

I first saw Ms. P. on the maximum security ward of the state hospital. While working with the head nurse on a treatment plan, my attention was admittedly diverted by a 200-pound nude woman standing in the middle of the ward. She was engaged in inappropriate behavior—the kind of behavior that gets people into state hospitals—such as talking to

P., however, was our first Pillsbury Doughboy. One of our problems was that she ran amok (and nude) throughout the ward soliciting pokes from stunned staff members, other patients, and even the cafeteria ladies.

As the ward consultant, I was affectionately known as the Ace Behavior Modifier. Disruptive patients were invariably assigned

The Ace Behavior Modifier Meets the Pillsbury Doughboy

A Case Study

by John J. Parrino, Ph.D.

yourself and smacking someone important. At this hospital, Ms. P.'s behavior landed her an introduction to three psychiatric aids. As they led Ms. P. to time-out, I heard her request in a Truman Capote voice, "Poke me in the stomach, I'm the Pillsbury Doughboy."

Famous people were common on this particular ward. We had presidents, kings and queens, FBI directors and a deity or two. Ms.

to me. My team had a reputation for bringing about speedy behavior change through positive means. Therefore, when other staff plans failed, I volunteered the services of my behavioral team.

The job, in our eyes, was simple. Ms. P. would be rewarded with praise and tokens (exchangeable at the hospital's department store) for appropriate behavior. Of course, we only expected her to progress one small step at a time. To earn

her rewards she had to make only slight improvements such as wearing socks or even a small hat. Later, she had to remain fully dressed to receive the payoff.

With tokens in hand and praise at the tip of our tongues, my team and I stood ready to "catch" Ms. P. with her clothes on. And of course, we did. She slept in her clothes, sometimes bathed in them, but in the public view of the ward, her garments were nowhere to be seen.

Frustration set in. Changing behavior in graduate school was easy. A pellet of food to a rat at just the right time caused him to dance across the cage like Chuck Berry. Of course, Ms. P. was a human being, but I knew that reinforcement worked with people, too. Why then couldn't I change Ms. P.'s behavior?

Undaunted, my team brainstormed the next obvious step. If we couldn't get Ms. P. to dress on the ward, we would dress her ourselves and then reward her. It was one of the oldest behavioral principles: prompt behavior and reinforce the heck out of it.

"Attention, Code P on Ward 1. Repeat, Code P on Ward 1."

My first call rang through the corridors of the hospital, a cleverly disguised message meaning, "Help! Bring Ms. P.'s clothes!" My final report to the staff was a mixed review. The good news was that dressing Ms. P. and then rewarding

her worked...temporarily. The bad news was that soon thereafter she sabotaged our plan by forcing us into the mass production of clothing. She flushed them, burned them, and nailed them to the office doors of all the team members—including mine. I knew the end of our intervention was near when Ms. P. (masquerading as the Doughboy) barged into a staff meeting screaming, "Yah ha," as she twirled her underwear about her head in cowboy rodeo fashion. Only my quick reflexes saved the chief psychiatrist from a very embarrassing encounter with Ms. P.'s lingerie.

I was despondent. Had I, the Ace Behavior Modifier, met my match? I paced up and down the ward, which by now had become Ms. P.'s personal nudist camp. I was ready to throw in the towel, when much to my surprise, Ms. P. approached me. "Doctor," she said in Doughboy voice, "Why don't you and your

team just leave me alone?" And with that, she punched me (with gusto) in the stomach.

As I lay on the floor, Ms. P.'s words rang in my ears, "Just leave me

alone. Just leave me alone." Then it came to me. That was it! If you don't like a behavior, ignore it. Eventually, without reinforcement, it will extinguish.

We tried that plan of action, and it worked. Ms. P. streaked the ward a few more times, but now, with all staff members going about their usual business, her behavior weakened and then died. Thanks to Ms. P., my reputation remained intact. Was Ms. P. a smarter behavioral manager than I? Maybe so, maybe not, but she taught me a valuable lesson. If you really want to know what will strengthen or weaken a behavior, what will reinforce or punish, just ask.

Your patient (your customer, your client, your employee) will always let you know. ■



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