THE ROLE OF A BEHAVIOURAL PSYCHOLOGIST

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CURRENT SITUATION

Up-to-now, the role of a Behavioural Psychologist has not been formalised as a distinct discipline in the majority of psychological societies across the modern world including the British, Australian, American and Irish Psychological Societies.

WHO IS A BEHAVIOURAL PSYCHOLOGIST? WHAT DOES GOOGLE SAY?

"Behavioral psychologists use research-based learning theories to help patients modify their behaviors, and use behavior therapy to treat anxiety disorders, depression, substance abuse, and mental illness. The field is sometimes also known as cognitive-behavioral psychology."

GOOGLE ALSO SAYS...

"Behavioral psychology, also known as behaviorism, studies the link between sensory abilities, thought processes, perceptions, emotions, and behaviors, of course. This type of psychology also examines various behavioral styles, in an effort to develop techniques and methods that change unhealthy, negative and destructive behaviors into more positive, healthier and uplifting ones."

WHERE ARE ALL THE BEHAVIOUR ANALYSTS?

Many highly trained professionals are becoming Behaviour Support Specialists or having to gain further training as Clinical or Educational Psychologists.

THE PRINCIPLES OF BEHAVIOUR ANALYSIS...

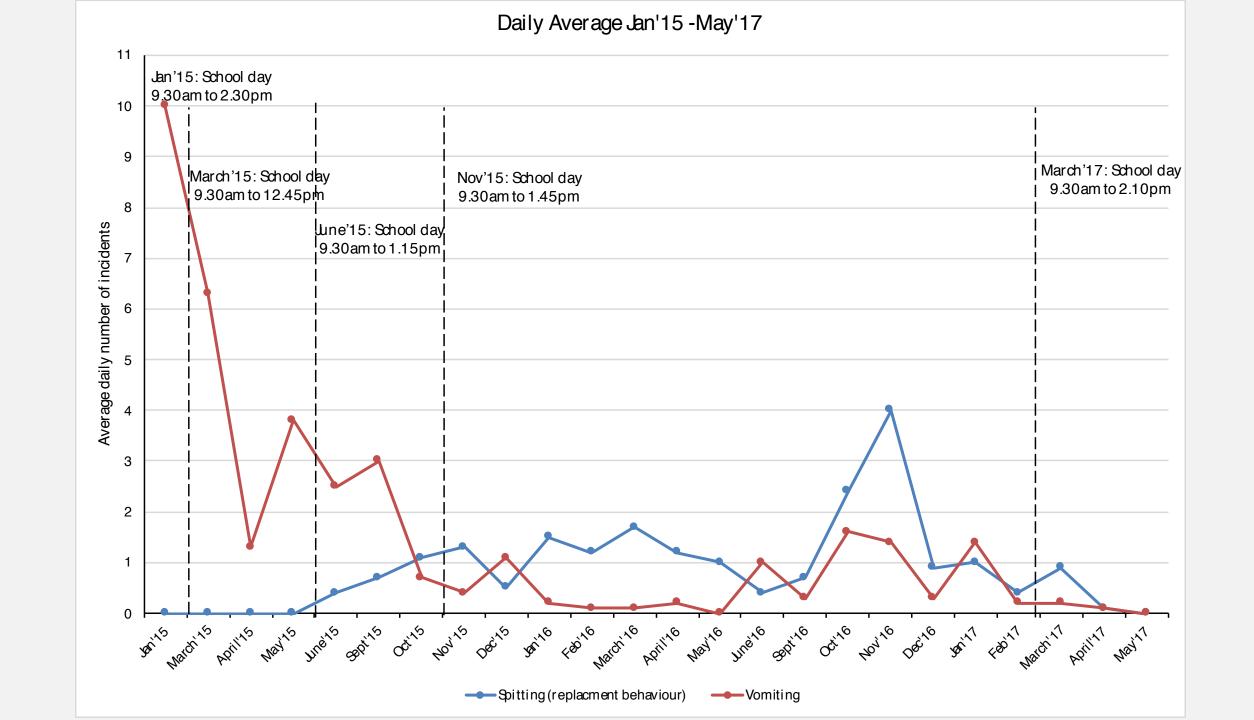
There is nothing new about implementing the principles of behaviour within the psychological community for treatment of conditions outlined in DSM.

CASE STUDY

Boy aged 9 years and 6 months

Diagnosed with Autism Spectrum Disorder, Moderate Intellectual
Disability and Attention Deficit Hyperactivity Disorder

Suspended from Special School
Behaviour of concern: Vomiting/ Smearing



RESPITE

- Client accesses respite every other weekend and for full week on two to three occasions per year (summer and midterms).
- Client initially presented with significant challenging behaviour;
 - vomiting, smearing and spitting, inappropriate toileting, physical aggression.

FUNCTIONAL ASSESSMENT

- Functional Assessment was completed for all challenging behaviours observed.
- Functions: multi-functional with smearing and vomiting appearing to be both automatically reinforcing and attention maintained.
- Physical aggression and spitting appeared to be primarily in regards to accessing tangibles (mostly food).

FREQUENCY OF BEHAVIOURS

- Smearing behaviour of was particular concern and this was occurring primarily during the night with some incidents occurring on transport, out in community and in house.
- There were incidents occurring every weekend the client was in house.
- Following analysis of IRF's, observations and staff interviews a full FA was completed and BSP designed.
- BSP has been updated regularly since 2015.

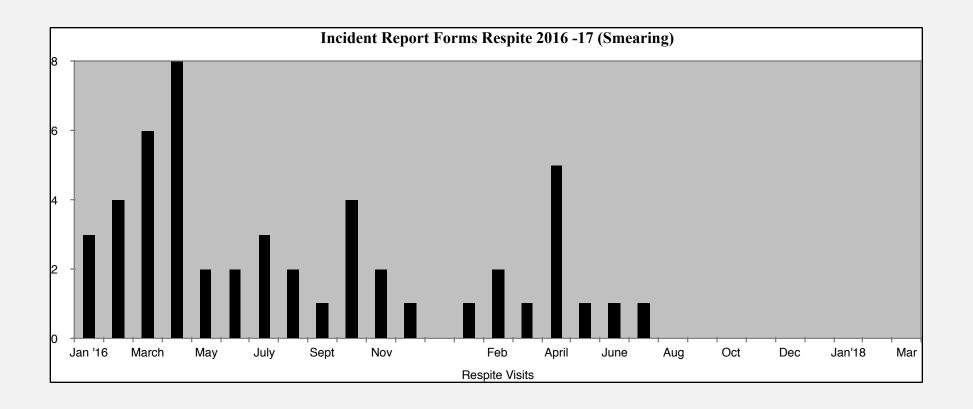
BEHAVIOUR SUPPORT PLAN

- Night time rules and rewards were put in place in May 2016.
- Clear visual representation of the rules and choice of reward in morning for keeping his room clean (no bowel movements in the bed, no smearing/touching poop, use the toilet).
- Clear protocol for staff on how to run the night time rules and that rules were to address the inappropriate bowel movements and smearing only.

BEHAVIOUR SUPPORT PLAN

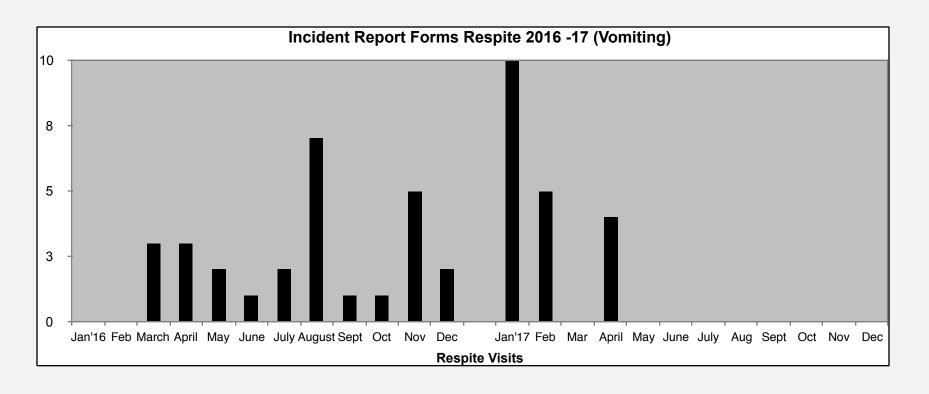
- BSP for client includes:
 - Recommendations regarding communication support all communication with visuals.
 - Recommendations regarding free access to healthy food as client was previously experiencing difficulty around food and engaging in physical aggression when attempting to access food.
 - Rules at night (smearing)
 - Recommendations for transport.
 - Recommendations for change of clothes (reduce spitting on them) and rule that he wears clothes outside of house but can wear his pyjamas inside if he chooses.
 - Environmental accommodations and communication skills are primary focus of BSP.

SMEARING INCIDENTS REPORTED



No incidents of smearing have been reported since July 2017. Rules remain in place. Although smearing was occurring at night from at least July 2015

VOMITING INCIDENTS REPORTED



No incidents of vomiting reported since introduction of Food Protocol (free access to healthy foods)

WHERE ARE WE THREE YEARS LATER?

- Client has made considerable progress since 2015.
- Some physical aggression is still reported (pushes, slaps out) - this is primarily related to accessing tangibles or other communication attempts that are not understood by his communication partners.
- Staff changes or other environmental changes may also trigger challenging behaviour which illustrates the importance of consistency in approach in order that the client's needs are met and his dignity preserved.

STILL MORE WORK TO DO...

- Further input is required in conditioning up the wearing of underwear (dignity) and in sexual education.
- Training in communication skills is of highest priority.

THE FUTURE...

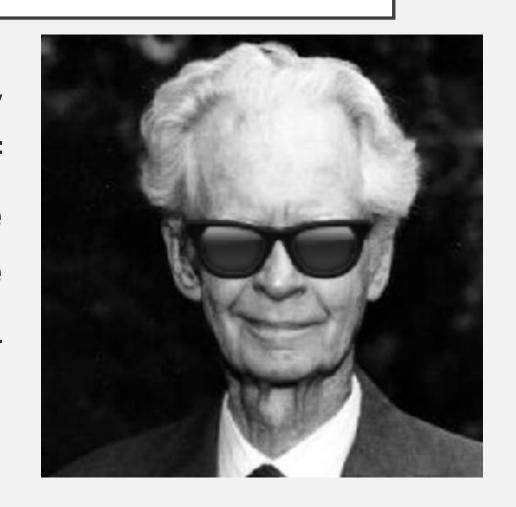
In Ireland, the Psychological Society of Ireland, in conjunction with the Division of Behaviour Analysis, is now preparing a specific registration category for Behavioural Psychologists. Does this mean that Applied Behaviour Analysis is to be formally acknowledged as a discipline of psychology and its trained Behaviour Analysts be given recognition as Chartered Psychologists?

BENEFITS...

- Ensuring registration as Behavioural Psychologists will warrant adherence to the ethics of PSI and bring clarity for those availing of Behaviour Analysts' services (clients and professionals alike).
- It is expected that this development within the field of Psychology in Ireland, will lead to clarity of roles and add to the success of our colleagues working with client groups.

BEHAVIOURISM: THE SECOND FORCE IN PSYCHOLOGY

Is Skinner finally being fully acknowledged as a part of a psychological discipline and the practitioners are given the coveted title of a psychologist?



SO, IS THERE A NEED AND ROOM FOR A BEHAVIOURAL PSYCHOLOGISTS?