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1. INTRODUCTION

Behavior modification is the field of psychology which pertains to behavior analysis and modification by defining the association between environmental factors and the behavior of interest. The practice attempts to understand why the behavior is used and the information gathered is then used to develop a strategy of change by designing and implementing techniques that modify the environment and ultimately affect behavior

Under behavior modification, we have the following: the short history behind behavior modification, and we have behavior therapy, applied behavior analysis, concepts of applied behavior analysis, the methods of identifying functions of behavior, we have requirements management, conversion therapy, and sex therapy. In this paper, I will explore each of these aspects of behavior modification.

2. BEHAVIOR MODIFICATION

Behavioral modification is when observationally illustrated behavior change techniques are utilized in order to either increase or decrease the frequency of a particular behavior or action. The term was first used by Edward Thorndike in 1911 in clinical psychology to refer to psychotherapeutic techniques that came from empirical research. In modern times, the term has come to refer mainly to procedures which promote adaptive behavior via reinforcement and discourage maladaptive behavior through punishment or extinction. Behavior modification is a form of behavior therapy that is also known as Applied behavior analysis (ABA) and makes use of positive and negative reinforcements in a similar way to operant conditioning.

Behavior modification is based on B.F. Skinner's Operant conditioning and is one of the five main methods of disciplining children. This approach uses science to explain behavior change. Operant conditioning demonstrates that events which occur immediately before as well as immediately after a behavior affects the probability of that behavior occur again. This technique is also quite useful when dealing with children that have autism, oppositional defiant disorder or ADHD.

Behavior modification is made up of four primary components: positive reinforcement, negative reinforcement, positive punishment and negative punishment. It is quite possible that most parents and guardians make use of a few of these as part of their discipline technique in order to shape a child's behavior.

2.1. POSITIVE PUNISHMENT

Punishment is typically used to deter negative behavior therefore referring to punishment as positive seems contradictory. In operant conditioning, positive implies including a result that will discourage the child from engaging in the same behavior in future. When children get too much positive discipline, it can result in them centering their outrage toward their guardians for the discipline instead of really learning from their error and concentrating on how to do things differently.

A common example of this is physical discipline or spanking. There is evidence which suggests that this type of punishment can actually be harmful to a child's development and can cause them to become more aggressive or develop other behavioural problems.

Specific examples of positive punishment include:

- Giving a child extra chores when they lie about something
- Allowing a child to face natural consequences by going to school when they have not done their homework and getting zero
- A child says a swear word and his parents tell him to write 100 sentences saying he will not swear again.

2.2. NEGATIVE PUNISHMENT

Negative punishment implies taking away something that the child likes or enjoys, such as toys, privileges or positive attention.

Examples of this include:

- Putting a child in time-out for misbehaving, thus removing them from the environment they were enjoying
- Ignoring a child that throws a tantrum and therefore removing any attention
- Taking away a teenager's cellphone when they miss curfew

2.3. POSITIVE REINFORCEMENT

Positive reinforcement is when a child is given a reward in order to enforce a particular behavior and motivate the child to do it again. It is therefore a behavior modification technique that is used to encourage good behavior. This method is typically quite a quick and effective way to promote good behavior and works best when given at regular

intervals. This approach includes things such as praise, a reward system, or a token economy system. Even as adults, we rely on a positive reinforcement system, where we receive a paycheck from work at regular intervals, which motivates us to work and ensures that we continue the behavior of coming to work.

Whenever a child behaves in a certain way, there are consequences for their actions. If the child is given a positive consequence, they feel encouraged to repeat the behavior in future. Children who do not receive positive reinforcement are less likely to repeat that behavior, regardless of how the action made them feel. For example, a child who does all of the dishes, without being asked, may feel proud of their accomplishment but it is unlikely that the child will do it again if their effort is not acknowledged.

Examples of positive reinforcement include:

- Giving a hug or a pat on the back
- Clapping and cheering
- Telling others of how proud you are of the child's behavior while they are listening

Accidental positive reinforcement

Sometimes children are unknowingly given positive reinforcements for bad behavior. An example of this is a child that gets into the habit of throwing temper tantrums in order to get attention. This is because previous tantrums were rewarded with attention, even if the attention was negative. The best way to combat such behavior is by ignoring it.

Another good example is when parents give in to their children's demands. A child could get into the habit of whining to their parents for a new toy. This behavior is reinforced when the parents give in and give the child what they want because the child learns that whining for long enough will eventually yield their desired result.

2.4. NEGATIVE REINFORCEMENT

Negative reinforcement is used to change behavior by motivating the child to get rid of something negative. An example of this is when children do their homework on time to avoid being yelled at by their parents. In this instance, the yelling is the negative reinforce that the child is trying to get rid of. This method is used very rarely because it is not as effective as positive reinforcement.

Examples of negative reinforcement include:

- A mother nags a child to do the chores every day until one day they do them on their own to avoid getting nagged
- A child has been getting into arguments with peers at the bus stop so his mother decides to go to the bus stop with him every day. He begins behaving at the bus stop so his mother won't wait for the bus with him.
- A teenager complains about not wanting to go to school the entire ride to school every morning. His father turns on talk radio loudly to drown him out. The next day the teenager stops complaining so his father won't turn on talk radio.

2.5. BEHAVIORS TO REINFORCE

Any behaviors that you want to encourage in your child will require positive reinforcement. Shaping the child's behavior requires positive reinforcement for small steps that the child takes as they work on their good behavior.

The more consistently and the more often a child's behavior is reinforced, the higher the probability is that they will repeat the behaviors. Particularly when introducing the child to a new practice, it is most ideal to use positive reinforcement whenever the behavior is seen. Of course, it is impractical to reward every single behavior every time it is displayed. Therefore, it is best to create a reward system where there is immediate reinforcement such as a sticker or token; which can later be exchanged for bigger rewards.

In modern times, the idea of punishment has been criticized, particularly when it come to the introduction of a negative stimulus or event. In a clinical setting, the aversive event is typically a spray bottle filled with water. When this method is misused, however, aversive events can result in the child developing an affective (emotional) disorder as well as the child trying more and more to avoid the punishment.

When it comes to positive punishment, this method is used very sparingly by board certified analysts and is reserved for extreme cases when other forms of behavior modification have not worked, or in the event that the behavior is detrimental to the person or others.

According to Martin and Pear, there are seven characteristics to behavior modification:

- There is a solid emphasis on defining problems in terms of behavior that can be measured in some way.
- The treatment methods are ways of modifying a person's current environment to assist that individual to become more fully functional.
- The methods and rationales can be described precisely.
- The methods are often applicable to everyday life.
- The methods are based primarily on standards of learning, particularly operant conditioning and respondent conditioning
- There is a strong emphasis on scientific demonstration that a specific strategy was to blame for a particular behavior change.
- There is a strong emphasis on accountability for everybody involved in a behavior modification program.

Areas of effectiveness

Most of the techniques used in applied behavior analysis are aimed at addressing specific problems. There is a lot of compelling evidence to show that treatments based on behavior modification/ analytics are effective in creating evidence-based treatments.

With regards to children with attention deficit hyperactivity disorder (ADHD), a study showed that over a period of a few years, children that underwent behavior modification therapy were arrested less for felonies than children that were simply given medication for the condition.

An effective form of giving positive reinforcement is to have a ratio of five compliments for every one complaint in order to accomplish behavior modification. Behavior modification therapy has also repeatedly proven to be effective for behaviorists that work in the area of community reinforcement for addictions as well as depression.

2.6. BEHAVIOR MODIFICATION IN JOB PERFORMANCE

Positive reinforcement to change behavior has been shown to be effective in organizational training. A performance audit is an assessment which is conducted to determine which areas of behavior need to be modified In order to increase job efficiency and performance.

2.7. CRITICISM

B.F. Skinner's theory is based on the premise that behavior only increases if it is enforced. This contradicts the findings by Albert Bandura at Stanford University, who showed that violent behavior is imitated without being reinforced. Behavior modification has also been criticized for the level of training required to apply behavior modification techniques.

2.8. FIVE FACTORS

Every child is different and therefore a unique discipline approach is needed which is specifically geared towards the child's needs. There are five key factors to consider when managing a child's behavior.

1. Child's characteristics

The child's characteristics determine how they will respond to different methods of discipline. These characteristics include personality, strengths and weaknesses, talents and skills, physical ability, and temperament. For example, a short-tempered child who is disobedient requires a different disciplining style to a child that is docile and eager to please. The same goes for the difference between a child that is clumsy and often bullied versus a child that is athletic and popular amongst his peers.

2. Parent characteristics

Another factor which needs to be considered is how the characteristics of the parents or guardians fit with the characteristics of the child. This refers to the similarities and differences in their temperament, preferences and personalities. A parent who is low energy and enjoys a quiet environment will likely have a difficult time parenting a loud and high energy child.

3. Life changes and stressors

Stressors and life changes such as changing schools or adjusting to having a new baby in the household can affect a child's behavior. A child who feels left out or neglected because their new sibling is getting more attention may not respond well to a time out that excludes them even more from the family. An alternative approach to discipline would therefore be required while the child adjusts to the new situation.

4. Consequences for positive behaviors

If a child exhibits positive behavior, the probability that the child repeats this behavior is dependent on the consequence they receive for the action. Good behavior is usually overlooked but it is important to praise a child for following the rules, showing good manners or making good choices. This will increase the child's motivation to behave.

5. Consequences for negative behaviors

Sometimes children are unintentionally encouraged to repeat bad behavior because the behavior was reinforced. Negative attention can be extremely reinforcing and a child who gets any form of attention when they whine or throw a tantrum is likely to repeat the negative behavior the next time they want attention. It is therefore better to simply ignore the child as an effective consequence for their behavior.

Negative consequences need to be consistent in order to be effective. By not punishing negative behavior, the child could get the impression that they can sometimes get away with the behavior because it might go unpunished. Being consistent teaches children that every negative behavior leads to a negative consequence.

6. BEHAVIOR THERAPY

Behavior therapy is the broad term used to refer to behavior analytics, psychotherapy, or a combination of both. These procedures address either the behaviors alone, or also deal with the thoughts and feelings that might cause it. People who practice behavior therapy are called behaviorists and they focus more on learned behaviors and how the environment impacted these behaviors.

There are a large variety of procedures which are used to treat a person's psychological problems and the outcomes of these treatments are measured objectively. Behavior therapy falls into one of three main disciplines: applied behavior analysis (ABA), cognitive behavior therapy (CBT), and social learning theory. ABA is based on operant conditioning through positive reinforcement to change behavior after conduction a Functional behavior assessment (FBA). CBT on the other hand focuses on the feelings and thoughts behind the mental health issues and treatment is aimed at minimizing the issue.

6.1. SCIENTIFIC BASIS

Behavior therapy is based on the classic principles of operant conditioning and therefore assumes that behavioral problems are the result of learnt behaviors. In other words, behaviorists believe that psychological problems arise in the same ways as other learnt behaviors and that certain events in a person's life are what have influenced then to develop certain personality traits or behave in specific ways.

Classical conditioning occurs when a neutral stimulus comes immediately before another stimulus that triggers a reflexive response. The theory behind behaviorism is that if these stimuli are paired together often enough, the neutral stimulus will trigger the reflexive response.

Exposure and response prevention as well as systematic desensitisation have both evolved from respondent conditioning and have also received considerable research.

Such procedures have proven to be quite effective for people suffering from anxiety disorders, phobias and panic disorders.

6.2. BEHAVIOR AVOIDANCE TEST (BAT) TESTS

Therapists use an exposure-based method of behavior therapy known as the Behavior avoidance test (BAT) on their clients as a way to measure how long they can tolerate an anxiety-inducing stimulus. The therapist uses some sort of behavioral assessment to keep track of their client's progress as they undergo treatment. The BAT is the most suitable approach and its application extends beyond phobias. BAT can also be used for Post-Traumatic Stress Disorder (PTSD) and Obsessive-Compulsive Disorder (OCD).

6.3. CLINICAL APPLICATIONS

In spite of the fact that behavior treatment is based on the overall learning model, it is applicable to a variety of treatment packages that can be explicitly developed to manage troublesome behavior. Functional analysis has even been applied to issues that therapists normally experience such as partially engaged clients, involuntary clients and client resistance.

A few notable kinds of treatments are: Relaxation training, systematic desensitization, computer generated reality exposure, exposure and reaction avoidance strategies, social abilities training, modeling, conduct practice and schoolwork, and aversion therapy and punishment. One approach to upgrade helpful viability is to utilize encouraging feedback or operant molding.

6.4. USES

Applied behavior analysis is used to modify specific behaviors that are regarded as being socially or personally important. There are four main characteristics of applied behavior analysis.

1. Behavior analysis is focused mainly on overt behaviors in an applied setting and treatments are designed to change the relationship between the overt behaviors and their consequence.
2. The focus of study is the individual and the investigation therefore centers around them.
3. It focuses on how the environment causes significant changes in behavior
4. The techniques applied stem from operant and classical conditioning such as reinforcement, stimulus control, punishment and any other language learning principles

6.5. THIRD GENERATION

Also called clinical behavior analysis, third-generation behavior therapy represents a shift from cognitivism back towards radical behaviorism as well as other forms of behaviorism; particularly functional analysis and behavioral models of verbal behavior. `

6.6. TREATMENT OF MENTAL DISORDERS

When it comes to ADHD, depression, and OCD, behavior therapy is as effective as drug treatment. A particularly effective form of behavior therapy is habit reversal training which has had a lot of success in treating tics.

Behavior therapy can be used to treat a variety of mental illnesses such as phobias and, most of the time, is more effective.

Desensitization has also been used to treat other issues such as dealing with anger, insomnia and certain speech impediments. Desensitization is a process of treatment and is done on a hierarchy that happens over several sessions. The hierarchy goes from situations that make a person less anxious or nervous up to things that are considered to be extreme for the patient

6.7. TREATMENT OUTCOMES

Systematic desensitization is effective in treating fears of heights, driving, creepy crawlies, and any other nervous conditions that an individual may suffer from. Anxiety may be include social uneasiness, nervousness about talking in public or even test anxiety. In comparison to desensitization, the modeling strategy gives off an impression of being less successful, but it is obvious that the more prominent the interaction between the patient and the subject he is modeling, the more better the effectiveness of the treatment.

Aversive treatment has commonly observed a sensible level of progress and this incorporates follow up periods. While going through exposure treatment an individual normally needs five sessions to determine whether the treatment is working. After five sessions of exposure treatment the benefits are typically seen in the patient and help with their issues. Even after five meetings though, it is suggested that the patient or customer still proceed with treatment.

7. APPLIED BEHAVIOR ANALYSIS

Behavior analysts strongly believe that behavior is a natural science rather than a social one. Behavior analysts have therefore focused on the observable relationships between behavior and environment.

7.1. METHOD OF IDENTIFYING FUNCTIONS OF BEHAVIOR

Although research has demonstrated efficacy in applied behavior analysis, it does not necessarily have to be utilized solely for extremely troubling behaviors; this form of treatment can improve an individual's learning behaviors by focusing on other deficient skill areas as well. Academic, social, and self-help skills are very often also addressed and improved through the usage of ABA programs. The goals for the skills are developed in order to meet the needs and abilities of the particular individual. When taught a new skillset, motivational principles of ABA are applied by breaking down even the most complex tasks into smaller, manageable steps.

8. CONVERSION THERAPY

Conversion therapy is a treatment aimed at changing a person's sexual orientation from homosexual to heterosexual. Many disapprove of the treatment and believe that trying to change a person's sexual orientation is considered to be unethical. Debates are held on how it is highly likely for a member of the LGBTQAI+ community to cause self-harm given that they are made to see themselves as being wrong.

8.1. HISTORY

Homosexuality was initially viewed as a sickness that it could be cured. In 1968, Charles Socarides postulated that homosexuality is the result of a conflict between the ego and the id, which usually occurs at an early age within "a female-dominated environment" where the father was weak, sadistic, absent, or detached.

8.1.1. 21st century

Homosexuality was once considered a mental illness, which lead to attempts to "cure" it.

One of the main theories of homosexuality is that it stems from deviant behavior experienced in childhood. Some men develop homosexual attractions due to a bad relationship with a distant father or in response to childhood molestation. While some homosexual attractions have been caused by these issues, most homosexuals have not been exposed to molestation or family issues.

8.2. THEORIES AND TECHNIQUES

One of the methods to cure homosexuality is conversion therapy. Conversion therapy consists of a variety of methods, both physical and psychological. Some of these methods include praying away the gay, electroconvulsive therapy, hypnosis, and drugs. There are many camps which are designed for conversion therapy but many of their practices remain secret. There is little information to be found online regarding these camps because they realize that they are behaving inappropriately so they hide their acts. In the 1980s, homosexuality was determined to have a biological cause; this created two sides – supporters of conversion therapy and its detractors

Conversion therapy is a range of pseudo-scientific treatments that aim to change a homosexual to a heterosexual. Sigmund Freud studied a lesbian patient when her father insisted he change his daughter's sexual orientation to heterosexuality. What Freud learned was that changing one's sexuality is difficult and unlikely. He believed that homosexuality is not an illness, stating that it is "nothing to be ashamed of, no vice, no degradation; it cannot be classified as an illness".

8.2.1. Ex-gay ministry

The "Ex-Gay Movement" and the Purity Movement in the 1990s offered a solution for those wishing to reconfirm their faith with Jesus Christ. The Ex-Gay Movement consisted of ministries, with a focus on the New Hope ministry that worked towards rehabilitating those who wanted to leave their homosexual practices behind in favor of a heterosexual, Christian life. The Purity Movement, with a focus on the re-masculinization of men, True

Love Waits and Silver Ring Thing described in Virgin Nation, served as a sex education organization with a focus on abstinence-only until marriage.

8.2.2. Reparative therapy

“Homosexuality is found in over 1,500 species. Homophobia is found in only one” (“1,500 Animal” 1). Conversion therapy, or otherwise known as “reparative therapy,” is a homophobic process by which many therapists attempt to “cure” homosexuality. Conversion Therapy demonstrates the ignorance of this world by causing mental and physical harm to its participants in an attempt to “cure” something that is not a problem, and that is why the federal government needs to ban it once and for all.

9. SEX THERAPY

Sex therapy is a specialized form of professional counseling that helps both men and women overcome their sex related problems. It is the treatment of sexual problems such as non-consummation, premature ejaculation or erectile dysfunction, low libido, unwanted sexual fetishes, sexual addiction, painful sex, or a lack of sexual confidence. Sex therapy has also proven to be effective in helping people who have suffered from sexual harassment.

9.1. STUDIES OF CONVERSION THERAPY

Several studies have been performed on whether people can change their sexual orientation. In a certain study conducted in 2001, hundreds of gay men and lesbians

claimed that they changed their sexual orientation through ex-gay ministries and conversion therapy.

9.2. ETHICAL CONCERNS

Conversion therapy has been deemed by many as unethical due to the potential risks it poses. Individuals of the LGBTQAI+ community that undergo conversion therapy are at a greater risk of developing psychological disorders; including depression, anxiety and self-destructive behavior. In this practice, therapists align with societal prejudices against homosexuality, which may reinforce self-hatred already experienced by the patient.”

Supporters of conversion therapy argue that, like all other therapies, participation is voluntary and an individual should not be restricted from seeking it. This argument ignores the fact that many minors are sent to conversion therapy against their will.

10. CONCLUSION

Behavior modification is a set of techniques or therapies based on Operant conditioning. Positive change in an individual’s behavior is induced through positive and negative reinforcement, or punishment for bad behavior.

Behavior modification has a number of applications ranging from getting rid of phobias to treating psychiatric disorders. This field has been quite effective in treating conditions such as ADHD or post-traumatic stress disorder. Behavior modification has, however, been misused by many who were trying to push their own agenda. An example of this is

conversion therapy which attempts to change a person's sexual orientation to heterosexual. The reason why

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