

**FABA Statement on the Right to Effective Behavioral Intervention  
in Florida Schools**

*DRAFT 02 - October 22, 2009*

The Florida Association for Behavior Analysis (FABA) recognizes that every student in Florida schools, with and without disabilities, has a right to effective behavioral intervention.

Therefore, FABA, through majority vote of its Executive Committee, issues the following position statement as a set of guiding principles to protect students from harm as a result of either the lack of behavioral intervention or the inappropriate use of behavioral or other interventions, including crisis management procedures.

**FABA declares that all students, with and without disabilities, who receive behavioral intervention in Florida schools have a right to:**

1. *A therapeutic and stable learning and social environment:* Characteristics of such an environment include but are not limited to: access to attractive, clean, well-equipped and furnished, and safe school environments; frequent active engagement in opportunities for stimulation and effective instruction; therapeutic social interactions; predictability and continuity in routines, staffing, and peer groups; minimal changes in school placements; and freedom from undue physical or social restriction.
2. *Educational services with an overriding goal of personal welfare:* The student and family should be active participants in collaboration with school personnel to develop, implement, and monitor the outcomes of functional and relevant educational programs and behavioral interventions. In cases where withholding or implementing a behavioral intervention involves potential risk and the student and family do not have the capacity to provide consent, individual student welfare should be protected through two mechanisms: Peer Review Committees (PRC), imposing professional standards, determining the clinical propriety of intervention programs; and Human Rights Committees (HRC), imposing community standards, determining the acceptability of intervention programs and the degree to which they may compromise an individual student's rights. The PRC and HRC mechanisms described above also should be available for quality assurance monitoring and to provide consultative supports for especially severe or complex cases, as needed.
3. *Intervention by a competent behavior analyst:* The training of Board Certified Behavior Analysts (BCBA) and Board Certified Assistant Behavior Analysts (BCaBA) reflects appropriate academic preparation, including knowledge of behavioral principles, methods of assessment and intervention, research methodology, and professional ethics; as well as supervised practical experience. In cases where a problem or intervention is complex or may pose risk, direct involvement or oversight by a BCBA (masters level) or BCBA-D (doctoral level) is necessary.

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4. *Programs that effectively teach academic and functional skills:* Improvement in functioning requires the acquisition and mastery of behaviors (i.e., skills) that will increase knowledge, independence, enjoyment, and meaningful life-style quality. Effective programs teach students how to appropriately (e.g., via language skills) gain access to natural reinforcers, and how to appropriately terminate or reduce unpleasant sources of stimulation. Such programs are faded as the student generalizes learned skills to all relevant settings, times, and activities in the school, home, and community. Effective programs should also address the elimination of behaviors that are dangerous or that in some other way serve as barriers to independence.
5. *Behavioral assessment and ongoing evaluation:* Pre-intervention assessment, including interviews, direct observations, and measurement of behavior, attempts to identify factors relevant to behavioral maintenance and intervention. Efficiently-prepared written plans coordinate related services of, and share data with, all relevant persons. The ongoing use of objective behavioral measurement documents response to intervention and guides decisions to modify or terminate interventions.
6. *The most effective intervention procedures available:* As mandated by IDEIA 2004 and NCLB, each student is entitled to effective and scientifically validated intervention. In turn, the behavior analyst has an ethical obligation to use only those procedures demonstrated by research to be effective.

The use of one, simultaneous, or a series of nonrestrictive interventions is unacceptable if objective behavioral measures or scientific research indicate that other procedures would be more effective. Slow-acting, nonrestrictive procedures may prove to be highly restrictive if such procedures result in prolonged risks, limited access to educational programs, or result in habituation and the ultimate need for highly restrictive procedures.

The use of restrictive procedures is unacceptable unless it can be shown that such procedures are necessary to produce safe and clinically significant behavior change. Decisions on the use of potentially restrictive or alternative procedures should be based on functional assessment of the expected and actual outcomes for each student case, consideration of the absolute and relative levels of restrictiveness, analysis of potential risks or side effects, the amount of time expected to produce a clinically significant outcome, and the consequences that would result from delayed intervention.

Procedures that protect students from injuring themselves or other persons should not be restricted or prohibited based on arbitrary categorical labels. Decisions to humanely employ and then fade the use of such procedures should be made on an individual case basis.

Much of this position paper was derived from an official position statement of the Executive Council of the Association for Behavior Analysis (ABA).

<http://www.abainternational.org/ABA/statements/treatment.asp>