

Affordable ABA

Treatment of Violence and Aggression in Individuals with Neurodevelopmental Disabilities

1. How does a behavior analyst try to characterize behavior disorders?

- A. Through environmental variables in which the behavior is a function
 - B. Through systematic manipulation of consequent events within the environment
 - C. Through use of discriminative stimuli to signal the behavior
 - D. Through manipulation of both antecedent and consequent events that determine the function of the behavior
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2. What is a major goal of a functional analysis?

- A. To determine the reinforcers that are maintaining the behavior
 - B. To determine the discriminative stimuli that signals the occurrence of a behavior
 - C. To demonstrate experimental control over responding or only producing the response when certain variables are accessible
 - D. To determine the variables that are responsible for socially significant behaviors
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3. Why type of experimental design are functional analyses typically reliant on?

- A. Between-group experimental design
 - B. Within-subject experimental design
 - C. Independent measures experimental design
 - D. Independent-groups experimental design
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4. Why can a multielement design be problematic in a functional analysis?

- A. Reinforcement contingencies are not able to be isolated
 - B. A brief functional analysis is not able to be completed
 - C. It is differentiated across conditions
 - D. There is a rapid alternation of conditions
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5. Which type of functional analysis screens for different combinations of contingencies that when together will reinforce challenging behaviors?

- A. Trial-based functional analysis
 - B. Synthesized contingency analysis
 - C. Precursor functional analysis
 - D. Latency-based functional analysis
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6. Which type of functional analysis is able to be utilized when severe topographies of a challenging behavior or any topography of a challenging behavior that needs to be limited in occurrence needs to be assessed?

- A. Trial-based functional analysis
 - B. Synthesized contingency analysis
 - C. Precursor functional analysis
 - D. Latency-based functional analysis
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7. Which response is not considered a manipulation that can be made to the setting to allow for safety to be improved during a functional analysis?

- A. Padding on electrical outlets and door handles
 - B. Installation of a one-way observation window
 - C. Personal protective equipment
 - D. Remove any materials that are not necessary
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8. If the automatic reinforcer that is produced by the problematic behavior is eliminated or decreases, then the personal protective equipment can function as_____.

- A. Extinction
 - B. Punishment
 - C. Reinforcement
 - D. Escape
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9. What is known as a behavioral restraint that uses a device, material, or equipment to restrict a person's movement?

- A. Chemical restraint
 - B. Mechanical restraint
 - C. Physical restraint
 - D. Personal restraint
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10. Early integration of behavioral intervention can result in a reduction of problematic behaviors by up to what percentage?

- A. 75%
 - B. 85%
 - C. 80%
 - D. 90%
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11. What is known as the withholding of reinforcers while simultaneously providing these reinforcers contingent on a specified alternative behavior?

- A. Differential reinforcement of low rates
 - B. Differential reinforcement of incompatible behavior
 - C. Differential reinforcement of alternative behavior
 - D. Differential reinforcement of other behavior
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12. What is known as teaching an appropriate communication response as a way of accessing a reinforcer that is responsible for maintaining the problematic behavior?

- A. Functional discussion training
 - B. Functional communication training
 - C. Functional response training
 - D. Functional communicative response
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13. Which response is not considered an antecedent-based strategy that has been used in conjunction with functional communication training?

- A. Decreasing the autonomy of the individual by allowing them choice and control over events that have meaning to them
 - B. Visual depiction of the sequence of events
 - C. Interspersing high-probability tasks with tasks that have a low-probability of compliance or are more likely to evoke aggressive behaviors
 - D. Delivering putative reinforcers for aggressive behaviors on a schedule that is time-based in addition to the occurrences of functional communicative responses
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14. What procedure can be used in conjunction with functional communication training that is based on incorporation of treatment components that are designed to facilitate a delay to reinforcement and teach tolerance for when the reinforcer is not able to be delivered?

- A. Time-delay schedule
 - B. Latency-based reinforcement
 - C. Delay tolerance reinforcement
 - D. Reinforcement-schedule thinning
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15. What type of responses require an individual to learn different responses for each word?

- A. Selection-based responses
 - B. Function-based responses
 - C. Topography-based responses
 - D. Description-based responses
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16. What type of assessment can be conducted to identify the proficiency of functional communication responses?

- A. Mand-description assessment
- B. Mand-topography assessment

- C. Mand-function assessment
 - D. Mand-selection assessment
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17. What is known as a type of social practice that allows an individual to engage in ethically minded awareness that is intentionally situated in the present time?

- A. Mindfulness
 - B. Awareness
 - C. Socially minded awareness
 - D. Mindfulness practices
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18. If an automatic reaction is able to be preempted by means of a _____, then a mindful response may be produced.

- A. Reinforcer
 - B. Pause
 - C. Alternative behavior
 - D. Consequence
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19. What are almost uncontrollable thoughts that are repetitive about negative emotions and experiences known as?

- A. Social dissociative thoughts
 - B. Negative talk
 - C. Self-doubt
 - D. Rumination
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20. What mindfulness practice provides guidance with self-management on different socially undesirable behaviors that are exhibited?

- A. Surfing the urge
 - B. Mindfulness meditation
 - C. Soles of the feet
 - D. SOBER breathing space
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