Using Interventions That Exist in the Natural Environment to Increase Treatment Integrity and Social Influence in Consultation

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A common purpose of classroom-based consultation is to solve an identified problem through modification of the existing classroom system. Traditionally, the development of these alterations has been left largely to the consultant. Throughout the article, we propose that the magnitude of alterations should be given greater consideration when selecting an intervention. Significant changes to the existing (and functional) system are more likely to be rejected than small adaptations that utilize existing practices. Whenever possible, small changes should be made, as they may be the only changes that are actually implemented and have greater potential to endure. Suggestions to incorporate this perspective within the classroom-based consultation process, with a particular focus on the problem-solving and social influence tasks (Erchul & Martens, 2002), are offered along with acknowledgment of potential limitations.

Consultation is considered a primary role for school psychologists for a number of reasons. For example, classroom-based consultation is perceived by school personnel as a way to address the multiple and varied

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needs of children and adolescents (Gutkin & Curtis, 1999) and is backed by considerable empirical support (e.g., Mannino & Shore, 1975; Medway, 1979, 1982; Medway & Updyke, 1985; Sheridan, Welch, & Orme, 1996). Furthermore, the increased inclusion of students with disabilities in general education environments because of federal mandates such as P.L. 94-142, the Education of All Handicapped Children Act of 1975 (renamed the Individuals with Disabilities Education Act [IDEA], P.L. 102–119 in 1990), the 1997 amendments to IDEA (P.L. 105–17; IDEA '97) and the Regular Education Initiative (Will, 1988) has stimulated greater need for and acceptance of consultation. Finally, the impact of many states requiring teachers to implement prereferral intervention services (Carter & Sugai, 1989; Zins, Kratochwill, & Elliott, 1993) has promoted the role of the consultant.

Common objectives of various consultation models are to analyze a problem, typically relating to a behavioral or academic issue, and to select an intervention that has the potential to alleviate the problem (Erchul & Martens, 2002). Despite the promise of a logical and well-articulated consultation process, one of the key elements—the intervention—has presented considerable challenge for the consultant. Specifically, despite the development of a solid intervention plan, problems with treatment implementation or low treatment integrity are often present. In this article, we discuss the importance of treatment integrity, offering one explanation for reported difficulties with maintaining high levels of treatment integrity and discussing possibilities for addressing low treatment integrity within two major aspects of the consultation process presented by Erchul and Martens (i.e., problem-solving task, social influence task).

THE IMPORTANCE OF TREATMENT INTEGRITY

Treatment integrity refers to the extent to which an intervention is carried out as defined (Gresham, 1989). Treatment integrity thus plays an important role in the evaluation of treatment outcomes. However, it is unfortunate that little is known about the degree to which treatments are implemented (Noell & Witt, 1999). In our experiences, intervention plans often are not implemented with high levels of treatment integrity, and thus the effectiveness of classroom-based consultation can be severely limited. In fact, a recent study examining the treatment integrity of behavior plans implemented by general education teachers found that even initial implementation of an agreed-on behavior plan was not ensured, and that for most teachers, implementation over time was unstable or exhibited a
downward trend without specific follow-up (Noell, Duhon, Gatti, & Connell, 2002). Although a number of factors can be related to treatment outcomes (e.g., treatment knowledge, treatment acceptability), most conceptual models addressing treatment outcomes or effectiveness include compliance or integrity as a significant component (for a review, see Eckert & Hintze, 2000).

Even if all other factors were accounted for, the role of treatment integrity is still essential because several problems can arise if an intervention is not carried out as defined. For example, changing an intervention, such as implementing it only part of the required time, could minimize the strength of the intervention through removal of key components. This dilution of intervention strength can occur any time a plan is modified in an unspecified or inconsistent way, such as forgetting to deliver reinforcers, not following through consistently with consequences, or changing the goal. If these changes involve removal of the active treatment component, then the intervention can be rendered useless. In addition, even if the intervention plan is successful, low treatment integrity does not allow for the identification of what caused—or did not cause—the change. This conclusion is relevant because it is then not possible to identify which activities actually changed the behavior or which components of the intervention are needed for success. From an empirical perspective, an unspecified plan (i.e., one with poorly defined or undefined independent variables) is obviously impossible to replicate, which is one major way of gathering evidence in support of an intervention. In summary, the unspecified modification of an intervention plan or low treatment integrity does not allow conclusions to be drawn regarding the relationship between the intervention and observed change (either negative or positive).

Given the potentially negative impact of low treatment integrity, determining why this problem exists is important. Several factors, including the complexity of treatments, the time required to implement the intervention, access to required materials and resources, and perceived effectiveness, have been linked to the integrity of a treatment (Gresham, MacMillan, Beebe-Frankenberger, & Bocian, 2000). A related factor may come from examination of a classroom as a functional system. A functional system (i.e., classroom) is one in which each activity by the teacher and students serves a specific purpose, even if the system may not be functional with regard to the target student’s academic or behavioral problem.

School consultation is initiated when someone perceives an academic or behavioral problem exhibited by a student or a group of students.
Typically, the consultation is focused on the problem within the context of the classroom and results in development of an intervention. Generally, the utility of any intervention is to fix the system with regard to a specific problem (Apter & Conoley, 1984). However, the introduction of a new intervention is not simply a trivial exercise within the context of the classroom. The addition of a new intervention alters the current functional system in ways that extend beyond the target student. For example, if the teacher conducts an intervention that takes 5 min out of his or her afternoon, then some other activity must be shortened or removed entirely. Perhaps this other activity served some specific purpose, such as targeting the behavior of another student or providing the teacher with a period of needed relief or preparation time before a stressful academic activity. Whatever its purpose, the impact of the shortened or removed activity on the system is unknown and could be potentially significant. Given the understanding that a simple change has the potential to result in class-wide changes, it becomes reasonable that teachers may be resistant to implement what may seem to the consultant to be minor alterations. As a result, we propose that a major task for the consultant is to manipulate the classroom system as little as possible. However, where does this reconceptualization of intervention selection fit within the consultation process?

A CLOSER LOOK AT THE CONSULTATION PROCESS

A consistent characteristic of recognized classroom-based consultation models (e.g., Erchul & Martens, 2002; Kratochwill & Bergan, 1990; Sheridan, Kratochwill, & Bergan, 1996) includes utilizing a problem-solving approach that involves the implementation of an intervention (Gutkin & Curtis, 1999). The problem-solving approach typically involves four steps that are derived from behavioral consultation (Bergan, 1977, 1995). The steps include problem identification, problem analysis, plan implementation, and problem evaluation. In problem identification, the consultant and the consultee define a problem behavior in specific and measurable terms. In the second step, problem analysis, baseline data on the identified problem are reviewed, a hypothesis as to why it occurs is generated, and goals for change are identified. Next, an intervention plan to address the problem is selected. The plan is ideally derived from the evidence-based intervention literature and is adapted for use in the specific setting. This intervention plan is implemented during the third step in consultation. Most often, the plan is implemented by the
consultee with periodic checks by the consultant to ensure that the intervention is being carried out as planned (i.e., treatment integrity). In the final step, problem evaluation, consultant and consultee evaluate progress toward the goal and the overall effectiveness of the intervention plan. Depending on that evaluation, consultation is continued or terminated, the intervention is modified (if desired results are not achieved), or the process is recycled back to an earlier step to address remaining problems.

Despite this seemingly rational and logical flow from step to step, we suggest that the plan development and implementation pieces of the process are not a minor undertaking. Importing an intervention, no matter how evidence based it may be, should be considered a significant event, to be commenced only when other options have been exhausted. Thus, utilizing interventions that are as compatible as possible with the classroom system is imperative to maximize treatment integrity, and the least invasive interventions may be the ones that are currently found in the classroom system.

When examining various consultation models that utilize the 4-step problem-solving approach, consideration of the existing system has not received direct attention. One model, the integrated consultation model offered by Erchul and Martens (2002), does present significant expansion of the 4-step process to include considerations such as the need to understand the classroom as a setting for consultation. In fact, this consultation model expands the consultation process beyond the 4-step process (i.e., the problem-solving task) to include two additional tasks: (a) social influence and (b) support and development. Many of the points included in the Erchul and Martens model come close to the idea that intervention selection should include consideration of the existing system, but there is no direct reference within the model to it. Some attempts to address the issue are evident to a limited extent within existing empirical literature on interventions (see Daly, Witt, Martens, & Dool, 1997). For example, considering the invasiveness of an intervention has been discussed regarding selection of oral reading interventions (see Daly, Martens, & Dool, 1998). In these studies, the invasiveness of possible oral reading interventions were ordered into a hypothesized ease of implementation hierarchy. This hierarchy was used to determine the easiest to implement yet also effective instructional component(s) for individual students.

As an illustration as to how and where existing interventions fit within the classroom ecology, we return to the integrated consultation model presented by Erchul and Martens (2002). In Table 1, we suggest specific adaptations to Erchul and Martens' model to accommodate the potential use of existing teaching techniques. We focus on two of the interrelated
tasks of the consultation process—the problem-solving task and the social influence task—as we believe consideration of the current ecology and utilization of pre-existing intervention knowledge will most significantly affect these tasks.

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<th>School Consultation Model</th>
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<td>• Building a potential research base to assess the effectiveness of the preexisting intervention, which can direct future use of the intervention</td>
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<td>2) The social influence task</td>
<td>2) The social influence task&lt;br&gt;• Utilization of an existing intervention should enhance the use of legitimate reciprocity power and informational power</td>
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Consultation outcomes<br>• Improving the learning and adjustment of clients<br>• Improving the professional functioning of consultees<br>Consultation outcomes<br>• Improving the learning and adjustment of clients<br>• Utilization of outcome data to alter classroom activities<br>• Improving the professional functioning of consultees


**THE PROBLEM-SOLVING TASK**

The problem-solving task in consultation refers to the identification and analysis of the problem, and then the development, implementation, and evaluation of an intervention (Erchul & Martens, 2002). Analysis of the problem includes consideration of the environment, the function of the target behavior, and any interventions that have been attempted. After a hypothesis has been developed regarding the function of the target behavior, an intervention is typically agreed on that should alter the behavior.

Regarding discussion of the problem-solving task, we begin by acknowledging that all teachers utilize a number of teaching techniques and informal interventions in the course of the educational process. Before introducing an intervention that will have an unknown impact on the classroom system, a consultant should first ascertain if the teacher is utilizing a technique that could have a positive effect on the defined
problem. Research has suggested that teachers typically try two or three types of interventions on their own before engaging in a consultative relationship (Ysseldyke, Pianta, Christenson, Wang, & Algozzine, 1983). Several reasons why teacher-devised interventions may be ineffective have been suggested. For example, teachers may have difficulty defining student problems targeted for intervention (Lambert, 1976). Thus, during the problem identification step of the consultation process, the consultant would want to ascertain the level of specificity with which the problem has been defined; that is, the ability of the teacher to clearly state what the problem is, and then focus efforts on supporting a clearer definition if needed. If the problem is well defined, then efforts might next focus on problem analysis. It is possible that existing interventions have been ineffective because a teacher-designed intervention may not be systematic and may not lend itself to examination through collection of effectiveness data (Algozzine, Ysseldyke, Christenson, & Thurlow, 1983; Ysseldyke et al., 1983). In addition, selected interventions are not often conceptually relevant (Erchul & Martens, 2002).

Despite these reasons for the ineffectiveness of teacher-initiated interventions, it would be premature to suggest that these interventions are without value. Given the complexity of the classroom and the potential lack of teacher objectivity, it is possible that, in many situations, effective active intervention components are being conducted, but not in a manner that is likely to promote change. Thus, we propose considering possible reasons for the failure of existing effective teaching techniques during the problem analysis step. Such reasons may include:

1. Techniques are not being used with the proper frequency (insufficient opportunities to respond).
2. Techniques are being used inconsistently (insufficient or inconsistent opportunities to respond).
3. Techniques are not being used with sufficient intensity (insufficient level of assistance).
4. Effective techniques are utilized in the classroom with other students, but not with the target student (insufficient generalization).

Given these possible reasons for the failure of teacher-initiated interventions, it is evident that alterations of such interventions can be successfully utilized. For example, a teacher may be using a 15-min peer-tutoring program on a weekly basis to increase the reading fluency of a student. Analysis of that intervention may find that the intervention
itself is technically sound, producing modest yet effective results in relation to the target student’s reading fluency. Unfortunately, the intervention is only being utilized once a week, which is not frequent enough to produce effects necessary to have the student catch up to his or her peers. In this case, simply increasing the frequency of a naturally occurring intervention would be a plausible strategy that should have less impact on the classroom environment than importing an entirely new intervention.

In summary, the problem-analysis step becomes an important place for the consultant to consider not only evidence-based interventions but also current activities being conducted in the classroom. Determination of the fit between the two must occur at this point. For example, we know that positive reinforcement can be a very powerful intervention tool. We may find that the use of positive reinforcement currently exists to a moderate degree within the current system, but perhaps it is not directed frequently enough to address the problem behavior. This situation provides an excellent opportunity to then use the support and development task (Erchul & Martens, 2002) to work with the consultee to continue use of an appropriate strategy. The support and development task in Erchul and Martens’ model of school consultation is highlighted by the consultant providing social support to the consultee, and focus on the development of the consultee’s skill. In this example, the use of an existing strategy is tweaked to better meet the needs of the situation.

Finally, consideration of existing techniques is relevant to the last piece of the problem-solving task, problem evaluation, during which the assessment of the intervention effects occurs. Developing a solid evaluation plan for the intervention can serve two useful purposes. The first—which is already outlined in the traditional goals of the step—involves the evaluation of intervention effectiveness (i.e., progress toward the identified goal). The second benefit comes from the use of pre-existing classroom interventions that may not have a strong empirical base. Outcome data collected during this step may be used to build a research base regarding the use of that intervention. For example, limited empirical support is available in current literature regarding the use of daily behavior report cards (e.g., home school notes, good behavior notes; Chafouleas, Riley-Tillman, & McDougal, 2002), yet the intervention strategies appear to be acceptable and common within the field. Building evidence regarding their use through classroom-based consultation and intervention work may provide needed support for the recommended use of such a strategy.
THE SOCIAL INFLUENCE TASK

The social influence task in the consultation process refers to the use of strategic communication to influence consultee perceptions and/or behaviors (Erchul & Martens, 2002). The basis for social influence comes from social power, which is the potential for influencing beliefs, attitudes, or behaviors. The many forms of social power have been aptly described within Raven’s evolving typology of social power bases (French & Raven, 1959; Raven, 1965, 1992, 1993). In reviewing the use of existing teaching techniques as interventions in relation to this typology, the potential for influence (social power) and setting the stage to access this power base to actually change behavior (social influence) is discussed.

Social Power

Of the 14 power bases specified by Erchul and Raven (1997), we discuss two forms (i.e., legitimate power of reciprocity and informational power) that seem particularly relevant to promoting the use of existing interventions. Taking time to understand a classroom environment and then utilizing this information in a positive manner to design an ecologically friendly intervention plan allows the consultant to build a reserve of good will with the consultee. These behaviors present an opportunity for the utilization of legitimate reciprocity power. *Legitimate power of reciprocity* in consultative relationships is based on the consultee’s perception that, given the effort that the consultant has already expended on the consultee’s behalf, it would be fitting for the consultee to respond in kind (Erchul & Raven, 1997; Gouldner, 1960). Logically, consultants who expend time and effort to learn about students and classroom systems and incorporate this information when designing an intervention place themselves in a position to request—either implicitly or explicitly—that consultees respond in kind. Given the subtle nature of the legitimate power of reciprocity, a consultant who designs an ecologically consistent intervention not only is incorporating an intervention that makes a minimal footprint on the natural environment but also is accessing one of the few forms of legitimate power that draws on the norms of society to comply rather than on an acknowledged hierarchical difference.

A second form of social power that is enhanced through the utilization of interventions that exist in the current system is informational power. *Informational power* comes from the consultee’s perception that the knowledge provided in consultation will not only be effective in solving the specific problem targeted through consultation, but also, in the framework of the natural environment, be a practical intervention. In contrast with positive
expert power, which is based on the belief of the consultee that the consultant knows what the best action is because of his or her status, informational power relies on the teacher to understand and accept the utility of the message itself. Informational power can be attractive to consultants for two reasons (Erchul, 1993; Erchul & Raven, 1997). First, this base of power does not require the consultee to perceive the consultant as likable or expert, as informational power is socially independent. Second, informational power does not require the consultant to check on the consultee’s behavior for influence related to informational power to continue. As previously noted, influence related to informational power is based on the consultee understanding and accepting the utility of the information. Even when the consultant leaves, which is of course inevitable, the information remains and thus the influence remains. As a result of these advantages, a clear value to using informational power in consultation has been noted by Caplan and Raven (Erchul & Raven, 1997). In fact, one survey study found that teachers expected school psychologists’ use of informational power to be very effective in influencing teachers during consultation (Erchul, Raven, & Whichard, 2001).

However, informational power also has a potential negative aspect in that if consultees perceive the new information as undermining their current knowledge base and practice, they may resent the consultant because of the predictable dissonance. As a result, for this form of power to be ultimately effective, it is critical that the consultant convey the beneficial outcomes and the ecologically friendly design of the proposed intervention to consultees.

As an example of the use of informational power, consider a situation in which a consultant finds a teacher already using a form of a performance feedback intervention with other students that also would seem to be effective with the target student in a consultation case. In this instance, a consultant could potentially discuss evidence for the use of performance feedback and note why such an intervention might be effective with the target student. Concurrently, the consultant could note that the teacher currently uses performance feedback with other students in the classroom. Such a use of informational power highlights evidence for the effectiveness of the intervention and minimizes the likelihood that the influence attempt will result in dissonance, given that the teacher is already utilizing the intervention.

Social Influence

Although the enhancement of a base of social power is an attractive aspect of the utilization of current teaching techniques as interventions, those
bases of power must be successfully applied for social influence to occur. Setting the stage for a successful influence attempt is composed of several steps, including (a) analysis of the motivation to influence, (b) assessment of available power bases, (c) analysis of the available power bases in relation to the consultee, and (d) analysis of the potential effects of the influence attempt (Erchul & Raven, 1997; Raven, 1992, 1993). Figure 1 provides a model, modified from Raven (1993), which explores each of these steps in relation to the incorporation of existing interventions within classroom-based consultation.

The first consideration in making an influence attempt is the motivation to influence. Regarding classroom-based consultation, although motivations such as administrative pressure or the satisfaction of internal needs (e.g., self-esteem) may be present, the primary "why" behind a consultant's attempt to influence should be for the benefit of the student(s). To benefit the student, a major force behind utilizing a power base is to maximize a teacher's commitment to the implementation of the constructed intervention. For example, the intent behind using informational power regarding the use of performance feedback is to have the teacher perceive an intervention as effective and elegant. Consequently, the teacher may be more likely to commit to incorporating it in the intervention; that is, a successful influence attempt would result in higher treatment integrity and, in turn, an increased likelihood of a positive impact on the target student. At this stage of translating a power base into an influence attempt it is important for the consultant to consider if it is necessary to access a power base in the particular situation. In some cases, the consultant will have a reason (such as through past consultative experience) to believe that a particular teacher is capable of adhering to a high level of treatment integrity. If influence is not needed to promote integrity, then the consultant should consider not translating an available base of power into influence because of the potential costs to the consultant. Thus, a power base should be translated into an influence attempt only when the motivation justifies the risk.

Once the motivation to influence has been identified, and the decision to translate a power base into an influence attempt is made, an assessment of available power bases occurs. In particular, the activity of utilizing and adapting the teacher's current practice to create the new intervention should be examined in relation to potential impact on influence. As previously discussed, the potential for legitimate reciprocity power and informational power may become more readily available through the utilization of a teacher's current practice in the development of the intervention. In the process of translating these power bases into influence, concurrent consideration of the costs and benefits associated with the influence attempt occurs. For example, as noted previously, the use of informational power in consultative relationships can lead to resentment if the consultee feels that his or her current teaching practices are being criticized (Erchul & Raven, 1997). However, incorporating existing activities has the potential to address this cost. Through the utilization of an adaptation of a consultee's current instructional strategies rather than a wholesale replacement, the consultee should be less likely to feel this resentment. Thus, the use of informational power in this situation may be more likely to benefit rather than cost.
Next, the consultant prepares the consultee for the influence attempt. Conceptually, at this point the consultant engages in behaviors that increase the likelihood that the influence attempt will be successful. To maximize legitimate reciprocity, it is suggested that a consultant emphasize the favors that he or she has done for the consultee (Raven, 1992). For example, a consultant might highlight the amount of effort that was expended to fully understand the classroom environment, the consultee’s teaching style, and the student’s specific problem. To prepare for the use of informational power, the consultant would focus on the informational benefits of the consultation sessions. In the case of utilizing an alteration of the teacher’s current practice, it would be particularly important to highlight how the knowledge complements the teacher’s current practice. This should enhance the impact of utilizing the informational power base while minimizing the potential negative impact of undermining the teacher’s current knowledge base. In the earlier example concerning the teacher who utilizes a form of a performance feedback intervention, highlighting the empirical support for that technique and the observed instances of usage are critical in the successful utilization of the informational power base as an influence attempt.

The next steps in the influence process entail selecting the power base for the influence attempt and then assessing the effects. A key issue in this stage is the selection of the power mode, or the manner in which the influence attempt is executed. It has been suggested that the mode of presentation can be as important as the selected power base (Raven, 1992). As suggested by Erchul and Martens (2002), it is likely, given their role, that classroom-based consultants would choose soft, friendly, and humorous modes.

To conclude the process of translating a power base into an influence attempt, evaluation regarding the positive and negative effects of the attempt should be conducted, and then, if necessary, adjustment of the process should occur. This evaluation should consider primary and secondary effects (Raven, 1992). In the case of utilizing an alteration of the teacher’s current practice, primary effects would include the impact of the influence attempt on changing the behavior. Examples of secondary effects would include the teacher’s perceptions of the consultant after the influence attempt.

CAUTIONS REGARDING THE USE OF EXISTING INTERVENTIONS

Despite the appeal of using interventions that already exist or naturally occur in the classroom, there are a number of cautions regarding their use.
First, these interventions may have limited empirical support. The previous discussion regarding the use of daily behavior report cards is one example (for a review, see Chafouleas et al., 2002). Second, existing interventions may lack the standardization or consistency needed. Instead, it is likely that the use of such existing interventions will differ from teacher to teacher, classroom to classroom, and day to day. Finally, an appropriate intervention may not exist in the current system. For example, there may be a system in which virtually no positive reinforcement exists, yet incorporating positive reinforcement may be determined to be the most appropriate strategy. Obviously, some trade-off may occur when using an existing intervention, but despite these cautions, we believe incorporating existing interventions into the consultation process may produce positive outcomes more often than not.

SUMMARY AND IMPLICATIONS

A common purpose of classroom-based consultation is to solve an identified problem through modification of the existing classroom system. Traditionally, the development of these alterations has been left largely to the consultant. Throughout the article, we have proposed that the magnitude of that alteration should be given greater consideration when selecting an intervention. Significant changes to the existing (and functional) system are more likely to be rejected than small adaptations that utilize existing practices. Whenever possible, small changes should be made, as they may be the only changes that are actually implemented and have greater potential to endure. Suggestions to incorporate this perspective within the classroom-based consultation process, with a particular focus on the problem-solving and social influence tasks, were offered along with acknowledgment regarding potential limitations.

Given the conceptual nature of much of the current literature on factors influencing treatment integrity, we believe this area is ripe for research attention. Future researchers may wish to focus examination on the interaction between the level of disruption caused by an intervention and the resources needed to maintain the intervention with integrity. In their model of treatment acceptability, Reimers, Wacker, and Koeppel (1987) suggested that too much disruption to a family or classroom system may lead to variable maintenance, which then would require modification of the intervention or development of a new one. Research suggests the need for consultants to provide specific feedback to maintain high treatment integrity (see Noell et al., 2002), but further examination of the need for
feedback and type of intervention plan has not yet occurred. In addition, future research may investigate common existing classroom practices that have not been empirically evaluated. This addition to the literature base would arm consultants with greater knowledge and thus strengthen confidence in decisions regarding the worth of including existing practices. Perhaps the attention could be drawn to the types of strategies used in the evaluation of pieces of the consultation process. For example, designing evaluation strategies that are the least invasive yet best possible may be important. Finally, investigations of the impact of ecologically friendly interventions on available social power bases and resulting social influence would be an important next step.

In summary, we advocate the perspective that interventions should not be viewed as an all-or-none process in which intervention selection neglects consideration of the existing system. Rather, a major task for the consultant should be to rebalance rather than reinvent the wheel whenever possible. In return, an increase in treatment integrity through expansion of the consultation process to use interventions that exist in the natural environment may occur.

REFERENCES


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