





# *Overcoming Obstacles: Daily Survival & Accessing Effective Treatment*

Jeff Enzinna, M.S., LPA, BCBA

Christie Enzinna, M.A., LPA, BCBA

# ABA

- scientific research
- 
- determines behavioral principles
- 
- applied to treatment

# ABA

## MYTHS

- ABA only works for young children.
- ABA is only for autism or problem behaviors.
- ABA is easy, anyone can do it.

## MISPERCEPTIONS OF ABA TREATMENT

- Cold and impersonal
- Results in robotic responses
- Child will only “perform” for edible treats

# What is ABA?

## *Applied Behavior Analysis*

- ABA is a very individualized treatment approach,
- driven by individualized assessment and data.
- “Cookbooks” will not work!

# There is no “one size fits all” program

- All individuals have individual behavior, reinforcement histories, and physical conditions
- Applied Behavior Analysis is the scientific study of behavior
- ABA treatment is an individualized intervention based on individual, on-going assessment, data review, & adjustment

# What Is Board Certification in ABA?

[www.bacb.com](http://www.bacb.com)

- BCBA
  - Minimum Master's degree
  - 225 graduate classroom hours in ABA
  - 1500 hours supervised field experience
- BCaBA
  - Minimum Bachelor's degree
  - 135 classroom hours in ABA
  - 1000 hours supervised field experience
  - Requires continued BCBA supervision

BCBA-D

# Science of Behavior

- Behavior is predictable
- Behavior follows certain principles
- Behavior can be changed
- How you interact with another has an affect on their behavior and your behavior
- The scientific study of behavior is referred to as applied behavior analysis, ABA
  - Increase behaviors
  - Decrease behaviors
  - Teach new behaviors

# Maximizing Your Child's Potential

- Expect your child to learn; keep raising the bar
- On-going assessment of whether or not your child is learning (data!)
- What is your child going to do as an adult?
- Know when to call in a BCBA, the specialist in behavior change
- Beware of false securities (programs you expect will support/help your child)



# The Data Will Tell

- Identify the objective
- Define how to measure progress
- Take a baseline
- Take on-going data
- Get reliability on your data
- Make changes based on the data

# Learning How To Learn

- A child will not benefit from any therapy or teaching if he does not attend to the instructor.
- Use what we know about behavior to teach the child to learn to attend first.

# Monitor *all* interventions

- You must measure behavior; you must take data
  - What is your behavioral goal and how are you going to know when you have accomplished it?

## Objectives must be:

- Observable
- Measurable
- 2 people can agree when it occurs

# My child will age into an adult

- What it looks like now
- What you want it to look like
- How is it ever going to be any different?
- Don't wait for your child to "mature" or "out-grow a behavior"; don't depend on the school to change your child

# State Assistance

- Public School ([www.tea.state.tx.us](http://www.tea.state.tx.us))
- Early Childhood Intervention  
([www.dars.state.tx.us](http://www.dars.state.tx.us))
- MHMR Centers ([www.txcouncil.com](http://www.txcouncil.com))
- CLASS
- HCS
- ICF-MR

# What Else Can I Do?

- **Hold people accountable**
- If BCBA's are the experts, then expect to receive assistance from a BCBA through your MHMR Center, Service Provider, or School
- If the School District can pay \$55,000-\$65,000 for a classroom school teacher; they can afford to employ enough BCBA's to work in the classrooms

# What Should Your Child Know?

- The Assessment of Basic Language and Learning Skills-Revised (ABLLS-R)  
([www.behavioranalysts.com](http://www.behavioranalysts.com))
- Verbal Behavior Milestones Assessment and Placement Program (VB-MAPP)  
([www.avbpress.com](http://www.avbpress.com))
- The Assessment of Functional Living Skills (AFLS) ([www.stimuluspublications.com](http://www.stimuluspublications.com))



# ***Goals of Parenting***

To teach and support your child to:

1. Enjoy life
2. Be as independent as possible
3. Live a normal life
4. Overcome  
problem behavior





# What Happens Right After the Behavior Determines if it Goes in the Bag to Be Used Later or it Gets Discarded



# All Behavior Serves a Purpose

What's in it for me?

- I want it
- I want it to go away
- I want you
- I want you to go away
- I like doing this
- I don't like doing this
- This makes me feel good

# ABC's of Behavior

<b>A</b> Antecedent	<b>B</b> Behavior	<b>C</b> Consequence
Child is screaming for candy while parent is on the phone	Parent hands candy to child	Child is quiet and parent can talk on the phone
Parent gets on phone	Scream for candy	Get candy

# Giving Directives

- Don't use repeated directives
- Give directives only when you know the individual is attending
- Give directives when you are close to the individual and are in a position to enforce the directive

# Giving Directives (cont'd)

- Make directives specific and direct
- Use a polite but firm tone
- Don't allow the individual to discuss the directive with you at the time it is given
- Give a time frame for the activity to be started or completed

# Prompting Sequence

If you said to do it, make sure it is done

- Initial instruction (just say it once as a statement)
- Verbal (give the first step, not a repeat of inst)
- Gestural (quietly, no touch)
- Physical (brief touch)
- Total Manipulation (physically guide)
- Always reinforce “good following directions”

# Everyone has an important job



- Active participant or tolerated presence?



# What Should I Do When My Child Engages in Problem Behavior?

- If you don't know the function
  - Don't do anything different
    - Don't provide any attention, if you weren't already doing it; otherwise you teach them that problem behavior "earns" them attention
    - Don't let them out of a demand if there is one; otherwise you teach them that problem behavior "earns" them a break
    - Never ever deliver a preferred toy/food item immediately after or during problem behavior



# What Do I Do If I Know the Function of Problem Behavior

- Attention
- Tangibles
- Escape/Avoidance
- Automatic positive (the stimulation produced by the behavior is reinforcing)
  - Example- whistling may be reinforced by the music it directly produces
- Automatic negative (the behavior directly relieves some unpleasant state)
  - Example- rubbing my back when it hurts may directly reduce the pain I am experiencing

# Why Should He/She????

<b>Activity</b>	<b>Behavior</b>	<b>Why??</b>
Run errands with you	Leave home to go in & out	
Wait quietly in line	Stand still, hands to self, quiet	
Go shopping	Walk, stand	
Get fingernails trimmed	Hold still while fingers are pulled on	

# When do we stop reinforcing?

- Gradually switch from primary to social, from contrived to natural environment, but never eliminate reinforcement.
- **All behavior must be reinforced in order to continue.**

# Know When to Seek a BCBA

- You know basic first aid (how to put a band-aide on, how to give an aspirin), but don't you sometimes take your child to the doctor?
- You know basic parenting but when your child is not learning or the behavior is not improving, it is time to seek a professional
- You may use a general practitioner but when that doesn't help, you go to a specialist

**DATA** – *You take it, you insist on it from others, and you make decisions based on it!*

- You must measure behavior; you must take data
  - What is your behavioral goal and how are you going to know when you have accomplished it?
- How will you know if your child is learning or improving?
  - How do you know when the tylenol has helped reduce the fever?



[www.abaprofessionals.com](http://www.abaprofessionals.com)

[www.mytherapyandbeyond.com](http://www.mytherapyandbeyond.com)

[jeff@abaprofessionals.com](mailto:jeff@abaprofessionals.com)

[Christie.enzinna@mytherapyandbeyond.com](mailto:Christie.enzinna@mytherapyandbeyond.com)