Social Skills and ABA: Using a Functional Assessment and Conceptual Analysis to Guide Treatment

National Autism Conference 2018

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Goals

- Employ a functional assessment to select socially valid targets for intervention
- Develop social skills which are functional equivalents for problem behavior
- Use a conceptual analysis of the stimuli that occasion and maintain simple and complex social skills to develop teaching strategies
- Target socially valid social behaviors
Goals

- Manipulate consequences within the training session to reinforce new behaviors which are functional equivalents for problem behavior
- Train parents to prompt and reinforce new behaviors which are functional equivalents for problem behavior
- Communicate effectively with teachers and other key players in the community to encourage entrapment-reinforcement in natural settings
Social Skills

“Social skills are the specific behaviors when interacting with others.”

Social skill deficiency is a defining characteristic of autism.

(Rutherford et al., 2004)
Possible Outcomes of Social Skills Deficiencies

Students who lack social skills are at risk for:

◦ Aggression
◦ Peer rejection
◦ Loneliness
◦ Social dissatisfaction
◦ Academic failure
◦ School drop-out
◦ Contact with the legal system
◦ Substance abuse
◦ Difficulty maintaining employment and relationships

(Maag, 2006; Rutherford, et al., 2004)
Who Provides Group Social Skills Instruction?

- 14 pages of options in the Milwaukee Area based on a Google Search
- Behavior Interventions
  - Primary (Whole School)
  - Secondary (Group)
  - Tertiary (Function Based)
- Cognitive–Behavioral Therapy
- Interpersonal Therapy
- Medical Interventions
- Group and Individual Counseling (Bulliset al., 2001)
What is Provided?

- Variety of Different Services and Activities are termed “Social Skills Groups”
- “You wouldn’t believe what they are calling social skills”
- Social Thinking Curriculum is being adopted by many local school districts
What is Ineffective or Unproven?
Social Thinking®: Science, Pseudoscience, or Antiscience?

Justin B. Leaf¹ · Alyne Kassardjian¹ · Misty L. Oppenheim-Leaf² · Joseph H. Cihon¹ · Mitchell Taubman¹ · Ronald Leaf¹ · John McEachin¹

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Abstract Today, there are several interventions that can be implemented with individuals diagnosed with autism spectrum disorder. Most of these interventions have limited to no empirical evidence demonstrating their effectiveness, yet they are widely implemented in home, school, university, and community settings. In 1996, Green wrote a chapter in which she outlined three levels of science: evidence science, pseudoscience, and antiscience. This commentary will outline Social Thinking® and provide evidence that the procedure, at the current time, qualifies as a pseudoscience and, therefore, should not be implemented with individuals diagnosed with autism spectrum disorder, especially given the availability of alternatives which clearly meet the standard of evidence science.
Conclusions about Social Thinking®
(Leaf, et. al. 2016)

1. Two published studies and both have “serious methodological flaws”
2. “…qualifies as a Pseudoscience”
4. Not behavioral (change thoughts), not technical (lacks procedures), not conceptually systematic
5. Recommending or endorsing may violate ethical guidelines
6. School districts should not implement, recommend, nor endorse
7. Social defecator and the school district
Social Skills Training for Youth With Emotional and Behavioral Disorders and Learning Disabilities: Problems, Conclusions, and Suggestions

John W. Maag

Department of Special Education and Communication Disorders
University of Nebraska–Lincoln

Teaching social skills to students with emotional and behavioral disorders and learning disabilities has become an accepted practice. Social skills training (SST), however, has often resulted in only modest and sometimes no changes in students' social competence. One of the main reasons is that acknowledged problems have been largely ignored. The purpose of this article is to examine those problems both conceptually and critically and to suggest that research begin to focus on replacement behavior training as a possible way to increase the effectiveness of SST.
Maag (2005)

Examined limited gains with Social Skills Intervention and identified 3 main problems:

1. Behaviors that are not socially valid were often targeted for training
2. Functional Replacements for problem behavior were not targeted
3. Training techniques rarely matched to “reasons youngsters fail”(skills set)

Only small changes in peer acceptance were documented (one of the most importance components of social acceptance)
Obligation of a BCBA in Social Communication Skills Instruction in Groups

- It is essential that Behavior Analysts design and implement social communication skills programming that conforms to the core principles of ABA and scientific evidence (Baer et al. 1968; Green 1996; Normand 2008)
Reducing Problem Behavior
Functional Assessment

- A set of procedures used to identify the cause of maladaptive or socially punishing behavior and reduce it through teaching replacement behaviors instead of suppressing it through punishment

- Empirical and scientific literature which supports these methods is found in the field of Applied Behavior Analysis
The outcome of the functional assessment is an analysis of how a person learned the maladaptive behavior (causes) and how it is presently maintained in the current environment.

This allows selection of evidence based methods specific to the identified causes to replace, reduce or eliminate the problem behavior.
Why is Functional Assessment Valuable?

- In other disciplines, interventions or treatments are sometimes based on form rather than function with programmed consequences based on form.
- This can result in interventions that strengthen the maladaptive behavior instead of reducing it or ineffective treatment. Teaching a social skill or rule without regard to what maintains current maladaptive behavior may not be successful.
- Instead, a functional assessment leads to identification of the behavior by it’s function (cause) and then selection of treatments or interventions which are effective in reducing behavior in the specific functional category identified.
The term functional refers to the causes of behavior.

B.F. Skinner was the first to use the term function when referring to the “causes” of behavior.

He discarded cause and effect in favor of functional in an effort to precisely talk about behavior.
Skinner suggested that maladaptive as well as adaptive behaviors demonstrated functional relationships related to antecedents and consequences which was the basis for future analysis of behavior.
In the 1970–1980’s a protocol for conducting functional assessment was developed to address the severe self-injury of persons with developmental disabilities.

Dr. Tedd Carr (1977) and Dr. Brian Iwata developed a protocol for classifying and selecting treatments based upon “function” at the University of Florida.
The protocol has been refined and has been the subject of hundreds of research publications appearing mostly in journals devoted to practice of Applied Behavior Analysis.

The research has extended the analysis beyond self-injurious behavior of developmentally disabled persons to include persons with all types of behavior disorders, many different behaviors across all cognitive levels—including social skills.
Functions of Behavior

1. **Socially Mediated Positive Reinforcement (SMPR)**
   Access to items and activities act as reinforcer
   Attention acts as reinforcer

2. **Socially Mediated Negative Reinforcement (SMNR)**
   Removal of stimulus acts as reinforcer

3. **Automatic Positive Reinforcement (APR)**
   Behaviors produce stimulation that acts as a reinforcer

4. **Automatic Negative Reinforcement (ANR)**
   Removal of some bodily stimulation acts as a reinforcer
   (Pain Reduction) Usually treated medically
Evidence-Based ABA Procedures to Teach Social Communication Skills
The Effectiveness of Social Skills Training Groups for Individuals with Autism Spectrum Disorder

Matthew Hotton¹ · Sarah Coles²

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Abstract Autism spectrum disorder (ASD) is characterised by social difficulties that can have a negative impact on an individual’s psychological and social wellbeing. To date, reviews of social skills training groups have mainly focussed on children, rather than adolescents and adults. This review aimed to critically evaluate studies published in the past 20 years that had used group-based social skills training to improve the social skills of adults and/or adolescents with ASD. Thirteen studies were identified, and group-based social skills training was generally effective at improving social skills.

Introduction

The Nature of Social Difficulties in Autism Spectrum Disorder

The Diagnostic and Statistical Manual of Mental Disorders, Fifth Edition (DSM-5) proposes ‘impaired social interaction and communication’ as key criteria for the diagnosis of autism spectrum disorder (ASD; American Psychiatric Association 2013). This reflects the combined nature of social interaction and communication difficulties in ASD. Social skills can be
Effectiveness of Social Skills Groups for Adolescents and Adults (Hotton and Coles, 2016)

- Peer review journals from 1994 to 2014
- Identified 230 studies of which 13 met inclusion criteria
- Individuals with ASD without intellectual impairment
- Social Skills Rating System
- Social Responsiveness Scale
- Test of Adolescent Social Skills Knowledge
- Autism Diagnostic Observation Schedule
Effectiveness of Social Skills Groups for Adolescents and Adults (Hotton and Coles, 2016)

- “Social Skills Treatment Groups show promising potential as being effective for improving social skills of adolescents and adults.”
- UCLA PEERs program most compelling
- Improvements in social interaction, social skills knowledge and friendship quality
- Improvements in mental health outcomes and quality of life
- Details on curricula used varied
- More research and better controlled research needed
Social Skills Training for Youth With Emotional and Behavioral Disorders and Learning Disabilities: Problems, Conclusions, and Suggestions

John W. Maag
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Teaching social skills to students with emotional and behavioral disorders and learning disabilities has become an accepted practice. Social skills training (SST), however, has often resulted in only modest and sometimes no changes in students’ social competence. One of the main reasons is that acknowledged problems have been largely ignored. The purpose of this article is to examine those problems both conceptually and critically and to suggest that research begin to focus on replacement behavior training as a possible way to increase the effectiveness of SST.
Recommendations (Maag, 2006)

- Generate a list of target social skills with caregivers and learners to increase social validity
- Use a functional analysis to teach appropriate social replacement skills for problem behavior
- Focus on peer groups
- Promote entrapment—recruiting natural communities of reinforcement
- Peers/Siblings/Parents/Teachers reinforce performance of a socially appropriate target behavior
Multiple exemplar training across teachers, stimuli, and environments (Stokes & Baer, 1977) to enhance generalization.
The National Autism Center’s and National Standards Project 2015

Findings and Conclusions

ADDRESSING THE NEED FOR EVIDENCE BASED PRACTICE GUIDELINES FOR AUTISM SPECTRUM DISORDERS
NAC PROJECT

Goals:

1. To provide an update to the previous project, NSP1, published as the National Standards Report in 2009. Specifically, NSP2 reviews peer-reviewed intervention outcome studies for children/adolescents/young adults with autism spectrum disorder (ASD) since the publication of NSP1. The dates of peer-reviewed studies range from 2007 to 2012.

2. To extend the review of intervention outcome literature to include adults (22 years and older) with ASD.

3. To incorporate relevant feedback received regarding NSP1 categorization. The NSP2 report is intended to be more specific than the NSP1 report regarding the interventions it identifies as beneficial.

4. To assist parents, caregivers, educators, and service providers in understanding how to integrate evidence-based interventions into a well-rounded, individualized educational or behavioral program.

http://www.nationalautismcenter.org/resources/
Established Treatments

- Behavioral Interventions
- Cognitive Behavioral Intervention Package
- Modeling
- Peer Training
- Natural Teaching Strategies
- Parent Training
- Scripting
- Social Skills Package
- Story-based Intervention
A Meta-Analysis of Video Modeling and Video Self-Modeling Interventions for Children and Adolescents With Autism Spectrum Disorders

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Jennifer Akullian
Indiana Resource Center for Autism
Indiana Institute on Disability and Community
Indiana University, Bloomington

Abstract: This meta-analysis examined the effectiveness of video modeling and video self-modeling (VSM) interventions for children and adolescents with autism spectrum disorders (ASD). Twenty-three single-subject design studies were included in the meta-analysis. Intervention, maintenance, and generalization effects were measured by computing the percentage of nonoverlapping data points (PND). Results suggest that video modeling and VSM are effective intervention strategies for addressing social-communication skills, functional skills, and behavioral functioning in children and adolescents with ASD. Results also indicate that these procedures promote skill acquisition and that skills acquired via video modeling and VSM are maintained over time and transferred across persons and settings. The results suggest that video modeling and VSM intervention strategies meet criteria for designation as an evidence-based practice.
Bellini (2007) Findings:

- 23 studies
- Video Modeling and Video Self-Modeling (VSM) are effective intervention strategies for teaching social-communication skills, functional skills, and behavioral functioning
- Effectively promote skills acquisition, maintenance and transferred across persons and settings
- Self or prestigious peer, independent execution, contact reinforcement
Social Skills Interventions for Individuals with Autism: Evaluation for Evidence-Based Practices within a Best Evidence Synthesis Framework

Brian Reichow · Fred R. Volkmar

Published online: 5 August 2009
© Springer Science+Business Media, LLC 2009

Abstract  This paper presents a best evidence synthesis of interventions to increase social behavior for individuals with autism. Sixty-six studies published in peer-reviewed journals between 2001 and July 2008 with 513 participants were included. The results are presented by the age of the individual receiving intervention and by delivery agent of intervention. The findings suggest there is much empirical evidence supporting many different treatments for the social deficits of individuals with autism. Using the criteria Social difficulties should differentiate children with autism spectrum disorders (ASD) from those with other developmental disorders (Klin et al. 2007) and are more heavily weighted than other areas in current (DSM-IV and ICD-10) diagnostic approaches (American Psychiatric Association 1994; World Health Organization 1994). Difficulties in the social arena typically remain an area of great vulnerability even for the most cognitively able individuals on the autism spectrum (Howlin 2005; Shea and Mesibov 2005).
Key components of an effective social group:

- Mean age of 10 years
- Clinic based
- Minimum of one session per month for 12 months
- Medium and higher cognitive levels
Established Treatments

Behavioral Skills Training Model

- Definition and Guided Instruction
- Identifying Situations when the Skill may be used
- Both Positive and Negative Examples (Modeling)
- Role Playing
- Performance Feedback and Reinforcement for Skill use
- Strategies for Transfer
- (Bullis, 2001; Rutherford, et al., 2004)
Transfer the Technology

- Transfer of Social Skills through collaboration and communication with parents/school in Early Childhood and Elementary school

- Self Monitoring may be a viable intervention in middle school and high school

- Research supports the use of self monitoring with teacher matching for middle school students (Lloyd et al., 2006)
Social Opportunities

- Joint Attention Training–Adults
- Peer Play
- Party Club
- Friendship Camp
- Friends and Fitness
- Social Communication Therapy Group
- Social Partnerships
- Businessperson’s Social Skills
Small Group Social Skills

Social Communication Therapy Group
Friends and Fitness
Goal

- Provide an overview of two of the social skills groups in terms of structure, followed by sample Functional Assessment and Conceptual Analyses to teach:
  - A simple classroom skill of hand raising as mand
  - A more complex skills of conversation.
Goal Selection

Verbal Behavior Milestones and Assessment and Placement Program (VB MAPP–Sundberg, 2008)
Assessment of Basic Language and Learning Skills–Revised (ABLLS–R–Partington, 2006)
The Developmental Profile–Third Edition (DP–3)
The Test of Problem Solving–3
Vineland Adaptive Behavior Scale–2
Kasper Inventory of Social Skills and Needs (KISSLN)
Open ended interview w/parent, teacher regarding inventory and Problem behavior
# The Kasper Inventory of Social Skills and Needs

<table>
<thead>
<tr>
<th>Antecedent-Response</th>
<th>Consequence</th>
<th>Potential function</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Does the learner engage in problem behavior when a peer is engaging in behavior that is bothering him?</strong></td>
<td>If yes, What typically happens next?</td>
<td>Escape</td>
</tr>
<tr>
<td></td>
<td>Adult Separates</td>
<td>Escape</td>
</tr>
<tr>
<td></td>
<td>Adult Directs Peer to stop</td>
<td>Escape</td>
</tr>
<tr>
<td></td>
<td>Peer stops</td>
<td>Escape</td>
</tr>
<tr>
<td></td>
<td>Peer/Adult provides dramatic response</td>
<td>Attention</td>
</tr>
<tr>
<td></td>
<td>Other:</td>
<td></td>
</tr>
<tr>
<td><strong>Does the learner frequently tattle on peers for minor issues?</strong></td>
<td>If yes, What typically happens next?</td>
<td>Escape</td>
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<tr>
<td></td>
<td>Other:</td>
<td></td>
</tr>
<tr>
<td><strong>Is the learner overly bossy or teacher-like when a peer is engaging in behavior that is bothering him?</strong></td>
<td>If yes, what typically happens next?</td>
<td>Escape</td>
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<td></td>
<td>Other:</td>
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</tr>
<tr>
<td><strong>Is the learner taken advantage of by dominant peers?</strong></td>
<td>If yes, what typically happens next?</td>
<td>Escape</td>
</tr>
<tr>
<td></td>
<td>Peer leaves area</td>
<td></td>
</tr>
<tr>
<td></td>
<td>Peer/adult provides dramatic response</td>
<td>Attention</td>
</tr>
<tr>
<td></td>
<td>Other</td>
<td></td>
</tr>
</tbody>
</table>

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<tr>
<th>Importance</th>
<th>Appropriately reporting (three step fix it)</th>
<th>The learner will manage minor conflicts independently and gain adult assistance when needed.</th>
<th>The learner will ask once nicely, ask once strongly and get an adult for help if peer behavior is aversive and no adult.</th>
</tr>
</thead>
<tbody>
<tr>
<td>0 1 2 3 4</td>
<td></td>
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<th>Importance</th>
<th>Minding your own Business</th>
<th>The learner will ignore or self-advocate when peers under jurisdiction of adults engage in behavior aversive to him.</th>
<th>The learner will ignore, walk away or ask to move if peer behavior bothers him and an adult is near the peer.</th>
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<tr>
<th>Importance</th>
<th>Dealing with Bullies (Quick Talk and Walk)</th>
<th>The learner will safely advocate for his needs when presented with dominant peer (bully)</th>
<th>The learner will state “I don’t like that” and move away from a bully and toward an adult.</th>
</tr>
</thead>
</table>
Indirect Assessment (KISS)
Direct observation in our group during trial group (Manipulation of environmental variables within group)
Utilization of peer tutors and seasoned participants for environmental manipulations
Functional Assessment/Analysis of problem behavior for children within our program
Team (Parents/School/Other Therapies) collaborate to select socially valid goals
Team (Parents/School/Other Therapies) collaborate to contrive opportunities for entrapment across settings
Staff Training

- Each child may be provided with a shadow (treatment therapist) who is trained to facilitate interaction

- Support staff are specifically trained in:
  - Support Hierarchy
  - General Prompting
  - General Shadowing/Positioning Guidelines
  - Individualized Methods for prompting/fading
  - Methods for alerting the instructor/other TT
    - Reinforcement or missed skill
  - Individualized reinforcement systems
  - Applying BIPS within the social setting
Peer Training

Peers are specifically trained in:

- Providing Social Reinforcement (Showing support)
- Being Persistent in Gaining Attention (Get close, say name, touch shoulder, give item)
- Coaching (Tell–Show–Do)
- Acting (emotions, contriving MO)
- What approximations to accept
- Assisting in Prompting or Delivery of Reinforcement based on Group vote and learner agreement
- Fluent in all Social Skills
- Peer Reinforcement System
- Planned Ignoring
Providing Social Reinforcement

- Smiling, Nodding
- Clapping, Quiet Pump, Jumping
- Cheering by Name
- High fives, fist bumps
- Specific Praise
- Encouraging Words
- Replacement Phrases for Negative Statements
- Responding to mands (simple and complex)
Acting

- Ignoring or directly reinforcing problem behavior
- Contriving situations to teach social skills
  - Need for assistance
  - Implied Rules
  - Contriving mands for information
    - Transitive MO
    - Mands for Information–Conversation

- Fluent in all Social Skills to be Instructed
Methods and Procedures for SCTC

- Direct Instruction Methods for Group Rules
  - Group Goals/Group Contingency/Content
- Greeting with Implied Rule
- Behavioral Skills Training Model with multiple video models used for instruction
  - Brief explanation
  - Video models with self-instruction
  - Role play and guided practice
- Application Activity: Realistic application contrived through games or application tasks.
- Farewells
Methods and Procedures for Friends and Fitness

- Team taught: BCBA, Personal Trainer
- Direct Instruction Methods for Group Rules
- Group Goals/Group Contingency
- Group Structured Greeting
- Circuit 1: 10–20 minute nonstop cardio
- Behavioral Skills Training Model with multiple video models used for instruction
- Application Activities/Games
Physical Exercise Facts

The U.S. Department of Health and Human Services recommends that young people aged 6–17 years participate in at least 60 minutes of physical activity daily.

Physical Exercise Facts

- When children and adolescents participate in the recommended level of physical activity—at least 60 minutes daily of Moderate Vigorous—multiple health benefits accrue.
Physical Exercise Facts

- There is substantial evidence that physical activity can help improve academic achievement, including grades and standardized test scores.
- The articles in this review suggest that physical activity can have an impact on cognitive skills and attitudes and academic behavior, all of which are important components of improved academic performance. These include enhanced concentration and attention as well as improved classroom behavior.
- Increasing or maintaining time dedicated to physical education may help, and does not appear to adversely impact, academic performance.
Moderate Vigorous Physical Exercise Reduces Stereotypy

“...experimental literature indicates that physical exercise can positively influence both appropriate and inappropriate behaviors, including stereotypy…”

According to Kern, Koegel and Dunlap (1984) ...”15 minutes of continuous vigorous physical activity was always followed by a reduction in stereotypy.

Goals for Friends and Fitness

- Provide motivation, skills, and facilitated practice with careful prompting and prompt fading that children with autism need in order to benefit from social opportunities like recess, gym class, family and neighborhood organized games, and community offered athletics.
Methods and Procedures for Friends and Fitness

- Brief explanation
- Video models with self-instruction
- Role play and guided practice

- Application Physical Activity or Game
- Direct instruction in tact, receptive, and/or tacting teams, athletes frequently the content of conversations in the Midwest

- Group cleanup
- Farewells
Methods and Procedures for SCTC

- Parent instruction in social skills
- Parent interview at end of session to assess generalization/social validity
- Parent receives graph of data
All Group Social Skills

Pre–intervention probe is conducted
Classes meet continuously
  ◦ Friends and Fitness 1–2 times per week
  ◦ Social Communication Therapy Class 1 per week
  ◦ Units last 6–10 weeks
Post–intervention probe conducted
Daily data collected
Functional Analysis and Conceptual Analysis of a Classroom Social Skill: Raising Hand to Mand
Functional Analysis of Learners Talking out During Instruction

- Observation and Systematic Manipulations revealed different functions for different learners
- Socially mediated positive reinforcement (adult attention, peer attention)
- Automatic Positive reinforcement
  - echolalia/scripting
  - perseverative interests
- Automatic Negative reinforcement—negative statements
Socially Mediated Positive Reinforcement
Understanding Talking Out in Class Maintained by SMPR

Antecedent → Behavior → Consequence

MO for Attention

MO for Item/Information

Request Attention
(Eye Gaze, Gesture, Comment)

Request Information

Reinforcement in the form of item/attention or information from adults/learners VR schedule

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Hand Raising to Mand

Antecedent → Behavior → Consequence

- MO for Attention
- MO for Item/Information

Respond to relevant SDs that occasion hand raising

Request Attention
(Hand Raised Continuously until Name Spoken, Body Language)
Which leads to opportunity to
Mand Item, Attention or Information

Attention
Differential Reinforcement specific to that Learner
SDs that Occasion Hand Raising to Mand (Tangible/Attention/Information)

1. Alerting Signal
2. Teacher Facing Group
3. Teacher Talking
4. Signal of reinforcement available (Treats in hand) or teaching imminent (LCD projector on, Instructional Material Present)
5. Physical Arrangement of Learners
   1. Bring it in
   2. Hand on the wall
   3. Stand on the line
6. Stink Eye, “is you name Justin?”
Parts of a Behavior Intervention Plan

1. **Antecedent Manipulations**: Arrange the environment to reduce the likelihood the behavior will occur.

2. **Extinction for the Problem Behavior** (when possible) Remove the reinforcer that has previously followed the problem behavior.

3. **Direct Instruction and Differential Reinforcement of Replacement Behavior** that serves the same function.

4. **Instruction in other necessary skills**.
Antecedent Manipulations for Talking Out Maintained by Socially Mediated Positive Reinforcement

- Allow 5–7 minutes of Free Time after entry into the social skills space for learners to talk to staff and each other
- Review of Rules for hand raising with choral responding in Structured Group at Beginning of Each Session
  - Raise Hand
  - Keep Mouth Quiet
  - “Remember I call on people who raise their hand quietly. “
Extinction for Talking Out Maintained by Socially Mediated Positive Reinforcement

- When the learner talks out, do not respond.
- Staff prompts learner to raise hand nonverbally and gives “quiet finger”.
- Instructor does not give eye contact. Instructor uses finger count to signal S–Delta condition with at least 5 count while continuing with class, restating rule, or calling on learners who raise their hand quietly.
- Restart count for repeat talk outs
- Call on learner after minimum 5 seconds of quiet hand raise.
- Reinforce the target behavior

Bt quiet finger.mp4
Program Description

Child’s Name: ______________________  Began On: ______________________

ABLLS Area: RECEPTIVE

Skill/ABLLS item: Follow instruction to wait quietly with pointer finger

Teaching Procedure:
Hold up a promise (special edible that he does not have access to) and present pointer finger (and verbal instruction “wait quietly” if the level indicates) approximately 6 inches from learner’s mouth. If the learner waits quietly for duration of interval, deliver the promise. If the learner does not wait quietly for the duration of the interval, remove the promise and present 5 intraverbals and/or echoics. Restart the teaching procedure up to 2 additional times. If the learner does not wait quietly for any of the 3 presentations and subsequent intraverbals and/or echoics, put the promise away, and move on to another mastered item.

Setting: ITT (Intensive Table Teaching) and NET (Natural Environment)

Error Correction Procedure:
See above teaching procedure

Targets:
Finger plus verbal instruction 1 second ITT
Finger plus verbal instruction 2 seconds ITT
Finger plus verbal instruction 3 seconds ITT
Finger plus verbal instruction 4 seconds ITT
Finger plus verbal instruction 5 seconds ITT
Finger plus verbal instruction 5 seconds NET
Finger 5 seconds ITT
Finger 5 seconds NET
Finger 8 seconds ITT
Finger 8 seconds NET
Finger 10 seconds ITT
Finger 10 seconds NET
Finger 15 seconds ITT
Finger 15 seconds NET
Fade promise

Change error correction to stating “the finger means wait quietly” and representation up to 3 times prior to removal from setting and running the intraverbals or echoics.
Differential Reinforcement of Raising Hand Quietly to Mand (Replacement Behavior that Serves Same Function)

- Set up practice trials to mand when various SDs are in place (e.g. Teacher standing at front of class holding reinforcer—candy, mysterious container, etc.)
- Staff prompts learner to raise hand nonverbally (MO in effect) and gives “quiet finger”
- Instructor calls on learner
- Learner mands
- Instructor delivers lavish specific praise, item/attention/information and points toward group contingency
Differential Reinforcement of Other Necessary Skills

- Set up practice trials to respond to relevant SDs
  - Pair other alerting signals, Mand when various SDs are in place (e.g. Teach standing at front of class holding reinforcer—candy, mysterious container, etc.
- Staff prompts learner to raise hand nonverbally and gives “quiet finger”.
- Instructor calls on learner or nods at learner or looks at learner
- Learner mands
- Instructor delivers lavish specific praise and reinforcement.
Differential Reinforcement of Other Necessary Skills

- Set up practice trials to respond to relevant SDs (Structure of group)
  - Direct instruction and differential reinforcement
    - responding to the alerting signal.
    - talking when teacher’s back is turned or out of room and ceasing talking when teacher faces the group or re–enters if the setting is structured (hand on wall, standing on line, seated on floor)
    - Mand when various SDs are in place (e.g. Teach standing at front of class holding reinforcer – candy, mysterious container, etc.)
Automatic Positive Reinforcement–Echolalia
Understanding Talking Out in Class maintained by Automatic Reinforcement—Echolalia

Antecedent → Behavior → Consequence

Internal

Verbal Behavior of Teacher and Learner

Echo Verbal Behavior of Others (Echolalia)

Reinforcement in the form of sensory stimulation FR:1
Antecedent Manipulations for Talking Out Maintained by Automatic Positive Reinforcement—Echolalia

- Allow 5–7 minutes of Free Time and Echolalia after entry into the social skills space
- Review of Rules with choral responding for Talking in Structured Group at Beginning of Each Session
  - Raise Hand
  - Keep Mouth Quiet
  - “Remember I call on people who raise their hand quietly.”
- Consistently use hand signal for choral instruction
- Consistently use “quiet finger” and DI hand signal
Extinction for Talking Out Maintained by Automatic Positive Reinforcement—Echolalia

- When the teacher presents instructions, learner is presented with the quiet finger to block echo response.
- When learner talks out, do not respond, present quiet finger.
- If talking persists, follow plan
Differential Reinforcement of Echoing teacher when given response to chorally respond and when quiet in response to quiet finger

- Staff prompts learner to cease talking during instruction via “quiet finger” (initially awarded individual tokens—now faded).
- Staff removes “quiet finger” and awards tokens for responses to choral responding hand signal. (initially awarded individual tokens—now faded)
- Instructor delivers lavish specific praise, item/attention/information and points toward group contingency for following signals.
Differential Reinforcement of Other Necessary Skills

- Set up practice trials to respond to relevant SDs
  - Direct instruction and differential reinforcement of responding to the alerting signal quietly.
  - Direct instruction and differential reinforcement of talking when teacher’s back is turned or out of room and ceasing talking when teacher re-enters if the setting is structured (hand on wall, standing on line, seated on floor)
  - Direct instruction and reinforcement for echoing is response to “Everybody, Everybody” with hand signal.
Differential Reinforcement of Other Necessary Skills

- Staff delivers tokens for remaining quiet in response to quiet finger or “5 seconds of quiet” or “10 seconds of quiet” signal.
- Staff uses verbal praise sparingly as it may be echoed.
- Learner has long history of reinforcement for immediate echolalia. Discrimination training necessary at onset of each class due to intermittent reinforcement in other similar situations.
Automatic Positive Reinforcement
“Video Scripting”
Understanding Talking Out in Class Maintained by Automatic Positive Reinforcement—Vocal Stereotypy

Antecedent→Behavior→Consequence

- Internal
  - Lack of Sufficient Turns/Engagement
  - Vocal Stereotypy in the form of Video Scripting
  - Reinforcement in the form of sensory stimulation FR:1
Reduction in Talking Out Maintained by APR–Vocal Stereotypy

- Antecedent Manipulation
  - Discriminative Stimulus for DRO Interval or RIRD in effect (bracelet, ring, etc.) (next slide)
  - Increase in individual/Group Turns
- Extinction (interruption/punishment)
- Interrupt, RIRD or restart of timer for DRO
- Differential Reinforcement of Alternative Behavior that serves same function: None
- Instruction in Other Necessary Skills: Continue to promote social communication skills and independent play skills
Automatic Positive Reinforcement
Socially Mediated Positive Reinforcement
Understanding Talking Out in Class Maintained by Automatic Positive Reinforcement/Socially Mediated Positive Reinforcement

Antecedent → Behavior → Consequence

MO for Attention

Internal

Lack of Sufficient Turns/Engagement

Excessive Transformer Talk

Attention VR: ?? Reinforcement in the form of sensory stimulation FR: 1

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Reduction in Talking Out Maintained by APR/SMPR–Transformer Talk

- **Antecedent Manipulation**
  - 5–7 minutes of free time prior to group
  - Review Hand–raising rule

- **Extinction**
  - No instructor response, prompt, quiet finger, time delay

- **Differential Reinforcement of Alternative Behavior** that serves same function: Short, on topic responses reinforced abundantly. Initially, allow transformer talk after hand raised.
Reduction in Amount of Talking About Transformers Maintained by APR/SMPR

- **Antecedent Manipulation**
  - After he raises, hand ask “What do you want to talk about?”

- **Extinction—Not yet**

- **DRL (allow 2 times or 2 sentences)**

- **Instruction in Other Necessary Skills:**
  - Teach learner to tact MOs of others
  - Instructor tells group topic and group votes if they want to hear about it or not.
Learner counts votes and tacts individuals who like to hear about transformers.
If majority, DRL, If not, EXT, (Teaching learner that others have MOs that differ from his)
Teach learner to recall learners who have MO for transformer talk and approach at free time.
Teach learner signals that learners are bored with topic and needs to shift topic
Teach learner to mand for information from peer
Teach learner to tact peer interests and initiate conversation regarding peer interests
Automatic Negative Reinforcement
Understanding Talking Out in Class maintained by Automatic Negative Reinforcement—Negative Statements

Antecedent→Behavior→Consequence

- Internal Anxiety
- Vocal Stereotypy in the form of Negative Weather Statements
- Reinforcement in the form of Anxiety Reduction VR:??????

Rain Clouds
Reduction in Talking Out Maintained by ANR–Vocal Stereotypy–Negative Statements

- Antecedent Manipulation
  - Increase in Individual/Group Turns
  - Close Blinds

- Extinction (not under social control)
  - Interrupt, Response blocking with Calming Strategy
    Incompatible with Negative Statements for whole group

- Differential Reinforcement of Alternative Behavior that serves same function: Prompting and Reinforcement of Calming Strategies with breathing, Happy Scripts

- Instruction in Other Necessary Skills: Desensitization with Hierarchy of rain videos of systematically increasing loudness while teaching competing behavior with physiological reduction in stress response; video model of calming in response to seeing rain, differential reinforcement of use of coping strategies.
Functional Analysis and Conceptual Analysis of a Complex Social Skill: Conversation
Understanding Conversation

Antecedent → Behavior → Consequence

MO for Attention

MO for Information

Request Attention
(Eye Gaze, Gesture, Comment)

Request Information

Attention
(Eye Gaze, Gesture, Comment)

Provide Information
(IV repertoire including shared interests/experience)

Attention Information

Attention Ongoing Interaction
Functional Analysis of Defective Mands for Attention

- Observation and Systematic Manipulations revealed similar functions for different learners
- Socially mediated positive reinforcement
- Problem behavior maintained by Peer attention (lip popping, repeated questions)
- Defective Mands:
  - Repeated Greetings/Questions maintained by attention
  - Awkward Initiations/Attempts to Join maintained by attention
  - Latencies
Antecedent → Behavior → Consequence

- Peer/Adult present
- Problem Behavior: Repeated Greetings, Repeated Questions, Awkward Initiations
- Attention from Adults and Peers at a VR: ??

MO for Attention
Manding Attention from Peers

1. Reduce Likelihood of Problem Behavior
   DRO tokens to earn opportunity to ask questions from a list

2. Peer coaching and reinforcement for ignoring lip popping and repeated questions
   MYOB training

3. Direct Instruction and Reinforcement of Replacement Behaviors
   Manding For Attention
   Complimenting

4. Other Necessary Skills:
   Responding to Mands for Attention
Understanding Manding for Attention
Antecedent→Behavior→Consequence

MO for Attention

MO for ongoing Interaction

Appearance Change
New Item
Salient Item
Remarkable Act

Mand for Attention
Self-Tact
Appearance change,
New Item,
Salient item
(shared interest)
Remarkable Act

Attention
Ongoing Interaction
Understanding Complimenting

Antecedent → Behavior → Consequence

MO for Attention

MO for ongoing Interaction

Appearance Change
New Item
Salient Item
Remarkable Act

Tact
Appearance change,
New Item,
Salient item
(shared interest)
Remarkable Act

Mand for Attention

Attention Ongoing Interaction
Understanding Conversation
Antecedent→Behavior→Consequence

MO for Attention

MO for Information

Request Attention
(Eye Gaze, Gesture, Comment)
Request Information

Provide Information
(IV repertoire including shared interests/experience)

Attention Information

Attention Ongoing Interaction
Antecedent → Behavior → Consequence

MO for Attention

MO for Information

Request Attention (Eye Gaze, Gesture, Comment (Lead in))

Request Information

Attention Information

Ongoing Interaction
Observation and Systematic Manipulations revealed similar functions for different learners

Socially mediated positive reinforcement

Defective Mands:
- Repeated Greetings/Questions maintained by attention
- Poor attending to verbal behavior of partner
- Wh question selection errors
- Latencies

Skills Deficit
- Wh questions discrimination
- Fluency for responding to verbal behavior of partner
- Limited intraverbal repertoire
Antecedent → Behavior → Consequence

MO for Attention

Skills deficits: Poor Attention to comment, Poor WH use, not fluent

Problem Behavior
Repeated Greetings
Awkward Questions
No/unrelated Comment

Attention from Adults and Peers at a VR: ??
Manding Information from Peers

1. Reduce Likelihood of Problem Behavior
   DRO tokens to earn opportunity to ask questions from a list
2. Peer coaching and reinforcement for ignoring lip popping and repeated questions
   MYOB training
3. Direct Instruction and Reinforcement of Replacement Behavior Component skills
   Attending to Comments
   Manding For Information
   Fluency Training
4. Other Necessary Skills:
   Follow-up Commenting
Target Social Skills
Level 1 Group Rules and Associated Goals

- Responding to an Alerting Signal: Hands on Head, Look at the teacher
- Giving up Reinforcers
- Finding a Dot to Sit or Stand On
- Personal Space
- Choral Responding
- Eye contact
- Responding to the Quiet Finger
- Responding to the Direct Instruction Hand Signal
- Intraverbal Rules
Goals associated with opening song

- Greeting in a structured format
- Attending to the Instructor
- Catching the Ball
- Answering “what’s your name?”
- Dancing
- Intraverbal Song
Goals associated with class structure

- Following group instruction
- Imitating peers or asking questions if you miss an instruction
- Waiting for the whistle
- Proceeding on the whistle
- Standing in line, behind the line, on the dot
- Meeting in the Middle
- Raising Hand to Volunteer
Social Skills/Sequences

- Accepting items from peers
- Manding to peer
- Following instructions from peers
- Finding a Partner (buddy up)
- When someone doesn’t answer (gaining attention, persistence)
- Asking to play a game
- Working together to achieve an adult-directed goal
Social Skills/Sequences

- Returning Greetings (less structured)
- Yes/No Manding to Peers
- Manding to join game
- Waiting in line
- Basic Calming Strategies
- Meet in the middle: Eye contact, waiting, common social exchanges (high fives, fist bumps)
Social Skills–Level 2

- Cheering
- Coaching
- Offering Assistance
- Simple Negotiation
- Advanced Negotiation
- Physical Problem Solving
- Self–Advocacy
  - Raising hand to mand
  - Voting your preference
  - Mand clarification you miss an instruction
  - Mand for turn when turn missed
  - Finding a quiet spot in a new environment
  - Asking for Music down, 10 seconds of quiet, break, sitting out of a game
Social Skills/Sequences

- Manding Attention from Peers
- Manding for Information
- Handling Loss
- Being a Good Sport
- Following Rules of Games
- Tacting Rules of Games (Implied)
- Three Step Fix It
- Mind your own Business
- Quick Talk and Walk (Bullies)
Social Skills/Sequences

- Tacting likes/dislikes of peers
- Predicting Peer behavior
- Complimenting
- Conversations
  - Short conversation
  - Long conversation
  - Conversational topics
  - Topic Questions
    - Opinion–Do you like
    - What Did you do?
Friends and Fitness Units

- Workout and Working It out
- Having a ball: Basketball
- Having a ball: Football
- March Madness
- Problem Solving
- Working together
- Winter Olympics
- Summer Olympics
- Boxing
Friends and Fitness Units

- Winter Sports
- Lawn Games
- Baseball
- Rock Climbing
- Obstacle Courses
- Volleyball
- Track and Field
- Swimming
- “First Marathon”
Offering Help
Offering Help
1. Decide if Someone needs help
2. Ask “Do you need Help?”

Do you need help?
3. Do it!

If they say Yes, Do it!
Figures of speech

- Give me some love
- Bring it in
- Push it back
- Sista
- Bro
- Shades
- Lid
- Eyes on Me
- Jumping the gun
- Shifting it into high gear
- Running out gas
- Breaking the record
- Killed it
- Nailed it
- You’re killing me
Winter Olympics

Unit Example
8–10 sessions
Being A Good Sport
Being a Good teammate

1. Watch your teammate
2. Cheer when your teammate takes his turn

Go___ go!
You can do it!
Come on

___!
You did it!
Great Job!
Sweet!
Awesome!
If your teammate can’t do it
Use Encouraging Words

Nice Try!
Good Try!
You’ll do it next time!
Being A Good Sport

Being a good loser
If you Lose, it’s ok to feel a little sad or a little mad.
If you Win, it’s ok to feel Happy!
If you win or lose, Say “Good game”
Goals and Data Collection
### General Group/Community Skills

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Criteria</th>
<th>Past/Current Status</th>
</tr>
</thead>
<tbody>
<tr>
<td>Waiting</td>
<td>The learner will wait appropriately if a reinforcer is not delivered immediately following a behavior</td>
<td>The learner will be able to wait appropriately for turn or activity for up to 5 minutes in a group setting</td>
<td>BL: Engages in repeated requesting. 4/2018 Waiting for discriminated short intervals (20 seconds) with whole group</td>
</tr>
<tr>
<td>Offering assistance</td>
<td>The learner will independently recognize when help is needed, and identify what type of help is needed</td>
<td>The learner will independently recognize when help is needed, identify what type of help is needed, and will offer assistance if he has the prerequisite skills in 3/3 contrived opportunities.</td>
<td>BL: Offers help, but may offer wrong type of help or not be able to help. 4/2018: Offers help appropriately at least once per session, when he lacks skill, he struggles and requires prompts to ask for assistance.</td>
</tr>
<tr>
<td>Improve non-verbal pragmatics</td>
<td>The learner will demonstrate appropriate head position and body orientation when speaking to others</td>
<td>When responding to social communication initiations from others in 3 out of 4 individual and 3 out of 4 group opportunities</td>
<td>BL: Frequently looks down rather than orienting to teacher or scanning group. 4/2018: Will look up when coached that his idea is amazing and needs restatement</td>
</tr>
<tr>
<td>Improve volume</td>
<td>The learner will demonstrate appropriate volume when speaking to others</td>
<td>When responding to social communication initiations from others as demonstrated by 3 or fewer requests for repetition per session</td>
<td>BL: Frequent requests for repetition needed in group situations</td>
</tr>
</tbody>
</table>
# Self-Advocacy Skills

<table>
<thead>
<tr>
<th>Volunteering</th>
<th>The learner will raise hand or follow the instruction to volunteer</th>
<th>The learner will raise hand or follow instruction to volunteer when he possesses the skills to conduct the task in 3/3 opportunities.</th>
<th>BL: Currently volunteers or offers assistance even when he lacks skills.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Raises hand to comment</td>
<td>The learner will raise hand and make succinct comment</td>
<td>The learner will raise hand and make a short, comment relevant to current topic in 3/4 opportunities.</td>
<td>BL: Currently fails to raise hand or raises hand and “forgets” or does not provide cogent statement in ¾ opportunities. 4/2018 Hand raising improved dramatically.</td>
</tr>
<tr>
<td>Advanced negotiation</td>
<td>The learner will negotiate with a peer (talk it out: first/then, combine, 3rd option) when directed/independently</td>
<td>The learner will use advanced/complex negotiation strategies when directed/independently without acquiescing in 3 of 4 opportunities</td>
<td>BL: Per parent report, acquiesces 4/2018 Noted to attempt to combine ideas x2</td>
</tr>
</tbody>
</table>
## Managing Peer Conflict/Peer Aversive Behavior

<table>
<thead>
<tr>
<th>Antecedent–Response</th>
<th>Consequence</th>
<th>Potential function</th>
</tr>
</thead>
<tbody>
<tr>
<td>Does the learner engage in problem behavior when a peer is engaging in behavior that is bothering him?</td>
<td>If yes, What typically happens next?</td>
<td>Adult Separates Adult Directs Peer to stop Peer stops Peer/Adult provides dramatic response Other: Escape Escape Escape Attention</td>
</tr>
<tr>
<td>Does the learner frequently tattle on peers for minor issues?</td>
<td>If yes, What typically happens next?</td>
<td>Adult Separates Adult Directs Peer to stop Peer stops Peer/Adult provides dramatic response Other: Escape Escape Escape Attention</td>
</tr>
<tr>
<td>Is the learner overly bossy or teacher–like when a peer is engaging in behavior that is bothering him?</td>
<td>If yes, what typically happens next?</td>
<td>Adult Separates Adult Directs Peer to stop Peer Stops Peer/Adult provides dramatic response Other: Escape Escape Escape Attention</td>
</tr>
<tr>
<td>Is the learner taken advantage of by dominant peers?</td>
<td>If yes, what typically happens next?</td>
<td>Peer leaves area Peer/adult provides dramatic response Other</td>
</tr>
</tbody>
</table>

### Appropriate reporting (three step fix it)

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>The learner will manage minor conflicts independently and gain adult assistance when needed.</td>
<td>The learner will ask once nicely, ask once strongly and get an adult for help if peer behavior is aversive and no adult</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Minding your own Business

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>The learner will ignore or self–advocate when peers under jurisdiction of adults engage in behavior aversive to him.</td>
<td>The learner will ignore, walk away or ask to move if peer behavior bothers him and an adult is near the peer</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

### Dealing with Bullies (Quick Talk and Walk)

<table>
<thead>
<tr>
<th>0</th>
<th>1</th>
<th>2</th>
<th>3</th>
<th>4</th>
</tr>
</thead>
<tbody>
<tr>
<td>The learner will safely advocate for his needs when presented with dominant peer (bully)</td>
<td>The learner will state “ I don’t like that” and move away from a bully and toward an adult</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
# Sports/Sportsmanship

<table>
<thead>
<tr>
<th>Goal</th>
<th>Objective</th>
<th>Criteria</th>
<th>Past/Current Status</th>
</tr>
</thead>
</table>
| Coaching (Tell, Show, Do) | The learner will independently provide a directive statement, gesture, or model to coach others | The learner will independently provide a directive statement, gesture, or model to coach others as needed in 3 out of 4 opportunities | BL: Attempts to make statements but is unclear  
4/2018 performing all steps with prompts |
# Conversational Skills

<table>
<thead>
<tr>
<th>GOAL</th>
<th>OBJECTIVE</th>
<th>CRITERIA</th>
<th>PAST/CURRENT STATUS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Commenting</td>
<td>The learner will provide an appropriate follow up comment during contrived conversations</td>
<td>The learner will provide an appropriate follow up comment during 3 out of 4 contrived conversations</td>
<td>BL: Noted occasionally</td>
</tr>
<tr>
<td>Asking appropriate follow up questions (how, where, when, what, why)</td>
<td>When given a conversational lead in, the learner will ask the appropriate WH question</td>
<td>The learner will ask a question contingent on previous statement from conversational partner in 3 contrived situations</td>
<td>BL: Noted occasionally, latency, formulation issues, 4/2018 100% accuracy during game format</td>
</tr>
<tr>
<td>Asking opinion questions</td>
<td>The learner will ask opinion questions of others</td>
<td>The learner will ask a question to determine opinion of others in ¾ contrived situations.</td>
<td>BL: Noted occasionally 4/2018 Selecting opinion comment during game format 100% accuracy</td>
</tr>
<tr>
<td>Getting to the point</td>
<td>The learner will provide a succinct answer when presented with a scenario or topic</td>
<td>The learner will provide a 5-7 word sentence to add to an ongoing topic or answer a question in ¾ opportunities.</td>
<td>BL: Wordy, imprecise sentences. 4/2018: Repeats after coaching</td>
</tr>
<tr>
<td>Describing steps of a task</td>
<td>The learner will state the steps of a task with 5-10 word sentences</td>
<td>The learner will describe a short task or relate a sequence of events with 3 5-10 word sentences to the group after individual practice with staff or peer.</td>
<td>BL: Scaffolding or interpretation needed.</td>
</tr>
<tr>
<td>Describing the rules of a game</td>
<td>The learner will state the given number of rules with 5-7 word sentences</td>
<td>The learner will describe game rules or class rules with 3 5-10 word sentences after individual practice with staff or peer.</td>
<td>BL: Scaffolding or interpretation needed. 4/2018: Currently working on rules of his own invented game.</td>
</tr>
<tr>
<td>Telling a joke</td>
<td>The learner will tell a simple joke</td>
<td>The learner will tell a simple joke with good eye contact, body posture, and volume after individual practice with staff or peer.</td>
<td>BL: Demonstrates motivation</td>
</tr>
</tbody>
</table>
# Daily Progress Notes Social Opportunity

(please complete at every session.)

**Child's Name:**

<table>
<thead>
<tr>
<th>Therapist:</th>
<th><strong>Target Behavior</strong></th>
<th><strong>Time:</strong></th>
<th><strong>Date:</strong></th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Behaviors</strong></td>
<td>Number of Instances</td>
<td>Notes</td>
<td></td>
</tr>
<tr>
<td>Mand “What”</td>
<td>1 2 3 4 5</td>
<td>Contrived 1x Daily</td>
<td></td>
</tr>
<tr>
<td>Mand “What”</td>
<td>1 2 3 4 5</td>
<td>Conversation Leads to Reinf(TMO)</td>
<td></td>
</tr>
<tr>
<td>Mand “Where”</td>
<td>1 2 3 4 5</td>
<td>Conversation Leads to Reinf(TMO)</td>
<td></td>
</tr>
<tr>
<td>Mand “Who”</td>
<td>1 2 3 4 5</td>
<td>Conversation Leads to Reinf(TMO)</td>
<td></td>
</tr>
<tr>
<td>Mand “Which”</td>
<td>1 2 3 4 5</td>
<td>Conversation Leads to Reinf(TMO)</td>
<td></td>
</tr>
<tr>
<td>Coaching</td>
<td>1 2 3 4 5</td>
<td>Talk Show Do</td>
<td></td>
</tr>
<tr>
<td>Negotiation</td>
<td>1 2 3 4 5</td>
<td>Simple Complex</td>
<td></td>
</tr>
<tr>
<td>Self-Advocacy</td>
<td>1 2 3 4 5</td>
<td>Votes volunteer clarify missed</td>
<td></td>
</tr>
<tr>
<td>Conversation</td>
<td>1 2 3 4 5</td>
<td>4+ exchanges only</td>
<td></td>
</tr>
<tr>
<td>Cooperate Goal</td>
<td>1 2 3 4 5</td>
<td>Adult instructed Peer initiated</td>
<td></td>
</tr>
<tr>
<td>Coping Strategy</td>
<td>1 2 3 4 5</td>
<td>Tt cdc cb ls 8 break</td>
<td></td>
</tr>
</tbody>
</table>

**General Comments:**

**Therapist Signature:**
# Daily Progress Notes

(Please complete at every session.)

**Child's Name:**

**Therapist:**

<table>
<thead>
<tr>
<th>Behaviors</th>
<th>Problem Behavior</th>
<th>Number of Instances</th>
<th>Comments</th>
<th>Date</th>
<th>Time Met</th>
</tr>
</thead>
<tbody>
<tr>
<td>Greeting</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Mands to Peers</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Responds Phys</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Initiates Phys</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Group Instruction</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Accepts Items</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Coop Peer</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Choral Respond</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self Stim Circle</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>Self Stim Active</td>
<td></td>
<td>1 2 3 4 5</td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

**General Comments:**
# Daily Progress Notes

*Please complete at every session.*

**Child’s Name:**

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<th>Therapist:</th>
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<th>Time:</th>
<th>Date:</th>
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**General Comments:**
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Three-step fix it yourself strategy:
1. Ask once nicely
2. Ask once strongly
3. Get an adult for help
Benefits of the Group Contingency

- Encourage each other
- Coach each other
- Learn to influence each other
- Generate new games
- Generate cohesive rules to games
- Work it out
- Problem Solve
INTENSIVE CLASS RESEARCH and RESULTS

Or go to 296
The purpose of this study was to examine the effects of a behaviorally-based treatment package to improve social skills, inferencing, and motor skills for children with autism spectrum disorder age 6-11 within the context of a fitness based social communication group.
• Specific skills in three domains: social communication/social skills, logical inferencing, and motor skills were selected for treatment.
• Maintenance of effects at a three months follow up was probed.
Method

Participants

- Seven children with a diagnosis of autism spectrum disorder ages six to eleven with Intermediate or Advanced learner profiles according the Assessment of Basic Language and Learning Skills-Revised (Partington, 2006), or the Verbal Behavior Milestones Assessment and Placement Program (Sundberg, 2008)
Typically developing peers who received four hours of training in interacting and promoting social and motor skills in children with autism spectrum disorder, entrapment and self-reinforcement via a token system.
Peer Training

Peers taught strategies

- Gaining attention
- Prompting requests
- Gaining attention and persisting until a child responds to a question or direction
- Reinforcing social attempts
- The primary intervention targets involved pairing with reinforcement, manding and initiating and maintaining interactions with the peer.

Reinforcement System
Setting

- Local community center comprised of indoor meeting room with PowerPoint capabilities, kitchen area, and outdoor playing field
Procedures

- Each participant with autism spectrum disorder received treatment in a group format for 3 hours, 5 days per week for two weeks.
Behavioral Skills Training including a brief explanation of the target skill with choral responding, modeling, guided practice, and feedback during application exercises was conducted.
- Video models were included for social skills and inferencing.
- Role play was included for social skills only.
- Each child with autism spectrum disorder was provided with a shadow who was an employee of The Center and received 4 hours of training on facilitation of the goals of the study as well as probe procedures and scoring criteria. Staff engaged in role play until proficiency was demonstrated and until a score of 80% or higher was achieved on a quiz containing the training content.
Corrective feedback was provided to staff if needed by the lead instructor during training and throughout the study.
Measurement

- Baseline: Baseline cold probe data were collected for each skill for each participant during the initial session.
Measurement

- For social skills, the lead instructor would alert staff and peer models that a probe was about to be conducted. An instruction would be provided to the group and no prompting occurred. Shadows scored participant responses as Y or N for correct and incorrect/no response respectively. Some social skills contained several components (e.g. Finding a partner: get close, eye contact, mand) and each component was scored individually.
Baseline for motor skills consisted of the personal trainer modeling each skill individually for each participant who was then asked to perform the skill. Personal trainer and lead instructor and/or shadow scored the response according to criteria as detailed above.
Baseline for Inferencing consisted of viewing a 1-2 minute video of children engaging in a recess game and each participant was asked to tact the game. Probe data was collected as detailed above.
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Post Treatment data at the end of the second week and follow up data three months after the treatment ended were collected in a manner identical to the initial probe. One subject was not available for follow up probe.
Experimental Design

- AB design with maintenance probe across subjects
- IOA calculated using: Agreements/(Agreements + Disagreements) and was greater than 80%.
Results

- Analysis of results reveal that all but one participant (who achieved a perfect score on social skills in baseline) demonstrated improvement in social skills and inferencing at the end of treatment and maintained higher levels of accuracy over baseline at the three month follow up.
Results of motor skills probe were less consistent with 4/7 participants demonstrated improvement at the study’s end and maintained at follow up; one subject achieving a perfect score on probe and maintaining, and two subjects exhibiting lower accuracy at study completion, but improvement at the three month follow up probe.
- Parent report indicated generalization of skills to other environments.
- Three participants are currently participating in community offered athletic activities.
Results suggest that this treatment package may be effective in improving social skills, inferencing, and fitness, and may promote greater community integration in athletically-oriented social activities.

A major limitation is the complex treatment package which prohibits identification of critical independent variables.
Figure 1. Percentage of social skills executed correctly by participants in baseline, post-treatment, and at three month follow-up.
Figure 2. Percentage of inferencing questions answered logically by participants in baseline, post-treatment and at three month follow up.
Figure 3. Percentage of motor skills executed correctly by participants in baseline, post-treatment, and at three month follow up.
Social Skills Instruction

- Integration or proximity is NOT social skills instruction
- Social skills training require instruction, modeling, guided practice with feedback, generalization and monitoring.
- Facilitators (peers and adults) require training, monitoring, and feedback.
- Data collection is essential to ensure that training is effective
Additional Models

- Facilitated Play Groups
- Social skills groups (small, individual)
- Facilitated Recess
- Lunchtime Social Skills groups
- Afterschool social clubs
- Facilitated camp or other club (girl scouts, dance, etc.)
- Social skill of the month
Life Long Skills

- In facilitated peer interaction, children are provided with guided practice in social skills, such as how to communicate, cooperate, and solve problems. They practice controlling their emotions and responding to the emotions of others. They develop the ability to negotiate.

- These are life long skills that will impact their quality of life.
“Social Interaction skills are critical to successful social, emotional, and cognitive development. Effective social skills allow us to elicit positive reactions and evaluations from peers as we perform socially approved behaviors” (Ladd & Mize, 1983)


References


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