



Just Include Me Practical Guides Series

Behaviour as Communication

Supporting equitable care and improved health outcomes for people with intellectual disability



This guide will help you identify and apply positive behaviour strategies within clinical care to address underlying health factors and needs contributing to behaviours of concern.

Understanding behaviour

Behaviour is how a person, intentionally or unintentionally, communicates something that is important to them.

Behaviour might be a way a person communicates distress, discomfort, unmet needs or feeling overwhelmed. Changes in behaviour may be linked to communication barriers, pain, sensory overload, fear, trauma, confusion or unmet support needs.



Putting inclusive communication into practice

Use the below communication flow throughout your interaction with the person.

Where to start

People are more likely to feel calm, safe and supported when healthcare environments are predictable, respectful and inclusive.

Trauma-informed care recognises that distress and behaviour may be linked to past experiences, fear, overwhelm or feeling unsafe in healthcare environments.

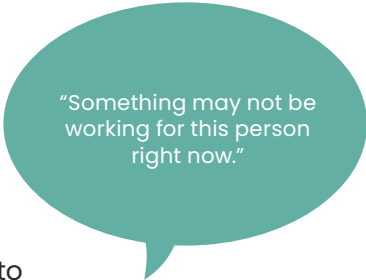
Respond with curiosity, not assumptions

Ask yourself what the person may be communicating.

Consider distress, fear, pain, confusion or sensory overwhelm.

Look for health, communication or environmental factors contributing to the behaviour.

Pause before reacting or continuing the task.



"Something may not be working for this person right now."

Help the person feel safe and supported

Maintain calm body language and tone.


Explain what will happen before starting.

Make the space as predictable and safe as possible.

Use clear and consistent communication.

Give the person time and choice.

Support privacy, dignity and confidentiality.



"I will keep your information safe and private."

Reduce stress and sensory overload

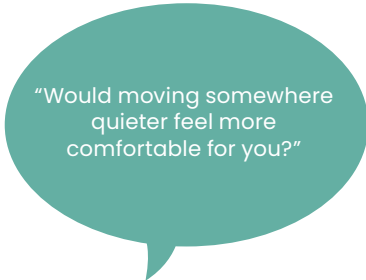
Limit time in busy clinical environments.

Adjust clinical space to better meet sensory needs - reduce noise, bright lights or crowded waiting areas.

Offer quieter spaces if available.

Provide breaks and calming strategies, e.g. using iPad or headphones and other sensory supports.

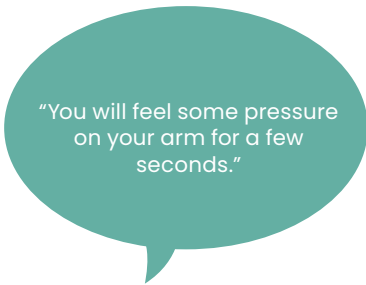
Offer breaks if the person appears overwhelmed.



"Would moving somewhere quieter feel more comfortable for you?"

Build trust and predictability

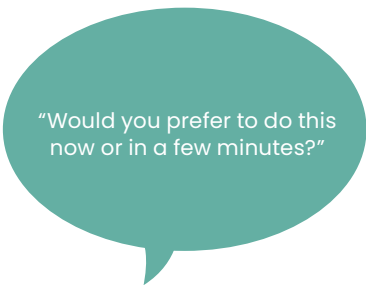
- Allow time to get to know the person.
- Foster mutual respect to build relationships and trust.
- Explain procedures step by step.
- Use social stories, visuals or photos.
- Demonstrate equipment before use.
- Tell the person what sensations they might experience.
- Have the same staff members work with the person when possible.
- Clearly explain the role of each clinician.



"You will feel some pressure on your arm for a few seconds."

Support choice

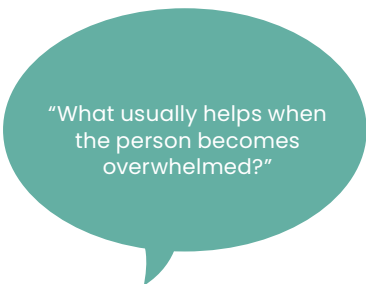
- Explain health information in detail.
- Regularly check understanding and consent.
- Offer meaningful choices where possible, e.g. choosing the arm for blood pressure measurement.
- Break bigger decisions into smaller steps.
- Ask the person if they would like their support people involved or present.
- Check in with the person if it is okay to ask the support person a question about them.



"Would you prefer to do this now or in a few minutes?"

Work together with supporters

- With consent, involve the person's family, supporters and clinicians.
- Ask about communication needs, behaviour triggers and calming strategies.
- Check whether the person has a behaviour support plan.



"What usually helps when the person becomes overwhelmed?"

Empower the person and support independence

- Create a safe environment by empowering people with information, choice and control.
- Use Easy Read or other accessible communication tools.
- Create a safe space for people to express themselves and allow extra time for processing and responses.
- Speak to the person directly and listen actively.
- Check understanding throughout the interaction.
- Use assistive technology if needed, to enhance communication and enable independence.

? Check – Is my approach reducing distress?

Does the person have a behaviour support plan?

Does the person seem overwhelmed, anxious or unsafe?

Is the environment too noisy, bright or busy for the person?

Have I checked for pain, discomfort or unmet health needs?

Have I adjusted my communication and approach?

Have I offered enough time, choice and support?

Have I checked in with the person's support network, with consent?

Are there other services required to ensure appropriate support?

Inclusive practice tips



Do check for underlying causes.

Don't focus only on the behaviour conduct a medical assessment to investigate if the person has underlying health conditions that could be causing the behaviour.



Don't assume behaviour is caused by disability.

Behaviours of concern may communicate distress, discomfort or unmet needs, rather than something that needs to be controlled or fixed. Consider whether the person may be experiencing distress, pain, fear, confusion or unmet needs.



Do check if a person has a behaviour support plan.

The person's behaviour support plan will provide important information about triggers, calming strategies, communication preferences, positive behaviour support.



Don't use medication for control.

Person-centred care supports the person's wellbeing, comfort and autonomy. Get clear on the purpose of the use of medication by asking the person and, where appropriate, their family or supporter.



Do use positive behaviour support and trauma-informed approaches.

Don't use restrictive practices as a first response. Restrictive practices should always be used as a last resort and be in proportion to the severity of the behaviour. Practices must comply with the NDIS Quality and Safeguarding Framework, and the NDIS Restrictive Practices and Behaviour Support Rules 2018.

Reflect and improve practice

What did you learn that you didn't already know?

- What helped the person feel safe and supported during this interaction?

- What strategies helped reduce distress or support communication?

- What challenges came up, and how did I respond?

- What could I try differently next time?

- Is there anything important that should be recorded or shared to support future care?

★ Learn more

Scan the QR code below to learn more.



Behaviour support plans.



Medicine for health not control video.

 www.cid.org.au/resource/behaviour-as-communication

Council for Intellectual Disability made this guide. CID for short. You need to ask CID if you want to use pictures from this document. You can contact CID at health@cid.org.au

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