

Embedded Intervention

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Key Steps

- **Set up the environment for engagement**
- **See the child engaged**
- **Approach child**
- **Elicit elaboration**
- **Reinforce**

Incidental Teaching: Following the Child's Lead

Incidental teaching is about capitalizing on a child's engagement to promote learning and skill acquisition. We define engagement as the amount of time children spend interacting appropriately with their environments. In five steps, teachers can target and enhance children's engagement in the classroom. The first step is to set up the environment to promote children's engagement. This includes making materials accessible to children (i.e. within their reach), and having a variety of activities scheduled (e.g. active and quiet, inside and outside). These two suggestions are especially important when it comes to teaching a child with disabilities, because studies have shown that children with disabilities spend more time nonengaged (e.g. wandering around, crying, or waiting) than do their typically developing peers.

Ideally, if materials, activities, and people that the child prefers are available, he or she will become engaged independently (Step 2). For a child who is not engaged independently, the caregiver would approach

the child (Step 3) and elicit child engagement (Step 4). Once the child is engaged, the caregiver elicits

- Higher levels of engagement (e.g. talking about what he or she is doing, creating, pretending, persisting,
- Longer periods of engagement, or
- A target skill from the child's IFSP or IEP

For example, Ryan is coloring with crayons at the activity table. The caregiver approaches him and says, "Wow, that's such a beautiful picture. Can you tell me what this is?" Because Ryan is already engaged, the caregiver can elicit elaboration by getting him to talk about his drawing (i.e., higher levels of engagement), or extending Ryan's engagement in the activity. In doing so, the caregiver might want to work on language skills on Ryan's IFSP.

Once the child has displayed the behavior or targeted skill, the caregiver provides reinforcement. Reinforcement might be the following types.

- **Natural.** For example, Ryan asks a peer to take a turn on the swing, and the peer gets off to let Ryan have the swing. Getting a turn on the swing is a natural reinforcer of Ryan's communicative attempt.
- **Attention.** Often just the attention that is given to a child when he or she displays a certain behavior acts as reinforcement positive or negative.
- **Praise.** For example, Ryan asks a peer to take a turn on the swing and the teacher says, "I really like the way you asked Harold for a turn. Good job!" In this case, the teacher's verbal praise is reinforcing Ryan's communication attempt.

When it comes to embedding intervention into home or classroom routines, incidental teaching strategies enable the caregiver to provide interventions when and where they are needed.

Regular Caregivers Need to Own the Goals

For caregivers, that is parents and teachers, to embed intervention into home and classroom routines, a child's goals must be functional, a good fit, and recognized by the caregiver as addressing an important need.

Functional. Functional goals address skills that are immediately useful for the child. Caring for a child can be a lot of work. Many times, if caregivers cannot see how an intervention will benefit the child in the current situation, it will not be a priority for them to attend to.

A Good Fit. Goals that are a good fit require little if any

modification to existing routines. When interventions require "extra" equipment (e.g. a therapy ball) or major modification to a routine, it is less likely that the caregiver will be able to fit it in. Caregivers should focus on what exactly they are trying to get the child to do and address it as directly as possible.

Recognized Needs. If a caregiver does not understand the purpose behind a particular goal or recognize the need for a child to work on a specific skill, chances are interventions for working towards that goal will not be addressed. Make sure the caregivers understand the goals and how the goals can

be addressed. Make sure the caregivers "own the goals" by using a routines-based assessment to identify goals. By interviewing the family about home routines and teachers about classroom routines, the caregivers identify what the child needs to work on to become more independent, engaged, and socially competent.

For more information on routines-based assessment, please see *Functional Intervention Planning: The Routines-Based Interview*, another flyer in this series.



The 7 Principles of Intervention

When embedding interventions in daily routines, caregivers might find these seven guiding principles of intervention, identified by Wolery (1998), helpful:

1. Principle of comprehensive purposefulness

Caregivers identify appropriate interventions and implement them at appropriate times across the day in multiple activities and routines. In addition, activities should lend themselves to addressing more than one of a child's goals.

2. Principle of balanced participation and independence

Interventions should encourage child participation with peers as well as independent participation in routines.

3. Principle of behavioral sensitivity and responsiveness.

Caregivers should elaborate on the child's engagement when implementing interventions, as described in incidental teaching practices.

4. Principle of distributed learning opportunities.

Children have several opportunities to practice identified skills over the course of a day, not just in massed trials.

5. Principle of contextually relevant learning opportunities.

Caregivers implement interventions to target skills the child needs when the child needs them.

6. Principle of integrated learning.

Interventions address the "whole child". Abilities across domains should be promoted together and in context.

7. Principle of programmed generalization.

Children with disabilities often have trouble taking a skill that was learned in one setting or activity and using it at other times when the skill is needed. Therefore, caregivers must plan multiple opportunities in multiple settings and activities to promote skill generalization.

Wolery, M. (1998). *Individualizing inclusion in child care*. Grant application to the U.S. Department of Education, Office of Special Education Programs.





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