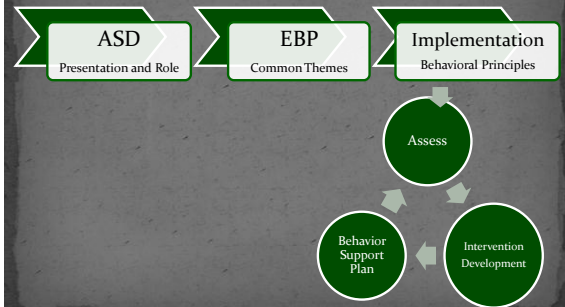




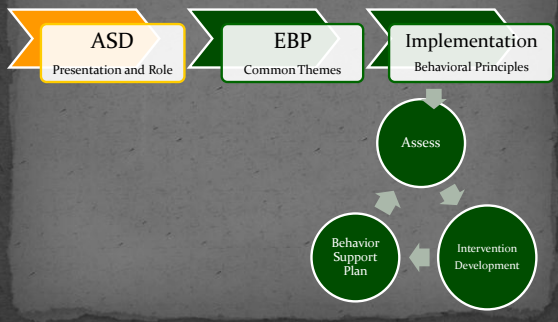
Evidence-Based Interventions Addressing Challenging Behaviors in Individuals with an Autism Spectrum Disorder

Scott D. Tomchek
Jocelyn W. Warren

Today's Process and Plan:



Today's Process and Plan:



ASD Developmental Presentation

Current Diagnosis - Autism

- DSM-IVR (APA, 2000)
 - 5 disorders under the PDD umbrella
- Qualitative impairments of communication
- Qualitative impairments of social skills
- Restricted, repetitive and stereotyped patterns of behavior, interests, and activities

Social Presentation:

- Lack of use of eye contact; looks through people
- Decreased awareness of others
- Lack of joint attention or shared enjoyment
- Unable to read facial expressions and not sensitive to the feelings of others
- Limited initiation and interaction with others
- Poor imitation

Communication Presentation:

- Delayed verbal language
- Impaired nonverbal communication (eye gaze, pointing, gestures)
- Communicative attempts limited to protesting and requesting only
- Echolalic speech
- Lack of imaginative, pretend and cooperative play
- Regression in language (~30%)
- Nonresponsive to language

Behavioral Presentation:

- Repetitive interests
- Routine-based behavior; "sameness"
- Failure to see the gestalt
- Difficulty with transitioning between task or activities
- Cognitive inflexibility and difficulty with generalization
- Motor stereotypes
- Unusual responding to sensory input

OT Practice, Areas Addressed

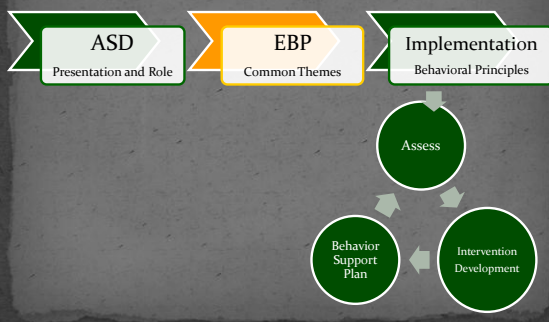
- Active engagement
- Activities of daily living
- Affect and emotion
- Regulation
- Arousal
- Attention
- Behavior
- Coordination
- Fine motor
- General development
- Gross motor development
- Habits and routines
- Joint attention
- Play
- Praxis
- Self-injurious behavior
- Sensory processing
- Social interaction
- Social skills
- Stereotypic behavior
- Transitions
- Unusual behaviors
- Visual-motor
- Visual perception

(Cowan, 2009; Watling, Deitz, Kanny, & McLaughlin, 1999)

Activity

- Fill out Presentation and Challenging Behavior Description on support plan form

Today's Process and Plan:



Survey of Interventions

Practice Guidelines

- Consensus Panel (Fillipek et al., 1999)
- American Academy of Child and Adolescent Psychiatry (Volkmar, Cook, Pomeroy, Realmuto, & Tangiary, 1999)
- American Academy of Neurology (Fillipek et al., 2000)
- National Research Council (2001)
- American Pediatric Association (Johnson et al., 2007)
- AOTA (Fomichek & Case-Smith, 2006)
- Right to Effective Behavioral Treatment (Vanhouten et al., 1988)



Survey of Interventions

General Treatment Strategies:

- Skill Based Approaches
 - PECS, Social Stories, Visual Supports, Fast ForWord, Facilitated Communication, Discrete Trial/Applied Behavioral Analysis Package, Verbal ABA, Pivotal Response Training Package, Milieu Therapy, Lindamood-Bell, Cognitive Behavioral Methods, Direct Instruction
- Schools and Comprehensive Programs
 - TEACCH, Denver Model, Baudhuin Preschool, Eden Programs, Giant Steps, Higashi School

General Treatment Strategies:

- Interpersonal Relationship
 - Holding Therapy, Gentle Teaching, DIR/Floor Time, Relational Development Intervention, Lego
- Physical Orientation
 - Sensory Integration, Auditory Integration Training, Swimming with the dolphins, Psychopharmacology, IVIG, Diets, Secretin, Chelation

NPDC on ASD: EBP are...

- Focused interventions that:
 - Produce specific behavioral/developmental outcomes for a child
 - Have been demonstrated as effective in applied research literature
 - Can be successfully implemented in educational settings

(Odom, Boyd, Hall, & Hume, 2009)

NPDC Criteria

- EBP if:
 - Two randomized or quasi-experimental design studies
 - Five single subject design studies by three different authors, OR
 - A combination of evidence such as one group and three single-subject studies

Evidence-Based Practices

- Computer-aided instruction
- Differential reinforcement
- Discrete trial training
- Extinction
- Functional behavior assessment
- Functional communication training
- Naturalistic interventions
- Parent-implemented intervention
- Peer-mediated instruction/intervention
- Picture Exchange Comm. System[®]
- Pivotal response training
- Prompting
- Reinforcement
- Response interruption/redirection
- Self-management
- Social narratives
- Social skills training groups
- Speech generating devices
- Stimulus control
- Structured work systems
- Task analysis
- Time delay
- Video modeling
- Visual supports

(National Professional Development Center on Autism Spectrum Disorders, 2010)

EBP	Cognitive	Behavior	Comm.	Play	Social	Transition
Computer Assisted Instruction						
Differential Reinforcement						
Discrete Trial Training (DTT)						
Extinction						
Functional Behavior Assessment						
Functional Comm. Training						
Naturalistic						
Parent Implemented						
Peer Mediated						
PECS [®]						
Pivotal Response Training (PRT)						
Prompting						
Reinforcement						
Response Interruption/Redirection						
Self-management						
Social Narratives						
Social Skill Groups						
AAC (Speech generating)						
Stimulus Control						
Structured Work Systems						
Task Analysis						
Time Delay						
Video Modeling						
Visual Supports						

For evidenced base reviews including detailed explanation and implementation procedures visit:

<http://autismpdc.fpg.unc.edu/>

National Professional Development Center on Autism

Module: Functional Communication Training (FCT)
Implementation Checklist for Functional Communication Training (FCT)

Flanagan, E. (2008). Implementation checklist for functional communication training (FCT). Madison, WI: The National Professional Development Center on Autism Spectrum Disorders, Waiteham Center, University of Wisconsin.

Intention: The Implementation Checklist includes user steps in the process of implementing FCT. Please complete all of the operational elements regarding the site and team, individualizing implementation, and implementation. It is intended for use by a practitioner or other team member who is implementing FCT. It is not intended to be used as a checklist for a practitioner or other team member. It is not intended to be used as a checklist for a practitioner or other team member. It is not intended to be used as a checklist for a practitioner or other team member. It is not intended to be used as a checklist for a practitioner or other team member.

Individuals Observed: _____
 Observer's Initials: _____

Skills below can be implemented by a practitioner, parent, or other team member

Step	1	2	3	4	5	6	7	8	9	10
Step 1: Identifying the Interfering Behavior										
Step 2: Completing a Functional Behavior Assessment (FBA)										

National Standards Project (NSP):

- Provide straightforward information to parents, educators, and service providers that can help them make treatment decisions
- Create an EBP guideline for ASD that address some of the limitations of previous guidelines
- Identify critical areas in which additional research should be conducted
- Promote evidence-based practice in the treatment of ASD

NSP Classifications:

Established	Emerging	Unestablished	Ineffective/Harmful
Several published, peer-reviewed studies <input type="checkbox"/> Scientific Merit Rating Scales scores of 3, 4, or 5 <input type="checkbox"/> Beneficial treatment effects reported for a specific target May be supplemented by studies with lower scores on the Scientific Merit Rating Scale.	Few2 published, peer-reviewed studies <input type="checkbox"/> Scientific Merit Rating Scale scores of 2 <input type="checkbox"/> Beneficial treatment effects reported for one dependent measure for a specific target These may be supplemented by studies with higher or lower scores on the Scientific Merit Rating Scale.	May or may not be based on research: <input type="checkbox"/> Beneficial treatment effects reported based on very poorly controlled studies (scores of 0 or 1 on the Scientific Merit Rating Scale) <input type="checkbox"/> Claims based on testimonials, unverified clinical observations, opinions, or speculation <input type="checkbox"/> Ineffective, unknown, or adverse treatment effects reported based on poorly controlled studies	Several published, peer-reviewed studies <input type="checkbox"/> Scientific Merit Rating Scales scores of 3 <input type="checkbox"/> No beneficial treatment effects reported for one dependent measure for a specific target (Ineffective) OR <input type="checkbox"/> Adverse treatment effects reported for one dependent measure for a specific target (Harmful) Note: Ineffective treatments are indicated with an "I" and Harmful treatments are indicated with an "H"

Established Interventions

Antecedent Package	Peer Training
Behavioral Package	Pivotal Response Treatments
Naturalistic Teaching Strategies	Schedules
Joint Attention Interventions	Self-management
Modeling	Story-based Interventions
Comprehensive Behavioral Interventions for Young Children	

Established by age:

0-2 Years	3-5 Years
Behavioral Package	Antecedent Package
CBTYC	Behavioral Package
Joint Attention	CBTYC
Naturalistic Teaching	Joint Attention
	Naturalistic Teaching
	Modeling
	Peer Training
	Pivotal-Response
	Schedules
	Self-management

Emerging Treatments

AAC Device	Music Therapy
CBT Package	Peer-mediated Instruction
Developmental Relationship-Based	PECS
Exercise	Scripting
Exposure Package	Sign Instruction
Imitation-based	Social-communication Intervention
Initiation Training	Social-skills Package
Language Training	Structured Teaching
Massage/Touch Therapy	Technology-based
Multi-component Package	Theory of Mind Training

Unestablished

Academic Instruction
Auditory Integration Training
Facilitated Communication
Gluten- and Casein-Free Diet
Sensory-Integrative Package
*other interventions to no studies would fall into this category

Evidence-Based Practice Reviews

- Recommended Practices:
 - ABA
 - Naturalistic (young children)
 - Parent training (social skill)
 - Peer training
 - Visual supports (comprehension, initiation, communication)

(Reichow & Volkmar, 2010)

Figure 1. Classification of the Behavioral and Developmental Continuum of Interventions for ASD Included in the Review



(Simpson, 2005)

Evidence-Based Practice Reviews

<i>SCIENTIFICALLY-BASED PRACTICE</i>			
<i>Social</i>	<i>Skill-Based</i>	<i>Cognitive</i>	<i>Neurophysiologic</i>
	ABA		
	DTT		
	PRT		
<i>PROMISING PRACTICES</i>			
<i>Play Strategies</i>	<i>PECS</i>	<i>Cognitive Behavioral</i>	<i>Sensory Integration</i>
	Incidental Teaching	Cognitive Learning	
	TEACCH	Social Stories	
	AAC	Social Decision Making	
	AT		
	Joint Action		

(Simpson, 2005)

Evidence-Based Practice

Common Themes in the Literature

Review Categories:

- Sensory integration and sensory based
- Relationship-based, interactive
- Developmental skill-based
- Social-cognitive skill training
- Parent-directed or parent-mediated approaches
- Intensive behavioral

Educating Students with Autism

(National Research Council, 2001):

- Early intervention; entry to services
- Active engagement in intensive programming for full school day across sites (5/day week, full school year)
- Planned teaching opportunities planned around relatively brief time periods
- Sufficient time with low adult to student ratio

Overall Themes Across Reviews:

- Individualized support and services
- Specialized curriculum content
- Comprehensive and systematic instruction
- Functional approach
- Family involvement
- Engagement/Relationship Building

Individualized support and services

- Evaluation process
- Features/Gifts/Strengths of ASD are common, not consistent
- Specialized curriculum, matching strategies to:
 - Current level of child
 - Child/Parent/ teacher needs
 - Context
 - Classroom
 - Home
 - Community

- Sensory reactivity
- Impulsive/active
- Sensory preferences
- Fear or refusal to participate
- Motor incoordination
- Task avoidance

- Underlying neurological differences impacting development
- Environmental factors
- Language/cognitive impairment
- Developmental delay
- Diagnostic considerations

Functional Behavior Assessment

- Examine environment and task
- Systematically examine the behavior that is problematic.
 - What happens before, during and after the behavior
 - What is the behavior and what sensation does it provide
 - Is there a way to provide the sensation in a way that engages the child in learning or interaction?
 - Is there a way to respect the sensory need? Make functional?
- What happens to the child
- Consider build up during day
- How does it relate to the child's developmental level or developmental presentation

Intensive, Comprehensive and Systematic Instruction

- LISTEN...LISTEN
- Positive behavior supports for functional skills that replace unwanted behaviors
- Intensive schedules over extended period of time
- Meet multiple needs of child
- Address all core features
- Pre-planned



All aboard the train that's coming aboard!

Functional approach

- Primary filter when goal setting
- Ultimate outcome: Independence
- Functional for the individual
- Greater access/participation
- Generalization



Family Is Central

- Interventions are family driven
 - Family drives the train! "Father...best interventionist"
 - Is it feasible, effective, efficient?
 - Easily implemented?
 - Easily tracked?
- Education
- Transfer of knowledge = consistency = generalization
- Support

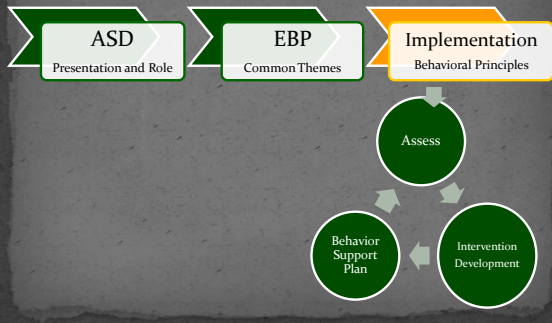


Engagement/Relationship Building

- Reinforcer/motivation assessment
- Pair yourself with reinforcers
- Building rapport and trust with families and other supports in the natural environment
- Relationship with:
 - Environmental supports
 - Social supports
 - Instructional strategies



Today's Process and Plan:



Implementation

Principles in addressing
Challenging Behaviors

Applied Behavior Analysis

Much what we know about the assessment of reinforcers is derived from the field of **Applied Behavior Analysis**

Applied behavior analysis or ABA is cited frequently in the area of intervention for students with Autism Spectrum Disorders (ASD)

Applied Behavior Analysis

Though often cited as a practice, ABA is more accurately described as a science devoted to the understanding and improvement of human behavior.

(Cooper, Heron, & Heward, 2007)

For practitioners, ABA should be viewed as a lens for viewing contexts and behaviors therein

Baer, Wolf, & Risley, 1968

Definition of ABA

The science in which tactics derived from the principles of behavior are applied to improve **socially significant** behavior and experimentation is used to identify the variables responsible for behavior change

(Cooper, Heron, & Heward, 2007)

The Nuts and Bolts

Behavior doesn't happen in a vacuum

"*The 3-term contingency*"

Antecedent-Behavior-Consequence

Antecedent- Billy falls down

Behavior- Billy Cries

Consequence- Billy is held by his mother



The Nuts and Bolts

Antecedent "A"	Behavior "B"	Consequence "C"
Teacher hands Student a new worksheet	Student slides out of desk onto floor	Teacher talks to Student about his behavior for 2 minutes
Teacher works independently for 10 min.	Student blurts out	Teacher increases proximity to the student
Teacher says: "Computer time is over, time for math"	Student runs to the hall	Teacher puts student in Time out



A Closer Look: ANTECEDENTS

The antecedent is an event that occurs immediately prior to the behavior.

If behavior is primarily maintained by its consequences why do we have to care about what happens before the behavior?

A Closer Look: ANTECEDENTS

- Setting Events
 - Physical Environment/Context
 - Noise level, room arrangement/size, people present
 - Physiological/Medical
 - Allergies, medication effects, hunger, fatigue
 - Social
 - Non-preferred therapist, miscommunication, ignored

A Closer Look: "BEHAVIOR"

"Anything an organism does" (Catania, 1998)

Must be operationalized in terms of physical qualities

BEHAVIOR Operational definitions

- A behavior is defined in a clear, objective, and concise manner
- Three ways to test a definition:
 - Can you count the number of times a behavior occurs or how long it takes to perform
 - Can you see the individual performing the behavior when it occurs
 - Can you break down the target behavior in to smaller components (the answer should be No)

Morris, 1985

Activity

Operationally define your client's challenging behavior

A Closer Look: CONSEQUENCES

How do consequences effect problem behavior?

Reinforcement & Punishment

Reinforcement

What is Positive Reinforcement?

When a behavior is followed immediately by the presentation of a stimulus that increases the future frequency of the behavior in similar conditions

(Cooper, Heron, & Heward, 2007)

Positive Reinforcement

Antecedent	Behavior	Consequence	In the future
Teachers asks student to work Independently	Child falls to floor	Peers point and Laugh	Falling to floor persists
Snack Time	Child Screams for chips	Adult gives chips	Screaming increases
Nap Time	Child Cries	Adult picks up and comforts	Crying increases
Nap Time	Child Tantrums for Toy	Adult gives toy	Tantrum behavior persists

Reinforcement

What is Negative Reinforcement?

Something removed immediately following a behavior that increases the future frequency of the behavior

(Cooper, Heron, & Heward, 2007)

Negative Reinforcement

Antecedent	Behavior	Consequence	In the future
The request to sit during calendar/circle Time	Student Hits	Time Out	Hitting persists
Teacher asks student to sit in his chair for Snack Time	Student Screams	Removed from Snack	Screaming increases
Teacher hands student a work sheet	Student throws paper	Sent to time out	Throwing increases
Teacher announces that it is Nap Time	Student Cries	Told they can play for 5 more minutes	Crying persists

Punishment

- *Positive punishment*

Something delivered immediately following a behavior that decreases the future frequency of the behavior

Positive Punishment

Antecedent	Behavior	Consequence
Driving	Speeding	Ticket - Driver does speed in the future
Stove is on	Child reaches	Hand is burned Child never touches the burner again
Teacher asks question	Student answers correctly	Teacher Embarrasses student. The student doesn't volunteer answers in the future

Punishment

Negative Punishment

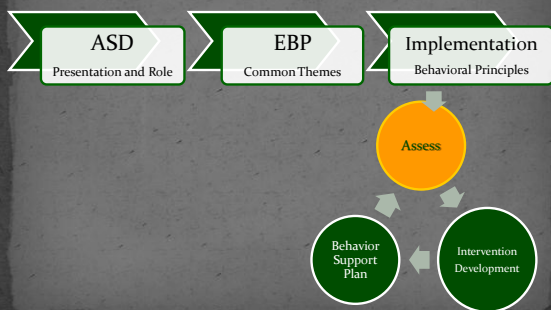
Something removed immediately following a behavior that decreases the future frequency of the behavior

Negative Punishment

Antecedent	Behavior	Consequence
Student with ASD is engaged in computer activity	Peer Approaches Students with ASD hits peer	Computer time taken away Students with ASD hit less often in the future
Student in circle time	Student screams	Teacher removes a token from the student's token board. The screaming desists

Watch the following Clips and Discuss Possible Reinforcers

Today's Process and Plan:



ASSESSMENT OF CHALLENGING BEHAVIORS

Benefits of Measuring Behavior

- Memory is fallible
- A vehicle for communicating result to others
 - Evaluation of results
 - Documentation of efforts
- Reduces bias from discipline lens
- Exploration of patterns of behavior
 - Monitor progress
 - Determine efficacy



General Forms of Assessment

- Summative
 - Documentation of change by comparing an individual's performance at two points in time
 - Pre and Post testing
- Formative
 - Frequent and repeated measurement of performance assessed under natural conditions and over time
 - Continuous vs. Intermittent

Functional Behavior Assessment

- Addresses contextual variables that affect student's behavior, variables that a teacher may be able to control
- Process...not a form
- It may result in more powerful intervention
- It may result in more reinforcement-based interventions

(Cooper Heron & Heward, 2007)

Functional Behavior Assessment (FBA)

Outcomes:

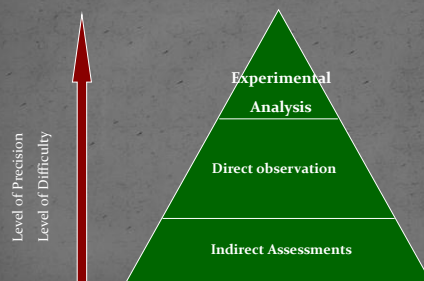
- Description of the problem behavior
- Identification of the events, times, circumstances that are regularly associated with the occurrence and non occurrence of the problem behavior
- Identification of the consequences that maintain the behavior
- Development of a summary statement or hypothesis regarding the function or purpose of the behavior

(O'Neill et al., 1997)

So....what is the function?

- Escape?
- Sensory?
- Attention?
- Tangible?

Continuum of FBA Methods



Two Sources of Data

- Indirect measurement
 - Permanent product
 - Interviews
 - Ratings, Surveys
- Direct measurement
 - Measuring the behavior of interest without inferring it's occurrence from other events

Functional Behavior Assessment and Behavior Intervention Plan - Schools

- When the ARC chairperson/district representative convenes an ARC meeting to consider the suspension of a child or youth for more than five (5) cumulative days in a school year, the ARC:
 - A. Develops a plan for conducting a Functional Behavior Assessment (FBA) if an assessment has not been conducted;
 - B. Develops and implements a BIP if an FBA has already been conducted; or
 - C. Reviews and modifies the FBA and the BIP, as necessary, to address the behavior if an FBA has been conducted and a BIP has been developed.

(Exceptional Child Education Procedures, Jefferson County Public Schools, 2008)

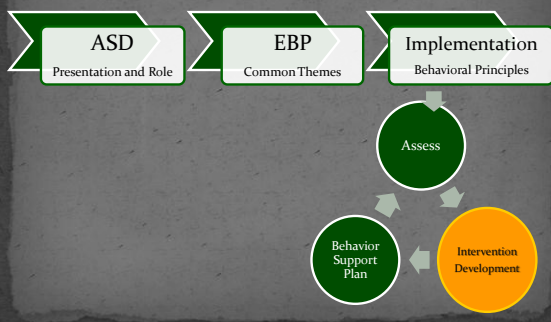
IEP form, BIP, FBA

- <http://www.kentuckyschools.org/KDE/Instructional+Resources/Exceptional+Children/Forms+and+Documents/Special+Education+Forms+-+Due+Process.htm>

Activity

- Fill out Hypothesis section on support plan form
 - Antecedent
 - Behavior
 - Consequence

Today's Process and Plan:



Intervention Development

Addressing the challenging behavior

Guidance Document for Individualized Education Program (IEP) Development

Kentucky Department of Education, 2011

IEP Present Level Area: Social and Emotional Status

- Includes functional performance information about:
 - Social skills
 - Interpersonal behavior
 - Personal skills
 - Self-related behaviors
 - Sensory self-regulation
 - Emotional behavior
 - Organization and executive skills
 - Environmental access/mobility skills
 - Independent living skills

Interpersonal skills: general guiding questions

- “How does the student display interpersonal behaviors such as accepting authority, coping with conflict, gaining attention, making conversation, playing in organized and informal activities, engaging others, respecting property?”

Self-regulation: general guiding questions

- “How does the student demonstrate self-related behaviors such as accepting consequences,... expressing feelings,…”
- “Does the student employ sensory or self regulation skills such as...taking quiet time, walking away from stressful situation,…”
- “How does the student respond to challenge such as using appropriate voice tones, tolerating frustration, employing anger management strategies, curbing aggression, acting-out,...using stress management strategies, and adjusting to social, school, and community environments.”

Making transitions: general guiding questions

- “How well does the student make transitions within the classroom, school building, school campus? Examples include making transitions from one activity to another, movement to cafeteria/gym/office/playground…”

Other

- “What supports promote successful student behavior?”
- “What are situations where the student makes appropriate behavioral choices?”
- “What does the student like/enjoy doing?”

Program Modification and Supports for School Personnel

- “School personnel will be oriented to a highly structure behavior support program (i.e. PASS) before school begins.”

Establishing Program Interventions and Supports:

- The intervention is clearly defined so that others can determine when it is conducted correctly
- The intervention is then conducted with consistency or fidelity
- Data are collected before and during intervention

So....

- Instead of “try to follow the child’s lead”.....
 - *When the child moves toward a preferred item, increase proximity and state the name of the object.*
- An effective intervention typically would result in some sort of observed behavior change in a **targeted** response
 - Observable
 - Measurable
 - More specific than common
 - Context considerations



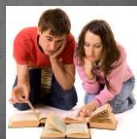
Building an Objective

- Behavioral Objectives drive programming
- Four parts
 - **condition**, **individual**, **response** and **criterion**.

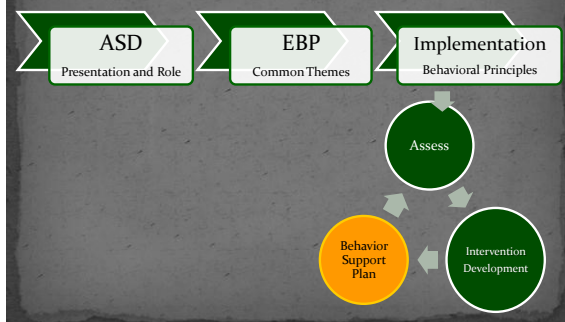
When presented with a one step vocal directive involving the performance of a motor response, **Tamchek will perform the response within 5 s, for 3 consecutive days and across 15 different directives.**

Activity

- Develop Behavioral Objectives
 - Select a response with corresponding conditions and criterion



Today’s Process and Plan:



INTERVENTION Behavioral Support Plans



Positive Behavioral Supports

Behavioral support	Escape	Attention	Tangible	Sensory
Positive reinforcement	x	x	x	x
Prompting	x	x	x	x
Visual supports	x	x	x	x
Modeling	x	x	x	x
Fading	x	x	x	x
Chaining	x	x	x	x
Shaping	x	x	x	x

Antecedent Interventions

- What can we do to try to stop the challenging behavior from occurring..
 - Positive reinforcement
 - Prompting
 - Visual supports
 - Modeling
 - Fading
 - Chaining
 - Shaping

Positive Reinforcement

Again, What is Reinforcement?

“Any stimulus that maintains or increases the behavior exhibited immediately prior to the presentation of the stimulus.”

How do we know the stimulus is a reinforcer?
If behavior it followed was increased in or maintained at the current *rate, duration or intensity*

Prepared by KATC January 2010.

Types of Reinforcers

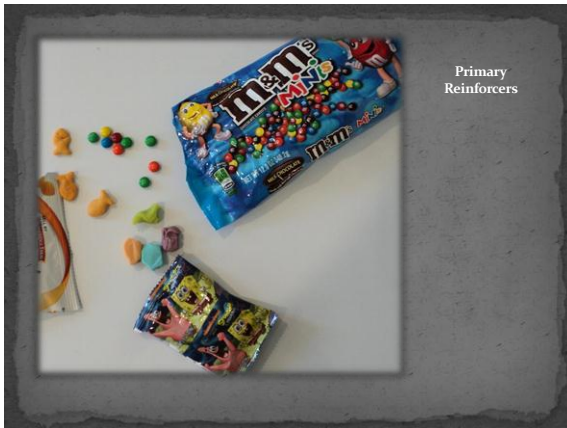
Primary (unconditioned) Reinforcers
Is reinforcing even though the individual may have no learning history with it

Stimuli that have biological importance to an individual

Examples: food, liquids, sleep, shelter, sex

Prepared by KATC January 2010.

Cooper, Heron, & Heward, 2007



Types of Reinforcers

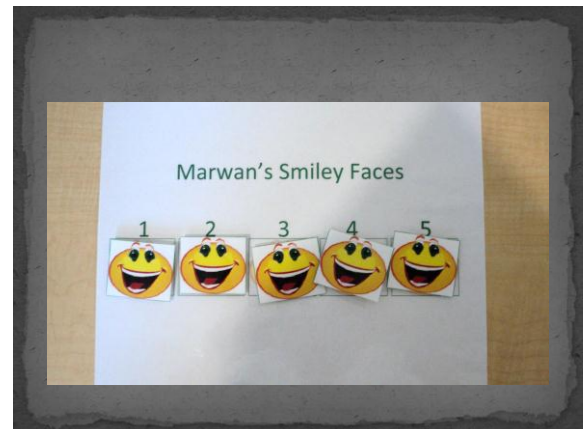
Secondary (Conditioned) Reinforcers

A previously neutral stimulus that has acquired reinforcing properties through pairing with a primary reinforcer.

Examples: praise, finishing task, learning, tokens, penny cards

Prepared by KATC January 2010

Cooper, Heron, & Heward, 2007



What is Reinforcement?

How often do we hear a colleague refer to a child as unmotivated?

It is important to see our role in the motivation of clients. If a client is unmotivated then it is likely that we have failed in identifying effective reinforcers

Prepared by KATC January 2010

Reinforcer assessments

- Asking
- Free operant
- Trial based



Preference Assessment

Refers to a variety of procedures used to determine...

- A) What the client prefers
- B) If it is a high preference or a low preference
- C) Under what conditions do those preferences change.

Prepared by KATC January 2010

Cooper, Heron, & Heward, 2007

Asking

Asking the *Target Person/significant other*

Open-ended questions

Choice format

Rank ordering



Prepared by KATC January 2010

Free Operant Observation

Observing the client when they have unrestricted access to multiple stimuli

A total duration measure of the time a person engages with each stimulus is recorded



Cooper, Heron, & Heward, 2007

Trial-based Assessments

Single stimulus

Paired stimuli

Multiple stimuli

Prepared by KATC January 2010

Single Stimulus Presentation

Developed by Pace et al., 1985

Items are presented to an individual one at a time

Each item is presented multiple times

Observer records duration with stimulus, approach or rejection of stimulus, or number of touches

- Types of stimuli used are visual, auditory, vestibular, tactile, olfactory, gustatory and multisensory.

Prepared by KATC January 2010

Single Stimulus Presentation

Advantages

Can be used with clients with severe disabilities

Disadvantages

Over estimates preference

Does not allow stimuli to be compared to each other

Is time consuming

Prepared by KATC January 2010

Paired Stimulus (Forced Choice)

Developed by Fisher et al., 1992

Items are presented in pairs and the first item touched is scored as the selection

Each item is presented with every other item at least twice

Measure of preference is the % of time the item was selected when it was presented
Items can be ranked



Prepared by KATC January 2010

Paired Stimulus (Forced Choice)

Advantages

More precise than single item method

Allows for comparison of stimuli

Most accurate method

Disadvantages

Time consuming

Prepared by KATC January 2010

Multiple Stimulus

Stimulus presentation of an array of three or more stimuli

This will reduce your assessment time because you are pairing stimuli together

Prepared by KATC January 2010

Cooper, Heron, & Heward, 2007

Multiple Stimuli with Replacement

The assessment begins with an array of stimuli in front of the client

The client picks one of the items

Once the client has chosen an item that item remains and new items are introduced in to the array

Prepared by KATC January 2010

Cooper, Heron, & Heward, 2007

Schedule of reinforcement

- Continuous (CRF) – each time the child produces the target behavior they receive the reinforcer, when child is learning a new behavior this is what should be utilized
- Example: Johnny gets an M&M every time he puts one sock on his foot.



Schedule of reinforcement

- Intermittent – reinforced after some but not all appropriate responses
- Example: Sally gets a “good job” after she goes through every other obstacle on the obstacle course.



Preferences identified, Now what do I do with them?

Deliver them *immediately*


Deliver them *consistently*

Deliver them *contingently*

Assess their effects as *reinforcers*
(deprivation/satiation)

Prepared by KATC January 2010

Using reinforcers

Primary  Secondary

Continuous  Intermittent

Video - Marwan

- Challenging behaviors – limited food variety, difficulty sitting to complete task, throwing items to avoid non-preferred tasks
 - Visual schedule
 - Token board
 - Reinforcer – asking
 - Continuous reinforcement – 1 bite, play
 - Intermittent reinforcement – 4 bites, toy

Activity

- Identify primary and secondary reinforcers that might be beneficial.
- Grade a activity identifying how you will change the schedule of reinforcement.

Differential Reinforcement

- Differential reinforcement of alternative behavior (DRA) - when a challenging behavior is replaced by a more appropriate behavior, only the more appropriate behavior is reinforced

Example: Johnny throws toy on the floor when he is done playing with it

Goal: Johnny places toy into the toy box when done playing

Video – Seth (FA and tx)

- Behavior – throws toy out of reach from therapist when done (escape, attention), does not request desired activity/toy
- Alternate behavior – handing toy to therapist when done, requesting a desired toy

DRI

- Differential reinforcement of incompatible behavior (DRI) – a procedure where a behavior is reinforced that is incompatible with the challenging behavior that is targeted

Example: Sarah runs across the parking lot to enter the building

Goal: Sarah holds Mom's hand and walks to the building

Video - Tyler

- Behavior – aerophagia (sensory, attention)
- Incompatible behavior – blowing, prone positioning for play
 - Continuous reinforcement
 - Modeling

Activity

- Identify a alternative and/or incompatible target behaviors for each of your behavioral objectives.

Prompting

Types of Prompts

Verbal or Signed Prompts

Pros

- Can be given to a group and from a distance
- May not require visual attention
- No physical contact

Cons

- Must be heard
- Student must have listener/receptive skills
- May be difficult to fade**

Snell & Brown 2010

Visual Prompts

Pros

- Can be less intrusive
- Can promote independence even when used as permanent prompts

Cons

- Pictures must be understood by learner
- Some actions are difficult to illustrate
- Development and maintenance of materials

Snell & Brown 2010

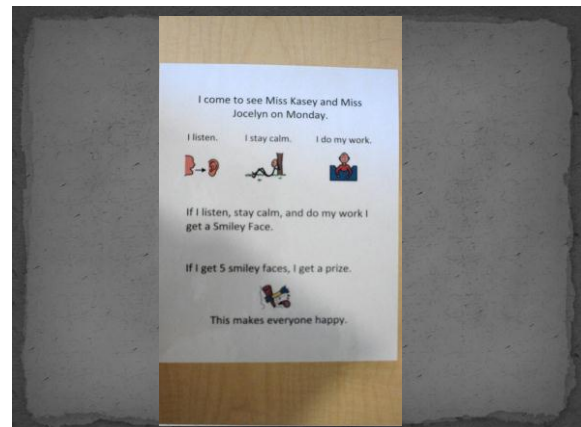
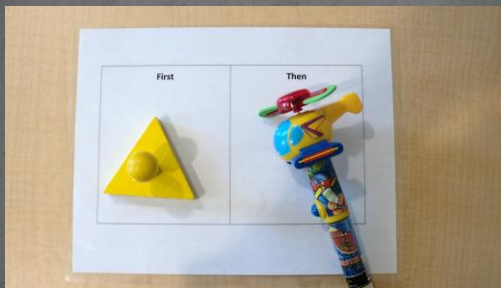
Visual supports

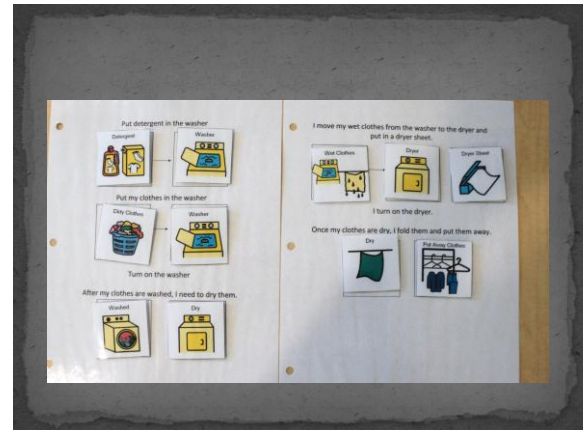
- Do not require adult-mediated intervention
- Provide structure
 - Schedule
 - Manage behavior
 - Assist with transitions
 - Give directions
 - Communication –choice board

Visual Schedule



First/Then Board





Model prompts

- Pros**
- Can be used with a group and from a distance
 - Versatile
 - Complexity of model can be adjusted
 - Modeling can be unobtrusive
- Cons**
- Requires child to attend
 - child must be able to imitate

Snell & Brown 2010

Physical Prompts

- Pros**
- Gives client some control over response
 - Reduces opportunities for errors
 - Useful when vision is limited
- Cons**
- Can be intrusive
 - Cannot be used at a distance
 - Must take care not to injure client

Snell & Brown 2010

Response Prompting

- Insertion of extra stimuli to increase the likelihood that the client will respond correctly
- Extensive research supports its use across individuals with and without disabilities
- Has been used to teach a variety of skills

Using prompts

Consider the least intrusive prompts first
(Intrusiveness of prompt may vary across contexts)

Consider child's characteristics

Always insert prompts with a plan to fade them

Video - Group

- Group schedule
- Individual schedule

Fading

Fading

- Gradual removal of prompts. **Fading should occur as soon as possible.**
 - Graduated guidance – slowly reduce amount of physical assistance needed
 - Time delay – delay providing the prompt for a few seconds
 - Probe occasionally – no prompts
- Move from continuous to intermittent reinforcement

Video - Evan

- Challenging behavior – underweight, dietician recommended adding whole milk and pediasure until he can transition to other textures of foods
 - Visual schedule
 - Continuous reinforcement
 - Fade verbal prompts (2nd puzzle piece, pediasure)
 - Satiation of puzzle, switch reinforcement
 - Physical assistance to accept new drink (pediasure)
 - Fade physical prompts

Activity

- Identify what prompts will be used and how to fade

Chaining

Teaching chained Tasks

Therapist develops a *Task Analysis*

Breaking complex skills into smaller, teachable units

Steps are presented sequentially and in detail to complete the tasks successfully

Table 1. Task Analysis: Preparing Frozen Juice Using a Pictorial Recipe*

1. Put the book on the table.
2. Get the juice out of the refrigerator.
3. Get the pitcher.
4. Get the spoon.
5. Take off the tab.
6. Take off the lid.
7. Put the juice in the pitcher.
8. Turn on the cold water.
9. Pour 3 cans of water in the pitcher.
10. Turn off the cold water.
11. Stir the juice. Count to 10.
12. Put the spoon in the sink.
13. Put the trash in the garbage can.

* Page-turning steps were inserted after each step.

Griffen & Schuster, 1993

Task Analysis Activity

- Divide your table into two groups and a client.
- Each group will write a task analysis for putting on a jacket or a laced shoe.
- Let each group take turns reading the task analysis to the client and observe whether or not the client can complete the task with no additional prompts

Teaching Chained Tasks

Forward chaining

Steps in the task analysis are taught in their natural order

Client is taught to complete first step in the chain

Therapist reinforces correct first response and completes the remaining steps

Teaching Chained Tasks

Forward Chaining cont.

When the client **meets criterion** on the first step, the therapist instructs the client on completing the second step in the chain.

and so on

Teaching Chained Tasks

Backward Chaining

Same task analysis as would be used in forward chaining

Therapist performs all steps in the task analysis except last step

Therapist instructs client to complete last step and delivers reinforcement

Teaching Chained Tasks

Backward Chaining cont.

Next trial, therapist performs all but last two steps in chain and instructs client to complete last two steps.

Reinforcement is delivered after criterion is met. Progressively, the client is instructed to complete receding steps in the chain.

Shaping

Shaping

Systematically reinforcing successive approximations to the desired behavior

Must consider

- Figuring out the “just right step” – not too small or too big
- Stay on each step long enough that the child learns the new behavior but not too long that they become stuck at that level

Video - Alexis

Challenging behavior – will only drink from a particular cup at home, will not swallow a pill

- Reinforcer – asking
- Continuous reinforcement
- Fading verbal prompt
- Shaping – drink from cup, take candy from cup, will continue to shape to pill

Activity

Using Shaping or Chaining, list the steps that you will use to shape or teach a new skill to your identified client

Putting it all together

- Discuss your behavioral support plan

EBP's specific to Occupational Therapy and Speech Language Therapy

Evidenced Based Review in Occupational Therapy Interventions

- 17, 440 Citations were reviewed
- 217 articles were reviewed
- 49 were included in the final review
 - Level I: 18
 - Level II: 17
 - Level III: 14

OT: Overall Themes from the Research Evidence (Tomchek & Case-Smith, 2009)

- Effective intervention programs are developed from individualized analysis of the child that includes assessment of the physiological basis for behaviors and the environment's influence on behavior;
- The child's family is central to the intervention program and services should include family support and education;
- Intervention services need to be intensive and comprehensive;
- Facilitating active engagement of the child is the essential priority for all interventions

ASHA, 2006

- Used NRC (2001) to recognize active components of effective programs
- Considerations for SLPs:
 - Focus on core characteristics and challenges
 - EBPs to support initiation and generalization
 - Assess link between behavior and communication and use positive behavior supports
 - Use strategies to support learning style, developmental framework, and self-determination
 - Incorporate AAC
 - Consider peer and peer-mediated learning as a context

ASHA, 2006 Guiding Principles

- Assist in recognition of communicative functions of challenging behaviors and design environments to support positive behavior
- Recognize:
 - Importance of the family and a variety of partners
 - Facilitation of peer-mediated learning
 - Continuity of services across environments
 - Importance of matching service to meaningful outcomes