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RBT

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Question: 1

A child has been practicing responding to the fire alarm by leaving the classroom and walking toward the exit. When a car alarm goes off outside, the child immediately begins to leave the classroom. What does this exemplify?

- A. Learning transfer.
- B. Response generalization.
- C. Stimulus generalization.
- D. Guided compliance.

Answer: C

Explanation:

Stimulus generalization occurs when different stimuli elicit the same response. In this case, the child has learned to respond to a fire alarm by leaving the building, so when a similar alarm sounds, the child carries out the same behavior. Part of training must include planning for generalization. In this case, the child needs to learn to differentiate other sounds and alarms from the fire alarm sound. If a control stimulus, such as the fire alarm, is often accompanied by other sights or sounds, such as the teacher clapping hands to get attention, the child may respond the same way to the clapping as to the control stimulus.

Question: 2

A child responded well to extinction of temper tantrums, but 2 weeks later the child begins to throw temper tantrums again. What is the most appropriate intervention?

- A. Ignore the behavior.
- B. Reintroduce extinction.
- C. Use positive punishment.
- D. Use shaping.

Answer: B

Explanation:

Spontaneous recovery of previously extinguished behaviors is not uncommon because extinction results in a gradual reduction in behavior. When this occurs, the most appropriate intervention is to reintroduce extinction. Typically, the unwanted behavior will extinguish faster than when extinction was initially carried out. Other clients may respond in different ways to extinction. Some exhibit aggression and may hit, kick, or hurt others or engage in self-injury; others may have an emotional response (e.g., crying, arguing).

Question: 3

A 3-year-old child with developmental delay has been diagnosed as being on the autism spectrum. Whom would the parents contact to begin early and intensive behavioral interventions for the child?

- A. The local public elementary school.
- B. The local early intervention program.
- C. The local public health department.
- D. The nearest hospital with a pediatrics department

Answer: A

Explanation:

Early and intensive behavioral interventions are available in all states and US territories for children with development delays, autism, and other disabilities to help them develop basic skills that are typically acquired during the first 2 years of life. Programs are described as follows:

Children younger than 3 years: Contact the local early intervention program. Each state runs its own program, which go by various names.

Children 3 years and older: Contact a local public elementary school and the district's special education director to determine what services are available.

Question: 4

In addition to impairment of social interactions and impairment of communication, which one of the following characteristics is most common to people on the autism spectrum?

- A. Predictable behavior patterns.
- B. Lack of empathy and compassion.
- C. Restrictive repetitive or stereotypical behavior.
- D. Marked intellectual disability.

Answer: C

Explanation:

The characteristics that are common to those on the autism spectrum include impairment of social interactions, impairment of communication, and restrictive repetitive or stereotypical behavior. Behavior patterns may vary widely and are not predictable. Although people on the autism spectrum may have difficulty expressing emotions or recognizing the feelings of others, this does not mean that they are unable to feel empathy or compassion. Many people on the autism spectrum have normal or superior intelligence, although approximately 40% demonstrate some degree of intellectual disability.

Question: 5

- The RBT is observing an adolescent with Down's syndrome and is collecting data.
- a. Which one of the following is an indication of possible reactivity on the part of the adolescent?
- A. The adolescent's behavior is consistent with previous observations.
 - B. The adolescent appears to be ignoring the RBT.
 - C. The adolescent's behavior is atypical and inconsistent.
 - D. The adolescent's behavior appears confident.

Answer: C

Explanation:

Reactivity occurs when behavior is influenced by observation; that is, the individual changes behavior when he or she becomes aware of the observation. Indications of reactivity include displaying atypical, unusual, or inconsistent behavior or exhibiting self-consciousness (i.e., by showing anxiety or discomfort) during activities. Mitigating actions include habituating the individual to data collection so that he or she no longer reacts to it, conducting naturalistic observations, and conducting blind observations (such as by videotaping) so that the individual is not aware of any observation taking place.

Question: 6

A stopwatch is frequently used for which type of measurement?

- A. Frequency.
- B. Intensity.
- C. Discrete categorization.
- D. Duration.

Answer: D

Explanation:

Duration measurement is the time period during which a specific behavior persists. The target behavior monitored may be positive (desired) or negative (undesired). When collecting data, a stopwatch is typically used to measure the duration of time between when the behavior begins and when it ends. Duration measurement is used for behaviors that can occur over different periods of time, such as while exercising, or for behavioral states, such as periods of agitation or withdrawal from activities.

Question: 7

The RBT is using noncontingent reinforcement with a child who has been throwing temper tantrums in order to get attention. What is the primary purpose of using noncontingent reinforcement in this situation?

- A. Eliminate the need for reinforcement.
- B. Increase the effectiveness of reinforcement.
- C. Change the relationship between the behavior and reinforcement.

D. Strengthen the relationship between the behavior and reinforcement.

Answer: C

Explanation:

With noncontingent reinforcement, enforcement is given either at fixed (most commonly) or variable intervals rather than immediately after the behavior. For example, if the child gains attention by throwing a tantrum, the child learns to throw a tantrum to get the attention he or she craves. If, however, the child receives no reinforcement after a tantrum but receives reinforcement at other times, this changes the relationship between the behavior (tantrum) and the reinforcement (attention). Noncontingent reinforcement is often combined with extinction exercises to decrease incidences of the unwanted behavior.

Question: 8

A student persists in playing with toys during class time, so the teacher places the student in a time-out for 5 minutes. What strategy does this represent?

- A. Negative reinforcement.
- B. Negative punishment.
- C. Positive reinforcement.
- D. Positive punishment.

Answer: D

Explanation:

Positive punishment involves adding something (e.g., an aversive stimulus, such as a time-out) to discourage an unwanted behavior (in this case, playing with toys). To be effective, positive punishment should occur immediately following an unwanted behavior and should be appropriate for the age and the behavior. One downfall is that positive punishment may cause resentment and may only temporarily suppress a behavior without teaching an alternative behavior. Positive punishment is often used with positive reinforcement and other strategies.

Question: 9

The BCBA tells the RBT that the RBT is carrying out an intervention incorrectly, even though the RBT is performing the intervention as taught during training. How should the RBT respond?

- A. "This is the way I was taught."
- B. "Would you please model this intervention for me?"
- C. "I guess there is more than one way to do this."
- D. "I'm sure that I'm doing it correctly."

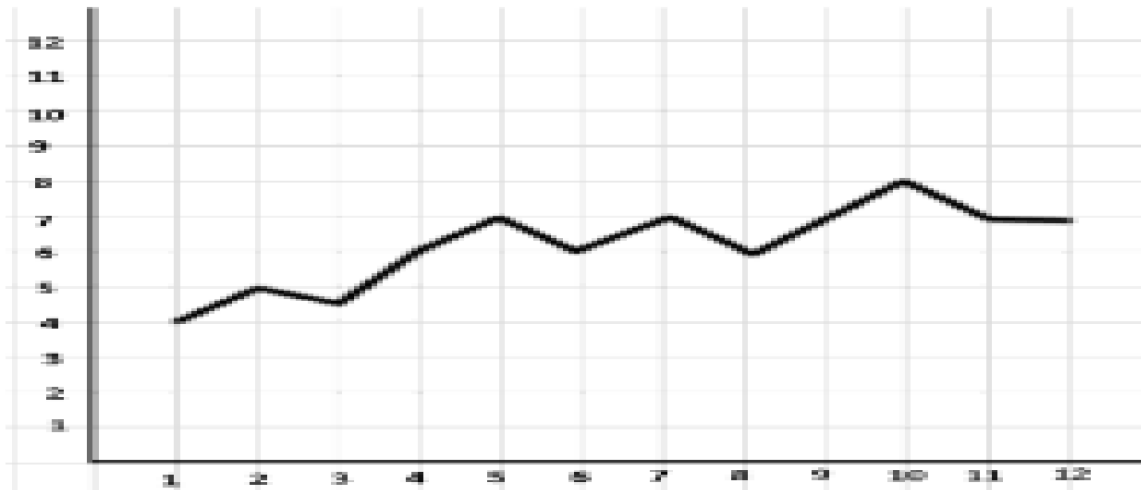
Answer: B

Explanation:

There are variations in how interventions are carried out, so the RBT should avoid any defensive remarks if the BCBA's feedback indicates that there is an issue with how the BCBA wants interventions done. The best response is to be open to learning, by saying, for example, "Would you please model this intervention for me?" If a BCBA is continually or unfairly critical of the RBT, then this is a different issue that may need to be addressed directly with the BCBA or the BCBA's supervisor.

Question: 10

How would the data in the following graph be categorized?



- A. High level, high variability.
- B. Medium level, high variability.
- C. Low level, low variability.
- D. Medium level, low variability.

Answer: B

Explanation:

On a scale of 1—12, this client has a baseline of 4 and a top reading of 8, which represents medium level, high variability. Middle-level points lie near the middle of the graph (these totals average $xw6.5$). Variability represents a significant difference between the low (4) and high (8) points. When graphing, trend (whether going up- or downward), level, and variability are the three elements to consider during evaluation.

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