To: The esteemed members of the Health and Human Services Committee From: Le'Ann Milinder, BCBA-D, Stockton Springs, in support of LD473

LD473 - Information on the Efficacy of ABA for Persons with Intellectual and Developmental Disabilities

Applied Behavior Analysis is an effective intervention for reducing unwanted behavior and teaching new skills. Decades of scholarly publications report successful outcomes for people with autism spectrum disorders as well as people with intellectual and developmental disabilities.

These interventions can reduce the restrictive practices that are often used to manage dangerous behavior in the absence of effective treatment. They also can be used to help individuals develop a wide repertoire of functional skills, including communication, social skills, everyday tasks, and vocational skills.

Research in recent years has shown that positive approaches based in ABA can be implemented consistent with a person-centered approach that meets the requirements of the HCBS settings where the services described in LD473 occur.

Here is a short bibliography.

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Luiselli, J. K. (Ed.). (2021). Applied behavior analysis treatment of violence and aggression in persons with neurodevelopmental disabilities. Springer. https://link.springer.com/book/10.1007/978-3-030-68549-2

Machalicek, W., Douglas, A., Drew, C., Barton, H., Erturk, B., & Brafford, T. (2021). Applied behavior analysis and intellectual and developmental disabilities. https://psycnet.apa.org/record/2020-80415-002

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Sturmey, P., & Sturmey, P. (2015). Applied Behavior Analysis Interventions. *Reducing Restraint and Restrictive Behavior Management Practices*, 141-163. https://link.springer.com/book/10.1007/978-3-319-17569-

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Wilson, R. J., Ioannou, S., & Thomson, K. (2019). Using a Multicomponent Model in the Assessment of Persons with Intellectual Disabilities and Problems in Sexual Behaviour. *The Wiley Handbook on What Works for Offenders with Intellectual and Developmental Disabilities: An Evidence-Based Approach to Theory, Assessment, and Treatment*, 239-260.

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