



COGNITIVE BEHAVIORAL INTERVENTION (CBI) ---EBP Brief Packet---

Components of the EBP Brief Packet...

This evidence-based practice overview on Cognitive Behavioral Intervention includes the following components:

1. **Overview:** A quick summary of salient features of the practice, including what it is, who it can be used with, what skills it has been used with, and settings for instruction.
2. **Evidence-base:** The *CBI Evidence-base* details the NPDC criteria for inclusion as an evidence-based practice and the specific studies that meet the criteria for this practice.
3. **Step-by-Step Guide:** Use the *CBI Step-by-Step Practice Guide* as an outline for how to plan for, use, and monitor CBI. Each step includes a brief description as a helpful reminder while learning the process.
4. **Implementation Checklist:** Use the *CBI Implementation Checklist* to determine if the practice is being implemented as intended.
5. **Data Collection Sheets:** Use the data collection sheets as a method to collect and analyze data to determine if progress is being made for a learner with ASD.
6. **Tip Sheet for Professionals:** Use the *CBI Tip Sheet for Professionals* as a supplemental resource to help provide basic information about the practice to professionals working with the learner with ASD.
7. **Parent Guide:** Use the *CBI Parent Guide* to help parents or family members understand basic information about the practice being used with their child.
8. **Additional Resources:** Use the *Additional Resources* to learn more about the practice.
9. **CEC Standards:** A list of *CEC Standards* that apply specifically to CBI.
10. **Module References:** A list of numerical *References* utilized for the CBI module.

Suggested citation:

Mussey, J., Dawkins, T., & AFIRM Team. (2017). *Cognitive behavioral intervention*. Chapel Hill, NC: National Professional Development Center on Autism Spectrum Disorders, FPG Child Development Center, University of North Carolina. Retrieved from <http://afirm.fpg.unc.edu/cognitive-behavioral-intervention>

This overview
brief will
support your
use of the
evidence-based
practice:
Cognitive
Behavioral
Intervention.

For more
information visit:
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What is CBI?

Learners with ASD often struggle with understanding their emotions, thoughts, behaviors, as well as how they are all connected. Understanding and insight can be an area of difficulty for learners with ASD. Cognitive behavioral interventions can be used to address foundational skills such as social skills, communication, behavior, cognition, coping, and emotional well-being/mental health conditions (e.g., anxiety, depression, anger). In addition, once some of these foundational skills are addressed, effects may also be seen on adaptive behavior skills.

Evidence-base

Cognitive behavioral intervention meets the evidence-based practice criteria set by NPDC with 1 single case design study and 3 group design studies. The practice has been effective for elementary (6-11 years) to high school-age learners (15-22 years) with ASD. Evidence-based practices (EBP) and studies included in the 2014 EBP report detailed how cognitive behavioral intervention can be used effectively to address: social, communication, joint attention, school readiness, play, vocational, and academic outcomes.

How Is CBI Being Used?

Cognitive behavioral interventions can be used by professionals such as teachers, special educators, speech-language pathologists, paraprofessionals, counselors, and psychologists. Training could take place in a school, clinic, or other community-based setting. Parents and family members can also be included in the CBI efforts. Parents and family members also can be invaluable in supporting the learning, generalization, and maintenance of skills by helping their child practice skills in the home and reinforcing the skills they see their child using across environments.

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---Evidence-base for Cognitive Behavioral Intervention---

The National Professional Development Center on ASD has adopted the following criteria to determine if a practice is evidence-based. The EBP Report provides more information about the review process (Wong et al., 2014).

Efficacy must be established through high quality, peer-reviewed research in scientific journals using:

- randomized or quasi-experimental design studies (two high quality experimental or quasi-experimental group design studies),
- single-subject design studies (three different investigators or research groups must have conducted five high quality single subject design studies), or
- combination of evidence [one high quality randomized or quasi-experimental group design study and three high quality single subject design studies conducted by at least three different investigators or research groups (across the group and single subject design studies)].

--OVERVIEW--

Cognitive behavioral intervention teaches learners to examine their own thoughts and emotions, recognize when negative thoughts and emotions are escalating in intensity, and then use strategies to change their thinking and behavior. Cognitive behavioral intervention meets the evidence-based practice criteria with 1 single case design study and 3 group design studies. The practice has been effective with learners in elementary school (6-11 years) to high school learners (15-22 years). Studies included in the 2014 EBP report detailed how cognitive behavior intervention can be used effectively to address: behavior, social, communication, adaptive, mental, and cognitive outcomes.

In the table below, the outcomes identified by the evidence base are shown by age of participants.

| Early Intervention (0-2) | Preschool (3-5) | Elementary (6-11) | Middle (12-14) | High (15-22) |
|--------------------------|-----------------|-------------------|----------------|--------------|
| | | Social | Social | |
| | | Communication | Communication | |
| | | Behavior | Behavior | Behavior |
| | | Cognitive | Cognitive | |
| | | Adaptive | | |
| | | Mental | | |

Early intervention (0-2 years)

No studies

Preschool (3-5 years)

No studies

Elementary (6-11 years)

Drahota, A., Wood, J. J., Sze, K. M., & Van Dyke, M. (2011). Effects of cognitive behavioral therapy on daily living skills in children with high-functioning autism and concurrent anxiety disorders. *Journal of Autism and Developmental Disorders, 41*(3), 257-265. doi: 10.1007/s10803-010-1037-4

*Sofronoff, K., Attwood, T., & Hinton, S. (2005). A randomised controlled trial of a CBT intervention for anxiety in children with Asperger syndrome. *Journal of Child Psychology and Psychiatry, 46*(11), 1152-1160. doi: 10.1111/j.1469-7610.2005.00411.x

*Sofronoff, K., Attwood, T., Hinton, S., & Levin, I. (2007). A randomized controlled trial of a cognitive behavioural intervention for anger management in children diagnosed with Asperger syndrome. *Journal of Autism and Developmental Disorders, 37*(7), 1203-1214. doi: 10.1007/s10803-006-0262-3

Middle (12-14 years)

*Singh, N. N., Lancioni, G. E., Manikam, R., Winton, A. S., Singh, A. N., Singh, J., & Singh, A. D. (2011). A mindfulness-based strategy for self-management of aggressive behavior in adolescents with autism. *Research in Autism Spectrum Disorders, 5*(3), 1153-1158. doi:10.1016/j.rasd.2010.12.012

*Sofronoff, K., Attwood, T., & Hinton, S. (2005). A randomised controlled trial of a CBT intervention for anxiety in children with Asperger syndrome. *Journal of Child Psychology and Psychiatry, 46*(11), 1152-1160. doi: 10.1111/j.1469-7610.2005.00411.x

*Sofronoff, K., Attwood, T., Hinton, S., & Levin, I. (2007). A randomized controlled trial of a cognitive behavioural intervention for anger management in children diagnosed with Asperger syndrome. *Journal of Autism and Developmental Disorders, 37*(7), 1203-1214. doi: 10.1007/s10803-006-0262-3

High (15-22 years)

*Singh, N. N., Lancioni, G. E., Manikam, R., Winton, A. S., Singh, A. N., Singh, J., & Singh, A. D. (2011). A mindfulness-based strategy for self-management of aggressive behavior in adolescents with autism. *Research in Autism Spectrum Disorders, 5*(3), 1153-1158. doi:10.1016/j.rasd.2010.12.012

* Research which included participants in multiple age ranges.



Cognitive Behavioral Intervention (CBI) ---Step-by-Step Guide---

BEFORE YOU START...

Each of the following points is important to address so that you can be sure the selected EBP is likely to address the learning needs of your student.

Have you found out more information about...?

- Establish a goal or outcome that clearly states when the behavior will occur, what the target skill is, and how the team will know when the skill is mastered...
- Identify evidence-based practices...

If the answer to any of these is “no,” review the process of how to select an EBP.

This practice guide outlines how to plan for, use, and monitor the practice of **Cognitive Behavioral Intervention**.

Keep in mind that **Cognitive Behavioral Intervention** can be used to decrease inappropriate behaviors and increase appropriate behaviors and skills.

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Now you are ready to start...

Step 1: Planning

The planning step explains initial steps and considerations involved when using CBI as an intervention for a learner.

1.1 Determine if learner has prerequisite skills

Due to the cognitive and linguistic skills needed to engage in CBI, learners with ASD with whom CBI techniques have often been utilized have typically had intact intellectual and academic skills that are largely within the average range of functioning. Often, necessary skills may include cognitive developmental level above approximately 6 years, expressive and receptive language skills above approximately 6 years, reading level consistent with the level of written materials used, and if doing CBI in a group, being group ready (ability to learn information in a group format, demonstrate appropriate behavior in a group, etc.).

1.2 Conduct a functional behavior assessment

A Functional Behavior Assessment (FBA) should be conducted to aid in identifying the most likely function of the interfering behavior.

Note: Check out the module on FBA for more information about this specific process.



Use the FBA to gather information on an interfering behavior.

1.3 Conduct an assessment of needs and skills

To address the behavioral piece of CBI, conducting a functional behavior assessment can often be helpful to gather information regarding the concerning or interfering behavior including the antecedents and consequences of that behavior. To address the cognitive piece of CBI, assessing the learner's learning style from a perspective of ASD can often be helpful in giving additional information as to why a behavior is occurring and the learner's cognitive strengths and weaknesses in order to help develop the intervention strategies to be used or modify them as necessary.



Use the Needs & Skills Assessment Sheet to gather data about a learner's needs and skills.



Use the CBI Planning Sheet as a companion for completing the planning step.

1.4 Choose or create a CBI intervention

There are a variety of cognitive behavioral intervention models and evidence-based treatment programs, including those that have been manualized or published, for children, adolescents, and adults to address a variety of issues. These may need to be individualized to the specific learner with ASD you are working with.

Step 1: Planning (continued)

1.5 Obtain training and/or supervision for chosen CBI intervention

An understanding of the fundamental tenets of CBI and its application in general is critical to accurate implementation of CBI strategies and techniques. Thus, this understanding is essential before using CBI in practice. Some states, professional organizations, or licensing boards may have guidelines and regulations on training requirements and practice considerations. A professional's training, background, and field of study may influence how much time is required to learn these skills.

1.6 Develop a session plan

a) Determine delivery format

CBI can be carried out in a 1-on-1 or group format, so instructors/interventionists must decide whether to individually train one learner or to create a group for instruction. The decision will likely be based on various factors, including the skills and developmental level of the learner with ASD, the availability of the trainer, availability of space, and scheduling constraints.

Select peer(s) for participation:

If a group format is selected, the next decision involves what type of learners will be included in the group.

Consider:

- Will all learners be in the same grade level or will participants be chosen across several grade levels?
- Will all learners have ASD or will children or adolescents with a variety of needs be included?
- Will peer models be included in the group?

Prepare instructors and adults to assist with training:

Consider who will provide the intervention. Someone trained in CBI techniques is often the main provider preparing and leading the intervention. In a school setting, professionals may be included, such as general education teachers, special education teachers, guidance counselors, speech language pathologists, school psychologists, paraprofessionals, or even parent(s) if family involvement is part of the intervention. Community-based providers may include psychologists, social workers, or therapists. Make sure all adults who will be leaders are familiar with the principles of CBI as well as specific lesson plans.



Use the Session Planning Sheet as a companion for completing the planning for sessions.

b) Determine meeting place and schedule

A meeting time and place for the CBI needs to be selected that is convenient for both the learner(s) with ASD, other members, and the leader. The length of a session can vary greatly from 10 minutes to 90 minutes. Individual sessions are often 45-60 minutes while group sessions are often closer to 90 minutes.

Step 1: Planning (continued)

1.6 Develop a session plan (continued)

c) Determine format structure

To ensure the most effective use of time, CBI may involve a common format for each session, depending on the goal and the type of session planned. At a minimum, a session often includes:

- a check in,
- review of that session's agenda,
- review current status and events during the time since the last session,
- review of any homework given,
- focus on the main agenda items/session content,
- assigning new homework (based on the main session content for continuity between sessions), and
- review of the session.



Use the Session Planning Sheet as a companion for completing the planning for sessions.



Use the Session Plan to guide a CBI session.

d) Design individualized program

Select content of lessons:

Team members should consider the needs of the learner(s) with ASD and group members (if a group format was selected) to determine what will be taught in session. Keep in mind that large topics of instruction might include underlying components to the skill that will need to be addressed as well.

Select CBI techniques:

CBI techniques and common adaptations based on the learner styles of individuals with ASD include psychoeducation, affect recognition, cognitive restructuring, graded exposure, practice of strategies.

Practice of strategies:

Modeling, role-play, use of strategies and skills in real situations can be helpful in developing, reinforcing, and generalization of skills.

Other adaptations:

There are a variety of other adaptations for the learning style of individuals with ASD, including schedules, chill outs/reason, incorporating interests to increase motivation, and visual countdowns.

1.7 Prepare materials

Before you begin CBI, you will need to prepare the materials. If you have selected any curriculum to support instruction, you will need to obtain those materials. Whether you have planned your own lessons or are using already created lessons, you will need to look ahead to see what materials are involved in the lessons and make sure you have those materials ready. Copies may need to be made, pictures collected, books checked out, etc.

Step 1: Planning (continued)

1.8 Determine reinforcers

When teaching a learner new skills, it is important to reinforce use of those skills. This may be a part of a systematic reinforcement system utilized during the course of the intervention. This could include stickers, tokens, points, or some other symbolic system; other options may include tangible items, edibles, or access to special items or activities.

Step 2: Using

This section describes following a developed plan when using CBI, reinforcing learner's use of skills, and maintaining communication with team members.

2.1 Implement the intervention as planned

Refer back to the plan for instruction you made during the planning step. To plan for each session, use a session guide. The session guide can include information about the topic, skill addressed, content, structure, behavior management, instructional strategies, and materials needed.

 *Use the Session Guide to guide a CBI session.*

2.2 Support generalization of target skills

Reinforcement of skills begins in the CBI session, but it should not end there. It is important to plan to support learners in generalizing those skills to other settings, people, and activities.

 *Use the Session Homework - Example as a guide for assigning CBI homework.*

Step 3: Monitoring

The following section describe how CBI can be monitored and how to adjust your plan based on the data.

3.1 Collect data on learner use of target skill

Team members should collect data on target skills and behaviors. A variety of formats can be used to collect data depending on the behaviors or skills targeted for instruction and the features of the training.



Use the Event Recording Data Collection Sheet to collect learner use of CBI skill.

3.2 Determine next steps

Collecting data will help team members determine if a learner is making progress toward the target skill/behavior. If a learner is making progress based upon data collected, team members should continue to use CBI and consider using it to address additional goals.

If the learner with ASD is not showing progress, ask yourself the following questions:

- Is the target skill or behavior well defined?
- Is the target skill or behavior measurable and observable?
- Has the correct target behavior been identified?
- Are there skills that need to be taught before addressing the target behavior (e.g., expressive social-communication goal, teach a new coping strategy)?
- Do the invention strategies match the student's learning style and developmental level?
- Has enough time been devoted to using CBI?
- Was CBI used with fidelity? (Use the CBI Implementation Checklist to determine fidelity.)
- Are the visuals and activities appropriate to the student's developmental level and level of receptive language?
- Is the skill or target behavior too difficult for the learner or not developmentally appropriate for the learner based on their developmental level?
- Is a consistent format used for each session?
- Are instructional strategies being used consistently?
- Are reinforcers used that are motivating to the learner?
- Was the reinforcer applied with fidelity?

If these issues have been addressed and the learner with ASD continues not to show progress, consider selecting a different evidence-based practice to use with the learner with ASD or consider completing a problem-solving process to modify current strategies.

Cognitive Behavioral Intervention (CBI) ---Implementation Checklist---

Before you start:

Have you...

- Identified the behavior?
- Collected baseline data through direct observation?
- Established a goal or outcome that clearly states **when** the behavior will occur, **what** the target skill is, and **how** the team will know when the skill is mastered?

If the answer to any of these is "no", refer to the "Selecting EBPs" section on the website.

| | Observation | 1 | 2 | 3 | 4 |
|--|---------------------|---|---|---|---|
| | Date | | | | |
| | Observer's Initials | | | | |
| Step 1: Planning | | | | | |
| 1.1 Determine if learner has prerequisite skills | | | | | |
| 1.2 Conduct a functional behavior assessment | | | | | |
| 1.3 Conduct an assessment of needs and skills | | | | | |
| 1.4 Choose or create a CBI intervention | | | | | |
| 1.5 Obtain training and/or supervision for chosen CBI intervention | | | | | |
| 1.6 Develop a session plan: | | | | | |
| a) Determine delivery format | | | | | |
| b) Determine meeting place and schedule | | | | | |
| c) Determine format structure | | | | | |
| d) Design individualized program | | | | | |
| 1.7 Prepare materials | | | | | |
| 1.8 Determine reinforcers | | | | | |
| Step 2: Using | | | | | |
| 2.1 Implement CBI intervention as planned | | | | | |
| 2.2 Support generalization of target skills | | | | | |
| Step 3: Monitoring | | | | | |
| 3.1 Collect data on learner use of target skill | | | | | |
| 3.2 Determine next steps | | | | | |



Autism Focused Intervention Resources & Modules

---Functional Behavior Assessment---

Learner's Name: _____ Date/Time: _____

Observer(s): _____

Interfering Behavior: _____

A-B-C Data Chart:

In the table below, record your observations

| | Setting | Antecedent | Behavior | Consequence |
|----------------|---------|------------|----------|-------------|
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |
| Date: Time: | | | | |

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Autism Focused Intervention
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---Needs & Skills Assessment---

Learner's Name: _____ Date/Time: _____

Observer(s)/Team Members: _____

Target Behavior(s): _____

Review Records (IEP, assessments, rating skills, and/or other):

Notes: _____

Interview Team Members (parent, providers, and/or teacher(s)):

Notes: _____

Interview/Observe Learner:

| Date | Observer Initials | Notes |
|------|-------------------|-------|
| | | |
| | | |
| | | |

Summarize Learner Strengths:

Summarize Learner Needs:

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information, visit:**
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Autism Focused Intervention Resources & Modules

---CBI Planning Worksheet---

Learner's Name: _____ Date/Time: _____

Observer(s)/Team Members: _____

Target Behavior(s): _____

Determine if Learner Has Prerequisite Skills:

- | | |
|--|--|
| <input type="checkbox"/> Attention | <input type="checkbox"/> Recognition of emotions in self |
| <input type="checkbox"/> Verbal | <input type="checkbox"/> Perspective-Taking |
| <input type="checkbox"/> Self-reflection | <input type="checkbox"/> Memory |
| <input type="checkbox"/> Other: _____ | |

Conduct a Functional Behavior Assessment:

If a challenging behavior interferes with the child's ability to learn, than a functional behavior assessment (FBA) is needed.

Conduct an Assessment of Needs and Skills:

- Review of records and previous assessments
- Interviews with parents, current or recent providers, or teacher(s)
- Talking with the learner
- Observations
- Use of formal and/or informal assessment tools
- Completion of rating scales

Determine Overall Goal for CBI: _____

Develop Session Plan for CBI Program:

See the [Session Planning Worksheet](#) to develop a [Session Plan](#) or [Session Guide](#) for CBI.

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information, visit:**
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Autism Focused Intervention Resources & Modules

---CBI Session Guide---

Learner's Name: _____

Date/Time: _____

Teacher(s): _____

Setting: _____

Format: Individual Group

| Item | Training plan | Completion status | Changes/Notes |
|----------------------------------|---------------|--------------------------|---------------|
| SESSION TOPIC | | <input type="checkbox"/> | |
| CONTENT/ SKILLS TO DISCUSS | | <input type="checkbox"/> | |
| BEHAVIOR MANAGEMENT | | <input type="checkbox"/> | |
| INSTRUCTIONAL STRATEGIES | | <input type="checkbox"/> | |
| MATERIALS NEEDED | | <input type="checkbox"/> | |

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Autism Focused Intervention
Resources & Modules

---CBI Session Planning Worksheet---

Learner's Name: _____ Date/Time: _____

Teacher(s): _____

Target Behavior(s): _____

Select Group or Individual Training:

- Group Individual

If selecting Group training:

Grade level(s) included: _____

Needs of included student: _____

Include peer models: Yes No

Identify Evidence-Based Practices that will be used with CBI:

- | | |
|---|---|
| <input type="checkbox"/> Modeling | <input type="checkbox"/> Video Modeling |
| <input type="checkbox"/> Prompting | <input type="checkbox"/> Reinforcement (positive) |
| <input type="checkbox"/> Visual Supports (visual cues) | <input type="checkbox"/> Social Narratives |
| <input type="checkbox"/> Peer-mediated Intervention & Instruction (practicing with trained peers) | |
| <input type="checkbox"/> Parent-implemented Intervention (inclusion/instruction to parents) | |

Identify Additional Instructional Strategies:

- | | |
|--|---|
| <input type="checkbox"/> Psychoeducation | <input type="checkbox"/> Direct instruction of skills |
| <input type="checkbox"/> Cognitive restructuring | <input type="checkbox"/> Teaching underlying concepts |
| <input type="checkbox"/> Role-play | <input type="checkbox"/> Performance feedback |
| <input type="checkbox"/> Facilitated practice | <input type="checkbox"/> Generalization |

Determine Setting:

Determine Time and Frequency Schedule:

Determine Length of Session:

Select Reinforcers (if applicable):

| Questions to Consider | List Potential Reinforcers | Age Appropriate? |
|--|----------------------------|------------------|
| What natural reinforcers could be used? | | |
| What activities, objects, and foods does the learner select independently? | | |
| What phrases or gestures seem to produce a pleasant response from learner with ASD? | | |
| What does the learner say s/he would like to work for? (if appropriate) | | |
| What reinforcers were identified by parents or team members as being successful in the past? | | |
| What items did the learner select as part of the reinforcer sampling? | | |

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Autism Focused Intervention Resources & Modules

---CBI Session Guide---

Learner's Name: _____

Date/Time: _____

Teacher(s): _____

Setting: _____

Format: Individual Group

| Item | Training plan | Completion status | Changes/Notes |
|----------------------------------|---------------|--------------------------|---------------|
| SESSION TOPIC | | <input type="checkbox"/> | |
| CONTENT/ SKILLS TO DISCUSS | | <input type="checkbox"/> | |
| BEHAVIOR MANAGEMENT | | <input type="checkbox"/> | |
| INSTRUCTIONAL STRATEGIES | | <input type="checkbox"/> | |
| MATERIALS NEEDED | | <input type="checkbox"/> | |

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Autism Focused Intervention Resources & Modules

---CBI Session Guide---

Learner's Name: Lara

Date/Time: 9/7; 9/14

Teacher(s): _____

Setting: Resource

Format: Individual Group

| Item | Training plan | Completion status | Changes/Notes |
|----------------------------------|---|--------------------------|---|
| SESSION TOPIC | <i>Building coping skills</i> | <input type="checkbox"/> | <i>Began work</i> |
| CONTENT/ SKILLS TO DISCUSS | <i>Assessed coping skills currently being used, selected additional coping skills of interest to try Worksheets with frequently used coping skills with option to write in additional skills Introduced concept of coping skills, provided worksheet with list of frequently used coping skills, practice strategies coping skills in session, developed list of coping skills to practice during the week for homework</i> | <input type="checkbox"/> | <i>Continue working on identifying additional strategies to include in coping toolbox Need to continue going through possible coping strategies as did not get through all of them and start preparing those selected to include in "coping toolbox"</i> |
| BEHAVIOR MANAGEMENT | <i>Use of visual schedule to show progress in session</i> | <input type="checkbox"/> | |
| INSTRUCTIONAL STRATEGIES | <i>Direct instruction, modeling, visual supports</i> | <input type="checkbox"/> | |
| MATERIALS NEEDED | <i>Worksheets, stress balls, pencil</i> | <input type="checkbox"/> | |

For more information, visit:
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Autism Focused Intervention
Resources & Modules

---Session Homework: Coping Strategies---

Learner's Name: _____ Date/Time: _____

Target Behavior(s): _____

Coping Strategies:

1. Take a deep breath.
2. Count backwards from 10.
3. Tell myself, "I can show myself how smart I am by writing down the answer."
4. Tell myself, "It's ok to make mistakes because it helps the class learn."
5. Remind myself that it's the teacher's job to correct other student's mistakes and help them learn.

When did I use each strategy?

| Date | 1 | 2 | 3 | 4 | 5 |
|-------|---|---|---|---|---|
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| | | | | | |
| Total | | | | | |

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Autism Focused Intervention Resources & Modules

---Event Recording Data Collection---

Learner's Name: _____ Date/Time: _____

Observer(s): _____

Target Behavior(s): _____

Event Recording:

Use event recording to monitor frequency of target skill/behavior.

| Date | Target Behavior | Coping Skill Used | Learner's Response |
|------|-----------------|-------------------|--------------------|
| | | | |
| | | | |
| | | | |
| | | | |
| | | | |

Anecdotal Notes:

| Date | Observer Initials | Target Skill/Behavior, Comments, and Plans for Next Steps |
|------|-------------------|---|
| | | |
| | | |
| | | |

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Cognitive Behavioral Intervention (CBI) ---Professional's Guide---

Cognitive Behavioral Intervention

CBI...

- Is an evidence-based practice for children and youth with autism spectrum disorder (ASD) from 6 to 22 years old.
- Is based on principle that thinking controls external behavior.
- Teach learners new skills and new ways of thinking that can lead to changes in their behavior and actions.



Why Use?

- CBI found to be effective in improving many cognitive and behavioral skills (social functioning, coping skills, and emotional well-being).
- CBI can be used to teach new cognitive and/or behavioral skills that were never learned, teach compensatory strategies for cognitive deficits that cannot be changed and/or teach strategies to increase coping and/or decrease mental health symptoms in order to increase emotional well-being.

Outcomes

- The evidence – base for CBI supports the use of this practice to address the outcomes below:

| Early Intervention (0-2) | Preschool (3-5) | Elementary (6-11) | Middle (12-14) | High (15-22) |
|--------------------------|-----------------|-------------------|----------------|--------------|
| | | Social | Social | |
| | | Communication | Communication | |
| | | Behavior | Behavior | Behavior |
| | | Cognitive | Cognitive | |
| | | Adaptive | | |
| | | Mental | | |

TIPS:

- Be sure the learner has the needed prerequisite cognitive, expressive, and receptive skills needed to participate in CBI.
- Conduct a functional behavior assessment to gather information regarding the interfering behavior.
- Choose or create a CBI intervention that incorporates cognitive behavioral strategies specific to the learning characteristics of the learner.



Cognitive Behavioral Intervention (CBI) ---Professional's Guide---

STEPS FOR IMPLEMENTING

1. Plan

- Determine if learner has prerequisite skills
- Conduct a functional behavior assessment
- Conduct an assessment of needs and skills
- Choose or create a CBI intervention
- Obtain training and/or supervision for chosen CBI intervention
- Develop a session plan
- Prepare materials
- Determine reinforcers

2. Use

- Implement CBI intervention as planned
- Support generalization of target skills

3. Monitor

- Collect data on learner use of target skill
- Determine next steps

CBI

This tip sheet was designed as a supplemental resource to help provide basic information about the practice.

For more information, visit:
www.afirm.fpg.unc.edu





Cognitive Behavioral Intervention (CBI) ---Parent's Guide---

This introduction provides basic information about cognitive behavioral Intervention.

What is CBI?

- CBI is an evidence-based practice for child and youth with autism spectrum disorder (ASD) from 6 to 22 years old.
- CBI teaches learners to examine their own thoughts and emotions, recognize when negative thoughts and emotions are escalating in intensity, and then use strategies to change their thinking and behavior.

Why use CBI with my child?

- Learners with ASD often struggle with understanding their emotions, thoughts, and behaviors.
- CBI has been found to be effective in improving many cognitive and behavioral skills for learners with ASD.
- Skills addressed by CBI can include:
 - Obsessive and repetitive thoughts and behaviors
 - Irrational thoughts and fears
 - Social anxiety
 - Depressive symptoms
 - Anger

What activities can I do at home?

- Before your child begins CBI, provide information to your child's teacher or practitioner about your child's learning style. This information will be helpful in developing intervention strategies.
- Talk with your child's teacher or provider about how you can be involved in the intervention.
- Ask for strategies you can use at home to increase your child's ability to use skills/strategies outside of sessions. Praise or reward your child when s/he uses a strategy at home.

This parent introduction to **Cognitive Behavioral Intervention** was designed as a supplemental resource to help answer basic questions about this practice.

To find out more about how **CBI** is used with your child, speak with:

For more information visit:
www.afirm.fpg.unc.edu



Autism Focused Intervention Resources & Modules

Check out these resources to support your use of type Cognitive Behavioral Intervention.

For more information visit:
www.afirm.fpg.unc.edu

---Additional Resources---

Articles:

- Carrigan, N., & Allez, K. (2016; 2017;). Cognitive behaviour therapy for post-traumatic stress disorder in a person with an autism spectrum condition and intellectual disability: A case study. *Journal of Applied Research in Intellectual Disabilities*, 30(2), 326-335. doi:10.1111/jar.12243
- Koning, C., Magill-Evans, J., Volden, J., & Dick, B. (2013). Efficacy of cognitive behavior therapy-based social skills intervention for school-aged boys with autism spectrum disorders. *Research in Autism Spectrum Disorders*, 7(10), 1282-1290. doi:10.1016/j.rasd.2011.07.011
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- Scattone, D., & Mong, M. (2013). Cognitive behavior therapy in the treatment of anxiety for adolescents and adults with autism spectrum disorders. *Psychology in the Schools*, 50(9), 923-935. doi:10.1002/pits.21717
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- Vause, T., Neil, N., Jaksic, H., Jackiewicz, G., & Feldman, M. (2015). Preliminary randomized trial of function-based cognitive-behavioral therapy to treat obsessive compulsive behavior in children with autism spectrum disorder. *Focus on Autism and Other Developmental Disabilities*, doi:10.1177/1088357615588517

Apps:



KidConnect-Connecting Behavior to Emotions by The Connections Model, LLC (\$11.99 + in-app purchases from \$17.99)

Books:

Gaus, V. (2007). *Cognitive-behavioral therapy for adult Asperger syndrome* (Guides to individualized evidence based treatment series). The Guilford Press.

Websites:

Anderson, C. (2012). *Cognitive Behavioral Therapy and Autism Spectrum Disorders*. *Ian Community*. Retrieved on February 15, 2017 from: https://iancommunity.org/cs/simons_simplex_community/cognitive_behavioral_therapy

Chasson, G. (2011). *Parent Tips: Cognitive-Behavioral Therapy*. *Pathfinders for Autism*. Retrieved on February 15, 2017 from: <http://www.pathfindersforautism.org/articles/view/parent-tips-cognitive-behavioral-therapy>

Creed, T. (2015). *An Introduction to CBT for people with an Autism Spectrum Disorder*. *Beck Institute*. Retrieved on February 15, 2017 from: <https://www.beckinstitute.org/an-introduction-to-cbt-for-people-with-an-autism-spectrum-disorder/>

Gilmore, H. (2016). *Cognitive Behavioral Interventions for Children with Autism Spectrum Disorder (ASD)*. *Psych Central*. Retrieved on February 15, 2017, from <https://pro.psychcentral.com/child-therapist/2016/01/cognitive-behavioral-interventions-for-children-with-autism-spectrum-disorder-asd/>



Autism Focused Intervention
Resources & Modules

Cognitive Behavior Intervention CEC Standards

The CEC Standards that apply to all 27 evidence-based practices can be found on our website at: <http://afirm.fpg.unc.edu/learn-afirm>

Below are CEC Standards that apply specifically to Cognitive Behavior Intervention (CBI) module.

| Standard | Description |
|---|---|
| Initial Preparation Standard 1: Learning Development and Individual Learning Differences¹ | |
| DDA1 K9 | Impact of self-regulation on learning and behavior |
| Initial Preparation Standard 2: Learning Environments | |
| ISCI 2 K5 | Social skills needed for educational and other environments |
| Initial Preparation Standard 4: Assessment | |
| ISCI 4 S1 | Gather relevant background information |
| DDA84 S3 | Conduct functional behavior assessments that lead to development of behavior support plans |
| Initial Preparation Standard 5: Instructional Planning & Strategies | |
| ISCI 5 S8 | Prepare lesson plans |
| ISCI 5 S17 | Use procedures to increase the individual's self-awareness, self-management, self-control, self-reliance, and self-esteem |
| DDA5 S11 | Provide instruction in self-regulation |
| Initial Preparation Standard 7: Collaboration | |
| ISCI 7 S2 | Collaborate with families and others in assessment of individuals with exceptionalities |

| Standard | Description |
|--|--|
| Advanced Preparation Standard 1: Assessment | |
| SEDAS1.S8 | Conduct functional behavioral assessments (FBA) to determine what initiates and maintains a challenging/interfering behavior |
| SEDAS1.S10 | Articulate awareness of and the impact of mental health disorders on individuals with developmental disabilities/autism spectrum disorders in collaborating with family and colleagues |
| Advanced Preparation Standard 3: Programs, Services, and Outcomes | |
| SEDAS3.S11 | Identify evidence based strategies to increase self-awareness, and ability to self-regulate |

**For more
information, visit:**
www.afirm.fpg.unc.edu

---Module References---

1. Gaus, V. L. (2007). *Cognitive-behavioral therapy for adult Asperger syndrome*. New York: Guilford Press.
2. Drahota, A., Wood, J. J., Sze, K. M., & Van Dyke, M. (2011). Effects of Cognitive Behavioral Therapy on daily living skills in children with high-functioning autism and concurrent anxiety disorders. *Journal of Autism and Developmental Disorders*, 41(3), 257–265. <http://doi.org/10.1007/s10803-010-1037-4>
3. Sofronoff, K., Attwood, T. and Hinton, S. (2005), A randomised controlled trial of a CBT intervention for anxiety in children with Asperger syndrome. *Journal of Child Psychology and Psychiatry*, 46: 1152–1160. doi:10.1111/j.1469-7610.2005.00411.x
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5. Wong, C., Odom, S. L., Hume, K. Cox, A. W., Fettig, A., Kucharczyk, S., Schultz, T. R. (2014). Evidence-based practices for children, youth, and young adults with autism spectrum disorder. Chapel Hill: The University of North Carolina, Frank Porter Graham Child Development Institute, Autism Evidence-Based Practice Review Group. <http://autismpdc.fpg.unc.edu/sites/autismpdc.fpg.unc.edu/files/imce/documents/2014-EBP-Report.pdf>