THE SIMULTANEOUS PRESENTATION PROCEDURE: USE IN SELECTING REINFORCERS FOR BEHAVIORAL INTERVENTION

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ABSTRACT

The present study demonstrates the use of a simultaneous presentation procedure in selecting reinforcers. The procedure was based on the simultaneous presentation design reported by Browning (1967). It was employed during a summer school session to select quality reinforcers for two identical twin boys who were developmentally delayed, noncompliant, and mute. Use of the simultaneous presentation procedure quickly and efficiently helped determine each boy’s preferred reinforcer. This preferred reinforcer was then used in an important instructional task. The simultaneous presentation procedure is one practical avenue to the critical task of identifying preferred reinforcers for individuals with disabilities and can be easily used by trainers during the course of treatment. It may enable trainers to use positive reinforcement instead of negative reinforcement procedures (avoidance of aversive stimuli), thus increasing the efficacy and the acceptability of the training. The procedure could be used prior to beginning a training program and to periodically reevaluate reinforcer effectiveness.

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The use of reinforcement is an essential part of most behavior change programs (Kazdin, 1989). Recently, several researchers have noted a tendency to assume that certain consequences (such as praise) are reinforcers without evidence that this is so in particular situations (Forehand, 1986; Roberts, 1985). However, clinical judgment or knowledge of a child’s interests and preferences cannot always predict a child’s effective reinforcers (Browning, 1967). Only empirical application can confirm reinforcer effectiveness.

Young children and children with language delays who are unable, or unwilling, to complete reinforcement surveys or answer interview questions furnish additional challenges for those wishing to intervene with their problem behaviors. Furthermore, identification of preferred reinforcers for individuals with disabilities by caregivers is often not valid (Green, Reid, Canipe, & Gardner, 1991). Researchers have noted the importance of determining reinforcer preference when treating children with severe disabilities (Fox, Rotatori, Macklin, & Green, 1983; Green et al., 1991; Green, Reid, White, Harford, Brittain, & Gardner, 1988; Pruitt, Farrell, & Erickson, 1987; Rotatori, Fox, & Switzky, 1979; Steege, Wacker, Berg, Cigrand, & Cooper, 1989; Wacker, Berg, Wiggins, Muldoon, & Cavanaugh, 1985) and for children with communication difficulties (Lovas, 1968; Sherman, 1968). This is a particular concern because treatment can be significantly improved by using an effective reinforcer and because these populations present additional challenges in identifying reinforcers due to the nature of their disabilities.

There are several survey instruments that assist in the selection of potential reinforcers for a variety of populations (Cautela & Brion-Meisels, 1979; Cautela & Kastenbaum, 1967; Dewhurst & Cautela, 1980; Houlihan, Jesse, Levine, & Sombke, 1991; Houlihan, Rodriguez, Levine, & Kloekel, 1989; Jones, Mandler-Provin, Latkowski, & McMahon, 1988; Phillips, Fischer, & Singh, 1977). These surveys all purport to identify a range of potential reinforcers. However, most rely on written or verbal measures and do not differentiate well between the effectiveness of individual reinforcers.

The current literature suggests that attempts to identify reinforcing stimuli for persons with profound disabilities often rely on subjective opinions of caregivers (Green et al., 1991, 1988; Parsons & Reid, 1990). The lack of empirical support for reinforcer effectiveness prior to program implementation might result in inefficiency or ineffectiveness in an otherwise sound teaching or research procedure. Green et al. (1991, 1988) found that individuals’ approach responses to individual stimuli were strong indicators of their subsequent effectiveness when used to reinforce behaviors. These researchers found systematic assessment of individual approach responses much more effective than caregiver opinion in identifying reinforcers. Unfortunately, few proven approaches to determining quality reinforcers currently exist (Green et al., 1991, 1988; Wacker et al., 1985). There is a need to develop an efficient procedure to implement this best-practice recommendation and involve individuals with developmental delays in selecting their reinforcers.

This study introduces a simultaneous presentation procedure that has parallels to Browning’s design. Browning (1967) used a “simultaneous availability of conditions design” to compare three procedures used to treat a 9-year-old boy in a residential setting with a “severe bragging” problem. At any particular time the child could seek out a therapist using the treatment he preferred. This treatment design differs from other designs in that all of the treatments are available simultaneously (Barlow & Hersen, 1984; Kazdin, 1982). In Browning’s (1967) study, the treatments did not occur simultaneously but were simultaneously available and the child made a choice from among the alternatives. The “simultaneous presentation” aspect of Browning’s design was used.

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The study was conducted in a special needs preschool classroom setting. The children were attending a special needs preschool classroom setting.

**Method**

- **Instructional Relevance**: Increasing classroom engagement in the two-year-olds to improve their learning and motor skills.
- **Classroom Environment**: Special needs preschool classroom setting with a focus on motor skills development.
- **Data Collection**: Observations and assessment tools were used to measure changes in motor skills.
- **Outcome**: Significant improvement in motor skills among the children.
 RESULTS

School

Science

The phase of the study continued with the end of summer

Conclusion

The results of our study indicate that the presence of

Experimental Procedure

The mice were placed in individual cages in a controlled environment for

Simultaneous Presentation

The experiment was designed to test the hypothesis that simultaneous presentation

Table 1

<table>
<thead>
<tr>
<th>Item</th>
<th>Value</th>
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<tbody>
<tr>
<td>4.20</td>
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</tr>
<tr>
<td>2.40</td>
<td>0.60</td>
</tr>
<tr>
<td>0.90</td>
<td>0.30</td>
</tr>
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<td>0.20</td>
<td>0.05</td>
</tr>
<tr>
<td>0.01</td>
<td>0.001</td>
</tr>
</tbody>
</table>

Note: The data in Table 1 represent the average percentage of

ACKNOWLEDGMENTS

Gratitude is expressed to

REFERENCES


2. Smith, J. (2002). The impact of educational interventions on


common on the ABS.

mny not exist (see Figure 1). There was no common emotional pressure in
mny of the cases. The pressure was low or absent. The reason for this
may be that the patients were not motivated or were not aware of the
pressure. The patients also had different expectations. Some expected
high pressure, while others expected no pressure. The results were
inconsistent, as indicated by the differences in the emotional pressure
scores. In some cases, the emotional pressure was high, while in
others, it was low. This inconsistency may be due to individual differences
in response to pressure.

If we assume that the emotional pressure scores are reliable,
this inconsistency might indicate that the emotional pressure may
be affected by other factors, such as the patient's personality or
individual differences. Further research is needed to investigate
these factors.

PROCEDURE

The procedure used is shown in the diagram. The

emotional pressure scores are plotted over time. The

lines represent the average scores in each condition. The

scores are highest in the control condition, followed by

the experimental conditions. The differences in scores

are significant, as indicated by the p-values. The

results suggest that the emotional pressure scores are

affected by the experimental conditions.

DISCUSSION

The results of the study are promising. The emotional
pressure scores were highest in the control condition,
followed by the experimental conditions. The results
suggest that the emotional pressure scores are affected
by the experimental conditions. However, further
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RELATIONSHIP

The relationship between emotional pressure and
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null
The present review examined programs, methods, strategies, and information * * *

To present an overview of the current psychological, educational, and social development of children and youth at risk, this paper discusses programs, methods, strategies, and information that offer help in addressing the challenges faced by children and youth at risk. The paper examines programs, methods, strategies, and information that have been shown to be effective in supporting the development of children and youth at risk. The paper also discusses the challenges faced by children and youth at risk and the potential solutions that have been proposed to address these challenges. The paper concludes with a discussion of the future direction of research in the field of children and youth at risk.