Functional Communication Training

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Statement of the Problem
Many young children with a diagnosis of a developmental delay or an autism spectrum disorder exhibit problem behaviours such as self-injury, tantrums and aggression. These behaviours may have a detrimental impact on opportunities to play, learn and build relationships. It is especially challenging for caregivers if the behaviours compromise the safety of the child or others in the setting. Often the response results in the child’s exclusion from mainstream education and limited participation in other social experiences.

Proposed Solution/ Intervention
Functional communication training (FCT) is an intervention approach to reduce problem behaviours by teaching the child a more socially appropriate communicative response. The intervention begins with a functional assessment to identify what environmental factors may be maintaining the behaviour. Many challenging behaviours function to allow escape from people or activities or to get attention. The alternative response taught to achieve the same function may be a spoken word or phrase but can also be a sign, gesture, graphic symbol or use of a vocal output communication device.

The theoretical rationale – how does it work?
FCT is based on the premise that problem behaviours can function as a form of communication and are reinforced through though the actions of other people. If one is able to identify the function of the behaviour it is possible to teach a more appropriate response which matches that function.

When faced with two alternative responses individuals choose the one that is more efficient and brings the more satisfying consequence. It is therefore important that the alternative response requires less effort than the problem behaviour. It should also be continually reinforced in the early stages of the intervention to ensure that problem behaviour is no longer effective. It is recommended that a skilled practitioner initiates the intervention but both the assessment and implementation can be carried out by caregivers such as parents or teachers.

What does the research say? What is the evidence for its efficacy?
Research on FCT dates back to 1985. It has been repeatedly found to reduce problem behaviours irrespective of topography, across varying diagnoses, regardless of gender or age. There is often a rapid reduction in the problem behaviour which remains low over time. There has also been some interesting work conducted on inviting children to choose their preferred mode of communication and concomitant reinforcer. Research continues to explore ways of facilitating generalization across people, settings and tasks.

Conclusions
FCT has a sound research evidence base and should be recommended as a primary intervention in a child’s individual behaviour support plan.

Your verdict
Recommended

Key references may be found at:
http://www.musec.mq.edu.au/community_outreach/musec_briefings/