PS385: Targeted Topics in Applied Behavior Analysis

**Discussion Board Lecture: Unit 9 Media Lecture**

**Unit 9: The Behavior Change Program**

**Lecture:**

Welcome, students! You have covered many of the evidence-based strategies derived from the fundamental principles of applied behavior analysis (ABA) in this course. In Unit 9, all of the knowledge you have gained from your study in the previous units will converge in the design of a behavior intervention plan (BIP) in your Unit 9 Discussion Board and an ABA training program for teachers in your final major assignment in the course. You will see how the disparate components, i.e., the Indirect Assessment and Direct Descriptive Assessment in the Functional Behavior Assessment (FBA); the hypothesis of the function of the target behavior; the evidence-based strategies derived from the principles of ABA; and the ethical guidelines that govern our practice come together in the design of ethical, function-based BIPs.

Is your mind spinning just a little? You have, after all, covered a great many of the fundamental principles of ABA over the course of the last eight weeks. How do you make sense of it all; how are all these principles and strategies used to design a function-based BIP? Let’s break it down!

Before we even begin the FBA process, we must review our ethical responsibilities regarding all aspects of the behavior change program. Code 4.0, and its subsections, requires that we design behavior intervention plans that are consistent with behavior analytic principles. We must involve our clients – and their parents or guardians – in the planning and we must gain informed consent before beginning the assessment phase of intervention and before we begin implementation of the behavior intervention.

One of the hallmarks of ABA is that we design individualized, behavior intervention programs. This requires us to tailor our programs to the unique behaviors, environmental variables, assessment results, and goals of each client.

In order to truly gain informed consent, we must describe, in writing, the objectives of the intervention to the client, parents, or guardians before implementing the program. During this conversation, we must explain the conditions necessary for intervention effectiveness. If there are any conditions that could prevent the proper implementation of the intervention, the behavior analyst must work to eliminate those hindrances.

Behavior analysts must always work to avoid punishment procedures in their interventions. Whenever possible, we utilize reinforcement procedures to modify behaviors. If after all reinforcement approaches have been exhausted, the target behavior has not been appropriately modified, punishment procedures may be considered. But, reinforcement procedures would always be used to promote the acquisition and maintenance of alternative behaviors.

We must always use the least restrictive procedures possible and avoid using harmful reinforcers. Sometimes, the client’s most desired reinforcer is not the best for health and welfare. We must seek alternative reinforcers in such a case.

When entering into a clinician-client professional relationship, it is important to explain the criteria for discontinuing services upfront. We discontinue services when the agreed-upon goals are met or when it is otherwise in the best interest of the client.

Once the behavior analyst has reviewed the ethical responsibilities, it is time to methodically prepare for intervention. Let’s discuss this in terms of a potential client calling your office to set up services.

**The Phone Call:**

1. You are a private practitioner of ABA. A parent calls to request services for his 5-year-old son who is exhibiting behaviors at school that are interfering with his and his peers’ learning.

**Functional Behavior Assessment: Indirect Assessment Phase:**

2. You set up the first meeting. You explain to the parent that before meeting, you would like him to fill out your intake form, which – you explain, provides you with some basic information before the first meeting. It will answer questions regarding previous diagnoses; medications; previous therapies and the outcomes of those therapies; and some information regarding the main behaviors of concern. This process is the first step in the Indirect Assessment phase of the FBA.

Your first meeting will be a good time to explain the FBA process, answer any questions the parent(s) may have, and obtain informed consent before moving forward. In that conversation, you will discuss the limits of confidentiality, but will assure the parent(s) that all records will remain confidential unless there is a threat of harm to the client or to others.

Once you obtain informed consent, you are free to move forward with the interview. It is helpful to get the parent’s take on the target behavior. You ask the parent to describe the behavior in observable, measurable terms. You also ask about the circumstances surrounding the occurrence of the behavior – with a special focus on the triggers (antecedents) and consequences of the behavior. You also want to discover where and when the behavior usually occurs so you can schedule your next phase of the FBA – the Direct Descriptive Assessment – at the times and in the places in which you are most likely to observe the target behavior. Before moving on to the Direct Descriptive Assessment, you must consider whether other Indirect Assessment approaches would be helpful, such as rating scales, behavior checklists, and record reviews. All of the Indirect Assessment approaches provide some helpful information in understanding the variables connected with the target behavior.

**Functional Behavior Assessment: Direct Descriptive Phase**

You have gained a great deal of information regarding the behavior of concern, when and where it occurs most frequently, and what the behavior looks like. It is time to obtain permission to conduct the Direct Descriptive Assessment. In this case, let us say that the behavior occurs most frequently in the classroom. You will need to obtain the parent’s consent, and the teacher’s and principal’s consent, to record data on the behavior through direct observation in the classroom. Once you have that, you can set up observation sessions in which you will utilize the antecedent-behavior-consequence (A-B-C) data collection form.

First, you must operationally define the target behavior by describing it in terms of what the behavior looks like. This insures that anyone reading your description is able to accurately record each incidence of the behavior. The A-B-C data collection form allows you to gather information regarding the triggers for the behavior and the consequences resulting from the behavior. After, at minimum, three separate observation sessions, you will likely see patterns emerging in the data that allow you to hypothesize the probable function of the behavior. Is the probable function attainment or escape/avoidance? Identifying the function is the key to designing a function-based behavior intervention plan (BIP).

Let me pause to stress the importance of plugging your data into a line graph. In so doing, you are able to decipher the level, trend, and variability of the data at a glance, which will help you in making decisions regarding your intervention approaches and in determining the effectiveness of your intervention.

**Behavior Intervention Plan:**

Once you have your data and have hypothesized the probable function of the target behavior, it is time to design the individualized BIP. Will you use antecedent modifications to prevent the occurrence of the behavior? Perhaps a Differential Reinforcement approach would work. Through the understanding of the function the behavior serves for your client, his interests and preferred reinforcers, and the environmental constraints, you will be able to design an effective BIP! Once the BIP has been designed, you will review the results of the FBA with the parent(s) and explain your BIP and answer any questions the parent(s) may have. Once he has given informed consent to move forward with the implementation, you may begin.

Remember, throughout the intervention, you will continue to take data on the most important dimension of the behavior, i.e., frequency, duration, latency, or intensity/magnitude. Through the comparison of the intervention data with the baseline data, you can infer the effectiveness of your behavior intervention program.

Thank you for viewing your Unit 9 lecture!