

October 2020

Parent-Led ABA Toolkit

A Resource for BHPN Providers



Table of Contents

Clinical Toolkit Recommendations	1-3
Basics of ABA	4-6
Dealing with Problem Behaviors	7-12
Meaningful Motivations	13-15
Reinforcement and Punishment	16-19
Differential Reinforcement	20
First-Then and Visual Schedules	21
Transition Warnings	22
Terminology	23-33

BHPN Parent-Led ABA Clinical Toolkit Recommendations

Terms

ABA Parent Education/Training

Individual parent education based on Behavior Skills Training (BST). Can be used as a step down from services or be offered independent of other services as a standalone intervention. Less intensive and fewer hours than Parent-Led ABA.

Characterized by:

- Parent may/may not take formal data
- Uses a coaching model
- Most goals are parent facing
- BT/BI may provide some support

Parent-Led

Parent-mediated intensive ABA treatment model (comprehensive or focused) with parent acting as the direct provider. More intensive than parent ABA education.

Characterized by:

- No BT/BI involvement
- Direct observation (in-person or telehealth) of parent implementing treatment with their child
- Parent takes formal data
- Most goals are client facing

Talking with Parents

Assessment Talking Points

- This model gives parents tools for the future and what they need now.
- By the time of discharge, they will be the experts for their child.
- The skills they will learn can be used with all their children, now and in the future.
- Sessions take place with the parent and child throughout the week.
- Mid and High-Level supervisors can work within the parent's schedule to determine best times to overlap "sessions" and provide parent education.
- Sessions can take place in different locations.
- Less need to change the schedule for siblings or other family members.
- Make sure the parent knows that Parent-Led is research based.

First Two Meetings

- Build rapport by addressing the parent's motivation.
- Provide a plan for what the parent can expect and accomplish.
- Start with goals you're sure the parent can accomplish.
- Provide lots of reinforcement.
- Help the parent understand their child's motivations.
- Emphasize naturalistic learning.
- Be flexible – remember the parent is parenting 24/7!



BHPN Parent-Led ABA Clinical Toolkit Recommendations *continued*

Parent Education Handouts (first 30 days)

6 basic trainings + 2 quick interventions parents can start right away.

6 Basics	2 Quick Interventions
Basics of ABA	Visual Schedules
Terminology	Transition Warnings
Motivation	
Antecedent-Behavior-Consequence	
Differential Reinforcement Basics	
Dealing with Problem Behaviors	

Typical Parent-Led Phases

Initial parent education/training (6 basic trainings)

Caregiver implements treatment plan with supervision

Step down - parent consultation

Month 1

- Parent/caregiver facing goals.
- Parent/caregiver education/training – basics of ABA.
- Introduce quick interventions that can be used right away (e.g. transition warnings, visual schedules).

Parents learn the basics of ABA

- Basics of ABA
- 6 basic parent training handouts

Easy interventions the parent can get started with:

- Transition warnings
- Visual schedules
- “Refrigerator plans”

Can be started during ABA Assessment!

Month 2 and on...

- More client facing goals.
- Parent/caregiver begins implementing goals.

BHPN Parent-Led ABA Clinical Toolkit Recommendations *continued*

Tips for Parent Consult Phase of Parent-Led Treatment

- Send setting the agenda email asking for topics to discuss.
- Start session with quick list of what needs to be discussed.
- Schedule 15 or 30 minutes at a time.
- Follow-up with email or text follow-up.
- Document session.

Goals

Parent-facing	Client-facing
<i>Good choice for parent education and for preparing parents for Parent-Led</i> • Focus on parent's behavior • Data taken on parent's behavior Example: Juan's caregiver will create 3 opportunities for Juan at each meal to ask for food/drink by saying, "look at me" and then give two choices.	<i>Focus of Parent-Led; may be used for parent education</i> • Focus on client's behavior • Data taken on client's behavior Example: When given 2 choices of food/drink Brianna will point to her preferred choice.

Goal Writing Tips

- Involve the caregiver
- Use caregiver friendly language. Example: Sally will ask for (mand) "..."
- Explain the reasons for a parent facing goals (e.g. parent is in the learning phase)
- Make sure the goals are achievable for parent and child.

Parent-Led Clinical Consultation Group

Join twice a week Parent-Led Consultation Group on Zoom! Talk with experienced Parent-Led BCBAs. Get ideas from others. Share your successes and challenges!

INSERTZOOM INFO Individual Consultation info

Basics of ABA

Applied Behavior Analysis, or **ABA**, is a common treatment for autism spectrum disorder (ASD). ABA looks at *why* behavior is happening, how to change behavior and how best to teach someone a new skill.

Many people with ASD get ABA when they are young, and some people receive ABA when they are older, too. ABA is very helpful for young children with ASD, but it's not always the best treatment choice. It's important for parents and caregivers to understand ABA so they can decide if ABA is a good option for their child and family.

What Does ABA Do Best?

Most ABA research is with young children. ABA is very good at teaching language and social skills and is helpful in reducing unwanted behaviors, self-harm behaviors like head banging, or aggressive behaviors like biting.

ABA can also be used to help teach independence or functional skills – washing the dishes or self-help skills like dressing, for example.



Overall the goal is to address behaviors that are important to the child and his or her family.

Parent-Led ABA

The Parent-Led model is an evidence based behavioral health treatment. It uses the principles of ABA to give parents and other caregivers flexibility and control over treatment of their child.

The Parent-Led philosophy recognizes that, as a parent or caregiver, you know your child better than anyone else. After all you live your child and are in the best position to understand your child needs. In Parent-Led treatment, you as the parent, grandparent or other caregiver work directly with your child under the supervision of a clinician who is specially trained in autism treatment. This allows you to teach your child new skills when an opportunity presents or when your family's schedule allows.

Parent-Led treatment also gives you the knowledge you need to respond to problem behaviors when the behaviors occur. In the Parent-Led model, you are leading the treatment with the support of a clinician.

Basics of ABA *continued*

Antecedent-Behavior-Consequences

In Parent-Led, you will learn about the A-B-Cs of ABA.

Antecedent: what comes before the behavior and “triggers” the behavior.

Behavior: what the person does.

Consequences: the result to the behavior. The consequence keeps the behavior going or can stop the behavior. For example, if every time your child cries you give her a cookie, the consequence is to reinforce or reward crying, and she will probably cry more.



Antecedent → Behavior → Consequence

Treatment Plans

All ABA treatment plans are built around **goals**. Your child’s goals should be based on age, needs and abilities. Your input is an important part of treatment plan development. Depending on your child’s age and abilities, he or she should also have input.

One of the hardest things you might need to do is let go of goals that you might have for your child. If your child has an intellectual disability, you will probably need to carefully consider what your child is able to do.

For example, if your child is not talking by age six, it is unlikely he or she will be able to talk verbally but this doesn’t mean your child can’t learn to communicate. If this is the case, consider non-verbal communication goals rather than continuing to work on talking.



Getting support from other parents can be helpful if you have to change a goal that is important to you—many parents have walked in your shoes. **Keep in mind when you give up one goal there will be another goal that will help your child.**

Read about the experience of having a child with a disability and how the journey is an unplanned one: <https://www.parentcenterhub.org/journey/>

Basics of ABA *continued*

When to Stop ABA

ABA is a treatment, and like most treatments it is most helpful at specific times in a person's life. Many people stay in ABA for two to three years, but your child may be in treatment for a shorter amount of time.

If your child has an intellectual disability, ABA can be helpful but over time they may make less progress with ABA—this is normal. When you see that ABA is no longer helping your child, think about other interventions or programs to improve your older child's quality of life like Adult Day Programs.



Clinical Case Management

Developmental disorders like ASD are lifelong disorders and some people will need lifelong support and services. Clinical Case Management is one of the most powerful services you and your child can receive.

A Clinical Case Manager (CCM) can partner with you and support you and your child in getting the most appropriate services and treatments. Your child's CCM is also responsible for making sure your child makes progress. All CCMs at the BHPN are mental health professionals who will serve as a great source of support for you and your child.

RESOURCES

Autism Speaks: <https://www.autismspeaks.org/applied-behavior-analysis-aba-0>

U.S. Centers for Disease Control: <https://www.cdc.gov/ncbddd/autism/treatment.html>

For more information about the BHPN, visit <https://thebhpn.org/>

Dealing with Problem Behaviors

Do you ever find it difficult to manage your child's behaviors? Does your child have behaviors that are unwanted? Unwanted behaviors are behaviors you want to change but are not dangerous. Examples include:

Shouting	Over-the-top tantrums
Constantly interrupting others	Hitting, pinching, biting in <u>young</u> children



In older children/adults, hitting and biting are **dangerous** behaviors. Because these behaviors are common in children five years old or under, they are considered unwanted rather than dangerous.

Here are six easy steps you can follow to create a plan that helps you manage and decrease unwanted behaviors.

Step 1 | Identify an unwanted behavior you want to decrease.



Tips for Identifying Behavior

- Start with one behavior. Once you have decreased that behavior you can move on to a second behavior.
- Don't start with the most unwanted behavior. Instead, pick a behavior you think will be relatively easy to change.
- Write down what the behavior you hope to change looks like today.

Think of it like this: If you were a movie producer and you asked an actor to act out the behavior, what would you say? You wouldn't just tell the actor to have a temper tantrum, because what you and the actor think temper tantrums look like are going to be different. Instead, you provide the actor with behavioral direction like "stomp your feet, then drop to the floor and yell." Now the actor understands exactly what you want him or her to do because you have described the behavior.

Dealing with Problem Behaviors *continued*

Step 2 | Make an ABC chain.

What happens right before the behavior is called the **antecedent** and what happens right after the behavior is called the **consequence**. When you put it all together you have the **ABC behavior chain**.



Antecedent → Behavior → Consequence

Ask yourself:

- **What happened right before the behavior?**
- **What exactly the does behavior look like?**
- **What happened right after the behavior?**

It's helpful to make a chart like the one below. Start by putting in your description of the unwanted **B** (behavior) then fill in the **A** (antecedent) and the **C** (consequence).

Antecedent	Behavior	Consequence



Example: Johnny's Story

*Johnny has been displaying some unwanted behaviors at home, so Johnny's mom made an **A-B-C** chain to better understand why.*

*Johnny started screaming, crying and stomping his feet on the ground (**B-behavior**) after his sister wanted to take a turn playing with his toy (**A-antecedent**). Johnny's mom allowed him to keep the toy (**C-consequence**).*

Dealing with Problem Behaviors *continued*

What if there is more than one antecedent (A)?

There can be more than one **A**, and this is particularly true for behaviors like Johnny's temper tantrums. Let's read more about Johnny and his mom.

The next day when Johnny's mom tried to put him in pajamas (**A**), he began screaming, crying and stomping his feet again (**B**). Johnny's mom allowed him five more minutes, which became 10 minutes, then 30 minutes (**C**) before putting him to bed.

After several days of tracking Johnny's **Bs**, **As** and **Cs**, Johnny's mom began to notice a pattern in how Johnny handles sharing toys and getting ready for bed, as well as in how the **C** (attention and delaying bedtime) she was providing was rewarding or reinforcing his unwanted behavior.

Step 3 | Make a Plan.

Once you have the **ABC** chain for your child's behavior it's time to make a plan. Your plan can involve changing the **A** or the **C** or both.

To decide what to do, ask yourself:

- Can I change the **A** so the behavior is not triggered?
- Is **A** a transition from one activity to another? If the answer is yes, can you give your child a transition warning so he or she knows what's coming next?
 - **For example**, Johnny's mom could use a timer and give Johnny a 10-minute warning for when it's time to get ready for bed.
- Is the **C** rewarding the behavior?
 - **For example**, did your child get attention (even negative attention) after the behavior? For Johnny, bedtime was postponed as a result of his behavior and he got attention from his mom when he didn't share his toy.
- Can I change **C** by giving a reward (reinforcer) for positive behavior?
 - **For example**, Johnny's mom could give him a sticker when he shares with his sister. Johnny could earn stickers throughout the day for positive behavior. At the end of the day Johnny could trade in the stickers for a small reward.



Dealing with Problem Behaviors *continued*

Step 4 | Creating the Plan.



If the behavior mostly occurs when your child is vulnerable, take steps to decrease vulnerability. For example, if your child acts out when he or she is hungry, create scheduled eating times.



Eliminate or change the **A**. For example, if the **A** is too much noise, lower the noise or provide noise-cancelling headphones.



Being asked to transition from one activity to another is a common **A**. See our article titled “Transition Warnings” for some good tips on helping your child transition from one activity to another.



Removing the **C** can often decrease **B**. For example, a common **C** is attention, and negative attention can still be rewarding. By removing attention, you can decrease behavior.

Note: often when removing attention, the behavior will go up at first before it goes down. The **B** may be more intense for a while. This is because your child will try harder to get your attention before changing his or her behavior.

Step 5 | Try it out.

Now it's time to try out your plan! If your child's behavior gets worse at first don't give up. This often happens at the beginning and you won't know if your plan is working if you don't give it time.



The exception is **dangerous** behavior. Dangerous behavior is behavior that could result in someone getting physically hurt. If a dangerous behavior starts occurring, consult with a behavior analyst or licensed mental health provider before continuing with your plan.

Dealing with Problem Behaviors *continued*

Step 6 | Evaluate the Plan's Effectiveness.

After a week, evaluate how your plan is working.

- **Do you need to look at the ABC chain?** Maybe you need to go back and reevaluate the **A** or **C**. Perhaps what you thought was the **A** or **C**, isn't.

For example: Johnny's mom thought that sharing toys caused the **B**. Later, she realized it was only two toys that created Johnny's behavior problems. Mom decided to change the **A** by giving Johnny the option of having two toys he didn't need to share. Mom taught Johnny's sister that Johnny's two favorite toys were not for sharing. Johnny's sister also got two toys she didn't need to share, and she liked having special toys too.

- **Is B going up?** If **B** is worse and your plan was to remove attention (**C**), ask yourself if you've been consistent in removing attention. If yes, keep going for another week. But if it is too hard to remove attention each time the **B** occurs, stop and change your plan. It's okay—sometimes it's too hard to consistently remove attention, even negative attention. When this happens, it's better to work on changing the **A**. If you're working with a treatment team, this is a good time to consult with them.
- **Are vulnerabilities the problem?** Do you need to work on improving your child's sleep because he or she is tired?
- **Is it time to work on another B?** Make sure the first unwanted behavior has improved *long term* before switching to another **B**.
- **Do you need to ask for help?** Consider reaching out to a teacher, behavioral analyst or therapist, or even grandma. Grandmas often have good ideas, too!

Understanding Vulnerability

After you review the **ABCs**, you may notice that the **B** doesn't always happen. An **A** may not always lead to the unwanted behavior. Maybe your child sometimes screams when it's time to stop playing and come to the dinner table—but other times, there is no screaming and he or she comes to the table willingly.

Why is there a difference? There can be many reasons, and vulnerability is a common one. Vulnerability, sometimes called “a setting event,” is something that makes the **B** *more likely to occur*.

Common Vulnerabilities:

- Being tired or hungry
- Being upset about something else
- A change in routine

Dealing with Problem Behaviors *continued*

As you worked on your **ABC** chain, you might have noticed there can be *multiple* **A**s, several vulnerabilities and more than one **C**!

Avoid becoming overwhelmed by starting slow.

- Start with one **B**, one **A**, one **C**, and one vulnerability (if needed).
- It's okay to be wrong! Maybe you thought hunger was a vulnerability, but when you eliminate hunger nothing changes. Don't be discouraged—it's all valuable information.

Let's go back to Johnny and his mom and check out the plans made for bedtime.

Plan #1: Johnny's mom created a reward system. If Johnny gets ready for bed without the unwanted **B**, he gets a reward he really likes. At first, Johnny was excited.

But then... While Johnny wanted the reward, his behavior didn't change. As a result, after three days he never got a reward. Rewards don't work if the person never gets it!

Plan #2: Johnny's mom added a transition warning to the reward system. She used a timer to remind Johnny that he had 10 minutes before bed. If he went to bed on time, he got his reward.

Success! Johnny responded well to the timer and for the first time, earned the reward for getting ready for bed without unwanted behavior. Johnny was motivated to earn more rewards and bedtime is now less stressful for everyone.

Let's review what Johnny's mom did right. She:

- ✓ Didn't give up!
- ✓ Changed the plan when it wasn't working.
- ✓ Picked a reward that Johnny liked.
- ✓ Thought about other times Johnny screamed and got upset. She noticed that it was often when Johnny had to transition from one thing to another. She then added the transition warning (a 10-minute timer).



Meaningful Motivations

Motivating people to learn is an important step in successful teaching. While we can learn new skills when we aren't motivated it's much easier to learn when we are motivated. This is true for our children, too. Because learning can be hard for individuals with developmental disabilities, more time may be required to build motivation and a strong motivator may be needed. As a parent, when you provide an effective motivator you make learning easier for your child.



Picking a Motivator

It would be easy if you could just use whatever is most motivating for your child (extra TV or screen time, for example), but sometimes what is motivating isn't most appropriate or available. Your child might become very motivated by going to Disneyland, but you can't take your child to Disneyland every day! Whatever motivator you decide to use to help your child learn, try to make sure the motivator includes the following:

- 1 Easily available.
- 2 Appropriate to the situation.
- 3 Something your child wants in the moment.



Meaningful Motivations *continued*

Concrete Motivators

A **concrete motivator** is something we deliberately provide. Time on a tablet playing a game is an example of a concrete motivator that many children like. Let's look at some examples of how concrete motivators work.

Young Learner Example	Advanced Learner Example
A five-year-old loves to have time on a trampoline and strongly resists cleaning up toys. The five-year-old's parents are working on building compliance skills. So the parents tell the child he or she can jump on the trampoline (<i>a concrete motivator</i>) after cleaning up the toys.	A 12-year-old finds activities with peers hard and avoids them whenever possible. Hanging out with other kids is difficult but the child is very interested in video games. The 12-year-old's parents offer a new video game that requires social interaction as a concrete motivator.

We stay ahead of the game by constantly identifying concrete motivation for learning especially when the behavior is difficult to do. It's hard for the 12-year-old in the example above to talk with others, but if he is motivated to learn a new video game, he may be more likely to put himself in a social situation.

Natural Motivators

Do you have to provide a concrete motivator forever? Sometimes! Let's face it, how many of us would go to work without the motivation of a paycheck? For other situations, a **natural motivator** may take over.

For example, over time while learning to play the new video game, our 12-year-old might make a good friend. Now it's no longer just about the video game but the natural motivator of friendship that motivates the 12-year-old.

The trick is to know when to stop providing the concrete motivation and allow the natural motivation to kick into action. **It isn't an all or nothing situation.** There may be times in the future (maybe after a bad day), when the person needs a little concrete motivation to get over initial resistance to practice a new skill.

Balancing between concrete and natural motivation requires keeping an eye on your child and their response to natural motivators.

Meaningful Motivations *continued*

Questions to Ask about Motivators

To make sure you are using the most motivating approach for your child, it's helpful to ask yourself some questions. What motivates a person will change, sometimes daily, so you need to ask these questions frequently.

- What is my child enjoying and motivated to do right now?
- Which of the motivators is most appropriate and available?
- Which of the motivators is the most motivating? Which is least motivating?
- Which skills am I going to work on with my child right now?
- Which skills are the hardest for my child? Which are the easiest?

Now bring it all together and use the most motivating thing to motivate your child to learn the hardest thing!

Strategies to Improve Motivation

Motivation differs between hard tasks and easy tasks. The situation also effects how much motivation might be needed. Here are some motivation strategies you can use:



Go back and forth between working on hard and easier skills so the motivation to learn stays consistent.



Work on skills when it makes the most sense. This allows you to take advantage of natural motivators. For example, if you're teaching your child to ask for things, work on this goal when you have items your child wants. You can point to the jar of gummy candies on the shelf at snack time while asking, "What do you want."



Make hard things easier to support your child's success. For example, if your child has difficulty dressing, give them clothes that are a bit bigger to make putting the clothes on easier.



Motivation changes all the time so take advantage of this! If your child is hungry, it might be a good time to work on asking for food or to use food as motivation. However, if your child is tired, wait until after nap time to work on a new skill.

Reinforcement and Punishment

Quick Review:

- *Consequence is an event that happens right after a behavior occurs.*
- *Reinforcement is anything that increases the behavior that happens after the response. You can think of it as a reward.*
- *A reinforcer is something that is used to increase the likelihood that a behavior will occur.*

Consequence Strategies

Consequence strategies are interventions that work to change the response to behavior. These are things you as the parent or caregiver are going to do differently in response your child's behavior. Consequence interventions are often used to increase a positive or new behavior but can also be used to decrease a behavior. When using these strategies to decrease behavior it usually means removing the reinforcement that is keeping the behavior going.

Consequences are the **C** in the **ABCs** of behavior.

Antecedent Strategies

Antecedent strategies are things we do before the behavior that increase or decrease the likelihood of the behavior occurring. Preventing problem behaviors is always better than having to respond to the behavior.

Antecedents are the **A** in the **ABCs** of behavior.



Reinforcement and Punishment

continued

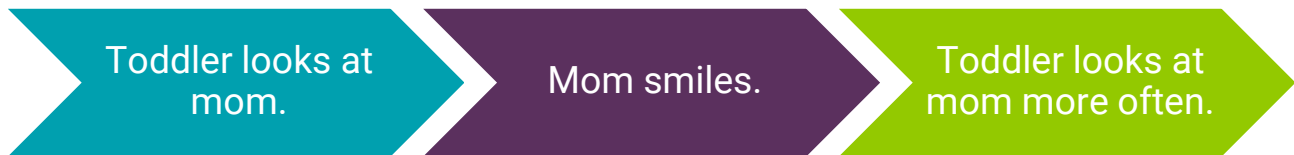
Reinforcement and punishment are core principles in Applied Behavior Analysis. These terms are used every day but in ABA, they have very specific meanings.

Reinforcement

There are two kinds of reinforcement: **positive** and **negative**. Think of “positive” and “negative” as adding or subtracting, not good and bad. **Both types of reinforcement increase behavior.**

Positive Reinforcement

Positive reinforcement is providing something (*a reinforcer*) that increases the likelihood of behavior occurring like a reward. You want your child to finish her homework so you let her know that she can watch her favorite show after homework is done. The show is the positive reinforcer that makes it more likely your child will do her homework.



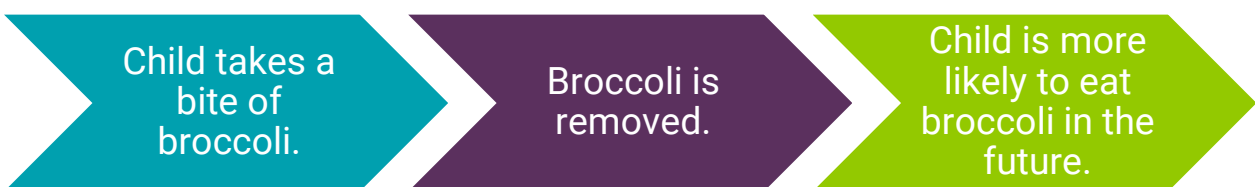
It's a positive reinforcer when mom smiles.



You must pick the right reinforcer. if the child doesn't want what is being offered, it's not a reinforcer. Something is only a reinforcer if it increases the behavior. The reinforcer should be related to the effort it takes to complete the behavior.

Negative Reinforcement

Negative reinforcers are a little harder to understand, but like positive reinforcers they increase a behavior. For example, maybe your child doesn't like to try new foods and you present a new food, like broccoli. After they eat a bite, they get to stop eating it. Taking away the broccoli increases the chances that your child will eat broccoli again.



Removal of broccoli is a negative reinforcer.

Reinforcement and Punishment

continued

Accidental Reinforcement

Accidental reinforcement is not an ABA term, **but it is something that all parents do.**

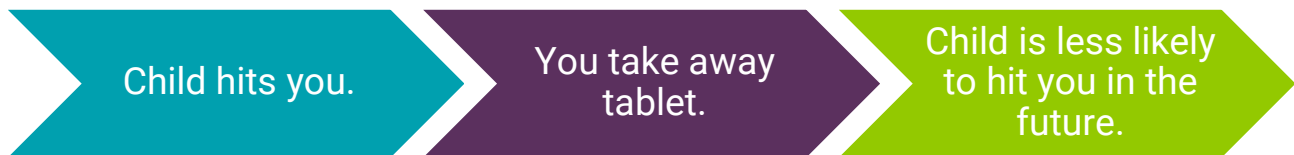
For example, your child is screaming at the store. You ask your child to stop and they just scream more. Finally, you give your child a sucker because you need to finish shopping and get home. You know your child likes suckers and—more importantly—they can't scream and eat the sucker at the same time. You have now accidentally reinforced screaming at the store and it is likely your child will scream next time.

Punishment

Sometimes people confuse negative reinforcement and punishment. But rather than increasing a behavior, **punishment decreases a behavior.** Punishment, which is sometimes used too often can be effective, but it should be used only after careful thought and when reinforcement strategies are not effective. Also, when you use any kind of punishment too often it can stop working.

Physical punishment should never be used.

A common way to use punishment is to take something away. For example, you could take away tablet when your child hits you.



Removal of the tablet is a negative punisher.

Focus on the Positive

Because negative reinforcement can be more difficult to use, focus on positive reinforcement. The first step is to identify the behavior you want to see increase.

There are two common challenges:

- We often focus on behaviors we don't like. When your child engages in a problem behavior, you tend to focus on this behavior because it is difficult to deal with.
- We don't focus on behaviors we want to see. The behaviors you want your child to engage in don't stick out because they may not happen often, or you don't notice because the behavior is not creating a problem. Everyone tends to overlook behaviors that don't cause problems. That is why **"catching your child being good"** is important.

Reinforcement and Punishment

continued

Catching Your Child Being Good

Step 1

While as a parent you need to address problem behavior and develop strategies to decrease problem behaviors, focusing on the behavior you want to see more can make it easier to decrease behaviors you don't want to see. Here are some examples of catching your child being good and reinforcing these behaviors:

1. Acknowledge your child as soon as they listen to you the first time ("Thank you so much for doing that so quickly!")
1. When they sit at the table nicely eating dinner, you can give them a squeeze, pat on the back, or one of the other reinforcers you've identified.
2. When your children are not fighting acknowledge how much you appreciate it.



Step 2

Once you have caught your child being good you can start reinforcing the good behavior. To do this, you have to identify reinforcers. A reinforcer can be anything that increases the behavior. Common reinforcers for children include a favorite toy, tablet time, favorite foods, or praise.

	Reinforcement (increases behavior)	Punishment (decreases behavior)
Positive (adding something)	<i>Positive Reinforcement</i> - adding (giving) something rewarding. e.g. Giving a sticker after taking turns effectively.	<i>Positive Punishment</i> - adding something aversive or undesired. e.g. Adding an additional minute to a task after aggression.
Negative (taking something away)	<i>Negative Reinforcement</i> - taking away something undesired or aversive. e.g. Turning off music that was annoying after an effective request.	<i>Negative Punishment</i> - taking away something desired or rewarding. e.g. Taking away access to video games after aggression.

Differential Reinforcement

Quick Review

Reinforcement is anything that increases behavior that happens after a response like a reward.

Behavior is...

- Anything a person does or says
- It involves movement and a change to the environment
- It is influenced by environmental events
- It can be observed, described and recorded



Differential Reinforcement

Differential reinforcement is a simple procedure you can use with your child throughout their day. All behavior is maintained by a type of reinforcement. The most common are:

- **Getting something a person wants** (e.g. praise, a toy, chocolate).
- **Attention from others** (both positive and negative attention can be reinforcing).
- **Escape a demand or activity the person doesn't want** (e.g. getting out of a chore),
- **Intrinsic reinforcement** (e.g. feels good when the person does it).



If any of your child's behaviors are dangerous or severely impact to your child's or family functioning, consult with your BCBA on a more structured behavior plan and other strategies.

In **differential reinforcement**, you stop reinforcing the problem behavior and begin reinforcing behaviors you want to see. The behaviors must serve the same function.

- If the problem behavior is **attention maintained**, give your child attention through the day when they engage in positive behavior, like asking appropriately for a snack.
- If the problem behavior is **escape maintained**, teach your child to ask for breaks appropriately. Honor the request if problem behavior did not occur.
- If the problem behavior is **access maintained**, give them opportunities to ask for something appropriately and if possible, offer them what they ask for. There are going to be times when they ask for something you can't give them. Acknowledge their request and give alternatives that are possible.
- If the problem behavior is **intrinsically reinforcing**, provide times and places where your child can engage in the behavior, given that it's not a risk.



First-Then and Visual Schedules

First-Then Board

First-then boards are a visual tool based on the principle that a child's motivation to complete something they *don't* want to do is more likely when it is followed by something they *do* want to do. Using a first-then board is a visual way of introducing new tasks, activities or events in a manner that your child understands and is more motivated to do. It's more commonly known as **Grandma's Rule**. For example, "First eat your peas and then you can have dessert." First-then boards are also the first step toward using a visual schedule.

Step 1 | Use a white board, poster or magnetic board to show two large squares. Label one "First" and the other "Then."

Step 2 | Draw, write or use icons to indicate what comes first and what comes after. Ask your child to help you. He or she can put the icons on the board with glue or magnets.



The more you involve your child, the more your child will be invested in using these tools.

Visual Schedules

Visual schedules are a visual prompt used to help children predict or understand upcoming events.



Step 1 | Write down all the tasks or activities your child needs to do in a day.

Step 2 | Take a picture of your child doing each activity or find pictures or drawings that represent each activity.

Step 3 | Put the schedule where your child has easy access to it.

For young children combine the visual schedule with an "all done" or "finished" jar. This way your child receives the satisfaction of completing tasks and being able to remove them from their schedule.



**Need support?
Reach out for consultation**

Transition Warnings

Transition warnings are a way to help your child move from one activity to another more easily.

These warnings can improve appropriate behavior during and after the transition and successful participation in activities. They can also reduce the amount of time it takes to move from one activity to another and challenging behavior around transitions.

There are many types of transition warning including:

Verbal	Timer	Visual
• "Five more minutes, then time to clean up." • "Five more minutes to finish your snack, then it's time to do homework." • "One more time around the train track, and then it's time to get ready for bed."	• Alarm clocks • Timers • Wrist watches with alarm settings	• Visual Timers • Visual Countdowns • Visual Schedules • Use of objects, photos, icons or printed words • Finger Countdowns • Checklists



Involve your child as much as possible!

Many children like to set the timer or create pictures of their activities. Make it as fun and **don't forget to reinforce your child** when they transition successfully.

Transition warnings should fit the activity.

Consider interest level or preferences, length of activities, and difficulty level of an activity. If you're asking your child to transition from something they really like, they might need a longer warning and a countdown.



Need support?
Reach out for consultation

Terminology for ABA

If you are starting Parent Training, you will come across some new terms. Here are some of the ABA terms that you may see in your child's treatment plan.

A

Activities of Daily Living (ADL)

This term refers to all the things we do every day to take care of ourselves, like bathing, dressing and eating. Most people learn ADLs as they grow up without someone formally teaching them. For example, you probably can't remember when you learned to use a spoon. Typically developing children often grab the spoon when they don't want their caregiver to feed them anymore. While the result may be messy, the typical toddler quickly learns to feed him or herself. For some children with ASD or other developmental disabilities, eating with a spoon must be taught more formally. In these situations, ADLs will be part of a treatment plan.

Antecedent-Behavior-Consequences

(often called the **ABCs** of ABA)

Antecedent: what comes before the behavior and "triggers" the behavior.

Behavior: what the person does.

Consequences: the result to the behavior. The consequence keeps the behavior going or can stop the behavior. For example, if every time your child cries you give her a cookie, the consequence is to reinforce (reward) crying, and she will probably cry more.

Antecedent Intervention (or Antecedent Modification)

A strategy that manipulates the environment to make certain behaviors more or less likely. These interventions are typically referred to as interventions that are incorporated to make maladaptive (dysfunctional) behaviors less likely to occur.

Applied Behavior Analysis

The application of principles of behavior to socially significant issues to produce meaningful change.

Attention

This is frequently identified as one of the reasons certain behaviors occur. For instance, a dad is talking to a friend at the park when his child calls out to him. That would be an appropriate way to gain attention. If ignored, his child might scream loudly and throw sand at another child. Dad might then turn around and reprimand the child – still giving him attention. **Remember:** there is no such thing as "good" or "bad" attention when it comes to behavior. What matters is if the attention reinforces the behavior.

Terminology for ABA

Augmentative communication

This is a broad term that includes all non-spoken language. If your child is having difficulty learning to talk, the treatment team may “augment” spoken words with pictures or sign language.

B

Baseline

You will often see the term baseline in a treatment plan. The baseline is basically where your child is starting. For example, maybe your child’s baseline for talking is that he or she knows 20 words. The goal will be to improve on this baseline.

A baseline is important because if you don’t know where your child started, you and the treatment team won’t be able to measure how much progress is made.

Behavior analyst

A professional who is trained in ABA. Behavior analysts have either a masters or a doctoral degree. Once the certification exam is passed, he or she becomes a Board-Certified Behavior Analyst (BCBA). BCBAs are not the only people who can provide ABA, but they are specifically trained to provide it. Other professionals who provide ABA include behavioral psychologists or other mental health providers who have had behavioral training.

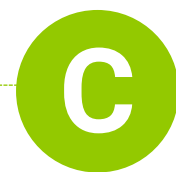
Behavior chain

These are the multiple parts that form a complex behavior. For example, the behavior of dressing involves many steps, with some of the steps needing to be done in a certain order, like putting pants on before shoes. Sometimes we teach children in a **forward chain** where we teach the skill from the beginning, such as teaching to get dressed by starting with a shirt, followed by pants and ending with shoes. Or, we might do a **backwards chain** and teach putting on shoes first, then move to socks *with* the shoes, and so on. We may also do a **total task chain** where the learner receives training on each behavior in the chain during each session, with prompts being faded across all steps simultaneously.

Behavior Intervention Plan (BIP)

A plan consisting of antecedent modifications, replacement behaviors and consequence manipulations based on the function of behavior. The plan is designed to reduce behaviors of concern.

Terminology for ABA

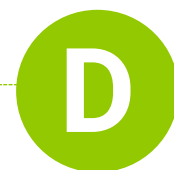


Consequence Intervention (or Consequence Modification)

A strategy that manipulates the consequence of a behavior in order to make certain behaviors more or less likely to occur in the future.

Contingent

Describes reinforcement or punishment that is only given after a behavior has occurred. For example, giving your child a cookie after they appropriately ask for one.



Data

The results of measurement, usually in quantifiable form.

Desensitization

This is a procedure where we help someone get used to something slowly. For example, if your child has sensitivity to noise, the treatment plan might be for your child to wear headphones to dampen noise; then he or she can slowly get used to noises without headphones starting with soft noises before progressing to louder noises.

Differential Reinforcement

Reinforcing only those responses that meet specific criterion (i.e. frequency, topography, duration, latency, or magnitude) and placing all other responses on extinction. There are many types including:

Differential Reinforcement of Alternative Behavior (DRA): A procedure for decreasing maladaptive behavior where reinforcement is delivered for a behavior that serves as a desirable alternative to the behavior targeted for reduction and withheld following instances of the maladaptive behavior. Oftentimes, the alternative behavior serves the same function as the maladaptive behavior.

Differential Reinforcement of Incompatible Behavior (DRI): A procedure for decreasing maladaptive behavior in which reinforcement is delivered for a behavior that is topographically incompatible with the behavior targeted for reduction and withheld following instances of the maladaptive behavior.

Differential Reinforcement of Other Behavior (DRO): : A procedure for decreasing maladaptive behavior in which reinforcement is contingent on the absence of the maladaptive behavior during or at specific times.

Terminology for ABA

Discrete Trial

A teaching procedure that consists of a clear beginning, middle and end (i.e. Antecedent-Behavior-Consequence).

E

Echoic

This is the act of repeating a sound or word. This is the first thing young children do when learning to talk. Some young children with a developmental disability or ASD won't do this without some help. When this is the case, repeating sounds then words may be part of a child's treatment plan.

Echolalia

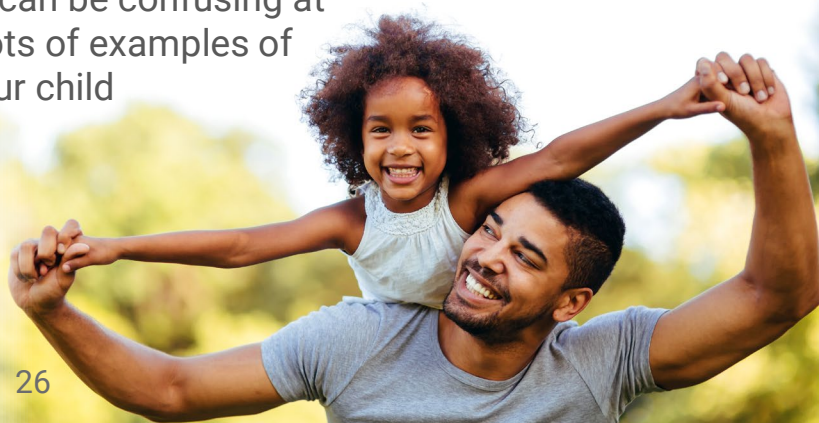
A child with echolalia may just repeat what you say to them or repeat something on the TV without understanding it. For example, if you ask your child, "What would you like to eat?" and your child repeats what you said without responding to the question, your child may be echolalic. If this is the case, his or her treatment plan should address this, as echolalia gets in the way of communicating with others. Echolalia is a difficulty that some, not all, children with ASD have.

Escape

This term is used when a person does something to avoid something else. This is common in children, and even adults, when they try to escape things they don't like. Escape can be a problem in children with developmental delays or ASD. For example, if your child finds certain types of music very irritating, they may start yelling to escape from the music. The music keeps the yelling going through the escape process. The perspective works like this: if I yell, I can't hear the music I hate so I will keep yelling. The music stopping is negatively reinforcing the yelling, so we call the music a **negative reinforcer**.

Exemplar

This term shows up in treatment plans and can be confusing at first until you realize your child is learning lots of examples of different classes of things. For instance, your child may be working on food exemplars, or all the names of things they like to eat.



Terminology for ABA

Extinction

This term refers to the process of removing all the reinforcement for a behavior and letting the behavior decrease on its own. There are many types of extinction including:

Escape Extinction: Behaviors maintained by the function of escape are placed on escape extinction where those behaviors are no longer followed by termination of the aversive stimulus. That is, by engaging in the target behavior, the individual is no longer allowed escape from the non-preferred stimulus.

Planned Ignoring: Withholding social reinforcers, including attention, physical contact and verbal interactions, for a brief period contingent on the occurrence of a maladaptive behavior.

Sensory Extinction: The process by which behaviors maintained by automatic reinforcement are placed on extinction by masking or removing the sensory consequence.

Tangible Extinction: Withholding desired tangible reinforcers for a brief period contingent on the occurrence of a maladaptive behavior.

While extinction works in certain situations, there are some problems with extinction. For example, extinction should never be used with high risk behaviors. It would be too risky to try extinction if there is a chance someone can get hurt, so extinction should not be tried with self-harm behaviors. Additionally, sometimes extinction just doesn't work because the behavior itself is reinforcing, or because we can't tolerate the behavior long enough for it to stop. The below are situations when extinction *doesn't* work:

Dangerous behaviors: Using extinction with dangerous behaviors like head banging or biting is just too risky and shouldn't be done.

Self-reinforcing behaviors: Behaviors like pulling out hair is self-reinforcing or self-soothing for some people. There is no outside reinforcement when the behavior itself is reinforcing. Extinction doesn't work very well in these cases because you can't remove the reinforcement.

Continued on next page.

Terminology for ABA

Extinction *continued*

When you can't tolerate the behavior: Extinction requires that you wait for the behavior to end. It can be hard to wait for some behaviors to end. Imagine you're at the store with two kids and one is having a tantrum. You know it's best to ignore the behavior, but everyone is looking at you and you still have to buy milk and eggs. In these situations, it's very understandable if you give the screaming child a cookie and this works in the short term. But the cookie also reinforces the screaming for the next time.

Extinction burst: An extinction burst almost always happens when using extinction for reducing problem behaviors. In an extinction burst, the behavior you're trying to extinguish increases in intensity just when you think the behavior is almost gone. For example, if your child is having a tantrum and you are withholding reinforcement (in other words, ignoring the tantrum), the child might begin screaming more loudly and kick their legs or try to bite you. This is an extinction burst. It's a last-ditch effort of the child to get what he or she wants. It's very important to not give in when an extinction burst happens, because then, when the next extinction burst happens, it will be more intense and more difficult to reduce. If you don't think you can get through an extinction burst without giving in, find an alternative way to decrease the problem behavior.

Extinction can work but because of the draw backs it's best to use extinction when you can commit to it. Think carefully before agreeing to extinction.



Function

This is the purpose a behavior serves to an individual. There are four main functions.

Access: A behavior occurs because it allows an individual to have initial or continued access to a preferred item or activity.

Attention: A behavior occurs because it provides the individual desired attention. Attention quality may vary, as some individuals may be motivated by social praise and others by verbal reprimands.

Escape/Avoidance: A behavior occurs because it allows the individual to completely escape or temporarily avoid a non-preferred task.

Automatic: A behavior occurs because the behavior itself feels good or allows the individual to alleviate an aversive feeling.

Terminology for ABA

Functional Behavior Assessment (FBA)

A systematic method of assessment for obtaining information about the purposes (functions) a maladaptive behavior serves for a person; results are used to guide the design of an intervention for decreasing the maladaptive behavior and increasing appropriate behavior.

G

Graph

A visual format for displaying data that reveals revelations among and between a series of measurements and relevant variables.

Generalization

This refers to learning something in one setting or situation, and the behavior occurs in new settings or situations. For example, you teach your child to use a spoon to eat at home and when your child goes to Grandma's house or a restaurant, he or she knows how to use the spoon. You don't have to teach eating with a spoon at each setting because the behavior has generalized. Some people with intellectual disabilities have trouble generalizing. If this is case for your child, part of the treatment plan might be to teach the skill in across several settings or situations and then look to see if the skill generalizes. **In other words, teaching the skill in just one setting won't always be enough.**

H

High-Probability (high-P) Request Sequence

An antecedent intervention in which two to five easy tasks with a known history of learner compliance (the high-*p* requests) are presented in quick succession immediately before requesting the target task, the low-*p* request.

M

Mand

Another word for asking for something.

Maintenance

The extent to which a learner continues to perform the target behavior after part or all of the intervention has been terminated.

Terminology for ABA

Measurement

A unit or system of quantifying behavior. ABA practitioners use measurement to detect and compare the effects of various procedures on the acquisition, maintenance and generalization of socially significant behaviors. Types of measurement used include:

Count/Frequency: A simple tally of the number of occurrences of a behavior.

Duration: A measure of the total extent of time in which a behavior occurs.

Latency (or Response Latency): A measure that includes the elapsed time from the onset of a stimulus to the initiation of a response.

Rate: A ratio of count per observation time; often expressed as count per standard unit of time (e.g. per minute, per hour, per day)

Inter-response Time: The elapsed time between two successive responses.

Magnitude: The force or intensity with which a response is emitted.

Percentage: A ratio calculated by dividing the number of responses of a certain type over total number of responses ($\# \text{ responses of a certain type} / \text{total number of responses}$). Oftentimes, this is correct responses / total responses.

Motivating Operations

Environmental variables that alter the effectiveness of a reinforcer. Motivating operations can be classified as an Establishing Operation (EO), which increases the current effectiveness of a stimulus to serve as a reinforcer, or as an Abolishing Operation (AO), which decreases the current effectiveness of a stimulus to serve as a reinforcer.



Preference Assessment

A procedure aimed at identifying an individual's favorite things so that they can be used as rewards or potential reinforcers of appropriate and desired behavior. Types of preference assessments can include: **Single Stimulus, Paired Stimulus, Multiple Stimulus (e.g. MSW, MSWO), and free operant.**

Terminology for ABA

Punishment

Something that decreases the chance of a behavior. While punishment works, it needs to be carefully used and only when reinforcing a desired behavior is not effective.

Physical punishment should never be used. Types of punishment that can be used are things like taking away a privilege or putting a child in timeout.

Positive Punishment: Punishment involving the addition of a stimulus. For example, when your child hits, you made her do an extra chore. Hitting in the future decreased; therefore, the extra chore served as a positive *punisher*.

Negative Punishment: Punishment involving the removal of a stimulus. For example, after your child hits, you take away tablet privileges for the rest of the day. Hitting in the future decreased and removal of the tablet served as a negative *punisher*.

A word of warning about punishment: When used a lot, children adapt to it. For example, children who frequently get placed in timeout might learn to like time by themselves – especially if it gets them out of other things they don't want to do. If this happens, you may have turned punishment into a reinforcer.

R

Reinforcement

Unlike punishment, reinforcement is something that increases the chance of behavior in the future. There are several kinds of reinforcement:

Positive reinforcement: Something that increases behavior through reward. Positive reinforcement is a great tool. The most important thing to remember about positive reinforcement is that what may be reinforcing to one person might not be to someone else. Make sure the reward you use is something meaningful for your child.

Negative reinforcement: Sometimes people might think this is the same as punishment, but this is **not** the case. Think of negative reinforcement as “relief from something.” For example, if you ask your child to clean his or her room over and over, and the room never gets cleaned, you are nagging the child. He or she might clean the room to get away from the nagging. Or, let's say you have a rash, and your doctor says to leave it alone, but the rash gets *really* itchy. The scratching of the rash relieves the itchiness for a short while, so the behavior of scratching is negatively reinforced. **All reinforcers increase behavior and negative reinforcement can be very powerful.**

Terminology for ABA

S

Schedule of Reinforcement

The way we reinforce a behavior in both rate and form impacts how strong the behavior change is. It also impacts how easy it is for the behavior to go away.

The classic example is gambling. If you won every time you played a slot machine and suddenly it stopped, would you stop playing? How many times would you play before you stopped? Casinos know about schedules of reinforcement, so they set up *variable ratio* reinforcement which means you don't know when you will win. This reinforcer, unpredictability, makes it more likely that a gambler will continue.

The four types of schedules of reinforcement are **fixed ratio**, **variable ratio**, **fixed interval** and **variable interval**.



Shaping

Reinforcing successive approximations of a target behavior while extinguishing previous approximations until a terminal behavior is performed.

S^D (Discriminative Stimulus, or Stimulus – Discriminative Type)

A stimulus signaling to the learner that reinforcement is available. For example, a child learns that when someone asks, “What’s your name?” and they answer correctly, they get a reward. Therefore, they consistently respond correctly when asked this question. The question, “What’s your name?” is an S^D.

T

Tact

Labeling or commenting on something.

Task analysis

Breaking down a task into small parts. For example, if you are going to teach teeth brushing you would first make a list of all the steps involved – from picking up the toothbrush to rinsing. Then teach each step individually.

Terminology for ABA

Token economy

This is a time-honored parenting strategy also used in treatment and education plans. Basically, you set up expectations for behavior and give stars or tokens for the desired behavior. The child collects a certain number of stars or tokens and can turn them in for a reward.

Topography

What the behavior physically looks like. This is in contrast to the function of a behavior, which refers to the effect the behavior has on the environment.

Treatment plan

A treatment plan is a document that contains the goals for your child's intervention program that you, your child and your treatment provider have agreed upon. This document, sometimes called a Progress Report, usually contains a behavior plan for responding to challenging behaviors as well as some sentences or paragraphs about how your child has been responding to treatment.



Verbal Operant

Verbal operant is a term used within the verbal behavior approach to describe one of the components of expressive language. Specific verbal operants include **mand**, **tact**, **intraverbal** and **echoic**.



Helpful Resource

If you want to learn more, check out *Behaviorspeak: A Glossary of Terms in Applied Behavior Analysis* by Bobby Newman, Kenneth Reeve, Sharon Reeve and Carolyn Ryan (2003)