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PARENTAL GUIDE TO BEHAVIOUR CHANGE IN THE HOME: A BEHAVIOURAL MODEL

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ABSTRACT

Parental roles in the home are many and one essential role performed by parents is behaviour change. As Genetic and environmental factors affect behaviour, parents need to be aware of areas in which they can enrich the home environment. There are many psychological methods to deal with maladaptive behaviours, in general, the behavioural model is an approach parents can easily utilize at home to deal with inappropriate behaviour. The behavioural model may involve the respondent (classical) approach or the operant approach. Research has supported the use and application of Behavioural model in behaviour change in the home.

At home, the classical conditioning techniques that could be utilized include the use of noxious stimulation, relaxation and desensitization and implosive therapy. Parents, before utilizing operant conditioning techniques need to be aware of the different reinforcers that could be used at home and knowledge of different schedules of reinforcement would also be helpful. Parents and guardians have a significant role to play in the development of appropriate behaviour in the home and the behavioural model is one approach through which this could be achieved.

Parents do perform a number of roles in the home, with regards to the children. The roles could be economic, social or psychological. The parent has to interact with the child as he grows to become an adolescent and through the adult years. Parents participate in many areas which are of concern to the child such as the choice of school to be attended and the nature of "Schooling", to be acquired. In some cases, the participation includes the choice of subjects, careers and marital partners.

Another role performed by parents in their everyday interactions with children is behaviour change. Correct behaviours are encouraged while maladaptive behaviours are discouraged. When the correct approach is not utilized and not in good faith, some children do rebel. The rationale should go beyond the assumption that the parent is "older and wiser".

In addition to socializing the children, parents also play a significant role in shaping the behaviour of their children at the early stages of development. Parental injunctions act as a compelling force on some children in their behaviour and decisions in later years. It is assumed that parents have a role to play in the adjustment of their children right from infancy through the adult years until they are about to leave home for marriage or otherwise. The behaviour of adults could still be of concern to parents even when they are away from homes. It thus becomes essential that parents need to be aware of the procedures that could be used in promoting healthy behaviour and to the correct maladaptive behaviour in the home.

Acquisition of Behaviour

There is the contribution of innate or inborn facts to behaviour, these factors are collectively known as nature. Nevertheless, it is also recognized that the different experiences people have especially while growing up are very important in shaping and

molding behaviour such experiences could be from the home, school, community and significant others.

Environmental factors, referred to as nurture, seem to concern the ways in which people behave.

Thus, in discussing parental guide to behaviour change in the home, emphasis will be on the areas which do enrich the home environment. The experiences offered the child, the models available to the child, the nature and quality of interventions available in everyday interactions can all affect behaviour.

In the home, it is ideal that the behaviour development of the child, be a joint responsibility of both parents where applicable. The parent - child relationship is a vital interaction in every home, the quality of which has its consequences in later years. Human behaviour is complex, it changes with age and is a product of many causes.

Psychological Principles to Behaviour Change

Psychological methods employed to deal with problems that people have are many. Most of these approaches have been formulated on some assumptions on the nature of man, the goal of therapy and the therapeutic process to achieve the goal. Some of the approaches that may be used in behaviour change in the home, may be grouped into the following headings for convenience.

1. The psychoanalytic system where emphasis is on how the individual adjusted to various conflicts in his development while past causes are examined for present behaviour;
2. The experiential phenomenological system, such as the client-centred approach where emphasis is on unconditional positive regard, genuineness and empathic understanding of the child;
3. The cognitive-rational system such as reality therapy where emphasis is on current behaviour, responsibility of behaviour, acceptance of reality and the encouragement of involvement;
4. The mind and body system such as biofeedback, bioenergetics analysis, transcendental meditation, aerobic exercises and good nutrition;
5. The behavioural system, which is the focus of this chapter, may utilize the respondent or operant approach, the emphasis is based on learning principles.

In the respondent (classical approach) distressful behaviour is eliminated using the Pavlovian-Hullian theories. The operant approach utilizing the skinnerian theory attempts to shape behaviour by rewarding desired behaviour. The operant approach have been utilized in cases of deficient social relationship, minor conduct disorders and speech defects, while the respondent (classical) approach appears more useful in the treatment of phobia and sexual disorders.

Related Research in the Home Environment and/or the Application of Behavioural Model in Behaviour Change

Parents have been involved in the treatment of children, Guernsey (1969) collected numerous articles on the use of parents as behavioural counsellors. Parent-child relationships have been explored by Axline (1947), Gordon (1970); Carlson & Faiber

(1976) Keat (1974) and Alao (1982). Williams (1959) used parents to eradicate temper tantrums while Russo (1964) published a report on the use of parents to carry out operant conditioning while Wahler, Winkel, Peterson & Morrison (1965) explored behaviour modification principles on the training of mothers as social reinforcers to eliminate deviant behaviour in young children.

During the pre-school periods, White and Watts (1975) observed that parents can make themselves available for sharing of feelings, consultation, companionship, stimulation, modelling and leadership. Teaching by example is employed initially and the child is given the opportunity to copy the adult model and is rewarded for minor successes. With increase in the child's vocabulary, physical control subsides and verbal interchange is substituted. The behavioural approach has been further explored by Akinboye (1976) when he studied the effects of reinforcement on study techniques on subjects' reading. A behaviour modification program was also designed by Akinboye (1979).

The Behavioural Model

The behavioural model may utilize classical (respondent) techniques or operant conditioning techniques. The model is centrally concerned with observable actions exhibited by the individual. Behavioural counselling is a process of helping the individual learn how to solve certain personal, emotional and decision problems, (Krumboltz and Thoresen, 1972 p.2).

Classical Conditioning Techniques in the Home

The parent can decide to use any of the classical conditioning techniques to be discussed. Some of the techniques can be easily mastered while some require extensive training.

Classical conditioning is a form of learning which occurs when two stimuli are paired or associated. There is the unconditioned stimulus (US) which elicits a response before conditioning begins. The other, conditioned stimulus (CS) elicits no response before conditioning. Pairing of the unconditioned stimulus with the conditioned stimulus for a number of times and with the right time intervals, the original neutral conditioned stimulus will begin to produce a response similar to that elicited by the unconditioned stimulus before the pairing of the stimuli. Some of the major procedures utilized in classical conditioning as identified by Morgan, King and Robinson (1981) include:

- (a) The use of noxious stimulation such as punishment, covert sensitization and aversion therapy;
- (b) The use of relaxation and desensitization;
- (c) The use of Implosive therapy (flooding).

Use of Noxious Stimulation in the Home:

Any stimulus that makes the child fearful or uncomfortable can be said to be noxious.

Punishment: This is a noxious stimulus that is contingent on or follows a response. It appears to be the most widely used or the most familiar noxious stimulation to some parents. The beating of the child, in the home for a misbehaviour to some, is regarded as punishment to modify the particular behaviour of the child. Unfortunately most forms of punishment appear to be inappropriately used in the home, whereas punishment promotes the learning of what not to do in passive avoidance learning it has the weakness of not teaching the better behaviour to be elicited while adaptation to punishment may weaken its effectiveness. We engage in passive avoidance learning when we learn what not to do. The child learns not to play with dangerous or sharp objects. The teaching of don'ts should not be through punishment alone but coupled with positive reinforcement. Punishment when applied has to be consistent, it must be contiguous on the occurrence of the response.

The use of cognitive learning and imitative learning approach such as modelling could be encouraged where applicable. Through imitation, it is possible to learn some human psychological phenomena such as attitude formation and personality development. Parents by exhibiting positive models do assist in behaviour control through such models, without physical punitiveness.

Covert Sensitization: In covert sensitization, the child is made to imagine rather than experience directly (as in overt punishment) the unpleasant consequences of the unwanted behaviour. The imagined consequences is usually combined with imagined positive reinforcement. This approach can be used anytime in conjunction with other behaviour strategies. Covert sensitization may be used to discourage drinking or smoking by imagining all the serious consequences that go with each of this behaviour while the positive effects of not drinking and smoking are highlighted.

Aversion therapy: This is an approach where the individual is conditioned to be afraid of the stimuli that lead to unwanted behaviour. This is usually done by pairing a noxious stimulus with the unwanted behaviour say on electric shock when smoking occurs. The uncomfortable feelings associated with the shock may become associated with smoking which is paired with the shock, eventually. In the case of excessive drinking tasting of alcohol may be paired with a drug that causes nausea to make the individual uncomfortable when alcohol is tasted. In punishment the noxious stimulus is applied after the unwanted behaviour has manifested whereas in aversion therapy, the noxious stimulus is conditioned to the stimulus, the pairing of the noxious stimulus say unpleasant feelings caused by a drug may prevent the occurrence of the unwanted behaviour (drinking).

Relaxation and Desensitization

Tension in the body may show itself in a number of ways, including statement of fears or tension in social situations. Teaching the individual simple techniques of relaxation can alleviate some problems. Relaxation tapes are available where the individual is not sure of relaxation instructions to use. Visualization and imagery may be used to relax the individual.

Systematic Desensitization: Desensitization can be used to solve problems

associated with anxiety and tensions such as phobias. It consists of

- 1) Training in systematic deep muscle relaxation
- 2) Construction of anxiety hierarchies and
- 3) Matching specific objects of anxiety from the hierarchies with relaxation training.

Systematic desensitization may be used for anxieties related to snakes, dogs, heights and, examinations and death.

Implosive therapy (Flooding)

In implosive therapy which is sometimes called flooding, the fear producing stimulus is presented alone over and over until the patient reports a decrease in fear. Implosive therapy according to Stampft and Levis (1967) is essentially an intensive form of extinction. Extinction occurs when the reinforcer for a response is removed, that is, when a reinforcer no longer follows a particular response.

Operant Conditioning Techniques in the Home

Operant condition techniques emphasize the role of reinforcement in establishing and maintaining the desired behaviour. It is assumed that when reinforcement is contingent on a response, that response is more likely to occur in the future. In operant conditioning, the individual's behaviour is studied in relation to the events occurring in the environment. The antecedents are the discriminative stimuli that act as cues to the individual, indicating the particular behaviour to be reinforced. Operant conditioning techniques can be very useful in socializing when the individual learns about beliefs and customs.

Reinforcers: One of the tools of operant behaviour modification are the positive and negative reinforcers. A reinforcer is anything which serves to strengthen a response. A positive reinforcer is a stimulus or event which increases the likelihood of a response when it is contingent and follows the response. A negative reinforcer is a stimulus or event which increases the likelihood of a response when it terminates or ends, following a response. A negative reinforcer is different from punishment. A negative reinforcer is a noxious stimulus which terminates contingent upon the occurrence of a particular response. In contrast, punishment is a noxious stimulus that is forthcoming when a particular response is made. A negative reinforcer is also different from aversion therapy when the patient is conditioned to be afraid or repelled by the stimuli that lead to unwanted behaviour. Common negative reinforcers are disapproval or yelling or screaming children will learn responses which terminate or avoid these events. Parents are advised to use positive reinforcement rather than negative reinforcement to shape behaviour eventhough both seem to be effective. Parents will also need to know that there are primary and secondary reinforcers. A primary reinforcer does not require any special previous training in order to strengthen a behaviour. The first time a primary reinforcer is made contingent upon a response, it will begin to strengthen that response. Food is a primary reinforcer for an individual who is hungry while a drink is a primary reinforcer for someone who is thirsty.

On the other hand, for a secondary reinforcer to be effective, the learner must have had experience with it. Secondary reinforcers can be said to be "Learned reinforcers". A stimulus becomes a secondary reinforcer when it is paired with a primary reinforcer to strengthen a behaviour. It appears that in most of reinforcers used in real life, practical human solutions are secondary. In the home, parents should adopt the use of secondary reinforcers while shaping behaviours. Some of the common secondary reinforcers are social reinforcers, some can be material or non-social while it may also be a point (token) acting as the reinforcer.

Praise is an example of a social reinforcer; other social rewards may include interest, attention, approval by others, listening, smiling, hugging, kissing or any expression of love. The material reinforcers can be sweets, money, toys, ice-cream or any other food item. Another tool of operant behaviour modification is the token economy. Tokens are contingent upon the desired behaviour. We work to earn money (token) which is used to buy those things that we need. The child may be given points or tokens which are later exchanged for something of importance, such as paying a visit to a friend, going on a trip and the like.

Parents should use social and non-social reinforcements simultaneously. A child who exhibits the desired behaviour needs to be praised or acknowledged before receiving non-social (material) reward.

It must be pointed out that children do vary in what they consider as reinforcing. The parent should thus endeavour to use the appropriate reinforcer.

Parents also need to know the possible ways, schedules of reinforcements can be arranged while trying to shape behaviour. The delivery of reinforcement may be made contingent upon the number, rate or pattern of responses. It may also depend upon time without regard to number, rate or pattern of responses. All things being equal, the important consequence of reinforcement by a schedule is that extinction tends to be slower for scheduled — reinforced responses than for continuous reinforced responses. This is to say that if reinforcement is stopped, the learner will continue to respond for much longer time after scheduled reinforcement, than after continuous reinforcement. In other words, scheduled reinforcements increase resistance to extinction. Extinction occurs when reinforcement no longer follows a particular response. An example of extinction is "time-out".

There are many possible schedules of reinforcement, but parents should at least be aware of these four schedules in the home.

1. The fixed-ratio schedule (FR)

This is a schedule in which the number of responses determines when reinforcement occurs. A certain number of responses has to be made by the child before he is reinforced. The parents will decide on a fixed number of responses that will not be reinforced and every fourth or fifth or twentieth response might be selected for reinforcement.

2. The fixed-interval schedule (FI)

Parent may adopt the fixed interval schedule of reinforcement by giving reinforce-

ment to the child after a fixed interval of time. No matter the number of responses made by the child he is not reinforced until a certain interval of time has gone by.

3. Variable-ratio schedule (VR)

It is possible to make the schedule variable. In variable-ratio schedule, the reward is given after a variable number of responses. A parent may decide to reinforce the child after three responses, the next reinforcement may be when seven responses have been made, next after five responses have been made and so on. The parent only ensures that the reinforcement is forth-coming after different numbers of responses.

4. Variable-interval schedule

In this approach, the parent may decide to reinforce the child after one interval of time, then after another interval and so on.

Another operant conditioning procedure that can be used at home is differential reinforcement. In this approach, positive reinforcement is given for desired behaviour, while undesired ones are extinguished. The parent reinforces the child the wanted behaviour manifests it could be in form of praise and deals with any unwanted behaviour say, through an extinction procedure, if the desired behaviour manifests again, the child is again positively reinforced with a social or non-social reward.

A Behaviour Modification Program

Parents can evolve a program to change a number of behaviours in the home. It could be the improvement of specific behaviours such as in fighting, smoking and drinking by adolescents, ability to manage time better, greater self control, getting along with other members of the family. A parent may also want the child to get home from school on time, participate in house hold activities and displaying appropriate home manners. Some other behaviour problems that can also be handled at home include, stealing, use of profane language, arguing, lying, and so on. The parent should work on only one behaviour at a time, thus, the first task is:

Firstly, to select a target behaviour to be changed. The selected behaviour must be observable. There should be an indication as to the direction of change. One should decide whether one wants to increase, decrease or teach a new behaviour. Let us assume the target behaviour is cooperation say the encouragement of cooperation with others in the home.

Secondly, the reinforcers to be used should be identified. One should plan how to change the environment, to reduce the unwanted behaviour while promoting the desired behaviour. One could get rid of all those things that encourage the unwanted behaviour. In this instance, competitive or aggressive behaviour would be an unwanted behaviour which seem not to be compatible with cooperation. It is essential that the behaviour changes can be measured as they take place and one should measure the progress in the changes in behaviour. The feelings associated with the change going on need to be recognized and adequate support given. To measure behaviour changes, records must be kept. Data collection is important to determine the current extent of behaviour and the success in attempt to change it. The initial collection of data of

behaviour is termed the base-line data. This base-line forms a base for later progress. To determine the baseline for co-operative behaviour (the target behaviour selected) the child can be observed as he engages in some activities at home and count the number of times co-operation is observed.

Thirdly, efforts should be made to strengthen the desired behaviour (which is cooperation in this instance) while effort is made to weaken any undesirable behaviour such as aggression. To strengthen the cooperation behaviour, one should reinforce any cooperative behaviour as often as possible when ever it occurs. The reinforcement could be continuous initially and intermittent later. One can also weaken any uncooperative behaviour manifested in the child, by manipulating reinforcement contingencies. This could take a number of forms some of which include

- (a) Withdrawal of positive reinforcement and there could be deprivation of privileges;
- (b) Ignoring the behaviour, by not paying attention, the child receives no recognition for his unwanted behaviour;
- (c) Alternatives to unwanted behaviour may be provided, child activity is re-directed into another channel so that something else is offered in place of what is being denied;
- (d) Child may also be removed or isolated from the environment where the inappropriate behaviour is being engaged, (a time-out procedure.)

A time - out procedure may be securing a section of the home say an empty room or the use of a chair turned to the wall. The idea is to put the child in a situation which is safe but very uninteresting and where positive reinforcement is unavailable. The child is thus put in a "time-out place" for a specified period on each occasion the unwanted behaviour is manifested. The time - out period may be lengthened when protests are made by the child.

Parents, guardians and any significant other have a role to play in the development of behaviour in the home. They can assist in the resolution of problems in the home. They should be able to define the problem at hand and should be able to define the goal in terms of those things they want the child to achieve. They should be able to utilize their own experience in living, putting the pieces together, to the benefit of the children. In addition to making use of the behavioural approaches discussed, parents should be able to explore alternative courses of action to behaviour change or to the resolution of the problem at hand.

While resolving problems at home, implications or consequences of each line of action may be identified. They must be able to develop a value of hierarchy, by finding out what is important to the child, so that the appropriateness of the course of action can be evaluated. A step by step way for achieving the desired end should be formulated in form of a program. An effective program, according to Carkhuff (1973) orders activities or behaviours from the most simple to the most complex. The behavioural model is an approach that can be easily utilized at home with respect to behaviour change. Parental guide is a function which commences in early childhood and the home is a vital environment where the child's behaviour can be modified.

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