THE EFFECTS OF A GROUP PARENT-COACHING PACKAGE ON THE BEHAVIOR
OF CHILDREN WITH AUTISM AND THEIR PARENTS

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Support for parents is an important part of treatment programs for children diagnosed with autism. Parent training programs have generally focused on prescribed goals in one-on-one training settings with measures directly related to the goals. Of interest here are the few studies that included collaborative goals, expanded measures, and group training. Benefits of such approaches include the establishment of natural communities of reinforcement and better understanding of the breadth of effects. The purpose of this study was to determine if a group coaching approach would be effective in changing a large range of parent and child skills. This experiment involved group sessions (presentations, discussion, video sharing, and problem solving) and three individual in-vivo coaching sessions. The intervention took place over the course of four weeks. Direct measures included a parent skills checklist and child target behaviors. Results indicated an overall improvement on most measures that maintained or improved at follow-up.
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INTRODUCTION

Early intensive behavioral intervention (EIBI) is a generally accepted evidence-based treatment for children with autism (Eikeseth, Smith, Jahr, & Eldevik, 2007; McEachin, Smith, & Lovaas, 1993). In fact, programs employing procedures and techniques based on the principles of applied behavior analysis (ABA) have produced marked improvements in skill acquisition and the reduction of problem behaviors in children of all ages and levels of functioning (McEachin, Smith, & Lovaas, 1993; Peters-Scheffer, Didden, Korzilius, & Sturmey, 2010).

One benefit of a comprehensive behavioral intervention is that it targets all individuals within the behavioral system (Risley, 1996). That is, all who come into contact with the child with autism are provided the necessary resources and training to enhance the efficacy of the intervention as a whole. Thus, administration, direct-care staff, public school teachers or staff, and parents are included in the development and implementation of the behavioral intervention.

Specifically targeting parents can have many benefits for the treatment team, family, and child. If parents are trained in intervention procedures, these procedures can be implemented at home as well. This can assist with the generalization of skills to different environments and different people. With the generalization of skills, these behaviors are more likely to maintain over time (Stokes & Baer, 1977). In fact, there is evidence to suggest that parent-implemented procedures may lead to better generalization and maintenance of skills than those implemented by therapists (Koegel, Schreibman, Britten, Burke, & O’Neill, 1982).

Furthermore, parent coaching may address situations in which competing contingencies exist. A parent may be less likely to implement procedures that are counterproductive to the child’s treatment plan if they have learned to implement the same procedures at home. For example, challenging behavior may not receive social attention at school but may be
inadvertently reinforced at home. Once a parent is coached in effective techniques, such as how to identify the ABC’s (antecedent, behavior, consequence) in their environment, the parent can learn to regulate social attention in ways similar to the intervention setting.

Finally, parent coaching can enhance the overall quality of life for families as a whole (Brookman-Frazee, 2004; Koegel, Bimbela, & Schreibman, 1996). Research has indicated that parents of children with autism may be more stressed than parents with neurotypical children (Sanders & Morgan, 1997). By teaching parents how to manage behavior they are more confident when interacting with their child. This, in turn, makes the interaction more pleasant, less stressed, and therefore more enjoyable for both the child and parents (Brookman-Frazee, 2004).

Parent coaching has proved to be effective for increasing both parent skills and child target behaviors (Brookman-Frazee, 2004; Ingersoll & Gergans, 2007; Kasari et al., 2010; Koegel, Bimbela, & Schreibman, 1996; Koegel, Glahn & Nieminen, 1978; Koegel, Symon, & Koegel, 2002; Vismara, Colombi & Rogers, 2009). For example, Koegel, Symon, and Koegel (2002) utilized a parent manual, modeling, practice, and feedback to train parents on procedures for improving social communication or pivotal response training (PRT) techniques. They found these procedures to be effective for increasing the percentage of intervals in which parents correctly implemented the six PRT procedures, number of children’s expressive verbal responses, and parent positive affect ratings.

Likewise, Vismara, Colombi, and Rogers (2009) educated parents on the implementation of procedures based on two models: the early start Denver model and PRT. The researchers used modeling, practice, feedback, and a parent manual to increase parent’s fidelity of implementation of the techniques. The investigators assessed fidelity by measuring 14 adult behaviors using a
Likert rating scale. They also measured the number of child verbal utterances and imitative behaviors as well as child engagement ratings. This study found the parent training useful for increasing both parent and child behaviors.

Most often, the investigators of previous studies have provided parents with their child’s target goal rather than allowing the parent to choose (e.g., Ingersoll & Gergans, 2007; Koegel, Bimbela, & Schreibman, 1996; Koegel, Symon, & Koegel, 2002; Symon, 2005; Vismara, Colombi, & Rogers, 2009; Vismara & Rogers, 2008). Brookman-Frazee (2004) found that when parents are involved in the development of target treatment goals they are less stressed, more confident, and more likely to implement their chosen intervention. These investigators compared the effects of a clinician-directed model with a partnership model. In the partnership model parents and clinicians worked together to select goals and develop intervention strategies. They used a parent manual and practice with feedback to train parents to implement PRT strategies and measured the effects on parent confidence and stress, child affect and engagement, and child responding. In addition to decreased levels of parent stress and higher levels of parent confidence, children demonstrated more positive affect, higher levels of responding, and appropriate engagement during the partnership model as well. Hence, this study offered evidence for the efficacy of a collaborative approach to parent training.

One aim of the current study was to explore the benefits of a partnership model conducted in a group setting. Conceivably, parents could learn from and contribute to other parents in the group, in addition to the parent coaches. There are potential benefits to a group approach to parent training that may not exist when training parents individually. For instance, parents taught in a one-on-one setting are only able to receive feedback for procedures they implement. Parents taught in a group setting, however, are able to receive and hear feedback for
the implementation of procedures provided to all members of the group. Thus, the number of models, examples, and learning opportunities are greatly increased. Furthermore, parents who are able to observe their group members during modeling and feedback are likely to find these exemplars easier to identify with and more genuine.

Also, by training parents together on the fundamentals of behavior analysis, parent coaches can spend more time during one-on-one sessions targeting specific child goal areas. Thus, parent coaches could give extensive training and attention to skill areas or parents that require additional support. This would also benefit members of the group who may not need support or training in these specific areas. While in a group setting, parents can also learn from each other’s previous experiences in specific target areas. By discussing concerns and questions together as a group, parents can hear examples that are easy to identify with and offer feedback and support to one another. Ideally, this would lead to the development of a community of reinforcement in which parents continue to support the skills taught during the training even after the intervention is removed (Baer & Wolf, 1970).

Despite these possible benefits to a group approach, the majority of research on parent training has been conducted in individual, or one-on-one, settings (Brookman-Frazee, 2004; Ingersoll & Gergans, 2007; Kasari et al., 2010; Koegel, Bimbela, & Schreibman, 1996; Koegel, Glahn, & Nieminen, 1978; Koegel, Symon, & Koegel, 2002; Newcomer, 2009; Symon, 2005; Vismara, Colombi, & Rogers, 2009; and Wetherby & Woods, 2006). At least one study, however, has addressed parent training in a group. Ingersoll and Dvortcsak (2006) described a group parent-training program in which early childhood education teachers were taught to train parents of children with autism. The investigators used lectures, video modeling, feedback, and group discussion to train both the teachers and parents in basic interventions techniques to teach
language and play. The training program included six group sessions and three one-on-one sessions over a period of nine weeks.

The first group session conducted by Ingersoll and Dvortcsak (2006) included an overview of the training program, research on parent training, and a description of intervention techniques. Also during the first group session, parents and educators collaborated to develop individual goals for each child. These goals were chosen based on a child skills checklist that the parents completed. Parents were asked to choose four social-communication goals to target during the training program. Intervention strategies for achieving these goals were assigned as homework for the parents each week. The remaining group training sessions covered rapport building, following the child’s lead, modeling and expanding language and play, environmental arrangement, prompting and reinforcement, and a review.

Results of this study suggested that the model was effective in increasing parent knowledge regarding intervention techniques as measured by a multiple-choice quiz. The 10-item quiz addressed “how to implement specific treatment strategies in natural contexts” (Ingersoll & Dvortcsak, 2006, p. 84). While measures such as these may be adequate for evaluating verbal behavior repertoires, they do not sufficiently measure implementation of these procedures in actual situations (Greer, 1992).

The current study partially replicated the procedures and extended the measures of Ingersoll and Dvortcsak (2006) by adding direct evaluation of both parent skills and child target behaviors. By utilizing direct observation and measurement, this investigation provided further support for the use of a group parent-coaching package to increase parent skills and child goals behaviors. Additionally, the researchers provided parents with the opportunity to choose individual child goals from any skill domain rather than only social communication. The
opportunity to choose their own goal from any skill area may contribute to increased levels of parent confidence (Brookman-Frazee, 2004).

Therefore, the purpose of the current study was to extend the current parent training literature and evaluate a short-term group parent-coaching package on parent and child skill acquisition. This package involved multiple-skill instruction, parent-chosen goals, group sessions, group-video sharing and problem solving, and individual coaching sessions.
METHOD

Participants

Families. Six parent-child dyads volunteered to participate in this study. One family was unable to fully participate and five of the families participated through all activities. These five families gave informed consent for the investigators to report their results.

The children each received a diagnosis of autism by a professional not associated with this study based on the diagnostic criteria specified in the *Diagnostic and Statistical Manual of Mental Disorders (DSM-IV)*; American Psychiatric Association, 2000). Families were recruited through flyers distributed at autism treatment center locations throughout the metropolitan area (see Appendix A). The selection criteria for the study included participation in the autism treatment program at any of the three sites and attendance at all four Saturday sessions. There were no selection criteria based on the gender or ethnicity of the parent or child. All children who participated in the study attended 10-20 hrs of behavioral therapy a week at the center. The center currently provides one hour of parent training per month to each parent who participated in the study. Each of the families, using pseudonyms, are described below.

*Family A.* Family A consisted of a mother and son of Latino descent. The mother, Mary, was a 28 year-old, full-time homemaker. Mary completed 12 years of schooling and had not had any prior parent training other than that provided by the autism treatment center. Mary’s son, Chris, was 5 years old at the time of the study. Before this investigation, Chris often engaged in aggressive behaviors such as hitting and kicking when given demands or requests. During play Chris did not independently engage in activities with his mother and siblings and often displayed challenging behaviors. Chris had a vocal verbal repertoire consisting of mainly 2-3 word requests and typically made eye contact.
Family B. Tara and Jason comprised Family B and were of Caucasian descent. Tara was a 44-year-old, full-time homemaker with a doctorate degree. Jason was 4.5 years old at the time of the study. Prior to the study, Jason’s communication consisted mainly of 3-5 word requests with limited eye contact. He had a wide receptive and expressive language repertoire and was able to follow simple instructions but seldom did so when his mother delivered them. During play, Jason typically remained silent unless asked a direct question and was prompted to respond. He independently remained in close proximity to his mother during play but joint attention and engagement were limited.

Family C. Family C was a father and son who identified as Asian. The father, Rick, was a 41-year-old full-time engineer, and had received a bachelor’s degree. Rick had minimal prior training, which he received from the treatment clinic his son, Ralph, attended. Ralph was 7 years old at the time of the investigation. Prior to the study, Ralph made infrequent eye contact and had a limited vocal verbal repertoire. Ralph was able to follow one-step requests; however, he did not typically follow the instructions his father delivered. Ralph rarely independently approached his father prior to the study, and when he did, engagement was short and affect was negative or neutral.

Family D. A mother and son of Asian descent comprised Family D. Nikki was a 34-year-old, full-time homemaker with a bachelor’s degree. Ulysses, Nikki’s son, was 5 years old at the time of the study. Ulysses engaged in high rates of stereotypic behaviors, seldom made eye contact, and followed some simple instructions, though not reliably. His communication prior to the parent training consisted of mostly 3-5 word requests. Ulysses’ approaches to his mother were infrequent and he did not engage with his mother during play.
Family E. Family E consisted of a mother, Amy, and son, Zane, who identified as Caucasian. Amy was a 43-year old, full-time financial recruiter with a bachelor’s degree. Amy had some prior parent training that was offered at the autism treatment program Zane attended. Zane was 3.5 years old during the study. Before the investigation, Zane’s approaches to his mother were infrequent or prompted. Zane had an extensive vocal verbal repertoire and typically requested items and activities in full sentences. During play, Zane generally engaged in stereotypic behaviors such as running in circles and carrying or shaking two objects in his hands.

Parent coaches. The primary investigators of this study served as the parent coaches and co-conducted both the training sessions and training presentations. Both parent coaches were senior graduate students in the Department of Behavior Analysis at the University of North Texas. Both coaches were in their mid-twenties and of Caucasian descent. One parent coach had six years experience working with children with autism and their families. The other parent coach had three years experience working with children with autism and their families. A faculty advisor with 25 years experience in autism treatment and parent training oversaw the investigation.

Settings

The study took place in two settings: an autism treatment center and directly in the families’ homes.

Group training lectures. The study was conducted primarily at the autism treatment center that provides services based on the principles of applied behavior analysis (ABA) for children of all developmental levels, ages 2-11 years old. The program offers highly individualized treatment in the form of one-on-one sessions, social skills groups, and academic assistance. The general mission of the autism treatment program is to provide culturally responsive and
evidence-based services to children and families of various socio-economic statuses. The lectures were presented in the large community room at the center. Childcare was provided during the training lectures for child participants and siblings. The children and childcare providers spent the majority of the time in the center’s schoolroom (large playroom) or gym.

Home training sessions. Baseline and training assessments took place in the families’ homes. For baseline and training sessions families chose to use either the family room or the child’s bedroom. For one of the participants, baseline assessment and one of the training sessions for the target goal behaviors were conducted at a child’s hair salon in the area.

Materials

Fliers and information sheets were utilized to recruit participants (see Appendix A). The large conference room where training lectures were conducted included conference tables, chairs and a projection screen. Microsoft PowerPoint® slides were presented on a projection screen and the connected laptop computer. Participants were given a 3-ring binder that contained the PowerPoint® presentations and accompanying workbook pages (see Appendix B). The schoolroom where childcare was provided consisted of tables, chairs, various toys and games, art materials, and shelving units. The gym contained mats, swings, balls, and a ball pit.

The researchers filmed all assessments with a Kodak Play Touch® video camera. Filming took place primarily in the families’ homes, which consisted of several toys, a couch or bed, and a television. The hair salon, where some filming occurred for Participant E, included salon chairs, mirrors, hair clippers, video monitors, and a waiting area with a toy train set.

Data were collected from the video samples using Apple QuickTime Player® software on laptop computers. Data collectors used digital timers, hand-held tally counters, and data sheets
(see Appendix C). Raw data was transferred from data sheets into a Microsoft Excel® spreadsheet to create tables and graphs.

**Measurement**

The measures included a skills checklist measuring parent behavior and child goal behaviors. Data were collected from video samples taken during in-home assessments. Complete behavioral definitions for all behaviors can be found on the data sheets in Appendix C.

One dependent measure was skills demonstrated by parent participants during training sessions with the children. A 50-item skills checklist, found in Appendix D, was created based on a similar checklist developed to train staff in behavioral interventions for children with autism (Weinkauf et al., 2011). The checklist was used to measure the performance of parents for each item listed and create an overall picture of areas in which skills improved. For a list of the parent skills assessed, see Table 1.

The skills on the checklist were delineated into units based on the desired target areas of the training presentations. These units included understanding behavior, rapport building, reinforcement, and naturalistic/incidental teaching. These units were divided across three days for purposes of the training lectures, which were presented during the four Saturday sessions.

Data was collected during baseline and training sessions via video samples. Participants were given a score ranging from 0-2 for each skill listed on the training checklist based on their performance during each 10-min video sample. A score of 0 (never) indicated that the skill was not demonstrated during the session when an opportunity was provided. A score of 2 (always) indicated that the skill was demonstrated during 80-100% of opportunities during the session. Each participant’s total score from all items on the checklist was converted into a total percentage. Experimenters divided the total score for each participant by the highest score.
possible (scoring a 2 on all skills out of the 50 skills listed) to yield a percent of skills demonstrated proficiently.

A secondary dependent measure for this study was based on target goals chosen by the families that attended the training program. Target child goals were chosen by parents and varied for each parent-child dyad. Table 2 illustrates the specifics of targeted behaviors for each child as chosen by the parent. Targeted goals ranged from increasing general compliance with requests, approaches to parent, and duration of engagement, to increasing tolerance during a haircut.

For four of the participants, goal behaviors were scored using the same 10-min video sample that was used in order to score the skills checklist. However, for one of the participants, the family concerned about haircuts, a separate video sample was collected during which parent and child engaged in a routine that was targeted as their goal.

For all participants, frequency data were collected on approaches to parent, retreats from parent, and instructions delivered by parent for all play video samples.

Reliability. Two independent raters observed and rated each parent’s performance for all of the sessions across the baseline, intervention, and follow-up conditions.

Checklist. Inter-rater reliability for the skills checklist was calculated by dividing the number of agreements by the total number of items on the checklist and multiplying the result by 100. An agreement was counted if both observers marked the same score (0-2) for each item on their data sheets, and a disagreement was counted if the scores differed across raters. Average interobserver agreement (IOA) for all videos scored using the skills checklist ranged from 80%-98%. The mean IOA for the skills checklist was 91.76%.

Goals. IOA procedures for child goal behaviors varied across the different goals. For behaviors recorded using event recording, the smaller number of observed occurrences was
divided by the larger number, which was then multiplied by 100 to yield a percentage. For behaviors recorded using duration, a total agreement method was also used. Duration data were first converted to seconds then the smaller number was divided by the larger number and multiplied by 100. Using this method, inter-rater reliability was 80%-100% for behaviors scored using event recording and 88%-99% for duration measures. The mean IOA was 95.3% for frequency measures and 97.3% for duration measures.

Experimental Design

An A-B (baseline-intervention) design with a follow-up probe replicated across five dyads was utilized for this study.

Procedures

Intake. For a complete timeline of the training program see Table 3. Following recruitment via flyer, participants contacted the author to receive further information and register for the training. During this phone call, an initial assessment (baseline) appointment was scheduled. Following the initial assessment, participants attended four 2.5 hr training lectures, which were held on Saturdays. In between the training lectures, in-home training sessions were conducted during which assessments videos were also collected.

Baseline. During the initial assessment appointment, a 10-min baseline video was collected, with the exception of one participant’s goal target behavior, which was taken after the first training. Participants were instructed to engage in typical play routines with their child during the assessment. During these sessions, parents did not receive specific feedback regarding skill performance or goal target behaviors. For the family whose child target goal was tolerating haircuts, the parents were instructed to engage in a typical haircut routine as they normally would.
Intervention. Intervention consisted of two main components: investigator led group training lectures, and in-home training sessions.

*Group training lectures.* Following baseline sessions, participants attended four 2.5 hr intensive training lectures. The training was divided across four Saturdays. Each session included accompanying PowerPoint® slides, video and live modeling of correct and incorrect implementation of procedures, skill practice and role-play with corrective feedback, and an accompanying workbook with skill-related questions and activities. Each day began with an agenda for the day and, if applicable, continued with a review of the previous week. Each training lecture ended with parents viewing their own videos taken the week before (see Table 4). Participants discussed learning opportunities with the parent coaches and were encouraged to share or talk about any experiences with the group.

*Day 1: The Basics.* The purpose of the first day of training was to build rapport within the group, provide a brief introduction to family goals, and familiarize participants with the purpose and direction of the parent-training program. See Table 4 for a complete outline of Day 1 activities. During Day 1, parents were introduced to other group members, their parent coaches, and participated in a team building exercise. The team building exercise consisted of introducing themselves to a partner following a list of questions provided by the coaches. Participants then introduced their partner to the whole group. Also during Day 1, coaches discussed the sequence, goals, and purpose of the training program. Parents were given an introduction to the field of applied behavior analysis and were taught to identify the ABC’s of behavior (antecedent, behavior, consequence). Day 1 also included a discussion of how to work collaboratively within a group and ended with guidelines for choosing a family goal.
**Day 2: The Bond.** The purpose of Day 2 was to teach parents how to enhance their relationship with their child by arranging the environment and controlling contingencies. See Table 4 for a complete outline of Day 2 activities. Day 2 of the training lectures targeted positive reinforcement, specifically how to effectively choose, deliver, and expand reinforcers in order to increase behavior. Parents also were able to learn how to build and enhance rapport with their child through effective play techniques and how to arrange the environment to occasion approaches. During Day 2, participants decided on specific goals to target with their child. Families chose a specific skill to target as a “goal” for the remainder of the training program. Experimenters assisted the participants with identifying the necessary steps in order to accomplish those goals and provided parents with a goal-specific task analysis as necessary. Participants also had the opportunity to request any support that may assist them in achieving their goals. Lastly, the investigators shared one of the participant’s videos from that week with the group during the training presentation. The video was an excellent exemplar of some of the targeted skills, specifically, arranging the environment and utilizing rapport-building techniques to gain approaches.

**Day 3: The Bounty.** The purpose of Day 3 was to educate parents on their specific child target goals, including data collection procedures for those goals. See Table 4 for a complete outline of Day 3 activities. During the third training day, participants viewed a graph of their progress. The graph demonstrated an overall increase in approaches from child to parent and a decrease in the demands parents delivered. During Day 3, coaches also gave an overview of data collection and tips for choosing an effective goal-specific data collection procedure. Parents were able to practice data collection procedures on a video clip from one of the participants. Also during this lesson, graphs of various dimensions of behavior were shown as examples. Parents
were also given an introduction to basic interactive teaching strategies, prompting and fading, and communication. Day 3 was meant to target the specific child goals chosen by the families and thus included goal related material as well (e.g., establishing instructional control, shaping, and dealing with challenging behaviors). Video samples from three other participants were also shown and discussed during Day 3.

*Day 4: The Breakthrough.* The objective of the final training lecture was to discuss future plans for the families’ current goals and to develop potential future goal targets. See Table 4 for a complete outline of Day 4 activities. A participant video was shared with the group during the final presentation to demonstrate an exemplary performance by the parent and a particularly meaningful triumph for the family. A final recap and resources were also provided to parents during the final training lecture. Also during Day 4, parents were accompanied to a separate room where an interview was conducted assessing their satisfaction with training procedures and outcomes. Participants were given a completion certificate, thank-you gift, and scheduled their follow-up assessment appointment at the end of the final day.

*Home training sessions.* The experimenters conducted weekly in-vivo training sessions in which participants were observed and videotaped conducting a daily session with their child. During training sessions, the observers provided corrective feedback and modeling for incorrectly performed procedures, as well as praise for procedures implemented correctly. During these training sessions, participants were able to practice performing procedures, ask for assistance as needed, observe a correct model of procedures, and receive feedback on implementation. During training sessions, experimenters focused on correcting skills that served as component skills to those targeted as goals by participants. For one of the participants, the
investigators observed the parent and child engaging in the routine that was targeted for their goal behavior (i.e. haircut) in addition to a daily session.

Follow-up. All five participants were observed and rated at 1 month to ensure maintenance of the skills targeted during the training. The same procedures as outlined during baseline sessions were used. That is, feedback was not given during observations at follow-up sessions.
RESULTS

There are three figures. In all figures, the first phase depicts assessments taken during baseline, the second phase depicts assessments taken during the group parent training (intervention), and the final phase depicts assessments taken at one-month follow-up.

Figure 1 shows the results of the parents’ scores on the skills checklist across assessments. The top panel shows the combined group average scores on the skills checklist. The following five panels depict each family’s score on the parent checklist for Parents A, B, C, D, and E respectively. The x-axis represents the weeks in which each assessment was taken. The y-axis represents the score on the skills checklist shown as percentage of skills demonstrated proficiently. In general, the graphs illustrate an overall improvement in parent checklist scores once parent training began. This improvement in scores either maintained or increased further at follow-up.

The top panel of Figure 1 shows the average score on the parent skills checklist for all five families. During baseline, the average score was low at 36.4%. Following the parent coaching intervention the average score increased and remained at an increasing trend for Assessments 2, 3, and 4. The average scores for these assessments were 53.2%, 71.6%, and 85.6% respectively. At follow-up, the group average increased even further with a score of 92.6%.

The second panel indicates parent skills checklist scores for Parent A. Parent A scored relatively low on the checklist during baseline with a 44%. Following intervention, the score increased to 66% during Week 2 and continued to increase for Week 3 with a score of 71%. Parent A also scored higher on the skills checklist during the final week of intervention with a score of 95% and maintained at this level for follow-up with a 96%.
Parent B’s checklist scores are depicted in the third panel. During baseline, this parent scored fairly low with a 38%. During intervention the score increased to 50% during Week 2 and even further to 74% during Weeks 3 and 4. At follow-up Parent B scored even higher on the skills checklist with an 88%.

The fourth panel represents the skills checklist scores for Parent C. With a 22% during baseline, Parent C was our lowest scoring participant. With the implementation of the parent-coaching package, the score increased to 39% during the second week. Parent C’s score continued to increase during Week 3 with a jump up to 58% and made improvement during Week 4 with a score of 85%. The checklist score improved even further at follow-up with a final score of 94%.

Panel 5 depicts Parent D’s scores for the skills checklist. At baseline, this parent scored a 44% on the checklist. During the second week a modest improvement was made with a score of 47% on the skills checklist. At Week 3, Parent D almost doubled her score on the skills checklist with an 82%. This increasing trend continued with a score of 89% during the fourth week and a score of 90% at follow-up.

The final panel in Figure 1 represents the parent checklist scores for Parent E. This parent demonstrated 34% proficiency on the skills checklist during baseline. With the beginning of the intervention, the data displayed a sizable jump with a score of 64%. The checklist score continued to increase during Weeks 3 and 4 with scores of 73% and 85% respectively. At follow-up, Parent E made even further progress with a final score of 95% on the skills checklist.

Figure 2 represents parent-chosen child target goal behaviors across assessments. The top panel depicts goal behaviors for Child A and the following panels depict goal behaviors for Children B, C, D, and E respectively. For all of the graphs in Figure 2, the $x$-axis represents the
weeks in which each assessment was taken. Overall, with the exception of one child, all children made improvement in their goal area and the skills maintained or further improved at follow-up.

The top panel in Figure 2 depicts social goal behaviors for Child A. The y-axis for this graph represents the frequency of each behavior. Open circle data points represent the number of approaches and closed circle data points represent the occurrences of challenging behavior. The goals for this child were to increase approaches to mother and decrease challenging behavior. During baseline, the child exhibited moderate rates of challenging behavior with 10 occurrences and very few instances of approaching his mother. Following the implementation of intervention, the rate of challenging behavior dropped slightly to 9 occurrences during the second and third assessments. Approaches doubled to 4 instances during the second assessment and increased to 17 occurrences during the third week. Challenging behavior continued to decrease with a frequency of 5 instances during Week 4. At follow-up, however, challenging behavior returned to baseline levels with 10 occurrences. Just like challenging behavior, the rate of approaches returned to baseline levels with only 2 occurrences during Week 4 and 3 occurrences at follow-up.

The second panel in Figure 2 shows child goal behaviors for Child B. These goals included increasing compliance with instructions and decreasing retreats from mother. The bars indicate correct responses to demands and open circles indicate no responses to demands. These data are represented on the second y-axis, which indicates the percent of instructions from Parent B. The open squares represent retreats from mother and are depicted on the primary y-axis, which represents the frequency of retreats. At baseline, Child B rarely responded to instructions given by his mother with scores of 7.7% for correct responses and 67% for no responses. Retreats were relatively high with 14 occurrences during a 10-min sample. With the application
of parent training procedures, 12.5% of demands were followed with a correct response, while 78% of demands were followed with no response. Though the number of correct responses increased, so did the number of no responses. Retreats decreased by half with the implementation of intervention and only occurred 7 times. At Week 3, there was an increase in correct responding and decrease in non-responding. During this assessment 67% of demands were followed with a correct response and no response followed only 33% of demands. Retreats also decreased during Week 3 with only 1 instance. During the fourth assessment correct responding decreased with 43% of demands. Non-responding remained fairly stable also with a rate of 43%. The number of retreats dropped to 0 during this assessment. At follow-up, Child B made improvement as correct responding jumped up to 85% while non-responding decreased to only 15%. Retreats remained at 0 during the follow-up assessment as well.

Child C’s target goal behaviors are shown in the third panel of Figure 2. Open circles depict approaches and are shown on the primary $y$-axis, which represents the frequency of approaches. The bars indicate the duration engaged and are shown on the secondary $y$-axis, which represents the total minutes engaged out of the entire 10-min sample. Child C’s goal behaviors consisted of increasing the number of approaches to his father and the overall duration engaged with his father. The rate of approaches during baseline was low with only 2 occurrences. Additionally, the total number of minutes Child C was engaged during baseline was also low at 1 min 3 s. After the first parent training session engagement jumped up to approximately 5 min (4 min 58 s), which is half of the session. Approaches, however, remained low with only 1 instance during Week 2. During the third assessment, approaches more than doubled with 4 instances and continued to increase with 6 instances during the fourth assessment. Engagement remained relatively stable during the third and fourth weeks with 3 min
19 s and 3 min 10 s respectively. At follow-up approaches decreased to 3 instances but engagement increased to 9 min 8 s, almost the entire length of the sample.

Child D’s goal behaviors are depicted in the fourth panel of Figure 2 and were also increasing approaches and duration engaged with mother. The open circles depict approaches and are displayed on the primary y-axis, which represents the frequency of approaches. The bars depict duration engaged and are represented on the secondary y-axis, which represents the total minutes engaged out of the entire 10-min sample. Child D’s duration engaged during baseline was relatively high with 7 min 5 s of the 10-min sample engaged. The number of approaches during baseline was average with 7 instances. Following intervention, approaches decreased to 1 occurrence and duration engaged decreased slightly to 5 min 27 sec. At Week 3, approaches increased with 24 instances while duration engaged increased only moderately (6 min 37 s). Approaches decreased a great deal during the fourth week occurring only 4 times. Duration engaged, however, increased with 8 min 21 s engaged. Both approaches and duration engaged remained relatively stable at follow-up with 6 approaches and 8 min 51 s engaged.

The last panel in Figure 2 represents goal behaviors for Child E, which consisted of a shaping procedure to increase his tolerance during a haircut. The open circles on this graph symbolize trials in which the child displayed negative affect and are displayed on the primary y-axis, which represents the frequency of trials. The black bars symbolize the shaping step that was ended on for each assessment. These data correspond to the secondary y-axis, which shows the steps out of the total 12 steps possible. During baseline, the child completed all 12 steps in the shaping procedure with the majority of the trials (267) with negative affect. Following the introduction of the parent training, trials in which negative affect occurred dropped to only 2. During this second assessment, the child ended on the first step in the shaping procedure. During
the second week of intervention, the child displayed negative affect for 4 trials and completed on step 4 of the shaping procedure. In the fourth week only 3 trials occurred with negative affect and Child E ended the assessment on the eighth step in the shaping procedure. At follow-up the child was able to complete the entire shaping procedure (all 12 steps) and no trials occurred with negative affect.

Figure 3 shows the total number of approaches and retreats by child and parental demands across weekly assessments. From top to bottom the graphs display data for each family participating in the study. The top graph illustrates the results from Family A, the following graphs illustrate results from Families B, C, D, and E respectively. From left to right the graphs display the following: independent child approaches, independent child retreats, and demands or instructions delivered by parent. For all graphs the x-axis represents the week in which the assessment was collected. The y-axis represents the frequency of the specific behaviors. Overall, the graphs indicate that as demands decreased over the weeks, approaches occurred at a higher rate during training initially but then decreased. Also, for most families, the number of retreats decreased across weeks as well.

In the top panel of Figure 3, data for Family A is shown. During baseline, the frequency of approaches for this family was relatively low with 2 approaches during the 10-min sample. Retreats were slightly higher with 6 occurrences and demands were very high at 102 instances. During the second assessment following the first group training session, approaches doubled to 4 instances, retreats increased to 10 instances, and demands decreased by half to 55 instances. During Week 3, the average number of approaches jumped up to 17 approaches, an increase from the previous week. Retreats doubled with 20 occurrences and demands dropped to only 1 instance. The number of approaches and retreats dropped to 2 during Week 4 and demands
increased slightly with 5 instances. At follow-up, the number of approaches increased slightly to
3 approaches, retreats remained stable and 2, and demands increased slightly with 6 instances.

The second panel in Figure 3 represents the number of approaches, retreats, and demands
for Family B. During baseline, the number of approaches and retreats were fairly high with 13
and 14 instances respectively. Demands were also high with 39 occurrences. Following
intervention, during the second assessment, both approaches and retreats dropped to 6 instances.
Demands decreased to slightly with a frequency of 32. During the third week, approaches and
retreats both decreased to 1 instance while demands decreased to only 3 instances. In Week 4 the
number of approaches remained stable at 1, retreats dropped to 0, and demands increased to 22
instances. At follow-up 0 approaches and retreats occurred during the 10-min assessments. There
were 20 demands placed during the follow-up assessment.

The third panel in Figure 3 depicts the results for Family C across each week. At
baseline, this family had a low rate of approaches only 2 during the 10-min sample. Retreats
occurred 4 times and demands were high with 166 instances. During the second week, following
the first group parent-training lecture, approaches decreased to 1, retreats increased to 5, and
demands increased to 217. In Week 3, approaches increased to 4 instances and retreats doubled
with 5 occurrences. Demands decreased with a dramatic drop to only 16 demands during the
third week. A slight jump up occurred during Week 4 with the number of approaches at 6 and
retreats decreased by half with only 5 instances. Demands continued to decreased with only 2
instances at Week 4. At follow-up, the number of approaches and retreats decreased slightly with
3 instances for both. Demands increased to a frequency of 4 demands during the 10-min session.

Family D’s results are displayed in the fourth panel of Figure 3. At the baseline
assessment, an average rate of approaches and retreats were seen with 7 and 8 instances
respectively. Consistent with other families, the number of demands was high with 66 occurrences during the 10-min assessment. Following the implementation of the parent-training package, both approaches and retreats decreased to 1 instance. Demands increased to 131 occurrences. At Week 3, both approaches and retreats increased to 27 and 25 instances respectively, while demands decreased to only 21 occurrences. During the fourth week, approaches and retreats remained in sync with 4 instances of both. Demands increased slightly with a rate of 35 during the assessment. At follow-up, approaches increased to 6, retreats increased to 9, and demands decreased to 20 instances.

The final panel in Figure 3 depicts the data for Family E. Approaches were average with 10 instances occurring during the baseline assessment. There were 13 retreats and a high number of demands with 112 instances during baseline. During Week 2, approaches and retreats increased to 17 and 16 occurrences while demands decreased to only 2 instances. Approaches and retreats continued to increase during Week 3 with 27 and 26 instances respectively. Demands remained low but increased slightly with 12 instances. At Week 4, approaches and retreats remained fairly stable, both with 23 occurrences. Demands occurred at a rate of 10 during the fourth 10-min assessment. At follow-up 1 approach and no retreats occurred. Demands increased slightly with 16 occurrences at the follow-up assessment.

These results indicate an overall improvement in parent skills and child goal behaviors following the implementation of the parent-coaching program. Additionally, this progress maintained or further improved at the one-month follow-up assessment.
DISCUSSION

Most effective early intensive behavioral intervention (EIBI) programs take a systems level approach in that the intervention targets all who are involved with the child (Risley, 1996). That is, direct care programs are developed specifically for targeting child behavior, and, in addition, training is involved for parents, teachers, and direct care staff. The current research addressed training specifically for parents. The results of this study indicate that the present training package was effective in teaching several interaction skills to parents. This is important because previous research suggests parent skill acquisition will increase child progress and assist with maintenance and generalization (Kasari et al., 2010; Koegel, Schreibman, Britten, Burke, & O’Neill, 1982; Koegel, Symon, & Koegel, 2002). It has also been suggested that if parents are adequately trained on the basics of behavioral intervention, they are likely to be less stressed and more confident during interactions with their child (Brookman-Frazee, 2004).

Overall, the current parent-coaching package proved effective for increasing parent skills and achieving the child goals chosen by the parents. This investigation extended Ingersoll and Dvortcsak (2006) through the use of direct measures. Ingersoll and Dvortcsak (2006) found a group approach to be beneficial for training early childhood special education teachers to train parents of children with autism. These researchers utilized a multiple-choice post test to assess the knowledge of parent participants following their parent-training package. While this type of measure can demonstrate the efficacy of the intervention on teaching important verbal behavior skills, it does not demonstrate the parents’ abilities to actually implement the necessary procedures. The current study addresses this concern through the use of the parent skills checklist, which measured skills directly. The increase in parent scores (from less than half to almost 100%) on the skills checklist following the implementation of the parent-coaching
package provided further support for training parents together in a group. Additionally, four participants showed an increase in child goal behaviors following intervention. For one child’s goal, however, the intervention did not appear to maintain during follow-up. Although this may have been due to unusual circumstances during the observation, it is not clear.

These generally positive results indicated that the use of parent-chosen goals can be an effective procedure in a parent-coaching package. The researchers provided parents with the opportunity to choose their child’s goals. While much of the parent coaching literature has targeted child goals, very few have asked the parents to independently choose these goals (Koegel, Glahn, & Nieminen, 1978; Koegel, Symon, & Koegel, 2002, and Wetherby & Woods, 2006). Previous research that has asked parents to take part in choosing target goals have yielded positive results (Brookman-Frazee, 2004, Ingersoll & Dvortcsak, 2006). For instance, Ingersoll and Dvortcsak (2006) asked parents to choose social-communication target goals for their child. This investigation extends this study by including parents’ participation in selecting target behaviors for their child in any area or skill domain they desire. Parent coaches assisted with the identification of component skills to target as steps towards these goals and directed parents in choosing appropriate data-collection procedures.

The positive results of this study also extend previous research by using a combination of training procedures (Brookman-Frazee, 2004; Ingersoll & Gergans, 2007; Kasari et al., 2010; Koegel, Bimbel, & Schreibman, 1996; Koegel, Glahn, & Nieminen, 1978; Koegel, Symon, & Koegel, 2002; Vismara, Colombi, & Rogers, 2009; Wetherby & Woods, 2006). The current study differed from past research by offering parents the opportunity to view their own video samples taken each week. Parents were able to watch themselves conducting a session with their child, discuss procedures used in the video with the parent coaches, and share experiences as
they were comfortable with the group. The opportunity to discuss videos with group members proved to be very beneficial for parent participants, offering further support for the use of a group approach to parent coaching. These procedures were likely an effective component of the coaching package and could inform future research direction.

This investigation suggested that a group method to parent coaching may yield a number of benefits. By providing coaching for parents in a group setting, the time spent with parents one-on-one could be aimed towards targeting individual goals rather than general teaching strategies. Thus, parents could have the opportunity to learn procedures to use with their child specifically and target areas they deem to be important. This can help to increase parent confidence and overall quality of life for both parent and child (Brookman-Frazee, 2004). The current study provided parents with the opportunity to target specific skill areas at home during one-on-one sessions. This allowed coaches to spend time during group sessions discussing teaching techniques that would benefit all of the parents.

Another possible benefit of offering parent training in a group is the potential development of a community of reinforcement among the parent participants. That is, ideally a natural community would develop among the parents so that once experimental intervention was removed, the parent group would continue to support the behaviors taught during the parent training (Baer & Wolf, 1967). Thus, parents would not only serve as a support group for each other, but may also provide continued reinforcement for responsive teaching and problem solving within the context of the information and training.

The community developed during the current study seemed to be a valuable resource for the parent participants and likely contributed to the positive results. Throughout the investigation, parents shared their stories, experiences, and resources to the group providing
everyone with a protected environment to receive feedback and ask questions. Following the training all parent participants shared their contact information and discussed future plans to remain in touch. Thus, if nothing else, providing training in a group atmosphere can assist in the development of a parent support and resource group. Wiles (2012), in an evaluation of this same parent-coaching program, examined these outcomes and found overall satisfaction and group cohesion.

Though the results of this investigation were successful, some concerns should be explored. One concern might be the effects of individual pieces of the training package on trainee skills. The current research question concerns the effects of the entire package and does not assess if one aspect of the package is more or less effective than the other parts. The researchers aimed to develop the most effective training possible and thus, multiple training procedures were utilized. Future research may want to tease apart the various components of this training package. A component analysis could assess the effects of each component individually or paired with other parts of the training package to determine which elements are necessary or superfluous for achieving the desired outcome.

Another concern for future research includes the design of this study. The study used an A-B design across five dyads, which may raise questions about experimental control. The increase in parent skills immediately following the implementation of the intervention demonstrates a degree of internal validity, however, future researchers may wish to utilize a multiple baseline across conditions design to demonstrate more control. Additionally, a concern might arise regarding the length of the baseline. Only one data point exists in baseline for all participants. While this is short, it was decided that a shorter baseline was more ethical to avoid placing undue stress on the parents for extended periods of being videotaped without providing
training and assistance. While it is important for future research to employ more rigorous designs, it is also important to note that there was consistency across parents with respect to pre-intervention performance.

Another reason for concern involves the reciprocity of approaches and engagement. In the current study, the parents were not explicitly taught to “reset” for new approaches once the child had already come into proximity. Therefore, fewer retreats resulted in fewer opportunities for the child to approach. Additionally, the lower levels of approaches during the 3rd and 4th weeks are an indication of higher levels of engagement. That is, the children remained in proximity and were engaged with the parent and activity for the majority of the sample and consequently did not have as many opportunities to approach the parent as in prior weeks. Although increasing the total number of approaches is a useful goal for parents of children with autism, the duration and quality of engagement is a more meaningful goal for some parents. Such information should be taken into account when designing and evaluating future studies.

Finally, this investigation provided little or no information regarding generalization or maintenance of effects. That is, follow up only occurred once and no other formal measures were taken in other areas not directly addressed in the study, such as parent and child affect.

In general, the results of this investigation provide evidence in support of a collaborative group approach to parent coaching. The current study offered a short-term training package in which parents were able to choose child target goals and produce favorable outcomes with their children at home. Data from the skills checklist indicated that parents’ skills increased following implementation of the coaching package and parents were able to implement behavioral procedures with their children. Additionally, a community of learning may have developed
among the participants and a support group was formed. Ideally, this community will help to maintain the parents’ newly acquired skills in the time to come.
Table 1

Skills Targeted on Parent Skills Checklist

<table>
<thead>
<tr>
<th>Skill Area</th>
<th>Examples</th>
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</table>
| Rapport:   | Arranges environment to allow for independent social approaches  
             Achieves at least 3 approaches per 10-min sample  
             Avoids having 5 or more retreats per 10-min sample  
             Provides high preference events for approaches and initiations  
             Parent and child appear engaged with same activity |
| Reinforcement: | Provides differential reinforcement for higher quality/harder responses  
                 Uses behavior descriptive praise with reinforcer  
                 Delivers worthwhile amount of reinforcement  
                 Identifies potential reinforcers  
                 Engages child following delivery of reinforcer |
| Incidental Teaching: | Arranges joint attention, turn taking  
                        Balance contingent access and engagement  
                        Presents comments related to interests/activity  
                        Delivers instructions clearly, one time  
                        Accepts approximations as appropriate |
| ABC’s of Behavior: | Ignores minor misbehavior  
                       Avoids using name as reprimand  
                       Removes reinforcement when problem behavior is occurring |

Table 2

Parent Chosen Target Goals

<table>
<thead>
<tr>
<th>Child</th>
<th>Chosen Target Goal</th>
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<tr>
<td>Child A</td>
<td>Increase approaches to mother and decrease challenging behavior.</td>
</tr>
<tr>
<td>Child B</td>
<td>Increase compliance with requests and decrease retreats from mother.</td>
</tr>
<tr>
<td>Child C</td>
<td>Increase approaches to father and duration of engagement during play.</td>
</tr>
<tr>
<td>Child D</td>
<td>Increase approaches to mother and duration of engagement during play.</td>
</tr>
<tr>
<td>Child E</td>
<td>Increase tolerance during haircut.</td>
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Table 3

Sequence of ABC Parent Coaching Program

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<th>Week 2</th>
<th>Week 3</th>
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<td>Day 2: The Bond</td>
<td>Day 3: The Bounty</td>
<td>Day 4: The Breakthrough</td>
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<td>Signs of Success</td>
<td>Video/Goal</td>
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<td>Reinforcement</td>
<td>(Measuring</td>
<td>Discussion</td>
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Figure 1. Parent skills checklist scores across assessments.
Figure 2. Child target goal behaviors across assessments.
Figure 3. Total approaches and retreats by child and parental demands for each family across weekly assessments.
APPENDIX A

ABC PARENT COACHING PROGRAM FLYER AND INFORMATION SHEET

Co-authored by Brittany Vaughn and Amber Wiles.
Approach Based Care

Saturdays
9:30 AM – 12:00 PM
August 4th, 11th & 18th & September 1st
No Cost
Child care provided
Supervised by: Dr. Shahla Ala’i-Rosales
At University of North Texas

Parent Training
ABC will focus on improving relationships and skills.
In a supportive group setting, parents will learn the basics of Applied
Behavior Analysis, skills to build stronger rapport with their child, and
establish specific goals to improve quality of life in home and
community. ABC is an evidence-based intervention that focuses on
meaningful changes for your child and family.

The ABCs of a great relationship.

Contact M.S. B.C.B.A For More Information.

* MUST ATTEND every Saturday.
ABC is a parent-training program that aims to expand parent-child relationships, teach new skills, and improve families’ overall quality of life. In a supportive group setting, parents will be able to choose specific goals to work on with their child and receive coaching targeted towards achieving those goals. Parents will learn how to take an Applied Behavior Analysis (ABA) approach toward choosing goals, achieving goals, and monitoring progress of those goals. Videos of parent-child interactions will be taken and parents will have the opportunity to learn and grow from watching and evaluating their own experiences. There will also be the opportunity for parents to learn ways to expand their child’s play skills, create healthier environments, and improve overall interactions with their child.

What is ABC?

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Saturdays 9:30am-12pm
August 4th, 11th, 18th, and September 1st

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Amber Wiles and Brittany Vaughn will be your group coaches. Both are Master’s students at UNT and have extensive experience working with children with autism. Amber and Brittany are ABA coaches at "Easter Seals".

What is the program sequence?

Baseline

• 1 video prior to program

4 Group Sessions

• Saturdays 9:30am–12pm

3 In-home Sessions

• Scheduled during the week

1 Follow-up Session

• Scheduled 1 month after

Prior to the group meetings 1 video will be taken at home. A 10-minute parent-child interaction will be filmed. The videos taken will be viewed and discussed during the group sessions. At first you will watch the videos on your own and then in small groups. Videos will also be taken each week between group meetings. Following the completion of the group sessions, a follow-up meeting will be scheduled.
Do I have to attend all Saturday Sessions?

Yes. In order to ensure that meaningful changes are made, all four Saturday sessions must be attended. The 3rd and 4th Saturdays are specifically geared towards creating a plan to achieve goals and monitoring progress towards those goals.

Who do I contact with more questions?

If you have any other questions prior to signing up for ABC feel free to contact:
APPENDIX B

ABC PARENT COACHING PARENT WORKBOOK

Co-authored by Brittany Vaughn and Amber Wiles.
The ABC’s of Playing, Learning, and Growing Together

Day 1: The Basics
Brittany Vaughn and Amber Wiles

Who are we?
- Master’s students in the Department of Behavior Analysis at UNT
- From the Midwest
- Dog lovers
- Sports fans
- Passion for working with children

Brittany, Bachelor of Arts in Applied Behavioral Science & Psychology from University of Kansas
5 children (3 half-sisters, 2 half-brothers, 1 stepbrother)

Amber, Bachelor of Arts in Psychology and minor in Applied Behavior Analysis from Midland University
3 younger brothers

Goals of ABC
- Gaining Approaches
- Improving Relationships
- Gain Skills
- Enhance Quality of Family Life

Learning the ABC’s of a great relationship

Agenda
- Welcome
- What is Applied Behavior Analysis?
- ABC’S of Behavior
- Group Collaboration
- Family Goals
- Videotape Viewing and Discussion of Strengths

Program Sequence
- Baseline
- 4 Group Sessions
- 3 In-home Sessions
- 1 Follow-up Session

What’s your story?
Getting to know each other

Who are you?
- Where are you from?
- What do you do?
- Name of children?

Questions?
Find a partner and fill out this sheet with their information. You will introduce your partner to the group.
ABA in a Nutshell

Collaborate with teams

Emphasize on research based procedures

Socially significant/ lasting behavior change to improve quality of life for children & others involved

Behavior and environment contingencies

Results answered through direct observation & data analysis

Our kiddos come first!

Person centered planning & supports

Positive interventions

Behavior is affected by environmental variables

Behavior is learned & can be taught.

Data collected for active decision making on interventions’ effectiveness.

ABC’s of Behavior

Tim was playing alone and started saying “o o o”. Grandpa rushed over and exclaimed, “Yes, o o o” and handed him his favorite toy.

Antecedent?

Behavior?

Consequence?

Sally was walking around the room playing alone. Mom called her name and when she stopped and glanced at her mom. Mom smiled at Sally and kissed her on the cheek.

Antecedent?

Behavior?

Consequence?

Antecedent?

Behavior?

Consequence?

ABA Approach

Identify Goals

• Target behaviors to change
• Develop a plan

Implement Change

• Follow through with plan as developed
• Take data

Evaluate

• Analyze effects of change & make changes as necessary

Group Approach

Collaborative

• Constructive feedback and advice welcomed
• Listen respectfully

Open and Honest

• Stories, ideas, & opinions shared
• There are no errors, only learning opportunities

Understanding

• Considerate of others and their place in this journey
• Offer support for others hardships
**Purpose of ABC**

**Your Goals**
- Choose Goal
- Decide How to Monitor
- Develop a Plan
- Implement Plan

**Our Plan**
- Group Support
- Demonstrate and Practice Strategies
- Answer Questions
- Provide Resources
- Support Implementation

**Family Goals**

**What do you want to stay the same?**
- What do you like?
- What are your child’s strengths?

**What do you want to change?**
- How often does it occur?
- What does it occur?
- Why does it occur?

**What do you need to accomplish goals?**
- What support do you need? From us, from the group, from others.

**Goal Discussion**

**REMEMBER:**

- Listen
- Support Ideas
- Offer Constructive Feedback

**Video Discussion**

**Homework**

- Before you leave today schedule filming time
- Continue to think about your goal
- Finish Goal Sheet
- Review workbook before next time
- Locate items your child likes to bring next week (does not have to be a “toy”)

**Filming Time**

- Next Filming Time:
  - Day: ______
  - Time: ______

  With Araber & Brittany

  If you need to reschedule please call

- Number
The ABC’s of Playing, Learning, and Growing Together

Day 2: The Bond  
Brittany Vaughn and Amber Wiles

Recap

**ABA**
- Science of behavior in natural environment
- Direct observation & measurement
- Lasting and meaningful outcomes

**ABC’s**
- Antecedent
- Behavior
- Consequence

**Working Together**
- Collaborative
- Open and Honest
- Understanding

Positive Reinforcement

**Definition:** A consequence delivered after a behavior and the future likelihood of that behavior increases.

You tickle your child and they laugh with you, you tickle them more often in the future.

What are examples of positive reinforcement in your life?

1. 
2. 
3. 

Agenda

- Brief Recap
- Identifying Reinforcers
- Rapport Building and Play
- Creating a Healthy Environment
- Shared Control and Contingencies
- Video Tape Viewing and Group Discussion

Reinforcement ABC’s
More on Reinforcement

Reinforcer
- Something that occurs after a behavior & increases the future likelihood of that behavior.
- Different for everyone
- Need to be changed frequently to maintain their effectiveness

Woah...It works!

Why is Rapport Building Important for Kids with Autism?

Our focus is on the parts of rapport building that have to do specifically with your child’s autism to enhance the bond you have with your child.

Reinforcers

How do we identify what might be reinforcing to someone?

- Observe them across a variety of settings
- Ask others
- Reinforcer survey
- Momentary effectiveness

What is Rapport?

“We say that two people have established rapport when their relationship is characterized by closeness, empathy, and mutual liking.”

(Car, Levin, McCormachie, Carson, Kemp, & Smith, 1994, p. 113.)

Why Build Rapport?

- Increases likelihood of participation in family activities
- Decreases likelihood of problem behavior
- Positive experience for both people involved
- High levels of “happiness”/Low levels of “unhappiness”

(post, Laughter & Car, 2005)
**Steps in Rapport Building**

**Step 1: Make yourself into a source from which to obtain reinforcement.**
- Level A: Require that your child approach you to gain access to the reinforcers.
- Level B: Require that your child request to gain access to reinforcers.

**Step 1: You = FUN!**

List preferred activities and items for your child:
- This may include toys, food, games, events, locations, & topics of conversation.

Now Let’s Practice

**Step 2: Let’s Play Together**

Use list of preferred activities and items for your child:
- Withhold access to items.
- Get child interested in the item/interacting with you.
- Engage in high engagement/interactive play with item.
- When child approaches, throw a party.

Now Let’s Practice
Creating a Healthy Environment

You and your child are playing. Your child looks at a ball and starts walking towards the ball. How can you capitalize on your child's interest?

Arranging the Environment

Choose Play & Learning Areas

- Withhold or delay provision of expected/desired objects or events
- Provide a range of interesting activities
- High level of interest
- Variety
- Other choices

Engagement

Delivering Reinforcement

- Carrot: Immediate
- Rattle: Materials
- Variety
- Make it fun
- Social

Joint Attention

Expanding Reinforcers

Pair yourself with new items

- Pair new reinforcers with existing ones
- Engage in exciting, creative play with new items
- Gradually shorten time with old reinforcers and increase time with new items
Expanding Reinforcers

The student likes play-dough, but doesn’t like toy cars. You want to try to expand reinforcers. Try rolling the toy cars through the play-dough, making cars out of play dough, etc. Every time the child earns play-dough, they also play with toy cars. Gradually shorten the play-dough time and increase the cars time. Stand in awe as the child selects toy cars from the reinforcer menu on their own.

Let’s Play!
Grab a couple toys and let’s work on expanding reinforcers.

Video & Goal Discussion
REMEMBER:

Listen  Support Ideas  Offer Constructive Feedback

Homework

- Arrange a space for social interactions.
- Schedule a playtime.
- Limit distractions.
- Rotate toys/activities.

Recap

Day 1  Day 2

Gaining Approaches
- Engaging with the same activity
- Child smiles and laughs (positive affect)
- Eye contact
- Both you and child maintain the interaction

Signs of Success

Next Filming Time:
Day: _____
Time: _____

With Amber & Brittany

If you need to reschedule please call
Introduction to Basic Teaching

Behavior

Antecedent

Child Approaches

Deliver Praise + Reinforcer

Balance Change

Consequence

Child Approaches More Often

Interactive Teaching

Teaching Video

Interactive Teaching

Follow your child's lead

Initiate your child

Balanced Turns

Playful distraction

Modeling & repeating language

The Teaching “DANCE”

Decide

What are your teaching goals?

What environment will you teach in?

How will you break goals into manageable units?

Is this a good teaching moment?

Arrange

Do you have your preferredtipo/setting?

How will you regulate access to the learning activity?

How will you use and lose prompts?

Are you at the child's level and walking?

Now

Is your response to progress immediate, generative, & contingent?

Are you looking for responses or the goal bond?

Count

Are goal behaviors monitored in a way that allows you to assess progress over time?

Enjoy

Is everyone having fun?

Are you utilizing demands and reassessment?

What happens if....?

“What color?”

No Response

Antecedent

Consequence

Prompting ABC’S

“What color?”

Prompt

Child says, “Red”

Behavior

Deliver Praise + Reinforcer

Prompting

Added stimuli following the instruction to elicit a correct response

Attention gained before initial instruction delivered

Approx. 2-4 seconds opportunity given to respond

Prompts given as necessary

Prompting stopped when correct response made

False prompts as soon as possible

Consequence
Types of Prompts

**Physical:**
- Full Physical: Guide child through entire task
- Partial Physical: Guide child through portion of task
- Touching: Light touch on arm to start task
- **Direction:** verbal cue to child for what to do ("look")
- **Pointing:** point to something in environment

**Verbal:**
- Picture or symbol acts as a cue

**Gestural:**
- Targeted response may be moved closer to child or made more obvious

**Pictorial:**
- Demonstration of behavior targeted

**Positional:**
- Demonstration of behavior targeted

**Model:**
- Demonstration of behavior targeted

Prompt Fading

Identify behavior to be taught & level of prompts needed
- Identify process to be used to fade prompts
- Identify criteria for initiating fading
- Put process into effect
- Take data
- Fade prompts as planned.

Prompt Fading Example

**Fading the physical prompt of guiding a child’s hands may follow this sequence:**

- Supporting wrists
- Touching hands lightly
- Touching forearm or elbow
- Withdrawing physical contact altogether

Prompting

- What is your goal?
- What type of prompt(s) could you use?
- How could you use your prompt(s)?

Functions of Challenging Behavior

**Attention**
- Ignore CB
- Teach appropriate attention getting response

**Escape**
- Demand too difficult/ineffective?
- Do not allow escape for CB

**Tangibles**
- Do not give access to tangibles when CB occurs
- Teach child to request what they want
- Eventually teach to accept "no" as an answer

**Self-Stimulatory**
- Replacement behaviors
- Appropriate time/place
Extinction

A reinforcing consequence that previously followed a behavior is removed.

Thus behavior significantly decreases over time.

Generally associated with extinction bursts.

Extinction burst: the temporary increase in frequency, intensity, and/or duration of the behavior.

Extinction Burst

Duration of Crying

Baseline

Intervention: Extinction

Establishing Instructional Control

Saying time, context, response!!!

Begin interpreting reinforcer stimuli

Integrate new target

Pick up through with demands

Delete non-related requests only ONE time

What is Junk Behavior?

What should I do?

Why does my child engage in Junk Behavior?

NOT physically harmful to persons

NOT physically harmful to property

Frustrating

To get attention

To get a reaction

To get you to do something

Ignore the Junk Behavior

Immediately give your attention to another person or activity

Say NOTHING about the Junk Behavior

Shaping Behavior

Definition: reinforcing steps to a target behavior.

Target behavior is infrequently or never displayed by child.

Shaping

Build desired behavior in steps and reward those behaviors that come progressively closer to the final goal.

As your child masters each sub-step, you require that s/he move to the next step in order to receive reinforcement.

Shaping

Putting glasses up to face

Putting glasses up to face

Teaching glasses

Teaching glasses

Teaching glasses

First day of training

Time

Last day of training
Shaping Guidelines

1. Select the end goal
2. Decide the criterion for success
3. Identify the first behavior to reinforce
4. Eliminate interfering or extraneous things in environment
5. Proceed to gradual stages
6. Step reinforcement for previous steps
7. Continue reinforcement when the goal is achieved

Communication

- Increase number of requests
- No communication with discriminable meaning
- Teach appropriate ways to get desired items
- Increase social-positive communication opportunities

Let’s get talking!

Antecedent: Child approaches or reaches for item
Withhold item with expectant look and wait for response

Behavior:
Child makes eye contact, a vocalization, gesture, or nudge, etc.
Child does not respond

Consequence:
Deliver item/attend and expand vocalization
Provide a model (prompt)

Shaping Practice

What is your end goal?
When will you move to the next step?
What are your steps?

Where do we start?

Accept ANY vocalization that more closely resembles requested item
Require only sounds related to the item
Require full sentences

Expanding: Examples

**Spinning around**
- "Go"
- "Spin"
- "Move again"
- "Spin me around"
- "Spin me around again"

**Blowing Bubbles**
- "Blow"
- "Bubbles"
- "Blow bubbles"
- "Want more bubbles"
- "I want more bubbles"
Recap

The Basics
- Antecedents
  - Behavioral Reasons
- Reinforcement
  - Behavior:
- ABA: Data-based interventions
- Variations

The Bond
- Reinforcement
  - Behavioral Reasons
- Antecedents
- Support.
- Strategies
- Get support.
- Follow your child's lead.
- Supportive.
- Remember DANCE.

The Bounty
- Identify signs of success and look for them.
- Remember to DANCE.
- Support:
  - Ideas
  - Constructive feedback

Homework
- Schedule next filming session.
- Don't forget The Teaching "DANCE".
- Continue to work on your goal.
- Practice taking data.
- Have fun! See you in two weeks!
(9-1-12)

Video & Goal Discussion
REMEMBER:

- Listen
- Support Ideas
- Offer Constructive Feedback

Next Filming Time:
Day: ______
Time: ______

With Amber & Brittany
If you need to schedule the next call
[Contact Information]

[Image of children]
The ABC’s of Playing, Learning, and Growing Together

Day 4: The Breakthrough
Brittany Vaughn and Amber Wiles

Goal Discussion
REMEMBER:
- Listen
- Support Ideas
- Offer Constructive Feedback

Agenda
- Videotape Viewing and Discussion
- Where do we go from here?
- Recap
- Resources
- Schedule Follow-up
- Survey

GOOD JOB!!!

Where do we go from here?

<table>
<thead>
<tr>
<th>GOALS</th>
</tr>
</thead>
<tbody>
<tr>
<td>Continue to work on current goals</td>
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<tr>
<td>Start to look for new goal areas</td>
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<table>
<thead>
<tr>
<th>TEACHING</th>
</tr>
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<tbody>
<tr>
<td>Get approaches and engagement</td>
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<tr>
<td>Start with mastered tasks then intersperse new targets</td>
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<table>
<thead>
<tr>
<th>CHALLENGING BEHAVIOR</th>
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<tr>
<td>Ignore, Juke</td>
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<td>Extinction</td>
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<tr>
<td>Teach/Remove inappropriate behavior</td>
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<tr>
<th>RAPPORT</th>
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<tbody>
<tr>
<td>ONWARD!!</td>
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<tr>
<td>Remember to have fun</td>
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</tbody>
</table>

Recap
- Basics
  - Look for the ABC’s
  - Identify goals, decide how to monitor, develop & implement plan

- Bond
  - Identify, vary, & expand reinforcers
  - Arrange environment
  - Have fun

- Bounty
  - DANCE!!!
  - Acknowledge Signs of Success
Resources: Books

- A Work in Progress
  * Edited by Ron Leaf and John M. Elslander
  * How to develop an ABA program, teaching social skills & conversation

- Behavioral Intervention for Young Children with Autism
  * Edited by Catherine Maurice, Gina Green, and Stephen E. Luke
  * A Manual for Parents and Professionals

- Making a Difference
  * Edited by Catherine Maurice, Gina Green, and Richard Fox
  * Follow-up to 1996 version, more techniques

- Pivotal Response Treatments for Autism
  * By Robert L. Koegel and Lynn Kern Koegel
  * A parent's manual on teaching communication, social skills

- Teaching Social Communication to Children with Autism
  * By Brooke Ingrosso and Anna Dvorak

Resources: Personal Experiences

- Facing Autism: Giving Parents Reason for Hope & Guidance for Help
  * By Lynn M. Hamilton

- Let Me Hear Your Voice: A Family's Triumph Over Autism
  * By Catherine Maurice

- Overcoming Autism
  * By Lynn Kern Koegel and Clare Lazebnik

Resources: Websites

- Autism Speaks
- The Florida Autism Recovery Network
- The Autism Society of America
- Autism Research Institute
- Families for Early Autism Treatment

Homework

- Continue to work on goals and monitor progress.
- Feel free to contact us with any questions you may have.
- Have fun!

Follow-up Appointment:

Day: ______
Time: ______
With Amber & Brittany
If you need to reschedule please call...
APPENDIX C

ABC PARENT COACHING PROGRAM CHILD GOAL BEHAVIOR DATA SHEETS

Co-authored by Brittany Vaughn and Amber Wiles.
### Approaches

Approach: Child comes within 2 feet of parent

### Retreats

Retreat: Child moves a distance of 2 feet or more away from parent/activity

### Appropriate Requests

Appropriate Requests: Child uses a vocalization or leading behaviors to gain access to a desired item/object or activity

### Challenging Behavior

Challenging Behavior: Child engages in behavior that is dangerous or potentially damaging to himself, others or property and/or crying. (Ex: Hitting objects or people, crying, running into street)

### Duration Engaged

Duration Engaged: Total amount of time child is oriented towards the activity and/or parents

### Demands

Demands: Anytime parent requests the child to do something or asks a question that requires a verbal response (Ex: questions, "Do this", "Get the train") (Non-examples: reprimands).

### Correct Response

Correct Response: Child accurately responds to demand/request within 5 sec. (Ex: "Pick up the block" Child picks up the block; "Do you want cow or chicken?" Child: "Cow") (Non-examples: "Pick up the block" Child picks up the train; "Do you want cow or chicken?" Child: "Horse")

Prompted Correct: Child responds inaccurately to demand/request (Ex: "Pick up the block" Child picks up the train; "Do you want cow or chicken?" Child: "Horse") (Non-examples: "Pick up the block" Child picks up the block; "Do you want cow or chicken?" Child: "Cow")

Incorrect Response: Child does not respond or responds after 5 sec.

No Response: Child does not respond or responds after 5 sec.

Demands: Anytime parent requests the child to do something or asks a question that requires a verbal response (Ex: questions, "Do this", "Get the train") (Non-examples: reprimands).

Approach: The child comes within 2 feet of the parent/activity.

Retreat: Child moves a distance of 2 feet or more away from parent/activity

Challenging Behavior: Child engages in behavior that is dangerous or potentially damaging to himself, others or property and/or crying. (Ex: Hitting objects or people, crying, running into street)
<table>
<thead>
<tr>
<th>Correct Response</th>
<th>Prompted Correct</th>
<th>Incorrect Response</th>
<th>No Response</th>
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<tbody>
<tr>
<td>Responds to instructions delivered:</td>
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<table>
<thead>
<tr>
<th>Approaches</th>
<th>Retreats</th>
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<table>
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<tr>
<th>Challenging Behavior (Duration)</th>
<th>Duration Engaged:</th>
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</table>

Correct Response: Child accurately responds to demand/request within 5 sec. (Ex: "Pick up the block" Child picks up the block; "Do you want cow or chicken?" Child: "Cow") (Non-examples: "Pick up the block" Child picks up the train; "Do you want cow or chicken?" Child: "Horse")

Prompted Correct: Child accurately responds to demand/request with assistance

Incorrect Response: Child responds inaccurately to demand/request (Ex: "Pick up the block" Child picks up the train; "Do you want cow or chicken?" Child: "Horse") (Non-examples: "Pick up the block" Child picks up the block; "Do you want cow or chicken?" Child: "Cow")

No Response: Child does not respond or responds after 5 sec.

Approach: The child comes within 2 feet of the parent/activity.

Retreat: Child moves a distance of 2 feet or more away from parent/activity.

Demands: Anytime parent requests the child to do something or asks a question that requires a verbal response (Ex: questions, "Do this", "Get the train") (Non-examples: reprimands).

Challenging Behavior: Child engages in behavior that is dangerous or potentially damaging to himself, others or property and/or crying. (Ex: Hitting objects or people, crying, running into street, climbing on counter)

Duration Engaged: Total amount of time child is oriented towards the activity and/or parents.

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<table>
<thead>
<tr>
<th>Approaches</th>
<th>Retreats</th>
<th>Demands</th>
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</table>

| Duration Engaged: |

Approach: Child comes within 2 feet of parent

Retreat: Child moves a distance of 2 feet or more away from parent/activity

Demands: Anytime parent requests the child to do something or asks a question that requires a verbal response (Ex: questions, "Do this", "Get the train") (Non-examples: reprimands).

Duration: Total amount of time child is oriented towards the activity and/or parents (siblings)
**Demands:** Anytime parent requests the child to do something or asks a question that requires a verbal response (Ex: questions, "Do this", "Get the train") (Non-examples: reprimands).

**Approach:** The child comes within 2 feet of the parent/activity.

**Retreat:** Child moves a distance of 2 feet or more away from parent/activity

<table>
<thead>
<tr>
<th>Step in Chain:</th>
<th>Acceptance:</th>
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<tr>
<td>Reinforced:</td>
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<td>Step 1: touches clippers turned off</td>
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<td>Step 4: touches clippers on (back w/ fingers)</td>
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<td>Step 5: touches clippers on (guard w/ fingers)</td>
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<td>Affect:</td>
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<td>Acceptance:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Affect:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Step 9: tolerates clippers on touching upper arm</td>
<td></td>
<td>W</td>
<td>A</td>
<td>W</td>
</tr>
<tr>
<td>Acceptance:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Affect:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Step 10: tolerates clippers on near ear</td>
<td></td>
<td>W</td>
<td>A</td>
<td>W</td>
</tr>
<tr>
<td>Acceptance:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Affect:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Step 11: tolerates clippers on touching side of head</td>
<td></td>
<td>W</td>
<td>A</td>
<td>W</td>
</tr>
<tr>
<td>Acceptance:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Affect:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Step 12: tolerates clippers on moving to top of head 1 time</td>
<td></td>
<td>W</td>
<td>A</td>
<td>W</td>
</tr>
<tr>
<td>Acceptance:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
<tr>
<td>Affect:</td>
<td></td>
<td>F</td>
<td>N</td>
<td>U</td>
</tr>
</tbody>
</table>

After 3 consecutive trials with acceptance (A) and favorable or neutral affect (F or N), move forward a step. After 2 consecutive trials with withdrawl (W) and/or unfavorable affect, move back a step.
APPENDIX D

ABC PARENT COACHING PARENT SKILLS CHECKLIST

Co-authored by Brittany Vaughn and Amber Wiles.
Thesis Training Checklist

Observer Initials: ______________

Date of BL Assessment: ___________________  Child Initials: ________

Date of PT 1 Assessment: ______________  Date of Follow-up Assessment: ______________________

Date of PT 2 Assessment: ______________

Date of PT 3 Assessment: ______________

0= Never (Does not demonstrate skill when appropriate)
1= Sometimes (Demonstrates skill approximately 50% of time when appropriate)
2= Always (Demonstrates skill at least 80% of time when appropriate)
N/A= Not applicable (No opportunity to demonstrate skill)

Rapport

<table>
<thead>
<tr>
<th>Score:</th>
<th>Targeted Skill:</th>
</tr>
</thead>
<tbody>
<tr>
<td>BL PT1 PT2 PT3</td>
<td>Uses appropriate voice tone and inflection throughout child interaction</td>
</tr>
<tr>
<td></td>
<td>Arranges the environment to allow for independent social approaches</td>
</tr>
<tr>
<td></td>
<td>Achieves at least 3 approaches per 10-minutes sample</td>
</tr>
<tr>
<td></td>
<td>Avoids having 5 or more retreats per 10-minute sample</td>
</tr>
<tr>
<td></td>
<td>Provides high preference events for approaches and initiations</td>
</tr>
<tr>
<td></td>
<td>Regulates access to high preference items/events</td>
</tr>
<tr>
<td></td>
<td>Parent and child appear engaged with same activity</td>
</tr>
<tr>
<td></td>
<td>Uses a variety of high preference events</td>
</tr>
<tr>
<td></td>
<td>Uses natural, response characteristic high preference events when possible</td>
</tr>
<tr>
<td></td>
<td>Honors appropriate requests</td>
</tr>
<tr>
<td></td>
<td>Delivers high preferences items/events to child non-contingently when appropriate (First 3-5 minutes of sample unless no approaches/engagement)</td>
</tr>
<tr>
<td></td>
<td>Avoids placing demands on child until appropriate (after 3-5 minutes of engagement)</td>
</tr>
<tr>
<td></td>
<td>Engages in high energy interactive play with items</td>
</tr>
<tr>
<td></td>
<td>o Orient toward child</td>
</tr>
<tr>
<td></td>
<td>o Manipulates toy in various ways</td>
</tr>
<tr>
<td></td>
<td>o Smiles</td>
</tr>
<tr>
<td></td>
<td>o Uses positive tone</td>
</tr>
<tr>
<td></td>
<td>o Varies voice inflection</td>
</tr>
</tbody>
</table>
### Reinforcement

<table>
<thead>
<tr>
<th>Score:</th>
<th>Targeted Skill:</th>
</tr>
</thead>
<tbody>
<tr>
<td>BL</td>
<td></td>
</tr>
<tr>
<td>PT1</td>
<td>Provides differential reinforcement for higher quality/harder responses</td>
</tr>
<tr>
<td>PT2</td>
<td>Maintains spatial control over reinforcers</td>
</tr>
<tr>
<td>PT3</td>
<td>Varies reinforcer</td>
</tr>
<tr>
<td></td>
<td>Uses behavior descriptive praise with reinforcer</td>
</tr>
<tr>
<td></td>
<td>Delivers reinforcer within 2 sec. of criterion response</td>
</tr>
<tr>
<td></td>
<td>Delivers worthwhile amount of reinforcement</td>
</tr>
<tr>
<td></td>
<td>Identifies potential reinforcers</td>
</tr>
<tr>
<td></td>
<td>Engages child following delivery of reinforcer</td>
</tr>
</tbody>
</table>

### Incidental/Naturalistic Teaching

<table>
<thead>
<tr>
<th>Score:</th>
<th>Targeted Skill:</th>
</tr>
</thead>
<tbody>
<tr>
<td>BL</td>
<td></td>
</tr>
<tr>
<td>PT1</td>
<td>Creates opportunities for responding</td>
</tr>
<tr>
<td>PT2</td>
<td>Arranges joint attention, turn taking</td>
</tr>
<tr>
<td>PT3</td>
<td>Offers at least 2 choices to child during 10-min sample</td>
</tr>
<tr>
<td></td>
<td>Balances contingent access and engagement</td>
</tr>
<tr>
<td></td>
<td>Facilitates functional activities</td>
</tr>
<tr>
<td></td>
<td>Presents comments related to interests/activity</td>
</tr>
<tr>
<td></td>
<td>Has child’s attention before instruction</td>
</tr>
<tr>
<td></td>
<td>Delivers instructions clearly, one time</td>
</tr>
<tr>
<td></td>
<td>Uses appropriate voice tone</td>
</tr>
<tr>
<td></td>
<td>Uses appropriate, criterion-related prompts</td>
</tr>
<tr>
<td></td>
<td>Uses immediate, effective prompts</td>
</tr>
<tr>
<td></td>
<td>Accepts approximations as appropriate</td>
</tr>
<tr>
<td></td>
<td>Uses least intrusive procedures (ex: corrections)</td>
</tr>
<tr>
<td></td>
<td>Ends on positive (stick with a target until a correct and positive affect)</td>
</tr>
</tbody>
</table>
Thesis Training Checklist

Observer Initials: ______________

<p>| | | |</p>
<table>
<thead>
<tr>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>Maintains consistency (follows thru with requests)</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varies activity levels (move vs. sit) at least 2 times during 10-min sample</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Varies high/low preference activities at least 2 times during 10-min sample</td>
<td></td>
<td></td>
</tr>
<tr>
<td>Allows time for child initiation</td>
<td></td>
<td></td>
</tr>
</tbody>
</table>

Understanding/ABC’s of Behavior

<table>
<thead>
<tr>
<th>Score:</th>
<th></th>
<th></th>
<th></th>
</tr>
</thead>
<tbody>
<tr>
<td>BL</td>
<td>PT1</td>
<td>PT2</td>
<td>PT3</td>
</tr>
<tr>
<td></td>
<td></td>
<td></td>
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</tr>
</tbody>
</table>

- Ignores minor misbehavior
- Avoids using name as reprimand
- Stops and redirects dangerous behaviors
- Uses appropriate neutral voice tone (even when corrective)
- Blocks aggression as needed
- Removes reinforcement when problem behavior is occurring

Total BL Score: ______________  Total PT2 Score: ______________
Total PT1 Score: ______________ Total PT3 Score: ______________

BL Notes:

PT1 Notes:

PT2 Notes:

PT3 Notes:
REFERENCES


Positive behavioral support: Including people with difficult behavior in the community (pp. 403-424). Baltimore: Brookes.


