

Clifton: Success with Applied Behavior Analysis (ABA)

Clifton is a sturdy five-year-old whose big smile and enthusiastic approach to life win over every grownup he meets. Clifton's home life on a rural road in Washington County is loving and very attentive. When he was two, his mother noticed that he was not beginning to talk as a two-year-old would. Assuming the problem was physical, she consulted their family pediatrician. A referral to a speech therapist started a process that eventually led to a more thorough evaluation for Clifton. While attending his local preschool, Clifton was observed to be using his own jargon instead of English, refusing to sit in the group circle and interact with peers, and preferring to line up toys and "scan" them rather than play with them. Speech therapy improved his articulation but did not lead to language acquisition and use typical of a child his age. Transitions between activities were very difficult for Clifton and he expressed his frustration by screaming and crying. Flapping his hands in front of his face and crossing his eyes were other behaviors he used when stressed.



Clifton, age 5 WCCP photo

Assessment

After referral for early intervention services with WCCP, Clifton began attending developmental therapy group with children his age. As his non-typical behaviors persisted, Clifton was referred for a full neuropsychological evaluation. At three and a half years old, he was still speaking in only two- to three-word utterances and using jargon much of the time, along with rote phrases like "Hello, dear." Although he knew the names of his classmates, he was still more interactive with adults than children. Clifton was meeting some goals for gross and fine motor, speech, and social development, but was significantly delayed in others. The psychologist's evaluation showed that Clifton did have delays in cognitive and language areas but that his adaptive abilities were comparatively strong. It was clear to the psychologist, however, that Clifton's behaviors with people and objects did indicate placement on the mild to moderate end of the autism spectrum, and a "diffuse" cerebral dysfunction not linked to any severe neurological condition. Without intensive therapy, Clifton wouldn't be ready for kindergarten.

Plan

Clifton's WCCP therapists Britannia, Wesley, and Ralph continued to use Applied Behavioral Analysis (ABA), a method for breaking everyday tasks into many small steps with rewards, producing an ongoing sense of accomplishment for the child. Clifton's individualized plan, which was coordinated with input from his parents and from other service providers, included generous prompting from WCCP staff with all phases of social interaction and gentle redirection away from his ritualized behaviors. More structure in his home environment was recommended as well, including clear expectations and regular routines. Speech therapy placed an emphasis on the use of language to build relationships.

Progress

Today, Clifton receives therapy in his home as well as in group with Ralph. When working with Clifton in his family setting, Ralph spends about fifty percent of the time on behavior issues, along with prekindergarten and social skills. Clifton now knows the numbers 1-20 in order, and A-K of the alphabet. Ralph works to help Clifton generalize his skills and knowledge and he reports that Clifton is doing very well with this now, being able to have "legitimate conversations" about what he had for dinner last night, and with different people at different times. He can also give creative rather than rote answers to questions about things in his daily environment. "To grow from his knowledge – that's where he's beginning to show very good progress," says Ralph. Generalizing skills represents a huge gain for a child with a diagnosis of autism, for whom repetitious behavior generates comfort. "Words are not enough" to express what WCCP's work has meant to Clifton's family, says his mother, Shana. "I appreciate everyone so much."