

# Pairing Positive Reinforcement with Planned Ignoring

*A Study Guide for Addressing Challenging Behaviors in  
Your Home*

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# PAIRING POSITIVE REINFORCEMENT WITH PLANNED IGNORING

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## Addressing Challenging Behaviors in Your Home

*This study guide is a resource to help you use positive reinforcement and planned ignoring in your home. When used together, these two strategies can effectively reduce unwanted behaviors and increase positive, more appropriate behaviors.*

*Although each is a behavioral strategy on its own, it is the combination of these two that will help promote positive change. This study guide will assist you in learning how to use both concepts together.*

# GLOSSARY

## Positive Reinforcement:

- An added stimulus that increases a particular response or behavior.

## Planned Ignoring:

- Noticing a negative behavior and choosing to not give it any attention.

## Problem Behavior:

- Also may be called a challenging, inappropriate, undesired, or target behavior.

## Replacement Behavior:

- The new behavior you would like your child to do instead of the problem behavior you are seeing now.

## Consequence:

- Something that immediately follows a behavior. This will strengthen the behavior and increase the likelihood that the child will engage in the behavior again.

## Praise:

- Positive verbal words or phrase that follows the desired behavior.

## Extinction:

- Removing the item that is encouraging the negative behavior.

## Contingency:

- The planned relationship between the new positive behavior and the good consequence.

## Functional Assessment:

- The process of figuring out what is happening before and after a behavior. This can help us to understand why a child is doing something, and help us find a better replacement behavior.

# NOTES

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*Use this space below to write down any thoughts you have during the presentation.*

- You can include ideas you get from examples used in the presentation, possible explanations for your child's behavior you would like to look into, conversation topics with a behavioral health service provider you are working with, or questions you want to read more about from the references available.*

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## CASE STUDY PRACTICE

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A mother and her two children eat dinner together every night.

Christopher is 5 years old and has autism. His big sister, Allison, is a typically developing child. On any given night, Christopher may need to use a visual schedule, be prompted to eat his food, or may refuse the food because he doesn't like certain textures. There are times when the mom asks Allison about school that day, but then gets interrupted by her brother's behavior, and doesn't get to finish her story.

The mother is noticing that Allison has been poking fun at her brother, refusing to eat her food, and even throwing a tantrum if the mother tells her to "stop it, Allison, you know better!". The mother now has to deal with two children showing challenging behavior instead of just one and just wants to be able to sit down and eat her dinner!

### *Try to Identify...*

*What is the problem or target behavior?*

*What is the function of this behavior?  
(why is she doing it)*

*What is reinforcing the behavior?*

*Could you handle the behavior if it got worse?*

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### *Applying the Intervention...*

*What could the replacement behavior be?*

*What could be used to positively reinforce the new behavior?*

## CASE STUDY, REVISITED

It is dinner time again and Mom knows that Allison shows problem behavior at the dinner table when her brother is getting attention. She started dinner off by telling Allison that her behaviors have not been good and explains how she wants her to act instead. Mom explains she is going to try harder to create a balance between Allison and Christopher.

Mom decided to ask Allison to help her with her brother's visual schedule. This makes her feel special and creates more time for Mom. Since Allison loves talking about her school day, this is her reinforcement. Each time Allison helps her mom or doesn't show problem behaviors Christopher needs help, Mom says, "Thanks for being patient! I love the way you are sitting so nicely and eating your dinner!" She then makes sure to give Allison another opportunity to talk more about her day.

### *Try to Identify...*

*What is the replacement behavior?*

*What is the function of this new behavior?  
(why is she doing it)*

*What is reinforcing the new behavior?*

## FOUR STEPS TO FOLLOW (SIGLER & AAIMIDOR, 2005)

### Step 1: Be Specific.

Decide what the challenging or negative behavior is.

Why is it hurtful or so difficult about this behavior?

What would be a different, healthy behavior to replace the unhealthy behavior?

What is reinforcing the behavior now, and how will you support the new behavior?

- **Step 2: Provide Opportunities**

Create a situation for the child to practice the new behavior.

Show your child and explain to them what the appropriate behavior is.

Allow for as many successes as possible. Praise and reinforce your child each time he or she does the right thing.

### Step 3: Be Consistent.

Positively reinforce your child for performing the correct behavior each time you see it.

Ignore the problem behavior EVERY SINGLE TIME.

- **Step 4: Be Patient.**

Remember, the behavior will almost always get worse before it gets better.

Remain in the process and give your child time to process these new patterns of behavior and reinforcement.



## QUICK FACTS: [DO'S AND DON'TS & FAQs]

### DO THIS

- Follow the 4 steps:
  - Be Specific
  - Provide Opportunities
  - Be Consistent
  - Be Patient
- Be prepared for the behavior to get worse before it gets better.
- Intervene as soon as possible.
- Pair a positive reinforcement with verbal praise.
- Continue to praise your child for other good behaviors.
- Enjoy your time together 😊

### DON'T DO THIS

- Use positive reinforcement with planned ignoring if the child is not seeking attention.
- Assume your child knows you are frustrated or that they are doing the wrong thing.
- Expect your child to catch on right away.
- Give up too soon.
- Tell the child your strategies
- Reinforce a behavior you do not want.
- Wait until the behavior is unbearable to intervene.

When should I pair positive reinforcement with planned ignoring?

- Only after concluding the function of the unwanted behavior is to gain your attention.

Should I share with my child the strategy I am trying?

- No. Trust the process and shape your child's behavior through these strategies.

How can I use this to prevent problem behaviors in the future?

- Intervene early and use your functional analysis skills.

# ANNOTATED BIBLIOGRAPHY

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**Drabman, R. S., & Jarvie, G. (1977). Counseling parents of children with behavior problems: The use of extinction and time-out techniques. *Pediatrics*, 59(1), 78.**

Ignoring, or systematic withdrawal of attention, can be extremely helpful in extinguishing problem behaviors, but if implemented incorrectly, can have the opposite effect on behavior. Drabman and Jarvie (1977) address possible negative outcomes of time-out and planned ignoring and offer ways to positively instate these techniques. Extinction is defined as the removal of reinforcement from a situation in hopes that the consequence will decrease the previously established response. This article suggests that when using extinction and time-out procedures to control problem behaviors, it is important to recognize the problem as well as the severity and not to overgeneralize the simplicity of these techniques.

Furthermore, the authors suggest that a behavior must be ignored with 100% consistency and explain the child may be motivated more if the technique is not used consistently. The importance of replacement behavior is discussed, because timeout and ignoring will only teach children what not to do. Specifically, time-out environmental considerations are presented as well as positive communication skills for the parent to use with the child. This article provides the basis and foundational knowledge needed for my presentation.

**Galensky, T. L., Miltenberger, R. G., Stricker, J. M., & Garlinghouse, M. A. (2001). Functional assessment and treatment of mealtime behavior problems. *Journal of Positive Behavior Interventions*, 3(211).**

This study examined three participants, aged 2, 4, and 6, in the context of their home. Each child was a typically developing child whose problem behaviors were exhibited at mealtime. Choosing to review an article involving typically developing children is extremely important for this assignment because I hope to reach not only parents of children who have behavioral problems due to a diagnosis, but also those parents who are seeking support of behaviors in their typically developing children, and not necessarily across all developmental domains. The study aimed at comparing indirect versus direct functional assessment to determine what was motivating the child's behavior and to establish a treatment to promote better feeding practices.

Interviews, questionnaires, and observations were used to create a functional analysis of the antecedent and consequence of behaviors. This article is exemplary in defining constructs and presenting hypothesis generation to the parents of these children and in turn, the reader. The researchers evaluated preferred and nonpreferred foods of each child and attempted to understand individual differences and create reinforcements for the children. This article has strong relevance to parents in differentiating between what escape, attention, and tangible functions are, which could be driving factors in behaviors outside of mealtime as well. In general, this article provides support for the use of functional assessment and its ability to guide treatment with problem behaviors.

**Heiman, T. (2002). Parents of children with disabilities: Resilience, coping, and future expectations. *Journal of Developmental and Physical Disabilities*, 14(2), 159-171.**

This article took the perspective of the parents and the effect of the diagnosis of a child. In an interview format, the researchers were motivated by finding out what coping strategies parents use, and by identifying what these families experience and feel at the time before, during, and what their future ideals may hold. To do this, the participants were categorized and analyzed across individuals. This article allows the reader to see the perspective of a parent who has already received or may receive the news of a diagnosis about their child in the future. The most common strategies, their effectiveness, and what supports a resilient acceptance of this situation were presented. This has strong implications to my topic because in order for a parent or caregiver to play a role in the intervention process with their child, we cannot only look at the child as a single entity, but also the importance of the parent or caregiver in the process.

**Hester, P. P., Hendrickson, J. M., & Gable, R. A. (2009). Forty years later -- the value of praise, ignoring, and rules for preschoolers at risk for behavior disorders. *Education & Treatment of Children*, 32(4), 513-535.**

This is an exceptional article addressing my specific project focus of planned ignoring and praise. It is extremely well supported with references such as IDEA and NCLB to establish a strong stance on how well-implemented classroom rules, praise, and planned ignoring can improve social emotional and behavioral performance in children, as well as enrich the teacher-child relationship. Each component of this article is examined and defined by domains such as consistency, immediacy, and proximity and how each is relevant to praise, planned ignoring, and classroom rules of conduct. Furthermore, this article references Applied Behavioral Analysis and the pertinence of understanding the variability of each child. Finally, this article establishes strong evidential support for research done on how positively a classroom can be affected if children enter a classroom with a positive behavior repertoire, providing support for not only understanding and implication, but prevention of problem behaviors in the first place.

**Jull, S., & Mirenda, P. (2011). Parents as play date facilitators for preschoolers with autism. *Journal of Positive Behavior Interventions*, 13(1), 17-30.**

This study was an experimental design to examine if parents can be taught to support play between their children with autism and typically developing peers and to examine if the participation in this context can promote and increase positive play interactions between children with autism and typically developing children. The basis of the study was taken from previously established research which led Jull and Mirenda (2011) to extend the ideas of other researchers who found that supporting this type of social play can be enjoyable and can lead not only to immediate but lasting changes in the play behaviors of these children. This study involved a small sample size of children of children aged 4 to 6 with an autism diagnosis. This article struck me as being designed for easy replication of positive outcomes due to the naturalistic settings and materials used which can support the needs of diverse families that I will be trying to reach in my presentation.

This article utilized an interval time sampling approach to recording the interactions of the children and the parents of the children, as well as the displayed affect of all parties. The parents were trained to facilitate the children's interactions and asked to utilize their training in observed sessions. Parents reported confidence and high utility in their ability and outcome of the play dates they continued to support with their children, up to a year after the original study. This research is extremely relevant to me because it offers feasibility for training parents to do what a trained professional would typically do. The average training for the parents in this study was under six hours, which may be beneficial to assure parents that they can be involved and successful without impeding too much on their already busy life.

**Park, J. H., Alber-Morgan, S., & Fleming, C. (2011). Collaborating with parents to implement behavioral interventions for children with challenging behaviors. *Teaching Exceptional Children*, 43(3), 22-30.**

This article is meant to teach practitioners to work with parents of children with challenging behaviors. Finding a fit between individual families and the interventions that will be implemented is greatly stressed. Vignettes are used throughout the article to support and clearly demonstrate the concepts that are the foci of this research. Many important concepts are established in this article such as how to motivate the family of the child to become involved in the planning and execution of a behavior plan as well as specific ways to work with and teach parents about collecting important behavior information. The whole focus of the article is on the importance of successfully integrating parental involvement into addressing challenging behaviors. The authors suggest ways to help the family recognize what is propelling existing patterns of behavior and follow up with how to respond to problems behaviors. The final pieces of this article address the importance of open communication between the practitioner and parent as well as the importance of mutual respect. It is imperative that when training a parent, the practitioner provide follow up and maintenance strategies and always makes the parent feel understood and essential to the process.

**Sigler, E., & Aamidor, S. (2005). From positive reinforcement to positive behaviors: An everyday guide for the practitioner. *Early Childhood Education Journal*, 32(4), 249-253.**

This article presents the basis for positive reinforcement and also offers alternative positions to schools of thought about positive reinforcement, such as the idea that positive reinforcement turns children into 'praise junkies'. Also the authors present the difference between positive reinforcement (a way of identifying appropriate behavior) and praise (a positive response that fall into the category of a positive reinforcement). Sigler and Aamidor (2005) state, "the purpose of positive reinforcement is to increase the frequency of desired behaviors by helping to identify and then validate them for the children" (p. 250).

Furthermore, this article presents clear, everyday examples of children in the home, school, and community settings and distinguishes what the adult is doing correctly or incorrectly to elicit the behavior the child is exhibiting. The authors report the effectiveness of positive reinforcement and not only to promote desired behaviors but also to extinguish problem behaviors by modeling, offering replacement behaviors, and then reinforcing the new, desired behaviors. Finally, positive reinforcement is broken down into four key elements and offers best practice techniques to adults, for example, that positive attention can be much more effective than tangible items such as candy or stickers.