The Incredible 5-Point Scale:
The Significantly Improved and Expanded Second Edition

Assisting students in understanding social interactions and controlling their emotional responses

Kari Dunn Buron and Mitzi Curtis
2 teachers from Minnesota

p. ; cm. + CD-ROM (4 3/4 in.)

LCCN: 2012942651
At head of title: Evidence-based practice.
Includes bibliographical references.
Includes CD-ROM of blank scales, small portable scales, and scale worksheets for easy duplication.

This book is dedicated to systemized thinkers everywhere ... we have written this for you.
Contents

Preface ................................................................................................................................. 1

Introduction ......................................................................................................................... 5

The “Tried and True” Scales From the First Edition ......................................................... 9

Scales for Young Children ................................................................................................. 55

Scales for Students With More Classic Forms of Autism ................................................. 65

More “Pretty Good” Scale Ideas ....................................................................................... 73

Sample Goals and Objectives Related to the Use of the 5-Point Scale ......................... 91

References ......................................................................................................................... 97
In this second edition of the bestselling *The Incredible 5-Point Scale* (Buron & Curtis, 2003), we have divided the book into six sections. The first section is a brief overview of how to use the 5-Point Scale, along with some stories about its use that we have gathered over the years. The second section includes the specifics of our original 14 scales and scenarios as a reminder for readers of the first book and as a background and introduction for newcomers to this incredible tool. The remainder of the book presents brand-new material, prompted by demands of practitioners across the country and abroad for scales that are applicable to younger students and those on the more severe end of the autism spectrum. Thus, the third section introduces scales specifically designed for younger children, whereas the fourth section addresses individuals with more classic forms of autism, including an expanded use of the Anxiety Curve model. The fifth section includes a variety of new scale ideas we have used successfully since the original book was printed. Finally, the sixth section is a list of goals and objectives related to the use of the scale that teachers have used on individualized education programs (IEPs). Finally, we have included a CD of blank scales, small portable scales, and scale worksheets for easy duplication.

**Some Background Information**

We introduced *The Incredible 5-Point Scale* in 2003 as a method of teaching social understanding to students with autism spectrum disorders (ASD) and similar challenges. Since that time, we have learned more about why the scale works and how to use scales effectively with diverse populations.

Despite the recent emergence of some exciting new social curricula, the idea of teaching social competence is just beginning to gain attention in teacher preparation programs. What we have learned in the past nine years is that individuals on the spectrum need to be directly taught information we had previously thought of as “common knowledge.” To paraphrase Daniel Goleman in *The Brain and Emotional Intelligence: New Insights* (2011), the range of what we think and do is limited to what we fail to notice ... Individuals with ASD seem to fail to notice that they are failing to notice, and this failure to notice shapes their thoughts and behaviors. A primary goal of the scale is to help them notice and functionally respond to their own and others’ social behavior.

The objective of the 5-Point Scale is to teach social and emotional information in a concrete, systematic, and non-judging way. Students who have poor skills in the areas of social thinking or emotional regulation often exhibit challenging behaviors, particularly when facing difficult social situations. In the scale, teachers and parents have a simple, yet effective way to teach social rules and expectations and, along with the individual with ASD,
The Incredible 5-Point Scale

problem-solve behavioral responses of others, troubleshoot past and future social scenarios, and create plans for self-management.

Simon Baron-Cohen’s empathizing-systemizing theory (Golan & Baron-Cohen, 2008) seems to support the idea of using a scale to teach social and emotional concepts. The theory suggests that individuals on the autism spectrum have a strong desire to analyze information to determine what causes what, and implies that by using a system to teach difficult information, we are making use of the person’s learning strengths.

Using the 5-Point Scale is a great way for all caregivers to communicate more effectively. Once a scale is developed for voice volume, frustration level, or any other issue, situations faced at home and at school can be plugged into the system so that everyone begins to speak the same language. For example, if a voice-level scale is developed at school, parents can use the same defined voice levels to communicate with their child at home. A #4 might be an outside voice, whether it is at home or at school. A #2 voice may be a library voice at school, but can also be a voice to use at home when the baby is napping. Grandma and Grandpa can then post the scale in their home to communicate when and where different voice volumes should be used.

Individuals who exhibit challenging behaviors are most likely lacking the skills needed to negotiate social interactions effectively. That is, if they find themselves failing over and over again at social interactions, the issue inevitably gets personal. Thus, it is likely that a person who is not very good at something that everyone else seems to do seamlessly will develop some pretty defensive feelings about the issue. For this reason, it is important to keep “judging words” out of the scales. For example, avoid the use of “good” and “bad” or “right” and “wrong.” Also keep out frustrating words like “consequences” or “inappropriate.”

If you are addressing issues that are against the law, your scale might look like this:

<table>
<thead>
<tr>
<th>Rating</th>
<th>What This Looks Like</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>These behaviors are against the law, like hitting or destroying property. Even if you don’t agree with them, they are still against the law.</td>
</tr>
<tr>
<td>4</td>
<td>These behaviors might be scary but not illegal, like swearing at someone or using other mean words. These behaviors can get you fired from a job or cause other people to avoid you.</td>
</tr>
<tr>
<td>3</td>
<td>These behaviors might create problems at school, at work, or at home, but they are not scary. Examples include standing too close to someone, talking too loudly, and forgetting to share.</td>
</tr>
<tr>
<td>2</td>
<td>These behaviors might not create big problems. They might include things like ignoring other people. These behaviors probably won’t get you into trouble, but they are usually not helpful if you are trying to create friendships and relationships.</td>
</tr>
<tr>
<td>1</td>
<td>These behaviors might actually help cause other people to feel good about you. These are relationship actions.</td>
</tr>
</tbody>
</table>

* This is similar to what Temple Grandin calls “social sins” (http://www.iidc.indiana.edu/index.php?pageid=600).
In the above example, issues are dealt with in a very direct and honest way, but typical judging words are avoided. Simply put, just address the facts and be compassionately honest. Here is another example of addressing an issue directly but without judgment:

**Meeting Girls**

<table>
<thead>
<tr>
<th>Rating</th>
<th>What This Looks Like</th>
<th>What Is the Girl Likely to Think?</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>Telling a girl she has a good body</td>
<td>This is not really welcomed by most girls. It might sound creepy if the girl doesn’t know you well and might even seem aggressive.</td>
</tr>
<tr>
<td>4</td>
<td>Singing a song to a girl across a crowded room</td>
<td>Even though this is not harmful, it might seem strange, and the girl might end up feeling embarrassed.</td>
</tr>
<tr>
<td>3</td>
<td>Fluttering your eye lashes at a girl</td>
<td>This is confusing. The girl will probably not know what to think.</td>
</tr>
<tr>
<td>2</td>
<td>Joining a club or theater group after school specifically to meet girls</td>
<td>This is OK, but remember that you might not meet a girl you like or who likes you. Be patient</td>
</tr>
<tr>
<td>1</td>
<td>Sitting next to a girl in class and introducing yourself</td>
<td>This is good. Keep it simple.</td>
</tr>
</tbody>
</table>

Another good way to increase a person's acceptance of a scale, and motivation to use the scale, is to co-create the scale. We have found that this can even be done with very young children and children who have very limited verbal skills. One way to get input from individuals who are unable or reluctant to speak is to use the activity called *A 5 Could Make Me Lose Control* (Buron, 2007). This activity allows the person to problem-solve nonverbally by placing word or picture cards of various environments or social situations, such as Getting Into an Argument, into pockets listed 1-5. The situations placed in pocket #1 do not bother her at all; situations in pocket #2 might make her feel uneasy; situations in pocket #3 might make her feel nervous; situations in pocket #4 might make her angry; and, finally, situations in pocket #5 might make her lose control or even explode.

Co-created scales for a person who is higher functioning might take the form of a worksheet, such as the example on the CD included with this book. This gives the person the opportunity to fill in how specific things might make him feel and strategies he will use to control those feelings. Such co-created scales can be used to design support plans by adding support to the environments that seem to cause problems.

Some teachers and parents have asked us if the scale needs to include five levels. Although there is nothing magical about the number 5, it does seem to be the easiest number to use. Trying to break every social concept or emotion into 10 parts, for example, seems too hard. Nevertheless, we have encountered many students who have created their own scales, and a few of them have insisted on including 3, 7, 8, and 10 points. We even met a young man who created a 15-point scale.
Keep in mind that the idea is to help the person understand social and emotional concepts by breaking the concept into parts. If he grasps the system and wants to add levels, this might be a sign that he is not only embracing the system but enjoying the activity by playing with it. If that is the case, by all means, support him. We want him to embrace the system, so you don’t want to hinder that goal by insisting on the number 5. We are trying to teach social flexibility after all.

Perhaps at its best, the scale can teach self-management skills. In the book *When My Worries Get Too Big!* (Buron, 2006), the scale is used to teach young children to recognize when their bodies are stressed and to give them ideas for managing their emotions. The original “check-in” scale has been expanded over the years, and we have found that it can be used effectively to teach emotional regulation. Students who exhibit high levels of anxiety can begin to “check in” on a regular basis throughout the day to stay on top of big emotions. If they find that they are experiencing even a little stress, then relaxation routines can be implemented to avoid a loss of control.

**Sample Check-in Scale**

<table>
<thead>
<tr>
<th>Rating</th>
<th>How It Feels and What I Can Do</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td>OUT OF CONTROL! I need to spend time in a safe place to calm my nerves. Listen to Adele on headphones.</td>
</tr>
<tr>
<td>4</td>
<td>Very upset or angry. I will stay in the resource room for a while and work through my nervous feelings with Mrs. Wilson.</td>
</tr>
<tr>
<td>3</td>
<td>Not very good. I am not feeling well today. I did not get much sleep or maybe I had a bad bus ride. I need to do some relaxation exercises to help.</td>
</tr>
<tr>
<td>2</td>
<td>OK. I can go back to class and continue my day. I can practice my positive self-talk to keep me calm.</td>
</tr>
<tr>
<td>1</td>
<td>Good day. I am having a good day. I feel calm and focused. Good to go to class. 😊</td>
</tr>
</tbody>
</table>

Daniel Goleman (2011) explains emotional intelligence as the interplay between self-awareness, social awareness, self-management, and relationship management. In this edition of *The Incredible 5-Point Scale*, we offer examples of how the scale has been used to address each of these four cognitive areas.

In closing, thank you to everyone who used the scale and took the time to let us know. Your stories have been inspiring, and we hope they are reflected in this edition.

Enjoy!

Kari and Mitzi
Using the Scale

It is important to remember that a scale is a teaching tool. It is not simply another behavior management strategy. Nor is it a miracle that you can just post on the wall and hope things will change.

We recommend following these steps when creating a scale, preferably working together with the person for whom the scale is designed:

1. Determine the problem. What is the person doing that you wish he wasn’t? Or what is he not doing that you wish he was? What is the social situation he seems to be confused by?
2. Identify the skill or social concept the person needs to be taught in order to do this better.
3. Break that concept into five parts. Make #1 the smallest and #5 the biggest (avoid the terms “good” and “bad”).
4. Use a story or a simple memo, even a video, to help the person understand what the scale is all about and how to use it.
5. Review the scale with the person prior to predictably difficult times or when he has to be in predictably difficult environments.
6. Use the scale in real situations by prompting the person using a small portable scale.
7. Create a portable scale for the person to carry as a reminder.

Here are some examples of concepts or situations where a scale has been used to successfully teach individuals ranging in age and severity of challenges:

- personal distance
- voice volume
- what is fair
- tone of voice
- speed in the hallway
- fear
- worrying
- asking for help
- emotions
- distractions
- who is a friend
- sexual behavior
- self-advocacy
- energy level
- friendships
- losing and winning
- what is funny
- perspective taking
- is it a problem?
- competition
- problems
- touching
- tolerance for others
- anger
- how other people think
- words we use
- changes
- breaking the law
- classroom rules
- bus rides
- sadness
- manners
- looking at other people
The Incredible 5-Point Scale

While self-regulation is not addressed in the common core standards, it is an essential skill. Students with self-regulation skills are ready to learn information addressed in the standards. Children and adolescents with regulation challenges are not ready to learn. They and their teachers spend time addressing the behaviors resulting from self-regulation problems. The Incredible 5-Point Scale, a visual self-management support, helps individuals learn self-regulation skills so that they are ready to learn the skills that will lead to school and life success.

The Ultimate Goal

A primary goal of the scale is to teach social and emotional information that often eludes persons on the autism spectrum. Initially, the caregiver might need to gather information about the problem and create a scale. This is often the case for very young children or those who are nonverbal. As soon as possible, prompt the person, regardless of age or ability, to interact with the scale. This could include checking in regarding anxiety levels, or simply pointing to a #2 on a voice scale and modeling a whisper voice. This can lead to another goal of the scale, teaching self-management.

Although a story, memo, or video is often used to introduce the use of a scale, after the system has been learned, scales can be developed as a way of “debriefing” after an unexpected problem. Once learned, a scale can even be used “in the moment” to clarify information for the person in a functional, nonthreatening, and nonverbal way.

After one scale has been used successfully, you can use other scales in the same way. For example, once you have made a worries scale, if the person has difficulty with voice volume, you can show her how to use the scale for voice volume. The scale then becomes a predictable system for teaching and learning difficult concepts.

Scale Stories That Make Us Feel Good

Over the past nine years we have had many fun experiences with the scale. Also, others have written to us to share their stories. The following are just a few examples. We hope they make you feel good, too.

We’ll start …

A memorable day for me was when I was providing one-to-one instruction to a fourth-grade boy in math. I was sitting next to him, but that day I was up and down a lot, distracted by knocks at the door and staff asking me questions. The student finally said, “Ms. Curtis, you have way too much energy. You are a 5!” I agreed, and promptly got a therapy ball to sit on. – Mitzi

I was working at a local elementary school when the morning announcements came on over the loud speaker. The principal began discussing the problem of roughhousing on the bus. The student I was working with looked at me, indicating the voice from the speaker, and said, “That guy is at a 4.” – Kari
Now you …

I have a great story about a highly verbal four-year-old who knew the scale well. One day when I was in her room, the teacher asked me to help her with a circle activity, and I happened to say, “Well, I will try but it might be hard.” Then my student called out, “Don’t worry, Mary Beth. It might feel like a 4, but it is only a 2.”

– Mary Beth Solheim, a teacher from Minnetonka, Minnesota

When my son was in the ninth grade, we sent him to a Bible camp with limited support. He called home the evening of the fifth day of camp and explained that he had ripped up his scale and thrown it at a counselor. I asked him to tell me what had upset him, but he had little to offer. However, when I asked where he was on his 5-Point Scale, he said “10.” I directed him to pack his bag, let the counselor know I was coming, and stay put in his cabin until I got there (he can get a bit aggressive when really agitated or scared). When I arrived, I found out that for the entire time at camp, they had not been in bed before 1:30 a.m., had been out late playing night games and my son had only showered once and brushed his teeth a few times. He had no words to share this with me but was able to communicate through the scale.

– Jody Van Ness, a mom from Minnesota

The 5-Point Scale really helps by being able to say, “I’m at a 2, almost a 3,” etc., since I am not always able to communicate how I feel, especially during problem situations. So your scale simply gives me a voice, in a simple form.

– Chloe Rothschild, a 19-year-old from Toledo, Ohio

I was observing a kindergarten class when the teacher stood up in the front of the class and said, “Let’s hear Scooby Doo at a 4!” The children yelled, “Scooby Doo!” in loud voices. The teacher then said, “Now let’s do Scooby Doo at a 2.” The children responded with, “Scooby Doo,” using soft voices. The teacher said, “Yes, that’s what I need to hear, Scooby Doo at a 2.”

– Joyce Santo, a teacher from Roseville, Minnesota

I am a special education teacher who has used the 5-Point Scale for many different things with my students. However, the biggest gift the scale has given me is the ability to help my sister, Amy, who has been suffering with complex posttraumatic stress disorder, dissociative disorder, depersonalization disorder, anxiety, and bipolar disorder. We were able to create a 5-Point Scale that gave her a simple way to let us know what she needed, including rushing her to the hospital once. All of the key people in her life carry her scale, and when she text messages us a number, we know what she is feeling and what she needs us to do. This was the first time we were able to understand what was happening with her. It was the first time we all felt relief because, finally, she wasn’t afraid to tell us a number, and we weren’t left wondering how to help.

– Nikki Sprague and Amy Sprague, two sisters from Ashland, Wisconsin
### Amy's Scale

<table>
<thead>
<tr>
<th>Rating</th>
<th>What This Looks Like</th>
<th>Length</th>
</tr>
</thead>
<tbody>
<tr>
<td>5</td>
<td><strong>TAKE ME TO THE HOSPITAL ... NOW</strong>&lt;br&gt;• It is beyond my control – I might hurt myself.&lt;br&gt;• My thoughts are turning on me (I tell myself to find a safe place in my head, but then I feel unsafe there, too).&lt;br&gt;• High worry.&lt;br&gt;• Panicking fast – I feel like if I don’t hurry up and get somewhere, I’ll die.&lt;br&gt;&lt;br&gt;&lt;em&gt;There is a good chance you can’t tell until I’m at a 5.&lt;/em&gt;</td>
<td>(Varies)</td>
</tr>
<tr>
<td>4</td>
<td>• I’m very tired, but my mind is going so fast that I can’t sleep.&lt;br&gt;• I’m hyper vigilant – extremely. (So aware of everything around me; if I am able to go somewhere, I need to see that I have two exits to get out.)&lt;br&gt;• I am very easily triggered.&lt;br&gt;• I am starting to lose control over handling the triggers.&lt;br&gt;• I feel almost manic because my thoughts are so fast and scrambled, and I’m terrified that I’ll go to a 5.&lt;br&gt;&lt;br&gt;&lt;em&gt;At 4, I start to look for help, but I should’ve done so at a 2 or 3.&lt;/em&gt;</td>
<td>Comes on really fast</td>
</tr>
<tr>
<td>3</td>
<td>• I am quiet.&lt;br&gt;• I keep to myself.&lt;br&gt;• I am very tired.&lt;br&gt;• I sleep more, but I don’t get solid sleep.&lt;br&gt;&lt;br&gt;&lt;em&gt;I pretend everything is fine.&lt;/em&gt;</td>
<td>Longest</td>
</tr>
<tr>
<td>2</td>
<td>• Maybe a little quiet, because I am scared of something being off in my mind.&lt;br&gt;• Something feels off in my mind.&lt;br&gt;• I don’t get solid sleep.&lt;br&gt;• I still feel kind of like a 1, but there is something creeping in.&lt;br&gt;&lt;br&gt;&lt;em&gt;I don’t talk to others about it.&lt;/em&gt;</td>
<td>Can be long</td>
</tr>
<tr>
<td>1</td>
<td>• I look calm, OK.&lt;br&gt;• I am willing to talk.&lt;br&gt;• I am apprehensive about dissociating (always on the lookout).&lt;br&gt;&lt;br&gt;&lt;em&gt;Now is the time to ask me questions!&lt;/em&gt;</td>
<td>Short (currently can be 2 weeks)</td>
</tr>
</tbody>
</table>

### OK, I have another …

I was working with a young man using a scale to address how his actions made other people think about him. He finally got the idea and started giving me examples of things that he thought were a 1 or a 2 or a 3. He then said, “Asking someone if I can touch them on the boob, that’s a 4.”

– Kari