

CHOOSING AN ABA PROVIDER

What is ABA Therapy?

Applied behavior analysis (ABA) is a science and data-driven intervention that uses systematic, evidence-based methods to improve socially significant behaviors that are meaningful to the learner. The focus of ABA therapy should be to empower autistic people to develop skills they need to be as independent as possible in all areas of their lives. ABA therapy providers should help individuals with autism develop autonomy and develop skills so they can safely navigate their world and live long, healthy, and happy lives.

Disclaimer

ABA therapy is powerful, with the potential for great benefit (empowering the recipient) or harm (disempowering the recipient) depending on the goals selected and approaches used.

Green Flags

- Neurodiversity-affirming. (Neurodiversity is the idea that people experience and interact with the world around them in many different ways. There is no one right way of thinking, learning, and behaving.)
- Trauma-informed. (Trauma-Informed Care recognizes the presence of trauma symptoms and acknowledges the role trauma may play in an individual's life.) Autistic people may be more likely to experience traumatic life events, particularly interpersonal traumas such as bullying and physical and sexual abuse. Actively avoids re-traumatization when selecting goals and interventions.
- Consent-driven. Choice is provided and consent sought within all activities. Non-consent and protest are honored.
- Collaborative with the family and interdisciplinary professionals. Consultation with and referrals to other disciplines (as necessary) are embraced. Parents/caregivers are welcomed and encouraged to join/observe therapy sessions.
- All forms of communication are valued [e.g. sign language, augmentative/ alternative communication (AAC) devices, etc.].

Red Flags

- Aims for neurotypicality/indistinguishable from peers; focus on suppressing autistic traits, such as focused interests or self-stimulatory behaviors.
- Selects goals and interventions without consideration of potential previous trauma.
- Compliance-driven. Directives are frequently given without opportunity for learner input or consent (physical prompts routinely used). Non-consent and protest are routinely ignored; emphasis on follow through.
- Does not coordinate care with the family or interdisciplinary providers (e.g. speech, occupational, or physical therapist; counselor/psychologist; etc.). Consultation with and referrals to other disciplines are avoided. Parents/caregivers are not allowed to join or observe therapy sessions.
- Emphasis on spoken language.
- Provider-led and emphasis on structured table work. Sessions occur in overly restrictive settings and contexts (e.g. alternating between table work and break).



Green Flags

- Balance between learner-led and provider-led activities; emphasis on teaching skills in the natural environment. Majority of instructional activities are fun and meaningful to the learner.
- Co-regulation (provider models, coaches, and supports the client through meltdowns/dysregulation). Distress or connection-seeking behaviors are met with compassion and support.
- Goals are individualized and meaningful to the learner and their family. Goals focus on learner's communication and independence.
- Learner looks forward to sessions. Learner is happy, relaxed, and engaged during sessions.
- Provider uses visual supports (e.g. pictures, schedules, written instructions, etc.) combined with oral communication.
- Learner's sensory needs are considered and accommodated. Safe self-stimulatory behaviors ("stims") are respected.
- Provider has adequate and relevant training in working with the Autistic population, including learner-specific training. Ongoing professional development activities are required.
- Provider has training/certification in non-violent crisis intervention, cardio-pulmonary resuscitation (CPR), first aid, and blood-borne pathogens.
- Provider is engaged in conversations and actions towards ABA reform, including listening to Autistic self-advocates, reviewing/adjusting clinical practices, and ensuring interventions are neurodiversity affirming.

Red Flags

- Planned ignoring/extinction (i.e. withholding attention) when the Autistic person is dysregulated. Distress or connection-seeking behaviors are ignored or punished.
- Goals focus on learner's compliance and conforming to neurotypical expectations. The learner's individual needs, interests, and preferences are not considered during goal selection.
- Learner is routinely withdrawn or distressed during sessions. Learner appears bored, non-responsive, or distressed during instructional activities.
- Absence of visual supports (reliance on oral communication).
- Learner's sensory needs are not considered or accommodated. Safe self-stimulatory behaviors are suppressed.
- Provider has no, minimal, or generic training for working with the Autistic population. No learner-specific training is provided.
- Provider does not have emergency safety trainings.
- Provider is unaware of or resistant to conversations or actions around ABA reform.

Oh no! I see red flags in my child's ABA therapy.

What should I do?

Initiate a conversation with your BCBA (Board Certified Behavior Analyst) right away about your concern(s). Collaborate with your provider until concerns are adequately addressed, or discontinue services and seek alternative provider. Pursue ABC of NC's free parent and professional workshops ([linked here](#)) and other neurodiversity affirming resources.

