



Autism & Severe Behaviors

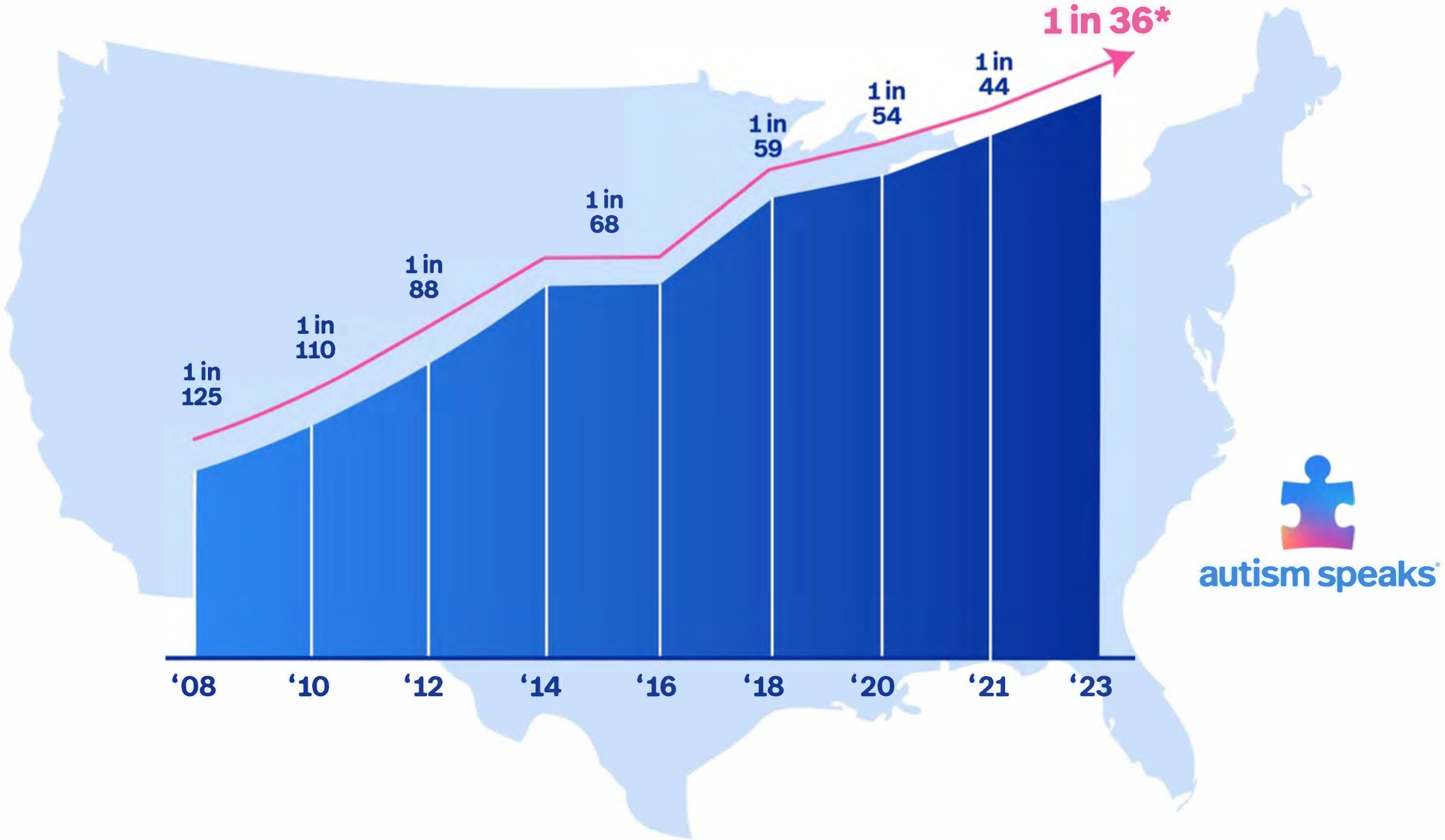
ASSESSMENT & TREATMENT

ASHLEY M. FUHRMAN, PH.D., BCBA-D



TRUMPET BEHAVIORAL HEALTH

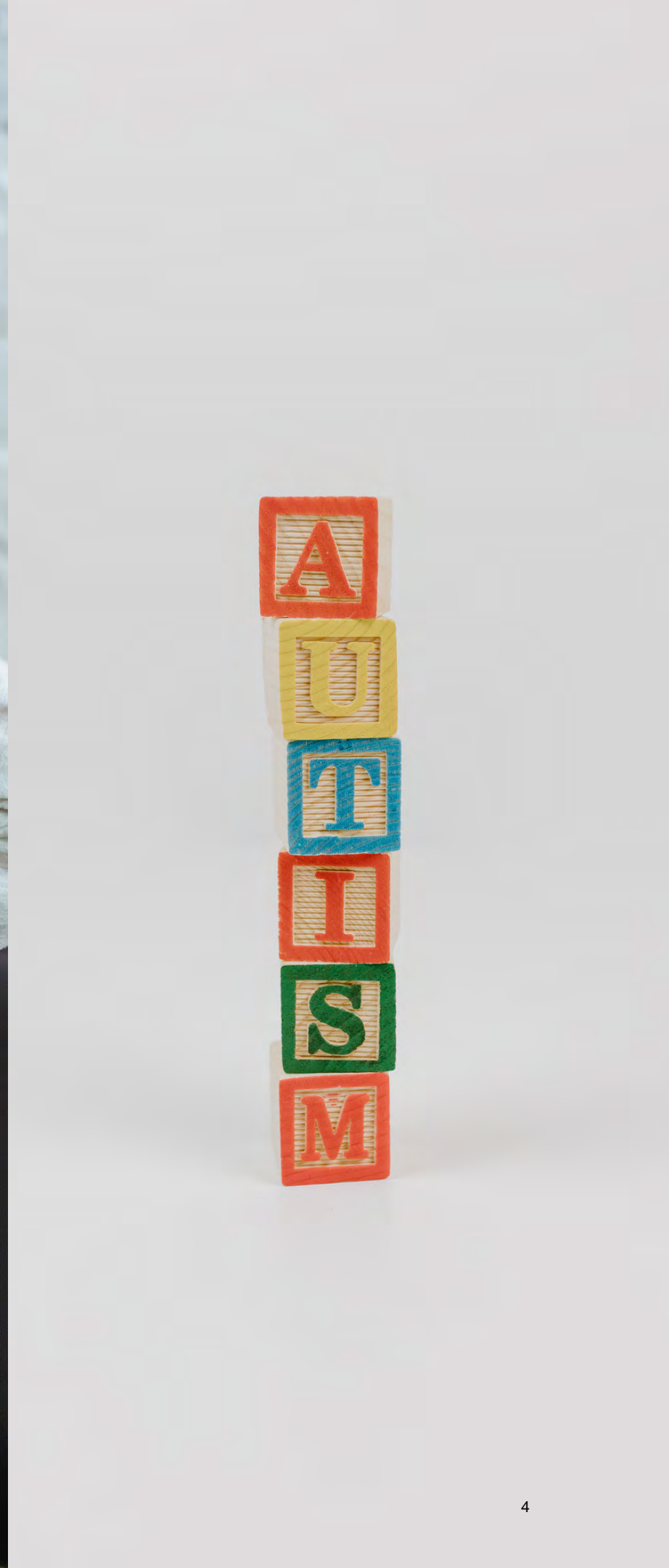
Estimated Autism Prevalence 2023



The Centers for Disease Control and Prevention autism prevalence estimates are for 8-year-old children in the Autism and Developmental Disabilities Monitoring Network in 2020.

EMBRACE DIFFERENCES







What is Profound Autism?

The term profound autism includes autistic people who cannot be left alone, requiring 24-hour access to an adult caregiver throughout their lives.

People with profound autism also experience one or both of the following:

- minimal or no language;
- substantial intellectual disability.

Learn more at www.profoundautism.org



Profound Autism
ALLIANCE

What is Profound Autism?

The term profound autism includes autistic people who cannot be left alone, requiring 24-hour access to an adult caregiver throughout their lives.

People with profound autism also experience one or both of the following:

- minimal or no language;
- substantial intellectual disability.

Learn more at www.profoundautism.org

How Many People Have Profound Autism?

According to a prevalence study published by the Centers for Disease Control in 2023, 26.7% of people with autism have profound autism

**1 in 4 people with autism has
profound autism**



Profound Autism
ALLIANCE

Learn more at www.profoundautism.org



What is Profound Autism?

The term profound autism includes autistic people who cannot be left alone, requiring 24-hour access to an adult caregiver throughout their lives.

People with profound autism also experience one or both of the following:

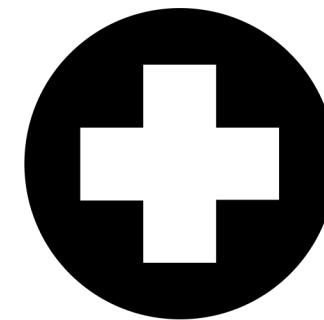
- minimal or no language;
- substantial intellectual disability.

Learn more at www.profoundautism.org



SEVERE BEHAVIOR

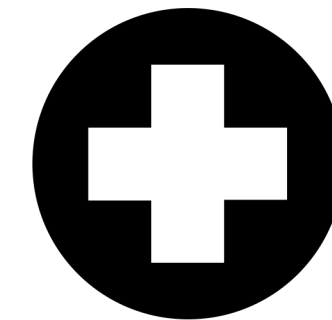
Places self or others in
environment at *imminently*
risk of harm



SEVERE BEHAVIOR

- Self-injurious behavior
- Aggression
- Property destruction
- Pica
- Elopement

Places self or others in environment at *imminently* risk of harm





SEVERE BEHAVIOR

- Self-injurious behavior
- Aggression
- Property destruction
- Pica
- Elopement



CARE FOR THE *Entire* SPECTRUM

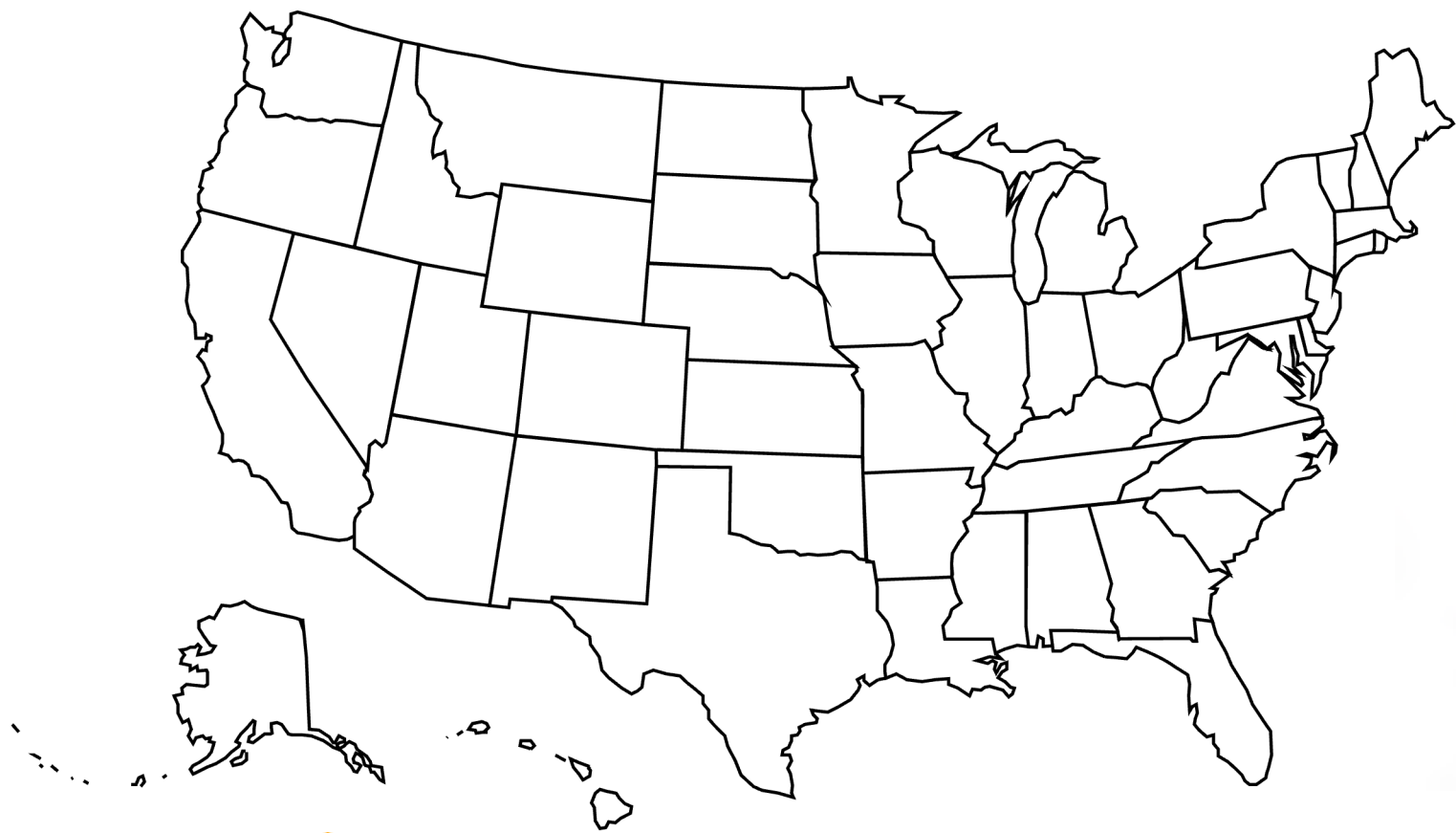
Increasing service availability for children with no or mild severe behavior

Very limited options and long waiting lists for individuals who engage in severe behavior

The Service Gap for Individuals with Severe Challenging Behaviors

February 12, 2019





Baby name:

- Mason
- William
- James
- Logan
- Oliver
- Sebastian
- Liam
- Aidan
- Gabriel
- Lucas
- Noah
- Ethan



HIGHER NEEDS *for* SEVERE BEHAVIOR

On average an individual with severe behavior:

The Service Gap for Individuals with Severe Challenging Behaviors

February 12, 2019



HIGHER NEEDS *for* SEVERE BEHAVIOR

On average an individual with severe behavior:

- Is a 16-year-old male
- Lives at home with their family
- Engages in aggression, non-compliance, self-injurious behavior and/or property destruction

The Service Gap for Individuals with Severe Challenging Behaviors

February 12, 2019



HIGHER NEEDS *for* SEVERE BEHAVIOR

On average an individual with severe behavior

- Exhibits these behaviors daily
- Is currently not improving
- Due to these behaviors, the family's participation in social and other family events is very limited or nonexistent

The Service Gap for Individuals with Severe Challenging Behaviors

February 12, 2019





Awareness

AND

Acceptance

Awareness of
AND
Acceptance of Advocacy



APPLIED BEHAVIOR ANALYSIS

A scientific discipline concerned with developing techniques based on the principles of learning and applying these to change behavior of social significance

- Skill acquisition
- Behavior reduction

APPLIED BEHAVIOR ANALYSIS

- Reinforcement
- Antecedent-based interventions
- Extinction
- Response interruption and redirection

APPLIED BEHAVIOR ANALYSIS

- Differential reinforcement
- Functional communication training
- Prompting
- Picture Exchange Communication System
- Self management

APPLIED BEHAVIOR ANALYSIS

- Assessment
 - Identify “function” or the reason why the behavior occurs
- Treatment
 - Teach replacement behaviors
 - Caregiver collaboration, generalization, maintenance

APPLIED BEHAVIOR ANALYSIS

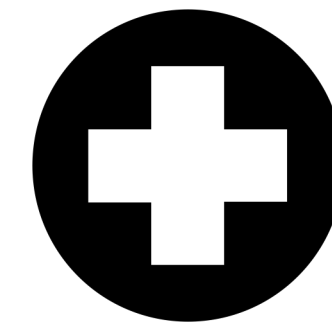
- Teach replacement behaviors
 - Communication and functional skills
 - Social skills
 - Self-regulation skills
- Teach in non-escalated and positive situations and regularly

APPLIED BEHAVIOR ANALYSIS

- Respond calmly to the severe behaviors
- Teach that safe behaviors are effective ways to communicate

CRISIS PLANNING

- Define behaviors, triggers/antecedents
- Strategies for staying safe
- Key contact information
- Nearby facilities if ER visit may be necessary



3-STEP

prompting

VOCAL



MODEL



PHYSICAL



3-STEP

prompting

VOCAL

instruct



MODEL



PHYSICAL



3-STEP

prompting

VOCAL

instruct



MODEL

show



PHYSICAL



3-STEP

prompting

VOCAL

instruct



MODEL

show



PHYSICAL

help



3-STEP

prompting

VOCAL

Provide an instruction



MODEL

Model compliance with the instruction



PHYSICAL

Use least to most physical guidance to follow-through with the instruction



3-STEP

prompting

VOCAL

Provide an instruction

5 sec

MODEL

Model compliance with the instruction

5 sec

PHYSICAL

Use least to most physical guidance to follow-through with the instruction



high-quality praise



3-STEP

prompting

VOCAL

Provide an instruction

5 sec

MODEL

Model compliance with the instruction

5 sec

PHYSICAL

Use least to most physical guidance to follow-through with the instruction



high-quality praise

praise



3-STEP

prompting

VOCAL

Provide an instruction

5 sec

MODEL

Model compliance with the instruction

5 sec

PHYSICAL

Use least to most physical guidance to follow-through with the instruction



- high-quality praise*
- praise*
- no praise*





CONSIDERATIONS

- Medical
- Clinical
- Environmental
- Safety



- 2:1 staffing ratio
- 5 days a week, 3 to 7 hrs/day
- High case supervision
- Specialized environment
- High caregiver collaboration

TRAINING

considerations



TRAINING

considerations

- Data collection
 - Precise data collection
 - Topography specific
 - Reinforcement present or absent
 - Interresponse times, latency, time of day, ABC, etc.



TRAINING

considerations



TRAINING

considerations

- Graphing
 - Creating
 - Updating
 - Analyzing



CLINICAL

considerations

		Out of Session (Tally)						Transitions (Tally)			Bathroom (Tally)				Affect (MTS)**	Caregiver Collab.
Time Start	Time End	Agg	SIB	Prop Dest.	Elope	Flop	Mand	w/Sev Beh.	w/out Sev Beh.	Sev Beh.	Urine Toilet Void	BM Toilet Void*	Incont (U or BM)	Sev. Beh.	Yes (+) Neut (/) Neg (-)	Check if training occurred
8:30	9:00															
9:00	9:30															
9:30	10:00															
10:00	10:30															
10:30	11:00															
11:00	11:30															
11:30	12:00															
12:00	12:30															
12:30	1:00															

CLINICAL

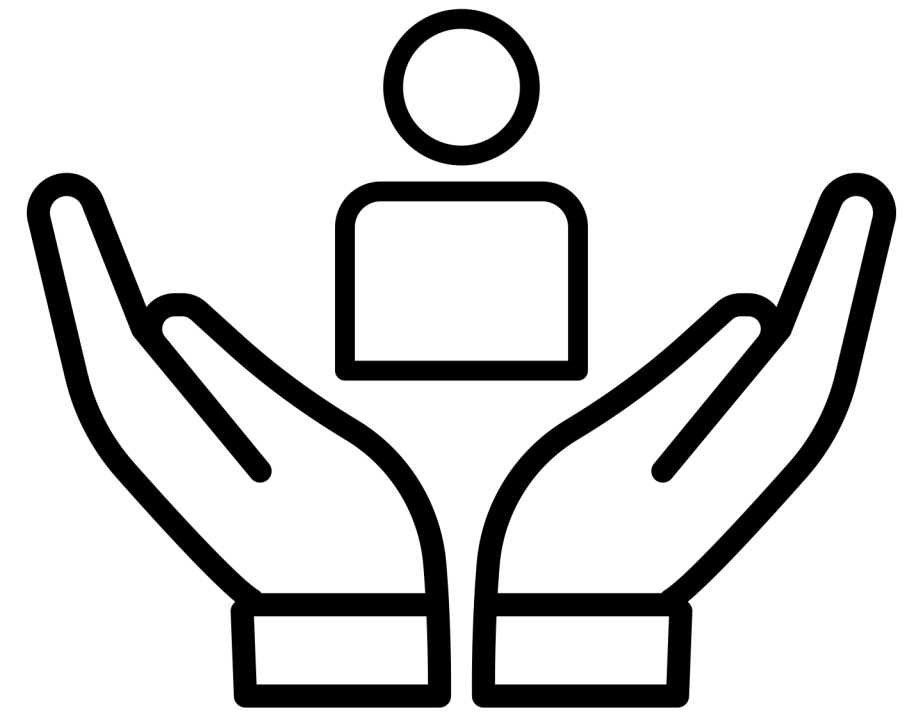
considerations

M E N T O R S H I P

CLINICAL

considerations

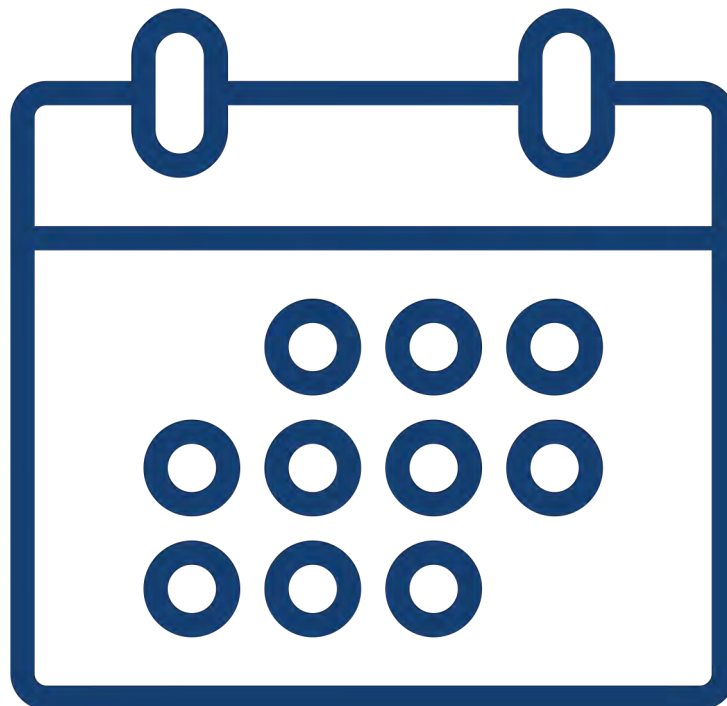
- Increased clinical supervision
 - Hourly data updates and RBT supervision



CLINICAL

considerations

- Increased clinical supervision
 - Hourly data updates and RBT supervision
 - Daily local supervision by Clinical Director



CLINICAL

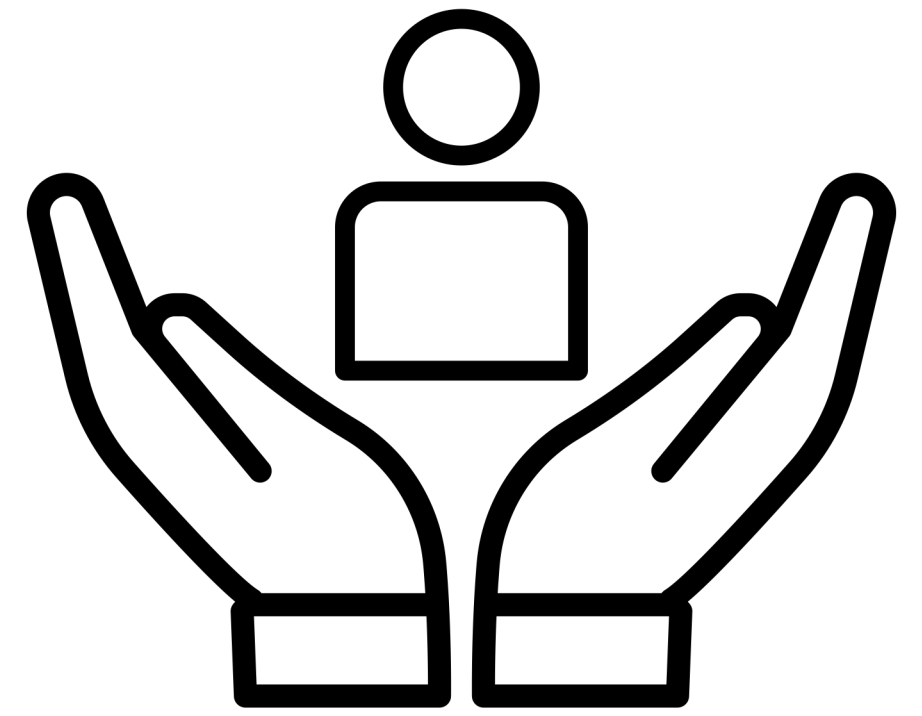
considerations



- Increased clinical supervision
 - Hourly data updates and RBT supervision
 - Daily local supervision by Clinical Director
 - Weekly group supervision with senior director

CLINICAL

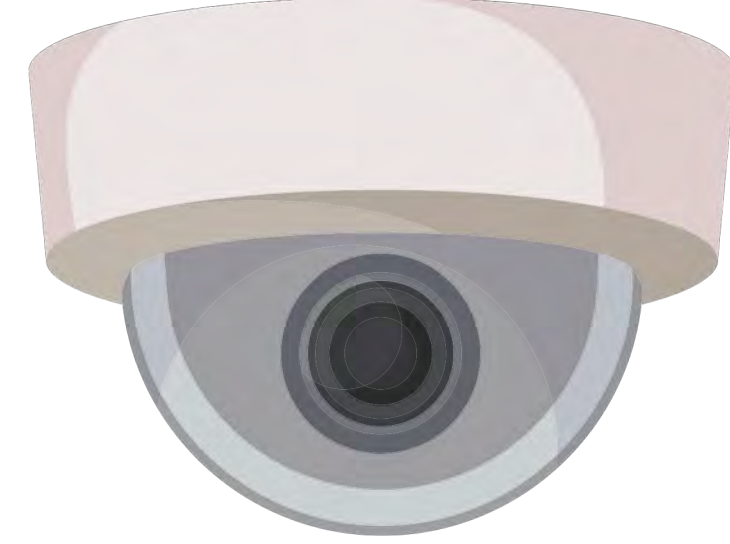
considerations



- Increased clinical supervision
 - Hourly data updates and RBT supervision
 - Daily local supervision by Clinical Director
 - Weekly group supervision with senior director
 - Monthly all clinical group supervision

CLINICAL

considerations



- Clinical Supervision
 - Video cameras
 - Chat spaces
 - On call support





CO-MORBID MEDICAL

conditions

HEALTH CHECK

GENERAL INFORMATION

FULL NAME

STREET ADDRESS

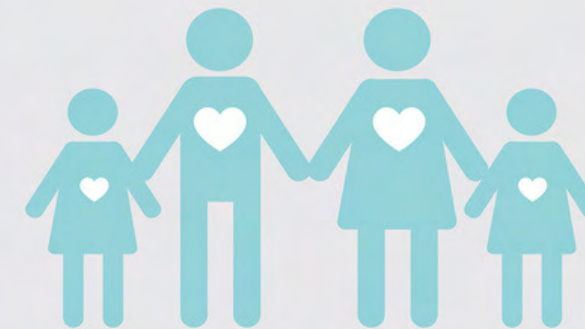
CITY BIRTH DAY

EMAIL ADDRESS

HOME PHONE

CALL PHONE

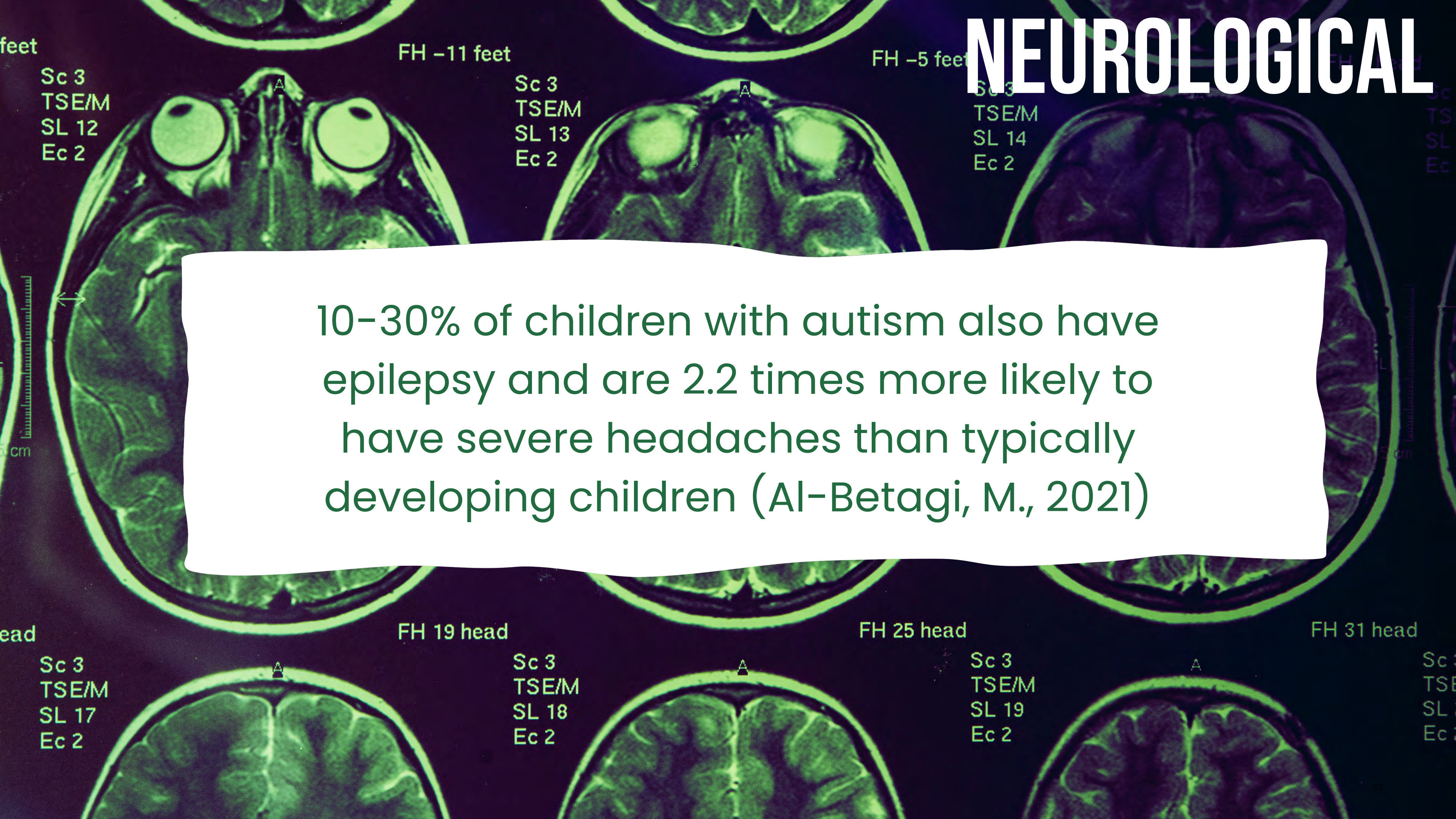
OTHER PHONE



CLICK

NEUROLOGICAL

10–30% of children with autism also have epilepsy and are 2.2 times more likely to have severe headaches than typically developing children (Al-Betagi, M., 2021)



Children with autism had a higher incidence of dental caries (50%) as compared to their healthy siblings (22.2%; Suhaib et al., 2017)





Potential issues:
Bruxism (grinding)
Cavities/decay
Pain from wisdom teeth

Increased risk because of:
restricted diets
lack of independent brushing/flossing
noncompliance with dental routines

SLEEP

Prevalence: 80% of children with autism have sleep related disorders or concerns
(Al-Beltagi, M., 2021)



SLEEP



Sometimes can be caused by
medications and/or
or underlying medical conditions



GASTROINTESTINAL



46–84% of children with autism also have GI concerns
(Al-Beltagi, M., 2021).

In addition, children who have GI disorders are more likely
to also have immune deficiency (Al-Beltagi, M., 2021).

GASTROINTESTINAL



Possible conditions:

Acid reflux


Constipation

Chron's disease

Ulcerative colitis

GASTROINTESTINAL

EAR, NOSE, AND THROAT

A young child with curly hair is shown from the chest up, wearing a black long-sleeved shirt. They have their hands pressed against their ears and a pained or distressed expression on their face, with their eyes closed and a grimace. The background is a plain, light-colored wall.

Children with autism are 2.1 more likely to have frequent ear infections than typically developing children (Al-Beltagi, M., 2021).

DERMATOLOGY

Children with autism are 1.6 times more likely to have eczema or skin allergies than typically-developing children (Al-Beltagi, M., 2021).



ALLERGIST



Children with autism are 1.8 times more likely to have asthma or a food allergy (Al-Beltagi, M., 2021).

MEDICATIONS



MEDICATIONS

Medications can result in
untoward side effects
allergic reactions
opposite of intended effects
dental issues



Addressing Medical Issues in Behavior Analytic Treatment

[Linda Copeland](#)¹ and [Gregory Buch](#)^{✉2}

Functional analysis of episodic self-injury correlated with recurrent otitis media

[M F O'Reilly](#)¹

Affiliations + expand

PMID: 9103992 PMCID: [PMC1284030](https://pubmed.ncbi.nlm.nih.gov/PMC1284030/) DOI: [10.1901/jaba.1997.30-165](https://doi.org/10.1901/jaba.1997.30-165)

A Call to Action: The Need for Advocacy in Healthcare Access in Autism

By: Tracy Kettering, PhD, BCBA-D | Bancroft | | Rider University | Ashley Fuhrman, PhD, BCBA-D | Trumpet Behavioral Health | Christopher Perrin, PhD, BCBA-D | Bancroft | | Rider University

📅 January 2nd, 2023

◆ access to healthcare, accommodations, advocacy, co-occurring conditions, collaboration, diagnosis, healthcare, healthcare professionals, training, Winter 2023 Issue

Self-injurious behavior within the menstrual cycle of women with mental retardation

[D V Taylor](#)¹, [D Rush](#), [W P Hetrick](#), [C A Sandman](#)

Affiliations + expand

PMID: 8517946

Addressing Medical Issues in Behavior Analytic Treatment

[Linda Copeland](#)¹ and [Gregory Buch](#)²

Functional analysis of episodic self-injury correlated with recurrent otitis media

[M F O'Reilly](#)¹

Affiliations + expand

PMID: [9103922](https://pubmed.ncbi.nlm.nih.gov/9103922/) PMCID: [PMC1784030](https://pubmed.ncbi.nlm.nih.gov/PMC1784030/) DOI: [10.1901/jaba.1997.30-165](https://doi.org/10.1901/jaba.1997.30-165)

A Call to Action: The Need for Advocacy in Healthcare Access in Autism

By: Tracy Kettering, PhD, BCBA-D | Bancroft || | Rider University | Ashley Fuhman, PhD, BCBA-D | Trumpet Behavioral Health | Christopher Perrin, PhD, BCBA-D | Bancroft || | Rider University

📅 January 2nd, 2023

🔍 access to healthcare, accommodations, advocacy, co-occurring conditions, collaboration, diagnosis, healthcare, healthcare professionals, training, Winter 2023 Issue

Self-injurious behavior within the menstrual cycle of women with mental retardation

[D V Taylor](#)¹, [D Rush](#), [W P Hetrick](#), [C A Sandman](#)

Affiliations + expand

PMID: [8517946](https://pubmed.ncbi.nlm.nih.gov/8517946/)

we need more!



Ethics Code for Behavior Analysts

The Ethics Code for Behavior Analysts (Code) replaces the Professional and Ethical Compliance Code for Behavior Analysts (2014). All BCBA and BCaBA applicants and certificants are required to adhere to the Code effective January 1, 2022.

2.12 Considering Medical Needs

Behavior analysts ensure, to the best of their ability, that medical needs are assessed and addressed if there is any reasonable likelihood that a referred behavior is influenced by medical or biological variables. They document referrals made to a medical professional and follow up with the client after making the referral.



Ethics Code for Behavior Analysts

The Ethics Code for Behavior Analysts (Code) replaces the Professional and Ethical Compliance Code for Behavior Analysts (2014). All BCBA and BCaBA applicants and certificants are required to adhere to the Code effective January 1, 2022.

2.12 Considering Medical Needs

Behavior analysts ensure, to the best of their ability, that medical needs are assessed and addressed if there is any reasonable likelihood that a referred behavior is influenced by medical or biological variables. They document referrals made to a medical professional and follow up with the client after making the referral.

Handwritten in blue ink:
Assess!

Health Condition Co-Morbidities in Children with Autism and Their Association with Challenging Behavior

ORIGINAL PAPER | [Published: 15 February 2024](#)

(2024) [Cite this article](#)

[Craig H. Kennedy](#) , [Tania B. Huedo-Medina](#), [Jennifer Twachtman-Bassett](#), [Louisa Kalsner](#), [Remei Areny-Joval](#) & [Inge-Marie Eigsti](#)

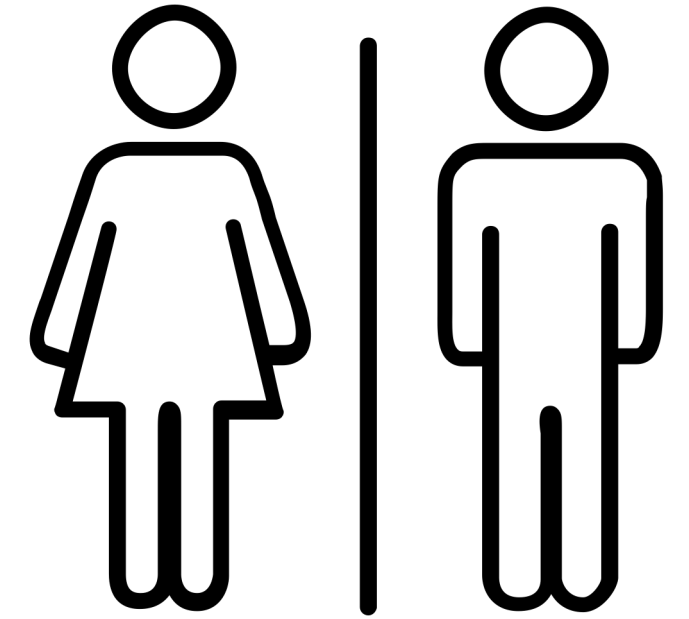
Results Analyses revealed three significant clusters of health conditions: (a) allergies/sinus infections and respiratory illness/not asthma; (b) gastroesophageal reflux disease (GERD), constipation, and epilepsy/seizures; and (c) headache/migraine and sleep dysregulation. Group comparisons and effect sizes of individual health conditions showed associations among (i) GERD and aggression and self-injury and (ii) sleep dysregulation and aggression and self-injury.

Conclusions Our findings suggest that children with autism may have higher rates of common health conditions than found in the general pediatric population, that health conditions may cluster among individuals, and that some health conditions (GERD and disordered sleep) were associated with increased levels of self-injury and aggression. These data call for more attention to the mechanisms contributing to health conditions, and their cooccurrence with challenging behaviors, in children with autism.

MEDICAL

considerations

- Collect data daily
 - Bathroom (urination, stool)
 - Bristol stool chart
 - Affect
 - Emesis/rumination
 - Medication changes



MEDICAL

considerations

- Provide data sheets for caregivers & graph
 - Bathroom (urination, stool)
 - Bristol stool chart
 - Sleep log
 - Medication log

The Center for Pediatric Sleep Disorders



Sleep Log

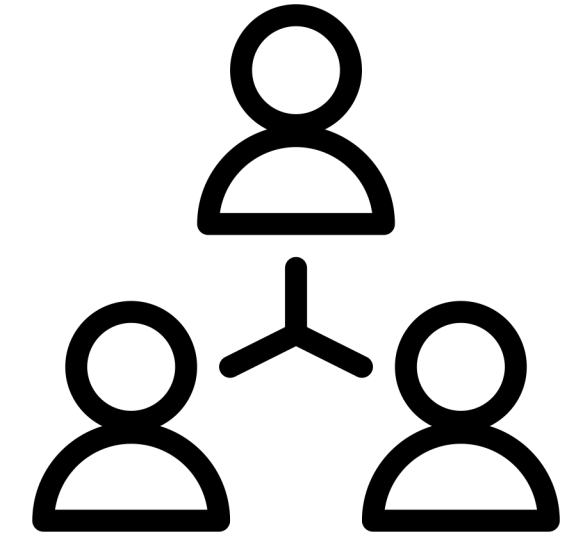
Name: _____

DOB: _____

Time	6:00 PM	6:30 PM	7:00 PM	7:30 PM	8:00 PM	8:30 PM	9:00 PM	9:30 PM	10:00 PM	10:30 PM	11:00 PM	11:30 PM	12:00 PM	12:30 PM	1:00 PM	1:30 PM	2:00 PM	2:30 PM	3:00 PM	3:30 PM	4:00 PM	4:30 PM	5:00 PM	Total Hours Slept Per Night	Total Hours Slept Per 24 Hour Period	
Day 1																										
Day 2																										
Day 3																										
Day 4																										
Day 5																										
Day 6																										
Day 7																										

MEDICAL

considerations



- Closely coordinate care with medical providers
 - Share data
 - Attend appointments
 - Help advocate
 - Medical referral template letter

Individualize

Services based on individual

- Preferences
- Existing strengths
- Client and caregiver goals for services
- Age and natural environment

Individualize

Individualizing means taking the time to ask about and learn those preferences and circumstances regularly throughout a service relationship



Individualize

Goals should be designed such that they are individualized, attainable, and have a low likelihood of evoking emotional or challenging behavior

Slowly increase those goals over time and take steps back as needed



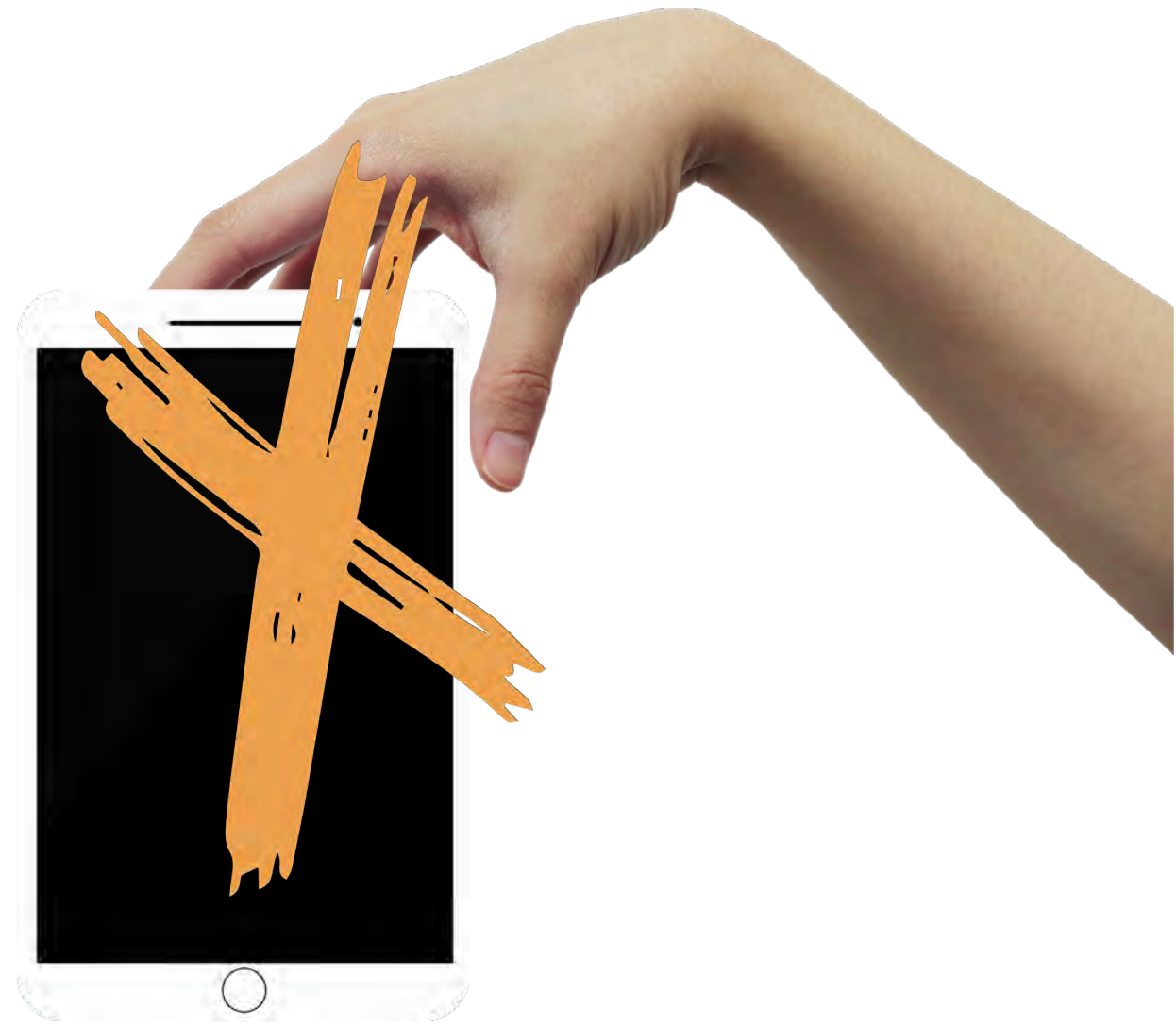
new to services

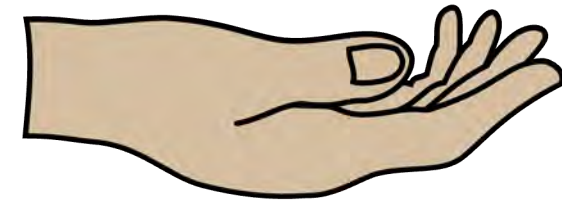
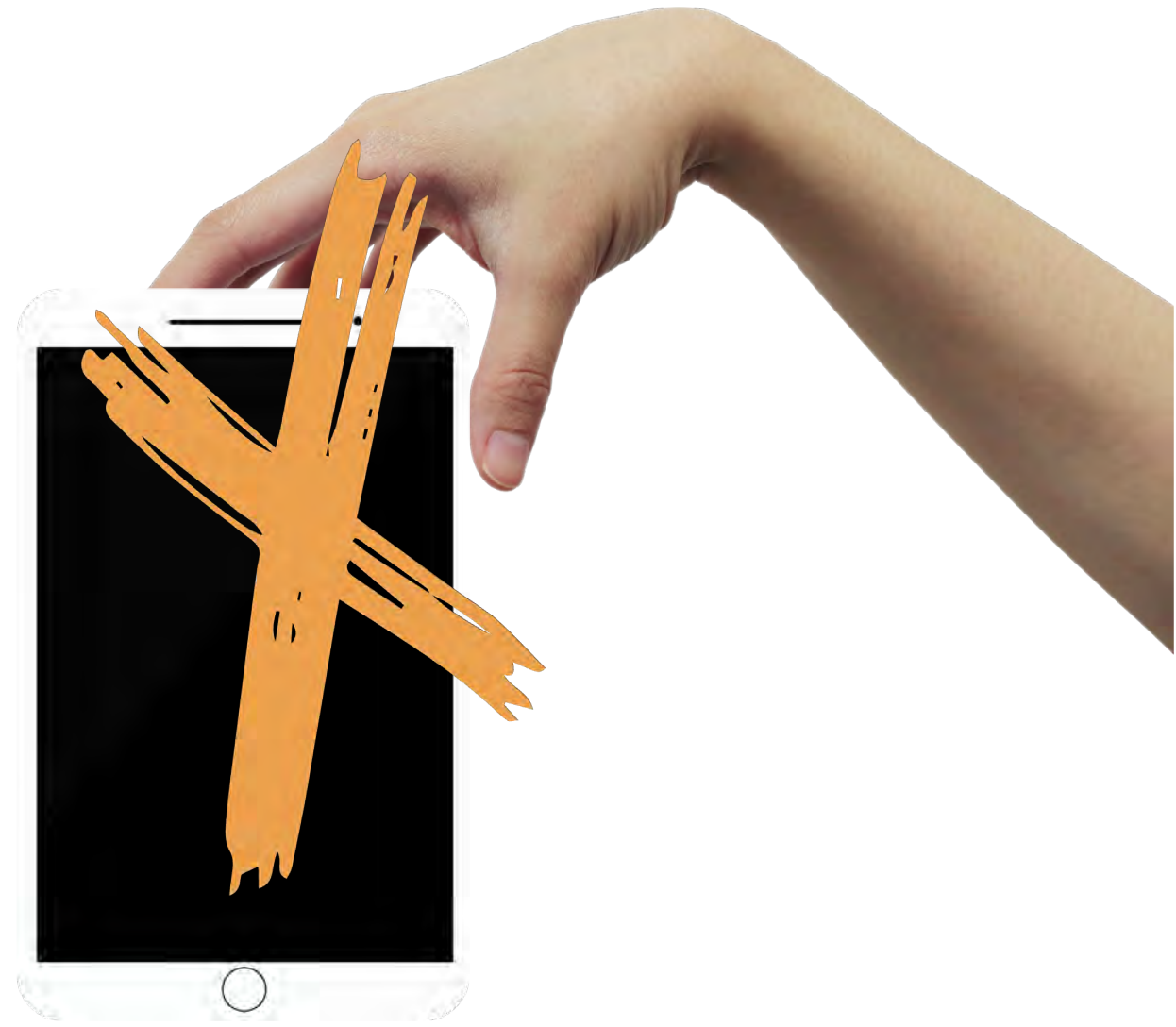
ipad = highest preferred

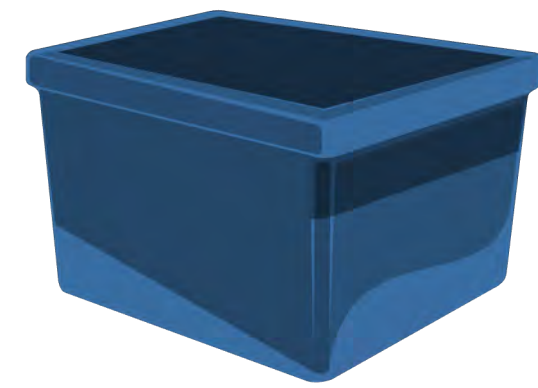
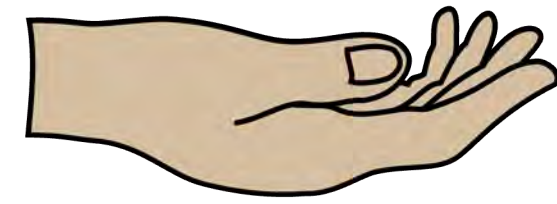
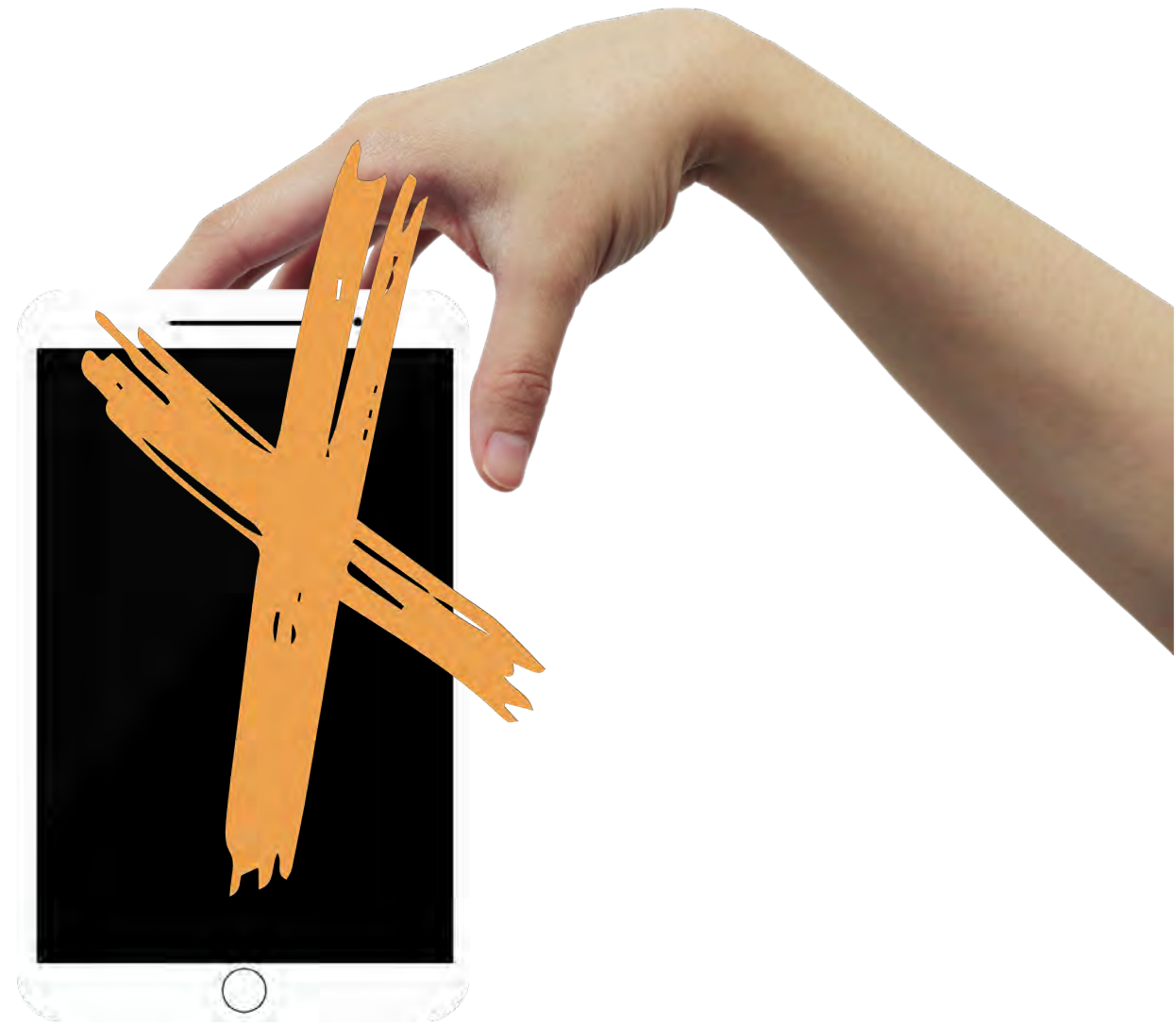
currently has continuous access

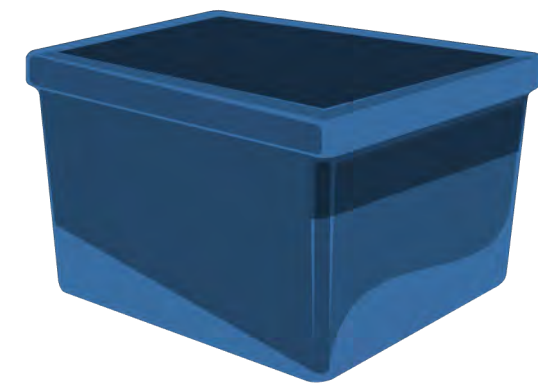
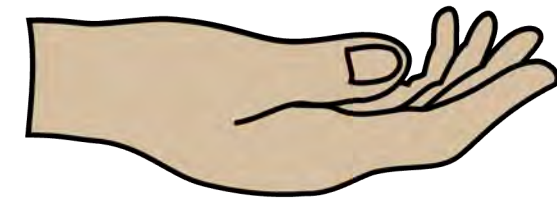
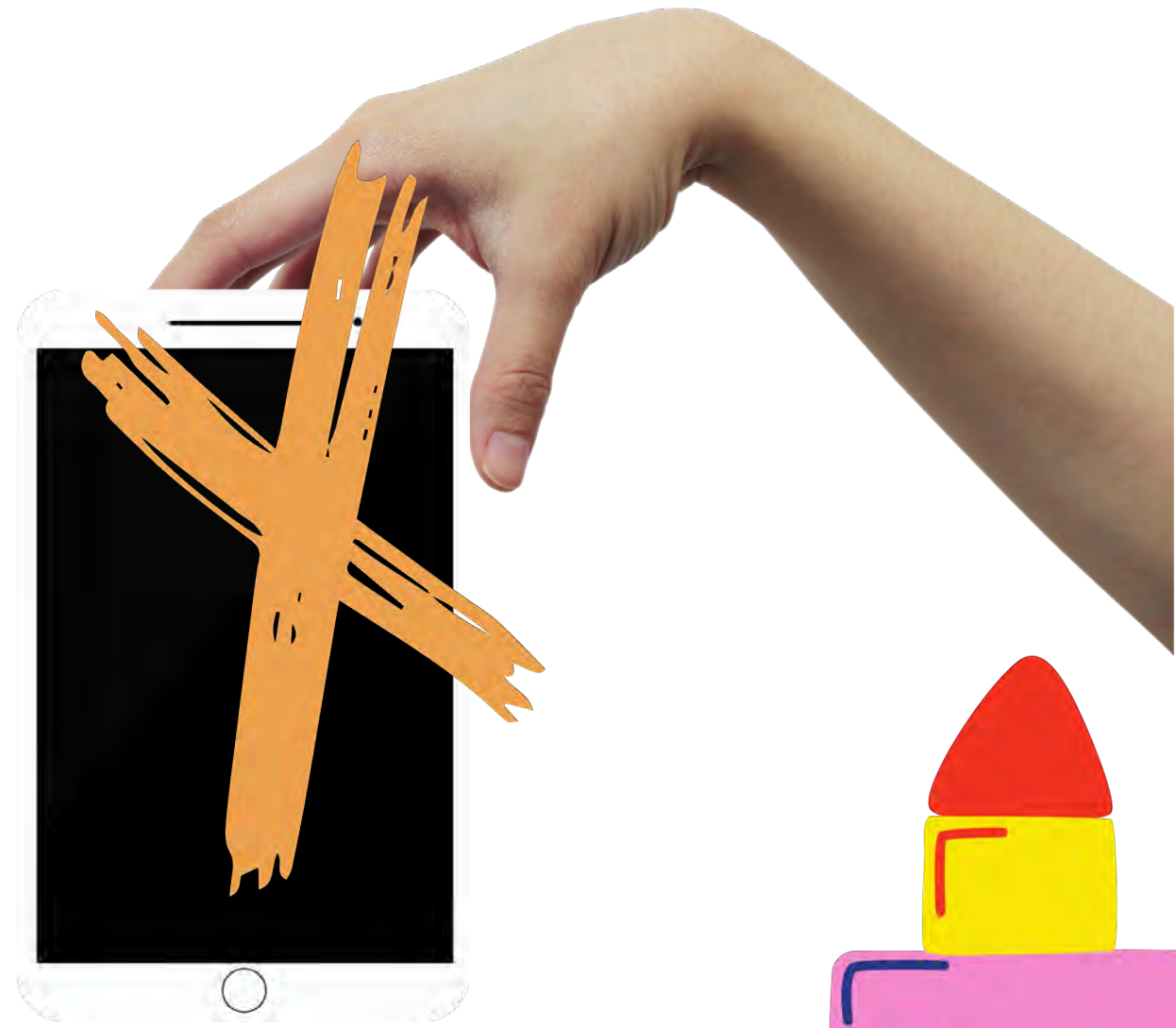
goal is to reduce usage for learning



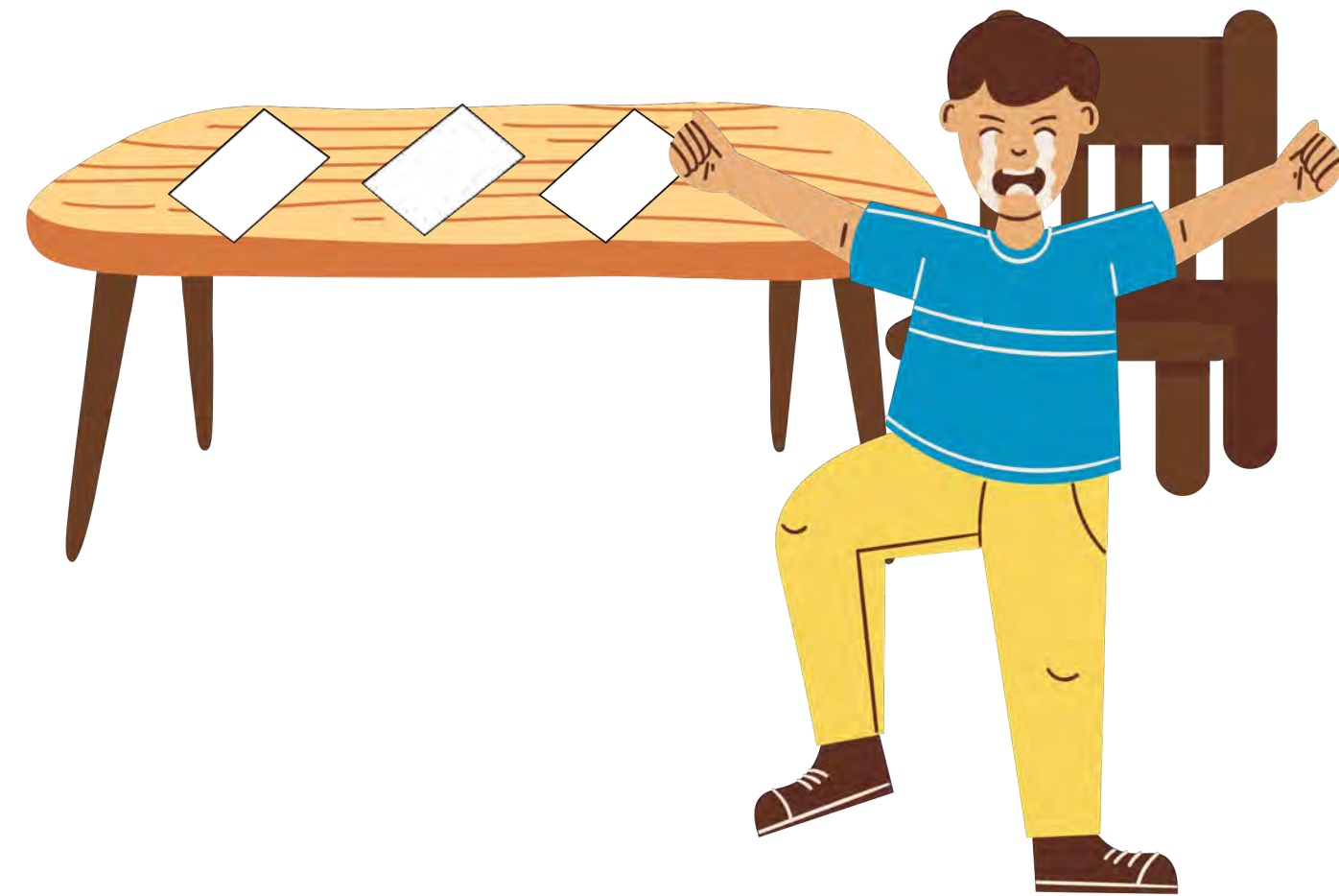


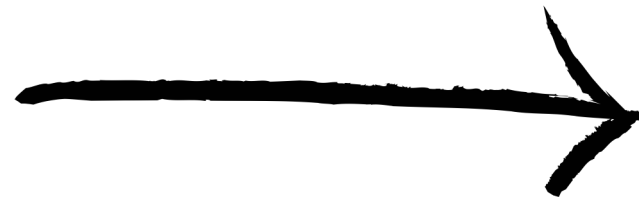


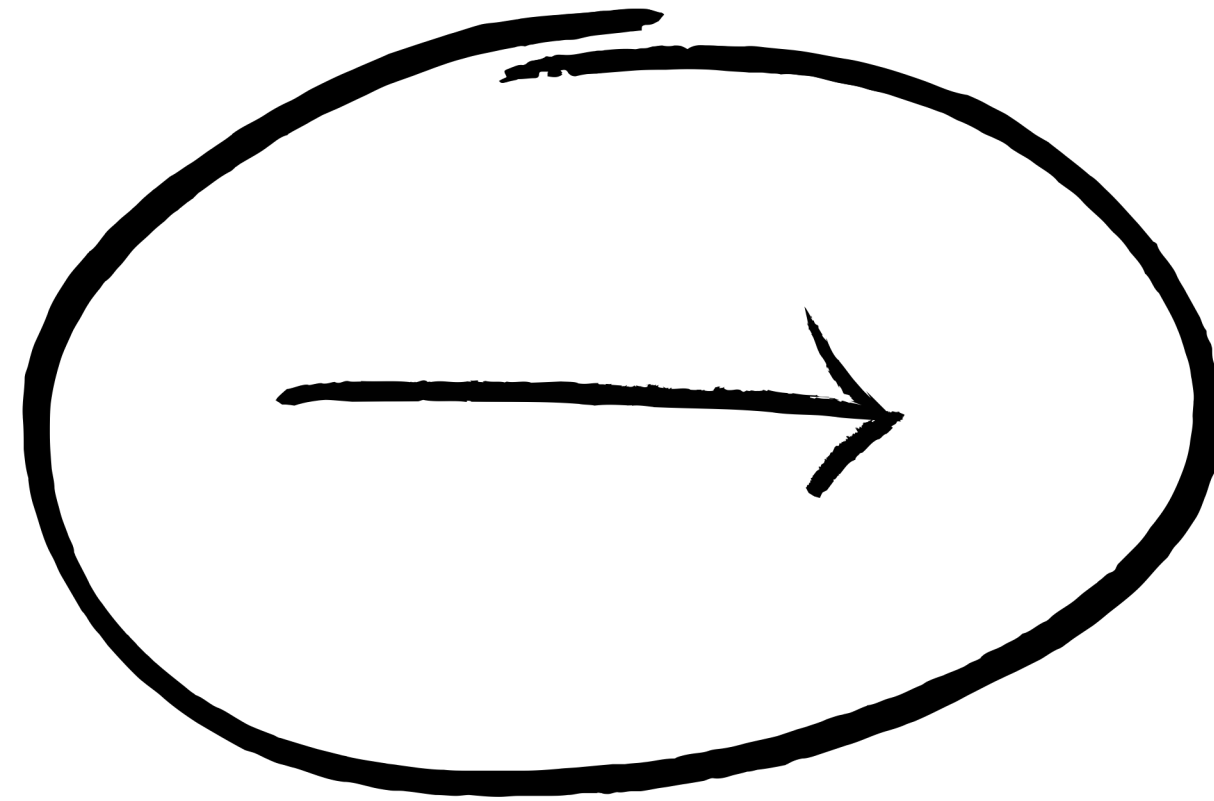






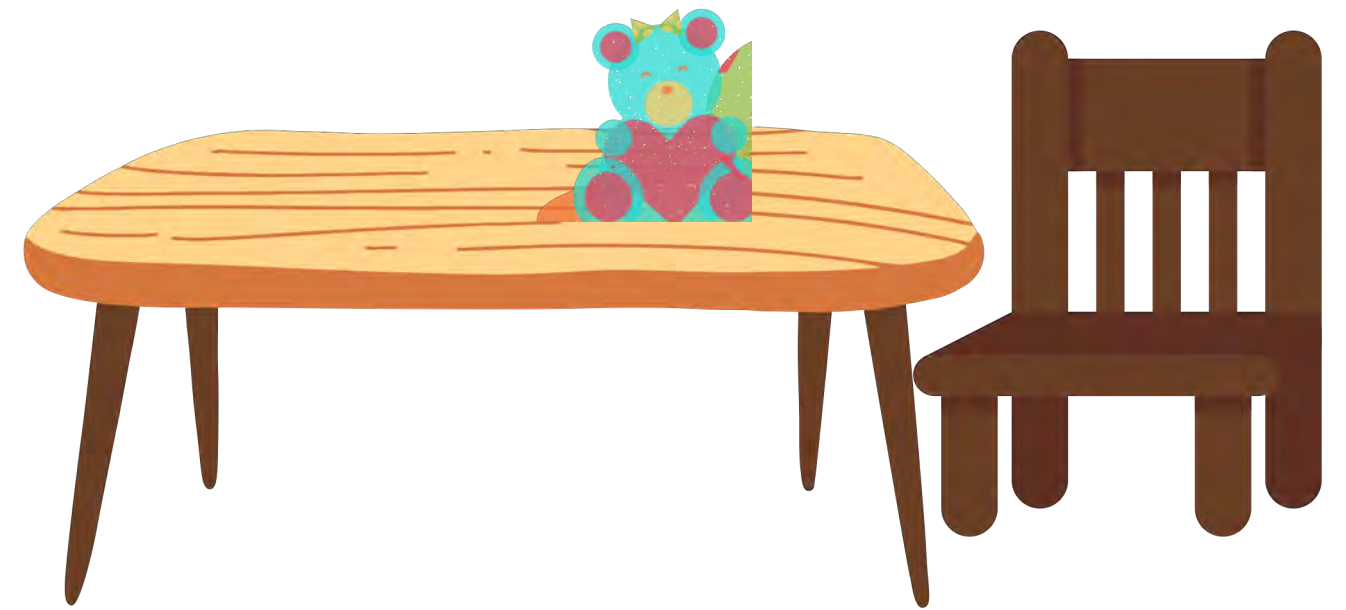


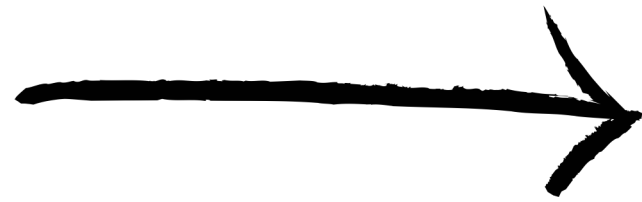
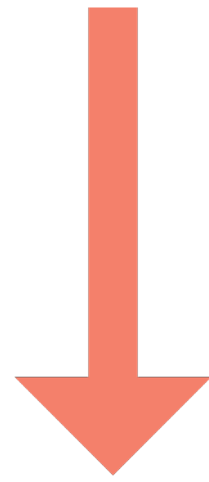


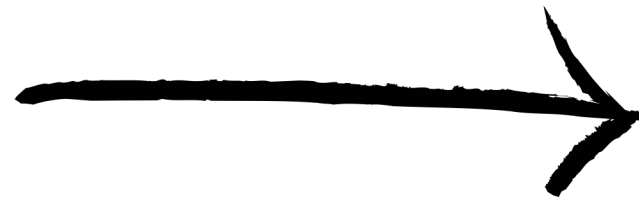
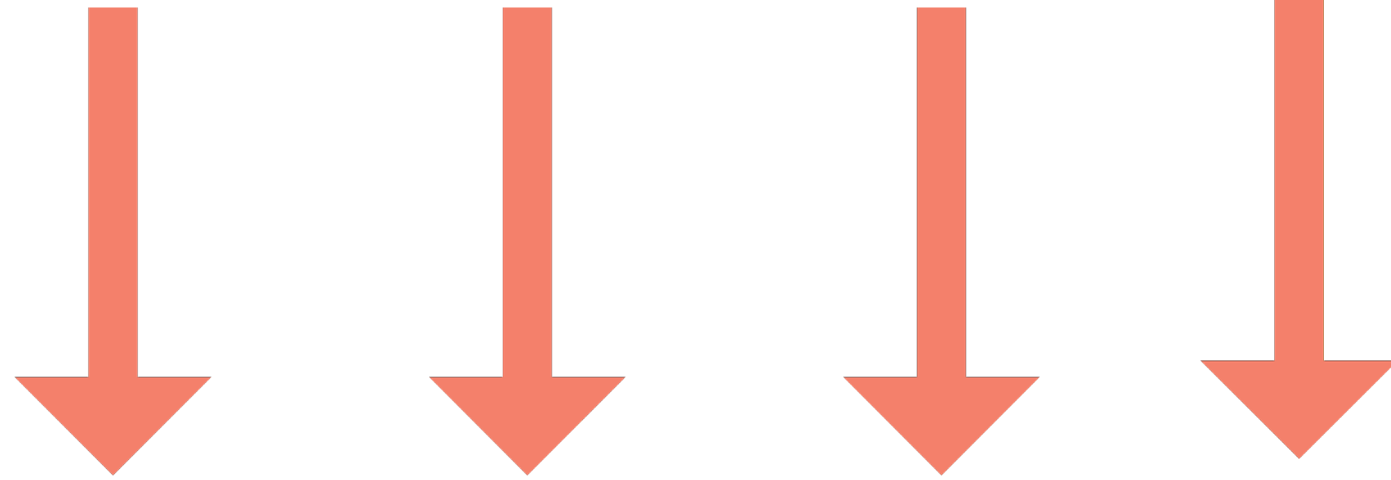


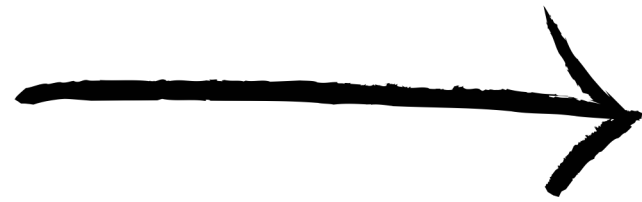
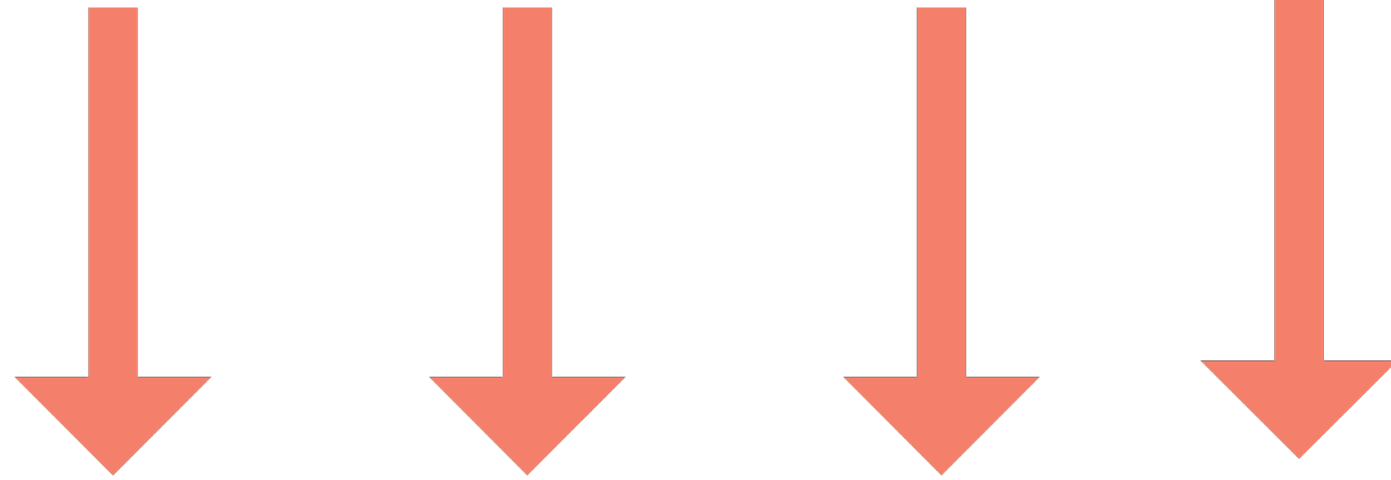
Individualize

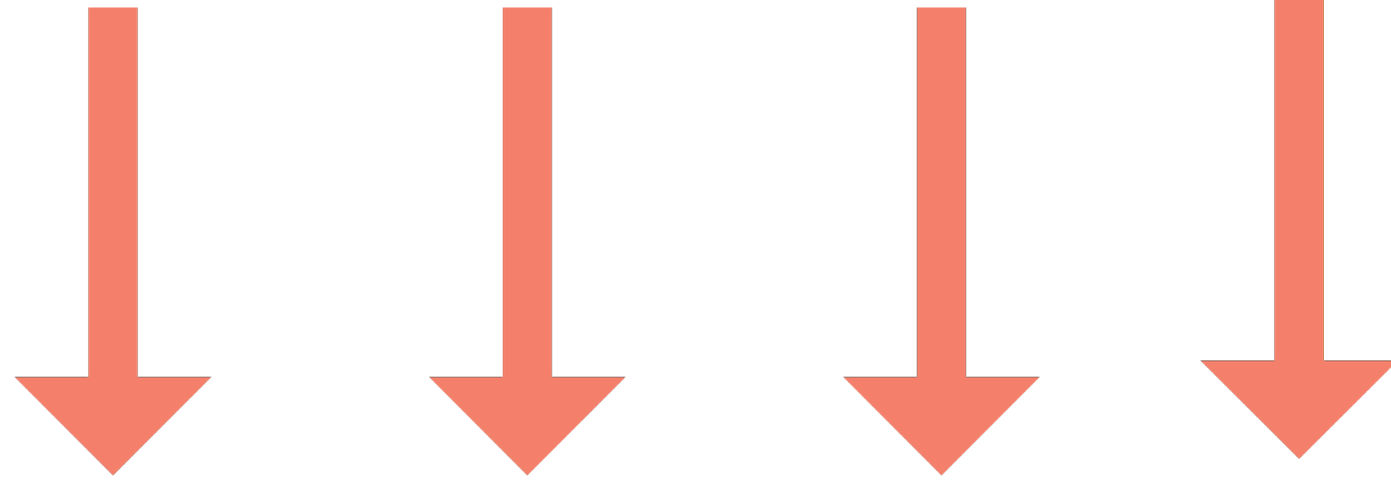


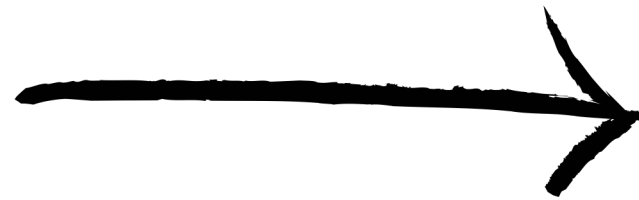
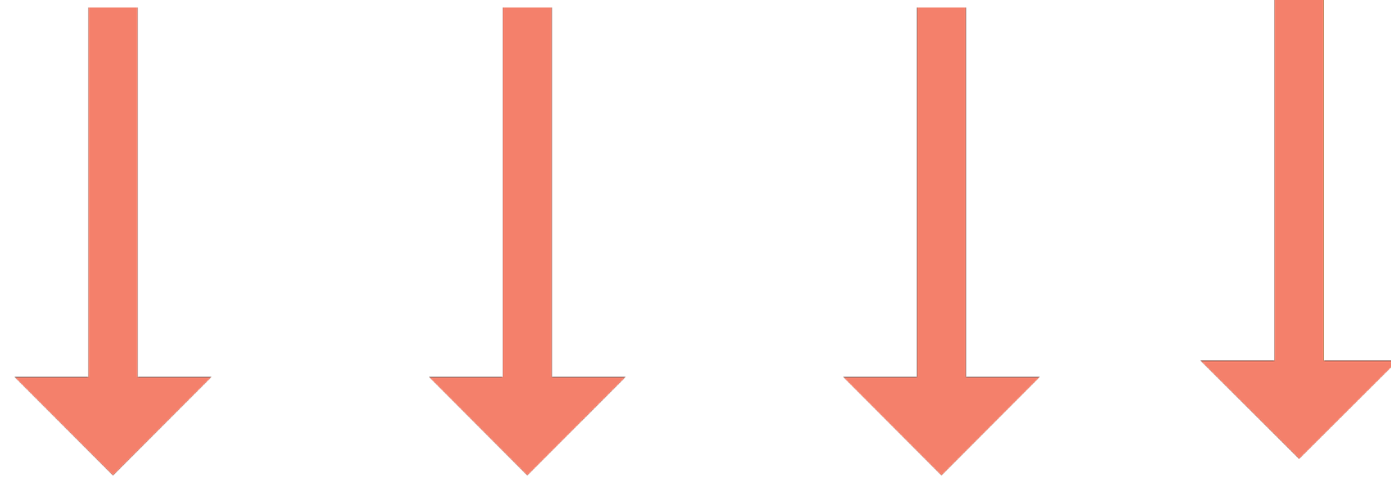


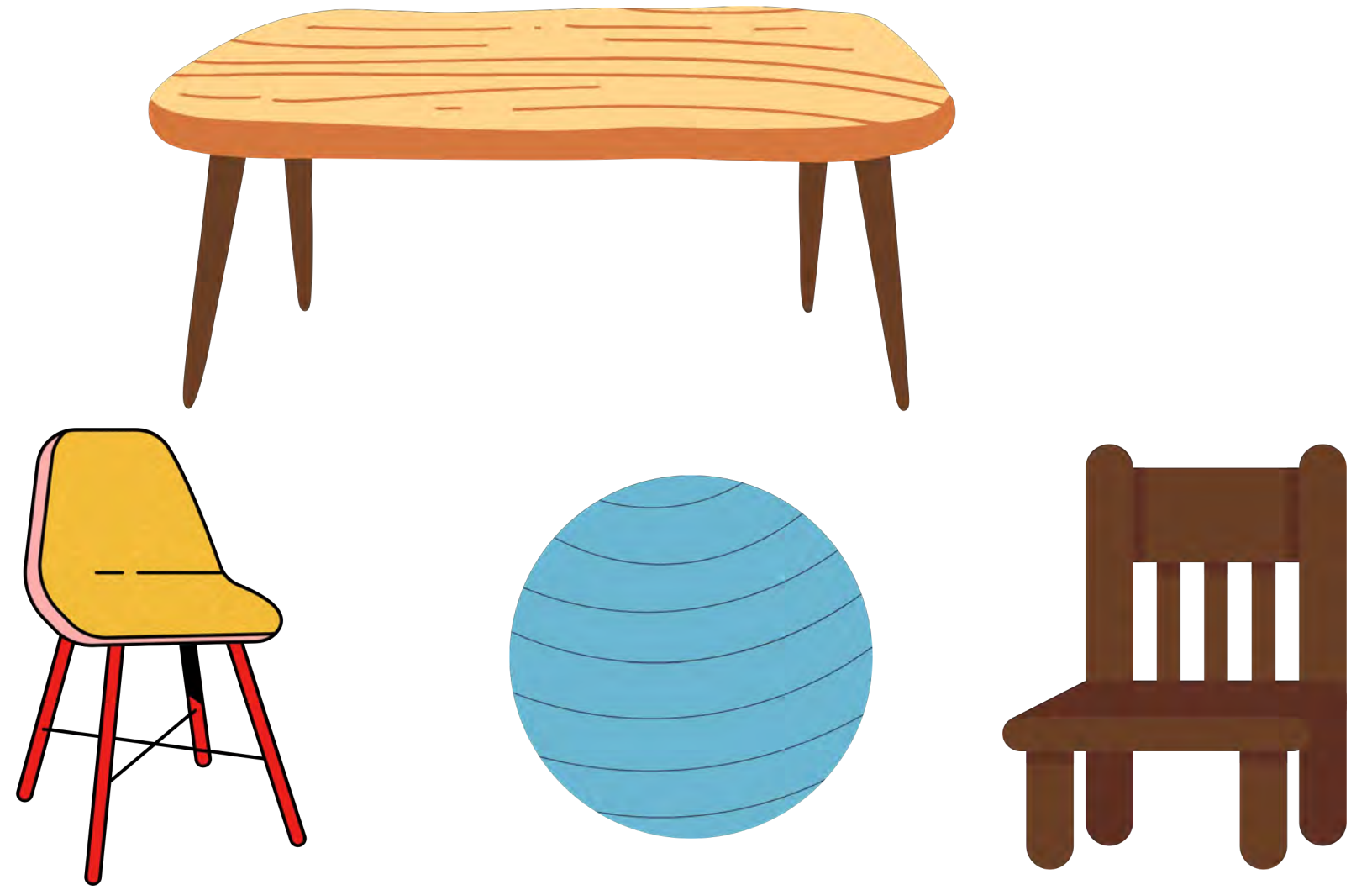
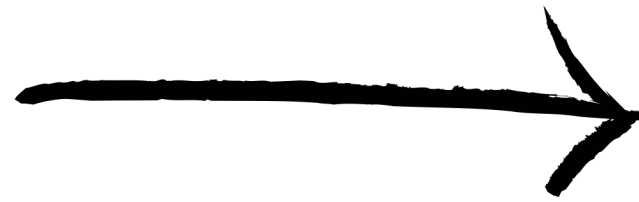


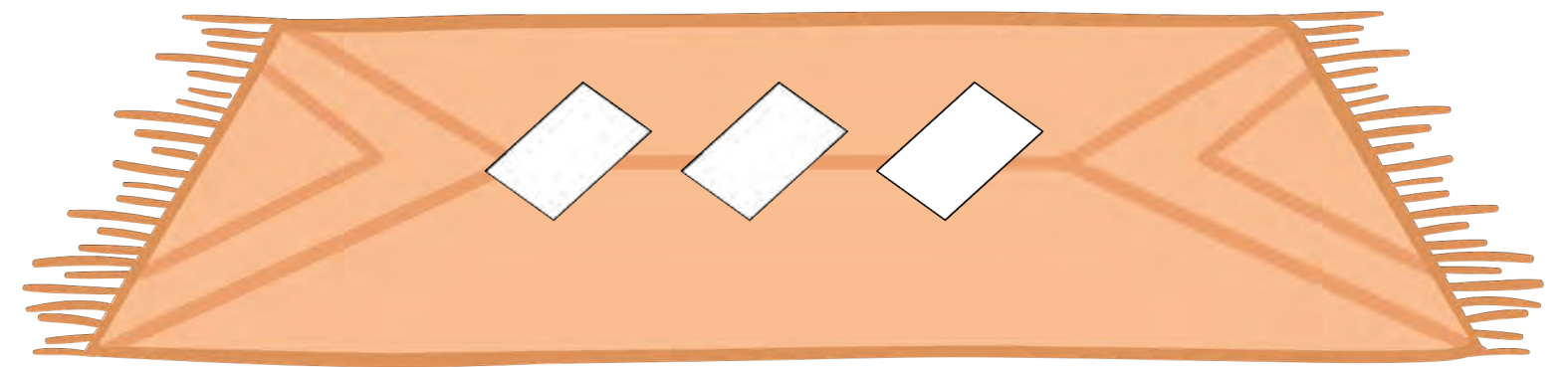
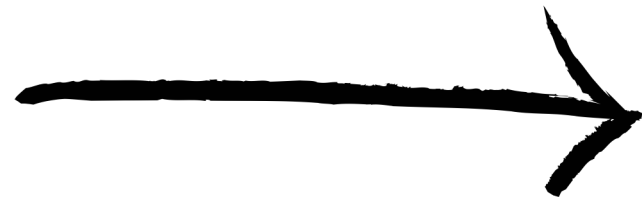












GOALS

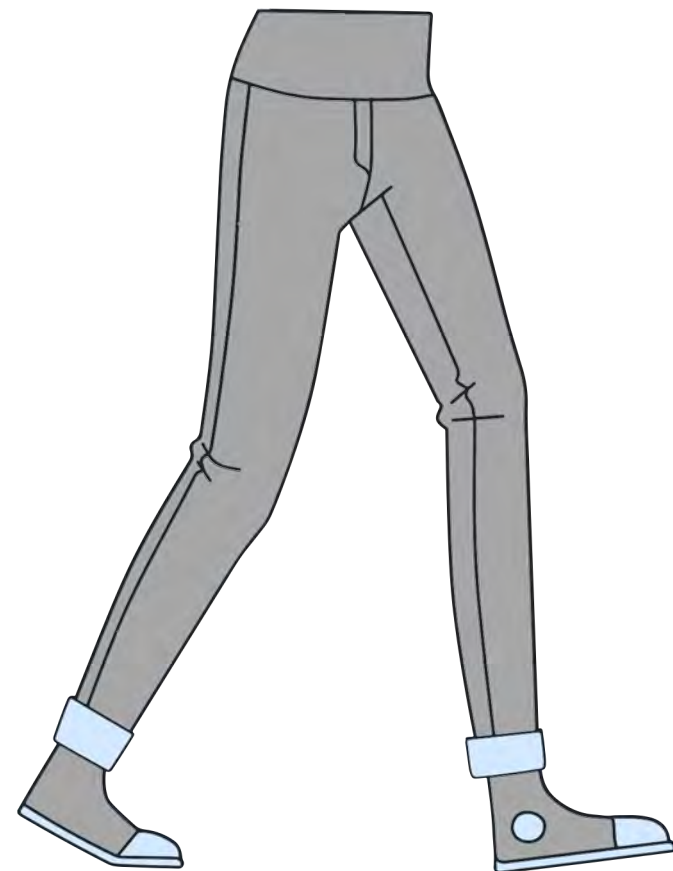
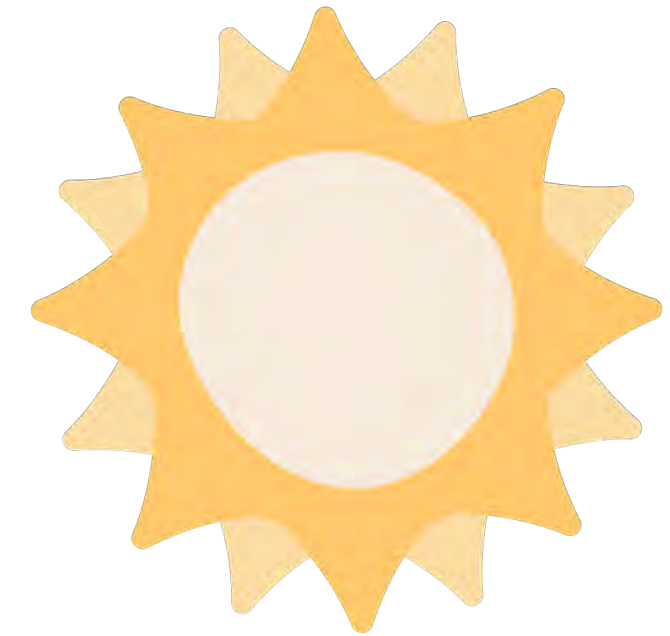
Take one goal (e.g., tolerates instructions at the table) and break it down into many steps

- tolerates transitioning 2 feet away from play area
- tolerates transitioning 4 feet away from play area
- tolerates transitioning 6 feet away from play area
- tolerates sitting at the work area
- tolerates sitting at the work area and one instruction
- ...

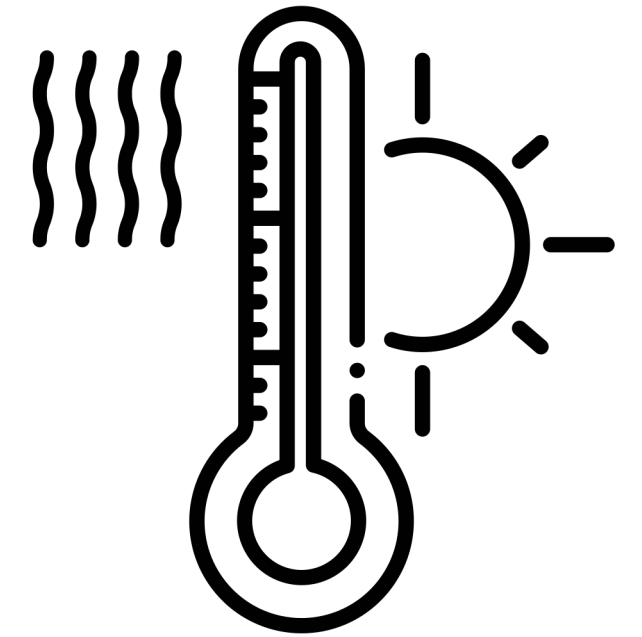
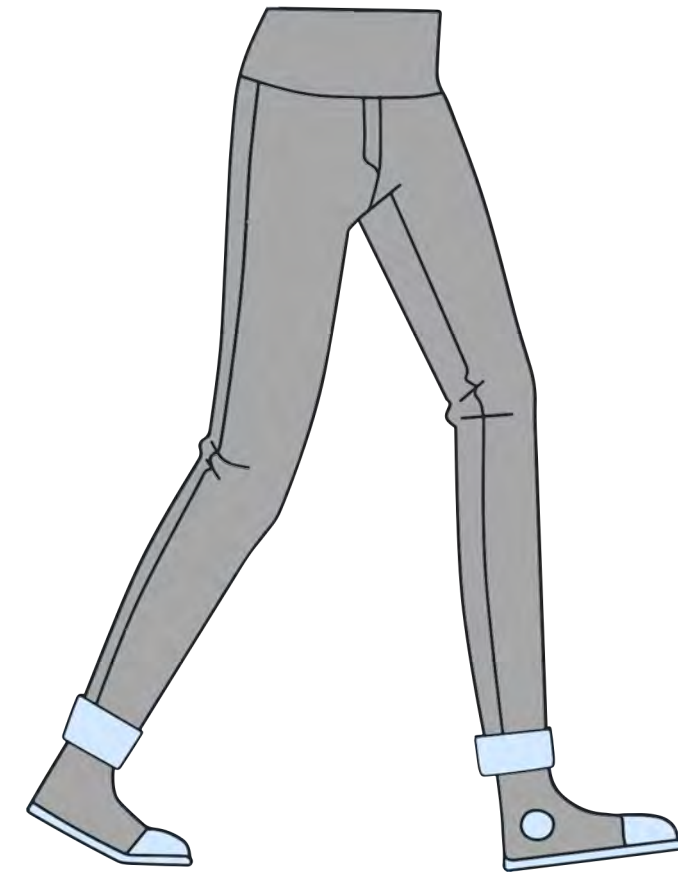
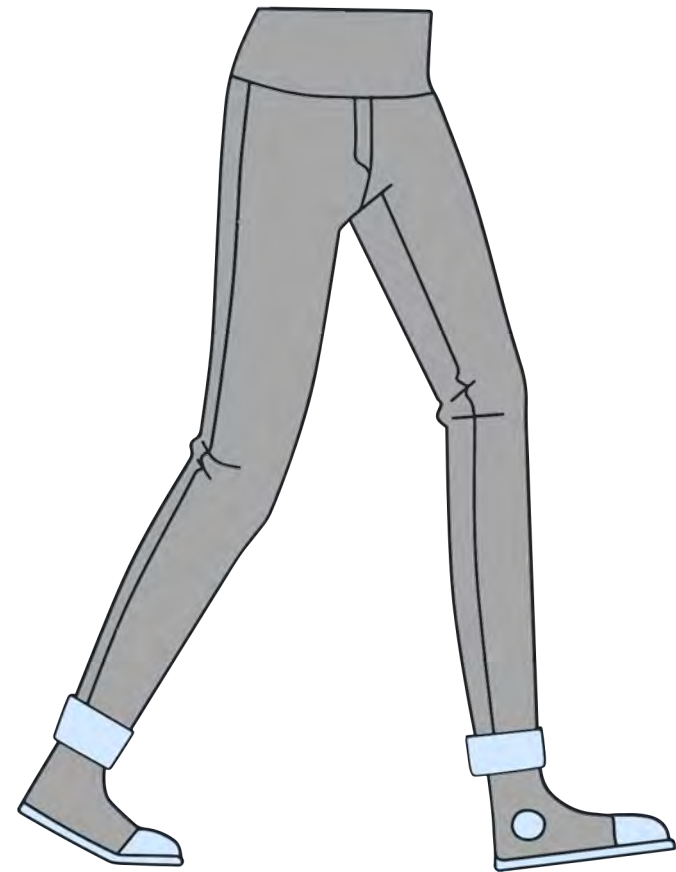
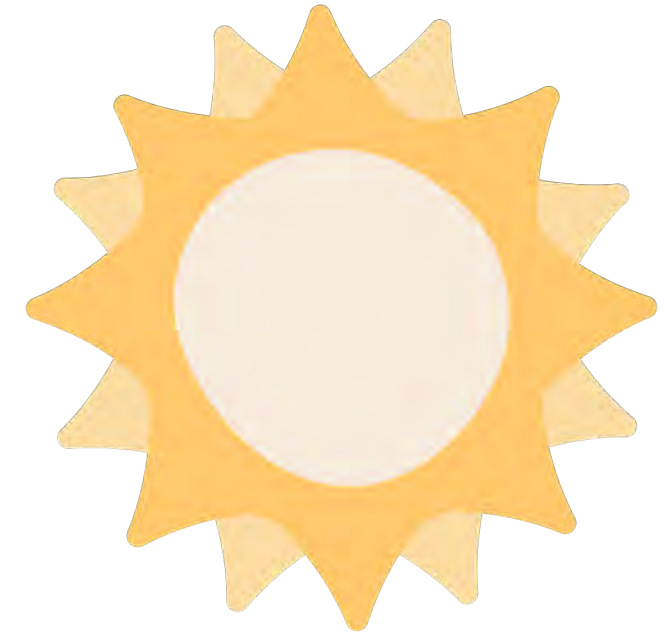
STEREOTYPY DANGEROUS
VS NON-DANGEROUS
BEHAVIORS



TOLERATING CHANGES IN CLOTHING
ACROSS SEASONS



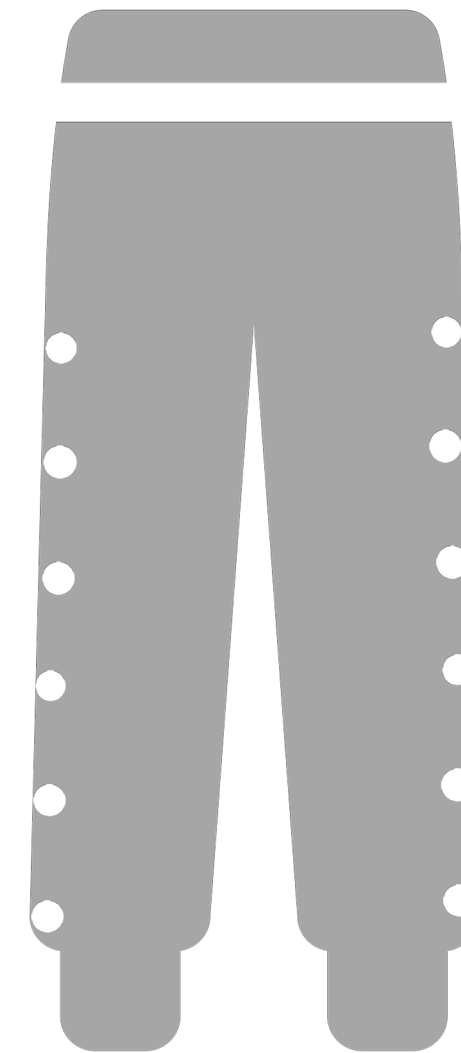
TOLERATING CHANGES IN CLOTHING
ACROSS SEASONS

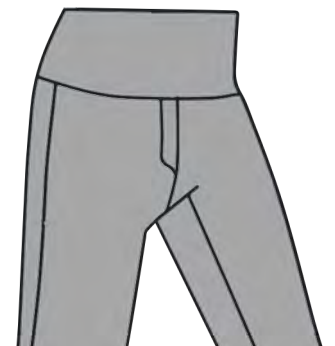
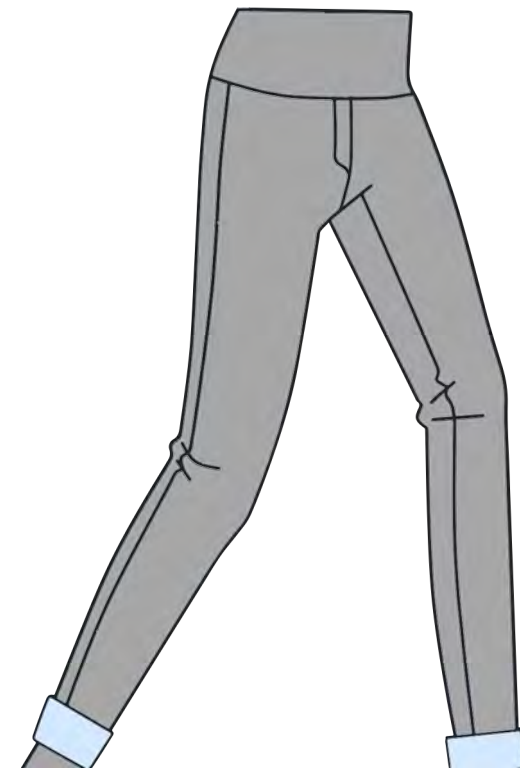


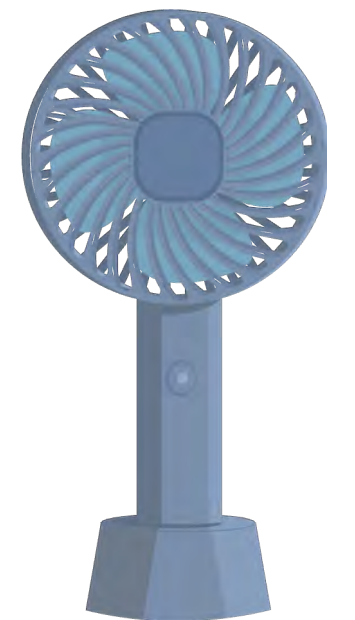
ENCOURAGE CAREGIVERS TO
PROVIDE CHOICES WHENEVER
POSSIBLE











CAREGIVER

- Data collection
 - A-B-C
 - Countee or TallyFlex apps
 - Not always straightforward
 - Individualize and use BST to teach



CAREGIVER

- Data collection
 - A-B-C
 - Countee or TallyFlex apps
 - Not always straightforward
 - Individualize and use BST to teach
 - Sleep
 - Sleep logs

Complete in Morning							
Start Date: _/_/____ Day of the Week:	Day 1	Day 2	Day 3	Day 4	Day 5	Day 6	Day 7
My child got into bed last night at:	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM	PM/AM
Last night my child fell asleep:							
Easily:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
After some time:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
With difficulty:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
My child woke up during the night:							
# of times							
# of minutes							
My child got out of bed today at:	AM/PM	AM/PM	AM/PM	AM/PM	AM/PM	AM/PM	AM/PM
Last night my child slept a total of:	Hours	Hours	Hours	Hours	Hours	Hours	Hours
My child's sleep was disturbed by: <small>noise, lights, temperature, pets, allergies, nightmares, stress, discomfort, pain, etc.</small>							
When my child woke up for the day, he/she felt:							
Rested:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Somewhat rested:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Tired:	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
Notes: Record any other factors that may affect your child's sleep							

CAREGIVER

- Reinforcement
 - Noncontingent reinforcement (NCR)
 - How to use NCR to decrease likelihood of severe behavior during lower preferred activities

CAREGIVER

- Reinforcement
 - Noncontingent reinforcement (NCR)
 - How to use NCR to decrease likelihood of severe behavior during lower preferred activities
 - Differential reinforcement
 - Focus on positive and preferred interactions for safe behaviors
 - Avoid scolding of severe behavior

CAREGIVER

- Reinforcement
 - Noncontingent reinforcement (NCR)
 - How to use NCR to decrease likelihood of severe behavior during lower preferred activities
 - Differential reinforcement
 - Focus on positive and preferred interactions for safe behaviors
 - Avoid scolding of severe behavior
- Provide the caregiver with resources
 - Examples
 - Autism Speaks Challenging Behavior Toolkit
 - September 26th project checklists

SAFETY

considerations

A hand holding a magnifying glass over a green sticky note that says "HEALTH AND SAFETY". The magnifying glass is gold-rimmed and has a dark red handle. The sticky note is bright green with black, hand-drawn text. The background is a white desk with various office supplies like pencils, a stethoscope, and a rubber stamp.

**HEALTH
AND
SAFETY**

SAFETY

considerations

- Safety through awareness training
 - Awareness and prevention skills
 - Environmental awareness
 - Proper positioning



SAFETY

considerations

- Safety through awareness training
 - Awareness and prevention skills
 - Environmental awareness
 - Proper positioning
 - Healthy contingencies
 - Protective padding and equipment





SAFETY

considerations

- Crisis management training
 - Blocking, release, and de-escalation
 - Restrictive interventions
 - Crisis plans



ENVIRONMENTAL *considerations*



ENVIRONMENTAL *considerations*



ENVIRONMENTAL *considerations*



ENVIRONMENTAL *considerations*



ENVIRONMENTAL *considerations*



ENVIRONMENTAL *considerations*





RELATED

resources





Profound
Autism
ALLIANCE



♥ DONATE

[About Us](#)

[Research](#)

[Advocacy](#)

[Families](#)

[Get Involved](#)

COMPASSION
CLARITY
PROGRESS





[Home](#)

[About](#)

[National Network](#)

[Webinars](#)

[Podcast](#)

[Position Statements](#)

[Blog](#)

[Resources](#)

[Donate](#)

Pursuing recognition, policy and solutions for the surging population of individuals, families and caregivers affected by severe forms of autism and related disorders.




[What is autism?](#)
[Help & information](#)
[Our work](#)
[← BACK](#)

Challenging Behaviors Roadmap for Families

Individuals with autism spectrum disorder (ASD) are at increased risk of engaging in challenging behaviors such as self-injury, aggression and destructive behavior. Unfortunately, appropriate and effective treatments and services are lagging.

In response to this, in December 2020 the Autism Speaks Thought Leadership Summit on Challenging Behaviors brought together leaders in autism care and research across North America to assess the landscape of services and supports for people with autism who experience challenging behaviors and act as a catalyst for innovations in programs and policies to improve systems of care for this population. A comprehensive and diverse multi-disciplinary and representative group of participants, including individuals with autism and family members were present to be sure all voices in the community contributed to this important discussion.

This roadmap is one product of that summit and is intended to help parents, extended family caregivers and others supervising or in charge of care for an autistic loved one. Its goal is to help them navigate challenges, help identify causes and provide guidance in managing behaviors.

In this you will find:

- An overview of challenging behaviors
- Getting help and treatment for those with autism experiencing challenging behaviors
- Home supports for those experiencing challenging behavior
- Prevention strategies
- Crisis management and hospitalization.

Workgroups from the summit also developed the following for clinical use by licensed professionals: [The Clinician Guide: Program Development and Best Practices for Treating Severe Behaviors in Autism](#). Feel free to share it with your autistic loved one's healthcare provider to


[What is autism?](#)
[Help & information](#)
[Our work](#)
[← BACK](#)

ATN/AIR-P Parent's Guide to Applied Behavior Analysis

ABA is a set of principles that form the basis for many behavioral treatments. ABA is based on the science of learning and behavior. ABA is considered an evidence-based "best" practice treatment by the US Surgeon General and by the American Psychological Association.

This tool kit is designed to provide you with a better understanding of ABA, how your child can benefit, and where/how you can seek ABA services.

Sections include:

- What is ABA?
- What types of therapies use ABA principles?
- How do ABA methods support people with autism?
- What does ABA look like?
- What are components of a strong ABA program?
- Who provides ABA services?
- Where can I find ABA services?

"These materials are the product of on-going activities of the Autism Speaks Autism Treatment Network, a funded program of Autism Speaks. It is supported by cooperative agreement UA3 MC 11054 through the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Research Program to the Massachusetts General Hospital. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the MCHB, HRSA, HHS, or Autism Speaks." "These materials are the product of on-going activities of the Autism Speaks Autism Treatment Network, a funded program of Autism Speaks. It is supported by cooperative agreement UA3 MC 11054 through the U.S. Department of Health and Human Services, Health Resources and Services Administration, Maternal and Child Health Research Program to the Massachusetts General Hospital. Its contents are solely the responsibility of the authors and do not necessarily represent the official views of the MCHB, HRSA, HHS, or Autism Speaks."



Thank you!





Questions?

ashley.fuhrman@bluesprigpediatrics.com

