

CHAPTER
2
AREAS OF APPLICATION: AN OVERVIEW

Answers to [\[and Levels of\]](#) Questions for Learning

1. **Q:** List four children's behaviors that have been improved by parents' application of behavior modification. [\[Level 1/K\]](#)
A: Any four of the following: learning to walk, learning to talk, toilet training, doing household chores, decreasing nail-biting, decreasing temper tantrums, decreasing aggressive behaviors, following rules, complying with parents' requests, and decreasing arguing. Other behaviors might also be acceptable.
2. **Q:** List four elementary school students' behaviors that have been modified with behavior modification techniques. [\[Level 1/K\]](#)
A: Any four of the following: oral reading, reading comprehension, spelling, handwriting, mathematics, English composition, creativity, science concepts, out-of-seat behavior, tantruming, aggressive behavior, and excessive socializing. Other behaviors might also be acceptable.
3. **Q:** Describe three characteristics common to behavioral approaches in university teaching. [\[Level 2/C\]](#)
A: (a) The instructional goals for a course are stated in the form of study questions and application exercises; (b) students are given opportunities to demonstrate their mastery of the course content through frequent tests (based on the study questions) or some combination of tests and assignments; and (c) students are given detailed information at the beginning of a course about what is expected of them on the tests and assignments in order to achieve various letter grades.
4. **Q:** What is PSI, and who was its founder? [\[Level 1/K\]](#)
A: PSI stands for Personalized System of Instruction, which is a behavior modification approach to teaching. It was founded by Fred S. Keller.
5. **Q:** What is CAPSI? [\[Level 1/K\]](#)
A: CAPSI is Computer-Aided PSI, or Computer-Aided Personalized System of Instruction.
6. **Q:** What is currently the preferred term for the disability previously referred to as "mental retardation"? [\[Level 1/K\]](#)
A: Intellectual disability.
7. **Q:** List four behaviors of persons with intellectual disabilities that have been modified using behavior modification. [\[Level 1/K\]](#)
A: Any four of the following: toileting, feeding, dressing, personal hygiene, social skills, communication skills, vocational skills, leisure time activities, and community survival behaviors. Other behaviors listed might also be acceptable.
8. **Q:** List four behaviors of children with autism that have been modified using behavior modification. [\[Level 1/K\]](#)
A: Social behaviors, language skills, play behaviors, and (elimination of) self-stimulatory behaviors. Other behaviors listed might also be acceptable.
9. **Q:** List four behaviors of people with schizophrenia that have been modified using behavior modification. [\[Level 1/K\]](#)

- A:** Social skills, communication skills, assertiveness, and job finding skills. Other behaviors listed might also be acceptable.
10. **Q:** List four psychological problems that have been effectively treated with behavior therapy. [Level 1/K]
A: Any four of the following: anxiety disorders, obsessive-compulsive disorders, stress-related problems, depression, obesity, marital problems, sexual dysfunction, and habit disorders. Other problems might also be acceptable.
11. **Q:** List four behaviors in the area of self-management of personal problems that have been modified by behavior modification techniques. [Level 1/K]
A: Saving money, increasing exercise behavior, improving study habits, and controlling gambling. Other behaviors listed might also be acceptable.
12. **Q:** What is health psychology? [Level 1/K]
A: Health psychology is the study of how psychological factors can influence or cause illness, and how people can be encouraged to practice healthy behavior in order to prevent health problems.
13. **Q:** List five areas of application within health psychology. [Level 1/K]
A: Areas of application of health psychology include: (a) direct treatment of medical problems such as headaches; (b) establishing treatment compliance such as taking medications as prescribed; (c) promoting healthy living such as eating well-balanced meals and getting adequate exercise; (d) improving the management of caregivers, such as the behavior of nurses and other medical personnel who provide services; and (e) teaching use of behavioral strategies for coping with stress.
14. **Q:** List three behaviors of elderly persons that have been improved with behavior modification techniques. [Level 1/K]
A: Any three of the following: coping with loss of skills, functioning independently during old age, learning new routines because it's impossible to perform tasks in previously learned ways, overcoming anxiety or fear about possible failure to cope, learning new relationships with professional care staff, and decreasing disruptive behaviors in nursing homes. Other behaviors might also be acceptable.
15. **Q:** Define behavioral community psychology. [Level 2/C]
A: Behavioral community psychology refers to applications to socially significant problems in unstructured community settings where the behavior of individuals is not considered deviant in the traditional sense.
16. **Q:** List four behaviors in the area of behavioral community psychology that have been modified by behavior modification. [Level 1/K]
A: Any four of the following: littering, recycling, energy conservation, living in a cooperative housing project, and job skills training. Other behaviors listed might also be acceptable.
17. **Q:** Define organizational behavior management (OBM). [Level 2/C]
A: Organizational behavior management is the application of behavioral principles and methods to the study and control of individual or group behavior within organizational settings.
18. **Q:** List four behaviors in business, industry, or government that have been modified by behavior modification. [Level 1/K]
A: Any four of the following: improved productivity, decreased tardiness and absenteeism, increased sales volume, creation of new businesses, improved worker safety, reduced theft by employees, reduced shoplifting, and improved management-

employee relations. Other behaviors listed might also be acceptable.

19. **Q:** Define behavioral sport psychology. [Level 2/C]
A: Behavioral sport psychology has been defined as the use of behavior analysis principles and techniques to enhance the performance and satisfaction of athletes and others associated with sports.
20. **Q:** List four areas of application of behavioral sport psychology related to athletes. [Level 1/K]
A: Any four of the following: motivating practice and fitness training, teaching new athletic skills, controlling emotions that interfere with athletic performance, helping athletes cope with pressure in major competitions, and helping coaches to function more effectively. Other behaviors listed might also be acceptable.
21. **Q:** Describe how knowledge of a cultural characteristic might be helpful for applied behavior analysts/behavior therapists working with individuals from different cultures. [Level 2/C] Give an example. [Level 2/C]
A: Cultural characteristics can influence the effectiveness of treatment. It is helpful, for example, for therapists to know that many Asian-American clients prefer to be told specifically what to do by the therapist (as opposed to a more non-directive approach). On the other hand, with many Hispanic-American clients, compliance with goal-directed suggestions is likely to be more effective if they are preceded by a period of familiarizing small talk.

Answers to [and Levels of] Questions for Further Learning

1. **Q:** Describe the characteristics of discrete-trials teaching. [Level 2/C]
A: Discrete-trials teaching is made up of a series of individual teaching trials that typically last 5-20 seconds each, with each trial separated by a brief inter-trial interval. On each trial, a teacher provides an antecedent, such as an instruction, the child typically responds, and the teacher provides an immediate and appropriate consequence, such as a reward for correct behavior.
2. **Q:** What are two important research needs in EIBI programs for children with autism? [Level 2/C]
A: Two important research needs in EIBI programs for children with autism are: (a) quality assessment systems to evaluate the effectiveness of specific components of EIBI interventions; and (b) the development of effective rapid training procedures for teaching parents and instructors to conduct discrete-trials teaching.