

Consumer Guidelines

for Identifying, Selecting, and Evaluating Behavior Analysts Working with Individuals with Autism Spectrum Disorders

Autism Special Interest Group (SIG) of the Association for Behavior Analysis



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The Autism Special Interest Group (SIG) of the Association for Behavior Analysis asserts that all children and adults with autism spectrum disorders have the right to effective education and treatment based on the best available scientific evidence. Unfortunately, many interventions for autism have not been shown to be effective in sound research; others have been shown to be ineffective or harmful.¹ Research has long documented the effectiveness of applied behavior analysis (ABA) methods in the education and treatment of people with autism.² Although it is beyond the scope of these guidelines, the Autism SIG urges consumers to inquire about scientific support for all autism treatments. The Association for Science in Autism Treatment and the Cambridge Center for Behavioral Studies host websites that provide consumers with a wealth of information about autism treatments (please visit www.asatonline.org and www.behavior.org). For more information on these Guidelines, please visit www.autismsig.org.

Consumer Advisory: All consumers should exercise caution when selecting service providers for individuals with autism. Furthermore, consumers are urged to obtain references from all potential service providers and to check those references carefully. Consumers are strongly encouraged to report unprofessional and unethical behavior to the appropriate regulatory bodies including the state consumer affairs bureau and, if the individual is certified by the Behavior Analyst Certification Board® (BACB®), the BACB®.

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This document suggests guidelines for consumers to use in determining who may be qualified to direct applied behavior analysis programs for individuals with autism, as recommended by the Autism Special Interest Group of the Association for Behavior Analysis International. The Association for Behavior Analysis, its members and Executive Council have not adopted an official policy, position, or opinion regarding these Guidelines.

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General Considerations in Choosing a Director of ABA Services

Planning, directing, and monitoring effective ABA programs for individuals with autism spectrum disorders (hereafter referred to as autism) requires specific skills and competencies. Individuals with autism, their families, and other consumers have the right to know whether people who claim to be qualified to direct ABA programs actually have the necessary competencies. Parents, teachers, other professionals, and funding agencies (hereafter referred to as consumers) have the right to hold prospective providers accountable for delivering quality services (e.g., to ask them how they use objective data to plan, implement, and evaluate the effectiveness of the interventions they use). Since individuals with autism have a variety of needs, not every service provider has the competencies required to optimally address the needs of every individual with autism. For that reason, consumers should focus on the match between their needs and the specific competencies of a particular provider.

Formal credentialing of professional behavior analysts by the Behavior Analyst Certification Board® (BACB®) can provide some safeguards for consumers, including a means of screening potential providers, and some recourse if practices that violate the BACB *Professional Disciplinary Standards*© are encountered (see www.BACB.com). Unfortunately, there is a large gap between the supply of qualified behavior analysts and the demand for ABA services. Although the supply of qualified individuals is increasing, consumers often must choose from limited options. Thus, they should exercise caution in evaluating individuals who have, or claim to have, credentials in behavior analysis or any other discipline. Please note that professional certification in behavior analysis is evidence that a professional has met minimum competency standards related to the practice of behavior analysis; however, **it does not guarantee that the individual has specific expertise in the treatment of autism** nor that s/he has the skills needed to produce optimal treatment outcomes.

The remainder of this document is organized as follows:

- ◆ Section I pertains to certification in behavior analysis.
- ◆ Section II pertains to autism-specific training.
- ◆ Sections III and IV offer additional recommendations and information to guide the selection of a behavior analyst.
- ◆ A list of references and resources is provided at the end of the Guidelines.

These guidelines include some technical terms from behavior analysis that may be unfamiliar to many consumers. The Autism SIG encourages consumers to become familiar with this terminology by viewing the resources available at the Parent-Professional Partnership SIG website, www.pppsigsig.org.

The Autism SIG recommends that consumers seek to determine if those who claim to be qualified to **direct** ABA programs for people with autism meet the minimum standards detailed as follows.



Section I Qualifications to Direct Behavior Analytic Programs

A. Certification by the Behavior Analyst Certification Board® (BACB®) as a Board Certified Behavior Analyst™ (BCBA®) is recommended. Standards for certification as a BCBA®, which can be found in the Consumer Information section of www.BACB.com, include: a Master’s degree; 225 hours of graduate-level coursework in specific behavior analytic content areas (typically five 3-credit-hour classes); supervised experience in designing and implementing applied behavior analysis interventions; and a passing score on the professionally-developed BCBA examination. Consumers are urged to check the BACB website as these requirements are continuously evolving (e.g., coursework and supervision requirements for new applicants have become more stringent). A complete task list of content covered on the Behavior Analyst Certification Board examinations and a registry of BACB certificants are available at www.BACB.com. An individual’s BACB certification status may be verified by emailing info@BACB.com with the request.

Note that there is also a lower level of BACB certification, the Board Certified Associate Behavior Analyst™ (BCABA®), for individuals who have fewer qualifications: a bachelor’s degree; 135 hours of undergraduate classroom instruction in behavior analysis; supervised experience in implementing applied behavior analysis interventions; and a passing score on the professionally-developed BCABA examination. BCABAs should be supervised by BCBA’s. A description of recommended work activities for both BCBA’s and BCABA’s may be found on the “About BACB Certificants” page in the Consumer Information section of www.BACB.com.

The Autism SIG strongly recommends that BCABAs deliver behavior analytic intervention and assist with program design in familiar cases only if they are **adequately supervised** by BCBA’s who are appropriately qualified. The Autism SIG encourages consumers who are considering BCABAs as providers to request the name and contact information of the BCBA supervisor, check to see that the supervisor is a BCBA, and seek information about the amount and type of supervision provided.

Both BCBA’s and BCABA’s must renew their BACB certification annually, participate in continuing education activities that meet BACB standards, and recertify every three years. They should adhere to the BACB *Guidelines for Responsible Conduct for Behavior Analysts*®, and must adhere to the BACB *Professional Disciplinary Standards*® (also available at www.BACB.com).

B. Given the fairly recent establishment of the BACB, the Autism SIG recognizes that consumers may encounter service providers who are not certified.

There is a small group of professionals who have been in practice for a number of years, but are not currently certified by the BACB. Some completed their training well before the BACB certification program was initiated, and are now in the later stages of their careers. Some are excellent clinicians who have served hundreds of consumers with autism.



It is important for consumers to ask such professionals to provide documentation of their qualifications in the behavior analytic treatment of autism. The Autism SIG strongly recommends that consumers examine the resumes of non-certified individuals for evidence of the following:

- i. Completion of at least a master's degree in behavior analysis or a closely related field
- ii. Current "Full" membership in the Association for Behavior Analysis and possibly one of its regional chapters
- iii. At least ten years of professional experience post-master's or doctoral degree in implementing, designing, and overseeing behavior analysis services for individuals with autism
- iv. Publications of research on the behavior analytic treatment of autism in peer-reviewed professional journals (as opposed to self-published books and journals, websites, and the like)
- v. Presentations on the behavior analytic treatment of autism at behavior analysis conferences (but note that conference presentations are not equivalent to peer-reviewed research)

The Autism SIG recognizes the complexity of determining whether a non-BACB certified professional is truly competent. The SIG strongly advises consumers to be aware that other credentials, degrees, and titles are not to be considered equivalent to the BACB credential in determining a professional's expertise to practice behavior analysis. Only a professional certified by the BACB has demonstrated minimum competence through graduate coursework, supervised experience, and a standardized national examination as administered by the BACB. The BACB offers the only credential specific to the practice of behavior analysis.

Some professionals may be pursuing a BACB credential, but have not yet completed the necessary degree, coursework, and/or supervised practical experience requirements. When such individuals provide ABA services to individuals with autism, they should be supervised directly and closely by a qualified BCBA who maintains primary responsibility for all aspects of the intervention. Supervision by the BCBA should include directly observing the client and the supervisee, meeting frequently with the supervisee, and taking the lead in all clinical decision-making. Consumers should ask the supervising BCBA for specific information on the supervisee's progress towards certification in the form of copies of course transcripts and proportion of supervised experience hours completed.

Section II Training Necessary to Direct ABA Programs for Individuals with Autism

The Autism SIG asserts that certification as a BCBA is a necessary, but not sufficient, qualification to direct ABA programming for individuals with autism. Consumers should be aware that the discipline of behavior analysis is broad and varied, and that some CBAs have little or no experience directing or delivering ABA programming to individuals with autism. The Autism SIG considers the following training and experience, in addition to certification as a BCBA, to be necessary to competently direct ABA programming for individuals with autism:



A. At least one full calendar year (full-time equivalent of 1000 clock hours [25 hrs/wk for 40 weeks]) of hands-on training in providing ABA services directly to children and/or adults with autism under the supervision of a Board Certified Behavior Analyst (or a person who meets the qualifications outlined at the top of page 5 of these Guidelines) with at least five years of experience in ABA programming for individuals with autism.

The training and supervision should assure competency in the following areas:


- 1** Use of intervention methods that have proved effective for people with autism in scientific studies, and scientific evaluation of interventions that have not yet been studied thoroughly.
- 2** Experience in assuming the lead role in designing and implementing comprehensive ABA programming for individuals with autism. The experience should involve designing and implementing individualized programs to build skills and promote independent functioning in each of the following areas: “learning to learn” (e.g., observing, listening, following instructions, imitating); communication (vocal and non-vocal); social interaction; self-care; school readiness; academic; safety; motor; play and leisure; community living; self-monitoring; and pre-vocational and vocational skills.
- 3** Providing ABA programming to at least eight individuals with autism who represent a range of repertoires and ages.
- 4** Employing an array of scientifically validated, behavior analytic teaching procedures, including (but not limited to) discrete trial instruction, modeling, incidental teaching and other “naturalistic” teaching methods, activity-embedded instruction, task analysis, and chaining.
- 5** Incorporating the following techniques into skill-building programs: prompting; errorless teaching and error correction; maximizing learning opportunities; effective reinforcement and motivation techniques; techniques for establishing stimulus control (including discrimination training); preference assessments; and choice procedures.
- 6** Using ABA methods in one-to-one instruction, small and large group instruction, and in transitions across these situations.
- 7** Employing a wide array of strategies to program for and assess both skill acquisition and skill generalization over time and across people, settings, situations, and materials.
- 8** Modifying instructional programs based on frequent, systematic evaluation of direct observational data.
- 9** Conducting functional assessments (including functional analyses) of challenging behavior and selecting the specific assessment methods that are best suited to the behavior and the context.



- 10** Designing and implementing programs to reduce stereotypic, disruptive, and destructive behavior, based on systematic analysis of the variables (antecedents and consequences) that occasion and maintain the behavior and matching treatment to the determined function(s) of the behavior.
- 11** Incorporating extinction and the full array of differential reinforcement procedures into behavior reduction programs.
- 12** Modifying behavior reduction programs based on frequent, systematic evaluation of direct observational data.
- 13** Providing training in ABA methods and other support services to family members of at least five individuals with autism.
- 14** Providing training and supervision to at least eight professionals, paraprofessionals, or students providing ABA services to individuals with autism.
- 15** Collaborating effectively with professionals from other disciplines and with family members to promote consistent intervention and to maximize outcomes, while maintaining a commitment to scientifically validated interventions and data-based decision making.

B. Additional and ongoing training in directing and supervising ABA programs for individuals with autism that involves:

- 1** Formal training and/or self-study to develop knowledge of the best available scientific evidence about the characteristics of autism and related disorders, and implications of those characteristics for designing and implementing educational and treatment programs, including their impact on family and community life.
- 2** Formal training and/or self-study to develop knowledge of at least one curriculum for learners with autism consisting of: (a) a scope and sequence of skills based on normal developmental milestones, broken down into component skills based on research on teaching individuals with autism and related disorders; (b) prototype programs for teaching each skill in the curriculum, using behavior analytic methods; (c) data recording and tracking systems; and (d) accompanying materials.
- 3** Formal training and/or self-study to develop skills in using scientifically validated methods to assess and build vocal-verbal and nonverbal communication repertoires in people with autism, consistent with the principles and practices of behavior analysis. This includes augmentative and alternative communication systems for individuals with limited vocal repertoires that are matched to the needs and abilities of each individual learner.

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- 4 Participation in continuing education to remain informed about the best available research from behavior analysis and other scientific disciplines as it relates to autism treatment. The Autism SIG encourages consumers to ask prospective directors of ABA services for evidence that they have recently participated in continuing education activities **relevant to the treatment of individuals with autism** like those they will be serving (e.g., preschoolers, adults, individuals with limited vocal-verbal repertoires, etc.).

Section III Evidence of Qualifications to Direct ABA Programs for Individuals with Autism

The Autism SIG encourages consumers to ask prospective directors of ABA services (including those who use titles such as “consultant”) to provide evidence of their qualifications in the form of:

- ◆ Certification as a Board Certified Behavior Analyst (BCBA)
- ◆ Certification as a Board Certified Associate Behavior Analyst (BCABA) with adequate supervision by a BCBA
- ◆ Information about the amount and type of supervision they provide to all supervisees who deliver intervention directly to individuals with autism
- ◆ Membership in the Association for Behavior Analysis (ABA)
- ◆ Membership in an Affiliated Chapter of ABA (e.g., California’s chapter is called CalABA, New York’s chapter is called NYSABA, New Jersey’s chapter is called NJABA)
- ◆ Undergraduate, graduate, and post-graduate training in behavior analysis specifically, as differentiated from non-behavior analytic study in psychology, special education, education, or other disciplines
- ◆ Letters of reference from employment supervisors and/or families for whom they have directed ABA programming for similar individuals with autism (with appropriate safeguards taken to ensure privacy and confidentiality)
- ◆ Publications of behavior analytic research in peer-reviewed professional journals (for a minority of behavior analysts)

Section IV Additional Considerations

- 1 Attending or delivering some workshops, taking some courses, or getting brief hands-on experiences does NOT qualify an individual to practice applied behavior analysis effectively and adequately. Unfortunately, there may be some individuals who misrepresent their training, skills, and experiences or inappropriately guarantee certain outcomes. The Behavior Analyst Certification Board has announced that it is in the initial stages of a multi-year effort to consider development of a specialty in autism. Please visit www.BACB.com to obtain updates on this process.



- 2** Evidence of attendance and active participation in professional meetings and conferences in behavior analysis (e.g., the annual meeting of the Association for Behavior Analysis) is certainly desirable. Such activities by themselves, however, do not constitute training in behavior analysis, and conference presentations are not equivalent to publications in peer-reviewed professional journals because conference presentations typically are not reviewed carefully by a number of other behavior analysts, and do not have to meet scientific standards. Therefore, it is important for consumers to differentiate presentations at conferences and workshops from research published in peer-reviewed journals.
- 3** Board Certified Behavior Analysts and Board Certified Associate Behavior Analysts are on their honor to follow the BACB's *Guidelines for Responsible Conduct for Behavior Analysts*®, which are not enforced by the BACB at this time. BCBA's and BCABA's must be in compliance with the BACB *Professional Disciplinary Standards*® which are enforced by the BACB. Consumers are encouraged to become familiar with those Guidelines and Standards, available at www.BACB.com. Consumers who have concerns about the ethical behavior of individuals providing ABA services are strongly encouraged to contact the Behavior Analyst Certification Board in the case of a BCBA or BCABA who may not be in compliance with the BACB *Professional Disciplinary Standards*®, and discipline-specific licensing boards in the case of those holding professional licensure (such as psychologists, speech-language pathologists, physicians, social workers).
- 4** Because there is an inadequate supply of behavior analysts qualified to work in autism, many providers are overextended. The Autism SIG believes that professionals should ensure that they can effectively manage their caseloads. Although there are no guidelines currently available regarding optimal caseloads, we encourage consumers to ask prospective providers of ABA services about their availability and responsiveness. Important questions include:

 - ◆ How much time will a qualified behavior analyst dedicate to the individual with autism?
 - ◆ How will this change if programming needs change (e.g., if serious behavior problems emerge)?
 - ◆ What is the typical response time to a crisis?
 - ◆ Is the amount of available time adequate to meet the needs of the individual or individuals?
 - ◆ How often will the behavior analyst communicate with the consumer?
 - ◆ What form will that communication take (i.e., face-to-face meetings, phone conversations, email)?



Footnotes

1. See Celiberti, Buchanan, Bleecker, Kreiss, & Rosenfeld, 2004; COSAC, 2004; Green, 1996; Jacobson, Foxx, & Mulick; 2005; Smith, 1996.
2. For example, see Howard, Sparkman, Cohen, Green, & Stanislaw, 2005; Lovaas, 1987; MADSEC, 1999; Matson et al., 1996; New York Department of Health, 1999; Sallows & Graupner, 2005; U.S. Surgeon General, 1999.



Selected References and Resources

The following websites contain further information that may be useful to consumers:

- The Association for Behavior Analysis – www.abainternational.org
- The Association for Science in Autism Treatment – www.asatonline.org
- The ABA Autism Special Interest Group – www.autismsig.org
- The ABA Parent Professional Partnership Special Interest Group – www.pppsig.org
- The Behavior Analyst Certification Board – www.BACB.com
- The Cambridge Center for Behavioral Studies – www.behavior.org

Behavior Analyst Certification Board®.

The following three documents are available free online at www.BACB.com
BCBA® and BCABA® Behavior Analyst Task List© (3rd ed.)
Guidelines for Responsible Conduct for Behavior Analysts©
Professional Disciplinary Standards©

Celiberti, D., Buchanan, S., Bleecker, F., Kreiss, D., & Rosenfeld, D. (2004). *The road less traveled: Charting a clear course for autism treatment*. Arlington, VA: The Organization for Autism Research (OAR).
(Available free online at www.researchautism.org/uploads/roadless.pdf)

Cooper, J. O., Heron, T. E., & Heward, W. L. (2006). *Applied Behavior Analysis* (2nd ed). Upper Saddle River, NJ: Prentice Hall.

COSAC (The New Jersey Center for Outreach and Services for the Autism Community). (2004). *Position statement on treatment recommendations*. Ewing, NJ: Author.
(Available free online at www.njcosac.org.)

Green, G. (1996). Evaluating claims about treatments for autism. In C. Maurice (Ed.), G. Green, & S. C. Luce (Co-Eds.), *Behavioral intervention for young children with autism: A manual for parents and professionals* (pp. 15-28). Austin, TX: PRO-ED.

Howard, J. S., Sparkman, C. R., Cohen, H. G., Green, G., & Stanislaw, H. (2005). A comparison of intensive behavior analytic and eclectic treatments for young children with autism. *Research in Developmental Disabilities, 26*, 359-383.

Jacobson, J. W., Foxx, R., & Mulick, J. A. (2005). *Controversial therapies for developmental disabilities*. Mahwah, NJ: Lawrence Erlbaum Associates.



- Lovaas, O. I. (1987). Behavioral treatment and normal educational and intellectual functioning in young autistic children. *Journal of Consulting and Clinical Psychology, 55*, 3-9.
- MADSEC Autism Taskforce. (1999). *Executive summary*. Portland, ME: Department of Education, State of Maine.
- Matson, J. L., Benavidez, D. A., Compton, L. S., Paclawskyj, T., & Baglio, C. (1996). Behavioral treatment of autistic persons: A review of research from 1980 to the present. *Research in Developmental Disabilities, 17*, 433-465.
- New York State Department of Health Early Intervention Program. (1999). *Clinical Practice Guideline Quick Reference Guide: Autism/Pervasive Developmental Disorders - Assessment and Intervention for Young Children (Age 0-3 Years)*. Health Education Services, P.O. Box 7126, Albany, NY 12224 (1999 Publication No. 4216).
- Sallows, G. O., & Graupner, T. D. (2005). Intensive behavioral treatment for children with autism: Four-year outcome and predictors. *American Journal on Mental Retardation, 110*, 417-438.
- Smith, T. (1996). Are other treatments effective? In C. Maurice, G. Green, & S. Luce (Eds.), *Behavioral intervention for young children with autism: A manual for parents and professionals* (pp. 45-59). Austin, TX: PRO-ED.
- U.S. Department of Health and Human Services. (1999). *Mental health: A report of the surgeon general*. Rockville, MD: U.S. Department of Health and Human Services, Substance Abuse and Mental Health Services Administration, Center for Mental Health Services, National Institutes of Health, National Institute of Mental Health.



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