# Selecting and Implementing Interventions

**Behavior analyst certification examination**

8 tasks · 20 questions on the exam · BACB Test Content Outline (6th ed.)

This area covers the decisions that turn assessment into an effective plan and keep it effective: writing measurable goals, choosing interventions, selecting replacement behaviors, planning for side effects and relapse, judging procedural integrity, deciding from data whether to change the plan, and working with other people. Questions describe a plan in progress and ask what to do next; the best answers check integrity before changing the plan, choose function-based and socially valid options, and make decisions from data.

**You should be able to:** Given a plan in progress, you should be able to write measurable goals, choose function-based and socially valid interventions and alternatives, anticipate side effects and relapse, and decide from integrity and outcome data whether to continue, modify or change it, working with others in the process.

## Every task: the key point and the trap

**H.1 Develop intervention goals in observable and measurable terms.**

Intervention goals describe the target behavior in observable, measurable terms, using the operational definition.

**Trap:** Goals that use labels (improve, understand, be appropriate) or lack conditions and criteria cannot be measured, however important they are.

**H.2 Identify and recommend interventions based on assessment results, scientific evidence, client preferences, and contextual fit (e.g., expertise required for implementation, cultural variables, environmental resources).**

Interventions are selected based on assessment results, especially the function of problem behavior and the learner's skills, so the procedure addresses why the behavior occurs.

**Trap:** An effective intervention from the literature can still be the wrong choice if the family cannot implement it or it does not fit the function of the behavior.

**H.3 Select socially valid alternative behavior to be established or increased when a target behavior is to be decreased.**

When a behavior is to be decreased, an alternative behavior should be taught or strengthened that produces the same reinforcer (function-matched), so the person still meets their needs.

**Trap:** An alternative behavior that does not produce the same reinforcer as the problem behavior is unlikely to replace it, however appropriate it looks.

**H.4 Plan for and attempt to mitigate possible unwanted effects when using reinforcement, extinction, and punishment procedures.**

Reinforcement procedures: plan for satiation (vary reinforcers, use small amounts), dependence on contrived reinforcers (fade to natural ones), and for reinforcing problem behavior inadvertently (deliver reinforcers contingently).

**Trap:** Unwanted effects are not only a problem of punishment; extinction and even reinforcement procedures have side effects that should be planned for.

**H.5 Plan for and attempt to mitigate possible relapse of the target behavior.**

Relapse is the return of a reduced behavior after successful treatment; forms include resurgence (the problem behavior returns when an alternative behavior is extinguished or its reinforcement weakened), renewal (return when the context changes from treatment to another setting), reinstatement (return after noncontingent presentation of the old reinforcer) and spontaneous recovery.

**Trap:** Relapse is predictable when the reinforcement for the alternative is reduced or the context changes; plan for it before treatment ends rather than treating it as a new problem.

**H.6 Make data-based decisions about procedural integrity.**

Before concluding that an intervention does not work, check procedural integrity: an intervention that is not being implemented as planned has not been tested.

**Trap:** Changing an intervention that has not been implemented with integrity confuses implementation problems with the intervention's effectiveness.

**H.7 Make data-based decisions about the effectiveness of the intervention and the need for modification.**

Decisions are based on graphed data reviewed often: level, trend and variability compared with baseline and with the goal.

**Trap:** Modifying a plan should follow data and predefined decision rules, not impressions, and only after integrity and measurement have been checked.

**H.8 Collaborate with others to support and enhance client services.**

Clients often receive services from several professionals (teachers, speech-language pathologists, occupational therapists, physicians, psychologists); collaboration improves consistency and outcomes.

**Trap:** Collaboration means coordinating goals and procedures with others while staying within one's scope, not adopting every approach others use nor ignoring their expertise.

## Key terms

**Behavioral objective:** A goal stating the learner, behavior, conditions and criterion in measurable terms.

**Contextual fit:** The match between an intervention and the values, skills, resources and routines of the people and setting.

**Social validity:** The acceptability and importance of goals, procedures and outcomes to those affected.

**Least restrictive effective procedure:** The procedure that achieves the goal with the least intrusion on the client's freedom and dignity.

**Replacement behavior:** An alternative behavior that serves the same function as the problem behavior.

**Fair pair rule:** For every behavior to be decreased, a behavior to be increased is selected.

**Resurgence:** The return of a previously reinforced behavior when reinforcement for an alternative is reduced or stopped.

**Renewal:** The return of an extinguished behavior when the context changes.

**Reinstatement:** The return of an extinguished behavior after noncontingent delivery of the former reinforcer.

**Decision rule:** A predefined criterion for continuing, modifying or ending an intervention based on data.

**Aim line:** A line on a graph from current performance to the goal showing the expected rate of progress.

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