Doctorate of Educational Psychology (DEdPsy)

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Abstract

The application of Behaviour Analysis as an early intervention for children with Autistic Spectrum Condition is increasing within the United Kingdom (Lambert, 2013). Although there is evidence to suggest that Educational Psychologists (EPs) are involved in some capacity with Early Intensive Behavioural Therapy (EIBI), there is a lack of research to inform the profession. Semi-structured interviews were held with four parents who have a child receiving EIBI and two EPs with experience of EIBI. The questions asked were related to the role of the EP within EIBI. The data was analysed using Thematic Analysis as described by Braun and Clarke (2006). The eleven themes identified portrayed the difficult relationship between the Local Authority Services and parents. Recommendations are made to the role of the EP as to how to work effectively and inclusively with cases involving EIBI.
Summary

This thesis will be made up of three parts; the literature review, the empirical paper and the critical review. The literature review will aim to explore the role of the Educational Psychologist within Additional Learning Needs and an exploration of Behaviour Analysis and its application within the UK. Identified research will be described and critically evaluated.

The empirical paper will outline the process undertaken to answer the identified research questions. This will include the rationale, the method and the results. The discussion will explore the relevance of the data to the role of the Educational Psychologist and make recommendations for EP practice.

The critical review will aim to provide a reflective and reflexive account of the research process and the role of the researcher. The critical review will describe the wider implications of the research on the current role of the Educational Psychologist.
Acknowledgements

Firstly, I would like to share my gratitude to the Educational Psychologists and the parents who took part in my research. I would like to thank you for your valuable time and your honesty. Without you, the research would not be possible.

I would like to thank Andrea Higgins for your support whilst developing the research questions and to Rachael Hayes for your useful feedback and insight during supervision.

Most importantly, I would like to thank everyone who has supported me throughout the last three years and put up with my short-temperedness, lack of time and anxieties (I’m sure your all as glad as I am that this is over!). Writing this has made me realise how lucky I am to be surrounded by amazing people: to my friends for being so encouraging, to Mam Gu and Sara for being so patient and to Jamie for being so understanding.

To Mam and Dad, this has been for you.
# Table of Contents

**Part One: Introduction and Literature Review** .......................................................... 14

1. **Introduction** ........................................................................................................... 15
   1.1. Amplification of the Title and Rationale for the Research ...................................... 15
   1.2. Structure of the Literature Review ......................................................................... 15
   1.3. Definition of EIBI .................................................................................................. 16
   1.4. Use of terminology ............................................................................................... 16
   1.5. Sources of information ........................................................................................ 16
   1.6. Inclusion and Exclusion Criteria ........................................................................... 17
   1.7. Identification of Studies Relevant to this literature .............................................. 18

2. **The role of the Educational Psychologist.** ......................................................... 18
   2.1. Definition of the EP role ...................................................................................... 18
   2.2. EP consultation and psychological theory ............................................................ 20
      2.2.1. Personal Construct Theory ............................................................................ 20
      2.2.2. Symbolic Interaction Theory ....................................................................... 21
      2.2.3. Systems Thinking .......................................................................................... 21
   2.3. EP Theoretical position ....................................................................................... 23

3. **Additional Learning Needs (ALN) and the role of the EP** ............................... 25
   3.1. Definition of ALN ............................................................................................... 25
   3.2. EPs statutory role ............................................................................................... 26
   3.3. Parental Views of Statutory Assessment ............................................................... 27
   3.4. ASC and the EP ................................................................................................... 29

4. **Behaviour Analysis** ............................................................................................... 31
   4.1. Definition of Behaviour Analysis .......................................................................... 31
4.2. History of Behaviourism ................................................................. 31
4.3. Experimental Behaviour Analysis .................................................. 32
4.4. Applied Behaviour Analysis .......................................................... 33
  4.4.1. Dimensions of ABA ................................................................. 34
4.5. ABA Therapy .................................................................................. 36
4.6. Behaviour Analysts Certification Board (BACB) ............................... 36
4.7. ABA therapy approaches ............................................................... 37
  4.7.1. Verbal Behaviour Approach ....................................................... 38
  4.8.1. Criticism of Lovaas ................................................................. 40
4.9. EIBI and Other Approaches ............................................................ 42
4.10. Research into EIBI ........................................................................ 42
5. EIBI in the UK .................................................................................... 45
  5.1. Application .................................................................................... 45
  5.2. Criticism of EIBI ........................................................................... 46
  5.3. Parental experiences ..................................................................... 49
7. Research Rationale ............................................................................ 51
8. References .......................................................................................... 52
Part 2: Major Empirical Paper ................................................................. 67
Abstract ............................................................................................... 68
1. Introduction ....................................................................................... 69
  1.1. What is Behaviour Analysis? ......................................................... 69
  1.2. Applied Behaviour Analysis (ABA) ............................................... 69
1.3. ABA therapy within the UK ................................................................. 69
1.4. Parental Experience ............................................................................. 70
1.5. Research Rationale .............................................................................. 71
1.6. Research Questions ............................................................................. 71

2. Methodology ........................................................................................... 72

2.1. Design ................................................................................................. 72
  2.1.1. Ontology ......................................................................................... 72
  2.1.2. Epistemology ................................................................................. 72
  2.1.3. Design ............................................................................................ 72

2.2. Participants ........................................................................................ 73
  2.2.1. Selection criteria. ........................................................................... 73
  2.2.2. Participant Recruitment. ................................................................. 73
  2.2.3. Procedure ........................................................................................ 75

2.3. Pilot Study .......................................................................................... 76

2.4. Analysis .............................................................................................. 77
  2.4.1. Validity............................................................................................ 77
  2.4.2. Thematic Analysis ....................................................................... 77

2.5. Ethical Considerations ................................................................. 78

3. Results ................................................................................................... 79

3.1. Overview ............................................................................................ 79
  3.2. Theme 1: Us and Them ................................................................. 80
  3.3. Theme 2: Being Heard ................................................................. 82
  3.4. Theme 3: Uncertainty ................................................................. 83
  3.5. Theme 4: Tribunal Pressure ......................................................... 84
  3.6. Theme 5: View of Expertise ......................................................... 85
3.7. Theme 6: EIBI

3.8. Theme 7: Assumption

3.9. Theme 8: Relationships

3.10. Theme 9: Contrasting Priorities

3.12. Theme 10: Current role of the EP

3.13. Theme 11: Moving Forward

4. Discussion

4.1. Overview

4.2. What is the role for the EP within EIBI?

4.3. What is supporting the EP within their role?

4.4. What is preventing the EP from fulfilling their role?

4.5. What are the recommendation for the role of the EP within EIBI?

5. Implication for EP practice

5.1. Develop EP knowledge of Behaviour Analysis

5.2. Importance of Clear Communication

6. Research Strengths and Limitations

6.1. Strengths

6.2. Limitations

6.3. Recommendations for future research

7. Conclusions

8. References

Part 3: Major Critical Appraisal

1. Overview

2. Research Development
2.1. Personal Experience ........................................................................................................... 111
  2.1.1. Experience of Behaviour Analysis ................................................................................. 111
  2.1.2. View of Education ......................................................................................................... 112
2.2. Development of the Research Question ............................................................................ 113
2.3. Development of Research Position .................................................................................... 114
  2.3.2. Postgraduate Education ................................................................................................. 114
  2.3.3. Qualitative Rational ........................................................................................................ 115
2.4. Ontology ............................................................................................................................ 115
2.5. Epistemology ....................................................................................................................... 116
2.6. Data Analysis ....................................................................................................................... 116
2.7. Research Questions ............................................................................................................. 118
2.8. Data Collection .................................................................................................................... 118
  2.8.1. Semi-Structured Interviews .......................................................................................... 118
  2.8.2. Participants ................................................................................................................... 120
2.9. Ethical Considerations ......................................................................................................... 121
  2.9.1. Discussing Sensitive Subjects. .................................................................................... 121
  2.9.2. Objectivity .................................................................................................................... 121
2.10. Difficulties Addressed. ...................................................................................................... 122
3. Contribution to Knowledge .................................................................................................. 125
  3.1. Contribution to Literature ................................................................................................. 125
  3.2 Contribution to EP Knowledge .......................................................................................... 125
    3.2.1. View of EIBI................................................................................................................ 125
    3.2.2. Definition of ‘Child-Centred’ ................................................................................... 126
    3.2.3. Definition of ‘Evidence Based’ ................................................................................ 127
    3.2.4. Behaviour Analysis and Psychology ......................................................................... 128
    3.3.5. Theoretical Approaches ........................................................................................... 129
3.2.6. Approach to Learning. ................................................................. 131

4. Conclusion .......................................................................................... 131

5. References ........................................................................................... 133

Appendices ............................................................................................. 139

Appendix A: Interview Schedule ............................................................ 139

Appendix B: Initial letter to the PEP attached to the email. ...................... 141

Appendix C: Participant Information Sheet (Parent and EP) ....................... 143

Appendix D: Message for Social Media .................................................. 145

Appendix E: Post for EPNET .................................................................. 146

Appendix F: PEP/Employer Information Sheet and Consent form ............. 146

Appendix G: Interview Participant Debrief .............................................. 149

Appendix H: Table of quotes ................................................................. 150

Appendix I: EP1 Transcript .................................................................... 237
<table>
<thead>
<tr>
<th>Abbreviation</th>
<th>Full Form</th>
</tr>
</thead>
<tbody>
<tr>
<td>ECM</td>
<td>Every Child Matters</td>
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<td>BA</td>
<td>Behaviour Analysis</td>
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<td>ABA</td>
<td>Applied Behaviour Analysis</td>
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<td>UNCRRC</td>
<td>United Nations Convention on the Right of the Child</td>
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<td>ALN</td>
<td>Additional Learning Needs</td>
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<td>LA</td>
<td>Local Authority</td>
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<td>ASC</td>
<td>Autism Spectrum Condition</td>
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<td>EP</td>
<td>Educational Psychologist</td>
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<td>EIBI</td>
<td>Early Intensive Behavioural Intervention</td>
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<td>UK</td>
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<td>Dialectical Behavioural Therapy</td>
</tr>
</tbody>
</table>
List of Tables

<table>
<thead>
<tr>
<th>Table</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Table 1</td>
<td>Dimensions of BA according to Baer, Wolfe and Risley (1968) and Cooper, Heron and Heward (2007)</td>
</tr>
<tr>
<td>Table 2</td>
<td>Skinner (1957) Verbal Behaviour Operants</td>
</tr>
<tr>
<td>Table 3</td>
<td>Table Outlining Participant Information</td>
</tr>
<tr>
<td>Table 4</td>
<td>Table Outlining Information of EIBI programmes (Parents)</td>
</tr>
<tr>
<td>Table 5</td>
<td>Table Outlining Information of EIBI programmes (EPs)</td>
</tr>
<tr>
<td>Table 6</td>
<td>Braun and Clarke’s (2006) six stages of TA</td>
</tr>
<tr>
<td>Table 7</td>
<td>Ethical Considerations</td>
</tr>
</tbody>
</table>

List of Figures

<table>
<thead>
<tr>
<th>Figure</th>
<th>Page No.</th>
</tr>
</thead>
<tbody>
<tr>
<td>Figure 1</td>
<td>Visual Representation of Recruitment Process</td>
</tr>
<tr>
<td>Figure 2</td>
<td>Theme 1: Us and Them</td>
</tr>
<tr>
<td>Figure 3</td>
<td>Theme 2: Being Heard</td>
</tr>
<tr>
<td>Figure 4</td>
<td>Theme 3: Uncertainty</td>
</tr>
<tr>
<td>Figure 5</td>
<td>Theme 4: Tribunal Pressure</td>
</tr>
<tr>
<td>Figure 6</td>
<td>Theme 5: View of Expertise</td>
</tr>
<tr>
<td>Figure 7</td>
<td>Theme 6: EIBI</td>
</tr>
<tr>
<td>Figure 8</td>
<td>Theme 7: Presumptions</td>
</tr>
<tr>
<td>Figure 9</td>
<td>Theme 8: Relationships</td>
</tr>
<tr>
<td>Figure 10</td>
<td>Theme 9: Contrasting Priorities</td>
</tr>
<tr>
<td>Figure 11</td>
<td>Theme 10: Current Role of the EP</td>
</tr>
<tr>
<td>Figure 12</td>
<td>Theme 11: Moving Forward</td>
</tr>
</tbody>
</table>

Part One: Introduction and Literature Review

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1. Introduction

1.1. Amplification of the Title and Rationale for the Research

In 2003, following the tragic events which led to Victoria Climbé’s death, the Every Child Matters (ECM) report was published (DfE, 2003). Following consultation with children, young people and families, five outcomes were identified to be of most importance. These included; being healthy, staying safe, enjoying and achieving, making a positive contribution, and economic wellbeing. It could be argued that education has an important role in ensuring that children meet the ECM five outcomes and ensuring that every child has the opportunity to reach their full potential. The importance of Education has been echoed within the United Nations Convention on the Rights of the Child (UNCRC). It states that every child has a right to an education that will develop their abilities to the full whilst protecting their dignity (UNCRC, 1990). This includes children with Additional Learning Needs (ALN).

In accordance with the aforementioned guidance and the Equality Act (DfE, 2014) the Local Authority (LA) has a responsibility to ensure every child’s access to an effective education through suitable support. Occasionally, parents may wish that their child is educated in a way which is not provided by the LA, such as often the case with children who are Electively Home Educated (EHE) and Applied Behaviour Analysis (ABA). Whereas the role of the Educational Psychologist (EP) has been explored within EHE (i.e. Arora, 2003), there is no equivalent research into the role of the EP within ABA. This research will aim to explore the possible Educational Psychologists (EP) role within ABA.

1.2. Structure of the Literature Review

Firstly, the role of EPs within education will be outlined. This will include an overview of the consultation model and its underpinning psychological theory to illustrate the application
of psychology within the EP role. This will be followed by an exploration of the role of the EP within Additional Learning Needs (ALN) with a focus on Autistic Spectrum Condition (ASC).

Secondly, the theory and application of Behaviour Analysis will be discussed, which will include the definition of relevant terminology. The application of Behaviour Analysis within the education of children with ASC will be explored. Thirdly, the possible role that EPs have within Early Intensive Behavioural Intervention (EIBI) will be described based on current literature. This will be followed by a rationale of the research.

1.3. Definition of EIBI

ABA refers to the application of the science of Behaviour Analysis. EIBI was defined as the application of ABA to children younger than the statutory school age in the United Kingdom (UK), which is five years old. As ABA and EIBI are often used interchangeably, both terms were used in the literature review and participant documents.

1.4. Use of terminology

The term Autistic Spectrum Condition (ASC) will be used throughout the literature review unless another term is used within a quote. The term used by an individual identified with the condition was also used in respect of their identity.

1.5. Sources of information

A narrative literature review was undertaken. The information included in the literature review was drawn from published articles and government documents. Personal blogs identified during the online searches were also included in order to include the views of people with ASC regarding ABA. Due to the limited research conducted within the UK on ABA
and EIBI, literature from America and other European Countries was included. Cultural differences between non-UK articles or journals which would impact on the research’s application within the UK were described. Both quantitative and qualitative research was included, as well as meta-analysis and systemic reviews. A search was conducted using a variety of academic databases, these included; PsychINFO 1806-2018, PsycArticles Full Text, Cardiff University Books@Ovid and Cardiff University Library. To source additional articles from peer reviewed journals, the search engines Google and Google Scholar were also used.

1.6. Inclusion and Exclusion Criteria


During the search process, sources were considered if they met the following criteria:

- Published in English or Welsh;
- Published between 2000-2017 unless considered historically relevant;
- Relevant to the research question.

Literature was not included if it met any of the following exclusion criteria:

- Published in other languages other than English or Welsh;
- Research articles from sources which have not been peer-reviewed;
- Not considered relevant to the role of the EP or EIBI/ABA.

Within the literature review, articles describing the application of EIBI with all populations (not only individuals diagnosed with ASC) were included.
1.7. Identification of Studies Relevant to this literature.

Following the searches using the above terms, the titles of the research were read followed by the abstracts. References of identified studies were searched in order to source further information.

2. The role of the Educational Psychologist.

2.1. Definition of the EP role

The first EP was employed in the early twentieth century to support with school allocation and the placement of children, as well as to assess and intervene with pupils with ALN (Squires & Farrell, 2007). The role of the EP has evolved with time, but it has maintained an important place within the education system. In 2009 Educational Psychology became a regulated profession through the operation of the Health and Care Professions Council (HCPC), as noted in Birch, Fredrickson and Miller (2015). EPs are increasingly working with other professionals who are supporting children (Gaskell & Leadbetter, 2009). This has led to increased importance of having a defined role, in order to prevent the risk of the erosion of professional identity, which multi-agency work may pose (Robinson, et al. 2005).

Although traditionally EPs have worked with the placement of children, with time the role has widened across three levels; working with the individual (which includes intervention and identifying needs), working with the organisation (for example school training), and working with the wider system, such as consulting on LA policies (Curran, Gersch & Wolendale, 2003). Gradually, EPs have moved away from a within-child model to a more systemic approach to better reflect the ‘layers’ of real-world problems (Cameron, 2006). Following a survey into the training of EPs, it was found that there was growing focus on early intervention and
prevention when working with pupils with ALN, and that EPs work at a strategic level as well as with individual children (DfE, 2011).

The description of the role of the EP and the distinctive contribution that they make has received much attention within the EP literature and has been described as an ‘almost perennial obsession’ (pg. 71, Boyle & Loughlan, 2009).

In 2005, the Department of Education reported that:

‘The Educational Psychology Service promotes learning, attainment and the healthy emotional development of children and young people aged 0-19, through the application of psychology, by working with early years settings, school (and other education providers), children and their families, other local authority officers, practitioners, and other agencies.’ (DfES, 2005, p.1).

The British Psychology Society defines the role of the EP as one that is concerned with helping pupils who are experiencing difficulty with learning and social adjustment (BPS, N.D.). Cameron described how the role of the EP is to provide ‘a psychological perspective of the nature of human problems’ (pg. 293, Cameron, 2006). More recently, the BPS outlined the role of the EP has having a unique perspective, which is based on a holistic and child-centred approach and rooted in psychological theory (BPS, 2015). As well as supporting pupils and applying psychological theory, Anderman argued that the role of the EP should also include disseminating educational research to schools and within the LA (Anderman, 2011).

A commonality amongst the definitions discussed is that EPs work to support pupils with ALN through the application of psychology. The term ‘application of psychology’ in itself could mean many things due to the enormity of the field. When researching models of delivery used by EPs, it was recognised that there had been an increase in EP services using the consultation
model (Kennedy, Frederickson and Monsen, 2008). In particular, they described how the consultation model outlined by Wagner (1995; 2000) has been the most influential. As consultation has been identified as an important aspect of EP work, Wagner’s model and the psychological theory informing the model will be discussed. To further illustrate the application of psychology by EPs as referenced in the definition of the role, the psychological theories informing consultation will be briefly described.

2.2. EP consultation and psychological theory

Consultation has been described as a ‘problem-solving relationship between professionals of differing fields’ (Conoley & Conoley, 1990, p. 84). Wagner proposed a psychological model of consultation and describes a collaborative process which combines ‘joint exploration, assessment, intervention, and review’ (pg. 11, Wagner, 2000). Within this process, the EP is seen as a facilitator rather than an expert. Through working in a collaborative way, consultation aims to bring change at the individual as well as a systemic level (Wagner, 2000).

Consultation is influenced by the theoretical framework of Personal Construct theory, symbolic interaction and systemic thinking (Wagner, 1995). Following the analysis of consultation conducted by EPs, Kennedy, Frederickson and Monsen (2008) found that EPs also used solution focused approaches and problem solving within consultation.

2.2.1. Personal Construct Theory

Proposed by Kelly in 1963, Personal Construct theory is concerned with how people make sense of themselves and the world in which they live. Each person is believed to hold their own constructs based on their own unique experiences. These constructs are tested and adapted and influence the way they perceive the world and, in turn, affect the way people
respond to situations. For example, a pupil who holds the construct that they are ‘clever’ may be quicker to offer an answer to questions in the classroom.

2.2.2. **Symbolic Interaction Theory**

George Herbert Mead (1934) established the theory of Symbolic Interaction to describe the relationship between the self and society. According to the theory, interactions between people form a society. In turn, that society influences the way people perceive things within it. The theory has been applied to the school setting (Hallet, 2007) and has historically been used to explore the influence of labels on systems and individuals (Bogdan, 1974).

2.2.3. **Systems Thinking**

Wagner (1995) described how systems thinking, developed from the family therapy literature, is key within consultation as it adds ‘ideas about the importance of sequences of behaviour and how patterns can build over time’ (pg.14). Wagner described three models of systems family therapy which are considered appropriate to the role of the EP; these are Structural Family Therapy (i.e. Minuchin, 1974), Strategic Family Therapy (i.e. Haley, 1976; Madanes, 1981) and Milan Systemic Therapy (i.e. Becvar & Becvar, 1998).

2.2.3.1. **Structural Family Therapy**

Structural Family Therapy was first described by Salvador Minuchin following his work with boys who were exhibiting behavioural difficulties. Minuchin (1974) believed that it was important to consider the family culture and relationships when addressing problems. He believed that the family unit evolves over time and consists of subsystems such as spousal (the parental relationship to each other) and sibling and parental (the relationship between the parent and the child). The therapy aims to improve family relationships within the subsystems by supporting a more functional way of interacting (Lebow & Straud, 2015).
2.2.3.2. **Strategic Family Therapy**

Based on the same assumptions as Structural Family Therapy, Strategic Family Therapy view familial relationships as interactions and effective change can be created through influencing these interactions. Strategic Family Therapy works through focusing on a familial issue in order to establish strategies to use with a specific problem (Haley, 1976). The therapy has also been referred to as the problem-solving therapy (Lebow & Straud, 2016). Strategic Family Therapy has a defined process which is flexible and can be adapted to suit the family; (Robbins, Feaster, Horigian, Puccinelli, Henderson & Szapocznik 2011). Areas for change are identified and the therapist works with the family to reframe any negativity to support motivation for change. This also allows for the reconstruction of held beliefs to support positive interactions (Szapocznik & Williams, 2000).

2.2.3.3. **Milan Systemic Therapy**

Although the Milan Systemic Therapy approach views a family as a system consisting of interactions between individuals, the therapy also views the interactions as being bi-directional (Becvar & Becvar, 1998). Boscolo et al. (1987) and Cecchin (1987) later developed the use of circular questioning to highlight differences in order to identify patterns, which are maintaining the maladaptive systemic interactions. Through circular questioning, the family are supported to reflect on their position within the family system and how they influence interactions.

2.2.4. **Solution Focused Approaches**

Kennedy, Frederickson and Monsen (2008) identified that EPs often used Solution Focused approaches within consultation. Solution focused approaches were first developed by Steve de Schazer (1982) and involved working with families to identify strategies which utilise their identified areas of strength (Winbolt, 2011). As such, the therapy uses the client’s
resources and is considered non-normative (Ratner, George & Iveson, 2012). Within a Solution Focused session, no attention is paid to the problem but on the preferred future, in a way that supports clients to develop their own solutions (Redpath & Harker, 1999). As well as being used within specific cases, Solution Focused frameworks have been used by EPs in multi-agency meetings (Alexander & Sked, 2010).

2.2.5. Problem solving process

The problem-solving process is commonly used with school psychologists in America and incorporates Behaviour Analytical perspectives such as Functional Behaviour Assessments (Steege & Brown-Chidsey, 2005). As well as using Solution Focused approaches, Kennedy, Frederickson and Monsen (2008) found that most EPs used the first three phases of problem solving, these are: problem identification, during which the problem is outlined; problem analysis, during which the likely cause of the problem is discussed and a plan is developed; and plan implementation. Problem evaluation, the third stage of the approach, was the least common phase of the problem-solving process which EPs engaged in. However, this could be due to the data for the research being collected during the initial consultation before the implementation of any strategies, meaning that the strategies could not be evaluated.

2.3. EP Theoretical position

The psychological theories informing Wagner’s model support change through helping the individual challenge constructs that they may hold (i.e. Ratner, George & Iveson, 2012). When researching the theoretical positions, Fox (2003) argued that EPs fall within two categories, positivist or constructionist. In 2008, social constructionism was identified as a perspective that was increasingly being used by EPs within their work (Kennedy, Frederickson
Monsen, 2008) with Gameson and Rhydderch (2008) arguing further that EPs are ultimately constructionist.

Research conducted by Burnham (2013) investigated the epistemological and ontological stance of 6 EPs. He conducted interviews asking questions about the role of reliable evidence within their work. Thematic Analysis (TA) conducted on the results found three themes; ‘the blurred boundary between the personal and the professional’ (pg.23), ‘ambivalence about science’ (pg.24) and ‘over-riding importance of making a difference’ (pg.25). Burnham described how the participants understood the importance of empiricism but that the needs of the child and the process of facilitating change for that child was more important than adhering to strict evidence based practice. The themes identified illustrate the importance of relationships to the EPs. Burnham concluded that although the participants did not reference one epistemological framework, the views they shared about their practice were characteristic of the philosophical position of pragmatism. Burnham also concluded that EPs should ‘have the highest level of critical awareness of the theories of knowledge that support and challenge their practice’ (pg.30).

Due to the current financial climate, the EP role within the LA has changed across the UK in that there has been an increase in the number of EP services implementing a mixed funding model and trading with schools (Truong & Ellam, 2014). This potentially has an impact on the way in which EPs work. A traded service model of working was described by Lee and Woods (2017) to have a positive impact on the EP role as schools were requesting more training and intervention planning. However, Lee and Woods (2017) also found a diminishing demand for consultation. The authors concluded that these differences are likely caused by the increased need to measure outcomes. Arguably, EPs may benefit from a greater understanding of
theoretical approaches that incorporate frequent measurement and evaluation such as Behaviour Analysis.

3. Additional Learning Needs (ALN) and the role of the EP

3.1. Definition of ALN

According to the Special Educational Needs and Disability (SEND) code of practice a child is defined as having Special Educational Needs (SEN) if they ‘have a learning difficulty or disability which calls for special educational provision to be made’ (pg.15, DfE 2015). A child is also considered to have SEN if they have a ‘significantly greater difficulty in learning than the majority of others the same age’ (pg. 16). Within Wales, the term SEN is being replaced by the term ALN, although the definition remains similar (Welsh Assembly, 2017). For continuity, the term ALN will be used in this literature review.

Statistics published by the Department of Education (2017) for England found that 14.4% of pupils are receiving support for ALN. Of the 14.4%, the primary type of need was Moderate Learning Difficulty (25.2%). Statistics from the Welsh Assembly (2015) found that there are 104,957 pupils within Wales who required additional support. Of these pupils, 88% of them are supported within mainstream school (Welsh Assembly, 2015).

Mainstream schools have a legal obligation to meet the needs of children who are recognised as having ALN through the implementation of adequate provision. However, when a child is not making sufficient progress or has needs which are beyond the remit of what a mainstream school would be expected to manage, then school or parents may request formal assessment of the child’s needs. This is also known as statutory assessment (Early Support, 2004).
A full assessment of the child’s needs is undertaken in order to inform the child’s Statement (which will become the Individual Development Plan; IDP) in Wales (Welsh Assembly, 2017) and the Education and Health Care (EHC) plan in England (DfE, 2015). Both the IDP and EHCP are legal documents and the school has an obligation to meet the provisions outlined in the document.

3.2. EPs statutory role

In both Wales and England, EPs have a statutory role within ALN and provide psychological advice as part of the statutory process. The psychological advice provides a detailed overview of the child’s needs and recommends provision that would support the pupil based on the assessment.

The EP’s role within the statutory process has been described as ‘not only restricting, but also distorting, their role by effectively transforming their psychological assessment function...to that of a resources ‘gatekeeper’ (pg.2. Fallon, Woods & Rooney, 2010). EPs reports for Statutory Assessment have also been criticised for being too long, with little psychology in them (Imich, 2013).

It has been argued that the EP should be independent to the LA (HCESC, 2007) in order to maintain the EPs impartiality when assessing a child’s needs. The potential conflict of the statutory role of the EP whilst working within the LA has been acknowledged by the SEND legislation in England in which it states that the advice given to parents should be impartial (SEND,2015). It has also been outlined by the Association of EPs in 2010 that EPs should work at ‘arms-length’ of the LA in order to promote parents’ confidence of the independence of the EPs advice (AEP, 2010).
3.3. Parental Views of Statutory Assessment

Although the statements are in place to ensure that children are accessing the support they require, parent’s views of the process have been mixed. In a report published for the UK government, Lamb (2009) described how parents had lost confidence with the school system and the support provided by the LA due to lack of communication and the lack of independent support. This lack of confidence has resulted in what Lamb coined as ‘warrior parents’ (pg. 2, Lamb, 2009) as they feel the need to fight for their child’s provision. This is also true for parents of children with ASC who have also described their experience as fighting for their child’s educational rights (Connolly & Gersch, 2013). Similar feelings were described by parents in the seminal paper by Gross in 1996. Additionally, Gross found that there was a ‘relationship between parental advocacy and resource allocation’ (pg. 6, Gross, 1996) suggesting that parents who were able to advocate for their child were more likely to receive more from the LA. This raises concerns over the equality of the ALN system.

Since Gross’ (1996) paper, a survey was conducted by the National Council for Special Education (NCSE) in 2010 of parental views of the statutory process and found that 78% of parents were happy with the assessment overall suggesting that most parents were confident in the advice and provision in place. Communication between education and health was raised as an area for improvement with 45% of parents describing the process of getting support and resources as difficult. It was also highlighted in the report that accessing a psychologist took a long time which delayed the process.

Following Gross’ (1996) and Lamb’s (2009) publications, the Department of Education (2011) published a report on the ALN assessment in England. In the document it was identified that the ALN process at the time resulted in:

- Late identification of the child’s support needs;
• Low expectations on the child’s expectations within school;

• Little choices about the schools to support their child.

Within the publication, the parents’ view of the system was described as ‘bureaucratic, bewildering and adversarial’ (pg. 4, Department of Education, 2011). As a result, the new Special Educational Needs Document (SEND) was implemented in 2014 in England in order to promote communication between the services involved in supporting a child. It also aimed to give parents more control over their child’s support through transparent communication and a personal budget to keep the process person-centred (Department of Education, 2011).

In Wales, the statementing process is currently being reviewed/amended and the Draft Additional Learning Needs Bill has been published (Welsh Assembly, 2017). The Draft ALN Bill aims to keep the child at the centre of the decision-making process, as well as the views of the family.

At any point during the statutory assessment process, parents have a right to appeal. In such cases, the information gathered by the LA, parents and other professionals is presented within a tribunal if the concerns are not resolved successfully in mediation. According to statistics published in Wales, 12% of the children recognised as having SEN have also received a statement (Welsh Assembly, 2015). In England, 2.8% of children who have SEN have received a EHC plan. Of the 2.8% who have EHC plans, the most common identified primary need of the pupils has been ASC at 26.9% (DfE, 2017). In addition, ASC was the most common area of need within tribunals in Wales in 2014-2015 (SENTW, 2017) and in England 2015-2016 (Ministry of Justice, 2017). Specific reasons behind the initiation of tribunals are not noted. However, the data suggests that parents of children recognised with ASC are more likely to be dissatisfied with the statutory process or outcomes.
For the purpose of this literature review, the role of the EP within ALN will be described further through the example of ASC.

3.4. ASC and the EP

ASC has been defined by the American Psychological Association (APA) as a complex and pervasive developmental disorder which is characterised by difficulty with social interaction and communication, as well as the occurrence of stereotypical and repetitive behaviour (APA, 2013). Individuals experiencing ASC may also experience emotional and behavioural difficulties (Maskey, Warnell, Parr, Le Couteur, & McConachie, 2013) and difficulties with attention and impulsivity (Sturm, Fernell, & Gillberg, 2004). In such cases, children with ASC could be considered as experiencing an ALN. It has been identified that EPs have an important role when working with individual children who have severe, complex and challenging needs through either working directly with the children or working with the wider systems (Farrell, Woods, Lewis, Rooney, Squires & O’Connor. 2006). The following examples will illustrate the role of the EP when supporting children with ASC.

Gus (2000) investigated the role of the EP in supporting the inclusion of a pupil with ASC within a mainstream classroom using a case study design. Gus (2000) did this through the implementation of the Circle of Friends intervention. The research reported that the intervention was successful in raising peers’ understanding and awareness of ASC. This demonstrates the EPs role in working across the levels described by Curran, Gersch and Wolfendale (2003). This research also demonstrates the application of a constructionist approach by EPs (i.e. Newton, Taylor & Wilson, N.D.). However, in the case of this research it is unclear whether the intervention resulted in any changes for the target pupil. The intervention was reviewed through meeting with peers and with the Teaching Assistant
supporting the pupil. The peers reported that they were more ‘aware that there is something wrong with him’ (pg. 465, emphasis added by researcher). The Teaching Assistant reported that the pupil appeared happier; however, data regarding the view of the pupil himself was not included. As Gus’ (2000) used a case study design and therefore included only one participant, an interview with the target pupil would have provided a valuable insight into the impact of the intervention.

EPs also have a systemic role in raising ASC awareness through training. Barrett (2006) conducted qualitative research into the use of autobiographical material in ASC training. Using autobiographical material aided teacher understanding of the experiences of children with ASC. This research demonstrates the role of the EP in ensuring a person-centred approach, as well as working systemically targeting staff’s constructs of the pupil’s need. Barrett (2006) used an exploratory approach and the sample size included was relatively small which impacts on the extent to which the research can be generalised.

Similar to Gus’ (2000) research, Barrett’s (2006) research demonstrates the EPs role in supporting pupils with ALN through working with wider systems as described by Farrell et al. (2006). As well as working with the school to support the children, EPs also have an identified role in supporting parents whilst they wait for their child’s assessment (Connolly & Gersch, 2013). EPs also have a role in supporting parents as they choose the best provision to meet their child’s needs and supporting the pupils transition into school in a way which is child-centred (Connolly & Gersch, 2016).

Both Gus (2000) and Barrett (2006) research demonstrate how EPs may be applying psychology through challenging and changing held constructs, and thinking in a way which supports systemic change. This supports the argument proposed by Gameson and Rhydderch (2008) that EPs work within a constructivist paradigm.
Some aspects of the varied EP role may require different approaches; for example, EPs are involved in the assessment of children with ASC (Waite & Woods, 1999) and have been identified by the National Institution for Health and Care Excellence (NICE) as a profession that is part of the assessment team (NICE, 2014). In contrast to other EP roles, this role may involve the collection of evidence and the description of the child’s needs rather than a role which involves promoting change and challenging constructs. The same could be true for the EPs role within Statutory Assessment and indicated that EPs may have two roles or more to manage simultaneously.

4. Behaviour Analysis

4.1. Definition of Behaviour Analysis

Within their influential book, Cooper, Heron and Howard (2007) describe behaviour as anything that an organism can do; this includes thinking, feeling and actions. Within Behaviour Analysis, an organism’s actions are often referred to as a response, which is an outcome of the interaction between the individual and the environment (Cooper, et al., 2007). Behaviour Analysis ‘is a science of studying how we can arrange our environments’ (pg.15. Cooper, Heron & Howard, 2007) to support responses that are beneficial to the individual and has been described as a science exploring and supporting how people learn.

4.2. History of Behaviourism

During a time when psychology was primarily concerned with internal processes such as consciousness, Watson founded a new view of psychology which focused on people’s observable behaviour (Watson, 1913). This was the beginning of methodological behaviourism. Watson argued that the study of psychology should concentrate on the
observation of the relationship between the stimulus (S) in the natural environment and the person’s response (R). Watson believed that he was able to use the S-R paradigm to predict human behaviour. So much so that in 1924 Watson made the claim that:

‘give me a dozen healthy infants, well-formed, and my own specified world to bring them up in and I’ll guarantee to take any one at random and train him to become any type of specialist’ (pg. 104).

Since then, Watson’s claims have been criticised by Behaviour Analysts for overinflating the ability to control human behaviour (Cooper, et al., 2007).

Building upon Watson’s work, Skinner believed that the S-R model did not fully explain human behaviour and found that behaviour was also influenced by its consequences. This led to Skinner’s (1938) research with animals in his laboratory, through which he aimed to provide a scientific account of behaviour. Skinner’s 1938 book ‘The Behaviour of Organisms’, began the branch of Experimental Behaviour Analysis.

4.3. Experimental Behaviour Analysis

Experimental Behaviour Analysis can be loosely defined as the application of scientific methods to understand behaviour (Skinner, 1966). Based on his experiments, Skinner differentiated between two types of responses; these are respondent and operant behaviours. Respondent behaviours are described as behaviours that are elicited by the presence of stimuli alone. Reflexes are examples of respondent behaviours as they are not controlled by what has happened previously and generally do not require learning. For example, most people will have an instinct to drop something hot, regardless of whether they have been burnt before. In contrast, operant behaviours are responses which are influenced by their consequences. For example, remembering the answer to a mathematics question
would be an example of operant behaviour. Skinner (1938) believed that the analysis of
operant behaviour ‘with its unique relation to the environment presents a separate,
important field of investigation’ (pg. 438).

Experimental Analysis of Behaviour has led to the descriptions of many principles of
operant behaviour and to different applications, for example the use of prompt fading in
promoting mastery with skill acquisition (see. Cengher, Shamoun, Moss, Roll, Feliciano &
Fienup, 2016), reinforcement schedules in developing self-control (see. Dixon & Holcomb,
2000) and Relational Frame Theory in language development (see. Gross & Fox, 2009).

4.4. Applied Behaviour Analysis

Applied Behaviour Analysis (ABA) is a term used to describe the application of the science
of Behaviour Analysis. The first human application of Behaviour Analysis was by Fuller in 1949.
Fuller (1949) used reinforcement to teach an 18-year-old to raise his arm despite the fact that,
at the time, it was considered by his physicians to be ‘impossible for him to learn anything’
(p. 590, Fuller, 1949). With the increase of the popularity of Behaviour Analysis, further
studies were conducted to establish whether principles of reinforcement and punishment
that had been observed in the laboratory with non-human subjects could be applied to people
(i.e. Bijou, 1955). With the increased understanding of Behaviour Analytic approaches came
its application to a variety of settings. For example, Ayllon and Michael in 1959 published ‘The
Psychiatric Nurse as a Behaviour Engineer’ which was the first piece of research into the
application of Behaviour Analysis aiming to decrease challenging behaviour within a
psychiatric hospital. More recently Behaviour Analysis has been applied within Educational
Psychology (Morris, 2003) and Behavioural Pharmacology (Latives, 2003). This science has also
been applied to explain more complex human behaviour, resulting in a ‘third-wave’ of
Behaviour Analysis and therapies for example Acceptance and Commitment Therapy (ACT) (Hayes, 2004).

In 1968, the first Journal of Applied Behaviour Analysis (JABA) was published which included a paper by Baer, Wolfe and Risley “Some Current Dimensions of Applied Behaviour Analysis”. This later was to be considered a seminal paper within the field of ABA as will be discussed.

4.4.1. Dimensions of ABA

Baer, Wolfe and Risley’s (1968) paper was considered formative as it was the first to outline the seven characteristics of a behavioural programme, which are: applied, behavioural, analytic, technological, conceptual systems, effective and generality. In addition to these dimensions, Cooper, et al. (2007) described a further five dimensions: accountable, public, doable, empowering and optimistic. The definition of the seven dimensions and the additional five are provided in Table 1. Baer, et al. (1968) were also the first to use the term ‘socially important’ (pg. 91) to described the behaviours that should be targeted within applied work; this has later developed into the term ‘social significance’ which is more commonly used today.

Table 1

Dimensions of ABA as outlined by Baer, et al. (1968) and Cooper, et al. (2007).

<table>
<thead>
<tr>
<th>Dimension</th>
<th>Definition</th>
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<tbody>
<tr>
<td>Applied</td>
<td>ABA is committed to the improvement in the quality of lives through targeting socially significant behaviour.</td>
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<tr>
<td>Behavioural</td>
<td>ABA must target a <em>behaviour</em> which is measurable and everyone’s behaviour involved should be monitored including the experimenter/supervisor.</td>
</tr>
<tr>
<td>Analytic</td>
<td>ABA must be able to show some control over the target behaviour to establish reliable functional relation.</td>
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</table>
Technological | ABA methodology must be clearly explained so that others can replicate the findings.

Conceptually Systematic | ABA procedures must be based on behavioural principles.

Effective | ABA must improve the behaviour targeted to a clinically or socially significant level.

Generality | ABA must result in change which lasts over time and across settings.

Accountable | ABA must involve frequent measures in order to determine changes.

Doable | ABA procedures must be easy to follow so that other professional/family members can support the individual.

Empowering | ABA must establish confidence in practitioners through its success.

Public | ABA must be transparent and explicit.

Empowering | ABA must promote optimism through the belief that everyone has equal potential for change and identifying little successes through constant measurement.

Socially significant behaviours are judged within the context of habilitation and defined as ‘the degree to which the person’s repertoire maximises short and long term reinforces for that individual’ (pg. 284, Hawkins, 1984). When establishing socially significant behaviours, Cooper, Heron & Heward (2007) recommended that interviews are undertaken with family members and the client, if possible, as well as considering societal factors. Ultimately, behaviours should not be targeted for the benefit of other people but should result in the long-term benefit for the client in a person-centred approach.

ABA was seen as an effective science which had application across the wider systems; this is demonstrated in the paper by Baer, et al. (1968) that reported that the dissemination of Behaviour Analysis ‘may well lead to the widespread examination of these applications, their refinement, and eventually their replacement by better applications. Better applications, it is hoped, will lead to a better state of society’ (pg. 91).
4.5. ABA Therapy

Although the term ABA refers to the application of the science of Behaviour Analysis, the term is more commonly known for its application within ASC (Dillenburger, 2012). Due to limited awareness, ABA is often seen as a standardised intervention for children with ASC, rather than a programme comprised of teaching methods which are based on Behaviour Analytic principles; Dillenburger (2011) coined this lack of distinction as a ‘categorical mistake’. Within this literature review, the application of Behaviour Analysis to individuals with ASC will be referred to as ABA Therapy.

EIBI is defined as an ‘educational model based on ABA that is used to teach children with ASC’ (pg. 35. Foran, Hoerger, Philpott, Jones, Hughes & Morgan, 2015). Within the therapy, EIBI targets socially significant behaviours, analysing behavioural functions and teaching through play (Ridgway, 2016). There is an emphasis on data and evidence-based practice, and it is the responsibility of the Board Certified Behaviour Analyst (BCBA) to oversee this practice (BCAB, 2017).

4.6. Behaviour Analysts Certification Board (BACB)

The BACB was established in 1998 in order to protect consumers of Behaviour Analysis by establishing professional standards. The BACB are accountable for three certifications of Behaviour Analysis; the Board Certified Behaviour Analyst (BCBA), the Board Certified Assistant Behaviour Analyst (BCaBA) and the Registered Behavioural Technician (RBT). Through receiving the certification through the BACB, the individual is accountable to the BACB Professional Ethical Compliance Code (BACB, 2014).

BCBA are independent professional practitioners who provide behaviour-analytic services. The BCBA is responsible for the supervision of the BCaBA and RBT. In order to
become a BCBA, the individual would need to have completed an accredited post-graduate course in Behaviour Analysis, completed the required coursework, completed 1500 hours of experience supervised by a qualified BCBA and pass an exam.

BCaBA’s are unable to work independently and require supervision by the BCBA. However, BCaBA may supervise RBTs. In order to become certified as a BCaBA, the individual is required to have an undergraduate degree, completed the required coursework, completed 1000-hour practice supervised by a BCBA and pass an exam.

The RBT are responsible for the direct implementation of behavioural programmes and work under the close supervision of the BCBA or BCaBA. However, the credential of RBT is not needed in order to implement behavioural programmes. To become an RBT, the applicant needs to be over the age of 18, completed 40 hours of training, complete the RBT competency Assessment and pass the RBT exam.

In order to maintain their certification, each certified individual is required to complete the ongoing education requirement outlined by the BACB and adhere to the Ethical Guidelines. There are currently no guidelines within the UK that Behaviour Analytic therapy can only be implemented by BCBA and the title is not protected. This means that there may be great variation in the implementation of ABA therapy within the UK and how the therapy is supervised. This may lead to an individual supervising and recommending ABA procedures without the affiliation with a professional body, the appropriate training or bound by any ethical guidelines.

4.7. ABA therapy approaches.

Behaviour Analysis has been applied in different ways within the field of therapy resulting in different approaches. These approaches vary in their emphasis and utilisation of
techniques. Pivotal Response Training (PRT) was developed by Dr Robert Koegel and Dr Lynn Koegel. The therapy focuses on teaching behaviours which are considered critical to other behaviours (Koegal & Koegal, 2006). An approach which is used particularly with younger children, is the Early Start Denver model (ESDM). ESDM has a focus on relationships and teaches skills which are developmentally appropriate for children as young as 12 months of age (Rogers & Dawson, 2009). Another approach which utilises ABA is the Verbal Behaviour Approach.

4.7.1. Verbal Behaviour Approach

In order to describe how behaviour analytic principles can be applied to spoken language and thought, Skinner published his book ‘Verbal Behaviour’ (1957) in which he describes six verbal operants of communication: mand, tact, intra-verbal, echoic, auticlitic, audience relation and textual. Definition of these are given in Table 2. Skinner defined Verbal Behaviour as ‘behaviour reinforced through the mediation of other persons’ (pg. 14. Skinner, 1957) and encompasses all modes of communication. Verbal Behaviour has been applied to support language development of children with ASC (Johnson, Kohler & Ross, 2017).

With the growth of the Verbal Behaviour approach, it is now required that applicants for BACB certification have an understanding of the operants in accordance with the BACB (BACB, 2014). Despite the increase in the Verbal Behaviour approach, there is a lack of evidence measuring its impact (Carr & Frith, 2005). This is likely to be due to the research into ABA therapy or EIBI not discriminating between different Behaviour Analytic approaches, making it difficult to determine which approaches have been evaluated.

Table 2


<table>
<thead>
<tr>
<th>Verbal Operant</th>
<th>Definition</th>
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<td></td>
<td></td>
</tr>
<tr>
<td>Term</td>
<td>Description</td>
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<td>-----------</td>
<td>-----------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Tact</td>
<td>Can be referred to as an expressive label. Tacts are under the functional</td>
</tr>
<tr>
<td></td>
<td>control of the environment.</td>
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<tr>
<td>Mand</td>
<td>Can also be referred to as a request. Mands are under the functional</td>
</tr>
<tr>
<td></td>
<td>control of the motivational operations deprivation and satiation.</td>
</tr>
<tr>
<td>Echoic</td>
<td>Echoics are under the functional control of other verbal stimulus and</td>
</tr>
<tr>
<td></td>
<td>involves the repeating of words or sounds.</td>
</tr>
<tr>
<td>Intraverbal</td>
<td>Intraverbals are also under the control of verbal stimuli but involve</td>
</tr>
<tr>
<td></td>
<td>responding to other’s verbal responses without echoing (i.e. answering</td>
</tr>
<tr>
<td></td>
<td>‘what is your name?’ is an example of an intraverbal.)</td>
</tr>
<tr>
<td>Textual</td>
<td>Written form of verbal behaviour.</td>
</tr>
<tr>
<td>Autoclitic</td>
<td>Autoclitics modify the function of other forms of verbal behaviour. (i.e.</td>
</tr>
<tr>
<td></td>
<td>‘now’ is an example of an autoclitic in the example ‘water, now’ as it will</td>
</tr>
<tr>
<td></td>
<td>influence the importance of the mand ‘water’).</td>
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Lovaas (1987) is often thought of in relation to behavioural therapy for children with ASC. In his most notable study (1987), children who had previously been diagnosed with ASC were assigned to three groups; the treatment group, control group 1 and control group 2. The treatment group (N=19) received an average of 40 hours of one-to-one behavioural therapy a week for two years; the Control Group 1 (N=19) received 10 hours or less behavioural therapy for two years, control Group 2 (N=21) received no behavioural therapy. The behavioural therapy used was based on Lovaas teaching manual (Lovaas, et al. 1980) and consisted of mainly Discrete Trial Training (DTT), reinforcement and physical aversives (‘a slap on the thigh’, pg. 5, Lovaas, 1987). Therapy received by the Treatment Group was conducted during ‘almost all of the subjects’ waking hours’ (pg. 4, Lovaas, 1987).

The therapy aimed to build compliance, teach imitations and appropriate toy play. During the first year of the research, the therapy targeted self-stimulatory and aggressive behaviour. The second year of therapy taught expressive and abstract language. The results showed that the children within the treatment condition made significant gains in intellectual and
educational functioning compared with the two control groups. Nine children (49%) from the treatment group were successfully accessing mainstream education following the therapy. The paper summarised that the treatment used would be beneficial for other children with ASC.

4.8.1. Criticism of Lovaas

Although Lovaas study (1987) illustrated how early intervention could result in massive gains for children with ASC, the study has received criticism for both its methodology and ethicality. Smith, Groen and Wynn (2000) criticised the research as the participants were not randomly assigned, raising questions regarding the independence of the groups. Also, the selection criteria used when recruiting participants, such as the ‘IQ cut-offs’ (pg. 270, Smith, Groen and Wynn, 2000), was criticised as it may have resulted in a sample more likely to respond to intervention. As well as methodological concerns, Lovaas’ study raised many ethical questions regarding the choice of teaching method, the choice of target behaviours and the use of physical aversion.

Due to the attention received by the study, ‘Lovaas therapy’ is often thought of when discussing EIBI. However, Lovaas’ research depicts a therapy which would not be implemented under the standards held by the BACB. For example, the use of punishment (i.e. an introduction of an aversive consequence to reduce the likelihood of a behaviour reoccurring) before other teaching methods goes against the BACB ethical guidelines (2017). It could be argued that at the time of Lovaas’ study the certification board was yet to be established. Also, corporal punishment defined as the ‘infliction of pain as a penalty for an offense committed by a student’ (pg. 285) was still in practice in America in the 1980’s (Bauer, Dubanoski, Yamauchi & Honbo, 1990).
During the same year as the publication of Lovass (1987) study, Skinner was reported within the New York Times as saying:

“‘what’s wrong with punishment is that they work immediately, but give no long-term results,” Dr. Skinner said. “The responses to punishment are either the urge to escape, to counterattack or a stubborn apathy. These are bad affects you get in prisons or schools, or wherever punishment is used’” (Goleman, 1987).

Instead, Skinner believed that learning should occur through reinforcement (i.e. introduction of a preferred consequence to increase the likelihood of a behaviour reoccurring), an idea which he applied on a communal level in his fictional book Walden Two (Skinner, 1948).

Regardless of the research’s methodological criticisms, ultimately Lovaas did not conduct any analysis which was recognised by Baer, et al. (1968) as including important aspects of Behaviour Analysis. Without this analysis, Lovaas’ research is an example of Behaviour Modification rather than Analysis. The historical legacy of Behaviour Modification has been argued to have resulted in a blinkered view within the UK and a misinterpretation of Behaviour Analysis, resulting in EIBI not being recognised to the same extent in the UK as it is in other western countries (Keenan, et al., 2015).

Other distinctions between the Lovaas approach and Behaviour Analytic approach, such as Verbal Behaviours, are the use of the child’s motivation and teaching them within the natural environment (Natural Environment Teaching (NET)), using naturally occurring reinforcers. Although the Verbal Behaviour approach also utilises DTT to teach specific skills when needed, it is not to the extent of the Lovaas approach, which is highly structured and based solely on table top learning (Carr & Frith, 2005). The Lovaas approach has also been
criticised for not incorporating Skinner’s Verbal Behaviour into his therapy (Sundberg & Michael, 2001).

4.9. EIBI and other Interventions

As described, EIBI is an intervention for ASC. Other intervention for ASC include Floor Time and intensive interaction. Floor Time was developed by Greenspan and Wieder in 1998. The therapy aims to engage the child with activities that they enjoy to support communication and the development of relationships (Greenspan & Wieder, 1998). Intensive Interaction was developed by Ephraim and aims to develop communication with children with ASC. This is done through taking the child’s lead during play (BILD, 2004).

Both Floor Time and Intensive Interaction focus on the development of a relationship through play with the aim of aiding communication. Play and the building of a relationship is also important within EIBI and is developed in a procedure known as pairing. Pairing is defined as the process of establishing yourself as a reinforcer through play and fun activities. By successfully pairing with a client, the client remains motivated to work for the therapist which is essential in order to teach the targeted skills (Meadows, 2018). EIBI differs from the other approaches due to the systematic way in which targets are introduced and the way in which the relationship and the procedures are analysed.

4.10. Research into EIBI

Research suggests that children diagnosed with ASC who have received EIBI for two-years before the age of six showed significant improvement in adaptive behaviours, intelligence, social skills, communication and language, and quality of life compared with a control group (Reichow, Barton, Boyd & Hume, 2012).
In a recent longitudinal study in America, EIBI has been shown to support the communication skills, social emotional skills, adaptive behaviour and physical skills of participants diagnosed with ASC with the mean age of 3 (Tiura, Kim, Detmers & Baldi, 2017). This research analysed different factors that may predict a child’s progress on a behaviour programme using a growth curve analysis. It was found that the level of communication and cognition the child had at the beginning of the programme predicted their gains on the intervention. Age was also identified as a significant factor with participants who started the programme younger overall made the most gains. Parental level of education or socio-economic background was not found to be a significant factor, suggesting that parental education does not influence the impact of the intervention. The researcher recognised three limitations of the research which may limit the validity of the scores; these included the ‘subjective nature of the developmental checklist, the use of age-equivalent scores and the use of dichotomous instead of continuous predictor variables’ (pg. 196, Tiura, et al., 2017).

Another limitation of the study which was not recognised is the lack of a control group. Without a comparable control group, it is difficult to conclude whether the gains were more than would be expected from the other approaches or development alone.

A longitudinal study conducted by Howard, Stanislaw, Green, Sparkman and Cohen (2014) researched the gains made of 61 children, between the ages of 4 and 7, who either received ABA or an eclectic education programme. All participants had received a diagnosis of ASC. The researchers found that children who received ABA therapy made statistically significant gains in cognition, social skills and self-help skills compared with the children who receive the eclectic educational programme. The study was conducted over a period of three years. The study was conducted in California, America which raises concerns over the comparability of procedures with those applied in the UK. It can’t be assumed that there are similarities
between the American eclectic education used in special educational school and the eclectic education used in other countries. Therefore, it is difficult to ascertain whether similar results would be achieved if the research were replicated in the UK.

Within the UK, Magiati, Charman and Howlin (2007) conducted a longitudinal study into the effectiveness of EIBI at home compared with nursery. 44 children previously diagnosed with ASC took part, who were between the ages of two and four; 28 received DTT technique at home and 16 received nursery provision that implemented an eclectic teaching practice. A statistical analysis showed no significant difference between the EIBI group and the eclectic nursery group. The research concluded that the results suggest that EIBI is beneficial for some children; however, specialist and intensive nursery provisions in the UK produce similar outcomes.

Although not statistically significant, the descriptive data included in the paper showed that the EIBI group made moderate gains in cognition, receptive language and autism severity. The group receiving EIBI made minor gains in adaptive behaviour and no notable gains in expressive language and play skills. The lack of gains in these skills maybe due to the primary method of teaching being DTT rather than teaching through play. Through teaching through play, arguably the children would have learnt play skills and expressive language skills experientially.

A meta-analysis of the research into EIBI suggests that, despite some children showing gains in adaptive behaviour, there are methodological concerns within the literature (Warren, McPheeters, Sathe, Foss-Feig, Glasser & Veenstra-VanderWeele, 2011). Within this paper, research was considered good if the paper included a RCT and a manualised treatment.

This definition of a ‘good paper’ within Warren et al’s (2011) article poses a challenge for the literature within ABA therapy, as research often consists of within participant’s
designs. Within-participant designs allow the baseline and treatment data to be collected from the same participant which accounts for individual differences, such as the use of different reinforcers but does not account for natural gains. Another consideration is that the therapy is defined as ABA in that it utilises procedures that adhere to Behaviour Analytic principles. The procedures used are dependent on the individual child’s needs and environment, therefore, there is no ‘standardised’ ABA treatment. A standardised treatment was required to be considered a ‘good’ paper by the meta-analysis conducted by Warren et al. (2011), which means that the individual nature of EIBI was not taken into consideration. This potentially demonstrates the lack of understanding of EIBI as an individualised approach and the ‘categorical mistake’ as outlined by Dillenberger (2011). This raises the importance of the dissemination of Behaviour Analysis to other professionals.

5. EIBI in the UK

5.1. Application

Within the UK, Hastings and Johnson (2001) reported that there were approximately 250 families who had established EIBI programmes at home in 1999. Of the 250, 109 of the families had been to court in order to receive funding from the LA. No recent data could be found; however, in 2013 it was reported that there continues to be a high demand for ABA within the UK (Lambert, 2013). There are also 14 schools within the UK that solely use ABA approaches (Griffiths, Fletcher & Hastings, 2012).

In a recent review in Scotland, EIBI was recognised as an established therapy for children with ASC and recommended that there should be ‘access to support from staff trained in applied behaviour analysis-based techniques’ for children diagnosed with ASC (pg. 24, SIGN, 2016). Although there are no current reviews available for other countries within the UK, the
National Health Service (NHS) within the UK published an advert requesting a study to review the use of EIBI with children with ASC (NHS, 2016). Within the advert, it described how EIBI has been demonstrated as a cost-effective therapy for children with autism in Canada and that the research aimed to investigate whether this would be true in the UK. The NHS research advert and the Scottish review suggests that there is an increase of interest in EIBI on a wider systemic level. This arguably could lead to an increase in awareness and a potential increase in demand for the therapy in the UK.

5.2. Criticism of EIBI

ABA therapy can arguably be described as one of the most controversial therapies for individuals with ASC and has received much criticism. One of the main criticisms relates to how ABA is promoted as a ‘cure’, which does not support a neuro-diverse society. Neurodiversity is defined as the support of ‘variations in neurological development’ and views neurological difference as something that should not ‘be pathologised using a purely medical model of disability’ (pg. 11, Milton, 2014). Milton, who describes himself as Autistic, argued that ABA therapy lacks an understanding of the ASC experience as it is other non-ASC people deciding what behaviours are positive or negative. Within his paper he described how ASC is not something to be cured but a ‘description of someone’s cognition’ (pg. 12, Milton, 2014). When discussing ABA therapy in a newspaper article (Parker, 2015), Sequenzia, who was described as a non-speaking Autistic is quoted as saying that:

‘they refuse to acknowledge that being trained to obey, and to force our brains to do things in a way they are not wired to do, causes long-lasting pain or makes autistics learn the ‘correct’
answers and ‘behaviours’, while keeping their autistic essence buried and unexplored.’ (Parker, 2015).

Within the same article, McEachin from an ABA provider argues that rather than reducing behaviours associated with ASC, ABA therapy aims to teach behaviour so that individuals diagnosed with ASC are able to make choices. Within the article, McEachin is quoted as saying ‘I don’t want this five-year-old with autism being forced to be solitary because he never learned how to connect with other people’ (Parker, 2015).

The difference in the views held by Amy Sequenzia and McEachin demonstrates the different construction of what is appropriate; for example, while it could be argued that the process of learning ‘correct’ behaviour is disabling the individual from being their ASC selves, it could also be argued that teaching these behaviours will enable the individual to make choices. As described in the amplification of the title, education has an important role in ensuring that the child is able to meet the five outcomes of the ECM (DfE, 2003). Disputably, teaching skills will enable an individual with ASC to succeed the identified outcomes. However, Sequenzia’s argument and legislation such as the Right of the Child (1990), highlights the importance of prioritising the voice and aspiration of the child when considering targets. This ensures that the identity of the child is protected and that social significant skills are chosen so they are able to live the life that they choose. The importance of involving the client in planning and consent, as well as recognising the client’s goals, has been recognised in the BACB ethical guideline 4.02 and 4.03 (BACB, 2014).

Landrum and Kauffman (2006) discussed how behaviour analytic influences are often not generalizable and can be setting specific. Gains which are made in one setting are often not generalised to others due to poor programme design and that insufficient exemplars are trained; instead a ‘train and hope’ approach (pg. 16) is utilised. This paper also discussed the
ethical concerns and the potential for misuse of Behaviour Analysis. It describes how the procedures are not to blame but rather how they are used. Although not mentioned in the paper, this does present an argument for programmes to be supervised by someone adequately trained and bound by ethical guidelines, such as a BCBA. The paper also describes the role of external reward and how it can be seen as diminishing intrinsic motivation. However, Landrum and Kauffman (2006) argue that research into the impact of extrinsic motivation on internal motivation is often conducted within an un-naturalistic setting which may not be generalizable to real life situations. The paper describes how the lack of rewards can have a greater negative effect on the relationship of the pupil and the teacher which will also diminish motivation.

Another criticism of ABA is that it is often considered too intensive and promotes compliance which can increase the individuals risk of abuse (Unstranged Mind, 2016). Within the blog, it is described how behaviours are taught with little consideration of the emotional impact on the individual. It also describes a systemic issue in that therapists may be describing their work as ABA in order to adhere to the medical insurance criteria in America. This raises the importance of raising awareness of the BACB ethical standards across a range of professions to ensure the high quality of ABA therapy. Unstranged Mind (2016) blog also demonstrates the importance of considering the impact of programmes on the child and the importance of considering the child’s perspective. It has been recognised that EPs hold a holistic and child-centred view (BPS, 2015) which may be valuable within an ABA programme when considering the significance of targeted skills for the individual.

The importance of considering the child’s needs was identified by Alex Lowrey (2017). Alex describes his experience of ABA between the ages of 6 and 13 and how the therapists had supported him with his social skills and managing his anger. Alex noted that ABA has
assisted him to become the person he is today. He also described practices he experienced which he considered potentially harmful; these were programmes that prevented him from stimming and the importance placed on being similar to his cohort. Alex’s Blog demonstrates how ABA can be used to enable individuals to achieve personal goals and the importance of protecting the individual’s idiosyncratic qualities.

Typically, the views of people with ASC are drawn from Blogs written by people who are able to communicate their thoughts. These Blogs provide a valuable insight into the views of individuals who have experienced EIBI. However, there is limited research which has included the views of the children. ABA therapy is increasingly using and developing procedures in order to dignify the client’s choice through pairing coloured cards with specific programmes in a concurrent-chain procedure (Hanley, 2010).

5.3. Parental experiences

Previous research has investigated the experiences of parents, who had established EIBI programmes, across Northern Ireland (McPhilemy and Dillenburger, 2013). Open-ended questionnaires were distributed to families recruited through an ABA/EIBI provider. The questionnaire consisted of 20 questions that asked for the family demographics, reasons for using EIBI and how they became aware of ABA therapy. The questions also asked what support they had received whilst establishing the programme. All of the parents highlighted the lack of statutory services and support as the reason why they began the EIBI programme. The participants had learned about ABA through their own research and reported that the programmes had had a positive impact on their lives at home. When asked about the support the families had received, the parents described the negative attitudes of professionals towards the programme, with one parent reporting that the ‘Educational Psychologist was
dismissive’ (pg. 155, McPhilemy & Dillenburger, 2013). This suggests that Educational Psychologists (EP) work with pupils who received EIBI support, despite the lack of research within the EP literature regarding their role with EIBI programmes.

Recently, Denne, Hastings and Hughes (2017) conducted research into the views of parents of children with Autism on ABA. A survey was sent to parents from Wales, England and Scotland which included statements relating to perceptions around ABA such as ‘I am uncomfortable, or would be uncomfortable, using ABA because it is not ‘approved’ by the education or health local authorities in the UK’ (pg.596). One hundred and fifty-one parents rated how much they agreed to the statement. The results suggested that the majority of the parents (62%) disagreed or strongly disagreed with the statement that they would feel uncomfortable using ABA due to the lack of LA approval. There was also general agreement amongst parents that ABA focuses on increasing positive behaviour, teaches skills to children and is not chosen as a way of ‘curing’ their child. The majority of the participants who took part in the survey were female (89%). Also, the majority of participants who took part in the survey had previously used behavioural interventions in the past (64%) which may have influenced the results and their willingness to participate. Interestingly, it was also recognised that the majority of the participants had an undergraduate level qualification or higher (77%). The paper suggested that the higher education level of the parents mean that parents are able to research available interventions. This leads to an advantage for parents of higher-economic status, as they are more likely to research and able to self-fund the interventions. This results in the inequality between higher and lower socio-economic groups as described by Gross (1996).

Hastings and Johnson (2001) reported that there had been an increase in early intervention programmes worldwide and ‘therefore, it is vital that we understand more about the impact of such interventions... in order to ensure effective psychological support services’ (pg. 328). Despite the increase, there has been little research into the role of the EP within EIBI. Connor (2003) describes the importance of the EP to ensure regular visits to the child to establish progress and plan future targets. Connor argued that the visits would serve to monitor the programme and could help establish a partnership between LA and families (Connor, 2003). Although, Connor provides a comprehensive description of the possible role of the EP within these programmes, a limitation is that the article has focused on the Lovaas model of delivery and is based only on his experiences rather than other stakeholders.

7. Research Rationale

There is evidence to suggest that the number of EIBI programmes are increasing within the UK (i.e. Hastings & Johnson, 2001; Lambert, 2013) but there is currently little research investigating the experiences of external professionals working alongside these programmes.

The EIBI programmes are aimed to teach skills to children with ALN, a population with whom EPs work (Birch, Fredrickson & Miller, 2015). This highlights the need for further research into the experiences around the role of the EP working with this population. In order to inform EP practice regarding the possible role within EIBI, the views of the parents and EPs will be sought, with the aim to establish factors that support a collaborative working relationship and when these maybe useful.
8. References


Part 2: Major Empirical Paper

(5996)
Abstract

The application of Behaviour Analysis as an early intervention for children with Autistic Spectrum Condition is increasing within the United Kingdom (Lambert, 2013). Although there is evidence to suggest that Educational Psychologists (EPs) are involved in some capacity with Early Intensive Behavioural Therapy (EIBI), there is a lack of research to inform the profession. Semi-structured interviews were held with four parents who have a child receiving EIBI and two EPs with experience of EIBI. The questions asked were related to the role of the EP within EIBI. The data were analysed using Thematic Analysis as described by Braun and Clarke (2006). The eleven themes identified portrayed the difficult relationship between the Local Authority and parents. Recommendations are made to the role of the EP as to how to work effectively and inclusively with cases involving EIBI.
1. Introduction

1.1. What is Behaviour Analysis?

Behaviour Analysis ‘is a science of studying how we can arrange our environments’ (pg.15. Cooper, Heron & Heward, 2007) to support behaviours that are beneficial to the individual. Behaviour Analysis was developed from the work of B. F. Skinner (1938) who recognised that an organism’s response is influenced by its consequence. Skinner believed that all human actions are a result of the individual’s interactions with the environment; including language (Skinner, 1957) and thinking (Skinner, 1957). Since Skinner’s work, the principles of Behaviour Analysis have been applied to a variety of fields, including behavioural pharmacology (Laties, 2003) and mental health (Hayes, 2004).

1.2. Applied Behaviour Analysis (ABA)

ABA refers to the application of the science of Behaviour Analysis but is often associated with the therapy for children with Autism Spectrum Condition (ASC). Early Intensive Behavioural Intervention (EIBI) is a form of therapy which can be defined as an ‘educational model based on ABA that is used to teach children’ (pg. 35. Foran, Hoerger, Philpott, Jones, Hughes & Morgan, 2015). EIBI has been described as ‘entirely child/person centred and pragmatic’ (Dillenburger, 2011).

1.3. EIBI therapy within the UK

Hastings and Johnson (2001) reported that there were approximately 250 families who had established EIBI programmes at home in the UK in 1999. Of the 250, 109 of the families had been to tribunal in order to receive funding from the Local Authority (LA). In 2013
it was reported that there continues to be a high demand for ABA within the UK (Lambert, 2013) although no recent data could be found.

In a recent review in Scotland EIBI was recognised as an established therapy for children with autism and recommended that individual’s diagnosed with ASC should access ‘support from staff trained in applied behaviour analysis-based techniques’ (pg. 24, SIGN, 2016). The National Health Service (NHS) published an advert requesting a study to review the use of EIBI with children with ASC (NHS, 2016). Within the advert, EIBI was described as a cost-effective therapy for children with ASC and that the research aimed to investigate its application within the UK.

Arguably, the increase of interest in EIBI on a wider systemic level could lead to an increase in awareness, and consequent demand for the therapy. Hastings and Johnson (2001) reported that there had been an increase in early intervention programmes worldwide and ‘therefore, it is vital that we understand more about the impact of such interventions ... in order to ensure effective psychological support services’ (pg. 328).

1.4. Parental Experience.

Previous research has investigated the experiences of parents who had established EIBI programmes across Northern Ireland (McPhilemy & Dillenburger, 2013). Open-ended questionnaires were distributed to families recruited through an ABA/EIBI provider. The questionnaire consisted of 20 questions relating to the family demographics, reasons for choosing EIBI and how they became aware of ABA. The questions also asked what support had they received. All of the parents highlighted the lack of statutory services and support as the reason they began the EIBI programme. The participants had learned about ABA through their own research and reported that the programmes have had a positive impact on their
lives. The parents described the negative attitudes of professionals towards the programme. One parent reported that the ‘Educational Psychologist was dismissive’ (pg. 155, McPhilemy & Dillenburger, 2013). This suggests that Educational Psychologists (EP) work with pupils who received EIBI support, despite the lack of research within the EP literature regarding their role with EIBI programmes.

1.5. Research Rationale

There is evidence to suggest that the number of EIBI programmes is increasing within the UK (i.e. Hastings & Johnson, 2001) but there is currently no research investigating the experiences of professionals working alongside the programmes. There is evidence to suggest that EPs are working with the population accessing EIBI in some capacity (McPhilemy & Dillenburger, 2013) despite the lack of research. This highlights the need for further investigation into the role of the EP working with this group.

1.6. Research Questions

The research will aim to gain information for the following questions:

1. What is the role of the EP within EIBI programmes?

2. What is supporting the EP within their role?

3. What is preventing the EP from fulfilling their role?

4. What are the recommendation for the role of the EP within EIBI?
2. Methodology

2.1. Design

2.1.1. Ontology

The research will take a critical realist ontological position (Bhskar, 2008) as it recognises that there is a reality that remains independent of interpretation, which is perceived differently by individuals.

2.1.2. Epistemology

The social constructionist approach (i.e. Burr, 2003) informed the analysis and interpretation of the data.

2.1.3. Design

Due to the investigatory nature of the research, a qualitative research design was used. This would allow the collection of in-depth information which can be analysed to describe the overall experience of the participants. Semi-structured interviews were chosen as the method for data collection and would allow for the questions to be prepared in advance whilst allowing flexibility to discuss topics raised by the participants. An interview schedule was designed prior to the pilot study (Appendix A). Semi-structured interviews have been recognised as an appropriate data collection method for the research paradigm (Harper, 2011).

The data set was transcribed anonymously and analysed using Thematic Analysis (TA). TA was chosen as it would allow for the identification of common themes within the sample and across groups (Joffe, 2011). TA was deemed the most appropriate method of analysis due to its flexibility (Braun & Clarke, 2006).
2.2. Participants

2.2.1. Selection criteria.

Initially, EIBI was defined as an educational programme which uses ABA to teach skills to children who were younger than 3 at the onset of the programme. However due to the limited participant response following the initial recruitment process, the age limit of the child was increased to five. The programme could be done at home, within a clinic setting or within a school. It was not specified that a BCBA needed to be involved in the programme.

The inclusion criteria to participate included either: a parent of a child who has received EIBI for at least 6 months, an EP with experience of EIBI programmes within their role. It was not specified that the EP needed to be employed by the LA to participate. The child could be of any age at the time of interview.

Parents or EPs who did not meet the inclusion criteria were unable to participate and excluded from the research.

2.2.2. Participant Recruitment.

Figure 1 depicts the participant recruitment process.
A small sample of 2 EPs and 4 parents was recruited. The demographics of the participants are available in Table 3. Table 4 and 5 includes information regarding the EIBI programme.

### Table 3

**Table outlining the participant information.**

<table>
<thead>
<tr>
<th>Participants</th>
<th>Role/Profession if shared</th>
<th>Country</th>
<th>Mode of Interview</th>
</tr>
</thead>
<tbody>
<tr>
<td><strong>Parents</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
<tr>
<td>P1</td>
<td>Secondary school teacher</td>
<td>England</td>
<td>Phone</td>
</tr>
<tr>
<td>P2</td>
<td>EP</td>
<td>England</td>
<td>Phone</td>
</tr>
<tr>
<td>P3</td>
<td>Scientific Researcher</td>
<td>Wales</td>
<td>In Person</td>
</tr>
<tr>
<td>P4</td>
<td>Information not shared.</td>
<td>England</td>
<td>Phone</td>
</tr>
<tr>
<td><strong>EPs</strong></td>
<td></td>
<td></td>
<td></td>
</tr>
</tbody>
</table>
Table 4

Table Outlining Information of EIBI Programme (Parents).

<table>
<thead>
<tr>
<th>Participant Number</th>
<th>Length of programme (years)</th>
<th>Age of child at onset</th>
<th>Type of Programme</th>
<th>Ran by BCBA</th>
<th>Tribunal</th>
</tr>
</thead>
<tbody>
<tr>
<td>P1</td>
<td>11</td>
<td>3 years</td>
<td>Verbal Behaviour</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>P2</td>
<td>2</td>
<td>16 months</td>
<td>Verbal Behaviour</td>
<td>Yes</td>
<td>No</td>
</tr>
<tr>
<td>P3</td>
<td>3</td>
<td>3 years</td>
<td>Information not provided</td>
<td>Yes</td>
<td>Yes</td>
</tr>
<tr>
<td>P4</td>
<td>3</td>
<td>3 years</td>
<td>Verbal Behaviour</td>
<td>Yes</td>
<td>Yes</td>
</tr>
</tbody>
</table>

Table 5

Table Outlining Information of EIBI programmes (EPs).

<table>
<thead>
<tr>
<th>Participant Number</th>
<th>No. of Cases</th>
<th>Age of Child at onset of EIBI</th>
<th>Tribunal</th>
<th>Time of cases</th>
</tr>
</thead>
<tbody>
<tr>
<td>EP1</td>
<td>2</td>
<td>5</td>
<td>Yes</td>
<td>2016</td>
</tr>
<tr>
<td></td>
<td></td>
<td>5</td>
<td>No</td>
<td>Ongoing</td>
</tr>
<tr>
<td>EP2</td>
<td>1</td>
<td>3</td>
<td>Yes</td>
<td>Ongoing</td>
</tr>
</tbody>
</table>

2.2.3. Procedure

Once the signed consent form had been received by the researcher, participants were asked for their general location to ascertain whether an interview in person was possible (Table 3). Participants in Wales were asked if they would like the interview to be conducted
in Welsh or English. All participants completed the interview in English. Interviews with the parents were held either over the phone or in a public location. Interviews with the EPs were held within their place of work.

Time was taken at the beginning of the interview to build rapport. Prior to recording, the researcher ensured that the participants understood their rights. The researcher followed the interview schedule with the addition of questions if any information was shared by the participants that was of interest. All interviews were recorded using a voice recorder and lasted between 30 and 90 minutes approximately. Once the interview was completed, a debrief was sent to the participant (Appendix G).

2.3. Pilot Study

The pilot study consisted of the first EP and parent that expressed interest in the research. The EP and Parent were asked the interview questions designed. At the end of the interview, the two participants were asked to evaluate the interview questions. The participants noted that the questions were clear and that there were no additional questions that they would suggest to include. As such, the researcher felt that the interview questions were sufficient in gaining the experience of the participants. As there were no amendments to the interview questions, the data collected during the pilot study was included in the main sample.
2.4. Analysis

2.4.1. Validity

To ensure the validity of the results, supervision was sought to ensure accurate analysis and researcher objectivity. In the light of the researcher’s previous experience, any interpretation of the results was discussed thoroughly during the supervision.

2.4.2. Thematic Analysis

The recordings were transcribed verbatim by the researcher and analysed using the six steps outlined by Braun and Clarke (2006) provided in Table 6. The transcripts were analysed for both semantic and latent meaning. The participants’ data were analysed independently before the information was collated across the participants.

Table 6

*Braun and Clarke’s (2006) six stages of TA.*

<table>
<thead>
<tr>
<th>Phase</th>
<th>Description</th>
</tr>
</thead>
<tbody>
<tr>
<td>1. Familiarise with data</td>
<td>The researcher transcribed the interviews, read and re-read the transcripts. Any initial ideas were noted.</td>
</tr>
<tr>
<td>2. Generation of codes</td>
<td>Codes were given to interesting features within the data in a systematic way. Data was collected for each of the codes.</td>
</tr>
<tr>
<td>3. Development of themes</td>
<td>The codes were collated and compared across the data set to identify potential themes.</td>
</tr>
<tr>
<td>4. Review</td>
<td>The transcripts were re-read with the themes in mind in order to evaluate the validity of the themes. The data within the codes were also reviewed.</td>
</tr>
<tr>
<td>5. Defining and naming themes</td>
<td>A label was given to the themes which aimed to accurately reflect the content of the codes. Due to the experience of the researcher, themes were discussed with the supervisor to ensure impartiality.</td>
</tr>
<tr>
<td>6. Producing the report</td>
<td>The themes were described within a report.</td>
</tr>
</tbody>
</table>
2.5. Ethical Considerations

Ethical approval for the research was given by the University of Cardiff Ethics Committee prior to data collection. Throughout the research, the ethical guidelines outlined by the British Psychological Society (BPS) were followed (BPS, 2014).

The ethical considerations and steps taken by the researcher are outlined in Table 7.

Table 7

<table>
<thead>
<tr>
<th>Ethical Concern</th>
<th>Measures in place</th>
</tr>
</thead>
<tbody>
<tr>
<td>Informed Consent</td>
<td>Participants informed consent was ensured prior to the interview. Gatekeeper consent was collected by stating within the email to the PEP and the message sent to the group administrator, that by sharing the information they will be providing their consent. EPs who contacted the researcher following the post on EPNET were required to seek the consent of the PEP or employee if appropriate.</td>
</tr>
<tr>
<td>Confidentiality of participants</td>
<td>In accordance with the data protection legislation (Data Protection Act, 1998), the identity of the participant was protected at all times. Information was kept on a computer which is password protected and only accessible by the researcher. Transcription was completed by the researcher within two weeks of the interview at which point the data was anonymised. Once the electronic recording had been transcribed it was deleted. All other data will be kept by Cardiff University indefinitely.</td>
</tr>
<tr>
<td>Anonymity</td>
<td>The consent form given to the participants iterated that no identifiable information is to be discussed. Any identifiable information that was shared by a participant was not included in the transcript.</td>
</tr>
<tr>
<td>Participant and researcher relationship</td>
<td>The researcher aimed to build rapport with the participants before conducting the interview in order to establish an open and supportive environment. The researcher ensured that the participant was comfortable and able to express her/his views freely and as fully as possible. The researcher was able to fully answer any questions asked by the participant. To ensure that the participants felt comfortable to share their honest opinions, the researcher’s history within ABA was not disclosed.</td>
</tr>
<tr>
<td>Raising difficult emotions</td>
<td>None of the participants showed any discomfort during the interview. The participants had access to the supervisor’s and Cardiff University Ethics Board contact details if required. It was felt the participants left the interview in the same state that they entered.</td>
</tr>
<tr>
<td>---------------------------</td>
<td>----------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------------</td>
</tr>
<tr>
<td>Language</td>
<td>Although the interview could be held in either English or Welsh, all the interviews were held in English.</td>
</tr>
<tr>
<td>Safeguarding</td>
<td>The researcher worked in accordance with Cardiff University safeguarding recommendations, as outlined on <a href="https://inside.psych.cf.ac.uk/postgraduates/ethics/application/proformaguidancenotes/children_vulnerable_adults.php">https://inside.psych.cf.ac.uk/postgraduates/ethics/application/proformaguidancenotes/children_vulnerable_adults.php</a></td>
</tr>
<tr>
<td>Right to withdraw</td>
<td>The participants were reminded at the beginning of the interview that they may stop at any time without consequence. None of the participants chose to finish the interview early. Participants were also reminded that they may withdraw the data they had provided up to two weeks following the recording. After these two weeks, the interviews were transcribed anonymously and so individual data could not be identified and removed.</td>
</tr>
<tr>
<td>Debrief</td>
<td>On completion of the interview, all participants were given a debrief form (Appendix F).</td>
</tr>
</tbody>
</table>

3. Results

3.1. Overview

Due to the richness of the data and to capture all the information shared by the participants, 11 themes were identified and will be described. The complete quotes within each theme are available in Appendix H.

To illustrate a possible relationship between the themes, an overarching thematic map is shown in Appendix J.
3.2. Theme 1: Us and Them

Theme 1 describes the hostility and the lack of cohesion between systems. The subtheme “separate” describes the clear division between private services and LA. EP1 described how the LA is fearful of contacting private ABA companies. P2 described how advice received from the LA is perceived differently by school than that received by private companies. P4 described how the advice she received from the independent EP was unbiased compared with the advice she received from the LA EP.
The subtheme of “battle” describes the preparation taken by the systems to fight. EP2 felt that private companies were preparing parents for battle which results in conflict from the onset. Within the same subtheme, P1 described how she prepared to win the battle with the LA through gaining the support of the LA EP rather than seeking private support.

The subtheme of “motives” describes the EP view of the motives of private companies which are different to that of the LA. Both EPs describe how private companies prioritise making a profit. EP2 also described how private companies exaggerate the needs of the child and the complexity of the therapy in order to maximise cost.

EP1, P2 and P4 did describe situations where the LA and private companies worked together, contrary to the theme of “us and them”. This is illustrated in the subtheme of “cooperation”. These involved the EP attending annual reviews, the BCBA training school staff and the EIBI therapist working within a mainstream school. P4 felt that the therapist’s acceptance within the school was due to her previous experience of working within the system and understanding the school environment.
3.3. Theme 2: Being Heard

Theme 2 refers to the described inequality within the system and the difficulty parents faced in being heard. Within the subtheme of “parental agency”, P1 described how she repeatedly called and emailed the EP in order to share her view. She described how she videoed her son completing an activity and took it to the LA offices as the EP did not believe her. P3 described it as an uphill struggle to get any support from the LA.

The subtheme of “difference in voice” described how the EPs perceive their opinion as being valued within the LA. Parents shared this view and described how serious the EP recommendations are taken when drafting statements/ EHCPs and also their difficulty in getting their opinions heard.

“Unfairness” was a subtheme that was particularly strong in P1 transcript. She described how she felt the LA was willing to fund EIBI once evidence had been collated,
meaning that only the families who were able to accrue that evidence, and challenge the LA, received EIBI. P3 described how it was unfair that parents were expected to run their own home programme because of the enormity of the dual-role of running a programme and being a parent.

3.4. Theme 3: Uncertainty

Figure 4

Theme 3: Uncertainty

Theme 3 describes the uncertainty around EIBI which impacts the EP and parent’s confidence. Within the theme of “de-skilled”, EP1 described confusion around EIBI due to the differences between the two programmes she had worked with. EP2 described the lack of communication on the parent’s part which resulted in her not having all of the information
needed. Similarly, P1 described her lack of understanding of panel, which may contribute to the parents feeling de-skilled and uncertain of the process.

Within the subtheme of “inexperience”, both EPs described their lack of experience of EIBI which impacted on their role.

The subtheme of “helplessness” refers to three parents describing the lack of support from LA services. P1, 2 and 3 described how the LA services had offered no way forward. Instead, P1 and P2 described the support services view of their child’s abilities.

Within the subtheme of “mistrust”, EP1, P1, P3 and P4 described how the other parties had hidden motives behind their actions; EP1 described how parents had no intention of integrating their child to a mainstream environment but instead agreed in attending school so the LA would fund the programme.

“Obscurity” refers to the difficulty EPs had in understanding EIBI reports due to the complex terminology used.

3.5. Theme 4: Tribunal Pressure

Figure 5
**Theme 4: Tribunal Pressure**

Theme 4 refers to the Impact of tribunals on the EPs. Within the subtheme of “defence”, both EPs described the difficulty in building positive relationships with parents as the contact that they have is within a context of conflict. Within the subtheme of “unusual”, both EPs described how the pressure of the tribunal processes impacts negatively on their work due to additional time pressure and an increase in paper work which is different to their usual role; this is linked to the theme of “de-skilling”.

### 3.6. Theme 5: View of Expertise

![Diagram of Theme 5: View of Expertise]

**Figure 6**

**Theme 5: View of Expertise**
The theme of “view of expertise” includes the parents view of the experts with EIBI and the LA. The subtheme of “doubt of ability” refers to the parents questioning the LA support services expertise and evidence-based practice, as well as their general knowledge of EIBI. This contrasted with the view that P1 and P4 had regarding the support from the ABA providers. P2 also describes her doubt over the ability of school staff to maintain her son’s skills, which were gained through his EIBI programme.

The theme of “importance of accreditation” refers to the view held by all parents that a BCBA was essential. It is important to note that all the parents that participated had accredited BCBA’s supervising their programmes which may have impacted their views. BCBA’s were not mentioned within the EP transcripts. It is unclear whether this is due to the lack of awareness or lack of direct questioning. The subtheme of “providing a way forward” describes how parents feel that EIBI gave them strategies which contrasts with the subtheme of “helplessness”. P2 felt that the EP did not provide the way forward. “Independence” refers to the parents’ view of the influence of the LA on the EPs ability to recommend EIBI. Within this subtheme, EP1 refers to the Local Authority hat that is worn when considering provisions, supporting the parental view of the influence of LA employment on EP work.
3.7. Theme 6: EIBI

![Diagram of EIBI]

**Outcomes**

"It has been successful with this little boy" (EP2)

"when you take a step back and review it after a longer period of time you can see wow this has gone really well" (EP1)

"because the research suggests it's a lot more rigid when actually it wasn't rigid so because it's child led" (EP2)

**Application**

"ABA isn't just for people with Autism and not just for younger children" (P3)

"Lovaas ABA has got a very bad press" (EP2)

"a lot of them are still stuck in the Lovaas and the we're 30 years behind in our understanding of it" (P1)

"maybe it's my lack of knowledge about ABA but I don't see it as being that different from really good...play based learning" (EP2)

"the local authority EP doesn't understand ABA very well and we might have knowledge about behaviour psychology in general but not ABA" (P2)

**Lovaas Legacy**

**Specialism**

The theme EIBI includes descriptions of the therapy. “Outcomes” refers to the change that EIBI brings to the child. Both EPs described the positive impact of EIBI and how their opinion of EIBI had changed once they had seen the programme. P2 described how this was also the case of a Speech and Language Therapist within the LA in which she worked. P3 described how EIBI could help more people, but that misinformation is preventing implementation.

“Application” includes descriptions by the EPs that the research does not reflect the implementation of the programme. P2 and P3 describe how EIBI is seen as more restrictive and intensive than its application in practice. P3 also describes the wider application of ABA.
Lovaas legacy refers to the impact that Lovaas research has had on the view of EIBI. EP2 described her concern around ‘Lovaas ABA’ whilst P1 describes the lack of understanding of modern EIBI. “Specialism” refers to the view of EIBI as a distinct science which differs from behavioural psychology. P1, P2 and P3 described how ABA is often misunderstood, which results in EPs and other professionals claiming that they are able to run programmes and use terminology without specific training. EP2 described how she found it difficult to distinguish EIBI with play-based learning or behavioural strategies already used within schools.

3.8. Theme 7: Assumption

Theme 7 includes the assumptions made by different parties within EIBI which may impact on the ability to work collaboratively. Within the subtheme of “prejudice”, P2, P3 and P4 described the assumptions that professionals make of their child’s abilities which differs from parental views. P3 believed that this different view of her child’s ability led to the LA
raising safeguarding concerns regarding her choice of education. P2 described how the school make an assumption of ABA despite its measurable impact.

Within the second subtheme, all parents described their perception of the commitment of the LA in upholding and defending the established LA provision over meeting individual needs.

3.9. Theme 8: Relationships

Figure 9

Theme 8: Relationships
Whereas Theme 1 refers to the relationship between systems, theme 8 of "relationships" included subthemes which were recognised as threatening collaboration on an individual level. “Conflict” refers to the difference between the EP and programme ethos and priorities and a difference in the perception of the suitability of EIBI.

“Lack of communication” refers to the lack of openness between the parents and the LA and the EP and the parents. EP1 describes the lack of communication by the BCBA. “visibility’ refers to the lack of involvement from the EP other than the initial assessment, which was described by parents with a negative connotation. “Familiar” refers to the importance placed on relationships by both EPs, within their generic role, which often differs from the relationships within EIBI.

3.10. Theme 9: Contrasting Priorities

![Figure 10](image-url)
Theme 9: Contrasting Priorities

“Contrasting Priorities” refers to the different value that is placed on the child’s needs, financial considerations and evidence based practice between parents and EP. Within the subtheme of “protecting resources”, EP1 described how funding of one EIBI programme could be used to help a greater number of children within the LA. P1, P2 and P4 described how the cost of the programme was the biggest barrier to the LA agreeing to the provision.

The subtheme of “developing skills” refers to the importance placed by parents on developing socially significant skills. Within the subtheme, EP1 described how the skills learnt are significant in terms of the functioning of the family and the child’s independence, but they also had significant cost implications for the LA. EP2 describes the programme as child led and how this may raise challenges when transitioning into school.

“Evidence-based practices” refers to the varying importance that is placed on evidence. EP1 described how the EIBI professionals concentrated on the data which drew focus away from the child. This contradicts with the description of EIBI being child led. Parents placed a lot of importance on evidence, both experiential, empirical and published; for example, P1 described how her experience contradicted opinions of professionals, whereas P3 described how the views of the professionals were not drawn from any published literature.

The subtheme of “responsibility” includes both EP2 and P3 description of the difference between the EIBI programme which ensures the learning for one child, and school’s responsibility over all the pupils learning. EP2 described how the excitement of EIBI would not be maintainable within the school routine, which is a sentiment shared by P3 who described that the school routine would make it difficult to implement EIBI.

The theme of “current role of the EP” refers to the current view of the EP work in general and within EIBI. All parents described the EP as a gatekeeper. P3 shared her view that the LA did not expect that the EP had ongoing work with children other than the initial assessment. Both EPs described working with individual children as part of their role. EP1 stated that her service used a consultation model and P2 described processes which arguably described the consultation process. Only EP2 described her role as systemic. Within EIBI, both EPs saw their role as building relationship with the family and a facilitator of communication.
3.13. Theme 11: Moving Forward

The final theme included recommendations made by both parents and EPs about the future of the role of the EP working with this group and also the future of EIBI. EP1 described her current role as monitoring the EIBI which was also identified as a possible role for EPs by P3. Uniting the programme with LA services was also recognised as an important aspect of the EP role. EP1 described her role in working collaboratively with providers. EP2 and P2 described the role of the EP in translating the programme for incorporation in school. In contrast with the subtheme of “de-skilling”, “up-skilling” refers to the training of LA staff,
which includes EPs, so they are able to work with better understanding of EIBI. Within the subtheme of “incorporation”, all the parents described the future of EIBI as being within the LA. P1 and P3 also described how the EP could have a role in ensuring quality and evidence-based practice to determine the best provision for their child.

Having compassion when working within EIBI was present in all transcripts illustrating its importance. Both EPs described how they were unaware of the experiences of the parents until the initiation of the tribunal process. Parents described how having a better understanding of their viewpoint would support the EP within their role and develop better collaborative working.

4. Discussion

“Potentially educational psychologists have a lot to contribute to that discussion but the first step is recognising that the conversation needs to be had” (P3).

4.1. Overview

This study aimed to investigate the role of the EP within EIBI programmes. The themes identified will be discussed in relation to the research questions. References will be made to the information provided in the major literature review, as well as additional information when relevant.

4.2. What is the role for the EP within EIBI?

The views of the current role of the EP within EIBI are highlighted in theme 10. In addition to the information provided in this theme, the EPs also perceived their role within EIBI as monitoring the programmes and linking the EIBI programmes with the LA provisions
as described by Connor (2003). All participants described how the EP had no direct role within the EIBI programme due to the involvement of the BCBA.

Parents view the EP role as a gatekeeper of resources. This has been found previously by Fallon, Woods and Rooner (2010) who hypothesised that is due to the EP role within statutory assessment. Their research was conducted on the role of the EP generally, suggesting that the perception of the EP as a gatekeeper is not unique within EIBI and that EPs are still viewed within their historic role of supporting the placement of children within education (Squires and Farrell, 2007).

4.3. What is supporting the EP within their role?

Both EPs recognised that their relationship with the schools and their position within the LA supported them within their role within EIBI. EP1 felt that having a wider understanding of the LA services meant that she was able to support the EIBI programme. EP2 believed that her relationship with school would support the child’s transition back into the system.

The subtheme of “cooperation” identified the ability for the LA and EIBI to work together which was based on knowing the system, establishing relationship and open communication. Wagner’s model of consultation (1995;2000) has been identified as incorporating collaborative working and problem solving (Kennedy, Frederickson & Monsen, 2008) and would therefore be a useful model to inform EP practice when working within EIBI.

4.4. What is preventing the EP from fulfilling their role?

The results suggest the relationship between parents who have requested EIBI and LA services is difficult, which was also demonstrated in the research by McPhillemey and
Dillenburger (2013) research. Participants described many factors which prevented collaborative working resulting in an in-group and an out-group (Tajfel & Turner, 1979) and defensive interaction.

EPs viewed themselves as important within the LA and were able to influence the LA despite them acknowledging a lack of experience of EIBI therapy as demonstrated in the subtheme of “specialism” and “inexperience”. Conversely, parents demonstrated a high level of understanding of EIBI but were unable to get their voice heard as shown in the theme “being heard”. This results in a battle of control with parents resorting to stronger actions demonstrated within the subtheme of “parental agency”.

In addition to the difference in voice and specialism, there is the difference in “responsibility”. The EP has a responsibility within the LA to protect resources and support a greater number of pupils resulting in parents viewing the advice of the LA EP as not independent. The parents prioritise their child’s development of socially significant skills regardless of the cost of the programme; this is demonstrated in the subthemes “parental agency” and “battle”.

The concern regarding the independence of the EP advice and the opinion held by parents that they need to fight for resources has been raised within previous research (i.e. Lamb, 2009). Hodge and Runswick-Cole (2008) described how the lack of parental confidence in the LA services results in parents becoming para-professionals. The conflict between the LA and parent’s priorities is demonstrated in a quote within Hodge and Runswick-Coles (2008) paper. An Educational Psychologist within their research described how parents expect a ‘Rolls-Royce service’ (pg. 641) but the local authority is not obliged to deliver that. Within the same paper it describes how the LA are confined to the policy context of ‘No child is entitled to the best. No LEA should use their resources inefficiently’ (pg 641, Hodge & Runswick-Cole,
demonstrating the LA’s responsibility to protect resources. Tissot (2011) argued that “securing provision should be based on matching a child’s needs with provisions and finding a placement that will provide them. Instead, LEA tends to define a child’s needs according to what provision is available and cheap” (pg. 8). The commitment to money is also demonstrated in the ALN draft, which states that the LA has a responsibility to ensure value for money when working with external companies (Welsh Assembly, 2017).

Another possible source of conflict derives from the “view of expertise” and approaches to work. EPs have been found to be constructionist (Gameson & Rhydderch, 2008) and pragmatists (Burnham, 2013). The theoretical orientation held by the EP can influence the way in which they define their role (Kelly, 2008). Burnham (2013) described in his research how EPs place less focus on evidence based-practices but greater importance on facilitating change and building relationships, which is demonstrated in the subtheme of “familiar” within this research. Conversely, parents placed importance on evidence and research and valued the positivist nature of ABA.

Although the approach to work may be different by parents and EP, EP2 described how she felt that EPs could be more explicit about the psychology which has been raised by Imich (2013). Also, parents within this research described the importance of relationship within the subtheme of “compassion”. This may demonstrate a common ground between the parties.

4.5. What are the recommendation’s for the role of the EP within EIBI?

The recommendations for the role of the EP is included within theme 11. Incorporating EIBI within the LA was a strong theme within the parental transcripts. There is evidence to suggest that incorporating Behaviour Analysis within a school is not only possible (Lambert-Lee, Jones, O’Sullivan, Hastings, Douglas-Cobane, Thomas, Hughes & Griffith. 2015) but may
also have long term financial gains (Lemmi, Knapp & Brown, 2016) as described within the NHS research summary (NHS, 2016).

As well as monitoring the therapy, as described by Connor (2003), both EPs that took part in this research recommended seeing ABA programmes in practice because the research does not always reflect practice regarding ABA. Further recommendation’s for the EP role will be discussed.

5. Implication for EP practice

The data collected in this research reflected the emotive nature of EIBI, which needs to be considered by EPs working with this group. The complexity of working with an EIBI programme is also highlighted in that both EPs that took part in the research had senior positions suggesting that possibly the LA felt that these cases require more senior involvement. As discussed above, both groups identified the relationship between parents and LA support services as important, but a number of factors were identified which prevented this. As such, the implications for EP practice have been outlined in light of these factors.

5.1. Develop EP knowledge of Behaviour Analysis.

References were often made by the participants regarding the limited understanding held by EPs of Behaviour Analysis, which is impacting on their role. This lack of understanding was also impacting the trust that parents had in EP advice. As Burnham (2013) stated, EPs should have a good understanding of different theoretical positions. This highlights the importance of increasing EPs understanding of the principles and application of Behaviour
Analysis. This should be done through training opportunities for EPs and other LA professionals.

Having an understanding of Behaviour Analytic philosophy may be beneficial to the way in which EP work. The research suggests that EPs are increasingly working within a traded model (Truong & Ellam, 2014) which potentially increases the pressure to measure the impact of EP involvement. Data and evidence base is a key aspect of Behaviour Analysis. EPs would arguably benefit from understanding the application of Behaviour Analysis to increase the EPs knowledge base, which has potential value for EP practice.

5.2. Importance of Clear Communication.

Parents within the research described how they felt unsupported by the LA services as they had been dismissive of the proposed therapy and/or their child’s abilities. EPs also described how it can be difficult to establish an honest communication with parents due to the influence of private companies.

The theme of “assumptions” within this research highlights the importance of EPs approaching the piece of work with an open mind whilst recognising any preconceived ideas they may hold. The sub-theme of “compassion” demonstrates the importance of understanding other perceptions and what others perceive as truth as characteristic of the constructionist approach. Active listening skills could be used to ensure that parents feel supported and heard (NASEN, 2015).

All participants described how the EP had no direct involvement within the programme due to the involvement of the BCBA, and that communication with the EP ceased following the initial assessment. As the EIBI programmes are funded by the LA, and due to the duty of care the LA has over the children within the area, it highlights the importance of
professionals within the LA having knowledge of the BCBA ethical guidelines to ensure good practice. As described by P1, the EP could have a role in ensuring the ethical application of Behaviour Analysis and work systemically rather than directly with the programme. The research highlighted the importance of the EP being clear about their role within the case to ensure that the parents maintain a realistic expectation of their involvement.

6. Research Strengths and Limitations

6.1. Strengths

One of the main strengths of this study is its timeliness due to the increase of EIBI programmes, despite the lack of research in the area. There is a notable gap within the literature of professionals’ views on ABA and the role of the LA EP within the programmes.

The results of this current research correlates with previous results across different topics increasing the research’s reliability. The results of the research can be used to inform EP practice when working with this population, across England and Wales.

6.2. Limitations

As with many qualitative research, the sample number was small, threatening the generalisability of the results. This is particularly true for the group of EPs as only 2 were recruited. Both EPs worked in Wales making it difficult to generalise the results to EPs in England. Both EPs were female which reflects the disproportionate number of female to male EPs (BPS, 2016).

The parental sample which was included in the research may not be reflective of the general population. All the participants were female and professional and one was an EP. Although disproportionate to the general population, arguably the education level of the
sample included is representative of parents pursuing EIBI as outlined by Denne, Hasting and Hughes (2017).

It is possible that the sample may not accurately reflect the general experiences of parents and EPs of EIBI. None of the participants within this research had negative experiences of EIBI. Separately, the researcher received emails to actively withdraw their services’ consent, meaning that the views of EPs who worked in authorities who did not agree with ABA were not captured. This demonstrates the emotive nature of the topic. Parents were recruited through two ABA support groups: it is likely that the members of the groups shared opinions and views of ABA. This may exclude parents who may have sought ABA for different reasons or view ABA differently.

When considering the parental experience of Statutory Assessment, it is important to highlight that 3 of the parents had been accepted for assessment prior to the educational reform in England and Wales. It is difficult to ascertain whether parents’ experiences have differed since the introduction of the HCPC.

Including participants across England and Wales meant that there may be cultural or LA process differences which may have impacted the participants experience. However, both the English and Welsh parents included similar themes suggesting no significant differences.

6.3. Recommendations for Future Research

As mentioned above, all parents included in this current research were mothers. Previous research into father’s involvement within statutory assessment has found fathers are less involved with SEN due to them feeling excluded from the school culture (Hart, 2010). Time constraints with the current research meant that returning to ethics in order to recruit
fathers was unrealistic, but future research should aim to include paternal voices within EIBI education.

A limitation of the current research is that the EPs were not asked specifically about their knowledge of ABA and the certification board. Future research could investigate the understanding of LA staff of ABA. Additionally, perceptions prior and after training and experience could be recorded to establish any differences in opinions regarding ABA.

Gros (1996) recognised that there may be an inequality in provision allocation with parents who were able to challenge the LA receiving more support. All parents within this research would be considered professional and described how they had a significant role in ensuring their child’s provision. The theme of “unfairness” raised by this research suggests that the inequality found by Gross (1996) persists. Further research is required to establish if this is the case.

With evidence of an increase of EIBI programmes across the UK it is important to ascertain the cultural considerations and implications. With Wales being a bilingual country, future research is needed in to the availability of the services in Welsh as well as the impact of bilingualism within EIBI. Future research into the implications of other cultural and religious factors on EIBI is also required.

One of the themes of the current research identified a lack of collaboration between LA services and private companies. However, no previous research into this relationship could be found. There is also a lack of research into the views of children and young people who have received EIBI/ABA therapy.
7. Conclusions

This research aimed to investigate the role of the EP within EIBI. What was clear from the transcripts is the emotion evoked by EIBI. The results suggest that the EP has no current role within EIBI due to the involvement of the BCBA. However, both parents and EPs recognised that EPs could be valuable to the programme. Recommendation for the role of the EP are provided.
8. References


Part 3: Major Critical Appraisal

(5964)
1. Overview

The critical reflection has been separated into two distinct parts; the research development and contribution to knowledge. The research development will critically consider the development of the research question, the ontological and epistemological position, the method and research process. The researcher’s views and experiences of Behaviour Analysis are discussed to disclose any opinion which may have impacted on the research. Within the second part, the contribution of the research to the researchers understanding and Educational Psychology (EP) practice will be discussed.

In both sections, references will be made to the personal development of the research practitioner and how this may have impacted on their role as an TEP. The critical reflection will be written in the first person to reflect the reflective and reflexive account of the research process from the standpoint of the research practitioner.

2. Research Development

2.1. Personal Experience

2.1.1. Experience of Behaviour Analysis

Having previously worked as a behavioural therapist for three years, I have first-hand experience of Applied Behaviour Analysis (ABA). My experience primarily involved the application of Verbal Behaviour approaches to adolescents with ASC.

Whilst working as a therapist I completed a MSc in Behaviour Analysis in order to meet the requirements to sit the exam to become a Board Certified Behaviour Analyst (BCBA). It was through the MSc that I was introduced to the wider application of Behaviour Analysis within sectors such as mental health and pharmacology. As part of the MSc, we discussed the
philosophical considerations of Behaviour Analysis, such as its position within the argument of free-will.

2.1.2. View of Education

I have previously worked with young children and adolescents with ASC and have worked as a carer for a woman with acquired brain injury and resulting learning difficulty. I also have friends with children with Additional Learning Needs (ALN).

Often during discussions with friends and some professionals, I was struck by the low expectations held of individuals who have a diagnosed learning difficulty. As an ABA therapist, I often saw children and adolescents make gains in life changing skills such as toileting, speaking and attending medical appointments. Whereas in other roles, I felt that families who had not experienced ABA made allowances to avoid difficult situations and did not attempt to teach skills due to the clients perceived ability to learn. This often meant that the children missed out on opportunities and that the families made significant adaptations and sacrifices to avoid difficult situations. For example, the family with whom I worked as a carer avoided dentist appointments due to their daughter not cooperating and understanding the process. The family were advised by professionals that she would never be able to tolerate a routine treatment and that they should remain vigilant to any concerns around her oral health. If any concerns were raised, then general anaesthetic would be required.

What became clear to me was that my experience as a therapist had changed the way I viewed ability and the role of education. Although I believe that others should make every allowance to enable a person’s independence, I also believe that every pupil should have the opportunity to learn the skills required to participate in everyday activities, as expected of their peers. It also taught me that everyone has the ability to learn with time and effective teaching methods.
Throughout my work as a therapist, I saw Behaviour Analysis as the science of education, which can be applied to develop socially significant skills to increase clients’ quality of life. However, reading the literature I was struck by how many articles referred to Behaviour Analysis as a treatment for autism (i.e. Reichow, 2012). This was in contrast to my experience of Behaviour Analysis which was more concerned with up-skilling individuals. Reading the blogs from the neurodiversity group encouraged me to reflect on the difference between education that aimed to enhance a person’s life, and education that aimed to ‘correct’ perceived difficulties. This illustrated to me the importance of targeting skills in education which would have a positive influence on an individual’s life. This is also important within my role as a Trainee Educational Psychologist (TEP).

2.2. Development of the Research Question

Whilst working as a therapist I was aware of the tension between the parents and the Local Authority (LA) professionals. This tension became more apparent when beginning placement within EP services. During conversations with EPs, it became clear that my experience of ABA had been different to that experienced by EPs in the LA. I felt that Behaviour Analysis was often seen as a science that dealt solely with teaching children with ASC and little was known about its wider application.

Whilst researching ABA and the EP, I came across research by Sullivan, Long & Kucera (2011) into the use of behavioural methods by school psychologists in America. I was interested in investigating the application of Behaviour Analytic principles by EPs in the UK. I had intended to design a survey into the theories used by EPs in the UK, identifying which ones have a Behaviour Analytic basis with the aim of changing the view of Behaviour Analysis. However, through supervision it became clear that defining theories that EPs use would be
difficult and it would be challenging for me to ensure impartiality when linking these theories to Behaviour Analysis.

Instead, I thought more of the current situation in which EPs work and became interested in the relationship between families who chose ABA and the LA who were funding these programmes. When researching the role of the EP and ABA I was struck by how little research there was despite there being an increase in request for ABA (Lambert, 2011). This highlighted to me the importance of adding to the literature, with the aim of determining how EPs can work effectively with these families.

2.3. Development of Research Position

2.3.1 Undergraduate Education

My experience of research during my undergraduate course was based on quantitative research. My undergraduate dissertation used a quantitative approach within a positive research position. Following a review of the research published in the Journal of Applied Psychology, Cortina, Agiunis and DeShon (2017) found that there has been a greater use of complex statistical methods between 1990 and 2014 compared with the use of critical constructs that had dominated the literature between 1970 and 1989. This suggests that research within psychology is increasingly taking a positivist stance. When discussing the future of psychological research, Cortina, et al. (2017) concluded that research needed to focus more on replication of positivist experiments to test psychological theories.

2.3.2 Postgraduate Education

Similar to my undergraduate education, the research conducted whilst studying an MSc in Behaviour Analysis was primarily within a positivist position, using a within participant design. Whilst studying as a Trainee EP (TEP), I became aware of the Constructionist Model of
Informed Reasoned Action (COMOIRA, Gameson & Rhydderch, 2008) which uses a social constructionist perspective. The model postulates that each view of the situation is different and based on individual histories and interpretation, meaning there is no definitive truth to be measured. This is in contrast to the view held by the positivist position.

2.3.3. Qualitative Rational

As this was an area that has not been addressed previously and not aiming to test a hypothesis, this research was considered investigatory. Due to the lack of previous research, there was no research available to inform close-ended questions in order to collect quantitative data. On this basis, qualitative research was felt to be the most appropriate research method (Silverman, 2011). Qualitative research was deemed particularly appropriate as it has been argued that empirical research based on quantitative data is not suitable to contexts within real life, but instead more in-depth information should be collected to gain an insight into participant’s experience (Condelli and Wrigley, 2004).

As well as arguing that replication of empirical psychological research is required, Cortina, et al. (2017) described how the use of qualitative research methods could be used in order to investigate data points which are outside the mean. As I was seeking to research a population who could be considered a minority, and therefore outside of the mean, I decided that a qualitative approach would result in more valuable information.

2.4. Ontology

This current research takes a critical realist stance (Bhaskar, 1978), which accepts that there are stable and enduring features of reality that remain independent of the person’s interpretation. However, people are able to experience different realities and hold different truths, as they are experiencing different aspects of that reality. As the current research was
gaining information from both EPs and parents, it was important that I kept in mind that the different groups of participants would have experienced different realities due to their position entering the situation; for example, one group were perceiving the situation from a parental role, whilst one group were perceiving the situation through a professional one.

2.5. Epistemology

In accordance with the critical realist position, I maintained the view that the participants’ experience had been socially constructed, and not constructed independently. This corresponds with Burr’s (2003) social constructionism, in that reality is co-constructed with others. The constructionist position was considered particularly important within this research, as it became clear that both participant groups had been influenced by others - parents often spoke of the experiences of other parents and how this influenced their view of the LA, and EPs often spoke of the experiences of other EPs, which has influenced the way they perceived ABA.

2.6. Data Analysis

Choosing which method of data analysis to use proved to be difficult. Initially, I had considered using Grounded Theory (GT; Glaser & Strauss, 1967) due to the lack of research in the area. GT is concerned with the development of a theory based on the data collected. Data is collected until it is felt that the information has reached saturation point (Strauss & Corbin, 1990). The term ‘theory’ is defined as an idea that explains situations (Oxford University Press, 2017). Following supervision, it was felt that the primarily aim of the research was to investigate and describe the perceived role of the EP rather than explain why the role was
perceived in that way as is the case with developing a theory. Therefore, GT was not deemed appropriate.

As I was interested in the experiences of both EPs and parents, I investigated the use of Interpretative Phenomenological Analysis (IPA) to analyse the data. IPA is concerned with the lived experience of the participants (Murray & Holmes, 2014) and allows for the ‘experience to be expressed in its own terms rather than according to predefined category systems’ (pg. 32, Smith, Flowers & Larkin, 2012). IPA was considered appropriate as it is a qualitative method and has been recognised as a useful analysis tool when investigating an area which has received little research.

Another consideration why IPA was deemed appropriate was due to the philosophical basis of hermeneutics (Smith, Flowers & Larkin, 2012). Hermeneutics can be defined as the process of interpretation of the meaning of text (Rennie, 1999). This means that the data cannot be fully independent of the researcher’s experience or views (Larkin, Watts & Clifton, 2006). This signified the importance of remaining aware and recognising my own experiences when interpreting the data.

When it came to analysing the data, it became clear that the research questions and the responses the participants gave would better suit a Thematic Analysis (Braun & Clarke, 2006). Thematic Analysis involves the identification of themes across participants, which allows for an in-depth description of the data set. As I was asking specific questions relating to the role of the EP within the programme, and not questions about general emotions or perceptions of the role, the interpretation of the data which IPA involves was not felt to be appropriate.

Also, IPA requires a sample group which is fairly homogenous as the analysis is concerned with a shared viewpoint of a phenomena (Smith, et al., 2012). When considering
the role of the EP within EIBI programmes, I felt the views of both the parents and EP would be valuable to the research. This meant that they would be coming from two different positions which would impact on the homogeneity of the group. Thematic Analysis does not require a strictly homogenous group. Therefore, to ensure the validity of the analysis, Thematic Analysis was chosen.

2.7. Research Questions

To collect information of the role of the EP within EIBI the following questions were asked:

1. What is the role of the EP within EIBI programmes?
2. What is supporting the EP within their role?
3. What is preventing the EP from fulfilling their role?
4. What are the recommendations for the role of the EP within EIBI?

2.8. Data Collection

2.8.1. Semi-Structured Interviews

Due to the topic of the research and the possible difficulty in recruiting participants, it was felt that gathering participants from across the UK would be beneficial. Recruitment emails were sent to LAs throughout the UK. The participants of the research were from both Wales and England. As such, I would have been unable to travel to conduct every interview in person.

A comparison of research that analysed interviews held in person or interviews over the telephone found that either method of data collection is a valid form of data collection (Rahman, 2015). It was recognised in the research that telephone interviews may inhibit the
response bias as the interviewer is not physically in the room. However, it was also recognised that telephone interviews may impact the rapport between the interviewer and the interviewee.

To minimise any possible influence of the data collection method, I aimed for variation within each participant group with half within both parents and EP group being interviewed over the telephone and in person. In order to determine a difference in response between the interview method, the themes from transcripts that were gathered over the telephone were compared with those that were gathered in person. Similar themes were identified in all transcripts with the exception of P4. Common themes between P1, P2 and P3 were often absent from P4 transcript and her interview was particularly short. This could be due to P4 being pre-occupied during the telephone conversation, despite a time and date for the interview being previously arranged. It is possible that if the interview had been conducted in person, then greater attention would have been paid and importance placed on the interview resulting in more in-depth information being shared.

It is recommended that questions for qualitative research are open-ended and allow the participant to share their experience in detail. The questions should be neutral, in that they do not lead the participant to an answer (Smith & Osborn, 2007). I feel that the interview questions used in this research allowed for the collection of relevant information and provided a valid account of their experience. As the interviews were semi structured rather than completely structured, it allowed for additional questions to be asked based on the information shared by the participants.

During the interview, questions were asked about the generic role of the EP outside of ABA to gain information about how the role is perceived generally. This was done in order
to determine whether there was a difference to their role within EIBI. The interview questions are provided in Appendix A.

2.8.2. Participants

The recommendations for the number of participants required for TA has been described as varied and unclear (Fugard & Potts, 2014). Therefore, I had aimed to recruit six parents and six EPs to interview based on recommendations by Smith, Flowers and Larkin (2012) for IPA. I had also initially specified that that the child with whom the EP and the parents were involved with had received EIBI before the age of 3. This coincides with participants in other EIBI research (i.e. Tiura, et al., 2016).

Although I aimed to recruit EPs who worked for the LA, it became clear that recruiting EPs would be particularly difficult. In order to access a wider group of EPs who may also be working privately, I decided that I would also post a message on an online forum (EPNET). Recruiting through EPNET and directly contacting EPs raised ethical considerations around consent; specifically, was gatekeeper consent required for EPs who worked privately or for agencies? During supervision it was agreed that the EPs would need to disclose if they were employed by a LA or a private company on their consent forms. If so, gatekeeper consent from the PEP or employer would be required. Recruiting over EPNET allowed EPs to be contacted who may not have received the message through their PEP. This may have raised possible conflict if the EP approached the PEP after the PEP had declined their consent. However, it was felt that it would be sufficient to trust the EPs professionalism when discussing this.
2.9. Ethical Considerations

2.9.1. Discussing Sensitive Subjects.

Some of the parents and EPs were reluctant to share certain information as they felt it would make them identifiable to the LA. The majority of these comments were shared when discussing their experience of the tribunal process. This was an important consideration when transcribing the data and deciding which information to include in the research. I did not want to jeopardise the anonymity of the participants due to the limited number of tribunals that would occur within the LA and the consequent ease in identifying claimants.

Based on my previous experience of ABA, I remained aware that it can be an emotive subject. Therefore, it was important that the participants felt comfortable at the beginning of the interview and that rapport had been established. Time was taken to talk to the participants before the interview over the telephone and in person.

2.9.2. Objectivity.

Throughout the research process, I was aware of the influence of my personal experience and views of Behaviour Analysis. It has been argued that it is recognised within qualitative research that the subjectivity of the researcher is closely integrated in the research (Ratner, 2002). This is because the researcher has actively chosen the research topic, based on experience or views which could impact how the report is written.

Using semi-structured interviews enabled me to remain as objective as possible through the research process, as I could prepare the questions in advance. This would ensure that the questions were not leading the participants’ answers whilst also allowing the participants to share relevant information.

Within semi-structured interviews, rapport had been identified as an important aspect of the interview process (Ryan & Dundon, 2008). When meeting participants, I remained open
and approachable to help the participant feel at ease, without discussing my personal position on ABA. I was aware that disclosing my personal experience may have influenced what information the participants were willing to share or the choice of language that they would use.

During the analysis of the transcription, I ensured that regular supervision was sought regarding the labels that I chose for the themes. This was to ensure that the labels accurately reflected the data and had not been influenced by the opinions that I held.

2.10. Difficulties Addressed.

The main difficulty I faced when conducting the research was recruiting the participants. Initially, I had stated that I would like EPs or parents who have experience of EIBI programmes that were implemented before the child was three. However, I quickly became aware that I was limiting the potential pool of participants. I received emails from both EPs and parents to say that they had experience of working with a child who was older than three and would therefore be unable to take part in the research.

When considering increasing the age of the children, I reflected on the current application of ABA within the UK and potential differences with America in which a substantial amount of EIBI research had been conducted. EIBI is recommended within the majority of American states and therefore parents are able to access the therapy without needing to conduct prior research or engage in a lengthy tribunal process. This would mean that the children in America may be able to access the therapy earlier than their counterparts in the UK.

The second consideration when amending the age of the participants was the definition of what age constitutes as ‘early intervention’. In a document published by the
House of Commons, it describes how early intervention can be defined as either an intervention delivered before the child is two-year olds or any intervention that prepares children for adulthood. Within education, early intervention is considered as any intervention that is implemented before the compulsory school age which is five (House of Commons Library, 2017). As ABA therapy is often considered an educational intervention, amending the age of the children to five was deemed appropriate.

Despite changing the age of the children and being able to recruit parents, recruiting EPs remained difficult. Following emails to 26 services across England and Wales, 17 did not reply to two rounds of emails. Four replied that they did not have cases involving ABA and would therefore be unable to take part. Three Principal EPs (PEP) replied that they would share the email with the team and two PEPs emailed back to actively refuse to take part in the research. The two PEPs that actively withdrew consent did so as they did not condone ABA and did not recognise it as an evidence-based intervention. As a trainee EP on the verge of applying for EP posts, it made me reflect on how I would be perceived by the services I was contacting. However, the view of ABA as not evidence based illustrated to me the pertinence of the research and the need for the profession to be better informed of the behaviour analytic field.

Due to difficulties recruiting EPs, the recruitment process was amended and a post was shared on the communication forum EPNET following the approval of ethics. This way I was able to reach EPs who did not work for a LA service and possibly recruit private EPs who had previously been employed by EIBI parents. From the post on EPNET, I received one email from an EP who worked within a LA, who consequently withdrew from the research once she was made aware that consent from the PEP would be required. The EP felt that if the PEP was aware of her involvement in the research and was able to access the report, it may risk her
anonymity and would influence the information that would be shared. This possibly demonstrates the constraint on EPs work due to their employment within the LA.

The response I received from the services and EPs demonstrated the strong emotions of the research topic. The strong responses received from some services, as well as the view of ABA held by the EPs interviewed prior to their exposure to the programme, suggests that there is a shared negative view of ABA. Rowe, Wertsch and Kosyaeva (2002) suggested that social constructs hold no meaning to an individual, but instead the individual transforms the meanings to make them significant to themselves. The negative view of ABA may be partly held by EPs due to changes in the way they work. When working with a case involving ABA it often involves a tribunal process and consequent pressures relating to this. This could have resulted in a collective negative view, illustrated in the emails from the PEPs, due to the significance to the profession. This suggests that the difficulty in recruiting EPs as participants was partly due to emotive reasons and the opinions held. Unfortunately, as the services mentioned did not give their consent for EPs to take part in the research, the reasons PEPs gave for not condoning ABA were not documented.

It is also important to note that it is difficult to determine whether the lack of response to the emails from the 17 services who did not respond was due to their views of ABA, or due to more practical reasons such as the time available to take part in the research. The responses received stating that, as a service, they have had no involvement with ABA cases suggests that ABA is still in the minority. Therefore, it is also likely that the difficulty recruiting EPs could be due to the limited number who would have had experience of the programmes. However, it seemed to be acknowledged by some EPs that further research is required as five emails expressed interest in reading the final report and two described the research as pertinent.
3. Contribution to Knowledge


What became clear from the literature review was the lack of research into the role of the EP within EIBI. This is despite ABA becoming increasingly common within the UK (Lambert, 2013). Although there is research on the views of parents of ABA (McPhillemy & Dillenburger, 2013), there has been no research into the views of other parties and professionals. This research contributes to the literature as it investigates the role of the EP within ABA.

The results of the current research have raised some questions regarding other research areas, such as the relationship between LA services and private sector generally and the view of EPs of teaching methods which are not within the LA offering.

3.2 Contribution to EP Knowledge

3.2.1. View of EIBI

Due to the lack of research within the EP literature concerned with ABA, this research has contributed to the knowledge of the EPs of their role within the programme. What the research has demonstrated is a discrepancy between what is traditionally seen as EIBI and the experiences of the parents and of EPs. It has also shown that there may be a need to further develop EPs understanding of ABA through training to enable EPs to gain a better understanding of EIB/ABA. This will, in turn, allow EPs to inform school and the LA on the merits of the approach. The training could include a brief description of the philosophy of
Behaviour Analysis, the history, the difference between Behaviour Analysis and Modification and a brief introduction to ABA/EIBI programmes and what they include.

3.2.2. Definition of ‘Child-Centred’

When analysing the transcripts, it became clear that there was no shared view of what constitutes as ‘child-centred’. EP2 described EIBI as child-led as the therapist followed the child’s lead. Conversely, EP1 described how the behaviour therapist was focused on data which drew attention from the child.

The term ‘client-centred’ was first introduced by Carl Rogers in 1951 to describe how the client lead the discussion within counselling and/ or therapy. This has developed to person centred approaches and is being adopted within education in Wales in order to account for individual differences within the classroom (Welsh Government, 2015). The greater focus on person-centred approaches illustrates the importance placed on working in this way. Despite this focus, parents described how the LA processes may be preventing a child-centred approach due to their commitment to existing provision for children with ALN. Similarly, EP2 described how EIBI would make transition into school difficult as the child would be expected to fit into the school routine.

From experience, provisions within LA’s often have access criteria which includes a diagnosis, making the system diagnostic-led rather than needs or child-led (i.e. a child can only access a unit specialising in autism if they have received a diagnosis of ASC). A diagnostic-led system may inhibit professionals from recognising and concentrating on individual differences due to the focus on diagnosis and labelling. This can be particularly troublesome when considering spectrum conditions such as ASC, as there is a large variation of how the condition is expressed amongst individuals.
Thinking about the diagnostic-lead thinking made me reflect on the way that I approach cases when knowing of a child’s diagnosis; how much does the diagnosis influence the way I approach work and the recommendations that I make? Does the diagnosis draw my attention away from that child’s individual strengths and interests? This also illustrate the importance of EPs considering the impact of labels on their own, and others’, perceptions of the individual’s abilities.

3.2.3. Definition of ‘Evidence Based’

One of the topics which was raised within the literature was the definition of ‘evidence-based’. Some papers claimed that ElBI was not evidence based due to the limited Random Control Trials (RCT) within the literature (i.e. Warren et al., 2011). RCT are often considered the best research method and the method mainly used to inform policy. Due to this, and the limited RCT research conducted on ABA, there have been arguments as to whether ABA is evidence based or not (McConkey, Kelly & Cassidy, 2008).

It has been argued that the lack of RCT research into ABA is due to the eclectic and idiosyncratic nature of ABA programmes (Keenan & Dillenburger, 2011). Each ABA programme would include different teaching methods and consequences which are tailored to the child’s interests and individual need. This means that no two programmes are the same and therefore comparable. Instead, within participant designs are often used with Behaviour Analysis research to show treatment effect (Bailey & Burch, 2002). However, the nature of design means that the sample size remains small. This can arguably influence the generalisability of the research when applying the findings to larger populations.

Within participant designs have been described as the best method to evaluate the impact of a therapeutic intervention with individuals (Morgan & Morgan, 2001) and within
special-education practice (Horner, et al. 2005). With its application within ALN and mental health, within participant designs are arguably relevant to the role of the EP.

A review of the literature within the Contemporary Educational Psychology journal found that 90.5% of the research published used a qualitative research design (Mitchell & McConnell, 2012). Although the research only reviewed research within one journal, it does suggest that there may be limited research conducted within Educational Psychology that uses a quantitative design. This suggests there is also a lack of within participant designs in the literature.

Qualitative designs are valuable to gain information about participant’s view of a topic. However, in the current financial climate and the increase in EPS establishing a traded delivery model (Truong & Ellam, 2014) it could be argued that within participant designs should be utilised more by EPs in order to measure outcomes and effect. Research questions for the quantitative designs could be based on the information gathered through qualitative research. One argument against the use of data within therapy is the difficulty in defining, measuring and quantifying the impact of therapeutic input (i.e. measuring the increase self-esteem of a pupil). However, without the use of the research method there will be nothing to inform the development of the research within EP practice.

3.2.4. Behaviour Analysis and Psychology

When considering the limited research on ABA within the EP literature, I considered the relationship between Behaviour Analysis and Psychology. Behaviour Analysis is often described as a branch within psychology (Cherry, 2016). It has been argued that Behaviour Analysis is separate from the field of psychology and should be considered a natural science (Sigurdardóttir, 2015). This is due to the difference in the way in which behaviour is explained between the two fields.
Despite this distinction, in America it is described how School Psychologists are increasingly utilising Behaviour Analytic principles in their work, in both consultation and intervention (Wilczynski, Thompson & Beatty, 2002). This is described to be the outcome of the changes to the Individuals with Disabilities Educational Act (2004) which outlines that a Functional Behavioural Assessment must be conducted on a pupil who is exhibiting considerable behavioural concerns.

In the UK, a survey comparing practices used by EPs in 1997 and 2002 found that the Educational Psychology field is moving away from the use of behavioural and cognitive psychology and more towards social interactionists theories (Kennedy, 2006). This suggests that Behaviour Analysis is not a science that is used widely within EP work. The survey was conducted within Scotland and included a small sample size of 23 which threatens the generalisability of the results to other areas of the UK. In 2010, Hart identified that EPs are increasingly using more diffuse approaches that have underpinnings in behavioural psychology within classroom management (Hart, 2010). There is also evidence to suggest that EPs may be using strategies based on Behaviour Analytic principles implicitly; for example, Kennedy Frederickson and Monsen (2008) identified the problem solving process within EPs consultation which uses behaviour analytic principles (Steege & Brown-Chidsey, 2005).

3.3.5. Theoretical Approaches

Behaviour Analysis is often perceived as an approach which is concerned with changing the client’s behaviour to fit in with the environment. Contrary to this belief, Behaviour Analysis is actually concerned with determining the function of a behaviour and adapting the environment to support more appropriate responses and teaching skills deemed socially significant.
Behaviour Analysis is also often considered a science which is only concerned with observable behaviours. However, Skinner wrote about how the principles of behaviour could be applied to more complex human behaviour, thus establishing the school of Radical Behaviourism. Whereas methodological behaviourism focuses primarily on the observable behaviour, Radical Behaviourism aims to explain hypothetical constructs such as thinking and feeling (Leigland, 2010).

In his book Science of Human Behaviour, Skinner stated:

‘We need not suppose that events which take place within an organism’s skin have special properties for that reason. A private event may be distinguished by its limited accessibility but not, so far as we know, by any special structure of nature.’ (pg. 257, Skinner, 1953).

Skinner (1957) also applied Behaviour Analytic principles to the acquisition of language. In his book Verbal Behaviour, Skinner (1957) explained how the individual learns words within a context, which forms the individuals understanding of the meaning of the word. For example, if a person is frowning when the word is first being said to the child the child will learn that that the word has a negative connotation. The child will also incorporate how others react to or use certain words and build upon the words meaning. As each individuals learning history is unique, influenced by others and will change over time, each person’s understanding of words will be slightly different. This may influence their perceptions and interpretations of their reality. In this case, what is the difference between a learning history and a constructionism?

This theoretical position has been applied to different therapies which include ACT (Hayes, 2004) and DBT (Lippold, 2006). Both therapies view thinking and language as learnt
behaviour and aim to teach the client to accept their current situation whilst moving forward to promote change. The application of Behaviour Analysis in this way could be useful to EPs; for example, as part of dialectical therapy, stakeholders are brought together in order to find commonalities between the differing views they may have. Arguably, there are similarities between dialectical therapy and what occurs during a psychological consultation. Having an understanding of DBT provides another approach for the EP to use in order to facilitate change within a case.

3.2.6. Approach to Learning.

Within the research, the difference between the school system and EIBI therapy was described in terms of environmental and learning approaches. What was not mentioned by participants, but could also influence the incorporation of Behaviour Analysis within the school, is the difference between the learning theory informing practices. Behaviour Analysis views learning as a result of the consequence which is mediated strongly by the teacher. The constructivist approach is arguably the most influential learning theory used today, which views learning as being created by the learner through experiences (Fox, 2006).

When working with EIBI cases, EPs may need to consider clarifying the philosophy behind the educational approaches used to ensure joint understanding between systems. This may allow for better collaborative working between EIBI and the school.

4. Conclusion.

Both sections of the reflective summary aimed to demonstrate the development of the research as well as the research-practitioner. I hope that the reflective summary and the description of my current position demonstrates the researcher’s continual reflection
throughout the process to ensure objectivity. It is also hoped that the summaries described the journey taken when developing the research as well as the contribution to EP knowledge.
5. References


in educational psychology: A textbook for trainees and practitioners. London: Jessica Kingsley.


Appendices

Appendix A: Interview Schedule

This is the interview schedule for the semi-structured interview. The schedule includes the questions that will be asked in order to gain the appropriate information for each area of interest. The areas of interest include: the participants understanding of the role of the EP, the role of the EP with EIBI programmes and the factors that supported and act as a barrier for the EP within this role. Prompts will be used, when required, in order to facilitate a deeper discussion and to gather further information.

The questions are indicative and therefore will possibly reduce in number depending on what information is shared. The order of the questions may change, dependent on what is shared by the participant. The answers to the following questions will be transcribed and analysed.

Before the interview, the researcher will ensure that rapport has been built with the interviewee and that the individual is comfortable to talk to the researcher. The interviewee will be reminded of the aim of the research and the relevance of the information gathered to the work of EPs.

The researcher will remind the interviewee that he/she can leave the interview at any time, also that he/she does not need to answer any questions that make her/him feel uncomfortable.

The researcher will remind the interviewee to not to name any individuals.

Finally, participants will be reminded that the interview will be recorded on an iPad that is password protected. Participants will be reminded that they may withdraw their data at any point, without consequence, up two weeks after the interview. After the two weeks, the recording will be transcribed and the data will be anonymised.

Questions for EPs:

The role of the EP.
- How would you describe your role as an EP?

Role of the EP in EIBI programmes.
- What has been your experience of working alongside EIBI programmes?
- How would you describe your role whilst working alongside these programmes?
  
  Prompt: any similarities/differences working with these cases.

Factors that supported or acted as a barrier within this role.
- Were there any factors that supported you within this role?
  
  Prompt: training/time allocation/terminology
- Were there any factors that acted as a barrier for you within this role?
  
  Prompt: training/time allocation/terminology
- What recommendations would you suggest to support an EP working with EIBI programmes?

Parents:

The role of the EP.
- Generally, what would you describe to be the role of the EP?
  
  Prompt: where do they work? How do they work? What is their job?

Role of the EP with EIBI programmes.
- What has been your experience of an EP within your child’s EIBI programme?
- How would you describe the role of the EP within your child’s EIBI programme?
• How do you feel about the EP involvement within the EIBI programme?
  
  Prompt: was it useful? why?

Factors that supported or acted as a barrier within this role.

• Could you describe any factors that supported the EP within this role from your experience?
• Could you describe any factors that may have prevented the EP fulfilling this role?
• Do you have any recommendations for the role of the EP within EIBI programmes?
Appendix B: Initial letter to the PEP attached to the email.
_text in red will be changed to include identifiable information._

Address of the Service

Ms. Williams
Cardiff University Centre for Human Development Service
70 Park Place
CF10 3AT
To Mr/Ms. PEP,

Project Title
Applied Behaviour Analysis and Educational Psychology (EP): what is the role of the EP within Early Intensive Behavioural Intervention?

Invitation
You are being asked if EPs within your service can take part in a research study conducted by a trainee of the Educational Psychology Doctorate at Cardiff University.

The aim of this research is to investigate the role of the EP within Early Intensive Behavioural Interventions (EIBI) programmes which are also called ABA programmes.

It is hoped that the information would provide a better understanding of the role of the EP within such cases. The research may help to inform the profession on how to further develop the understanding of the workforce of how to work with this population.

In order to participate in the research, the EP would need to have worked with a child receiving EIBI. This includes ABA therapy. The child would need to have been younger than five at the onset of the intervention but of any age at the point of EP involvement.

What will happen?
If you are willing to give consent for members of your team to take part in the research, please forward the email containing the information sheet and consent form to all members. I will ask that the EPs who would like to participate to reply to the email with a signed consent form.

Following an expression of interest to take part in the interview and the return of a signed consent form, the EP will be contacted to arrange a mutually agreed time and venue. The interview will consist of questions that ask about the EP’s experience of working with EIBI programmes and his / her opinions regarding this. The interview will take no more than 1 hour. The interview can be done in person or remotely depending on distance. The interview can be held in Welsh or English.

Due to the number of participants required, not all EPs that express an interest may be recruited.

The interview will be recorded on an iPad which is password protected and will only be accessible by the researcher. The interviews will be transcribed and made anonymous. Following transcription, the recording will be deleted. The research findings may be used in a publication and, if so, all information will remain anonymous and therefore not possible to trace to any individual area of the country.

Participants’ rights
By forwarding the email, you will be providing your consent for the EPs within your service to take part in the research.
Participation in the interview is voluntary. The EPs will be asked to read an information sheet and complete a consent form. They may decide to stop their involvement at any time with no consequence prior to the transcription of the interview. After transcription, the information will not be traceable to an individual and therefore withdrawal of information will no longer be possible. Transcription will take place two weeks following the interview.

Confidentiality/Anonymity
Any information that contains data that would identify any individuals, schools or local authority will not be used. The identity of the participating EP will be protected.

For further information
Hannah Williams will be glad to answer your questions about this study at any time.

If you want to find out about the final results of this study, please email the researcher and we will send you a copy of the research.

Contact details are as follows: Hannah Williams: WilliamsEH2@cardiff.ac.uk

If you are unhappy with any aspect of the research or would like to contact the Research Supervisor for more information, please email Andrea Higgins (HigginsA2@cardiff.ac.uk).

If you have any ethical concerns relating to the research, please contact the School of Psychology ethics committee (psychethics@cardiff.ac.uk).
Appendix C: Participant Information Sheet (Parent and EP)

**Project Title**

Applied Behaviour Analysis and Educational Psychology (EP): what is the role of the EP within Early Intensive Behavioural Intervention (EIBI)?

**Invitation**

You are being asked to take part in a research study conducted by a trainee of the Educational Psychology Doctorate at Cardiff University. This project aims to investigate the role of EPs working with Early Intensive Behavioural Intervention (EIBI). These programmes are also called Applied Behaviour Analysis (ABA) therapy. It is hoped that the information would provide a better understanding of the role of the EP working with EIBI programmes. The research may then help to inform the profession on how to further develop the skill, knowledge, and understanding of the workforce within this.

**Participant Inclusion Criteria**

To participate in the research, you would need to have worked with a child receiving EIBI within your role as an EP. This includes ABA therapy. The child would need to have been younger than five at the onset of the intervention but of any age at the point of EP involvement.

*Or*

In order to participate in the research, your child will need to have been receiving EIBI for at least 6 months. This includes ABA therapy. Your child would need to have been younger than 5 at the onset of the programme.

**What will happen?**

By replying to the email with your contact details, you have agreed to be contacted by the researcher. Following the return of the below consent form, I will be in contact to arrange a time and date for the interview to take place. The interview will consist of questions relating to your opinion of the role of the EP within EIBI programmes. The interview can be held in either Welsh or English.

**Time commitment**

The interview can be held either in person or over the phone. Participation in the interview is voluntary. The interview will take no more than 1 hour.

**Participants’ rights**

You may terminate the interview at any point without consequence. You do not have to answer any question that makes you feel uncomfortable. You may withdraw your participation up to two weeks after the interview. In this case, the information you provided will not be used. Following the two weeks and once the recording has been transcribed it will not be possible to identify who provided the information.

**Confidentiality/Anonymity**

The interview will be recorded on an iPad that is password protected and can only be accessed by the researcher. The interview will be transcribed anonymously two weeks after
the recording. Your identity will be protected throughout. No identifiable information will be included in the study.

**Benefits and risk**
There are no known benefit or risks to you in this study.

**Cost, reimbursement, and compensation**
Your participation in this study is voluntary.

**For further information or support**
If you have any questions as a result of reading this information sheet, please ask the researcher, Hannah Williams, who will be glad to answer your questions at any time (WilliamsEH2@cardiff.ac.uk).

If you want to find out about the final results of this study, please email the researcher and she will send you a copy of the research.

If you are unhappy with any aspect of the research or would like to contact the Research Supervisor for more information, please email Andrea Higgins (HigginsA2@cardiff.ac.uk).

If you have any ethical concerns relating to the research, please contact the School of Psychology Ethical committee (psychethics@cardiff.ac.uk)

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**CONSENT FORM**
Applied Behaviour Analysis and Educational Psychology (EP): what is the role of the EP within Early Intensive Behavioural Intervention (EIBI)?
The research aims to investigate the use of the role of the EPs within EIBI.

By signing the consent form I agree that:
- I understand that the interview will be recorded.
- I have read and understood the Participant Information Sheet.
- I understand I may withdraw from the interview at any point without penalty.
- I understand that I may withdraw the information I provide up to two weeks following the interview. After this, the interview will be transcribed anonymously.
- All questions that I have regarding my participation have been answered satisfactorily.
- I am taking part in this research study voluntarily.
- I have the consent of the PEP of the EP Service or that I am private EP and working independently and do not require the consent of an employer.

_________________________  Private EP or EP employed by a Local Authority/Company
Participant’s name (Printed)  (Please circle)

_________________________  ________________________
Participant’s signature  Date
Appendix D: Message for Social Media

This message will be sent to the group administrator with an additional paragraph explaining that by sharing the post on their group they will be providing their consent for the members to take part.

A trainee Educational Psychologist enrolled on the doctorate course at Cardiff University is investigating the role of Educational Psychologists (EP) within Early Intensive Behavioural Therapy (EIBI).

The researcher is seeking the support of parents who have a child who has received EIBI or ABA for at least 6 months and was younger than 5 years old at the onset of the programme. Participation will involve taking part in a semi-structured interview in which questions relating to the role of the EP will be asked. The interview should take no more than 1 hour. The interview can be held over the phone or in person and can be held in either Welsh or English.

If you would like to take part in the research, please email the address provided below. Due to the number of participants required, not all expressions of interest will lead to recruitment as a participant. In this instance, a notification will be sent via email. If successful, an information sheet and consent form will be sent to you by the researcher.

On receipt of your consent, a time and date will be arranged with you to hold the interview.

If you would like any further information about this research or would like to participate, please contact Hannah Williams on WilliamsEH2@cardiff.ac.uk. This research will be supervised by Andrea Higgins who can also be contacted on HigginsA2@cardiff.ac.uk. This research has been approved by the ethics committee at Cardiff University who can be contacted by psychethics@cardiff.ac.uk.

Thank you, Hannah Williams.
Appendix E: Post for EPNET

A trainee Educational Psychologist enrolled on the doctorate course at Cardiff University is investigating the role of Educational Psychologists (EP) within Early Intensive Behavioural Therapy (EIBI).

The researcher is seeking the support of EPs who have worked with a child who has received EIBI or ABA for at least 6 months and was younger than 5 years old at the onset of the programme. Participation will involve taking part in a semi-structured interview in which questions relating to the role of the EP will be asked. The interview should take no more than 1 hour. The interview can be held over the phone or in person and can be held in either Welsh or English.

If you would like to take part in the research, please email the address provided below. Consent from the Principal EP of the Service will be required if you work for a Local Authority.

Due to the number of participants required, not all expressions of interest will lead to recruitment as a participant. In this instance, a notification will be sent via email. If successful, an information sheet and consent form will be sent to you by the researcher.

On receipt of your consent, a time and date will be arranged with you to hold the interview.

If you would like any further information about this research or would like to participate, please contact Hannah Williams on WilliamsEH2@cardiff.ac.uk.

This research will be supervised by Andrea Higgins who can also be contacted on HigginsA2@cardiff.ac.uk.

This research has been approved by the ethics committee at Cardiff University who can be contacted by psychethics@cardiff.ac.uk.

Appendix F: PEP/Employer Information Sheet and Consent Form

Project Title

Applied Behaviour Analysis and Educational Psychology (EP): what is the role of the EP within Early Intensive Behavioural Intervention?

Invitation

You are being asked if an EP within your service can take part in a research study conducted by a trainee of the Educational Psychology Doctorate at Cardiff University.

The aim of this research is to investigate the role of the EP within Early Intensive Behavioural Interventions (EIBI) programmes which are also called ABA programmes.

It is hoped that the information would provide a better understanding of the role of the EP within such cases. The research may help to inform the profession on how to further develop the understanding of the workforce of how to work with this population.

In order to participate the in the research, the EP would need to have worked with a child receiving EIBI. This includes ABA therapy. The child would need to have been younger than five at the onset of the intervention but of any age at the point of EP involvement.

What will happen?

If you are willing to give consent for the member of your team to take part in the research, please complete the consent form below.

Following the return of a signed consent form, the EP will be contacted to arrange a mutually agreed time and venue. The interview will consist of questions that ask about the
EP’s experience of working with EIBI programmes and his/ her opinions regarding this. The interview will take no more than 1 hour. The interview can be done in person or remotely depending on distance. The interview can be held in Welsh or English.

Due to the number of participants required, not all EPs that express an interest may be recruited.

The interview will be recorded on an iPad which is password protected and will only be accessible by the researcher. The interviews will be transcribed and made anonymous. Following transcription, the recording will be deleted. The research findings may be used in a publication and, if so, all information will remain anonymous and therefore not possible to trace to any individual area of the country.

**Participants’ rights**

By completing the consent form, you will be providing your consent for the EP within your team to take part in the research.

Participation in the interview is voluntary. The EP will be asked to read an information sheet and complete a consent form. They may decide to stop their involvement at any time with no consequence prior to the transcription of the interview. After transcription, the information will not be traceable to an individual and therefore withdrawal of information will no longer be possible. Transcription will take place two weeks following the interview.

**Confidentiality/Anonymity**

Any information that contains data that would identify any individuals, schools or local authority will not be used. The identity of the participating EP will be protected.

**For further information**

Hannah Williams will be glad to answer your questions about this study at any time.

If you want to find out about the final results of this study, please email the researcher and we will send you a copy of the research.

Contact details are as follows: Hannah Williams: WilliamsEH2@cardiff.ac.uk

If you are unhappy with any aspect of the research or would like to contact the Research Supervisor for more information, please email Andrea Higgins (HigginsA2@cardiff.ac.uk).

If you have any ethical concerns relating to the research, please contact the School of Psychology ethics committee (psychethics@cardiff.ac.uk).
CONSENT FORM
Applied Behaviour Analysis and Educational Psychology (EP): what is the role of the EP within Early Intensive Behavioural Intervention (EIBI)?

The research aims to investigate the use of the role of the EPs within EIBI.
By signing the consent form I agree that:

- As PEP/employer, I give consent for the EP within my team named below to participate in the research.
- I understand that the interview will be recorded.
- I have read and understood the Participant Information Sheet.
- I understand I may withdraw my consent for the EPs involvement at any point without penalty.
- I understand that I may withdraw the information the EP provided up to two weeks following the interview. After this, the interview will be transcribed anonymously.
- All questions that I have regarding the EPs and my participation have been answered satisfactorily.

_________________________________
Participating EPs name (Printed)

_________________________________
_________________________________
PEP name (Printed) PEP signature and date.
Appendix G: Interview Participant Debrief

Thank you for your time.

Applied Behaviour Analysis and Educational Psychology (EP): what is the role of the EP within Early Intensive Behavioural Intervention (EIBI)?

What was your involvement?
You took part in an interview that asked you to discuss the role of the EP within EIBI programmes.
The interview was recorded on an iPad that is password protected. Only the researcher has access to the iPad. You may withdraw the information you provided up to two weeks after the interview with no consequence. After the two weeks, the interview will be transcribed anonymously.

How will the information be used?
The researcher will transcribe the interview and draw out main themes to identify any key aspect of the conversation. This will be done across all interviews. The common themes will be reported anonymously in a research paper for Cardiff University which will summarise the research and its findings.

Why is this an important study?
It is hoped that the information would provide a better understanding of the role of the EP within EIBI programmes. The research may then help to inform the profession on how to further develop the skill, knowledge, and understanding of the workforce.

What if I want to know more?
If you are interested in learning more about the research or have any further questions about your participation in the interview, please contact Hannah Williams (WilliamsEH2@cardiff.ac.uk).

Support or concerns.
If you would like support following your participation, please contact the researcher Hannah Williams (WilliamsEH2@cardiff.ac.uk).
If you have any concerns about your rights as a participant in this study, please contact the research supervisor Andrea Higgins on HigginsA2@cardiff.ac.uk. You may also contact the School of Psychology Ethics Committee on psychethics@cardiff.ac.uk.
Thank you for your participation.
<table>
<thead>
<tr>
<th>Theme</th>
<th>Subordinate</th>
<th>EP1</th>
<th>EP2</th>
<th>P1</th>
<th>P2</th>
<th>P3</th>
<th>P4</th>
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<tbody>
<tr>
<td>Us and Them</td>
<td>Separation</td>
<td>There is a real fear about engaging with them. It’s almost a bit like if you make eye contact with them, that’s it then. Do you know what I mean? So we’ve traditionally stayed away. There is always a worry or anxieties aren’t there. I think it has stigma attached to it really so we’re always really wary of going anywhere near ABA companies. I think</td>
<td>...Obviously working for the local authority they can accept that better than from a private company.</td>
<td></td>
<td>The independent psychologist in my experience has been very fair. We’ve had a lot more sensible conversation with the independent Educational Psychologist about the whole area of ABA and areas of strength and areas that would need to be supported with other techniques. Um. I’ve had a lot more sense from private Educational Psychologist about that than</td>
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<td>Battle</td>
<td>traditionally we have anyway.</td>
<td>I think they’ve been fed a bit of a line of ‘you have to do it this way’, ‘you have to kind of be underhand’, ‘you have to fight for it’, you know. Which isn’t helpful for the child and sets things up in a cold light from the start rather than a ‘look we’ve got this way of working we think, we found its really helpful with our child’… There was a threat of a tribunal.</td>
<td>I didn’t want like my friends to employ independent EP as I know many people do, a) because of the money it was going to cost thousands and we were already spending thousands of ABA. At that point a lot of my friends employ independent EPs which cost about two thousand pounds for a report. Because I sort of thought if I can convince the local authority</td>
<td>the local authority.</td>
<td>It’s a bit like you know it’s us and them its Local Authority including the EP and it’s the ABA staff and the parents and it’s rare for them to be collaborative.</td>
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EP, my battle is won, because they will take her lead and use her battle and that was the stance I decided to take.

..people like ** or **. These are famous names in the EP world we sort of share names around of who of the best EPs who are EPs who are ABA friendly who are the EPs who the tribunals respect.

There is sort of like a subculture of private EPs that people hire that write an EP report which like I said will cost two thousand pounds, you will then slap down
on the table at tribunal and say ‘look this is what an independent EP said so we’ll hold that up against what your local authority EP said and lets EP off’.

**Table:**

<table>
<thead>
<tr>
<th><strong>Motives</strong></th>
<th>That’s up to the providers as well, I suppose they’ve got to make a profit so it’s going to benefit them to get as much money from the Local Authority as they can.</th>
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<td>The main issue with ABA, it’s not the parents itself, it’s the organisations and the fact that’s it’s a lot of private organisation and private therapists seek to maximise the difficulties the children face in order to justify their costs and they seek to make things sound</td>
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much more complicated than they really are to sell their product and that’s my issue with ABA.

That’s what I dislike about it, it makes things, it makes things more complicated than they are in order to sell the product. And in some ways it’s good. I did often think sometimes we should we be more explicit about the psychology, I think sometimes we forget why we are doing things.
It’s like they’ve got to prove why it’s so expensive and actually, if you’d said it’s expensive because it’s so intense, I could accept that, I can accept because it’s happening every day but kind of all the terminology jargon.

I don’t know whether that’s because where the ABA community, their therapist tell them it’s going to be difficult tell them there’s going to conflict
whether that’s a way of kind of getting parents to buying into it more.

Cooperation

His programme just runs really smoothly and we haven't really had a lot of involvement with him. Um, other than his annual review was held a couple of months ago and that was really positive. Parents came here, had the annual review and everything was great but they had requested a cognitive

We’ve been using nursery staff and our BCBA has been going in um kind of training them and setting targets but they aren’t ABA staff and we’ve had. Um. What we’ve found is things he has learnt to do at home far exceeds what he’s doing in nursery. Um. So at the moment it’s just this week we’ve starting with

I think that’s where ABA falls down in school is how best fitted the person implemented does understand the key stakeholders, and the key stakeholder have to be involved and understand what it is your trying to achieve. I feel very fortunate in that our tutor
assessment from an EP so I went to his home and did that. So I spent some time with him and his ABA tutor who was really good. Um. And saw her doing some work with him at home as well and that changed my view of it on ye on ABA I think really. So you can see it run differently so that was really good so ye that’s probably my role that’s all I’ve done really.

our own tutors at home going into nursery for the first time.

was working in an ABA school before so she understands what a school environment is.

She has two meetings a term after she has done the assessment and trained the tutor. There is a meeting with the SENCO, the teacher, the outreach person from the local authority and the tutor to discuss, I forgot the parents, to discuss his progress, how he’s done, how
he’s progressing, is there anything that still requires attention and new targets and its very, very collaborative.

I think with the tutor that we have she’s fitted in with school culture without obviously compromisin g the delivery of the ABA programme.

I think to the school that there was such a difference with the other children and to be able to
<table>
<thead>
<tr>
<th>Being Heard</th>
<th>Parental Agency</th>
<th>...point was when I said to her ‘I don’t think you understand; he can learn enough, He can</th>
<th>After sort of battling with a lot of people to try to improve the situation I decided that,</th>
<th>Every decision I made regarding my son and how he would be</th>
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<td></td>
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<td>attend to the curriculum which they had difficulty getting him to do initially because there had been a big change and children on the spectrum not being very good with change without having the support structure in place. They have been exceptionally supportive since the ABA tutor has started.</td>
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</table>
do a 50 piece jigsaw’ and she made some kind of sound suggesting she didn’t believe me. So I thought right and I video’d him doing a 50 piece jigsaw and, in them days, you didn’t have iPhone I was on a tiny little blackberry and I video’d him doing a 50 piece jigsaw. I think it was a half an hour video and I went to her office with an old cassette tape and said ‘do you mind if I show you this’ and she said ‘ok then’. And we started watching and I think it gradually dawned on her

well, actually we need to be looking to see what we can do, so...

managed in a mainstream school environment has been accurate.
that I was going to make her watch the full half hour to show her putting that final piece in at the end. And after about two minutes, I mean it’s very boring watching a kid doing a jigsaw, at that point she said ‘ok, ok, yep, ok, I get the picture’.

Well I plagued the poor woman, I rang her, I had her over the house I went to see ** in nursery school, I took videos to her office, I rang her again, I emailed her...
Difference in Voice

I think EPs are really valued by parents and valued by people outside and inside the Local Authority. So I think that gives us a lot of status.

The people in the team in the Local Authority valued my input as well. So ‘I think it would be really helpful if you go to this meeting’ or ‘I’d really like you to be involved’ or ‘would you be able to speak to this person’...

I’m not going to stand up there in a tribunal situation and not know what I’m talking about [laughs]. So I have done perhaps more reading than um to make sure I was well informed.

She wrote a report and that report that she wrote went almost word for word into his statement. And then his statement had ABA and mainstream because they took her lead completely.

If the local authority EP said ‘the child needs the local authority eclectic teach schools’ then you have to go to, you’ve got to fight because their seen as the expert.

I tried really, really hard to get speech and language therapists involved in it and they were basically not interested.

It has been an uphill struggle to get anybody to be interested in him form any particular services to be frank. And actually most of them has been pretty dismissive about it.

It puts me in quite a difficult position because who listens to parents, what do we do know.

It was the Local Authority; it was their own professional who said that he needed ABA.

They are their experts.
<table>
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<tr>
<th>Unfairness</th>
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<td>If it’s part of their offering then it would stop people spending ridiculous amount of money on independent EPs and tribunals, on lawyers because there’d be no supply for it anymore. Because it’s the unfairness of the system. It’s not true to say that the state won’t pay for ABA - they will pay for ABA but only if you’ve been rich first to build up your evidence base and persuaded your EP like I did or bought in an independent EP. But that’s just.</td>
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<td>I’m not really sure that expecting every parent to run their own programme at home is the best way of providing this provision either. I think that home programmes can be very successful and that’s all great and I’m sure that some parents do value the kind of the degree of um understanding they get by being an integrated part of that but essentially, by making everyone to do home programmes your just asking parents to be project</td>
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<td>To see that parents wouldn’t have to fight to get it for their children in the future. I guess a lot of people wouldn’t be able to do it because it’s very expensive and there we had to make sacrifices to be able to do it.</td>
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163
how I played the game but it shouldn’t have to be that way.

What I didn’t mention is how much money you have to pay for ABA privately at first and effectively that means its only available to the rich.

I payed probably 45 thousand pounds. We re-mortgaged the house to pay for ABA but once I built up that evidence base to say to the power that pay so that **ABA could get support. so it’s like the rich get richer.

managers and with everything that that entails and it’s a massive job.
| Uncertainty | De-skilled | It got off to a muddy start in the way it was approached by parents. So school was left thinking ‘well, we don’t know what we’re doing wrong’ then they sent the play therapist into school. I wish, if we got in at that stage, it might have stopped a lot of difficulty and maybe have some clear ground rules at the start that would have been better. We’re being told by the parents that they couldn’t do what they were doing.

That’s been really confusing. So like I said ** programme has been delivered in a completely | A panel is a mysterious entity which seems to have case officers and head of SEN on. I’m not sure if the Ed Psych goes to it or not. I don’t get the impression they do its more a paper exercise. |

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165
**I’ve struggled with that a little bit.** but not being told what they should be doing and kind of being left a bit like, so in the end they end up doing nothing.

**It’s been really limited.** I didn’t really have any experience or understanding of it before that.

The only thing was, I guess, a confidence thing and a lack

**Interviewer:** And how many ABA cases have you been involved with.

**Interviewee:** Only one.

**Interviewer:** Really, I think the level of knowledge about ABA is at such a low level.
of knowledge. Specifically about the ABA that was a gap for me.

Ye, my lack of knowledge completely honestly. My utter ignorance to start off. I obviously knew what ABA was but didn’t really understand the principles behind it. I’m still not 100% I’m a little bit further forward now but I still struggle a little bit.

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<th>Helplessness</th>
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Inside the psychology world wasn’t really helpful at all. And the clinical psychologists He wasn’t learning anything and we were told he can’t learn, he can’t communicate, He wasn’t actually getting help from anybody who was involved with him and it was quite a big
just came up with really general statements about how to manage my son’s behaviour that, things like putting locks on the window or, you know, it just didn’t seem they didn’t offer any techniques.

I found them pretty useless. The speech and language therapists couldn’t get ** talking and pretty much said. I hired a private one and she said he was never going to talk and I think what she meant was I can’t get him talking.

he can’t do this and he can’t do that.

kind of multidisciplinary team that was working with him already. And what they were doing seemed to me to be quite ineffective.

Trying to get somebody to come out from the Local Authority to assess him and give us some help with trying to work out what we could do for him and nobody was really that willing to do that.
<table>
<thead>
<tr>
<th><strong>Distrust</strong></th>
<th>It's kind of, I do think that parents might have had in the back of their minds of going to tribunal all along and that's why they didn't share what was going on.</th>
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<td>What are we going to have to give this mum or are we going to fight her.</td>
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<td>But it has massively increased the overhead of our administration for a bit and I can't help feeling that some of that comes slightly by design because they don't want anyone else</td>
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<td></td>
<td>Even before she saw him, she questioned whether or not any aspect of his behaviour would need to be managed with intervention.</td>
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</table>
The family were very guarded.

The parents are stating that they wish to gradually increase the child’s time at school. However, I suspect that, that’s going to be if at all very drawn... I think they have no intention to integrate the child in school. I think they wanted the two days in school in order that the Local Authority pays for the ABA programme.

doing ABA either.

I think have a brief to not provide ABA. Um in fact, the first person who ever assessed my son, after I asked the EP for a very long time to try and see if they would actually provide some input for him, um actually um denied knowing what ABA was which I found quite interesting.

it felt like it’s been kind of used as a way of raising suspicion about safeguarding if I can give you an example which you may or may not want to use
for this [laughs]

um basically kind of making um insinuation that the home based part our provision wouldn’t be of up to standard because we weren’t capable of selecting people who can work at home

trying to think through the safeguarding issues and had that been done in a more positive way I think that would have been quite helpful I don’t think not particularly in our case but there has to be some concerns about people who are working outside the
| Obscurity | Once you’ve unpicked at the language and terminology it’s more straightforward then, isn’t it? It baffled me, why didn’t you just say positive reinforcement rather than it, there was one term that they used, but I can’t remember what it was, and I sat there and thought why can’t you just say it’s this instead of coming up with the different language. | I think, not that I didn’t understand the terminology, again it’s about, I don’t think they are the most accessible of report. As much reading as I did before it didn’t really explain what the programme was about. It would have been harder for me to see the benefits of | system but you have to think about why people are working outside the system |
I actually think that the reports by making it so difficult.

I wouldn’t use the language that the ABA therapist used. I think it’s, I think it serves to make actually what are quite simple premises, I think they make them sound more complicated than they really are, you know. ABA, you know, uses sort of motivator and rewards, teachers uses now and next and actually, I don’t see what
| Tribunal Pressure | Different from usual. | So I was thrown in at the deep end really, and the work at that time was tribunal work. Um. We did meet with the family but that was in a tribunal, pre-tribunal I suppose situation so I wouldn’t say it wasn’t early kind of intervention stuff. Weeks and weeks and weeks of negotiating going back and forth pulling paper work together the difference is you know. it’s very unusual to come into a piece of work you’re first contact with a piece of work is at a point of a tribunal proceedings I think it would have been a lot more of a positive experience if I’d been learning about it out of the context of the tribunal because that has made it a lot more difficult I think. With the kind of the deadline of |
having to really look at everything, do you know what I mean? It was just crazy it wasn’t a pleasant experience at all.

I feel less I feel more removed from the child. So whereas I would be doing my consultation work or I’m in schools I feel like known the child really, really well but whereas here I’m relying on data from other people and it’s not my data so it’s me interpreting somebody else’s opinion or the tribunal clock so was it my piece of work effected by the fact that I suddenly had very, very even shorter time scale than statutory advice or was it effected by the fact that nobody wants to go to a tribunal really because it’s just unnecessary conflict.

So I can’t say whether that’s because its ABA work or whether it’s because you’re automatically approaching that work differently. Because
interpretation of that child so I feel a little bit far removed if that makes sense.

ASD advisory teacher was involved in those meeting as well. Um I would say a lot of it was looking at documentation so going through all of the reports and evidence. I suppose the casework that ** had provided and trying to draft together our response so it was that sort of work rather than work with the child or work with the therapist. suddenly in a piece of work to understand and unpick why did this family feel that this is the only route open to them.
Within my role I, I confident in using a range of tools isn’t it and ways of working and working practices that are valid within our Local Authority then and role this is completely new to me so I’m unsure about it its confidence thing I suppose.

Defence

The only contact we get from them is under a tribunal situation and that’s not good for anyone because we’re on the defence and their going to be on the OMG how did we end up in this conflict situation out of the blue normally you can see these situations brewing or something but this was a what where
defence as well.
I think it’s a tribunal thing definitely and there is a lot of talk as well within Local Authority isn’t there about you know ** now have four tribunal request about aba and then everyone else goes on the defence straight away.

<table>
<thead>
<tr>
<th>View of Expertise</th>
<th>Doubt of Ability</th>
<th>The SaLT didn’t seem to have the crucial skills that ABA-ers had at at the beginning training in imitation and then mand training and they seemed to sort of only have</th>
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<td></td>
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<td>So if he knows he can get something by having a tantrum or um not using his PECS book he will. His PECS use is poor in nursery at home he can use the the</td>
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<td></td>
<td>But I don’t think outside of the assessment there is any need certainly for us to have any involvement of the Educational</td>
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has this come from
I don’t know how we got to the point of them issuing papers for tribunal before they ever said what it is they wanted so we were at a back foot.
techniques that worked if the kid could already talk or didn’t have autism or didn’t have a learning disability.

They are no more experts on this than someone who has read something from the daily mail or a couple of tweets online or a some blog they think they remember that didn’t like ABA and they are not experts at all.

They don’t know enough about aba so what would they bring to the party.

sentence strip so there is a difference between what he can and can’t achieve with and without the right input you know.

Someone who is kind of an expert enough to understand all the interventions that are being delivered to my child and being in a position to kind of coordinate that provision so that that its optimised across the whole thing and that we’ve got some common objectives over the whole

Psychologist. I think the BCBA is more than capable of making recommendations.
thing. That isn’t happening.

It felt like it was just a means to an end they had to have a EP assessment so it was a means to an end.

EP had nothing to do with the setting up of the ABA programme.

Um I mean the only thing she really commented on she felt from the assessment he thinks he would have achieved things anyway developmentally um but I think um I disagreed with her on that.
You can call it ABA unless you have proper, you I know I mean you can have an MSc in ABA and that is also good I mean. In this country, I think an MSc in ABA is also good to have qualification and I now some purist would say they should have a BCBA as well.

In his school it is BCBA led and has been BCBA for some years now and of course that is better because they just know their stuff better and they have more tools in their armoury and they know

Think its massively important, I think in order to have really good ABA you’ve got to have someone who is appropriately qualified in doing that so when you have someone who isn’t qualified that’s when you can have a really poor programme.

To be frank, we didn’t want the trained staff to be taken out of it and to be replaced with people who didn’t know anything about ABA so we wanted to make sure that there was a reasonable level of training.

It’s not ABA if it’s not run by a BCBA.

Think that one thing that gets me quite cross is, I don’t know how to say this but it’s ABA is sometimes seen as being in a wild west with no standard. I actually find that the standards the ethics the

Interviewer: You mentioned a supervisor, is she or he a BCBA?

Interviewee: Yes, absolutely that’s really important.
when to change programmes and they know ‘oh, let’s try that’ or ‘you know it’s all much better’.

data collection

the standard of professions within that profession is superior to other professions I’ve worked with. I like their commitment to the client and by client I mean the child. I like that all the data is there and shared so you can always see what the progress is and you can see why people have come to the conclusion they have and because it’s all open you can have input to it a discussion about it.

Providing a Way forward

I went for ABA because I could see it had the

Whereas the BCBA had come in and said

She wasn’t dropping ‘how’ or ‘if’s’.
tools to help my son.

Whereas the aba offered different techniques and that’s what I wanted.

This is not an easy road that I am traveling here and the ABA-ers have helped me.

‘well, ye he can. We just need to work it out. Just teach him. Break it down, what is fun’, and I think if it wasn’t for the programme he wouldn’t have made progress.

Almost like there was no psychology in there about how he best learns or any recommendations about how we can help him learn um you know um you know we were tapping into that so it was poor in terms of the lack of um moving forward.

It was more ‘these are the things that would work for my child so let’s go with that’.
<table>
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<tr>
<th>Independence</th>
<th>So I guess, on an individual level it does work but um it’s just the cost, that’s the thing. With my Local Authority hat on it’s a really expensive programme one to one.</th>
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<td>If their expertise if simply to recommend what the local authority want them to recommend then they’re not using their expertise at all, their simply acting as a tick box.</td>
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<td>She was very tricky. She wasn’t really pro ABA. She was but I think the one thing that was in my favour was that she was close to retirement so she didn’t have the fear of getting sacked.</td>
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<td>A friend of mine, if she started campaigning it would be that EP’s should be</td>
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<td>There are pressures there about maintaining the independence of the EP whilst working for the Local Authority and also being there for the families and schools. It’s a really difficult position.</td>
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<td>Ye, I have you have to be careful how you word it. So you can say he would benefit from a programme that would involve using motivator and will engage the child. So you would have to describe factors within the programme and not just say</td>
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<td>My personal experience of Educational Psychologist working within Local Authority is that they have a particular agenda which they stick to and its one that based on resources. And its one of the reasons that I think quite strongly that within special educational needs that the assessment function should not be controlled by people who hold the resources.</td>
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<td>I think with Local Authority with Educational Psychologist you will have that um issue that they may be quite conservative in the way that they assess the child because that’s their prerogative.</td>
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<td>If you’re asking me if in general do Educational Psychologist understand ABA I would say ‘yes, they do’ but they work for the Local Authority and they are likely to support the</td>
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truly independent of the Local Authority. If their paid for the Local Authority, then they cannot truly independent. They ought to sit in sort of independent heart of the world where they’re not. Otherwise it makes a nonsense out of them being independent.

They should maybe sit under the NHS and not under education because that’s where SaLTs and OT’s sit and SaLTs and OTs, although their commissioned by education, they don’t work

he needs ABA and how many hours a week. It would be but just the techniques that how it would work because the Local Authority wouldn’t necessary like that as they can’t provide it.

Ye I think it’s being a part of the Local Authority I mean I’ve never been told that I can’t recommend ABA. I’ve never been told that I need to get rid of the programme but there is a pressure on. There is a pressure that the Local

Local Authority funding consideratio n which is to reject ABA.

I think the Local Authority has a funding agenda and ultimately the Educational Psychologist is employed by the Local Authority. They are there to uphold the Local Authority decision.
for education so they feel slightly independent. And I wonder whether EPs, because psychology is really an NHS type thing but then I guess its Educational Psychology.

I have heard of some Ed Psychs who have put the kids needs above their, their, the people who are paying their salary.

Authority don’t do ABA.
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<th>EiBI</th>
<th>Outcomes</th>
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<td>A year ago, I would have said ‘no it’s a load of crap’. Seeing a different model, I think ‘ye, definitely’ and whilst the feedback form parents is so positive and we’ve got to understand that. What I didn’t understand because I think when you’re looking at the data its such small steps you think we’re not getting anywhere here but when you take a step back and review it after a longer period of time you can see wow this Oh it’s a little bit it’s psychobabble and I’m sure if you don’t I think if for a lot of people if they see that and then never see it in practice they lose the value of it. That can undermine that ABA and it has been successful with this little boy. I think I think actually seeing it in real life helped me.</td>
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<td>I’m in contact at the moment with the speech and language therapist they’ve noticed that they can’t engage children with severe autism at all and they need to do something different. And I’ve had a lead speech and language who had input during a tribunal process and he is an actual convert. Ye I mean I just think that we when you see the child on a verbal behaviour programme and it’s so enjoyable for What I would like to see is a greater understanding of behaviour analysis in education because there are certain things I hear people say about it quite shocking and quite ill-informed and I think it has a lot to offer with a lot of people.</td>
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has gone really well.

I hadn’t met ** before, before his assessment but I read his paper work and on paper he was non-verbal, he was really challenging with his behaviour. Very much like a toddler. Not toilet trained, wouldn’t listen, didn’t engage, no eye contact and then I met him and I couldn’t believe it. He was speaking, his language was really good, he was responding, his eye contact was really good and that was all them and the child’s learning through play really and you just see it working and the massive impact you can have its so powerful.
down to ABA we can’t take credit for that because he hasn’t been in school that’s all ABA.

| Application | Think I would definitely recommend going to see the programme and look at what it actually looks like and then you can interpret that in the way that makes sense to you and in a way that you think would support school.

If the child wants to do it one room or another room if the child |
| Application | It comes from them thinking that’s it’s intensive and it’s unethical and they think it’s unfair for the child to work for 40 hours a week. You work them too hard, it’s too much for them, it’s 30 hours a week of instruction and this bares no relationship to the substance of what an ABA programme is. My son, when he is doing his programme has no concept that he is doing work for most of his day. He’s playing with things that he likes, you know, with different terminology but he’s finding it reinforcing, you |
wants to do it in the kitchen or in the play room or in the front room or on the stairs then, you know, that isn’t a problem.

Because the research suggests it’s a lot more rigid when actually it wasn’t rigid so because it’s so child led at the moment you know.

It, it’s very, very fluid actually a lot more fluid that what kind of um what the research would suggest.
incidental teaching which is mainly following the child’s pace and making teachable moments out of it.

That ABA isn’t just for people with autism and not just for younger children.

Find out more about it and there is so much in there and it’s not just for children with special needs. It’s about managing behaviour in the classroom. It’s everything, even managing our own behaviour.
One is that they are doing ABA already. Well, you might think that you can use the terminology of it but I’ve never seen it. And the other is that ABA doesn’t work for everybody anyway or it doesn’t work for all children.

We were really cautious about it at first because it’s obviously if you research it or read about it widely you see quite …

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<th>Lovaas Legacy</th>
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<td>Lovaas ABA has got a very bad press and, you know, and I remember watching videos of Lovaas twenty years ago and They don’t believe all the myths about normalising and ye I mean a lot of them are still stuck in the Lovaas and the, we’re 30 years</td>
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I'm sorry, making the child do that for like 10 hours a day. It might have had some therapeutic intervention at the end but honestly, I don't think it was the right way to go about teaching. I don't think the children looked happy it looked miserable it looked boring. Ten hours of that a day whereas what I saw was really well structured engaging play session.

behind in our understanding of it and they think that us parents are trying to normalise and drill our kids so they look nice in the Ritz for lunch.
Ye I think it is. I think if it’s used with a whole range of other strategies, I’m not actually convinced how different, whether that’s because that’s me trying to think of it in a way that schools would understand, but actually not seeing it so massively different to, to a lot of other ways of working with young people.

Maybe it’s my lack of knowledge about ABA but I don’t see it as being that different from really good, if you do ABA and don’t understand it properly, you know, you think it’s just reward and punishment and so some EPs are now claiming, I think, more knowledge of ABA than they should and that’s harmful. Understand that it’s not just about table top DTT its about other things. It’s not just about sweet rewards, that it has a technology that is very varied. Clinical psychologist just didn’t want to know about ABA at all and like she was quite, she was looking I think it partly the unknown. I think, as I said to you before, there is a lot of misinformation what is going on I don’t know, I can’t explain it. The only thing I can say about it is that a lot of it seems quite misinformed and as a lay person looking in on it I just don’t understand it.

You’re not really on the same page about what it is you’re discussing.
certainly the child I saw, really good play based learning, you know. Yes, you’ve got to be able to analyse what the child hasn’t learnt, what would be the immediate next steps, what kind of things is the child is interested in, how can we get the child to engage in those activities, how can we use rewards to get them so they can do this, they can get that. It teaches them now and next you know in ABA.

down her nose at it like I do all that already.

Some Local Authorities EPs that are claiming they can run ABA programmes and actually taking over the ABA programmes for the borough and your thinking ‘hang on a minute, am I right in thinking you’ve done half a side of A4 in a three year undergraduate course on ABA? and you’re setting yourself up to be a BCBA.
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<th>Presumption</th>
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<td>They have, they all have invested interest in shoe horning your kid into their existing provision which is already costing. That’s what I was told. If their looking for the Local Authority, then really their only going to recommend</td>
<td>Not involved at all um really justifying the Local Authority services.</td>
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<td>It’s almost like trying to put square pegs into square holes. There are particular provisions which are made for particular diagnosis um and its kind if this is the provision that we have made for this and if your child doesn’t fit into</td>
<td>What the Local Authority decides to put in the Educational Health Care Plan and that’s doesn’t necessarily reflect what the child needs.</td>
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what the local want them to recommend not what the kid needs.

Because it’s not already in their offering and then their being protective of their local offering as eclectic.

You almost feel with them its protecting their own backs. They see ABA as the competition sort of thing because they’ve got the same thing going on they seem to see ABA as the enemy.

They could see the ABA-ers were going to eat their lunch so there is a

this, which my child didn’t fit in to any of them, it’s kind of well um that’s what we’ve got take it or leave it.

I think there is a bit of a kind of professional turf war about it and I think a lot of it comes down to, there has been a massive investment in eclectic education professionally and basically if this is called in as a particular approach it calls into question lot of that provision that has already been made.

It’s a direct kind of competition to the eclectic model that’s
| Prejudice | There has been an assumption from the parents that the ABA will be rejected | She was saying to me that ** couldn’t cope in mainstream. Essentially what she was saying was he was too | School won’t do it because it’s seen as ABA and they don’t do ABA. It’s a special school, so the role provided in special school, which, if I may add, for my son was completely useless. | The most interesting one is this thing, is raising, its almost like raising safeguarding | There is also a perception that the parent are actually too demanding when it |
out of hand or even using ABA approaches would be rejected, and that assumption is left us with all sort of situations that are conflictual which has harmed, well in the sense that the situation has resulted in conflict from the outset rather than us working together I think.

severe, he was unable to learn, so what’s the point of sending him to mainstream.

‘Oh, don’t touch ABA, it’ll turn your kid into a robot. It will destroy your family life. You’ll probably end up divorced because of the stress it will place. It’s um cruel. It’s too intense. It makes the child not have a childhood.’

Yes, they were prejudice too.

Whereas a lot of Mums decided that the Local Authority EP is just totally biased. Is only

there is very much to show school how effective that can be.

issues about parents based on the fact that maybe, they have deluded sort of about how much they’re child can achieve.

Don’t keep maintaining the ridiculous position that it’s too American or it doesn’t work in the UK.

comes to their children and the Educational Psychologist go in with quite a cynical approach. They want a high provision all the time and their child might not necessarily actually need it.
ever going to recommend what the Local Authority want to provide.

I think your generation of EPs coming through are more helpful but the last generation of EPs, some of them are so rigid they will never open their minds to ABA, absolutely not. And they will find a hundred reports that will tell you ABA is cruel and horrible and you know all this stuff and you end up fighting on the back foot.

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<th>Relational</th>
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<td>We’ve been saying ‘where are his IEP’ even if he’s on a I think had a bit of a personality clash between</td>
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home programme he still should have an IEP where you are agreeing targets on it which link in with the statement, and these targets need to be reviewed next time and to be fair, she has now got it. She is now writing an IEP whereas traditionally nothing was coming through at all.

the ABA therapists and the school staff and it wasn’t, they weren’t coming in, they didn’t come in and say ‘and we’re doing this particular programme, we’d love it if you’d it’. It was all sort of, the ABA therapist coming in and just doing what they wanted without having a conversation with school.

It’s not, in this case it’s not about the parents saying we want something understood and was rejecting of it, I don’t know, but despite that, it wasn’t recommended or even accepted. She didn’t really discuss it with me really. I feel that the second Educational Psychologist that we had and understanding of ABA. Knew that it was a provision or it was an intervention that was viable for children who has ASD of that description.
and the Local Authority said ‘no’, it’s about miscommunication.

We knew the child was originally going in um in nursery and then the child suddenly decided to do, change that and do play therapy at home and it wasn’t really clear what they were doing.

Just not being upfront and that was, makes it very difficult for everybody. If you don’t tell the Local Authority what they
want, if you don’t provide the advice to the Local Authority.

At the end of the day, it’s all about kind of getting the child to make progress so somebody, I don’t know, closed off.

| Conflict | I suppose fitting in with the programme which is hard when we don’t have that level of understanding of a programme. So it can muddy, I think, it muddies it has muddied the water a little bit because we might have an | I can see some conflicts of, not conflicts of interest, that’s the wrong word, conflicts of priorities. | So the relationship is always going to be a little bit difficult just for that reason they don’t agree that he should have this provision. They don’t agree that he needs it they don’t think that it works. |
| Visibility | opinion about something but it doesn’t necessarily fit in with the ethos of the ABA or the programme, then it’s, it’s been a bit of a, I don’t know. | I’m not having any input into the ABA programme itself. Within the home setting, that’s run by the ABA therapist and the team around the child and that. I’m only there to hear what their thinking is, sort of thing, does that answer it. | I haven’t seen an EP for years. They don’t even turn up to the annual reviews now. There is an annual review every year and in theory your Local Authority would turn up to they don’t bother. | She came to the house to, um, do the report for the statutory assessment for his Education and Care Plan and that was November 2015. Totally hands off from what we’ve seen. None, no nothing. She did the assessment and that was it. | The EP haven’t had input, um, the initial Education psychologist made recommendation but they don’t have, they don’t have any engagement as far as we, since the Educational Health Care Plan has been put in the place. |
The programme itself is set up by the ABA therapists and the consultant and the families so I haven’t had any input into that.

Familiar

We knew all the kids that were going in and going in to nursery and the kind of doing transition meeting and things so it was really, really good.

We’ve got to get in there at the early stage and build up that relationship with parents and give them confidence and

Just be upfront, you know, maybe not and try use your good relationship with the school to support that.
make them feel supported. Um and that’s one thing that I’ve really made an effort to continue to do with the parents. |

It’s an expensive approach for one child to be receiving a completely home educated, full time ABA programme and that’s where the fear comes from. Because that equates to x amount of money and with that money we could be providing this this and this for all these

Because they are basically only looking at costs and that basically not independent. But in the end its about money. They will say it’s about, they don’t approve of ABA but I think actually they don’t care. It’s about money. It’s about money. Because they really are programmed to

It’s seen as bit of an expensive service. Whether they’ll be able to recommend it anyway, I don’t know. It’s normally about funding and how can we get the funding. Essentially it comes down to money. Although there are savings long term, there are short term costs, and the

I think funding has more to do with in consideration I guess.
other children so I can understand.

Which is ‘do we think is going to give us value for money but also deliver a programme that is going to benefit the child and the family?’

say no to ABA because of cost.

Two, because it’s not in their offering, it’s going to costs them extra.

Clearly there is a conflict because if they, if you go out and say that every kid you ever come across needs ABA, you could bankrupt the Local Authority.

You ought, your legal duty ought to be to meet the kids needs, but there is a conflict because if every kid needs ABA and it costs 40 grand. So I can see the problem but that’s why getting it authority are really short term focused because of budget cuts so it’s very hard to get them to do that and see whether it would work long term.

Ye, its absolutely down to money. My Principal Ed Psych said to me where I work ‘if ABA was free, no one would have no issue with it’ and I though ‘ye, I can see that’.
| Developing Skills | Ye now, I do. If you’d ask, it’s hard for us isn’t it, because we are technically working for the Local Authority so I’ve got the Local Authority hat on and I think this child has made so small progress, we’ve paid all this money and they’ve made this much progress, but when you meet with the parents and they’re like, they can now tolerate having their hair brushed, we can now brush it’s very much a child led programme. I mean there are things that you want a child to do but if he makes a request we’re all like, I said earlier, we’re all so pleased that he’s made a request and making and showing some communicative intent we all follow that, you know. Now he’s fourteen, he’s six foot and he’s twelve and a half stone. If he was still hitting me, I would be in real trouble and he would be a statistic going into residential care and now the ABA-ers have giving me tools that I can use so he can manage his own behaviour. I’ve got him under instructional control which some people would think is a very unfashionable But home based is hair cutting. We had to have three people to hold him down for a haircut and it was traumatic for him, it was traumatic for him, and we’ve worked on that now for two months and he will sit in his chair and have his hair cut and it’s at home at the moment, not in the hairdressers, but still and he’s sat there watching TV having it done like it’s the most normal. That’s what I have to say about ABA, its transformed its life essentially. |
their teeth and you think that is such an amazing step for them functioning as a family and to them having more independence.

thing to say but then they need to come and live with my what I’m living with, because if you have a severely autistic son who has severe learning disabilities who is aggressive there is no time with pandering around with nice words, you just have to have him under instructional control.

My point has been he can learn and actually, we got his behaviour under control and he is not going to his class and stuff and he’s not going to make noise.

thing in the world.
Evidence-based Practices

Found was driven by the ABA consultant and the data rather than it being like a meaningful ‘let’s talk about the child’ sort of stuff.

I did often think sometimes we should be more explicit about the psychology. I think sometimes we forget why we are doing things.

I don’t believe in ABA and yet it seems to be working, so there is a real antithesis towards Ed Psych from a lot of parents, you know. Parents in general but also parents doing ABA in particular.

To see it then dismissed by people who claim to be professional in this case and could see it methodological and anecdotal was really quite odd.

OT - I’m not really a fan. I thought it was

When I presented the data and the information from our BCBA about why we needed the programme, they had no ground to contend that all because the assessment was so poor.

Your faced with really in depth data and a person that knows your child inside out and you’ve only got, you know, an hour to see a child, then it’s very clinical isn’t it.

I don’t know where these ideas are coming from. I cannot see these in any scientific literature I have read. This is making me feel you don’t really understand what this method is and that can’t be good for the relations either, can it?
voodoo, I mean having him rolling around on a yoga ball and that's supposed to help his autism? There's no science behind that, yes, but all the nonsense about himshape his handwriting and doing what they're supposed to do which is occupational therapy. At the moment, I've asked them to help me teach him to use a knife to cut meat, stuff like that, yes, but all the nonsense about
proprioceptive and rolling around on a yoga ball the stuff with no science, no thank you.

Responsibility

If he’s off in a little room with the ABA because it’s so kind of loud and exciting, it’s going to be, he’s not going to be in the school and in the routine. I don’t know how much it can work within the classroom setting because it is so loud and disruptive, I can’t imagine within the classroom how you can

The way the school are set up are to integrate ABA programmes into them because they have a fairly, what’s the word, a kind of set of structure to them to maintain the rigorous fidelity as to how the programme is run. So I guess another thing that, I guess, it’s more of a policy level than an individual level but is sort of to think about ‘well, if we did
be charging around with a parachute over your head. Basically the impact on the other learners so that's the sort of thing.

But within a school, because there are other people using those areas, there are different restrictions. One thing I'll say is there's different restrictions in a school environment, not just about expectations but it's often about timetables, you know, playtimes um want to go down the route taking this intervention into the mainstream system and recognising the differences that there are with individuals within their own programmes’.

It just feels like, it won't fit easily into the model that we have for schooling, including nursery school if I'm honest. And how you get to the point to when it will, I'm not sure. It's going to take some thinking about.

I won't go into the reasons why he was going for um half time to a
snack times, you know, there are often quite rigid routines so often the priorities for school is to get children into the routine of the school day whereas perhaps one of the main priorities or the ABA therapist will be to develop the communication. They are working with the key thing is getting him to initiate interactions and make requests and of course in the ABA programme, special school nursery and half an ABA programme and never the two shall meet.
any time he makes a request it's kind of followed because everybody's happy he's making the request, and I'm kind of thinking what happens if he makes the request at carpet time then the school priority might be for the child to learn two letters.

I can see potential conflict with two different kinds of systems might not gel.

| Current Role of EP | Gatekeeper | When I started ABA, the EP was the absolute gatekeeper and it felt more like it was just a means to an end. They had | Guess at the moment, if I talk about what the role is at the moment, if I talk about what the role is at the moment, I understand is that none of the Local |
key person what I needed to persuade.

She wrote a report which sort of grudgingly said 'let's give him a go with ABA in mainstream' but didn’t say it and then everything was fine because she said it. I got it and if she said no I would have had to go to tribunal hired an independent Ed Psych.

But in general they are seen as a gatekeeper and ABA prevention officers in my mum world.

I don’t quite know what the to have an EP assessment.

We had to have Ed Psych input so that’s when she came out to do the report for that, so that’s basically it, she not, she didn’t provide any input into the programme.

moment, it’s really providing um, we’re in contact with an EP who provides funding for us for his programme.

It’s more kind of a gatekeeper of resources role.

Authorities expect that the EP to have a lot of engagement with parents apart from the initial assessment.

Ok, alright so to assess the child to see what the child’s needs are, what they would benefit from to be able to assess whether what they are getting is appropriate for their needs and to make recommendations.

At this time the Educational
| Individual work | Statutory work, so doing the Appendix D reports, statements. Although, thankfully we’re not doing as many of those at the moment. | Well most of the work is individual work, rightly or wrongly and it’s about helping them meeting the needs of the SEN pupils in school. | Psychologist sees the child assess the child makes his recommendation and that’s it. |
| Consultation | Right ok, so, um we work through our consultation model. | I think we can offer our, that fresh pair of eye works sometimes because I’ve |
certainly gone into cases in work where they have everything tied down, you know, they’ve got loads of data but the child has got stuck on something and it’s providing a different perspective on that from a psychologist point of view.

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<th>Systemic</th>
<th>To do some systemic work in, they and they expect that the, when they have concerns about group of children I help the school as a whole, provide intervention or a way of...</th>
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<td>Managing Conflict</td>
<td>I think that’s why it’s important to build that relationship with them. When we first started to get families coming through that were interested in ABA, it was really that took the role of meeting with parents. We had um initial tribunal meetings about one pupil. Had gone we had another</td>
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tribunal um come through requesting ABA.

language of the education system rather than language of ABA, and then maybe looking at where in the school day does it fit. He only goes two afternoon so I think it’ll be around marrying up the expectation of the parents and marrying up the expectation of the school.

That’s me going in as a facilitator of the conversations really, not necessarily, you know, if he need to be changed he know. When they don’t turn up, its good, we just leave each other alone.

I think if you, if you get into dispute, they will up the EP to look at your kid and presumably to say that your kid should go to the special school.

It really does seem to be that the EP only comes in at the beginning and if you’re in dispute.
| Movin g forwar d | Monitoring         | It didn’t end up going to tribunal in the end so the work that I did post that stayed, I guess, was more monitoring stuff. So we had built in to his working document or his statement that the EP would monitor and that there would be regular review | What they should be doing in my view is helping to monitor and coordinate the provision, but that doesn’t really happen. |
meeting so I was involved in that capacity really.

Strategic I’d say. Probably more strategic role rather than direct work with the child or family or the therapists. Ye, monitoring reviewing um and just ye pulling together maybe local authority information, ye.

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<th>We want, for any child, to be reintegrated back into school. It’s great that they’ve got ABA programmes</th>
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<td>At this point, it’s understanding what that programme involves, translating it back into the kind of</td>
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<td>Looking at how the child learns, how does that translate into the classroom, how can we use the techniques that are used in the home</td>
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but I want them to be able to make good progress so they are able to function and get back into school, and I guess, because of our links with school and Local Authority and with other kind of agencies, like the speech and language therapists and OTs, we're in a really good position to facilitate that.

Build up relationships and be able to negotiate better, we can get more work together but maybe bring costs down a bit. So just language that most people understand, demystifying it and then it will be about supporting school to think about which element of that are appropriate to use in school, how it's going to be used in mainstream, the things that they think are going to important in school.

My role is going to be about meeting with class and how can we modify it so how can it work so it's still working but not having programme into the school. Get your, get to know the programme, talking to the programmes, getting to know what they want form the programme, what their aspirations are for their child, how its currently working, um and just starting on the foot of ‘I'm not here to take your programme away’ but to work together and have your child assessed whatever that assessment is and to identify techniques that are working.
think differently about stuff.

That’s one thing actually we’ve been looking at as a Local Authority. After this, these processes is about having maybe a consistent provider rather than different people providing different services. I think that would be really helpful in terms of us understanding data because if you’ve got a similar format of things coming through and we coming to review, it’s going to be a detrimental effect on other children and not coming into conflict with the demands of school. Marrying the demands of two systems that’s what the role is going to be the ABA.

If they have good communicatio n with the ABA therapist, surely it would, specifically if they haven’t had the opportunity to see the home programme, I think.

So I think it will be about And what is worked on at home is worked on at school sharing kind of success of what works for the child.

Kind of doing it, a collaborative problem solving approach rather than it being us and them thing.
much easier than if we've got a lot of conflicting and different ways of looking at it. So that's something we're going to consider definitely.

So I think it would be more helpful for us to meet up before hand with a key provider, we think 'right, in the future, if anything arises in the future, you're going to be our key provider. But before that happens, you need to come into us and you need to sit down and understand what's going on.

supporting everybody to think about when each skill should be prioritised.

I just think a lot of this could be avoided if we had teamed up better and everyone is talking and the right information is shared.
for us as a Local Authority and equally, we need to come out to you and get an understanding of how you work as well.

Once I think we build up an understanding of ABA and start to work differently with providers, we can look at more flexible options. So ** now, for example, when I met with his tutor she was saying because he’s making such good progress their coupling up now with another child who’s on a home
programme so they are starting to joint therapy together which is brilliant because not only are they getting better experiences socially but their saving money then, isn’t it, so there are ways around it aren’t there.

To start building a relationship with providers and getting an understanding of if we are going to get a provider which one do we want.

| Up-skilling | Was looking at taking a more strategic | I think it’s making themselves a bit | I think there should be kind of a monitoring | so the role of the EP, I guess is being involved in |
approach so we had meetings didn’t we with um, so he came over and we started looking then didn’t we about how we could build capacity in the Local Authority. So I was involved in that work with other Local Authority staff.

Maybe if we could just get more staff trained in the Local Authority in those approaches or techniques, get our LSC trained up so we can go back to families and say we might not be using it in a prescriptive way but we are more expertise in ABA because they’re not just ruling it out.

I think they, if they have real knowledge of all different disciplines relating to my son, including ABA then that would be useful, but if they don’t know ABA which is the one thing you are using then it seems to me that their input would be fairly useless really.

role, especially as there is sort of resources being invested in it but I don’t have the confidence that the people involved actually know enough about the technique to give advice about that.

all those different situations right up to, you know running, an ABA school that have a curriculum that is based on ABA methods, as well. Different situations would call for a different kind of role but the first step is really understanding what this kind of intervention can deliver for people.

Potentially Educational Psychologists have a lot to contribute to that discussion but the first step is recognising that the conversation needs to be had.
| Incorporation | ABA becomes embedded in the state offering, ABA in special schools, ABA trained shadows um in mainstream school, ABA training provided by the Local Authority so it’s all connected, and for severe kids like mine, ABA in special schools BCBA employed by the Local Authority. They have Local Authority trained shadows. | It works and how can we get this in the Local Authority. | The future of it, personally I’d like to see it as an offering that is given to children early on. I think that our early intervention is terrible and what I would like to see is a whole scale revision of intervention and ABA should be offered at that stage. ABA as a profession is not fully integrated into mainstream provision in the UK and that at | I would like it to be integrated into the provision given by the Local Authority. A lot of money and time is wasted on provisions that don’t work because they’re diluted. I would like to see it in the Local Authority provision. |
in mainstream and they are trained by the BCBA who is employed by the Local Authority. So they train up a team of shadows by a BCBA employed by the Local Authority and they go into mainstream school.

ABA unit attached to a mainstream school, again overseen by a BCBA. You have the unit attached to the mainstream they are using ABA in the unit but it means the kids can use the mainstream.

They employ a BCBA and they its heart is what the problem is. How you address that, well, it's a nude point isn't it. I think that things are changing gradually now that you have, at least in England you have the free schools which are offering ABA as part their curriculum, but I just think it's going to take time and more experience before people get to the point where first of all before its accepted.
tend to have one or two ABA specific classes for probably the most severe young kids but then the ABA team actually go to the rest of the school to go to a child with a behaviour or to a kid that needs mand training. That model, just like they have a SaLT team in a school or an OT team in the school, they’d have and ABA team in the school.

ABA will be available to all because that is insane, and the Ed Psych’s don’t have to feel like they are um, their um, contravening
their pay
masters wishes
they can
recommend
ABA because it’s
part of their
offering.

If the kid needs
ABA, then they
can recommend
it because it’s a
part of their
offering. If there
is a kid doesn’t
need ABA, but
is a kid doesn’t
offer it, then they
recommend
ABA. Then they
recommend
they can
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home
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be sustainable, if
I think for it to

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have to become
so then don’t
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even
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need ABA, but
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a year model. That's, you know, that's twice a private school fee. It's got to be the Local Authority will want to have some input into it.

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<th>Ensuring Quality</th>
<th>They could maybe help make sure that parents are getting good ABA. They can maybe help distinguish between good ABA and poor ABA. Can maybe help bring ABA into the Local Authority offering in a high quality way, because if they are looked at by the Local Authority as</th>
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<td>I think the EP could be doing because it's in their skill set, is kind of, having an overview of a particular issues that the child has and kind of what interventions are available for them and kind of providing some kind of evidence based overview of what is available and how suitable it is likely to be.</td>
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being key experts then it’s really important that they understand ABA properly and help bring good ABA to the kids who need it.
Compassion

When we were going through that process, when you look at the chronology of what had happened before hand, there were a range of issues which the Local Authority maybe didn’t fulfil it’s, it’s duties early enough and there were issues with the school so parents were, were, I think really frustrated with things and that’s why I think they went to look for ABA.

I mean, you normally with tribunals you have some rumblings that they weren’t happy and you’ve already had those pre-meetings. So we had to do all those meetings which is about trying to come to an understanding about of the parent’s position.

Actually understanding why. We’re not mad us parents, we’re not deluded, we’re not. I’m a Cambridge educated, 15 years in the city, secondary school qualified teacher, you know. I’m not a deluded cult member. I went for ABA because I could see it had the tools to help my son.

The cost is a problem. In that and they don’t understand what it is. I’m so enthusiastic about it because I’ve seen ABA being applied.

They don’t really understand it and rather than trying to understand it, it was more a case of let’s try and dismiss it.

It’s trying to understand what it is, not to just take the view that this isn’t going to work for the child. Find out a bit more about what they are doing ...and

If you can’t, not speaking from a position where you feel trust that the other person understands what it is you’re trying to do, you’re not really in a good position to be kind of discussion.

I think they are, my thought is, making the right recommendations um and ultimately they should also work with parents understand if this is something that works for the child then it works for the child. I think, beyond that it’s really difficult to make any additional comments because our EP hasn’t had any involvement in out ABA programme.
why they are doing it.
Appendix I: EP1 Transcript.

Interviewer: So the first question I’m going to ask is about your role as an EP just generally? How would you describe your role?

Interviewee: At the moment? [laughs]

Interviewer: [laughs]

Interviewee: Do you want me y PEP role or my generic EP role?

Interviewer: Um, maybe generic EP ye because that’s the way you’ve worked

Interviewee: Right ok, so, um we work through our consultation model. So we each of us will have or I’ve had um a cluster of schools traditionally but for the last 6 years I’ve worked um through flying start didn’t I so I had um half my time was working with pre-schooler as part of flying start model um in the same cluster I was covering generic school so we were involved in um parenting work so um doing family links nurture programs um doing advice clinics within the community with the speech and language therapist so all the early intervention stuff we were also trained in early bird and the ADOS so we did that training which meant that we could get involved in the early diagnostic ASD stuff but also then do the post diagnostic work in terms of doing the early bird um workshop with parents and programs and they were really successful. I think we were running about three four of those but then a few people went off on maternity leave or we just didn’t have the capacity to work I that way really um and then linking in a big part of what we developed was linking in with the um paediatrician and the multi um agency meeting which they used to hold weekly and that was really informative and really helpful so having those kind of discussion with peads’ and with speech and language therapist and OTS and so on about those vulnerable families that were coming through so that was more that was the flying start stuff um and because we because the patch of schools were the same as the generic work it helped with that transition so we knew all the kids that were going in and going in to nursery and the kind of doing transition meeting and things so it was really, really good. SO we’ve been working that way ye for a bout 6 year I guess and then within the work we were doing in school it was going through the consultation model of service delivery so um I what I was tending to do was going in the beginning of every term and having planning meeting with the SENCO and trying to prioritise work for the term and that might have involved work with teachers or observation or assessment really I guess. Um and then as time was going on we started to involve other inclusion service stuff so people like ** so we started so we started doing joint planning meeting which were really, really helpful so I think that’s when we were starting to look at all the changes in consultation so looking at level a’s and level b’s and so on because school are really valuing those plan joint planning meeting so that’s how that’s kind of grown. Um. And then yes there is another part of the role is the statutory work so doing the appendix d reports, statements although thankfully were not doing as many of those at the moment um ye panel sitting on eh local authority panels um so ye all that local authority statutory stuff as well really um so ye I suppose that’s it really of what we do isn’t it.
Interviewer: The next question is about your role within the EIBI so the ABA stuff. So what has been your experience of working alongside EIBI programmes?

Interviewee: It’s been I got to say it’s been really limited so what, what happened when ** was here she took the lead for ASD um so we were all given areas of specialism really so mine was HI and VI and ** had always traditionally done the ASD stuff so when we first started to get families coming through that were interested in ABA it was ** really that took the role of meeting with parents we had um initial tribunal meetings about one pupil and ** was involved with that so I didn’t really have any experience or understanding of it before that ** left obviously and then ** took over as an ASD lead so that brief period of time when ** covered ASD before she went off on maternity we didn’t really get involved in it it was only when (named EP) was off (names EP) had gone we had another tribunal um come through requesting ABA and I guess because of my senior role at the time it was just given to me so I was thrown in at the deep end really and the work at that time was tribunal work um we did meet with the family but that was in a tribunal pre-tribunal I suppose situation so I wouldn’t say it wasn’t early kind of intervention stuff it wasn’t necessarily pro-active stuff it was more negotiating and getting an understanding of information to prepare us for the tribunal meetings with other professionals so ** our ASD advisory teacher was involved in those meeting as well um I would say a lot of it was looking at documentation so going through all of the reports and evidence I suppose the casework that ** had provided and trying to draft together our response so it was that sort of work rather than work with the child or work with the therapist.

Interviewer: How did you find that working with like documents and kind of the tribunal work rather than working with the...

Interviewee: I have never seen so much paper work in my life it was honestly it was just pages, pages and pages of it took us hours and hours to unpick what they were trying to say I found that really complicated if I’m honest the graphs the data really trying to understand what on earth it was showing so it was really tedious, tedious work if I’m honest um and then I did some assessments with one of the children in preparation for the tribunal so met with mum I knew mum anyway through working with her through flying start met with them did some homes visits um and then as we kind of it didn’t end up going to tribunal in the end so the work that I did post that stayed I guess was more monitoring stuff so we had built in to his working document or his statement that the EP would monitor and that there would be regular review meeting so I was involved in that capacity really so um ye so we would have maybe monthly or half termly meetings where at the school so school be there parent would be there and (ABA provider) would attend as well and we would just have discussion about progress but again a lot of it I found was driven by the ABA consultant and the data rather than it being like a meaningful let’s talk about the child sort of stuff I don’t know um ye so to be honest that had been all my role has entailed in that respect. We’ve also had meeting with um somebody with Swansea university because obviously if we’re in the situation now within the local authority when we’re funding two aba programmes and there are likely to be more and more coming through ** was looking at taking a more strategic approach so we had meetings didn’t we with Phil Reed um so he came over and we started looking then didn’t we about how we could capacity in the local authority so I was involved in that work with other local authority staff as well obviously you helped enormously with given us some information.
um and that’s about it really and with the other aba case again I’ve only picked it up because um his programme just runs really smoothly and we haven’t really had a lot of involvement with him um other than his annual review was held a couple of months ago and that was really positive parents came here had the annual review and everything was great but he had requested a cognitive assessment form an ep so I went to his home and did that so I spent some time with him and his aba tutor who was really good um and so her doing some work with him at home as well and that changed my view of it on ye on aba I think really so you can see it run differently so that was really good so ye that’s probably my role that’s all I’ve done really.

Interviewer: That a lot! How would you describe your role working alongside these programmes? So you said it was about collecting documents?

Interviewee: Strategic I’s say probably more strategic role rather than direct work with the child or family or the therapists. Ye monitoring reviewing um and just ye pulling together maybe local author information ye.

Interviewer: How has that differed from your usual role? What are the main differences do you think?

Interviewee: Suppose it’s more, I feel less I feel more removed from the child so whereas I would be doing my consultation work or I’m in schools I feel like known the child really, really well but whereas here I’m relying on data from other people and it’s not my data so it’s me interpreting somebody else’s opinion or interpretation of that child so I feel a little bit far removed if that makes sense rather than me spending time and analysing or unpicking myself and that might be my lack of knowledge or experience of aba I don’t know. Does that make sense?

Interviewer: Ye it does I guess it is about because you are removed in a way because it is a tribunal thing rather than a...

Interviewee: It’s not my case if that makes sense.

Interviewer: And you didn’t chose necessarily to be there it’s just kind of been pushed...

Interviewee: So it is about us I suppose fitting in with the programme which is hard when we don’t have that level of understanding of a programme so it can muddy I think it muddies it has muddied the water a little bit because we might have an opinion about something but it doesn’t necessarily fit in with the ethos of the aba or the programme then its it been a bit of a I don’t know if this is relevant but an issue we’ve had an issue with the speech and language therapist so our local authority speech and language has been supporting one of the kids at home in terms of providing therapy which has been requested by parents but her preference or choice over communication aids for him were completely different to what the aba therapist was advising so there were conflict there so I suppose there’s things like that so within my role I I confident in using a range of tools isn’t it and ways of working and working practices that are valid within our local authority then and role this is completely new to me so I’m unsure about it its confidence thing I suppose.
**Interviewer:** How do you think the tribunal process affected your role?

**Interviewee:** Oh I gosh time spent was incredible the amount of time and work that went into that was crazy absolutely crazy and on reflection we’ve had meeting since and what we’ve I suppose what you’ve got at how it came to that tribunal stage and in one of the cases the one that I know more about we got closest with the tribunal with when we were going through that process when you look at the chronology of what had happened before hand there were a range of issues which the local authority maybe didn’t fulfil it’s it’s duties early enough and there were issues with the school so parents were were I think really frustrated with things and that’s why I think they went to look for ABA so one of the things that I’ve learnt is that we’ve got to in there at the early stage and build up that relationship with parents and give them confidence and make them feel supported um and that’s one thing that I’ve really made an effort to continue to do with the parents we’ve literally bent over backwards for them to make them feel more confident as time has gone on so if any time they have emailed I have responded straight way and or if they rung we’re always there and dad emailed asked for a meeting Monday and we pulled everything together and met with them yesterday (Tuesday) afternoon and they were so appreciative of that so I think I think I’ve the key thing I’ve learnt really is get build those relationships and instil the confidence and they might not be looking for it somewhere else I think that’s what they do really cos they can’t get it from us they think right other people are saying we can do this for your child and we can provide this and if they can’t get it from the local authority then they’re going to go somewhere else. If we can invest in that early it might have stopped us getting to that stage because it was so time consuming and we’d be here a group of us three of us working on it so if you think three core members of the local authority team spending weeks and weeks and weeks and weeks of negotiating going back and forth pulling paper work together having to really look at everything do you know what I mean it was just crazy it wasn’t a pleasant experience at all and it did I’m lucky it didn’t effect my relationship with mum because I worked with her but it didn’t so that one good thing but in previous tribunal it has been difficult it is not a nice process to go through really because I guess you’ve got to try to find an argument against something which goes against what parents believe it not its not nice but not a good process.

**Interviewer:** Do you feel you had a valuable part in the aba programme?

**Interviewee:** I think definitely I do I mean ultimately I guess what we want for any child to be reintegrated back into school It great that they’ve got aba programmes but I want them to be able to make good progress so they are able to function and get back into school and i guess because of our links with school and local author and with other kind of agencies like the speech and language therapists and OTs we’re in a really good position to facilitate that and we’ve got good skills haven’t we we’re taught as eps good skills around facilitating those discussions ye I do I feel we had a really valuable role in that the only thing was I guess a confidence thing and a lack of knowledge specifically about the aba that was a gap for me but in terms of processes ye I think so and I think other people perception as well I think eps are really valued by parents and valued by people outside and inside local authority so I think hat gives it a bit of status as well so you know what I mean.

**Interviewer:** The next questions I’m going to ask about the things that supported you or prevented you in fulfilling your role. So ye what kind of things supported your role within the
programme so you said the relationship with the parents and them valuing you is there anything else?

**Interviewee:** um I suppose the people in the team in the local authority valued my input as well so that was good knowing that you know people would specifically ask so I think it would be really helpful for you to go to this meeting or I’d really like you to be involved or would you be able to speak to this person or could you find or do you know what I mean so I think that was adding value to what we were doing with this.

**Interviewer:** With the aba programmes?

**Interviewee:** Ye and that we were involved at that strategic level as well um it’s good to know we’ve got skills to be able to be able to you know take things forward and have idea bout that as well.

**Interviewer:** So having an understanding of the greater local authority.

**Interviewee:** Ye definitely, ye different wider systems isn’t it.

**Interviewer:** So were there any factors that acted as a barrier to you within the role?

**Interviewee:** Ye my lack of knowledge completely honestly my utter ignorance to start of I obviously knew what aba was but didn’t really understand the principles behind it I’m still not 100% I’m a little bit further forward now but I still struggle a little bit and it seems to vary a little bit depending on who delivers it so it’s not like you can grasp it in your head and think this is what aba is going to look like and then when you see it in practice you think omg that’s not actually what it looks like ye so that’s been really confusing so like I said ** programme has been delivered in a completely different way to ** programme so I’ve struggled with that a little bit and that’s one thing actually we’ve been looking at as a local authority after this these processes is about having maybe a consistent provider rather than different people providing different services I think that would be really helpful in terms of us understanding data because if you’ve got a similar format of things coming through and we coming to review its going to be much easier than if we’ve got a lot of conflicting and different ways fo looking at it. So that’s something we’re going to consider definitely.

**Interviewer:** What about things like terminology?

**Interviewee:** O god its bonkers you know it literally, literally took us hours and hours and hours of unpicking things the graphs and the you know time scales the minutia of everything I struggled with that because I lost the bigger picture it small tiny, tiny small steps small stages and I did feel a bit like you know once you’ve unpicked all the language and terminology its more straight forward then isn’t it, it didn’t baffled me why didn’t you just say positive reinforcement rather than it there was one term that they used but I can’t remember what it was and I sat there and though why can’t you just say it’s this instead of coming up with the different language.

**Interviewer:** What recommendations would you suggest to support an EP working with EIBI programmes?
**Interviewee:** Oh my word. Probably build relationships is the key thing for me.

**Interviewer:** With parents or ABA providers?

**Interviewee:** with parents and providers as well they do lots of there is always a worry or anxieties aren’t there I think it has stigma attached to it really so we’re always really wary of going anywhere near aba companies I think traditionally we have anyway it was really interesting because ** was saying that she went to the eisteddfod and they had stall there she said she went and took loads of leaflets and stuff but I think actually that’s what we need to be doing instead of actually thinking we’re not going to engage with you at all because we really don’t want you because its going to happen so I think we’ve got to start building a relationship with providers and getting an understanding of if we are going to get a provider which one do we want which is do we think is going to give us value for money but also deliver a programme that s going to benefit the child and the family and we are not going to know that unless we go to meet with them and stuff but there is a real fear about engaging with them it’s almost a bit like if you make eye contact with them that’s it then do you know what I mean so we’ve traditionally stayed away.

**Interviewer:** So where do you think that fear has come from; do you think it’s a tribunal thing?

**Interviewee:** I think it’s a tribunal thig definitely and there is a lot of talk as well within local authority isn’t there about you know ** now have four tribunal request about aba and then everyone else goes on the defence straight away um but this um suppose again there are different models aren’t there yes it’s an expensive approach of one child to be receiving a completely home educated full time aba programme and that’s where the fear comes from because that equates to x amount of money and with that money we could be providing this this and this for all these other children so I can understand there but once I think we build up an understanding of aba and start to work differently with providers we can look at more flexible options so ** now for example when I met with his tutor she was saying because he’s making such good progress their coupling up now with another child who’s on a home programme so they are starting to joint therapy together which is brilliant because not only are they getting better experiences socially but their saving money then isn’t it so there are ways around it aren’t there and that sup t the providers as well I suppose they’ve got to make a profit so it’s going to benefit them to get as much money form the local authority y as they can um when actually id we do build up relationships and be able to negotiate better we can get more work together but maybe bring costs down a bit so just think differently about stuff.

**Interviewer:** Do you think aba is useful from what you’ve learnt?

**Interviewee:** ye I do, ye now I do if you’d ask me that a year ago I would have said no it’s a load of crap. Seeing a different model I think ye definitely and whilst the feedback form parents is so positive and we’ve got to understand that its hard for us isn’t it because we are technically working for the local authority so I’ve got the local authority hat on and I think this child has made so small progress we’ve paid all this money and they’ve made this much progress but when you meet with the parents and they’re like they can now tolerate having their hair brush we can now brush their teeth and you think that is such an amazing step for
them functioning as a family and to them having more independence so it’s nice to hear things like that so listening to them yesterday I can see ** has made loads of progress it might not be all enabling him at this stage to be able to manage going back to school but he has come a long way actually um and I think that what I didn’t understand because I think when you’re looking at the data its such small steps you think we’re not getting anywhere here but when you take a step back and review it after a longer period of time you can see wow this has gone really well and I dread I hadn’t met ** before, before his assessment but I read his paper work and on paper he was non-verbal, he was really challenging with his behaviour very much like a toddler not toilet trained wouldn’t listen didn’t engage no eye contact and then I met him and I couldn’t believe it he was speaking his language was really good he was responding his eye contact was really good and that was all down to aba we can’t take credit for that because he hasn’t been in school that’s all aba so I guess on an individual level it does work but um it just the cost that the thing with my local authority hat on it’s a really expensive programme one to one then just maybe if we could just get more staff trained in the local authority in those approaches or techniques get our LSC trained up so we can go back to families and say we might not be using it in a prescriptive way but we are able to use it in this this and this. I think differently about it know but it that way not so negative about it. Is that it?

Interviewer: Ye that’s it!

Break in recording

Interviewee: When you go through tribunal you produce what called a working document which effectively then become their statement but that working document goes back and forth constantly so we will say what we want in the document in terms what ** needs are and provision and that gets sent to the other side the providers and solicitors and parents and they might have said I’m not agreeing with that but I want this and that comes back to us and we might say no we’re not having that and that goes on for weeks and weeks back and forth so that working document is a collaborative document between everyone involved really so ye they know what’s in there so it’s not like a surprise to them that oh right ok one of his target now is this because they’ve contributed to that process so for me their targets should have been led by that working document but it wasn’t.

Interviewer: So it’s like a disjoint between local authority and home.

Interviewee: Ye it took us a while when we had we obviously had a few review meetings with ** where they’ve come into school and we’ve been saying where is his IEP even if he’s on a home programme he still should have an IEP where you are agreeing targets on it which link in with the statement and these targets need to be reviews next time and to be fair she has now got it she is now writing an IEP whereas traditionally nothing was coming through at all. What I found as well was some of the targets that she was developing it sounds like I’m being critical about her now but I’m not weren’t cumulative so they would be so once a month they would be working with this and next month they would be working on something different so I’ll be thinking hang on now surely you master that skill and then you move on to another but it was really disjointed and bitty but I don’t think that’s typical of all programmes I think so when I saw ** you can see that they you can see its more of a cumulative programmes and
we’ve moved I can see a way forward but with this one I just feel I didn’t; know we were going round and round in circles anyway.

**Interviewer:** Do you think that’s due to the lack of their understanding of how local authority work?

**Interviewee:** Ye definitely and I think that’s why it’s important to build that relationship with them so we do you know in a less threatening situation because the only contact we get with them is under a tribunal situation and that not good for anybody because we’re on the defence and their going to be on the defence as well so I think it would be more helpful for us to meet up before hand with a key provider we think right in the future if anything arises in the future you’re going to be our key provider but before that happens you need to come into us and you need to sit down and understand what’s going on for us as a local authority and equally we need to come out to you and get an understanding of how you work as well.

**Interviewer:** Do you think an ep has a role in that?

**Interviewee:** Ye definitely not only for our psychology base but for our local authority background as well I think we’ve got a really good overview of the different systems within the local authority and how things operate and function and all that systemic stuff I guess and strategic thinking so ye.