

Thomas J Zwicker, Ph.D., BCBA-D 5537

My name is Thomas Zwicker, Ph.D., BCBA-D and I live at 11233 Town Walk Dr in Hamden. I am writing in strong opposition to section 42 1-6 of HB 5537 proposing that speech language pathologists supervise or direct applied behavior analysis services. I am the parent of a child with autism who receives intensive applied behavior analysis services at school and at home (through the insurance law) and I am a doctoral level behavior analyst trained by the founders of the science and practice of applied behavior analysis which is based on the basic science of behavior analysis.

I am deeply concerned as a doctoral level Board Certified Behavior Analyst that anyone would consider a Speech Language Pathologist qualified to supervise applied behavioral services for any population, especially children like my son who have autism. They receive no training in the natural science or practice of behavior analysis and could not even name or describe the meaning of the 4 terms that form the foundation for scientific basic and applied research and practices of behavior analysis. In fact, the theories and practices taught in speech pathology programs directly conflict with applied behavior analysis principles and practices. Speech Language Pathologists have a scope of practice that does not include applied behavior analysis and we have a defined scope of practice that is vastly different and recognized at both the state and national levels. There are no requirements for speech pathologists to take any classes in behavior analysis. There are no requirements that they meet any of the extensive course and experience requirements put forth by the credentialing body for applied behavior analysis, the Behavior Analysis Certification Board (BACB).

If Speech Pathologists want to supervise applied behavior analysis services, then they can take the behavior analysis courses and meet the experience and supervision requirements put forth by the BACB and recognized by current CT law and pass the credentialing exam once they meet the full requirements of the BACB and become a Board Certified Behavior Analyst like so many others who are diligently getting the appropriate training.

I have taught the required courses at Western Connecticut State University (WCSU) and at the University of St Joseph's as a professor and there are many graduate students throughout the state steeping themselves in the science and practice of behavior analysis through those courses and supervised work in applied behavior analysis working hard to meet the requirements and pass the credentialing exam of the BACB so they can effectively and safely supervise behavior analysis services to help children like my son make the most progress possible without compromising their safety and valuable developmentally critical time.

I have interacted with dozens of speech pathologists while providing applied behavior analysis services in Kansas, Texas, and Connecticut and none of them would argue that they were qualified or had the appropriate training or experience to provide or supervise applied behavior analysis services for students, adults with developmental disabilities, or children with autism. Again, the scope of practice for a Speech Language

Pathologist does not include behavior analysis. Behavior Analysis is a scientific field represented by professional associations like the Association for Behavior Analysis International or the Association for Professional Behavior Analysts with its own journals such as the Journal of Applied Behavior Analysis and the Behavior Analyst as well as the Journal of Organization Behavior Management.

As a parent, I would be horrified if the school replaced my son's BCBA with a speech pathologist to supervise his applied behavior analysis services. As an example of the lack of appropriate training and understanding of the practices that are effective for addressing behavioral issues, his speech pathologist's response to a recent behavioral issue resulted in severe outbursts and isolation that required the immediate intervention from his mother, myself, and the BCBA to prevent further harm and regression. He had previously made significant progress with the BCBA supervising the programming to address that behavioral issues. My son's progress over the last 5 years is due entirely to the experienced and well-founded behavior-analytic approach and excellent quality of services from his BCBA with my occasional perspective from the doctoral level. To clarify the significance of his progress and the paramount role of a properly trained BCBA I would have to show you videos of my son's hours long tantrums over slight changes in routine or deviations in how we drove from place to place, his screaming refusals to eat any food at all when it got near him, his darting into the street whenever an opportunity presented itself, and his lack of communication of any kind when he was three years old. Then, you'd need to see videos of him in his typical class doing exactly what all the other kids are doing, with his friend playing and happily socializing for hours on weekends, and at Disneyland on Space Mountain screaming like everyone else. BCBAs and applied behavior analysis services can have a profound, positive impact on children's developmental trajectories, but when done poorly by those who do not have the proper training it can be dangerous and harmful.

I sincerely hope the members of the committee will vote NO on HB5537 section 42 1-6 because it represents a danger to my son and all the kids in the state like him and a seriously flawed, dangerous and unprecedented arbitrary, and capricious change to the scope of practice for Speech Language Pathologists that infringes on the scope of practice for ABA, a completely separate field with a clear, recognized scope of practice and credentialing process.

Thank you for your careful attention and thoughtful consideration.

Thomas J Zwicker, Ph.D., BCBA-D