# Treatment Services with a BCBA

# Parent & Child Brain Fit Classes

\$175/45 min session

- Child= In-person @ Office or via Telehealth
- ✓ Parents= via Telehealth
- Alternate between parent
  & child classes each week
- Paired with 1 other family (child or adult dyads)
- ✓ Follows a 20-week curriculum
- ✓ Prevention focused
- For children with milder symptoms or previous therapy
- ✓ Learn ACT skills
- Broad-based skills
  w/levels

## Parent & Child Skills-Based Behavior Therapy S200/45 min session

- Child= In-person @ Office or via Telehealth
- ✓ Parents= via Telehealth
- Alternate between parent
  & child sessions each week
- ✓ 1:1 with BCBA
- ✓ Flexible time frame
- For children with ADHD, ASD, anxiety, OCD, and/or depressive disorders
- Learn CBT and/or ACT skills
- ✓ Focused-skill learning
- ✓ Behavior plans (as needed)
- Generalization with parent practice at home

### Brain Fit Classes Ages 3-15

#### Why is it important?

We are in the middle of a "mental health crisis." The COVID-19 pandemic has had a negative impact on the social-emotional well-being of children and parents. Families are experiencing increased anxiety, stress, OCD symptoms, and depressive symptoms. These classes focus on promoting "good" mental health for children and their parents, just like eating well and exercising promote good physical health.

#### Who is it for?

Families who would like to learn how to communicate their feelings, use coping skills to manage their stress, gain better control over their words and behavior, learn how to think and act more flexibly, learn how to control their impulses, and learn how to think more positively about themselves and others. Sometimes children have a diagnosis of ADHD, anxiety, OCD, depression, and/or ASD, but not all children have diagnoses.

#### What is it?

Classes are based on the principles of Acceptance and Commitment Therapy (ACT). The goal is to help children and parents accept their thoughts and feelings, engage in mindfulness, learn how to better manage stress, and take action (i.e., small steps) towards what they value, as an individual and a family.

#### What do the levels mean?

Each level class is meant to build on the previous level. For example, Level 1 is an introduction to skills targeted in ACT. Level 2 provides more advanced concepts and activities to practice each skill, and so on.

#### What are the class sizes?

Each child is paired with 1 other child who is matched for age and ability level. The parent(s) of each child dyad are paired together in parent sessions.

#### How long does it take?

Classes are 1 x week, afterschool for children and in the morning or early afternoon for parents. They last for 45 minutes and run for 20 weeks, alternating each week between child classes and parent classes.



#### How are sessions structured?

There are 6 points to the ACT "Hexaflex:" Acceptance, Mindfulness, Defusion, Self-as-Context, Values, and Committed Action. You and your child will learn about each concept, participate in exercises and activities, and learn how to apply it to your own life.

#### How much does it cost?

The cost is \$175/child or parent session. Families pay per class. Financial hardship discounts are also available, as needed.

#### What happens if my child needs more classes?

Sometimes children who are enrolled in the Brain Fit classes may need individual therapy. This can be offered to families when available, and if appropriate. Sometimes children will be referred to another provider, if more long-term care is needed or suspected.

#### Is it the same as "therapy" with a mental health provider?

No. Brain fit classes are designed to be short-term and preventative. They are taught by a behavior analyst, not a mental health counselor or psychologist. The BCBA will consult with Dr. Bennett as needed, but these classes are not appropriate for children with significant mental health needs, such as those with a trauma history, significant mood disorders, and/or family system stressors.

#### **Disclaimer:**

These classes do not replace mental health therapy, if your child requires psychotherapy. The instructor is a board certified behavior analyst with specific training on how to observe, analyze, and treat specific behaviors. Although the instructor consults with Dr. Bennett, as needed, this is not a formal supervisory relationship. The instructor consults with Dr. Bennett for the purpose of learning how to apply behavior analytic skills (e.g., *ACT*) to children with a variety of mental health challenges, such as anxiety, depression, *OCD*, and *ADHD*. If your instructor has concerns about your child or feels like your child requires more than the content of what is taught during these classes, you may be referred to Dr. Bennett for a consultation, and/or possibly to another provider.



## Skills-Based Behavior Therapy Ages 3-15

#### Why is it important?

We are in the middle of a pediatric mental health crisis (according to the American Academy of Pediatrics). The COVID-19 pandemic has had a negative impact on the social-emotional well-being of children. Children are experiencing increased anxiety, stress, OCD symptoms, and depressive symptoms. Skills-Based Behavior Therapy focuses on promoting "good" mental health, just like eating well and exercising promote good physical health.

#### Who is it for?

Kids who would like to learn how to communicate their feelings, use coping skills to manage their stress, gain better control over their words and behavior, learn how to think and act more flexibly, learn how to control their impulses, and learn how to think more positively about themselves and others. Children typically have a diagnosis of ADHD, anxiety, OCD, depression, and/or ASD.

#### What is it?

Therapy is based on the principles of behavior therapy, Cognitive Behavior Therapy (CBT), and Acceptance and Commitment Therapy (ACT). The goal is to improve each child's emotional intelligence, executive functioning skills (like flexibility and impulse control), and self-esteem by teaching them coping skills, how to connect their thoughts, feelings, and behavior, and how to better manage stress.

#### How are sessions structured and how long does it take?

Sessions are 1 x week, afterschool for children, and in the late morning or early afternoon for parents. They last for 45 minutes and typically run for about 20 weeks, alternating each week between child sessions and parent sessions. However, the exact number of sessions can vary based on the child. During sessions, you or your child works 1:1 with the BCBA. Child sessions can be in person or via Telehealth. Parent sessions take place via Telehealth.

#### How much does it cost?

The cost is \$200/session for child and parent sessions. Financial hardship discounts are also available, as needed.

#### What happens if my child needs more sessions?

Sometimes children need more or less than 20 sessions. Each treatment plan is individualized and you will be in regular discussion with the BCBA about how your child is doing in treatment. As your child gets closer to the end of the curriculum, you and the BCBA will develop an appropriate termination plan for your family. Sometimes families choose to continue sessions



for practice and generalization purposes, while other times families choose to continue to practice at home. Some families slowly decrease the frequency of their sessions, as needed and when appropriate (e.g., monthly check-ins).

#### Is it the same as "therapy" with a mental health provider?

No. Skills-based behavior therapy is designed to be a short-term, intensive, effective treatment (i.e., your child learns a lot in a short period of time). This requires parent training and carry-over at home, in order to be effective. The child is taught by a behavior analyst, not a mental health counselor or psychologist. The BCBA will consult with Dr. Bennett as needed, but skills-based behavior therapy is not appropriate for children with significant mental health needs, such as those with a trauma history, significant mood disorders, and/or family system stressors.

#### **Disclaimer:**

Skills-based behavior therapy does not replace mental health therapy, if your child requires psychotherapy. The therapist is a board certified behavior analyst with specific training on how to observe, analyze, and treat specific behaviors. Although the BCBA consults with Dr. Bennett as needed, this is not a formal supervisory relationship. The BCBA consults with Dr. Bennett for the purpose of learning how to apply behavior analytic skills to children with a variety of mental health challenges, such as anxiety, depression, OCD, and ADHD. If the BCBA has concerns about your child or feels like your child requires more than the content of what is taught during these classes, you may be referred to Dr. Bennett for a consultation, and/or possibly to another provider.



## **Frequently Asked Questions**

- What can we do while we are on the waiting list for therapy? Parent sessions can be scheduled weekly, every other week, or monthly, while you wait for a therapy opening for your child. Parent sessions are very structured and include weekly goals. During parent sessions, parents will discuss progress toward these goals and the therapist will help you problem solve to make techniques, tools, or strategies more effective. The therapist will provide you with direct teaching and modeling of strategies to use with your child. If needed, the therapist will help you develop a behavior plan for your child to 1) prevent problem behavior from occurring and 2) assist you in how to respond to problem behavior, if it does occur. Other providers may join parent sessions, if you think it may be helpful (e.g., home-based BCBA). This is also an opportunity for you to get to know your child's therapist, and for the therapist to get to know your family.
- What is the difference between ABA and CBT? Cognitive Behavior Therapy (CBT) is a treatment technique that falls under the ABA umbrella of types of ABA therapy models. CBT is considered a "third wave" ABA therapy. However, not all behavior analysts are trained in and use CBT.

Applied Behavior Analysis (ABA) therapy is typically done by a behavior technician (someone with a bachelor's degree who may or may not have experience) who is supervised by a Master's level licensed Board Certified Behavior Analyst (BCBA) or LABA. Most LABAs do not have specific training in mental health diagnoses and may or may not have experience working with individuals with mental health diagnoses (e.g., anxiety, OCD, ADHD, and depression), depending on their place of work. School-based LABAs are required to work with students with mental health diagnoses, so they often seek out additional consultation and/or supervision by a school psychologist or counselor and take professional development courses to learn more about how to apply ABA to a broad range of children. More and more studies are being published about the effectiveness of ABA for children with ADHD and comorbid diagnoses (e.g., anxiety, depression, and OCD), but many people do not know that ABA can be used to treat children and adults with a broad range of emotional and behavioral challenges.

ABA is most commonly used to teach individuals with autism social skills, communication, daily living skills, play, and academics by breaking skills into component parts and reinforcing each part. ABA can also teach coping skills, feeling identification, and positive self-talk through modeling and reinforcement. Data is collected and all targeted skills need to be applicable to the individual's daily life (i.e., meaningful). ABA is also used to increase positive behavior and decrease negative behavior through creating positive behavior plans that can be implemented at home/school. ABA can be used for kids and



adults; at a table and on the floor; and in structured teaching sessions and in unstructured sessions (e.g., free play). ABA is typically offered several hours per week, in the home, at a school, and/or at a center (5-30 hours/week).

Cognitive Behavioral Therapy (CBT) is typically done by a licensed mental health provider, such as a psychologist, social worker, or LMHC. This is a doctoral or Master's level clinician with specific training in mental health diagnoses and CBT. These sessions are typically 50 minutes/week and last for 3-12 months, depending on the individual. CBT is known to be effective for children with anxiety, OCD, and depression. It involves learning coping skills, feeling identification, and positive self-talk through modeling and reinforcement. The underlying theory behind CBT is that our thoughts impact our feelings, which then in turn impact our behavior. If the individual can learn to identify what they are thinking/feeling and manage feelings by using coping skills or restructuring negative thought processes, this will change the way the individual behaves. CBT emphasizes *internal processes* (i.e., thoughts) as the driving force behind feelings and behavior, while ABA (or "Behavior Therapy") emphasizes *external processes* (i.e., behavior) as the driving force. However, several of the skills learned in each model are the same and use the same behavioral techniques to teach such skills (e.g., shaping, modeling, and differential reinforcement).

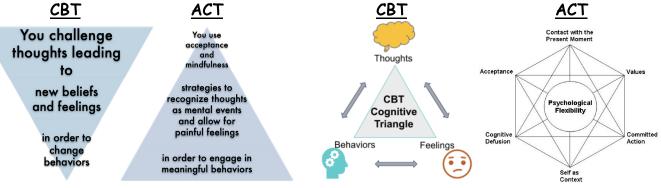
Skills-based Behavior Therapy is essentially a combination of these approaches. It offers weekly sessions with a LABA (not a behavior technician) and targets all of the identified skill areas noted above. Data is collected and the LABA consults weekly with a clinical psychologist (Dr. Bennett) regarding the mental health diagnoses and cognitive tools that are being used in sessions.

- What is the difference between ABA and ACT? Acceptance and Commitment Therapy (ACT) is a treatment technique that falls under the ABA umbrella of types of ABA therapy models. ACT is considered a "third wave" ABA therapy. However, not all LABAs are trained in and use ACT.
- What is the difference between ACT and CBT? There are several similarities and a few key differences between ACT and CBT. Both are research-based, highly effective treatment models for children and adults with ADHD, ASD, anxiety, mood disorders, and/or other mental health challenges. Both CBT and ACT teach thought, feeling, and behavior identification and coping skills, such as mindfulness.

CBT is typically done by a mental health therapist and ACT is typically done by a LABA; however, both can provide these types of therapy with the appropriate training and consultation. CBT focuses on changing the negative thought, which drives the feeling and



behavior; while ACT focuses on changing the behavior, and just noticing thoughts and feelings. Some therapists start by using a CBT approach, but adjust to an ACT approach if the child becomes "stuck" in trying to change their thoughts and/or develops anxiety about their anxiety. More information can be found here: https://contextualscience.org/comparing\_act\_and\_cbt, and additional articles found comparing these treatment modalities can be here: https://contextualscience.org/articles\_comparing\_act\_to\_cbt, although even more research has been published to date about the efficacy of both CBT and ACT. Simplified illustrations of CBT versus ACT are shown here:



Can you bill my insurance? If the child has autism, LABAs can bill insurance for ABA services. Ms. Chapple is not credentialed through any insurance panels at this time, but if your plan has out-of-network coverage for ABA, they may reimburse you for some of the sessions. We do not submit pre-authorization forms or 6-month progress reports to insurance companies at this time. We can provide you with a "Superbill" to submit to your insurance company, as requested.

However, if a child does not have autism, LABAs cannot bill insurance for ABA because insurance companies only cover ABA for individuals with autism. Insurance coverage for ABA therapy for individuals with autism is relatively new, so hopefully this will be expanded to individuals without autism in the future.



## <u>General Curriculum for Skills-Based Behavior Therapy</u> <u>& Brain Fit Classes</u>

#### Use of a Positive Reinforcement System

- > Identify child's interests and what motivates him/her
- > Reinforce positive behaviors
- > Create a simple behavior plan for family (if needed)

#### **Practice Coping Skills**

> Learn Mindfulness, Deep Breathing, PMR, and Visual Imagery

#### Learn Feeling Identification

- > Introduce Feeling Chart & Zones of Regulation Thermometer
- > Learn how to describe intensity of feelings by using a SUDS scale

#### Learn Thought & Behavior Identification

- > Learn how thoughts, feelings, and behavior are connected (CBT triangle)
- > Learn how to restructure negative thoughts (thinking errors)
- Build self-esteem

#### Learn about the Hexaflex (ACT)

- > Learn to accept feelings and negative events by building distress tolerance
- > Learn how to "defuse" or disconnect negative or anxious thoughts from yourself
- > Learn how to build a stronger, more positive sense of self
- > Learn about what you value and how to make steps toward those values

#### Integrate a Collaborative Problem Solving Approach

- > Validate feelings, state the problem, and invite the child to solve the problem
- > Provide psychoeducation about de-escalation and fight/flight/freeze response

# Teach Other Skills as needed (executive functioning skills, communication, play, social skills, self-care, and/or community safety)

> Set up morning/afternoon schedule/structure and/or play activity schedule