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Strategies used to modify the behaviors of children with intellectual disability

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We Categorize disabilities in different way, like Sensory Disabilities (VI, HI, Deaf-Blind), Neuro Developmental Disabilities (LD, MR (ID), ASD), and Loco motor & Multiple Disabilities (CP, MD). Children with Intellectual disability have more behavior problems due to limited cognitive abilities. These behaviors are not an age appropriate, socially not accepted, and which has adverse affect on learning experiences of children, e.g. rebellious behavior, odd behaviors, self injurious and other injurious, hyper active behavior, anti- social behavior, and some others. Because of maladaptive behaviors children with disabilities are not able to cope with their social life, emotional life, personal life and educational environment. To help out them from these problems we do Behavior Modification Programme which includes some strategies like Cognitive Behavior Modification, Meta Cognition, Rational Emotive Behavior Therapy, Aversive Techniques, Assertive behavior, ABC and Applied Behavior Analysis. Some other techniques also used for Behavior Modification like Positive and negative Reinforcement, time out, token economy, differential reinforcements, physical restraints, and other. If maladaptive behaviors are reduced, the children with disabilities able to perform activities at their potential level which is needed to live independently in their environment.

Keywords: intellectual disabilities, behavior modification strategies and behavior problems

The World Health Organization (WHO) has defined the terms 'Impairment', 'Disability' and 'Handicap' in 1980 through the publication of the International Classification of Impairments, Disabilities and Handicaps (ICIDH), which is a manual of classification relating to the consequences of diseases. The ICIDH proposes the concepts and definitions of Impairment, Disability and Handicap, and discusses the relation between these dimensions. It is based on a linear model (Figure 1) implying progression from disease, impairment and disability to handicap.

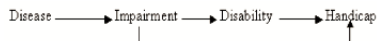


Figure 1: ICIDH Model (WHO 1980)

According to the ICIDH, Impairment is any loss or abnormality of psychological, physiological or anatomical structure or functions, generally taken to be at organ level. Impairment is damage to tissue due to disease or trauma. A person who has poor or no vision due to damage to retina or optic nerve may be said to have a visual impairment.

Disability has been defined as any restriction or lack of ability (resulting from an impairment) to perform an activity in the manner or within the range considered normal for a human being, generally taken to be at the level of the individual. Disability denotes the consequences of impairment in terms of functional performance and activity by the individual. A person who has an optic nerve or retinal damage would have limitations in performing those tasks that requires the use of eyesight.

The ICIDH defines Handicap as a disadvantage for an individual, resulting from an impairment or disability, which limits or prevents fulfillment of a role that is normal (depending on age, sex and social

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cultural factors) for that individual. There are so many acts which defines the different types of Impairments, Disabilities and Handicapped.

Latest one is Right of Persons with Disabilities 2012 defines 'specified disability' means i. autism spectrum disorder; ii. blindness; iii. cerebral palsy; iv. chronic neurological conditions; v. deaf blindness; vi. hemophilia; vii. hearing impairment; viii. intellectual disability; ix. leprosy cured; x. locomotor disability; xi. low vision; xii. mental illness; xiii. muscular dystrophy; xiv. multiple sclerosis; xv. specific learning disability; xvi. speech and language disability, and xvii. thalassemia and xviii. Multiple disabilities. RPwD 2012 includes 18 disabilities, in this research paper Intellectual Disability is focused.

Intellectual disability is a disability characterized by significant limitations both in intellectual functioning and in adaptive behavior, which covers many everyday social and practical skills. This disability originates before the age of 18.

American Association on Intellectual and Developmental Disabilities (AAIDD) (2009). This definition focuses on main two aspects of Intellectual Disability, these are;

Intellectual functioning- Also called intelligence refers to general mental capacity, such as learning, reasoning, problem solving, and so on. One criterion to measure intellectual functioning is an IQ test. Generally, an IQ test score of around 70 or as high as 75 indicates a limitation in intellectual functioning. Standardized tests can also determine limitations in adaptive behavior, which comprises three skill types: Conceptual skills- Language and literacy; money, time, and number concepts; and self-direction. Social skills- Interpersonal skills, social responsibility, self-esteem, gullibility, wariness, social problem solving, and the ability to follow rules/obey laws and to avoid being victimized. Practical skills- Activities of daily living (personal care), occupational skills, healthcare, travel/transportation, schedules/routines, safety, use of money, use of the telephone.

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Background

Behavior is any activity which is measureable and observable. Behavior is divided in two types i.e. Adaptive Behavior and Maladaptive Behavior

teaching activities.

- Choose specific problem behaviours for intervention only after due consideration about their relative frequency, duration or severity,