



10 May 2002

The Secretary,
Senate Committee of Inquiry on Education,
C/- The Hon. Senator Margaret Reid,
62 Northbourne Ave.,
CANBERRA. ACT 2601

Dear Sir,

SUBMISSION TO THE SENATE INQUIRY ON EDUCATION

Our organisation is concerned that the Centre of Excellence" proposed for Canberra will include the appointment of an Applied Behaviour Analysis specialist to help set up a system of education for autistic children. We are convinced that if this program is commenced with children 2-3 years old they have a 50/50 chance of overcoming a lot of the effects of autism. Children should never be sent to school without a language or social skills. No wonder they play up and are troublesome. We have six families with children with autism out of 18 children receiving financial assistance.

Enclosed is a summary of autism, an article on the Bulleen Heights project and a profile on Friends of the Brain Injured.

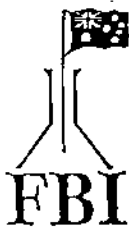
As things are at the moment, the Applied Behaviour Analysis program is intense and very expensive for Canberra children and certainly costs more than any other program we have sought help with for our children. At present it means bringing a specialist up from Sydney or Melbourne every two weeks. Each child needs a 2-hour session to upgrade their program. They need 30 hours of trained therapists time @ \$12-\$16 per hour. The resident specialist is a must.

The old education of children with autism is not proving successful as the parents of the Autistic Association are convinced. The Applied Behaviour Analysis program has been very well researched and proven to be very effective. There is an Australia-wide appeal for action from the Government to do something for these children.

Yours sincerely,

Pat Jenkins, Honorary Secretary

Sub 86



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Supporting Children

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A.B.A

A SCHOOL BASED APPROACH

A.B.A.

ABA is a sequential clear and consistent method that breaks down learning tasks into simple complete teaching segments. It uses structured language with prompts built in to ensure success at each level progressing to an independent generalised program where prompts are faded. The success of ABA relies on giving positive reinforcement for target responses.

A.B.A methods have been implemented over the last 36 years and was extensively researched with young autistic children in home based settings.

A.B.A research has clearly shown that many children gain immensely from this style of teaching and that these newly learned skills have been maintained, extended and transferred across environments with different people.

HISTORY.

In 1996 Bulleen Heights embarked on a two-year research pilot project in ABA, based on the results of successful studies with pre school aged children. The pilot project focused on children with **autism** as well as children with **intellectual disabilities**. Both groups of children made substantial improvements in most areas of the programs.

Leah Climas was one of eleven staff who volunteered to undergo training and commitment to this program. Bulleen Heights is the only school in Australia to embark on a school based ABA program. Our role as ABA based teachers includes Programming/ Assessment/ Curriculum/ Resources/ Implementation/ Discrete Trial 1-1 programs/ Generalisation and Group ABA.

PROGRAMS AT BULLEEN HEIGHTS INCLUDE:

- Imitation
- Matching
- Receptive
- Expressive
- Verbal Imitation
- Play Skills
- Conversation
- Drawing
- Stories
- Sequencing/ Play
- Compliance
- Categories
- Emotions
- Reading
- Toilet training
- Non verbal Imitation
- Quantitative Concepts
- Augmentative Communication

We offer sound ABA knowledge in beginning through to advanced ABA programming. We have experience working with a diverse range of disabilities catering for students between 5 and 17 years of age.

PLANNING FOR STUDENTS LEVEL OF FUNCTIONING: A CRUCIAL COMPONENT

As a result of **listening** to teachers and parents concerns in regards to student's level of functioning we have successfully developed an approach to A.B.A. that considers where the child is currently, prioritising needs both short term and long term. This has allowed **flexibility** and a new scope for teachers whom otherwise would not have invested their time with this approach. We offer intensive A.B.A programs for new enrolments moving towards less intensive Applied Behavioural Strategies with older students and those with specific needs who are not successful on the regular A.B.A progressive curriculum.

It is a fact that not all-autistic children will progress to a normal mainstream level of functioning on A.B.A programs. The A.B.A methodology is a sound approach but it does not work for all children in its pure form. After four years involved with intensive A.B.A based programs most children have made substantial gains. It is our experience that children diagnosed towards the Aspergers end of the spectrum respond readily to A.B.A and make rapid progress, where as children diagnosed towards Kanners end of the spectrum respond less to this type of intervention. This can be due to oversensory stimulation and processing problems, they also display delayed speech and are largely non verbal. Temple Grandon writes about this difference in her book "Thinking in Pictures", making reference to children with autism who respond well to this style of teaching . These children/ young people for whom the progressive curriculum is not ethical, have responded to a modified A.B.A approach, which considers their specific needs and addresses their individual deficits.

We have learnt from our students and from each other and also draw upon our expertise as teachers; we employ ethical consideration at all times. We do not provide a progressive A.B.A curriculum for higher needs students with greater physical, functional needs nor do we employ this approach for students who display a history of reinforced behaviour patterns that do not respond to compliance drills. Students must be able to be managed by one therapist in an A.B.A session. Ethical consideration of physical intervention needs to be warranted.

In the case of the above students it is also ethical to provide a modified A.B.A program called Applied Behaviour Strategies. Using the same process as a ridged A.B.A program the approach allows for flexibility and needs based curriculum areas.

As Specialist Educator it is of paramount importance to provide a curriculum that specifically meets the needs of an individuals that we teach. We need to be realistic in a school based setting and marry the skills of teaching with the skills of A.B.A methodology so that essentially, we do what is in the best interest of that child/young person providing the best opportunity for quality of life.

Parents need to be informed about the choices available to them and need all the relevant facts in regards to A.B.A.

A SCHOOL CURRICULUM

At Bulleen Heights we have adapted our skills to incorporate programs such as reading, spelling, sight vocab, addition, play skills, scheduling etc, into our day to day routine offering some intensive one-to-one instruction and then gradually moving towards more generalised, group school appropriate curriculum, applying behavioural strategies.

Examples include; worksheets, working from the board, paying attention to instruction, ability to do activities independent of one-to-one intervention, conversation in group settings, sitting at a table top activity with increased numbers of peers completing a task, time, money etc. We focus on programs that are realistic and implemented at the child/ young person's level of functioning.

Higher need students' curriculum incorporates applying behavioural strategies, using a range of resources and augmentive systems of communication.

A.B.A programs are linked to previously mastered home based programs. By creating this stepping stone we use already mastered skills to learn new skills. If a child has not had any home based intervention then we teach the progressive curriculum incorporating school-based targets.

E.G	<u>Familiar People</u>	<u>Familiar Places</u>	<u>Receptive Labels</u>
	Specialist Teachers	Computer Room	School bag
	Dance Teacher	Sensory Room	Ball pit
	Computer Teacher	Coles	Lunchbox
	Phys Ed Teacher	Local Bakery	Scissors
	Children in classroom	Library	Sandwich
	Bus drivers	Gross Motor room	Toilet

NO OF STUDENTS INVOLVED WITH A.B.A SCHOOL BASED PROGRAMS

For some newly enrolled students we follow a set child developmental A.B.A curriculum. The number of hours depends on many variables; these factors may include the needs of the students, availability of therapists and the structure of individual programs. We currently have twenty students on official A.B.A programs and provide Applied Behavioural Strategies for another estimated twenty students.

SUPPORTING THE CLASSROOMS

Volunteer therapists whom are trained at our introductory workshop and undertake supervised practise to ensure high standards of therapy delivery, support the program. We have also had interest from university students wanting school practicum placement in the area of A.B.A. In 1999 we have employed a full time A.B.A Senior therapist to run programs in school time. Programs are supervised by the A.B.A Consultant on a weekly to fortnightly basis depending on the teacher's level of skill. This is at no cost to the parents.

SUPERVISION

Teachers have the choice to be supported through supervision, which is provided on a weekly to fortnightly basis. These meetings involve constant evaluation, review and resourcing of the program. Supervision also provides training and feedback on therapy delivery. This is a crucial component in the consistency and ongoing development of each individual program. A range of individuals including parent's teachers and therapists attend supervision meetings. The A.B.A Consultant also provides direction with planning the curriculum. A fortnightly training session is held after school to develop and support teacher's professional development in the field of A.B.A.

OUTSIDE AGENCIES/ HOMEBASED

There are various models of delivery of A.B.A at Bulleen Heights. Some programs work in conjunction with outside agencies splitting the homebased and school based components into equal parts and planning as a whole team. Other models include parent run homebased programs with supervision provided by the school A.B.A Consultant. Some parents elect to send therapists into the school environment to increase one-to-one hours. The development of our A.B.A policy document has helped identify and clarify the successful components that are needed for schoolbased and homebased programs to run concurrently.

GOALS: PROGRAM SUPPORT GROUP MEETINGS

The Program Support Group process consists of a team-based approach that considers the strengths and preferred learning styles, interests, likes and dislikes of the child. Six monthly P.S.G's are held to set goals for the students. It involves parent teachers and other para-professionals such as speech pathologists, occupational therapists, psychologist and others.

We develop the goals and prioritize them as a team. All parties have an opportunity to have input and provide expertise in their specific areas.

The parents or teachers as part of developing the child's specific goals can request A.B.A. The A.B.A Consultant can attend P.S.G's to discuss the goals in relation to specific A.B.A based programs. The A.B.A Consultant may also be requested to discuss behavioural issues.

Some students have specific A.B.A based programs that reflect deficit areas, whilst others embark on a full A.B.A based curriculum across all areas.

A holistic approach to education is employed via the P.S.G program it considers the individual and is not restricted to an isolated program. Goals need to reflect the individual as all children/ young people learn differently.

DIFFICULTIES

Schools are restricted to the amount of one to one hours they can offer. By providing group-structured activities Bulleen teachers has been able to rotate children through 1-1 sessions. It is also our belief that other programs need to be included to ensure that a balanced curriculum is employed. Specialist schools offer specific curriculum including therapists in a variety of disciplines to provide a holistic approach to a child's/ young person's education.

AUTISM

Autism was first identified in 1943 but appears to have existed throughout recorded history. Autism and other disorders on the autism spectrum result from atypical neurological functioning. These conditions can be extremely disabling. By definition, autism -

- is present by age 3;
- * impairs social interaction;
- impairs communication to the extent where many children with autism have little or no functional language;
- has unusual behaviour and restricted interests as a diagnostic criteria.

The implication for learning and development, interaction with the world at large, plus access and utilisation of human services are profound.

Autism can no longer be considered a minor disorder. The incidence of autism is now accepted throughout the world as being 50 in 10,000. With only 400 known cases in Canberra there must be many more, even as much as 1,500 at all levels and all ages.

Autistic View of the World:

- **Communication:** Autism affects the ability of a person to understand the meaning and purpose of spoken and body language and the written word. Words can be misunderstood, interpreted literally or not understood at all. Other peoples feelings and emotions can also be difficult to understand. This must feel like coming from another planet.
- **Social Interaction:** Interaction is for most people an essential part of life. For people with autism being sociable may be scary and very confusing. Some appear to withdraw and become isolated, others try very hard to be sociable but never seem to get it right. People with autism can find friendships difficult.
- **Behaviour:** Impairments in communication and social interaction produce a range of behaviour that have become linked with autism spectrum disorders. These may include:
 - . Speech – absent, delayed or showing abnormal patterns
 - . Play – isolated, repetitive, unimagative, distructive.
 - . Body movements – stereotype (such as flapping or toe walking) and occasionally behaviour that may cause self injury (such as hand biting)
 - . **Obsessions** – with favourite topics, objects, places, people and activities.
 - . Rituals – rituals and routines bring order to chaos and confusion - a change of routine can be very difficult to cope with
 - . Tantrums – can be a way of expressing extreme confusion and/or frustration.
 - . Sensory sensitivities – to certain sounds, colours, tastes, smells and textures.

What do These Children Need:

The strongest evidence is that intensive and autism-specific early intervention programs that treat and rehabilitate children with autism are effective and have lasting results. The treatment and support they require to meet their special needs is distinct from that provided for children with an intellectual disability. Few Australian children with autism gain access to effective early intervention. The required intensive treatment is not provided by the health, disability or education sectors.