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Reducing Applied Behaviour Analysis over time

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Please note:

The research and literature reviews collated by our TAB Research Team are not to be shared external to the Branch. These are for internal TAB use only and are intended to assist our advisors with their reasonable and necessary decision-making.

Delegates have access to a wide variety of comprehensive guidance material. If Delegates require further information on access or planning matters, they are to call the TAPS line for advice.

The Research Team are unable to ensure that the information listed below provides an accurate & up-to-date snapshot of these matters

1. Contents

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2. Summary

This paper considers the evidence for a step-down model of reducing frequency or intensity of applied behaviour analysis (ABA). No evidence was found regarding the effectiveness of a step-down model. One international ABA accreditation body, the Behavioral Health Center of Excellence, recommends a gradual reduction in hours when concluding ABA therapy.

Five papers were attached with the research request. None of the papers directly relate to the efficacy of a step-down model of reducing ABA supports.

Previous TAPIB research has found a lack of consensus regarding appropriate intensity and duration of ABA therapy. Recent Australian guidelines on the delivery of supports for children with autism note that supports should be individualised and there is no set number of hours of therapy which are appropriate for every child.

3. Previous TAPIB research papers

Previous TAPIB research papers related to ABA include:

- RES 246 ABA and positive behaviour support.docx
- RES 292 Applied behaviour analysis for adults with ASD.docx

RES 246 found no evidence for appropriate frequency, intensity or timeframe of ABA required to affect a reduction in behaviours of concern, nor any information on reducing intensity of support over time.

RES 292 found lack of consensus regarding appropriate frequency, intensity or timeframe of ABA. The studies review in this paper emphasised that an individualised approach to determining frequency, intensity and timeframe of supports is required.

4. Review of Provided Literature

Five papers were attached with the research request (refer to <u>6. Literature Review</u> table for further details). None of the attached papers were directly relevant to the research question. None of the papers reviewed directly addressed the benefits of an extended timeframe of supports or the benefits of slowly reducing ABA support over time. No quality assessment was completed due to lack of relevance to the research question.

5. Other sources

The Behavioral Health Center of Excellence (BHCE) is a private organisation that offers accreditation of applied behaviour analysts. They suggest fading out services gradually based on the needs of the client (BHCE, n.d.). However, BHCE provide no evidence on which they base this recommendation.

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Autism CRC's recent *National Guideline for supporting the learning, participation, and wellbeing of autistic children and their families in Australia* (Trembath et al, 2022), makes the following recommendations around duration of supports:

- 56.1 The amount and duration of support provision should be tailored to the individual needs of the child and family. This includes consideration of the frequency, length, and time of day of support sessions, and variations in support needs over time.
- 56.3 Practitioners should inform parents that there is no set number of hours per week of practitioner delivered child-directed supports that leads to the best outcomes for all children.
- 56.4 Practitioners should be aware that research evidence does not support the concept that supports delivered in greater amounts consistently lead to better child and family outcomes (Trembath et al, 2022, pp.95-96).

The National Guideline does not discuss reducing therapy over time.

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6. Literature review table

The following papers were attached with the research request.

	Author / Date	Title	Study aim/objective	Relevance to Current Research Question	Quality of included evidence (high/medium/low/very low)
1	Camargo et al 2014	A review of the quality of behaviourally-based intervention research to improve social interaction skills of children with ASD in inclusive settings	Whether ABA improves social interactions for children with ASD; whether ABA can be considered evidence based.	Not relevant. Paper discusses behavioural components of some interventions for children with autism but does not discuss frequency/intensity of ABA or reducing therapy over time.	N/A
2	Steinbrenner et al 2020	Evidence-Based Practices for Children, Youth, and Young Adults with Autism Spectrum Disorder	Purpose of report is to "describe a set of practices that have clear evidence of positive effects with autistic children and youth"	Not relevant. Report discusses efficacy of multiple ABA programs but does not discuss frequency/intensity or timeframe of supports.	N/A
3	Kadar et al 2012	Evidence-based practice in occupational therapy services for children with autism	"identify how occupational therapy practice may have changed over the last decade and to explore what additional	Not relevant. Paper briefly mentions 'behavioural approaches' but does not discuss ABA,	N/A

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	uthor / ate	Title	Study aim/objective	Relevance to Current Research Question	Quality of included evidence (high/medium/low/very low)
		spectrum disorders in Victoria, Australia	developments are required in the field" to support children with ASD	reducing therapy over time or frequency/intensity of supports for children with autism.	
Au Ce	ational utism enter 015	Findings and Conclusions: National Standards Project, Phase 2.	"provide up-to-date information on the effectiveness of a broad range of interventions for ASD"	Partially relevant. Paper discusses efficacy of behavioural approaches including interventions classed as ABA. Intensity and timeframe of therapy is discussed for Comprehensive Behavioral Treatment for Young Children (CBTYC), often described as ABA. CBTYC is described as an effective evidence-based practice but does not discuss whether the intensity or timeframe of the intervention is	N/A

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	Author / Date	Title	Study aim/objective	Relevance to Current Research Question	Quality of included evidence (high/medium/low/very low)
				necessary to achieve benefits. Paper did not discuss reducing therapy supports over time Report states that intensity of therapy is a topic requiring further research and did not discuss frequency or intensity for other ABA	
5	Ivy & Schreck	The Efficacy of ABA for	Editorial/narrative review	therapies. Not relevant.	N/A
	_	Individuals with Autism	regarding the efficacy of	Paper discusses	
	2016	Across the Lifespan	ABA across the lifespan for individuals with ASD.	efficacy of ABA but does not discuss	
			marviduais with AGB.	frequency/intensity of therapy or reducing	
				therapy over time.	

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- National Autism Center. (2015). Findings and conclusions: National standards project, phase 2. https://www.nationalautismcenter.org/national-standards-project/phase-2/
- Steinbrenner, J. R., Hume, K., Odom, S. L., Morin, K. L., Nowell, S. W., Tomaszewski, B., Szendrey, S., McIntyre, N. S., Yücesoy-Özkan, S., & Savage, M. N. (2020). Evidencebased practices for children, youth, and young adults with Autism. The University of North Carolina at Chapel Hill, Frank Porter Graham Child Development Institute, National Clearinghouse on Autism Evidence and Practice Review Team.