

Comments of the National Association of State Directors of Developmental Services on the proposed amendments to Massachusetts' regulations on behavior modification 114 CMR 5.14

The National Association of State Directors of Developmental Disabilities Services (NASDDDS) is writing in support of the Massachusetts proposal to regulate the use of aversive behavioral intervention.

NASDDDS is a nonprofit organization, established in 1964 to improve and expand public services to people with intellectual and other developmental disabilities (ID/DD). The Association's membership consists of the chief state developmental disabilities officials in the 50 states and the District of Columbia.

The NASDDDS mission is to assist member state agencies in building person-centered systems of services and supports for people with developmental disabilities and their families. The Association has adopted as basic principles that people with developmental disabilities have a right to be treated with respect and dignity; to be independent and make individual choices; to participate in family and community; to have opportunities to maximize their full potential; and to receive outcome-based services and supports.

Massachusetts' proposal to amend professional standards to prohibit the use of aversive (Level III) behavioral interventions on a prospective basis is completely in line with current policy and practice across the fifty states and the District of Columbia. Having abandoned the use of aversive techniques in practice or by rule, states are moving to reduce the use of all types of restrictive procedures such as physical restraint and seclusion in favor of employing person-centered planning and functional assessments to determine the reason behind problematic behavior and to effectively treat the underlying cause.

Individuals with developmental disabilities are particularly vulnerable to strategies that control and/or punish. Their difficulty in communicating their needs, fears, experiences and preferences leads to frustration which is, for lack of communication, often expressed through problematic behavior. As states discover methods of learning what people want to communicate, frustration and anger in the person subsides and so does negative behavior. In more recent years states have begun to explore the adoption of "trauma informed care," an approach adopted by state mental health systems to assure that the treatment environment for individuals who have experienced trauma (i.e. psychological and physical abuse, neglect, pain) in the past does not compound their emotional problems by re-traumatizing the person through treatment.

Aversive treatment, regardless of its intent or administration, is a traumatic event. Pain and the fear of re-experiencing pain create emotional problems that compound the initial behavioral problem and as such, add trauma to the person's life. Such interventions are not only ineffective and unnecessary, they are not based on person-centered principles of care and do not honor the right of the person to be treated with dignity and respect.