BEHIND BEHAVIOR:  
THE CHALLENGE OF APPRECIATING CHILD & YOUTH NEEDS  
Marty Beyer, Ph.D.

Staff in wraparound programs, foster care, juvenile justice and children’s mental health struggle to achieve strengths-driven, needs-based practice. A major part of this challenge is the tendency of well-intentioned adults to disregard the child’s underlying needs. Achieving child-focused, family-centered practice means not only valuing the family’s involvement in decision-making, but listening to the voice of older children and teenagers regarding their needs.

Why is it so difficult to focus on the underlying needs of children and teenagers?

→ THEIR BEHAVIORS ARE VISIBLE, THEIR NEEDS ARE NOT

Children and teens do not tell us what they need. They behave. We have to look behind their behavior to understand their needs. Most behaviors can be driven by different needs, so to name a behavior does not describe the unique needs driving it. Services to address behaviors are often ineffective because the services are not designed to meet the need behind the behavior for that particular child or teenager.

→ WE WANT THEIR BEHAVIORS TO CHANGE

The behaviors of children and teenagers can be harmful to themselves and others and difficult to manage at home, in school, in community activities, and in group care. These behaviors are usually what brought the child and family to our attention. If the child’s behaviors do not change, the child, family and community may be at risk and the child’s school and living placement may be jeopardized. Addressing the needs behind the child’s or youth’s behaviors can be the most effective way to ensure safety and support their feeling successful.

→ “UNDERLYING NEEDS” SOUNDS CLINICAL

What parents do all the time is ask themselves, “What’s making my child do that?” For example, the child suddenly starts calling him/herself “stupid.” The parent wants to know whether someone is picking on their child and calling him/her stupid or the new work in school is making the child feel unable to do it. Meeting the need to not be called stupid would require different action by the parent than meeting the need to feel capable of doing fractions. Many underlying needs are more difficult to decipher. For example, if a therapist thought a child’s problems with emotional regulation was driven by high anxiety from past trauma as opposed to a feeling of rejection and desire for more time with a parent, that would be helpful for family members and others in deciding how to meet the child’s needs.

→ THEIR BEHAVIORS ARE EASY FOR EVERYONE TO TALK ABOUT, BUT “UNDERLYING NEEDS” IS NOT IN ANYONE’S VOCABULARLY

Therapists, pediatricians, psychiatrists, case workers, probation officers, teachers seldom talk with parents, foster parents and other caregivers about a child’s or adolescent’s underlying needs. “Not be called stupid,” “To be able to do fractions,” “To be less worried,” or “Not to feel rejected” from the paragraph above all sound awkward and not typical of team discussions. For the teacher or therapist, these needs may sound too informal.

→ WE ARE ACCUSTOMED TO INTERVENTIONS BASED ON BEHAVIORS

There are anger management groups, bullying interventions, runaway programs, eating disorder programs, juvenile sex offender programs, etc., despite the reality that the individual needs of the children within these behavioral categories are very diverse. Similar decision-making based on diagnosis can also overlook the child’s unique underlying needs.

→ WHEN WE USE THE TERM “NEEDS,” OFTEN THESE ARE FAMILY NEEDS

Usually in team and family meetings, the family’s needs are the focus. Recognizing the family’s needs has been central to the evolution of a family-engaging planning process. Usually there are
family needs that must be met so the children’s needs can be addressed; sometimes these are concrete needs, such as the utilities being turned on in the home, but they can also include the family’s request for guidance in how to respond to the child. However, meeting the family’s needs is not the primary desired outcome—the family has come to our attention because of the child’s needs. For example, if an infant is referred for neglect because of weight loss, the family may need access to free formula, but the most important outcome is that the family understand the child’s need to be within the normal range of weight and height. This is a significant safety need that the family may dismiss because of poverty or a belief that some children are poor eaters and stay skinny.

Transportation to WIC to get milk could be arranged for the family, but if they do not understand their child’s need, the child might not gain weight. As another example, the young person may be getting into trouble with friends at night and the team meeting may focus on helping the single parent get a job during the day rather than their night job. This intervention could be beneficial, but whether or not the parent changes their schedule, what is essential is that the parent and teenager agree that the teenager needs supervision and to not be out of their home after curfew because of the risks. The services that would be designed to meet these teen needs might include active guidance for the parent in providing supervision, assistance in family discussions where the teen and parent can arrive at mutually acceptable rules, the teen’s involvement in new, supervised activities, more participation by the non-custodial parent, and/or one-on-one coaching for the teenager in thinking before acting. The individuals providing these supports would require different training and supervision than someone helping the parent arrange different work hours. Furthermore, the process of engaging the teenager and parent in redesigning family life to be more protective of the teenager will actively involve the young person, while the parent’s arranging a better job schedule may be irrelevant to the young person or may irritate him/her when the parent is suddenly at home at 6 PM every night.

> WHEN WE USE THE TERM “NEEDS,” OFTEN THESE ARE SERVICES DISGUISED AS NEEDS

Statements such as “He needs structure” or “She needs counseling” are services, not needs. A much stronger plan gets developed when the young person’s strengths and needs are identified first and then services are tailored by asking, “What would it take to meet this need and build on this strength?” For example, if the young person needs to see others as not hostile and learn to react less aggressively, a service must be designed to coach him/her to think differently. Once we get clear on this need, individual therapy or anger management group are unlikely to meet it and regular one-on-one guidance for the young person at school, home and in afterschool activities will be necessary. If we had started with services disguised as needs, such as “He needs anger management group” or “She needs therapy,” the services likely would have been ineffective because they would not meet the underlying need (which had not been defined despite the use of the word “needs”). Sometimes “needs” is used to state adult requirements. For example, “She needs to be respectful to adults” is probably not a motivation for teenagers. She may respond, “The staff are mean or curse at me, then they punish me if I have an attitude. They show no respect to me, so why should I be respectful to them?” She may state her need as “To be treated respectfully” and might, with encouragement define respect as not being cursed, not being yelled at, not being pushed, not being called names. Adults meeting this need may be the key to a change in objectionable behavior by the teenager.

**WHAT IS AN UNDERLYING NEED?**

A need is what drives a behavior. A need is what makes a behavior functional for the child or adolescent (although the behavior itself can be undesirable and harmful). Any behavior could be driven by a variety of needs. For example, a child who is aggressive may need to: have people not get physically too close to him/her, be treated by others in non-hurtful or non-aggressive ways, be reassured, know in advance when there will be a change in activity, and/or be able to soothe him/herself. If we have a standard response to aggression, such as being isolated, that might meet one child’s need to have everyone at a distance, but it would make matters worse for the child who needs to learn self-soothing or the child who experiences isolation as an unfair punishment. In another example, the teenager who runs away may need to: get away from sexual and/or emotional abuse, learn other ways to respond when there is conflict, have a boy/girlfriend who does not encourage the teenager to stay with him/her, participate in decisions about curfew, and/or be accepted with his/her beliefs, appearance, sexual orientation and gender identity. A foster home
might protect the abused youth who was escaping home, but a group home with imposed rules, homophobic residents and/or a high degree of conflict would not meet the other possible needs of runaway youth. Well-intentioned people on a treatment team or in a courtroom might propose these interventions, not realizing that because a child’s or teenager’s needs had not been identified, their plan would not meet the underlying needs and the aggressive or runaway behavior would likely continue. Aggression is harmful and running away can be dangerous, so we have to respond. Before deciding how to respond, we must look behind the behavior to see what needs it is serving to meet. Each of the possible needs listed above could be met by other behavior that is not harmful or dangerous, and services and supports could be designed to help the child or youth learn them.

Sometimes we have different views of a child’s needs depending on training or experience. Sometimes we don’t know what is driving a behavior. We may have hunches, such as one or two of the possible needs above. The older the child, the more we can learn from them about what they are getting out of the behavior. Sometimes it is hard to decipher what the youth tells us about a behavior. For example, youth who cut themselves may tell us they are not suicidal, that cutting is a real feeling. We could start with “He/she needs to feel without bleeding;” our hunch may be that the youth is actually numbing bad feelings from trauma but he/she may not endorse that view. As he/she progresses, the need statement may change to “needs to be able to face feelings from the past” or some other more refined understanding of his/her needs.

**How can the teenager’s voice be part of identifying his/her underlying needs?**

If a young person does not want what adults think he/she needs, little will change with his/her family, school and peer adjustment. Caring professionals and family may believe the young person would function better by staying in school, selecting prosocial friends, and living in a particular place, but the young person may not want any of these. Most young people have limited capacity--due to immature thinking and gradually forming identity and moral reasoning--to take consistent steps toward achieving their goals without the support of others, which is why it is essential to listen to the young person and reach agreement about his/her needs.

Hearing the young person may require changes in team meetings. Just having the pre-teen or teenager present at the meeting is not empowering. Effective child-focused, family-centered practice means that the process of identifying with the young person his/her underlying needs is a primary part of the meeting. Whether the meeting is renamed Youth Family Team Meeting or continues to be called something else may not matter, but the facilitator must be skilled at helping the young person speak up and helping other meeting participants listen to the youth’s voice.

Achieving genuine agreement with the young person about even one need is crucial. A good starting point is to ask what the young person wants, trying to get as specific as possible. For example, a teenage girl proposed as a need “If I can’t get what I want, to accept that or wait and earn it or say again what I want” and her caseworker added “but not run away.” This is an important safety and developmental need that she was committed to. Special support for whomever she lives with must be described in detail in order to meet this need.

Working with the young person before and at the YFTM to articulate each need is necessary. For example, a teenage boy said “I want to play ball for the NBA.” He is a young person with an untreated learning disability who has been truant because he is embarrassed that he can’t keep up in regular class. For him to play high school basketball would require a school placement where he does not feel stupid so he will attend regularly. An underlying need driving his hanging out with other kids who are alienated from school is needing acceptance because he has been picked on for being a “retard.” Because he is a teenager, he does not see the risks of his associates’ dangerous behaviors and he cannot appreciate that he is making life choices that are leading him away from success in sports. We might respond to his goal by saying he “needs to be successful in high school basketball” and he “needs to not feel stupid in school.” When we later ask the question, “What would it take to meet these needs?” we would identify staff who could arrange individualized learning disabilities instruction that he wants to attend and help him start working with the high school coach and get on a daily athletic schedule.

**How can we avoid “needs” being deficits?**

The term “needs” was specifically chosen not to be a deficit, but to understand why a youth behaves in a certain way. Thus, a young person is not bad for staying out of school but is avoiding a situation where he was harassed everyday. He needs “to not be picked on or feel scared in school” is
not a deficit statement and it leads to designing supports and services to make sure he feels safe, rather than ordering him to stop skipping school because it is bad. Sometimes the young person responds better to this discussion of needs if asked what he/she wants, which may get at aspirations as well as needs. Without putting the teen in the position of defending bad behavior, we can ask, “What did you want when you did this?” For example, a young person may hang out on the street corner and insist he is not a gangster or addict, but wants to be around the friends he grew up with. To understand what is behind his behavior, we have to listen to him: is he loyal and does not want to separate from old friends? are they providing marijuana and what does getting high do for him? is he selling drugs for/with them and what does he want money for and what other sources of money does he have? does he feel they like him, and he wants to be liked? does he feel liked elsewhere and why? Another possibility might be to ask “What “motivates” this behavior?” This recognizes that the behavior alone tells us little about the young person, but is serving the young person (if she gets high to forget about sexual abuse, getting high is working for her—it is motivated; but she got arrested for getting high, so what could she do instead of getting high in order to deal with her awful memories about sexual abuse?). We see that to meet this need/want/motivation regarding her bad memories would not be met by drug treatment which is what most kids with drug charges would be given. Probably any of the three words can be presented by the facilitator as not a deficit or problem, but what is behind the behavior and together the team can determine how these needs/wants/motivations can be satisfied via alternative means that promote positive development.

Appreciating the child’s/teenager’s needs is easier after strengths have been recognized

Youth Family Team Meetings, with an agenda of strengths, youth needs, and services/supports to meet those needs and build on strengths, can be an effective approach to hearing the young person and empowering him/her to take charge of changing. Young people will defend against feeling even worse about themselves when their "bad behavior" is the focus of "treatment." If we begin the discussion instead with the strengths of the child/youth and family, they feel proud and more able to tackle their needs. Helping the adults at the meeting shift from the youth’s deficits to strengths and needs is tricky. Family members may be angry or burned out after tolerating their child’s difficult behavior for a long time. Professionals may describe the young person using mental health or education jargon that will not help him/her or the family understand what has to be addressed for the young person to change their behavior. It may also be a challenge to guide the adults to wait until strengths and needs have been identified before discussing services and supports. But the benefits of this strengths/needs-based approach are designing effective services to address what is behind the child’s or youth’s behaviors and building a team of the youth, family, community supports, and professionals who agree about how they can meet the youth’s needs.