**APBS President’s Update**

**New Board Members**
We are fortunate to have Hank Bohanan, Heather George, and Susan Barrett joining us as new Board members. Don Kincaid, who has served as our conference chair, will also be returning to the Board for another 3 years. Congratulations to our newest Board members!

**Website Update**
The Website Committee, co-chaired by Margaret Moore and Rachel Freeman, has been working hard. Please see the latest information in the Members Section as well as information about forming your own network. Plans for future activities include:

- Developing a policy statement for website content
- Creating a new petition process that embeds the information needed for networks to post online
- Developing a list of resources for schools, families, and community organizations
- Surveying the membership about how we can better meet the needs of the membership

In addition, we are trying to develop more opportunities for training by providing web-based or “webinar” events for the membership.

**Family Involvement Committee**
The Family Involvement Committee of APBS is working to define the roles that our organization can play in family support, including the following:

- Families’ input influences other families, researchers, and practitioners—knowledge goes both ways.
- Family voice and involvement is important throughout APBS.
- Research that includes a focus on meaningful outcomes in people’s lives is valuable to families.
- Families are and can be strong, unified voices as ambassadors for PBS legislation and rulemaking.
- PBS could save somebody’s life: No one can promote this message as strongly and emotively as a family member.

Several goals have been identified for the next year, including:

- Defining the role of families in APBS.
- Increasing family membership, attendance, and participation at the conference.
- Including statements regarding family involvement throughout APBS standards of practice.
- Elevating the understanding of the roles of family members as advocates and facilitators of individual and family quality of life.
- Including family members as voting APBS board members.

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- Obtaining time on all APBS board meeting agendas.

In addition, the Committee plans to gather information on the current needs of families from family organizations to send to their constituent. Look for information on the APBS website on the Committee’s current activities and how you can get involved.

APBS Networks
We continue to grow the number of networks that are now a part of APBS, and we want to encourage our members to develop their own network. The network system allows groups to work together on issues that affect them either regionally or on specific topics (e.g., autism, mental health). Check out the website to see the current list of APBS networks and for information on filling out a petition to start your own.

We would like to extend our gratitude to Jacki Anderson, Glen Dunlap, and Lucille Eber for their years of service on the Board. Thank you for all your contributions over the years.

Behavior Analysis in Foster Care

Bryon Neff, MS, BCBA
University of South Florida

Overview
Each year, nearly 1 million children in the United States are confirmed as having been abused or neglected; as a result, more than 500,000 are removed from their homes by Child Protective Services (U.S. Department of Health and Human Services [USDHHS], 2006). The monetary costs alone for child maltreatment are staggering. In the year 2000, estimates were that $20 billion had been spent on child welfare services (Bess, 2002). Additional costs, such as mental health treatment, law enforcement, special education services, and criminal conduct, have been estimated at $80 billion, bringing the total cost of child maltreatment to approximately $100 billion a year (Wang & Holton, 2001). On average, children stay in foster care for approximately 3 years before either being reunited with a family member or adopted. Almost 20% remain in foster care for 5 years (USDHHS, 2006) and more than 20,000 children each year remain in foster care until they “age out” (at 18 years).

The American Academy of Children and Adolescent Psychiatry (2005) reported that approximately 30% of children in foster care have severe emotional, behavioral, or developmental problems. Burns et al. (2004) conducted a national study of the child welfare system and found that nearly 50% of youth in care between the ages of 2 and 14 years had clinically significant emotional or behavioral problems. The incidence of behavioral, emotional, academic, and developmental problems appears to have a negative effect on life skills acquisition as well as placement stability and length of time in care (Cooper, Peterson, & Meier, 1987; Klee & Halfon, 1987; Proch & Taber, 1985). Newton, Litrownik, and Landsverk (2000) found that some children who came into foster care developed behavior problems as a result of placement instability. The foster care system itself, with the prolific use of group shelters and frequent placement changes, may contribute to the emotional trauma many youth experience.

The state of Florida alone has roughly 50,000 abused and/or neglected children receiving services, with approximately 30% placed in out-of-home substitute-care placements (e.g., relative and non-relative homes, foster homes, group homes, shelters and residential facilities). In an attempt to address emotional and behavioral issues and placement instability, a behavior analytic pilot program was implemented in the Tampa area in the mid-1990s. Environmental analyses concluded that although many substitute caregivers had good intentions, they lacked the skills necessary to manage complex behavior problems. To address these deficits, a parent-training curriculum, “Tools for Positive Behavior Change,” was created. Preliminary data suggested that the majority of foster parents who completed the 30-hour classroom training and received in-home services saw a reduction in behaviorally based placement disruptions when compared to results at baseline. In 2000, this information convinced the Florida Legislature to expand funding for the pilot program, and in 2001, the statewide “Behavior Analysis Services Program” (BASP) was established.

As behavior analysts are in much demand, and the supply is short, the Department of Children and Families contracted with the University of Florida and the University of South Florida to recruit, hire, and supervise 60+ board-certified behavior analysts (BCBA) placed throughout the state. University involvement enhanced the program by offering additional faculty expertise, major research resources, and graduate programs in behavior analysis. This project and these resources attracted some of the best BCBA from around the country.
One goal of the BASP is to integrate applied behavior analysis into the child protection system and create widespread availability of this service for all caregivers and child victims of abuse, neglect, or abandonment. Applied behavior analysis is one of numerous treatment modalities available to children in Florida's child protection system, and this program, in conjunction with other service providers and treatment modalities, is designed to promote safety, permanency, and well being for the children and families served. The BASP is also responsible for building a network of supports (training, technical assistance, and consultation) that promote positive, effective interactions for caregivers and children across the entire continuum of their lives. BASP creates and strengthens attachments for children so they can build healthy and trusting relationships, lessen emotional trauma associated with separation from their primary caregivers, and develop into productive citizens.

Although it can be incredibly rewarding, caring for children who have histories of abuse and/or neglect can be time intensive and difficult. Managing problem behavior (e.g., their emotions, language, actions) presents continuous challenges that often make parents feel fatigued, frustrated, fearful, and angry. To assist these dedicated caregivers, BASP offers comprehensive behavior assessments, programmatic and individual case consultation, technical assistance, and caregiver services, including classroom and in-home follow-up training. For obvious reasons, the use of punishment and negative consequences for undesired/unhealthy behaviors are not used with this population. Rather, caregivers are taught to focus on what the child “can” do and to use positive, proactive techniques to build and strengthen the child’s current repertoire. The goal is to create stable and nurturing home environments that promote the learning of more appropriate, functional, and socially acceptable behaviors. As a result, children AND adult behaviors improve, and children begin to experience success, sometimes for the first time.

**BASP Backbone:**

**The Tools Curriculum**

The Tools for Positive Behavior Change (or Tools) training is provided in two venues. First, caregivers attend a 30-hour in-class training that meets once a week for 10 consecutive weeks. During and following this course, behavior analysts go to the homes to help caregivers fine-tune child-specific interventions and to provide feedback on parent–child interactions and intervention implementation. The curriculum is rich in information and allows parents to effectively and independently manage the behavior of children in their care. Once enrolled in class, participants find themselves involved in a variety of situational role-plays that mirror behaviors of children in their home. These interactive role-plays offer many learning opportunities and ensure that participants will be comfortable with the use of the newly learned tools. Behavior analysts continue to provide in-home support to families for approximately 10 weeks following course completion, but the actual duration of services adjusts to meet the needs of each participant.

The Tools curriculum covers the following topics: avoidance of coercion, A–B–Cs (the three-term contingency: antecedent–behavior–consequence), how to build and strengthen relationships, positive consequences (reinforcement), movement away from “junk” behavior (differential reinforcement), redirect–reinforce, how to set expectations, contracts, and timeout. Although these tools are not sufficient to prevent and manage all challenging behaviors, the idea is to teach some basic skills and show how they generalize across children, settings, and situations (biggest bang for the buck). The intent is to create environments that strengthen appropriate behavior, prevent unwanted behavior, and if a crisis does occur, minimize harmful consequences.

To close with an analogy, think about how parenting resembles driving a car. Most cars have safety devices to prevent and/or minimize harmful consequences, such as antilock brakes, air bags, and traction control. Even with these safety devices in place, our focus should always be on driving safely, but when we drive we often take these things for granted. For example, just because a car is equipped with seat belts doesn’t mean you should drive carelessly (e.g., talking on cell phones, texting). Driving the speed limit, using your blinker, knowing your directions before you leave and paying close attention to your surroundings greatly enhance the chances of arriving safely at your destination. The same planning should go into caring for children. Reacting coercively to undesirable behaviors is like relying on antilock brakes to get you home in one piece. Knowing your child’s likes and dislikes, and good and bad habits, will help predict how he or she will respond to situations in the future. A positive, proactive plan removes the guesswork, increases the chances for success, and places the caregiver in the driver’s seat.

**References**


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APBS Networks: Membership Growth and Development

Randall L. De Pry

Over the past several years, APBS has seen a rapid growth in the number of applications for establishing APBS Networks. Regional/state APBS Networks provide opportunities for APBS members and colleagues to work on self-selected goals related to positive behavior support (PBS). A review of the APBS Networks web page (http://www.apbs.org/membersArea/network.aspx) indicates that important work is being conducted by APBS Networks in a variety of areas, including school-wide and community-based PBS, wraparound and person-centered planning, linking PBS to mental health and criminal justice systems, state-wide networking and advocacy, and regional trainings and conferences. APBS Networks have been established in West Virginia, Illinois, Kansas, Missouri, New Jersey, Ohio, Oregon, Georgia, Pennsylvania, and Virginia.

APBS Network meetings and events provide an excellent opportunity for the development of new relationships and for identifying persons who might have an interest in joining APBS. Sharing member resources—including handouts and materials from our annual international conference and the APBS website—and sharing our official periodicals (APBS Newsletter and the Journal of Positive Behavior Interventions) are excellent ways to garner interest in APBS. Having membership forms available for interested parties, as well as providing a link to the APBS Membership Information website (http://apbs.org/memberships.htm) on your network’s website are also excellent strategies. APBS Networks hold tremendous promise as a means for promoting and expanding PBS within natural communities of support and as a means for increasing APBS memberships. During your next APBS Network meeting, take a few minutes to identify ways that your network can promote membership growth and development. The Membership Committee is interested in learning about your network’s membership efforts. Please contact Randall De Pry (rdepry@uccs.edu) or Lisa Bowman-Perrott (lbperrott@tamu.edu) to share your ideas.

If you would like to submit to the newsletter, please contact Carie English (carieenglish@yahoo.com).