

Applied Behavior Analysis (ABA) is a specialized area within the field of Psychology. The goal of ABA is to apply specific psychological principles (e.g., reinforcement, prompting, generalization, etc.) to issues that are socially important to produce meaningful change.

The principles of ABA have been successfully applied to many socially important areas such as regular education, special education, pediatric medicine, sports psychology, business and service organizations, and the treatment of children with autism. At hatch, we provide ABA-based treatment design and intervention to children across the autism spectrum as well as children with special needs such as Attention-Deficit Hyperactivity Disorder, learning differences, and behavioral challenges.

ABA Based Intervention

We'll explain the steps involved in any ABA based intervention using an example. This example relates to the type of intervention we might implement at hatch, with a child with autism or a related disorder, however, the same steps apply to any ABA based intervention, in any setting, with any client.

1. The client or the client's parents and teachers select targets for change. For instance, a parent may come to us and say that their child doesn't ever indicate that he is hungry or thirsty, so his parents have to regularly offer him food and drinks.
2. We identify intermediate and ultimate desired outcomes. In this case, our intermediate outcome may be for our client to ask for food and drinks when they aren't present. And, our ultimate outcome may be for our client to say that he is hungry or thirsty (this is less concrete than asking for a specific food or drink) when food and drinks aren't present.
3. We decide how to measure the target behavior. For this child, we might count the number of times per day that he says he's hungry or thirsty.
4. We collect data to measure the level of the target behavior before beginning treatment. So, we might observe our client around lunch time, before food or drinks are presented, and count the number of times he says he's hungry or thirsty.
5. We decide how to intervene and begin our treatment. For this child, we might teach him to request drinks that aren't present by initially showing him the drink, giving him a small amount when he requests, and then immediately hiding the drink. Once he has learned to request drinks when they are not present, we might prompt him to say, "I'm thirsty," when he requests a drink that's not present.
6. We collect data continuously during treatment to determine whether our treatment is effective.
7. Finally, we examine the data to determine whether to continue treatment as is or make changes to improve treatment effectiveness. For example, if after one week of treatment, our data indicate that our client is now asking for food and drinks that aren't present on an average of ten times a day, we would move to our next stage of treatment. This stage might involve teaching our client to not just request specific foods and drinks but also to tell his parents, in general, when he's hungry or thirsty.