

FACT SHEET AND SERVICE DESCRIPTION

Behavior Analysis and Treatment

Behavior Analysis, Inc.

Davie, Florida, USA

All children present behavior problems at one time or another. Most children “outgrow” the problem behavior without formal intervention. However, many require systematic and formal treatment of their problem behaviors. Fortunately, there is an extremely effective approach in dealing with problem behavior. It is variously referred to as behavior analysis, behavior modification, or behavior therapy. No matter what it is called, the behavioral approach involves viewing problem behaviors as learned because of their effect on the environment. From this perspective, problem behaviors can be reduced or eliminated by changing the child’s environment.

Changing the child’s environment is not an easy task. In order to change the behavior of the child, people around the child must first change their behavior. This is often difficult because people are used to behaving in a certain way toward the child. However, if others do not change their own ways of behaving, the child’s behavior is unlikely to change.

There are several other frequently used approaches to changing behavior. We’ll briefly describe some of these below.

Hoping the Child will Outgrow the Problem. In many cases problem behaviors seem to go away “on their own.” Problem behaviors don’t go away by themselves. They will only go away because others (parents, teachers, other children) change their way of behaving towards that child. It may seem that the child “outgrew” his or her problem behavior, but, in fact, it is more likely that others changed their way of interacting with the child, perhaps even unconsciously.

Talking with the Child. By now you have probably spent a considerable amount of time talking with the child about what (s)he should and should not do. If talking alone was going to work, it would have worked by now. You have actually proven that talking to child about the problem is ineffective. It is now time to try something else.

Medication. Many children are on medication because their behaviors pose a problem for themselves or others. Medication has a place in the treatment of children with behavioral disorders. However, it should generally be used as an adjunct to behavior therapy, not as the primary intervention. Medication alone does not teach children appropriate behavior. Medication is often associated with negative physical side effects. The problem behaviors often return once the medication is reduced or withdrawn. Some children develop tolerances to medication that require increasing dosages or frequent medication changes to maintain the same level of improvement.

Professional Counseling. Typically, the child, and sometimes other family members, spends an hour per week talking with a therapist about the problem behavior. If the child is highly verbal this may be useful. However, this is not useful for children with limited language skills. Also, research and experience shows that just because someone can talk about proper behavior, it does not mean that proper behavior will follow. Further, unless special methods are used, treatment gains obtained in the therapist’s office are not likely to generalize to other settings, such as home and school.

Behavior Analysis. When designed and supervised by a competent behavior analyst, the behavioral approach is the most effective treatment available. It treats the behavior problem directly by arranging the child’s environment so that it fosters and supports positive behavior. It must be carried out in the child’s natural environment by his or her natural caregivers. Therefore, the majority of the actual work is done by the parents. The behavior analyst develops the intervention and teaches/coaches others on carrying it out.

The behavioral approach consists of several steps. These are described below.

Assessing the Problem Behavior. The first step in developing an effective behavioral treatment program is determining why the behavior occurs. All treatment is based upon this assessment and it is therefore a critical part of the treatment process. It cannot be circumvented. A trained Behavior Analyst will ask you certain questions about the child's problem behaviors and will observe the child's behavior directly. The Behavior Analyst may want to observe the child's behavior in his or her natural environment (home, school). You also may be asked to keep track of the behavior in between sessions. This is important in helping to determine the extent of the current program and the reasons for the behavior. A thorough assessment can require from 2 to more than 10 hours. The number and complexity of the child's problem behavior(s) will dictate the amount of time necessary to complete the assessment. Your Behavior Analyst should be able to give you an idea of the assessment time after the first session.

Developing the Treatment Plan. Once the assessment has been completed, your Behavior Analyst will develop a treatment plan. All significant persons in the child's life should be involved in this process, guided by the Behavior Analyst. The treatment plan will provide you with step-by-step instructions for changing the child's behavior. This will typically involve describing how others should act when the child behaves in certain ways. If you disagree with anything in the plan, it is your responsibility to discuss these concerns with your Behavior Analyst until you feel comfortable with the entire treatment plan.

Training the Treatment Plan. Once the plan has been developed, your Behavior Analyst will train relevant persons in the specific behavior change procedures. You will be provided with a written description of the procedures, they will be demonstrated for you, and you will be asked to practice these procedures until you are proficient in carrying out the treatment plan. If anything seems unclear, ask your Behavior Analyst for clarification.

Implementing the Treatment Plan. The plan should be implemented exactly as described by your Behavior Analyst. If you find that you must deviate from the plan, be sure to write this down and notify your Behavior Analyst. If you continue to have problems implementing the treatment plan, call your Behavior Analyst for guidance. Your Behavior Analyst will give you an estimate of how long the treatment will last.

Monitoring Progress. You will be asked to collect some information on the child's behavior in between appointments from your Behavior Analyst. This information is extremely important because it allows us see day-to-day progress and so that we can adjust the treatment plan accordingly. If you find that you are having difficulty in collecting this information (data), contact your Behavior Analyst. Accuracy is critical – never attempt to estimate these data.

Fading the Treatment Plan Procedures. Once the unwanted behavior is reduced to an acceptable level and desired behavior is reliably occurring, the treatment plan will be gradually changed to more natural procedures. Do not try this on your own. Your Behavior Analyst will work with you to ensure that the procedures are faded in a planned, systematic fashion. Otherwise, the progress made in treatment may not endure.

To Make this Approach Work, You Must . . .

BE INVOLVED. If you want your child to behave in your presence YOU must implement the treatment procedures yourself. No one else can do this for you.

BE CONSISTENT. You should always carry out the treatment procedures the same way. If you sometimes do one thing and sometimes do another thing, you will send mixed messages to your child, thereby decreasing the effectiveness of treatment.

BE POSITIVE. Positive behavior must receive positive consequences. This will ultimately replace the undesirable behavior.

BE PATIENT. Although the behavioral approach is quick and effective, it does not work overnight. However, it will work if you are involved, consistent and sincerely rewarding to your child.