IS ABA REALLY THE WAY?

ASD EVIDENCE-BASED PRACTICE GROUP
WHY THIS TOPIC?

Roberts & Prior (2011) evaluated the most effective models of practice in early intervention for children with Autism Spectrum Disorder.
THE QUESTIONS WE WANTED ANSWERS TO:

1. Do studies measure, generalisation of skills across environments, maintenance of skills?

2. Are social and language outcomes functional? Eg) Naming colours vs. requesting or commenting.

3. The research (eg. Roberts & Prior) suggests that children with ABA generally have positive outcomes on their IQ, Language Scores – but how does this compare to other interventions?

CHALLENGES
- What do we count as “ABA” or “EIBI”? - it’s a framework rather than a strategy.
- Misinformation about ABA in Australia and Europe
THE COST
THE DIFFERENCE IN ABA PROGRAMS

Interesting article: Keenan et al., 2014

“Autism & ABA: The Gulf between North America & Europe”

Explores:
- The myth-conceptions about ABA
- ABA is “treatment as usual” in North America, but not yet in Europe or Australia
- Some reasons for this:
  - Very few board certified (Masters trained) behaviour analysts in Australia & Europe, even fewer of these are Speech Pathologists
  - Some non-functional programs, turning therapists and families away from programs
RELEVANCE TO PRACTICE

- There are approximately 30 Board Certified Behaviour Analysts in Australia, approximately 13 of these are in NSW. An even smaller number of these are Speech Pathologists (we only know of one!)

Training options:

- The University of Waikato is the only institution in New Zealand or Australia offering online courses that are approved by the BACB® for BCBA® and BCaBA® certification. You need to be a have a degree in psychology.

- Monash University: TBA
THE ROAD TO A CAT
WHAT DID WE DO?

We read, we searched, we CAP-ed.

We wanted a comparison of ABA to other programs

- Eclectic programs.
- Responsive intraction training
- Milleu interventions

We looked at what ABA really was, we examined our teaching styles and strategies, and determined we ALL used some ABA principles in our work.
PAPERS:


THE CONSENSUS?

• Results mainly looked at IQ scores, these generally had increases over the treatment period
• Very limited information about functional communication skills or social skills
• Limited information about generalisation to non-treatment environments, with non-treatment partners.
• Some comparisons both used ABA approaches (eg. PECS and PRT are based on ABA)
• Some prompt dependency for communication trials (child responded to a prompt to communicate)
SOMETHING WE CAN ALL LEARN
SO, WHAT DO WE TELL FAMILIES?

1. You will be most engaged in a program that works with your families values, lifestyle and educational beliefs.

2. There are some guidelines about the qualities of a good program. Ensure the programs you choose meet these.

3. You want to teach functional developmental skills, specific to ASD
   - Ability to attend to elements of the environment
   - Ability to imitate others
   - Ability to comprehend and use language
   - Ability to play appropriately with toys
   - Ability to socially interact with others (Howlin, 1997),
REFERENCES

