
**Antecedents** (A) – Anything that occurs before a behavior or a skill. When teaching a skill, the antecedents include the place, the teaching materials, who is there during the teaching, and how instruction is given.

**Behavior** (B) – Anything that your child actually DOES. A behavior is an observable act. For skills teaching, the behavior is the specific skill that you have chosen to teach.

**Consequence** (C) – Anything that follows the behavior and increases, or decreases, the chances that the behavior will occur again in the future. For skills teaching, you want to have a consequence that will INCREASE the behavior that you are teaching; this type of consequence is called a reinforcer.

**Adaptive Skills** – The necessary age appropriate skills for functioning independently daily. Adaptive skills include real life skills such as self-care, home living, safety, communication skills, social skills, community use, self-direction, and leisure skills.

**Aggression** – A behavior that is forceful, hostile, or attacking.

**Antecedent** – (See A-B-C.)

**Antecedent Based Interventions** – An evidence-based approach that calls for locating (or identifying) and adjusting the possible triggers to an individual’s challenging behaviors.

**Antecedent Manipulation** – (See Antecedent Based Interventions)
Anticipatory Prompt – (See Error Correction)

Anxiety – A state of uncertainty about a real or perceived future situation or reaction to stress that can cause excessive fearfulness, uncertainty, worry and nervousness.

Applied Behavior Analysis (ABA) – The science of applying experimentally derived principles of behavior to improve socially significant behavior. ABA takes what we know about behavior and uses it to bring about positive change (Applied). Behaviors are defined in observable and measurable terms in order to assess change over time (Behavior). The behavior is analyzed within the environment to determine what factors are influencing the behavior (Analysis).

Approximations – Small steps toward the completion of a skill.

Asperger, Hans – (See Asperger Syndrome.)

Asperger Syndrome (AS) – Asperger Syndrome is named after Austrian pediatrician Hans Asperger who, in 1944, identified a set of unique social and behavioral characteristics in a group of children. Today, AS is one of several Autism Spectrum Disorders (ASD) that are characterized by difficulties in social interaction and by restricted, stereotyped patterns of behavior, interests, and activities. AS differs from other Autism Spectrum Disorders in two ways. Those diagnosed with AS meet the early milestones for language development and have normal to above-normal cognitive abilities. Although not mentioned in standard diagnostic criteria, motor clumsiness and atypical use of language are frequently reported.
**Auditory Learner** – Auditory Learners can more easily and accurately learn and remember details (or information) that they hear.

**Autism Spectrum Disorder (ASD)** – Autism Spectrum Disorder is the term used to describe a group of neurobiological Pervasive Developmental Disorders (PDD) that are characterized by specific impairments in social interaction and communication and that cause restricted and repetitive patterns of behavior. The diagnostic labels of ASD range from the milder – including Asperger Syndrome (AS) and Pervasive Developmental Disorder Not Otherwise Specified (PDD-NOS) to the moderate Autistic Disorder (AD) and the more severe AD with co-existing disorders such as intellectual disability. **Change to “ Autism ”?**

**Autism Internet Modules** – The Autism Internet Modules were developed to make comprehensive, up-to-date, usable information on Autism accessible to educators, professionals, and families. These online modules cover many topics relating to Autism and can be accessed free of charge. *(AIMS)*

**Autistic Disorder (AD)** – Autistic Disorder is sometimes referred to as early infantile autism or childhood autism. Children with AD have a moderate to severe range of difficulties in the areas of both verbal and nonverbal communication, reciprocal socialization, and restricted routines, rituals, and patterns of behavior. Many resources indicate that approximately 70% of children with Autism also have cognitive delays. This disorder is four times more common in boys than in girls.

**Aversive/Aversion** – Causing to avoid a thing, situation, or behavior due to using an unpleasant stimulus.

**Back Step** – (See Error Correction)
Backward Chaining - (See Chaining)

Behavior (B) – (See A-B-C.)

Behavioral Excesses – Behaviors that need to be unlearned or relearned.

Board Certified Behavior Analyst (BCBA) – BCBA is a professional certification for behavior analysts. Board Certified Behavior Analysts must possess the minimum of a Master’s Degree, meet requirements for graduate-level work or college-level teaching and research in behavior analysis, meet experience requirements, and pass the Behavior Analyst Certification Examination.

Bribe/Bribery – Bribery involves giving or promising rewards (bribes) when an unwanted behavior is already in progress.

Chaining – The way in which different steps or sub-skills are put together into a sequenced, more complex skill. This can be done using forward chaining or backward chaining techniques.

Forward Chaining – Hooking each step or behavior together in the “normal” sequence, starting with the first step. The child is rewarded for learning the first step until it is mastered, and then is rewarded for learning the first two steps until they are mastered, and so on.

Backward Chaining – Hooking together a task by starting with the last step and moving sequentially backwards toward the first step. The child is rewarded for completing the last step until it is mastered, and then is rewarded for learning the last two steps until they are mastered, and so on.
Clinical Psychologist – Clinical psychologists assess, diagnose and treat mental illness, behavior problems, and psychiatric problems. They utilize different treatment approaches when working with clients. Psychologists are not authorized to prescribe medication.

Compliance/Non-compliance – Compliance is cooperation of the learner during the teaching session; non-compliance is stubborn (refusing?), uncooperative behavior on the learner’s part.

Consequence (C) – (See A-B-C.)

Contingent Rewards – Rewards that are ONLY given after the attempt is made or the task is completed. It is important to use the rewards only when the desired behavior occurs.

Continuous Reinforcement – (See Reinforcement)

Controlled Guidance – (See Prompting)

Corrective Feedback – Feedback that is given in a calm, controlled manner prompting the learner to do something more desirable.

Data – Information gathered in order to track a learner’s progress (e.g. diagnose difficulties and problems, show trends and patterns, establish strengths, demonstrate skill mastery, plan teaching).
**Deprivation** – Withholding of a reward can make someone want to work to get more of it, meaning that motivation is higher.

**Discrete Trial Teaching (DTT)** – Using direct instruction to teach very specific skills.

**Discrimination** – To understand the distinction between places, times, people, situations, etc.

**Error Correction** – The process of providing the child with enough information to get it right on the next try.

**Anticipatory Prompt** – Used when a consistent pattern to the error is observed. In the next session, the error is anticipated, and the appropriate level of prompting is used toward mastery. Anticipatory prompts prevent the error from continuing to occur.

**Back Step** – This error correction strategy (used in sequential learning) takes the child back to the last step just prior to the error and begins the sequence again with appropriate prompting.

**Errors** – Errors are usually due to insufficient learning, confusion, or distraction. They should be handled using an error correction strategy rather than punishment or discipline.

**Escalation** – Problem behaviors can grow and intensify or escalate if prevention strategies are not in place. Behavioral triggers should be examined and replacement skills should be taught in order to avoid further escalation.
**Evidence Based Practices** – Interventions that have been shown to be effective through scientific research.

**Extinction** – (See Reinforcement)

**5-Point Scale** – A visual representation that helps individuals with Autism understand and communicate abstract concepts and also learn to self-regulate social behaviors and emotions. *(AIMS)*

**Fixed Ratio Schedule** – (See Reinforcement.)

**Forward Chaining** – (See Chaining.)

**Free Access Rule** – Not wanting to work for what can be gained for free. If you plan to use something as a reward, your child should not have free access to it at other times.

**Frequency** – How often a behavior is occurring.

**Full Physical Assistance/Hand-Over-Hand Prompting** – (See Prompting)

**Functional Behavior** – Behavior that has a positive purpose and should be rewarded.
**Functions of Behavior** – The two main functions of behavior are to GET something like attention or access, or to ESCAPE/AVOID something.

**Generalization** – The expansion of a child’s performance of a task or skill beyond the initial conditions that you set for learning it. Generalization can occur across people, places, and materials used for teaching.

**Gestural Prompting** – (See Prompting)

**Granny’s Law** – A technique that can help with situations that may cause behavior problems. Use of “Granny’s Law”: First_____ (difficult thing); then_____ (reward or fun thing) helps the child see a reason and helps with motivation.

**High Functioning Autism (HFA)** – High Functioning Autism is a term often used to describe an individual who meets all the criteria for Autistic Disorder by 36 months of age but who has average cognition and develops language skills to allow for successful functioning. Although the term HFA is frequently used by parents and professionals, it is not a diagnostic category in the DSM-IVR and, therefore, should be used with caution.

**Home Base** – A strategy that helps individuals with Autism regulate their emotions. (AIMS)

**Ignore-Attend-Praise** – Giving a child’s aggressive behavior minimal attention while paying attention to someone else in the area and praising the other person for his positive behavior.

**Incidental Teaching** – (See Student Initiated Teaching)
**Intellectual Disability** (formerly Mental Retardation) – A disability characterized by significant limitations both in intellectual functioning and in adaptive behavior. This disability originates before the age of 18.

**Intensity** – How severe, loud, or strong a behavior is.

**Interruption Reinforcement** – (See Reinforcement)

**Kanner, Leo** – An Austrian psychiatrist and physician known for his work related to Autism. His 1943 paper, “Autistic Disturbances of Affective Contact”, together with the work of Hans Asperger, forms the basis of the modern study of Autism.

**Kinesthetic Learner** – Kinesthetic Learners learn best by moving their bodies, activating their large and small muscles as they learn.

**MRI (Magnetic Resonance Imaging)** – MRI is a diagnostic procedure that uses a combination of a large magnet, radio frequencies, and a computer to produce detailed images of organs and structures within the body. An MRI is often used to examine the organs and soft tissues, to assess blood flow, to detect tumors and diagnose many forms of cancer, to evaluate infections, and to assess injuries to bones and joints. The most consistent MRI finding in Autism is that the brain is enlarged.

**Meltdown** – (See Tantrum)

**Mental Retardation** – (See Intellectual Disability)
Modeling – (See Prompting)

Neurodevelopmental Disorder – An impairment of the growth and development of the brain or central nervous system. Autism Spectrum Disorders (ASD) are considered to be neurodevelopmental in origin.

Neurotypical – A term that is sometimes used to describe individuals who do not have neurodevelopmental disorders.

Noncompliance – Noncompliance is usually due to the child not wanting to learn at that moment. It is a motivational issue – not an error. If this happens, think about how to better motivate your child with reinforcement.

Non-verbal Communication – The communication that takes place outside of the literal spoken words. Non-verbal communication includes gesture, body language, posture, facial expression, eye contact, use of objects, voice quality, emotion, speaking style, and intonation.

Order Specificity – The ordering, categorizing, or arranging of objects or items in a self-determined order.

Over-reaction – Sensory over-reaction is described as a person’s negative reaction to such things as noisy or visually complex environments, tags or seams on their clothing or unexpected touch, or certain tastes or smells.
Paradigm Shift – Changing beliefs or the way that you think about something.

Partial Physical Prompting – (See Prompting)

Partial Task Sequential Teaching – (See Sequential Teaching Format.)

Patterns – It is important to watch for patterns including time of day when gathering data on how often and when a problem behavior is occurring.

Pervasive Developmental Disorder (PDD) – First used in the 1980s to describe a class of disorders that commonly include impairments in social interactions, imaginative activity, verbal and nonverbal communication skills, and a limited number of interests and activities that tend to be repetitive. Five disorders are identified in the DSM-IV under the category of PDD: Autistic Disorder, Rett’s Disorder, Childhood Disintegrative Disorder, Asperger Disorder, and Pervasive Developmental Disorder Not Otherwise Specified (PDD-NOS). Parents may notice symptoms of PDD as early as infancy, and typically onset is prior to 3 years of age. PDD refers to a category of disorders and is not a diagnostic label.

Pervasive Developmental Disorder – Not Otherwise Specified (PDD-NOS) – A disorder listed in the DSM-IV under the class of Pervasive Developmental Disorders. To be diagnosed with PDD-NOS, an individual either does not fully meet the criteria of symptoms clinicians use to diagnose any of the four specific types of PDD and/or does not have the degree of impairment described in any of the other four PDD specific types.
**Picture Exchange Communication System (PECS)** – Teaches the learner to use visual-graphic symbols to communicate with others. *(AIMS)*

**Positional Prompting** – (See Prompting)

**Positron Emission Tomography (PET Scans)** – PET Scans use nuclear medicine imaging to produce 3-dimensional color images of the functional processes within the body.

**Prerequisite Skills** – (See Sub skills)

**Probing** – Assessing where the child is on each step of the skill being taught. You usually probe a skill to see how much help your child needs before you actually begin formal teaching. Probing tells you what prompts are needed and gives you a starting point (or BASELINE) from which to work.

**Prompt Fading** – The process of eliminating the prompt and allowing the natural situation to take the place of having to provide the prompt. Methods of prompt fading include decreasing the intensity of the prompt, graduated guidance, and using a time delay.

**Prompt Hierarchy** -- A list or series of prompts that you will use. Prompting can move from most to least intrusive (used when teaching a skill) or from least intrusive to most (used when assessing a level of confidence).
**Prompting** – Any additional help or assistance that is provided to insure that the child will get the correct response or produce the correct behavior. Prompting is also referred to as controlled guidance. Prompts should be temporary so that the child is able to get to a level of independence; it is important to have a plan to fade the prompts as appropriate for independence.

**Full Physical Assistance/Hand-Over-Hand Prompting** – Guiding the child through the entire behavior to ensure success in every step.

**Gestural Prompting** – Using gestures (like pointing) to “nudge” a child into performing a behavior.

**Graduated Guidance** – Prompting that begins with the least intrusive approach and then moves to full physical prompting.

**Modeling** – Demonstrating what you want the child to do; this requires that the child is able to imitate your actions.

**Partial Physical Prompting** – Providing some physical guidance for the child with minimal assistance and only as needed.

**Positional Prompting** – Placing the needed item closer to your child or in a sequence so that he or she will choose that item.

**Verbal Prompting** – Using your words to tell your child what to do. This is the most common type of prompting, but it is also the most difficult type to fade. Direct Verbal Prompting is when you literally state what you want your child to do (such as, “Turn off the water.”). Indirect Verbal Prompting is when you give a hint with your spoken words but don’t literally state what your expectation is (such as, “What’s next?”).

**Psychiatrist** – A medical doctor specializing in mental health. Psychiatrists can prescribe medication and provide various types of therapy.

**Punishment** – Because behavior challenges are based on skills deficits in children with autism, the use of punishment in teaching makes no sense. Punishment increases frustration, anxiety, and aggression but does not teach skills.
Redirection – A strategy of doing something totally unexpected to distract or change the focus of a child engaged in an unwanted or dangerous behavior.

Reinforcement – The delivery of a reward following an action; a motivating consequence to the child’s learning of new skills.

Continuous Reinforcement – Continuously reinforcing a behavior so that it will be strengthened.

Extinction – When a learned behavior is no longer reinforced, and it eventually fades away.

Fixed Ratio Schedule – A delivery schedule for reinforcement that is determined in advance and is based on the number of steps or times the child does the desired behavior.

Intermittent Reinforcement – The rewarding appears to be random – i.e. your child does not know when the reinforcing will happen but is certain that it will eventually appear. This creates strong effort and MAINTAINS the learned skill.

Variable Ratio Schedule – A delivery schedule of reinforcement that is based on the average number of times that a behavior is shown. For example, you give the reward every 3rd or 4th time, on average, that your child does what you have asked.

Reinforcer Inventory – A list (or menu) of motivating rewards that the child responds to and values.

Reinforcers – Preferred rewards that create eager learners.

Types of Reinforcers – Types of reinforcers include: edibles, social rewards (and sensory-social rewards), activity rewards, tangible rewards (the items that the child wants to hold onto or possess), and token rewards (things that can be traded in for other things – like money, tickets, or points).
**Reinforcer Sampling** – The process of placing possible reinforcers in front of the child and letting him or her choose one so that you know, at that moment in time, which is most motivating to the child. This is often done just prior to teaching a new skill.

**Replacement Skill** – A skill that will take the place of an undesired behavior.

**Rule of 5** – A way of remembering to keep communication simple and clear. With the “Rule of 5”, words are kept to 5 letters or less, and sentences are kept to 5 words or less.

**Satiation** – Too much of a certain reward can lead to not wanting it anymore and can cause low motivation.

**Self Injurious Behavior (SIB)** – A behavior problem which results in the child deliberately injuring himself.

**Self Regulate** – A child’s ability to control his behavior.

**Self Stimulating Behaviors** – (also known as Stimming ) Repetitive body movements (such as rocking, spinning, or hand-flapping) that are thought to stimulate one or more senses.

**Sensory Processing** – Involves the brain’s ability to organize and make sense of different kinds of sensations entering the brain at the same time.
**Sensory Systems** – Parts of the Nervous System responsible for processing sensory information.

**Sequential Teaching Format** – Taking several sub-skills that have been taught and hooking them together to form a sequence of responses that becomes the big skill being taught.

**Partial Task Sequential Teaching** – In this format, a portion of the task is presented and taught separately from the skill or routine and, once mastered, is plugged back into the more complex task or routine.

**Whole Task Sequential Teaching** – In this format, the task or skill is taught in its entire sequence every time it is taught.

**Seizures** – Uncontrolled electrical activity in the brain which may produce a physical convulsion, minor physical signs, thought disturbances, or a combination of symptoms.

**Shaping** – The process of reinforcing or rewarding closer and closer approximations toward the desired goal or behavior.

**Skill Deficit** – Skills that need to be learned or refined.

**Speech Generating Devices (SGD)** – An assistive/augmentative communication system that produces speech when activated by the learner. (AIMS link)

**Stereotyped Behaviors** – Frequent, almost mechanical repetition of the same posture, gesture, movement, or form of speech.
Stimming – (See Self Stimulating Behaviors)

Student Initiated Teaching – Also called Incidental Teaching; teaching and learning occur within natural settings and motivational contexts.

Sub skills – The basic, core readiness skills that need to be taught before teaching the main skills that will be taught. These prerequisite skills always need to be taught first.

Tantrum – An emotional, sometimes violent or prolonged outburst associated with children in emotional distress.

Task Analysis (TA) – A list of steps (or sub skills) for each skill to be taught. A task analysis helps the teacher to be consistent with the teaching and helps identify where some of the difficult steps are for the child.

Temple Grandin – Temple Grandin is a college professor, bestselling author, and worldwide consultant to the livestock industry. She is an individual with autism who is noted for her work in autism advocacy, and she is the subject of an award-winning biographical film, Temple Grandin.

Time Out – Temporarily separating a child from an environment where inappropriate behavior has occurred.

Transition Cue – A verbal or visual cue that lets the child know that a new expectation is going to occur.
**Transition Plan** – A plan for getting a child into and out of a teaching session.

**Transitioning Between Activities** – Individuals with Autism often have difficulty with transitions. This module provides transition strategies with specific examples. (AIMS)

**Trigger** – (See Antecedent)

**Types of Reinforcers** – (See Reinforcers)

**Under-reaction** – Those who experience sensory under-reaction often fail to notice sensory information. They may have low levels of energy and difficulty arousing their sensory systems.

**Variable Ratio Schedule** – (See Reinforcement)

**Verbal Communication** – The spoken words in a communication setting.

**Visual Learner** – Visual learners learn best by seeing information. Information presented in pictures, charts, and diagrams is more easily understood and remembered by visual learners.

**Verbal Prompting** – (See Prompting)
**Visual Schedule** -- Pictures, charts, or lists showing the child the order of activities or events and letting the child know in advance the transitions that will take place.

**Visual Supports** – Many individuals with Autism have strengths as visual learners. Visual supports such as activity schedules, checklists, graphic organizers, manipulatives, pictures and photos, and PECS help with organization, memory, language, social skills, and independence,

“**Visual Supports and Autism Spectrum Disorder**” – This is a free, downloadable brochure available from [Autism Speaks](https://www.autismspeaks.org).

**Whole Task Sequential Teaching** – (See Sequential Teaching Format.)

**Work Systems** – Visually organized space where learners independently practice skills. ([AIMS](https://www.autismspeaks.org))