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POSITIVE APPROACHES & NONAVERSIVE STRATEGIES

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These are two of the “hottest” buzzwords in the field today. If the word ‘positive’ or ‘nonaversive’ is not in the title of your presentation, article, etc., then you are probably not on ‘the cutting edge’ of the field. I must admit to giving in to this fashion and sticking these buzzwords in the title of a recent presentation.

“Positive Approaches” and “Nonaversive Strategies” both mean about the same thing, however, there is a subtle difference which I think reflects the whole issue. I think “Positive Approaches” is the preferable buzzword.

When we are talking about Positive Approaches to Behavior Management, we are talking about constructive and logical ways to improve the quality of life of the individual. Instead of just telling the person what they can’t do, we bother to offer the person some alternatives that might work out better (and for them, not just for us). When the person engages in a problem behavior (I mean ‘challenging behavior’), the focus is on helping the person by resolving the causes of the behavior (e.g., if self abuse occurs because of boredom, we teach/provide some new activities; if aggression occurs to escape difficult demands, we teach the person a way to ask for help; if a lifestyle of bizarre behaviors are to ward off social contact, we attempt to bond; etc.).

It is truly a challenge to the Caregiver to come up with real solutions to challenging behaviors. It was a lot easier when our focus was on beating them down with controlling and punishing procedures. When the person asks why s/he should do something, we give a reason that makes sense for the person, the reason is not: “Because I told you to, that’s why”.

“Nonaversive Strategies” are positive approaches, but when we use this buzzword the emphasis is more on what we should not do rather than what we should do instead. This mis-emphasis is exactly what got us in trouble in the first place. We used punishment and other such controlling techniques to get the person to stop doing things we did not like, but we never bothered to teach the person what to do instead.

Aversive Strategies refer to an endless slew of punishing techniques that have been shown to in some way be effective at eliminating problem behaviors (e.g., solitary confinement, electric shock, water mist in the face, breaking ammonia capsules under the nose, corporal punishment, not “sparing the rod”, etc.).

I'd rather be known as someone who uses Positive Approaches than just someone who refuses to use Aversive Techniques. It is a quick fix for Regulators, Policy Makers, Provider Agencies etc. to make claim to using Positive Approaches by simply banning the use of Aversive Strategies and/or Restrictive Interventions. Unfortunately, this leaves the Caregivers with a list of Don'ts and no list of Do's.

If we develop a quality list of Do's, maybe the list of Don'ts won't be necessary. Now that's a Positive Approach! - the challenging behavior will decrease in frequency not because of fear of reprisal, but because it is just no longer necessary to use anymore.

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