkbox"/> Teacher Attention <input type="checkbox"/> Peer Attention <input type="checkbox"/> Escape Work <input type="checkbox"/> Escape Teacher Demand <input type="checkbox"/> Escape Internal Feelings (i.e. fear) <input type="checkbox"/> Tangible (access to somethin desirable) <input type="checkbox"/> Sensory

DATE:	TIME:	DURATION:
ANTECEDENT	BEHAVIOR	CONSEQUENCE
What specifically happed before behavior occurred? Example: given a worksheet to complete, teacher directive to get in line: 1 2 3 4		What did the student gain or avoid by this behavior? Check all that apply <input type="checkbox"/> Teacher Attention <input type="checkbox"/> Peer Attention <input type="checkbox"/> Escape Work <input type="checkbox"/> Escape Teacher Demand <input type="checkbox"/> Escape Internal Feelings (i.e. fear) <input type="checkbox"/> Tangible (access to somethin desirable) <input type="checkbox"/> Sensory



Step 3

**Disarm/Prevention
PROTOCOL**

DIFFUSE THE BOMB BEFORE IT BLOWS (MODIFYING ANTECEDENTS)

***** We want to spend 95% of our time preventing problem behaviors and modifying the demands to prevent aggression from occurring. *****

We want to use that prior knowledge about behaviors where possible before trying to find something new.

We want to look to see where the behaviors don't occur and try to incorporate more of those kinds of activities.

We want to **focus heavily on pairing and manding.**



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STACK WINS IN THE CHILD'S FAVOR

Wins/positive reinforcement should be happening 3x as much as negative attention

- Reinforcing appropriate behaviors by rewarding them
- Refusing to give in to the problem behavior by giving your child what he wants
- Using visual supports to communicate rules
- Starting with small, achievable goals to encourage success



Step 4

**Deactivate Explosive/
Problem Behavior**



MICHELLE'S- STRATEGIES TO REDUCE PROBLEM BEHAVIOR:

- Functional Communication Training (FCT)
- Noncontingent Reinforcement (NCR)
- Differential Reinforcement of Other Behavior (DRO)
- Differential Reinforcement of Incompatible Behaviors (DRI)
- Differential Reinforcement of Alternative Behavior (DRA)

FUNCTIONAL COMMUNICATION TRAINING (FCT)

This treatment involves teaching children to ask appropriately for what they want instead of engaging in problem behavior (the “use your words” approach).

Depending on children’s skill levels, they can be taught to ask nicely, hand a picture card, use a device, or use sign language.

A good starting strategy is to ensure that it is easier for children to ask for what they want than to engage in problem behavior (e.g., saying “break” instead of hitting to get out of work, or using sign language to communicate “play” instead of hitting to get toys or attention from others).

Once problem behavior decreases, children are then taught to use more extensive sentences (as skills permit) and to wait or accept “no” after requesting things, if necessary.

<https://www.youtube.com/watch?v=JHYfGQGVInM> 2:40

DIFFERENTIAL REINFORCEMENT OF OTHER BEHAVIOR (DRO)

“OMISSION”

This treatment involves providing reinforcement as long as the problem behavior does not occur for a specific period of time (the “you’ll get this if you don’t do that” approach).

As in the previous treatment, the goal is to require no problem behavior for a short period of time at first but to increase it slowly as the problem behavior remains low.

This strategy focuses on the absence of a particular behavior so a limitation is that the child may still earn reinforcement even if a different problematic behavior occurs during the wait time.

A simple fix is to wait at least 5 seconds before giving the reinforcer if an undesirable behavior occurs.

DIFFERENTIAL REINFORCEMENT OF ALTERNATIVE BEHAVIOR (DRA)

This treatment involves only reinforcing alternative behaviors while withholding reinforcement for inappropriate behaviors

- Using words instead of aggression – this can be taught by Functional Communication Training (FCT)
- The child is taught alternatives and reinforced when he/she engages in the alternatives

Asking to leave the area instead of engaging in aggression (Escape)

Asking for attention instead of engaging in aggression (Attention)

Asking for a toy instead of engaging in aggression (Tangible)

Asking to wash hands instead of engaging in aggression (Sensory)

DIFFERENTIAL REINFORCEMENT OF INCOMPATIBLE BEHAVIOR (DRI)

This treatment involves only reinforcing alternative behaviors while withholding reinforcement for inappropriate behaviors

- Using words instead of aggression – this can be taught by Functional Communication Training (FCT)
- The child is taught alternatives and reinforced when he/she engages in the alternatives

Asking to leave the area instead of engaging in aggression (Escape)

Asking for attention instead of engaging in aggression (Attention)

Asking for a toy instead of engaging in aggression (Tangible)

Asking to wash hands instead of engaging in aggression (Sensory)

NONCONTINGENT REINFORCEMENT

This treatment involves providing reinforcement on a schedule (the “wait until it is time” approach).

Therefore, it tends to be one of the easier approaches to use in busy settings (e.g., full classroom, multiple children at home, caregiver must focus on other tasks, etc.).

The starting strategy is to provide reinforcement before problem behavior would typically occur. If problem behavior occurs near the end of the wait time, simply wait five seconds before providing reinforcement.

Interval schedule (i.e., every 1 minute, 3 minutes, 5 minutes, etc.)

FUNCTIONALLY EQUIVALENT REPLACEMENT BEHAVIORS (FERBS)

Once a function of the aggressive behavior is determined, we must select a functionally equivalent replacement behavior (FERB).

This means the replacement behavior has to serve the same function as the aggressive behavior.

If the replacement behavior does not serve the same function as the aggressive behavior, there is a chance the behavior will not have a lasting change.

*TREATING AGGRESSION IS A PACKAGE DEAL

There is no one solution to the problem, aggression needs to be treated as a package of many interventions

Modify antecedents and consequences – to help diffuse the behavior from occurring by altering events before and after aggressive behaviors

Increase reinforcement – so the child is contacting reinforcement more frequently

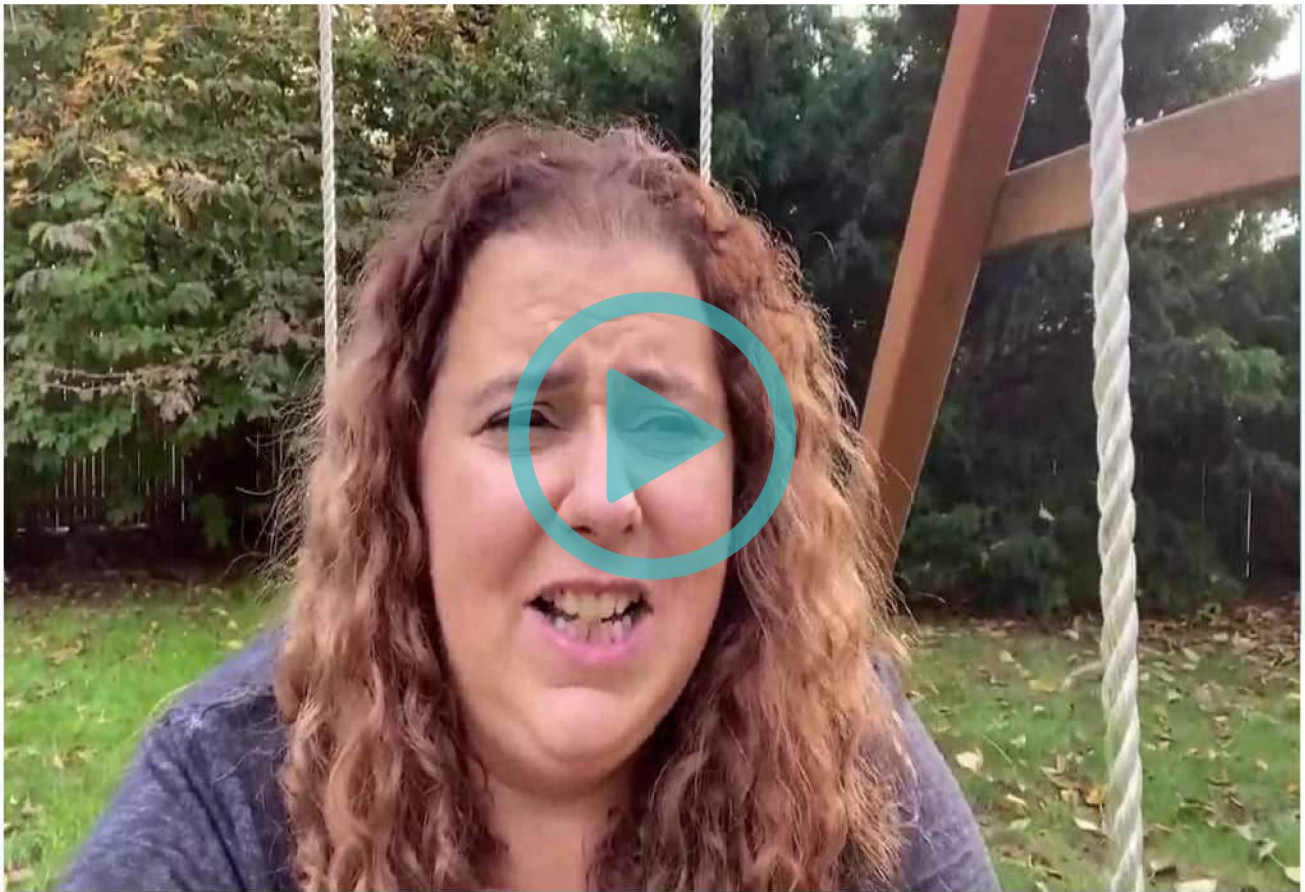
Decrease demands – which can increase in the future

Extinction – withhold reinforcement for aggression by differentially reinforcing replacement behaviors

FERBs – find functionally equivalent replacement behaviors

Data – analyzing the data to show an increase in replacement behaviors and a decrease in aggressive behaviors

Watch Julianna's Journey



My Gift to You

Want My Help Getting Your Child Potty Trained,
Talking, and Stopping Their Problem Behaviors?

If you're ready for support and want my eyes
on your situation, book a private Decision-
Making Call with me. We'll go over what you've
tried, why it hasn't worked, and whether
working together makes sense.

This is where real transformation begins.

[Click Here to Book Your Call](#)

