Compassion May Improve Outcomes for Autistic Children

Study: Behavior Specialists Need More Training in Relating to Families

When it comes to training, behavior analysts should take a page from the medical field: learn to balance technical skills with a greater focus on communication, active listening and empathy and compassion for the patients, parents and families they serve.

That’s the finding of a newly published study in the September 2019 edition of Behavior Analysis in Practice, a journal of the Association for Behavior Analysis International (ABAI).

Therapeutic relationship skills, including empathy and compassion, are “highly valued” by doctors and mental health professionals and are now part of their core curricula because such skills correlate with increased “patient satisfaction and adherence to treatment, enhanced quality of information gathered from patients and improved clinical outcomes,” say study authors.

In their report Compassionate Care in Behavior Analytic Treatment: Can Outcomes be Enhanced by Attending to Relationships with Caregivers? investigators surveyed parents of autistic children and discovered that families rated their child-behavior-management clinicians particularly low in “demonstrating caring about the entire family, acknowledging mistakes or treatment failures and being patient and reassuring.”

“Greatest areas of concern,” according to the findings of the 95 surveys returned, involve behavior analysts who follow their own agenda, demonstrate an authoritative demeanor when discussing programming and underestimate a child’s ability, says lead researcher Bridget A. Taylor of the New Jersey-based Alpine Learning Group. Alpine Learning has developed its own teacher and clinician relationship training program, Communicating With Parents: Active and Empathic Listening.
“A behavior analyst’s failure to practice essential relationship skills may have deleterious effects on treatment, including clients’ failure to support and implement [behavior] programming, requests for reassignment or replacement of treatment team personnel, or withdrawal from behavior-analytic treatment altogether,” study authors write.

The perceived dearth of relationship-building capabilities and compassionate care among behavior analysts can be blamed, in part, on instructional programs that focus almost wholly on technical skills as part of the behavior analyst’s professional training, researchers contend.

Other barriers include funding sources that limit the number of hours clinicians can spend with families or simply provide “lower reimbursement rates for parent-training activities;” behavior analysts’ failure to understand the intensity and range of emotional responses experienced by parents of autistic children; and “lack of awareness” among clinicians of their own behavior in response to the behavior of an emotionally-charged or distressed caregiver, such as an angry parent.

The study authors define empathy as “walking in another’s shoes” – a quality that requires “perceiving the experience from the other’s perspective and understanding the person’s emotional response within that experience.” Compassion takes empathy one step further, the researchers say, “by bringing action to the empathic response. Compassion converts empathy into an act aimed at alleviation of suffering.”

Study authors call behavior analysis a “booming industry” with growth to more than 30,000 certified behavior analysts who work primarily with children diagnosed as autistic and their families. Also, state insurance mandates now “allow an increasing number of families to access behavior-analytic interventions.”

“As our field continues to grow, we must identify the variables that most likely lead to a family choosing behavior-analytic services for their children and remaining engaged in behavior-analytic treatment over time,” the investigators write.

Specifically, “we need to identify the critical components of compassionate care, develop a viable approach to teaching it as a professional skill and begin assessing its collateral benefits on variables such as patient-client satisfaction, adherence to treatment and client outcomes,” they conclude.

Behavior Analysis in Practice is a publication of the Association for Behavior Analysis International (ABAI). Established in 1974 and based in Portage, Mich., ABAI now represents a global network of more than 7,000 member professionals, educational specialists, scientists, and students. The organization’s focus is on contributing to societal well-being by supporting the theory, study, and practice of behavior analysis through basic, translational, and applied research.

An abstract of the study can be found at https://link.springer.com/article/10.1007/s40617-018-00289-3