Behavioral Consultants:  
Who Are They and How Do I Find the Right One?

*What is a "Behavioral Consultant" and How is This Different From a Psychologist?*

These questions are often asked by people trying to find a behavioral consultant for a family member, a friend, or someone else with mental retardation or another developmental disability for whom they provide support. They sometimes come up because many people are not aware that the majority of psychologists are not qualified to serve as behavioral consultants. This is because many do not have the specialized training and experience in applied behavior analysis or behavioral psychology and mental retardation/developmental disabilities (MR/DD) needed to provide appropriate and effective behavioral treatment for people with MR/DD. On the other hand, some people who do have the appropriate training and experience have graduate degrees in areas other than psychology, such as special education or human development. Unfortunately, in most states at present, almost anyone can legally call him or herself a “behavioral consultant.”

These issues have been a source of confusion and frustration for many consumers. This flyer was prepared to help you make an informed choice of a behavioral consultant for a person with MR/DD or yourself. It was developed by representatives of three major professional organizations. They are the Psychology Division of the American Association on Mental Retardation, the MR/DD Division (Division 33) of the American Psychological Association, and the Association for Behavior Analysis. Each of these organizations has a primary focus on the issues presented here.

*Don't All Psychologists Have The Same Training?*

No. Just like medical doctors (MD's), many psychologists have specialized training, but some do not. For example, all cardiologists (heart specialists) are medical doctors, but most medical doctors are not cardiologists. In the same way, all psychologists have graduate training in psychology, but many do not have training and supervised experience in applied behavior analysis, which is the specialization needed to be an effective behavioral consultant. Put another way, some psychologists are qualified to provide behavior analytic assessment and treatment services, but many are not. And as mentioned above, some people who are qualified to provide these services are not psychologists.

*Should I Look for a Licensed Psychologist to Provide This Service?*

Although that may be helpful for a variety of practical reasons, a licensed psychologist is not always well qualified to provide behavioral consultation services for a person with mental retardation or a developmental disability. Most licensed psychologists have completed rigorous graduate training. The American Board of Professional Psychology, which is recognized by many state boards of psychology as a formal sign of psychological specialty expertise, also
recognizes the specialty board of behavioral psychology. Psychologists who have this kind of psychological board certification are called "diplomates" and indicate this with the letters "abpp" after their name and highest degree. An even older form of external recognition for behavioral expertise is the status of "clinical fellow" by the behavior therapy and research society, a list of which is provided annually in the Journal of Behavior Therapy and Experimental Psychiatry. 

But even these qualifications may not have included any specific training and supervised experience in behavioral analytic assessment and treatment methods for people with MR/DD. The same is true of many people with advanced degrees and superb qualifications in areas like school psychology and special education.

There is also great variability from state to state in the areas of competence required to practice psychology independently. Most often, the doctoral degree is the entry level for the independent practice of psychology, with legal supervision by licensed doctoral level psychologists required for those with lesser degrees to engage in psychological work. Further, some states ask or permit psychologists to specify their exact areas of competence (or specialization) when they are licensed, while other states require psychologists to choose from only a few broad categories. There may also be more opportunities for masters and doctoral students to acquire skills in behavior analysis in some states than in others, due to what is provided in university training programs.

What Is a Board Certified Behavior Analyst? 

This is a professional who has documented graduate training and supervised, hands-on experience in applied behavior analysis, and has passed a special examination in this area. This voluntary certification assures you that the professional has basic, general competence in applied behavior analysis. Right now, however, a national certification program has just begun. The national program is managed by the Behavior Analyst Certification Board, Inc. (see "www.bacb.com" on the internet for more information about this organization). Professionals with master’s or doctoral degrees who are certified under this program are called Board Certified Behavior Analysts (BCBA). Over time, the number of board certified behavior analysts is expected to increase, and it should become easier for consumers to find qualified behavioral consultants. But for now, some consumers may have difficulty locating board certified behavior analysts in their local area (however, the BACB Certificant Registry is available at www.bacb.com). One more caution is that many board certified behavior analysts, like psychologists and other practitioners, are specialists. Some do not have expertise in working with people with MR/DD. People seeking services from consultants who are board certified behavior analysts should ask the consultant if they have specific training and experience in the area of MR/DD.

What to Expect From a Behavioral Consultant

Here are some things you should expect from a behavioral consultant working in MR/DD:
• They have a master’s or doctoral degree in applied behavior analysis, or in a closely related discipline (e.g., psychology, special education, human development) with an emphasis in applied behavior analysis.
• They have supervised experience implementing behavior analysis interventions for people with MR/DD.
• They follow the ethical principles of the American Psychological Association (APA), whether or not they are licensed psychologists or members of APA, and/or the ethical codes of their respective affiliated chapters of the Association for Behavior Analysis. Among other things, these ethical guidelines require professionals to provide only those services for which they have the appropriate training and experience. (See "http://www.apa.org/ethics/code.html" on the internet.)
• They adhere to the Right to Effective Treatment position statement of the Association for Behavior Analysis.
• Other qualifications are shown at "www.bacb.com" (on the internet).
• Recommended qualifications for professionals who direct and supervise applied behavior analysis programming for children with autism spectrum disorders are shown in the autism section of "www.behavior.org" (on the internet), under Guidelines for Selecting Behavior Analysts.
• Other standards and requirements may be applicable for third party reimbursement of behavioral consultation services by private insurers or government agencies, which could include supervision or direct provision of all services by a licensed psychologist, membership of the professional on a panel of approved providers, and/or recognition by a state agency as a Medicaid or other specific program provider. Well qualified providers may not be eligible for third party payment of fees by particular agencies because of closed provider panels or because they have not enrolled in the required government program. These financial factors should be discussed when arranging for services with a behavioral consultant.

When looking for a qualified behavioral consultant for a person with mental retardation or other developmental disability, you should feel comfortable asking for specific evidence of the consultant’s qualifications, and should expect to get a complete answer that makes sense to you.

These are some practices you should expect from a behavioral consultant:

• They will observe the person with MR/DD where the person lives, works, or goes to school, at least a few times.
• They will develop a system for collecting objective data about the skills and needs of the person with MR/DD, and train caregivers or teachers to implement it.
• They will conduct a functional assessment or functional analysis of any problem behavior to determine why the problem occurs.
• They will develop an intervention plan, based on the functional assessment or analysis results, that addresses the factors in the person’s physical and social environments that contribute to the problem, and aims to change those factors. They will seek input from caregivers and other professionals, where appropriate, in developing the intervention plan.
• This plan should include training to help the person with MR/DD develop appropriate and useful skills (instead of using “problem behavior” to get what they want), but may also include other intervention procedures.
• They will directly train caregivers or teachers to implement the intervention plan.
• They will observe the people implementing the intervention and provide feedback.
• They will modify the plan as needed to ensure its continued effectiveness, based on direct observational data.
• They will share data and collaborate with other professionals involved in the case, such as a psychiatrist if the person is receiving medication for the problem behavior or related conditions, or a psychologist who is conducting diagnostic assessments. They will also share data with family members and caregivers, and seek consultation from other professionals when needed.
• Some behavioral consultants will have a private practice, but others may work for private or public programs or services. They may provide services in schools, adult programs, community settings, or homes.
• Some aspects of consultation will vary depending upon whether it is provided as a continuing part of a school or adult service, as an intensive treatment service, or as a service provided through a hospital, private, or university group practice.

You should feel free to ask the consultant how they will help and what processes they will use. If the consultant does not say they will use the methods listed above, ask them why not. If they do not have the training to use the procedures, that means you should find a different consultant who has this training, experience and skills (even if they have a license to practice psychology or an impressive title).

We suggest that you do not use a consultant who focuses mainly on reacting to “problem behavior,” unless a crisis or other particular circumstances warrant this focus. Focusing mainly on reacting to “problem behavior” will not help prevent it from happening in the future and does not represent current best practice. In crisis situations or in the case of an escalating behavior problem that requires immediate action, treatment should address both immediate concerns and preventive strategies, such as changing environments and teaching appropriate alternative skills. In most other cases, the main focus of the behavioral consultation should be on skill development.

Some Sources of Additional Information:

American Association on Mental Retardation
http://www.aamr.org
(aamr.org) Then select divisions, then Psychology.
(AAMR Psychology Division home page)

Association for Behavior Analysis
http://www.wmich.edu/aba/ (ABA home page)

American Psychological Association
http://www.apa.org

Cambridge Center for Behavioral Studies
http://www.behavior.org (CCBS home page)

Association for Advancement of Behavior Therapy
http://www.aabt.org (AABT home page)

American Board of Professional Psychology
http://www.abpp.org Then go to “member boards” (ABPP home page)

We hope that that the information here is helpful to you. If you have comments or suggestions regarding this brochure, please send them to Dr. David Rotholz (drotholz@sc.edu). February 2001