

“The Marshmallow Test”

Increasing Self-Control in a Child with Down Syndrome

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Introduction:

- Caregivers expressed their concern for the client exhibiting a lack of self-control in the presence of preferred edibles.
- When the client is left alone, he will access items and edibles that he is told not to touch (e.g., Entire Oreo family pack, ice cream, birthday cake).
- This is a dangerous behavior due to his habit of over-consuming edibles that he is previously told not to touch

Methods:

Baseline:

- Clinicians will place an edible in front of the client without saying anything and walk away for a duration of ten seconds.
- Moderately and highly preferred edibles will be rotated.
- After ten seconds has elapsed, clinicians will return to the room.
- No consequences will be provided for touching or consuming edibles.
- The session will be terminated following three completed trials.

Intervention:

- Clinicians will begin by placing the edible directly in front of the client and state the SD, “No touching.”
- Clinicians will set their timer for the current target duration and stand at the target distance.
- If the client does not touch the edible, clinicians will immediately provide high-magnitude social praise.
- Clinicians will provide access to the edible that was utilized within the trial according to the reinforcement schedule. (See table 1)

Results:

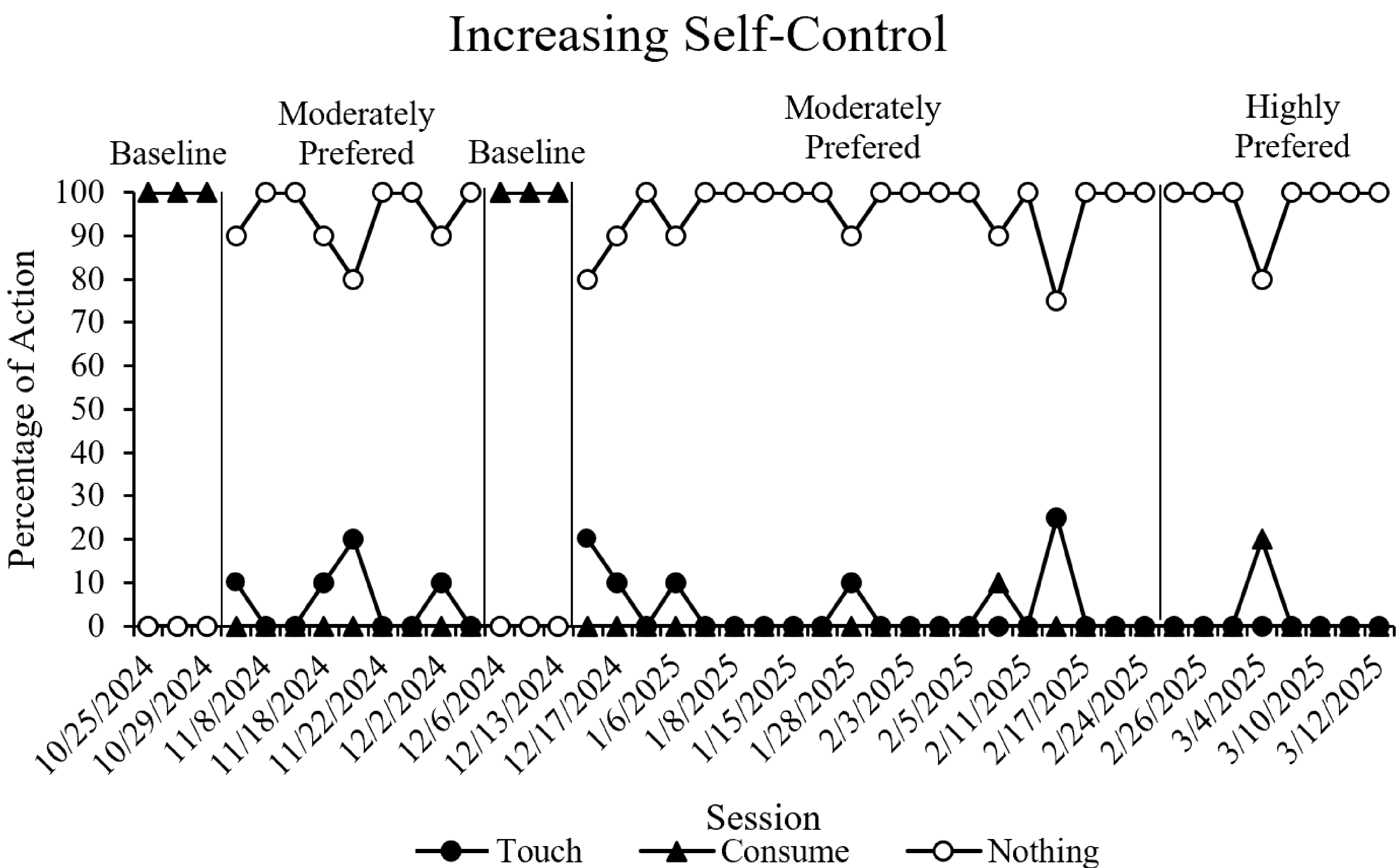


Figure 1:

The figure above displays the results for the percentage of action engaged in by the client each session.

#	Target	Date Probed	Probe-out Y/N	Date Introduced	Date Mastered
Objective 1: Client will independently engage in the correct response by refraining from eating a moderately preferred edible as clinicians fade their presence with 90% independence across three consecutive sessions and at least two clinicians.					
1.	1 second + next to Client + FR1				
2.	3 seconds + 1 foot + FR1				
3.	5 seconds + 2 feet + FR2				
4.	10 seconds + 3 feet + FR2				
5.	15 seconds + 4 feet + VR3				
6.	30 seconds + 5 feet + VR3				
7.	45 seconds + 6 feet + VR5				
8.	1 minute + not in sight + VR5				

Table 1:

The table above outlines the specific targets within the intervention phase.

Methods (Continued):

Intervention (Continued):

- If the client attempts to touch or successfully eats the edible or engages in maladaptive behaviors, clinicians will utilize most-to-least prompting.
- If the client attempts to eat the edible, clinicians will block and state, “No touching.”
- Any additional attempt to eat the edible, clinicians will only block and not provide additional verbal attention.
- After prompting, clinicians will provide low-magnitude social praise.

Discussion:

- During each baseline phase, the client consumed the edible 100% of the time.
- When the intervention was started, the client consumed the edible 0% of the time and the average percentage of him not engaging in any action quickly increased.
- In the future, clinicians could fade out the SD, “No touch.”
- Additionally, clinicians could conduct the intervention phase in other settings to assist in generalization of this skill (e.g., playroom, outside, client’s home).

References:

Rosenbaum, M. S., & Drabman, R. S. (1979). Self-control training in the classroom: A review and critique. *Journal of Applied Behavior Analysis*, 12(3), 467-485.