

Helping Autistic students by removing Behaviourism from Australian Schools

Introduction

I am a parent of two funny and spunky neurodivergent children (Autistic, ADHD). Both children, 9 and 11, attend their local public school where there are wonderful teachers and staff. I am a former high school teacher, having completed a graduate diploma of education many years ago. I am a parent advocate, having researched widely on best practice in supporting neurodivergent children.

Our kids cannot afford for the Autism strategy to let them down as the Senate select committee on Autism did. The inquiry had potential, however due to the [bias of the committee chair](#) towards behaviorist approaches, the [final report](#) lacked the insight and boldness in recommendations needed to drive real transformational change within the education sector. It focused too much on family, and too little on Autistic individuals. Too much on the deficiencies of Autistics that need 'fixing' ([the medical model of disability](#)) and too little on the parts of society that were broken and disabled Autistic individuals ([the social model of disability](#)). The National Autism Strategy should aim higher.

Positive Behaviours for Learning (PBL) is a form of behaviourism that was [introduced into Australia](#) from the United States of America (US), via New South Wales (NSW), in 2005. PBL was introduced into Australian Capital Territory (ACT) public schools in 2020. I have seen the impacts of this, through my children's experiences, as well as the experiences of other families I am in contact with. Behaviourism is not best practice – it is often ableist and discriminatory, increasing stress responses in disabled children. It leads to increased behaviours of concern, increased exposure to violence for students and staff, and increased seclusion, restraint and exclusion of children with disabilities. Continued use of behaviourism in schools could arguably be considered a breach of the [disability standards for education](#) as well as [work health and safety](#) obligations to staff and students.

There is an element missing from the Autism strategy discussion paper that should be a priority for inclusion. There should be a focus on determining the best practice approaches to reducing behaviors of distress and concern in educational settings for neurodivergent (including Autistic) children. **Behaviorism** and (PBL) should be removed from Australian schools, especially for neurodivergent children. There needs to be a pivot towards the Collaborative Proactive Solutions (CPS) that will reduce student distress and behaviours of concern, free up resources for teaching and likely lead to reduced costs for the National Disability Insurance Scheme (NDIS) - fewer disabled children in distress mean fewer supports are needed. **Successful education leads to successful economic and social inclusion.**

Autistic students aren't the problem, nor are teachers or school staff. Staff are doing the best they can, within the training and parameters that they are given (staff shortages, COVID challenges etc.). Teachers and school staff, however, are a key part of the solution.

A short background on behaviourism

[Behaviourism](#) is the theory that human and animal behaviour is based on conditioning (mental training and the influence of habit) rather than by thoughts and feelings. The application of radical behaviourism, known as Applied Behavior Analysis (ABA), is used in a variety of fields including dog training and in the attempted 'treatment' of Autism.

ABA, developed in the US, was pioneered on humans by [Dr Ivar Lovaas](#), who also helped pioneer gay conversion therapy, now [banned in Queensland, the ACT and Victoria](#) due to the mental harm it causes to 'clients.' ABA uses [operant conditioning](#) (rewards and consequences) to get an Autistic child to comply with requests to stop certain behaviours. At times ABA is used to try to extinguish harmless self-soothing Autistic behaviours such as rocking, hand flapping, and pacing. The overwhelming majority of Autistic adults believe ABA harms the mental health of Autistic children because it forces the child to comply while failing to address *the underlying need* of the behaviour.

One [2018 study](#) found that of Autistic respondents to an online questionnaire, almost **half those who had been exposed to ABA displayed post-traumatic stress symptoms** (PTSS).

In October 2019 the US Department of Defense (DOD) issued an interim report to US congress on the provision of Autism services to military families through the TRICARE insurance program. [The report indicated](#) "76% of TRICARE beneficiaries in the ACD <Autism Care Demonstration Program> had little to no change in symptom presentation over the course of 12 months of applied behavior analysis, with an additional 9 percent demonstrating worsening symptoms."

A June 2020 DOD report to US congress [mentioned in regards to ABA](#): "the changes are small and may not be clinically significant"

...and that:

*"What can be interpreted with confidence is that the number of hours of ABA services rendered did not have the intended impact of symptom reduction on the PAC scores. This lack of correlation between improvement and hours of direct ABA services strongly suggests that the improvements seen are due to reasons other than ABA services and that **ABA services are not significantly impacting outcomes.**"*

... and

"...the Department remains very concerned about these results, and whether the current design of this demonstration, as well as ABA services specifically, is providing the most appropriate and/or effective services to our beneficiaries diagnosed with ASD."

On 25th September 2023, 4 Corners released an episode called 'Careless' that detailed the abuse of Autistic children during an ABA day program in Melbourne. [REDACTED]. In 2021, after the abuse had occurred, the then CEO of the company (Irabina Autism Services), was given red carpet treatment by the chair of the Senate select committee on Autism to [explain the purported benefits of ABA](#).

THE ULTIMATE OBJECTIVE OF ABA

.... is to make the Autistic child indistinguishable from their peers. This holds NeuroDivergent People to NeuroTypical standards, which is cruel and sets us up for failure.

We are not and will never be NeuroTypical - ignoring this fact helps nobody.

ABA's messaging suggests that natural Autistic ways of doing things are wrong and you are broken, and therefore must be corrected - that the Autistic Person is broken and must be molded to be more palatable to non-Autistic people.

This harms Autistic people's sense of pride and identity.

[Lyric Rivera – Neurodivergent Rebel](#)

Behaviourism in ACT public schools

The ACT Education Directorate commenced rolling out Positive Behaviours for Learning (PBL) in ACT public schools in 2020. PBL is a derivative of ABA. The [ACT Education Directorates PBL page](#) refers readers to this [United States \(US\)-based website](#) for additional information on PBL. While the US-based website does not openly mention ABA, it is clear from the descriptors that ABA is the product it sells. In 2015, the US organisations two senior advisors [published a paper](#) on how the product the organisation sells is “An example of Applied Behavior Analysis Implemented at a scale of social Importance.”

PBL uses rewards and consequences (loss of rewards) to get children to comply with behaviour expectations. Each ACT PBL school has a PBL ‘matrix’ of expected behaviours, and if the students meet the ‘behaviours’ they are rewarded with tokens, prizes and/or awards. These PBL matrixes often contain ableist expectations, including expectations in assemblies of “we are attentive listeners” and “we sit in our designated areas” – hardly fair for Autistic children who are overwhelmed by crowds or children with Attention Deficit Hyperactivity Disorder (ADHD) who find it difficult to sit still.

Rewards and consequences (loss of rewards) are not effective in preventing behaviours of concern (distress) in Autistic students that are due to a lagging skill or sensory overload.



PBL encourages some additional supports for children who need them. However these supports are mostly reactive and come too little too late. By the time additional supports are provided many disabled students have already experienced decreased self-esteem from not receiving as many ‘tokens’ as their peers, and/or increased stress from the pressure to earn ‘tokens.’ Some students also experience exclusion (suspension) before [reasonable adjustments](#) are provided.

It should be acknowledged that some school staff follow their instincts and modify expectations in the PBL matrix, and/or adjust the use of tokens for neurodivergent children. However this does not consistently occur and even when it does occur, can only partly mitigate the harm.

PBL was [introduced into Australia](#) from the US, via New South Wales (NSW), in 2005. In 2015, the NSW Department of Education allocated \$15 million over four years to support schools to implement PBL. The funding employed 32 PBL coach mentors and four PBL deputy principals.

In 2021, the Centre for Education Statistics and Evaluation (CESE) released [a report on PBL in NSW schools](#). The report found that:

- Just over half of all NSW schools had adopted PBL;
- Schools struggled to get PBL to work for students that required additional (tier 2 and 3) support;
- In contrast to strong positive views of PBL expressed by school staff, CESE analysis found no differences in wellbeing measures captured by a student self-report survey; and no difference in suspension and attendance rates between PBL and non-PBL schools.

[NSW public school data from 2020](#) revealed that disabled students were 3.9 times more likely to be suspended and lost on average an *additional* 9 days of learning time per annum, compared to students who were not disabled. For this analysis, Autistic students have been included as part of the disabled community. Approximately 51% of suspensions involved disabled students (32,608 suspensions out of a total of 63,604). Of [424 Kindergarten students suspended](#) from NSW school in the first half of 2021, 80% were disabled.

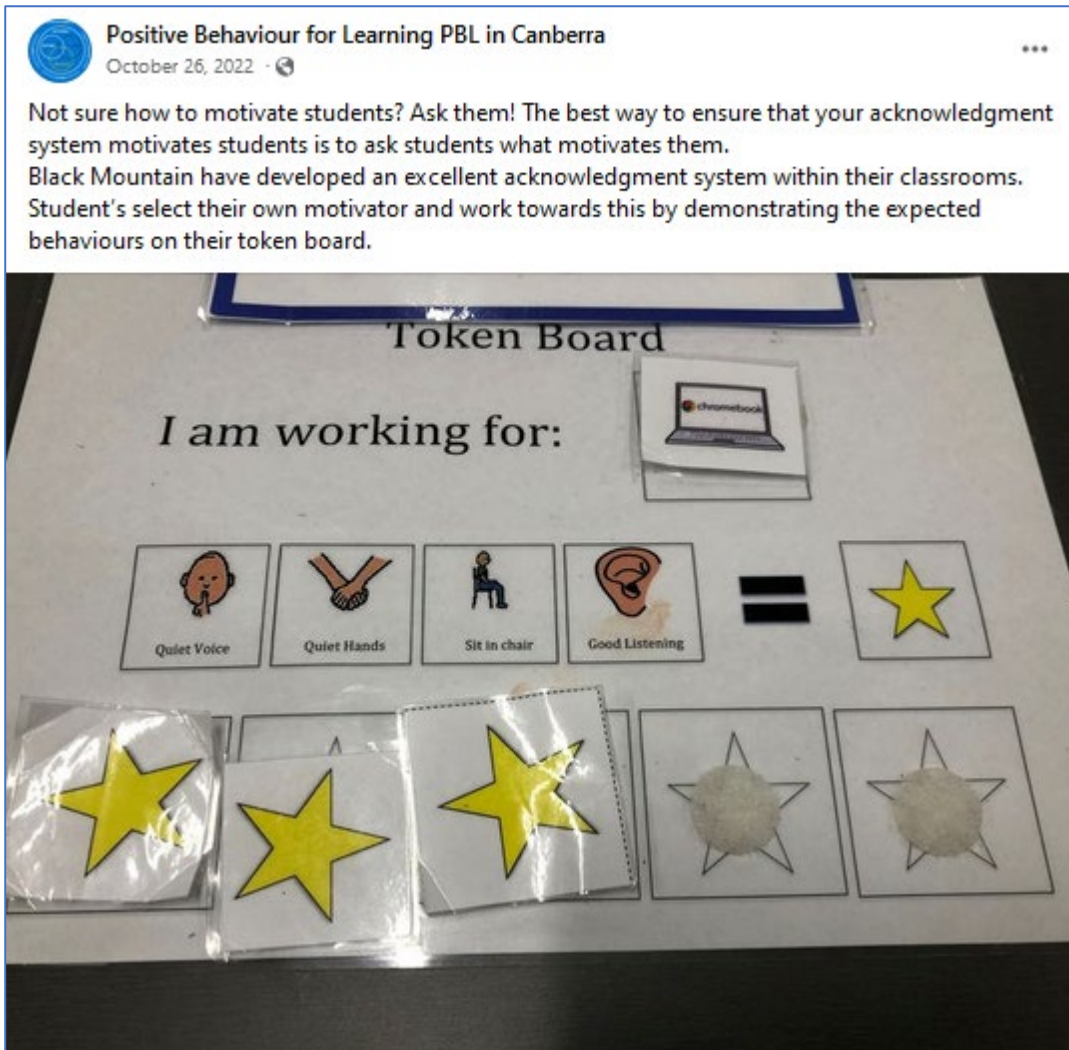
The data has painted a grim picture – PBL has not led to positive outcomes for disabled students in NSW. With this data fresh in our minds, let’s have a closer look at some examples of how PBL has been implemented in the ACT.

PBL reward tokens were introduced to my children’s school in term 1, 2023. Within a few weeks my oldest son (Mr 11), became anxious. One day Mr 11 resisted a reading activity. He was told students would get PBL points if they completed all the work, and that he would get less points if he did less work. This led to Mr 11 becoming escalated. Mr 11 later revealed at home that he struggled with reading since earlier in the year when he opened a book and saw a snake (his phobia). Mr 11 also revealed other kids always got more points than him as they can do more work, that these points are displayed on a laminated sheet on the wall, and that *“it doesn’t make me feel good at all.”* The school was responsive to feedback - Mr 11 was removed from the PBL points scheme and now receives standard awards for accomplishments. The school agreed to check assigned books for references to snakes, and to give Mr 11-time, space and assistance to articulate why he is resisting an activity. The parent-child-school collaboration led to reduced anxiety for Mr 11.



By comparison Mr 9 has received a tonne of PBL tokens.... *but* he has no idea what he received them for. Mr 9 was excited about getting a ‘prize’ at some point however when the ‘prize’ (a high tea with staff) came around he declined the invitation as he didn’t want his best friend to feel left out. Mr 9’s reading and writing has come along fantastically this year; however this can be credited to adjusted medication (for ADHD), building a rapport with his teacher (who apparently cracks the best jokes), and time with an assistant in class.

Below is an example of how PBL has been used within a 'special school' in Canberra:



This is not appropriate for many reasons.

- It shames neurodivergent children who cannot control the tone, pitch or volume of their voice.
- It seeks to extinguish harmless behaviours (hand flapping, standing up/moving around) that may help sooth an Autistic child and help them to focus. It shames children with ADHD who need to move around.
- It provides the children with no practical assistance with things they are struggling with.
- It creates an environment where children are at heightened risk of being unfairly judged. Adults may judge a child for 'not listening' when in reality the child may have a processing delay and need extra time to respond or for instructions to be scaffolded.
- Electronic devices are calming aids for many neurodivergent children. To deny a child a calming aid until they endure a task they struggle with is a recipe for disaster – increasing stress and behaviours of concerns.

An approach like this is also harmful in a mainstream school. Not only for students with a diagnosis, but also for the students who are neurodivergent but do not yet have a diagnosis due to the severe shortage of diagnosing medical professionals, especially in the public system. The harm for undiagnosed children can be compounded due to the lack of access to other reasonable adjustments, which can be difficult to obtain without a diagnosis.

There is another way – ‘Collaborative and Proactive Solutions’

Dr Ross Green is a favoured advocate amongst neurodivergent adults. Dr Green advocates an alternative to ABA known as [Collaborative and Proactive Solutions \(CPS\)](#). CPS is an evidence-based model of psychosocial treatment described in Dr Green’s books, including *The Explosive Child* and *Lost at School*.

Rather than focusing on kids’ concerning behaviours (and modifying them), CPS helps kids and caregivers solve the problems that are causing those behaviours. The problem solving is collaborative (not unilateral) and proactive (not reactive). This [video](#) provides an excellent oversight of how CPS works in practice. [Research](#) has shown that the model is effective not only at solving problems and improving behaviour but also at enhancing skills.

The Kidman Centre at the University of Technology, Sydney, conducted a trial (from 2013 to 2019) involving 130 families with children aged 7 to 14 with oppositional defiant disorder (ODD). [This study](#) compared two therapies, CPS and Parent Management Training (PMT). Results showed that children in both CPS and PMT programs experienced significant improvements after treatment, to an equal degree. For further details on this study [click here](#).

[St Phillips Christian College](#) (SPCC) spans six schools across NSW, including *DALE*, a college for students in years 3-12 who have a diagnosis of anxiety, depression, PTSD or Autism. SPCC also has a *Young Parents school* that provides special assistance for teen parents and their children. SPCC conducted [a research project on the effectiveness of the CPS method](#) across it’s DALE and Young Parents campuses. The project concluded:

“Our evidence suggests that the Collaborative & Proactive solutions’ (CPS) approach can improve student engagement in students with additional needs.”

- In 2018, across all 5 campuses, there was a total of 99 days of suspension by 21 students.
- In 2019, following the introduction of CPS, there was a significant decrease in suspensions - a total of 64 days of suspension by 17 students.
- In 2020 there were 60.5 days of suspension by 19 students. The study found that there was a substantial spike in suspensions for a cohort at one campus. Upon further analysis, it was identified that the core teacher for that class was new and had not trained in the CPS model.
- Heads of campuses also noted decreases in student referrals to them.

While the NSW Department of Education has not removed PBL from public schools, in early 2023 it [committed to train its behavioural specialists in CPS](#).

Conclusion

We know PBL is a derivative of ABA. ABA was pioneered on humans by the same individual who helped pioneer gay conversion therapy. So why is PBL being rolled out en-masse in Australian schools with minimal checks and balances on the impacts on neurodivergent/Autistic students, when it has worked so poorly in NSW for those students? What can we do to rectify this?

Students, parents, teachers and other school staff partnering together, working collaboratively, can turn this around. Collaborative and Proactive Solutions (CPS) can help improve outcomes for staff and neurodivergent students.

A national Autism strategy should condemn the use of ABA in Australia and prohibit the use of PBL on neurodivergent (including Autistic) students in Australian schools. If action is not taken soon, the next 4 corners spotlight may very well be shining on an Australian school.