WHAT ARE THE SIMILARITIES AND DIFFERENCES BETWEEN CPS & THE LOW AROUSAL APPROACH?

WHAT IS CPS?
Collaborative & Proactive Solutions (CPS) focuses on the problems that are causing concerning behaviors and solving them collaboratively and proactively (rather than on concerning behaviors and de-escalating or modifying them). As such, it has been said that CPS focuses on the root cause of behavior problems. The problem solving is collaborative (meaning, the child is fully involved in the process) and proactive (meaning, well before a child starts to become escalated). The model views concerning behavior as a child’s “frustration response,” and helps caregivers move away from motivational explanations for such behavior and toward understanding that a variety of skills are implicated when students are having difficulty handling problems and frustrations. The CPS model has been implemented in schools and treatment facilities for nearly three decades.

WHAT IS THE LOW AROUSAL APPROACH?
The Low Arousal approach is described as a person-centered, non-confrontational method of managing behavior. It prioritizes behavior management techniques aimed at reducing stress, fear, and frustration to prevent aggression and crisis situations. Caregivers are trained to identify signs of increasing anxiety and intervene to de-escalate situations before problematic behaviors occur. This approach emphasizes understanding behavior from a different perspective rather than exerting control or assigning blame. Key components include decreasing demands, avoiding triggers, discouraging non-verbal behaviors that may lead to conflict, and challenging caregiver beliefs about managing challenging behaviors.

WHAT IS THE RESEARCH BASE FOR THE TWO MODELS?
The Low Arousal approach is not recognized as evidence-based but is supported by some research conducted 20-30 years ago. A thorough literature review did not identify more recent studies. This model offered a different approach (trauma informed, patient centered care) in a time when behavioral and punitive approaches were by and large the mainstream strategy for working with neurodivergent individuals with concerning behavior. The few studies conducted on the model are more theoretical in nature, with a few quasi-experimental and case studies indicating that Low Arousal approach training increased staff confidence in working with individuals with challenging behaviors.

The CPS model is recognized as evidence-based; the model has been studied primarily in kids with significant behavioral challenges across a wide variety of settings (families, schools, inpatient psychiatric units, and residential and juvenile detention facilities). The evidence base for CPS documents that the model is highly effective at improving kids’ behavior (on a par with behavioral interventions), improving adult-child relationships, and dramatically reducing discipline referrals, suspensions, restraints, and seclusions.

CAN CPS AND LOW AROUSAL BE IMPLEMENTED TOGETHER?
Both approaches seek to reduce or eliminate the use of punitive, exclusionary disciplinary practices. The CPS model focuses on identifying and solving problems proactively so that kids do not become escalated; Low Arousal seeks to remove factors that may cause kids to become escalated. The core elements of the Low Arousal approach resemble the “Plan C” strategy of the CPS model, so there may not be a need to combine the two models.